

During the past two or three years the struggle for hospital beds has been extreme. The population has steadily increased with no increase in the number of beds. The domestic situation has become so difficult that patients have to be kept in hospital for longer periods of time than should be necessary and there is a great lack of suitable convalescent homes to which they might be transferred and where they could be looked after more advantageously and economically than in active treatment hospitals.

Extension of hospital accommodation must devolve to a much greater degree upon municipal authorities and those of the State.

Where could a body of men be found to-day, and under present financial conditions, to constitute themselves into a hospital board and build a public hospital on voluntary subscriptions, with some municipal aid, or even to build and to carry on a private hospital? And where could voluntary subscriptions be secured these days when the burden from taxation and the cost of living has become so grave?

The problem is indeed no longer one for solution by small groups of philanthropic men or women. It is for the municipalities with more adequate governmental assistance to see to it that the situation is immediately and consistently met.

The City of Toronto could very well afford to organize a chain of hospitals supplying the needs of the centre, the North, the East, and the West, with central control vested in its department of health, and in the general interest of the people should provide suitable accommodation for paying patients as well as for those who are a charge upon the State. It is illogical to provide only for the latter when so much expense in connection with their care has to be provided for by general taxation. Besides it is a great reflection on such a city as Toronto to find that during most months of the year its hospitals are so filled that many who become ill have to be refused admission and are obliged to take treatment under conditions much less favourable than should be imposed or endured.

The situation could no doubt best be met by carrying on hospitals which combine accommodation and facilities for both classes of patients. It might be suggested that rooms for private patients should be standardized so that with few exceptions, if any, they would command equal and moderate rates.

A suitably located convalescent home should form a part of such a scheme, as tending towards economical efficiency and permitting early evacuation of patients from the active treatment hospitals, and convalescence to be prolonged until satisfactorily concluded.

Nursing at the present time presents many varied problems. The necessity of so much private nursing in hospitals has imposed, and some-