

THE PROBLEMS OF SASKATCHEWAN AND PUBLIC HEALTH PROBLEMS.

"No by-law providing for the raising of money for the construction, operation or extension of any system of waterworks or common sewer or system of sewerage or sewage disposal shall be submitted to the votes of the electors by the council of any municipality until the consent of the commissioner, to the proposed construction, operation or extension has been first obtained under the provisions of Section 21 or 22 hereof, as the case may be; and the preamble to every such by-law shall declare that such consent has been duly obtained. No debentures shall be valid if issued under any by-law passed in contravention of the provisions of this Section."

The above forms Clause 23 of a new public health act recently enacted in the Province of Saskatchewan.

No other public act in the Dominion of Canada contains any such provision as the above. The clause forms an entirely new feature in sanitary legislation. Any municipality whatsoever, is entirely barred from raising a single cent for sanitary engineering works, until such proposals have been properly matured, submitted, and passed by a central government bureau of public health.

The Ontario Provincial Health Act has over and over again been referred to as a dead act, as far as any control exists over sanitary works. The act calls for the submission of plans, but such are often submitted long after the work is completed, when by some accident the Provincial Board of Health learns that they have been installed. For instance, the case of Lindsay Ozone Plant. Here the first knowledge the Ontario Health department had of the existence of any such plant, was in the request of Dr. Amyot to test the work on completion. This led to no end of confusion and dissatisfaction, and meetings between the parties concerned.

As a matter of fact any control which the ordinary Provincial Boards of Health have over sanitary engineering proposals, depends entirely upon the willingness and good nature of the engineer engaged in the work or of the municipality in voluntarily consulting the boards.

Saskatchewan has, however, taken the bit in its teeth, and has enacted such laws, that will make it impossible to spend public money in half-baked water and sewer schemes. The principal of central authority control is gradually

The principal of central authority densities of the prinbeing admitted in this country. The admission of the principal will tend to much saving of public funds in checking the propagation of badly thought out schemes, or schemes boosted and forced upon a community by aldermen who are more willing to listen to the exaggerated talk of patent vendor than to the duly qualified engineer.

The Saskatchewan Public Health Act.

This act essentially differs from most of our provincial council, person or body corporate whether incorporated by special or private Act of Parliament or otherwise howsoever public health acts, inasmuch as instead of creating a pro-

vincial board of health, it creates a bureau of public health, with a health commissioner directly responsible to the government. So far it is based on the principal of the New York State Board of Health.

The ordinary layman might find it difficult to discriminate between a bureau and a board; but there is a difference. Let us take an example. In Ontario we have a Provincial Board of Health consisting of several medical gentlemen with a permanent secretary, also a medical man. These gentlemen meet quarterly, judge any plans casually sent to them for examination, pass certain motions of instruction to the secretary and generally pretend to administrate the health affairs of the Province of Ontario. A bureau on the other hand is a government department, consisting of a permanent active staff of experts with a commissioner at the head responsible to no elected board but to the government direct.

If you ask anyone connected with the administration of health matters, he will tell you in a moment that a bureau is much more efficient than a board, this is the essential difference indeed.

Constitution of Bureau.

The Commissioner of Public Health is the head of the Bureau of public health; he has a department of sanitary engineers, sanitary inspectors and can call for all extra assistance required. The commissioner administers health matters with the aid of expert advice, direct to the people without reference to any board. In case of epidemic he can make and issue regulations of a temporary character, and take action of a peremptory character without waiting for the working of any cumbersome machinery.

The Act.

The public health act consists of :

1st. A number of matters covering almost every phase of the public health questions, upon which the commissioner with the approval of the Lieutenant-Governor-in-Council may, when occasion arises, issue regulations and orders.

2nd. It consists in direct enactments affecting questions relating to health, and especially to water supply, sewerage and sewage disposal. Clauses 21 and 22 we give in full as being especially interesting to the sanitary engineer. A perusal of the above clauses, will make it plain, that the Government of Saskatchewan through the Commissioner of Health intend to maintain as far as possible pure water supply and insist on efficient disposal of sewage effluents.

Clause 21.—"Water Supply."

21. When the establishment of a system or the extension of any existing system of water works for the purpose of providing a water supply for public consumption is contemplated by the municipal council of any municipality or by any person or body corporate it shall be the duty of such municipal council, person or body corporate whether incorporated by special or private Act of Parliament or otherwise howsoever