

Hospitals have to be maintained. It is a comparatively easy matter to build a hospital. The maintenance is a horse of another color. Appeals have to be made to the public. The Provincial Governments in Canada do their share, and pay a per head per day rate, and so do some of the corporations that govern cities, but the deficits—and deficits are inevitable—have to be made up by the layman. There are various phases of the hospital problem that appeal directly to laymen, and it is a pleasure to see the faithful work of business men who, even if they are a bit short in the line of this world's goods, are long in the line of giving attention to hospital work.

The management of hospitals, and how to make such management effective, is a problem that has in a way yet to be solved. My information and my experience point in the direction of small boards of management. Given a first-class superintendent, man or woman, to look after the work in the surgical and medical sides; a lady superintendent for the training school for nurses—if there be one—and a manager to cover the business end—all these under a small board of four or five trustees who are interested in the work, should suffice for the management of any hospital on this continent.

Some people think that the business end of a hospital's work should be managed by a business man who is not a medical man. and I share this opinion; but I am at the same time bound to admit that I have the pleasure of knowing quite a number of medical men who manage both the medical and the business end in hospitals in the United States and Britain, and their work in management cannot be excelled. At the same time one can point to any number of cases where hospitals have suffered materially from the combination.

Hospitals with large boards of management, made up of representatives of municipalities and institutions either directly or indirectly affiliated in the hospital's work, do not seem to pursue the even tenor of the way that should be followed by organizations of that kind. The composition of boards of management is open to criticism. Citizens are appointed who have little or no interest in hospital work. They put in an appearance during the primal stages of their careers on the board, after which their interest wanes, and they are never in evidence unless some friend wants a position, and then they are sure to be on hand to cast their votes.

The fact is that they obtain positions on the board because they are prominent citizens, prominent, perhaps, because they have more figures at the balance of their bank account than or-