

2.—THAT THE SYSTEM OF DISTRIBUTION OF CASUALTIES FROM THE FRONT TO IMPERIAL HOSPITALS IN ENGLAND, SCOTLAND, WALES AND IRELAND IS EXTREMELY UNSATISFACTORY.

At present a Canadian casualty arriving from the front is sent indiscriminately to a hospital in England, Scotland, Wales or Ireland. On August 16th, 1916, we had in Canadian Primary and Special Hospitals 118 of our sick and wounded officers, while in British Hospitals we had 152. There were only 1,612 overseas Canadian patients in Canadian Primary Hospitals, whereas there were 5,135 Canadians in British Hospitals. The remainder, 1,649, in our Primary Hospitals were local cases. These 5,135 Canadian patients were in 100 British Hospitals scattered over a wide area in England, Wales, Scotland, and Ireland.

The appended map will show the location of these hospitals, together with the number of Canadian patients in each. A glance at it will indicate the absolute impossibility of inspecting these various hospitals unless we had an army of inspectors, and also the great expense which has to be borne by us, of transporting these patients to these hospitals from the seaboard and returning them again to our Convalescent Hospitals before they can be ultimately discharged to their respective units, or sent home as unfit for military duty.

The Director of Supply and Transport has given a carefully prepared estimate of the cost of transferring these patients from Shorncliffe to Imperial hospitals and back again to our Convalescent Hospitals at Epsom. The total cost is £3,909 8s. 2½d., or \$18,999.78; the average cost per patient being 15s. If we took care of our patients in the Shorncliffe area by the concentration of hospitals there, the cost of transporting them from the ship to the hospital, and ultimately to the Convalescent Hospital at Epsom would be 5s. 5d., that is to say, we would save 9s. 5d. per patient, a total of £2,330 4s. (\$11,348.35) on these 5,135 patients.

In the brief time at our disposal for the purposes of this report it has been impossible to get anyone to cover satisfactorily the Imperial Hospitals. We have had an inspection made of a certain number of them, and the information obtained indicates that the treatment received has not always been as satisfactory as it might be, and also that nobody seems interested in the discharge of the patients when they are fit to be sent to a Convalescent Hospital. Consequently a number of cases have been retained for an unnecessarily long time in these British Hospitals.

Corroboration of this statement is furnished by the following report: