DEPARTMENT OF PROVINCIAL SECRETARY

MENTAL HOSPITALS

PROVINCE OF BRITISH COLUMBIA

ANNUAL REPORT

FOR 12 MONTHS ENDED MARCH 31ST

1950

VICTORIA, B.C.
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1950

To His Honour C. WALLACE, C.B.E.,
Lieutenant-Governor of the Province of British Columbia.

MAY IT PLEASE YOUR HONOUR:

The undersigned respectfully submits herewith the Annual Report of the Director of Mental Hygiene and Psychiatry of the Mental Hospitals for the fiscal year ended March 31st, 1950.

W. T. STRAITH,
Provincial Secretary.

Provincial Secretary's Office,
December 2nd, 1950.

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The Honourable W. T. Straith, K.C.,
Provincial Secretary.

SIR,—I have felt justified in this departure from the usual formal procedure governing the submission of the Annual Report of the Mental Hospitals of British Columbia, for the last day of the period covered by this Report marked the last day of the thirty-five-year career in the Provincial Government service of Dr. A. L. Crease, Director of Mental Hygiene and Psychiatry. Although in fact the section that bears his name has been reviewed by him, the whole Report has, of course, been compiled since he retired.

It will be many years before British Columbia becomes fully aware of its debt to Dr. Crease. Long ago he realized that the answer to mental illness is not merely an institution for custodial care into which patients are herded with little hope for recovery.

In the face of many obstacles, mostly fiscal, and with the continuous burden of the day-to-day operation and almost limitless complexity of a hospital administering to 5,000 patients, he was able to lay the foundation for an enlightened approach to the treatment of mental illness—the largest single cause of the hospitalization of our people.

A beginning has been made in the fields of research, of prevention, of early treatment, and of rehabilitation. Without development in these fields, it is inevitable that the future must hold necessity for vast capital construction (at least a 250-bed hospital each year) and for maintenance of patients in hospital in ever-increasing degree.

Within a few days of the retirement of Dr. A. L. Crease (whose short biography, written by Dr. A. M. Gee, appears in this Report), the Honourable G. S. Pearson was forced, on account of ill-health, to relinquish his portfolios. It is fitting that tribute be paid to Mr. Pearson for the support that he gave to Dr. Crease in securing the approval for the completion of the Crease Clinic of Psychological Medicine and for the encouragement that, within the fiscal limitations, he was able to give to Dr. Crease in bringing the care and treatment of the mentally ill out of darkness into light.

Respectfully submitted.

R. A. PENNINGTON,
Deputy Provincial Secretary.

December 1st, 1950.

DEPARTMENT OF THE PROVINCIAL SECRETARY

HON. GEORGE S. PEARSON, *Provincial Secretary.*
R. A. PENNINGTON, O.B.E., *Deputy Provincial Secretary.*
A. L. CREASE, M.D., C.M., *Director of Mental Hygiene and Psychiatry.*
E. J. RYAN, M.D., C.M., *Medical Superintendent.*
A. M. GEE, M.D., C.M., *Deputy Medical Superintendent.*
FREDERICK A. MATHESON, *Business Manager.*

OFFICERS AND STAFF, ESSONDALE

Medical:

U. P. BYRNE, M.B., D.P.H., D.I.H., *Director of Child Guidance Clinics.*
J. M. JACKSON, M.D., *Radiologist.*
A. E. DAVIDSON, B.A., M.D., *Clinical Director.*
T. G. CAUNT, M.D.
G. M. KIRKPATRICK, M.D.
B. F. BRYSON, M.D.
F. E. MCNAIR, B.A., M.D., C.M.
A. L. SWANSON, B.A., M.D., C.M., M.H.A.
G. A. NICHOLSON, B.A., M.D., *Pathologist.*
P. D. CROFT, B.Sc., M.D., C.M.
N. L. RICHARDSON, M.D., C.M.
W. P. FISTER, M.D., M.R.C.P.(Edin.), F.R.C.P.(Can.).
W. J. S. EDINGTON, B.Sc., M.D.
A. J. SHULMAN, M.D., C.M.
G. H. STEPHENSON, M.D.
L. I. M. COLEMAN, B.Sc., M.D., C.M.
C. E. DERKSON, M.D., C.M.
J. W. WARNE, B.A., M.D.
H. T. LOWE, B.Sc., M.D., C.M.
W. C. GIBSON, B.A., M.Sc., M.D., C.M., D.Phil.(Oxon.).
B. W. MURPHY, M.B., Ch.B.,(N.Z.).
R. G. E. RICHMOND, M.D., M.R.C.S. (London).
W. S. WILSON, M.B., Ch.B.(Glasgow).
J. R. GOSSE, D.D.S.
C. B. WATSON, M.A., *Administrative Assistant.*
W. R. BROWN, *Director of Recreation.*
K. WOOLCOCK, *Pharmacist.*
W. CREBER, *Chief Male Psychiatric Nurse.*
W. PRITCHARD, *Head Male Instructor.*
Miss M. PARSONS, R.N., *Director of Nursing.*
Miss E. M. PULLAN, R.N., B.A.Sc., *Instructress of Nursing.*
Miss J. F. KILBURN, *Social Service.*
Miss M. ALLMAN, B.H.E., *Dietitian.*
Miss E. WEEKES, O.T.R., *Charge Occupational Therapist.*
Miss J. IRVING, B.A., B.L.Sc., *Librarian.*
Mrs. I. H. WEDGE, *Branch Secretary.*
Miss A. D. DINGLE, *Senior Stenographer.*

Business:

J. F. ANDERSON, *Assistant Business Manager.*
L. FOX, *Paymaster.*
G. A. GRIEVE, *Cost Accountant.*
W. E. SKILLICORN, *Book-keeper.*
W. HEADRIDGE, *Steward.*
Miss A. MAKITA, *Business Stenographer.*

Chaplains:

Rev. JOHN F. O'NEIL, *Protestant.*
Rev. Father J. P. KANE, *Roman Catholic.*

Trades:

H. LONSDALE, *Foreman of Works.*
J. WILSON, *Engineer.*
WM. P. DODGSHON, *Outside Overseer.*
T. HARRISON, *Electrician.*
G. MATTHEWS, *Plumber.*
J. C. PURSE, *Head Tailor.*
D. ANDERSON, *Laundryman.*
A. L. BLAIR, *Barber.*
W. A. WARDLE, *Chief Cook.*
J. C. MERRICK, *Baker.*
R. T. HALL, *Charge Occupational Therapist.*

OFFICERS AND STAFF, NEW WESTMINSTER

Medical:

L. E. SAURIOL, M.D., C.M., *Deputy Medical Superintendent.*
C. E. BENWELL, M.B.
R. D. S. HERRICK, M.D., D.P.H., D.P.M.
A. P. GOULD, M.D., C.M.
F. GILLARD, *Receiving Clerk.*
KENNY & MATHESON, *Visiting Dentists.*
Miss V. M. SANDERS, R.N., *Superintendent of Nurses.*
Miss E. C. HERCHMER, R.N., *Assistant Superintendent of Nurses.*
Miss E. A. JOHNSTON, R.N., *Instructress of Nursing.*
Mrs. A. CUNNINGHAM, *School Principal.*
H. MERCER, *Industrial Arts Instructor.*
J. LYNES, *Recreational Instructor.*
Miss M. E. MORISON, *Occupational Therapist.*
Miss M. G. COULSON, *Clerk-Stenographer.*

Business:

A. FRASER, *Steward.*

Chaplains:

Rev. P. C. MCCRAE, *Protestant.*
Rev. Father G. ROGERS, *Roman Catholic.*

Trades:

C. M. DOYLE, *Foreman of Works.*
C. HAUCK, *Engineer.*
C. STAPLETON, *Head Gardener.*
L. S. DAVIES, *Electrician.*
G. COULSON, *Laundryman.*
J. MCMILLAN, *Shoemaker.*
L. ARNOLD, *Barber.*
J. FRASER, *Painter.*
W. JENKINS, *Head Cook.*
V. G. COPP, *Baker.*

COLONY FARM

JOHN A. HAY, *Superintendent.*

COLQUITZ

L. G. C. D'EASUM, M.D., *Medical Superintendent.*
T. A. MORRIS, *Supervisor.*
P. MCLEOD, *Chief Attendant.*

Dr. A. L. Crease

DR. ARTHUR L. CREASE

By A. M. Gee, M.D.

Dr. Arthur L. Crease retired from the position of Director of Mental Hygiene and Psychiatry on March 31st, 1950, after a professional lifetime devoted to the care and treatment of the mentally ill. Throughout his career, Dr. Crease has been noted for his outstanding humanitarianism, his great kindliness, and his devotion to the welfare of others, patients and staff alike.

His early medical training was obtained at McGill University, from which he was graduated in 1910, followed by four years of postgraduate study in medicine and pathology in the hospitals of Rhode Island. With this excellent preparation in medicine, Dr. Crease came to the West and in 1914 joined the staff of the Provincial Mental Hospital, New Westminster, B.C., as pathologist and physician. Since 1914 he has devoted his full time to the Provincial Mental Health Service and over the years with his increased experience he has had greater responsibilities. On the death of the late Dr. Steeves in 1926, Dr. Crease was given the appointment of Medical Superintendent and in 1934 he was promoted to General Superintendent and Provincial Psychiatrist, this latter appointment being redesignated Director of Mental Hygiene and Psychiatry in 1946.

Throughout his long career in the Provincial service, Dr. Crease has had many interests and all of them have meant better care for the mental patients. He always insisted upon a high level of competence from the physicians and called for the maintenance of high standards of medical practice. His early training in the hospitals of New England convinced him of the importance of modern laboratories as an aid in the practice of medicine. He therefore gave the developments of this department of the Hospital his full support, thereby laying a firm foundation for improved diagnosis and treatment.

The quarter century of Dr. Crease's administration of the Mental Hospitals was far from being placid; there was first the great depression of the 30's and then the upheaval of World War II, both of which placed severe restrictions upon the budget and made it difficult to obtain personnel. In spite of these difficulties, however, Dr. Crease maintained his progressive outlook and was able to pioneer in the introduction of many new services to the Hospitals, which made for better care and treatment of the patients.

The Training School for Psychiatric Nurses graduated the first group of students to take the postgraduate course for registered nurses in October, 1930, while the first class of psychiatric nurses was graduated in 1932.

The Psychiatric Social Service Department was established in 1930 and has grown over the years to meet the increasing demands. This department has played an important part in spreading the newer ideas concerning mental illnesses and in assisting the patient and community to achieve a wholesome adjustment to each other when the patient returns to his home.

The preventive aspects of psychiatry have always been of special interest to Dr. Crease, and in this connection he was instrumental in the establishment of the Child Guidance Clinics in 1932. He devoted many years to the daily duties of the Child Guidance Clinic, where he stressed the importance of the early treatment of the behaviour disorders of children and carried on an informal teaching programme of the principles of mental hygiene. Many physicians, nurses, social workers, and psychologists of the staff and workers from referring agencies learned much from his teachings and continued to be amazed at the wisdom and foresight in human relations that Dr. Crease exhibited.

To provide variety and stimulation in the daily routine of the patients living in the Hospitals, the occupational therapy department was increased in size and new crafts introduced, and a diversified leisure-time activities programme comprised of music, movies, and all types of recreation, was established.

Dr. Crease was always a serious student, devoting many of his evenings to keeping abreast of advances in medicine and psychiatry.

In 1935 he was granted a leave of absence and went to the University of Colorado, where, under Dr. F. G. Ebaugh, he took an intensive postgraduate course in psychiatry with the purpose of learning the latest methods of treatment. Upon his return to Essondale, Dr. Crease made arrangements for a rotational plan of postgraduate study for the staff psychiatrists and other key personnel. This policy of postgraduate study remains in operation to-day, and over the years it has paid increasing dividends in the high quality of service rendered by the Hospital staff.

Throughout his career, Dr. Crease maintained that psychiatrists should not neglect the preventive aspects of their science and that they should concentrate on the early, active, and intensive treatment of the mentally ill. Such an emphasis, he thought, shortened the duration of the illness, reduced the toll of psychic suffering, and left the patient with fewer incapacitating " mental scars " when he returned to his home and community. It is this philosophy that motivated him in his years of planning and striving for the modern Clinic of Psychological Medicine that so fittingly bears his name.

As an administrator, Dr. Crease was unique. In an age of increasing tension he was able to maintain a warmly democratic personal relationship with his staff. He respected the judgment of his associates and gave them his full support in difficult times. He made it a policy to have the staff come in to his office from time to time " to talk things over," and in this fashion he issued the necessary directions for the operation of the Hospitals. In all matters Dr. Crease was eminently fair and scrupulously honest; the friend of all and the counsellor of many in their own personal problems.

On the afternoon of Friday, March 10th, a reception for Dr. and Mrs. Crease was held in the day room of Ward East 2 in the new Crease Clinic. This was definitely a family affair, with the staff, their wives, and close friends of the Hospital being present to celebrate along with Dr. Crease his sixty-fifth birthday and to present to him some gifts for his new home at Ocean Park.

The reception was not an occasion for farewells but rather for congratulations on a job well done. While Dr. Crease may now put aside the heavy burden of responsibility that he has borne so capably over the years, to the staff he remains the senior member of the Mental Hospital family who will always be interested in the welfare of us all and an inspiration to continued humane care and scientific treatment for the mentally ill.

Report of the
Director of Mental Hygiene and Psychiatry

For the Twelve Months Ended March 31st, 1950

PART I.—MEDICAL

PROVINCIAL MENTAL HOSPITAL,
ESSONDALE, B.C., April 1st, 1950.

R. A. Pennington, Esq., O.B.E.,
Deputy Provincial Secretary,
Parliament Buildings, Victoria, B.C.

Sir,—I have the honour to submit herewith for your consideration the Seventy-eighth Annual Report of the Provincial Mental Hospitals at Essondale, New Westminster, and Colquitz.

The following table gives a brief summary of the movement of the Hospital population during the fiscal year April 1st, 1949, to March 31st, 1950:—

Movement of Population	Male	Female	Total
In residence, April 1st, 1949	2,531	1,824	4,355
On probation, but still remaining on registers	110	119	229
New admissions during current year	840	575	1,415
Total under treatment	3,481	2,518	5,999
Discharged in full during year	593	389	982
Continued on probation at end of year	106	107	213
Died during year	133	69	202
Total discharged	832	565	1,397
In residence, March 31st, 1950	2,649	1,953	4,602

Increase in number of patients admitted this year as compared to last	155
Net increase in population	247
Rate of deaths to total treated	3.36%
Rate of discharges to admissions (exclusive of deaths)	69.39%

ADMISSIONS

The admission of patients to the Mental Hospital shows a steady and consistent increase over the past five years. It is felt that this is in large part due to three factors:—

(1) The general increase in the population of the Province.
(2) Increased facilities for the care of the psychotic aged.
(3) Improved facilities within the Hospital and better community relationships whereby persons needing treatment are willing to come voluntarily.

These facts are borne out in the following tables:—

Year	Total Admissions	Admissions over Age of 65	Voluntary Admissions
1945–1946	834	206	33
1946–1947	880	207	40
1947–1948	1,111	225	91
1948–1949	1,260	270	165
1949–1950	1,415	230	297

With the opening of the Crease Clinic of Psychological Medicine next year, it is anticipated that admissions to that unit will show a further sharp rise, particularly in the voluntary admission group. It is, however, hoped that the period of hospitalization will be shorter and that a large percentage of these admissions may be discharged from the Clinic as recovered without being admitted to the Mental Hospital.

DISCHARGES

During the year a total of 982 patients were discharged in full from the three branches of the Mental Hospital. The condition of these patients at the time of discharge was as follows:—

Recovered	195
Improved	340
Unimproved	251
Admitted without psychosis	196
Total	982

TREATMENT

In the care of the mentally ill, treatment embraces the whole of physical medicine and, in many instances, surgery, as well as the more specific therapies peculiar to psychiatry. In the realm of psychiatry more therapies are being evolved which are proving beneficial and, in many cases, shortening the duration of the period of hospitalization. However, the main basic principles of psychotherapy in all its forms still provide the framework of treatment. Into this framework must enter every member of the treatment team—the physician, the psychiatric nurse, the psychologists, the social worker, the teacher, and the occupational and recreational therapists—together with all those who contribute to the well-being and comfort of the patients. A glance through the reports of these various department will give some idea of the volume of work handled.

While it is not possible to statistically cover all treatment activities, the following tables will give some idea of the treatment activities as carried out under the supervision of the Clinical Director, Dr. A. E. Davidson:—

(*a*) *Coma Insulin*

	Total	Per Cent
Results—		
Recovered	39	18
Much improved	20	9
Improved	101	48
Unimproved	49	23
Total	209	
Disposal—		
Discharged	123	58
Discharge pending	19	9
Died	2	1
Transferred to lobotomy	2	1
Remaining in hospital	63	30
Total	209	

(*b*) *Convulsive Shock Therapy*

Results—		
Recovered	53	12
Much improved	52	12
Improved	195	47
Unimproved	113	27
Total	413	—
Disposal—		
Discharged	122	29
Discharged later	34	8
Discharged pending	4	1
Transferred to insulin	41	9
Transferred to lobotomy	18	4
Died later	8	2
Remaining in hospital	186	45
Total	413	—

(*c*) LOBOTOMY

Patients Operated On for the Relief of Symptoms

Diagnosis	Result				Disposal		
	Number of Patients	Much Improved	Improved	Unimproved	Discharged	Remaining in Hospital	Died Later
Manic depressive	3	1	2	—	2	1	—
Schizophrenia	14	3	7	4	5	9	—
Miscellaneous	3	2	—	1	2	1	—
Totals	20	6	9	5	9	11	—

Patients Operated On for Improved Hospital Adjustment

Manic depressive	—	—	—	—	—	—	—
Schizophrenia	27	3	12	12	2	25	—
Miscellaneous	4	2	1	1	1	3	—
Totals	31	5	13	13	3	28	—

Total Patients Operated On

Manic depressive	3	1	2	—	2	1	—
Schizophrenia	41	6	19	16	7	34	—
Miscellaneous	7	4	1	2	3	4	—
Totals	51	11	22	18	12	39	—

The report of Dr. G. A. Nicolson, our Pathologist, gives some idea of the volume of investigation which this department has carried out during the current year. The additional work incidental to teaching and to research, as well as the work to be added next year with the opening of the Crease Clinic, will be very great. I am most pleased to report that our laboratory service has now been accepted as a training field for the certification of laboratory technicians.

The X-ray Department continues to show great expansion in the volume of work carried out. Dr. Jackson, as Director of this department, has maintained his close

association with the Department of Radiology in the Vancouver General Hospital in order that he may keep up to date with the rapid development in this particular field. The department has already occupied their new suite in the Crease Clinic where the very finest of equipment is available. Plans are under way whereby a department will be created in the New Westminster branch. It is planned to obtain a photo-roentgen chest unit for installation in the former X-ray suite in the admitting building.

The Physiotherapy Department has continued under the supervision of the Clinical Director. It is hoped that with the opening of the Crease Clinic this important department may be expanded.

The report of the Department of Psychology is included. The work of this department continues at a high level of efficiency. This service is one which will be expanded during the coming years. The relationship existing between the Department of Psychology and the other members of the psychiatric team is a very happy one due to the capable supervision of Mr. Watson.

The Dental Department has had a period of transition, and the work this year has been carried out under difficult circumstances. A new three-chair dental suite is planned for Essondale, the equipment to be purchased under Federal mental-health care grants. The former equipment has been transferred to the New Westminster branch where remodelling has made it possible to install a modern two-chair unit. The unit in New Westminster is continuing under Dr. Kenny on a part-time basis. In the Essondale branch, we have been fortunate in securing the full-time services of Dr. J. R. Gosse. Pending the installation of the new equipment at Essondale, all dental work is being carried out at New Westminster. On completion of these changes, we will have in both branches excellent provision for first-class dental care. However, the services of an additional full-time dentist are needed at Essondale, as well as a full-time dental mechanic, before really adequate dental treatment can be provided. Some immediate consideration must now be given to the provision of better dental facilities in the Colquitz branch.

The Optical Department has already moved into the suite in the Crease Clinic. Here, I am pleased to say, we have very fine equipment which will enable the optometrist to give more efficient service in this important branch. The report of this department shows an increase in the volume of work handled.

The report of the beauty-parlour is included under the treatment programme. This department is very essential in stimulating personal pride of appearance, so important to recovery. The department is one which will need further enlargement, and additional service will be required in the Crease Clinic.

The report of the Director of Nursing gives some idea of the expansion in the nursing personnel but does not portray the difficulties which this department has experienced during the last year, both in maintaining a high standard of nursing care and in providing the necessary educational and training facilities. Progress, however, has been accomplished in the establishment of the three-shift eight-hour day. There are yet many difficulties to be met before this service will function at maximum efficiency. A good deal of thought and attention are being given to these matters at the present time. Every effort is being made to correlate the men's division of nursing and the women's division of nursing both as to administration and education. We hope to have definite progress to report in this regard next year.

A review of the report of the women's division of the Occupational Therapy Department will give an idea of the work done and the number of public displays held at which exhibits were shown. This latter has done much to promote good community relationships and has contributed a good deal toward public education.

The men's division of Occupational Therapy Department has been greatly expanded during the past year with the addition of several new industrial and trades shops, and a well-equipped therapy shop in the Veterans' Building.

I would draw your attention to the report of the Director of Recreational Therapy for an understanding of the activities of this important branch of the hospital treatment programme. Probably no other department has received so much favourable comment, both from the patient-population and the many visitors who have come from all parts of the country to study its application and effects. British Columbia did well to pioneer in this particular field, which is now universally accepted as an essential part of the mental-hospital treatment programme.

During recent months, our library has been reorganizing in its new location in the Crease Clinic, where suitable quarters have been provided. It will take some little time to build up this important service but a very good start has been made under the Librarian, Miss Jean Irving.

Mention should be made of the Audio-Visual Department, which has expanded a great deal during the past year. The department has contributed much to the entertainment field and has played a very important part in the educational activities of our teaching programme. We are gradually building up an educational-film library which already is in great demand and is proving of splendid assistance to the doctors and others giving educational talks, both in the hospital and the community. As the educational programme is enlarged, the demands on the Audio-Visual Department will increase, and we look forward to the day when they will have larger quarters in which to function.

The Child Guidance Clinic continues its work very satisfactorily but under most adverse circumstances, being located in two adjoining old residences. With the addition of Dr. R. G. E. Richmond to the staff, a new unit has been created giving service to the Boys' and Girls' Industrial Schools, the Borstal School, the Juvenile Court, and Oakalla Prison Farm. A detailed report of the activities of the Child Guidance Clinic is submitted by the Director, Dr. U. P. Byrne.

The Social Service Department continues to render valuable service to all branches of the Mental Hospital and Homes for the Aged. This work is essential for the incoming patient, the patient while in residence, and the outgoing patient. The fine organization, and the spirit of co-operation existing in the Social Service staff assigned to psychiatric work and the Department of Welfare with their many workers in the field, is the envy of all other Provinces.

I am pleased to report the opening for occupancy of the new Veterans' Unit at the Colony Farm. The veteran patients were moved to their new quarters on August 31st, 1949. The building presents a very fine appearance, and is offering the very best in comfort and treatment to our veteran group.

I am also pleased to report the erection of much needed new Nurses' Homes, the first unit being occupied on August 1st.

A very valuable addition has been built to our Fire Hall, whereby an additional number of volunteer firemen may be housed to give us added fire-protection. This building was occupied on November 1st.

A new two-chair dental suite was completed in the New Westminster branch and was ready for use on August 1st.

At the Home for Aged at Vernon an additional building was converted for patient-use to accommodate forty patients. This was occupied on February 1st.

The Crease Clinic of Psychological Medicine was official opened on November 16th. The formal opening ceremony was well attended. R. A. Pennington, Deputy Provincial Secretary, acted as chairman, introducing the Honourable G. S. Pearson, Provincial Secretary. Mr. Pearson paid tribute to the Director and, on behalf of the Province, formally accepted the key from the contractor. A gold replica of the key was presented to Dr. Crease. The building was then opened to the public, and tours of the Crease Clinic were arranged. Refreshments were served. This occasion was a memorable one, which will remain in the minds of those interested in mental health throughout the Province.

MENTAL-HEALTH CARE GRANTS

The mental-health care grants are made available to the Provinces by the Government of Canada through the Department of National Health and Welfare.

The projects submitted this year continue the policy established in 1948–49, the year in which the grants were inaugurated. The provision of postgraduate training for members of the professional staff has been continued, and the purchase of additional equipment to enhance the treatment services has been authorized.

Professional Training

Dr. A. L. Swanson completed the course in hospital administration at Northwestern University and returned to the Provincial Mental Hospital, Essondale, in August, 1949. This course was commenced in 1948–49.

Dr. W. P. Fister completed a year of postgradute training in neurology and electro-encephalography at the Montreal Neurological Institute and returned to the Provincial Mental Hospital, Essondale, in December, 1949.

Dr. G. A. Nicolson completed one year of postgraduate training in pathology at the Vancouver General Hospital in June, 1949. He also had a further postgraduate course in neuropathology at the University of Toronto, September to November, 1949.

Dr. W. C. Gibson completed a three-month postgraduate course in advanced medicine at the University of Toronto in November, 1949.

Dr. W. E. Powles commenced a one-year postgraduate course in psychiatry at the Allan Memorial Institute of Psychiatry, Montreal, in July, 1949.

Dr. N. L. Richardson commenced a six-month postgraduate course in neurology at the Vancouver General Hospital on January 1st, 1949.

Dr. L. E. Sauriol, Dr. H. T. Lowe, Dr. C. E. Derkson, and Dr. L. I. M. Coleman attended the postgraduate refresher course in neurology, psychiatry, and neurosurgery at the Vancouver General Hospital in February, 1950.

Dr. P. D. Croft attended the short postgraduate course in psychiatry at the University of Oregon in March, 1950.

Miss E. M. Brown completed a six-month postgraduate course in nuerosurgical nursing at the Montreal Neurological Institute in July, 1949.

Miss A. K. Carroll completed a one-year postgraduate course in psychiatric social work at the University of Pittsburgh in July, 1949.

Miss H. J. Shand completed a one-year postgraduate course in supervision in psychiatric nursing at McGill University in June, 1949.

Miss M. H. Munro completed a one-year postgraduate course in clinical psychology at the University of Toronto in June, 1949.

Miss J. MacLean-Bell completed a one-year postgraduate course in public health nursing at the University of British Columbia in May, 1949.

J. W. Borthwick commenced a one-year postgraduate course in clinical psychology at the University of Washington in September, 1949.

Miss N. L. Grantham commenced a one-year postgraduate course in supervision in psychiatric nursing at McGill University in September, 1949.

Miss M. A. Cunliffe commenced a one-year postgraduate course in psychiatric social work at Smith College in July, 1949.

Equipment

The equipment for a three-chair Dental Clinic at the Provincial Mental Hospital, Essondale, was approved as well as occupational and recreational therapy equipment. The purchase of a bus to be used for transporting patients was also authorized.

At the Crease Clinic of Psychological Medicine the equipment for the operating-room was authorized as well as the diagnostic, surgical, and therapeutic apparatus for the

wards. Additions to the medical library and to the teaching aids in the Schools of Psychiatric Nursing were approved. Funds were also made available for the hiring of additional staff.

CHANGES IN STAFF

It is with sincere regret that I have to report the sudden death of Dr. R. M. Rice on August 24th. Dr. Rice had been Medical Superintendent of the Home for Aged at Vernon since its opening. His sudden passing was a great shock to all who knew him.

Dr. Ardeth Robertson resigned on June 30th, 1949, to seek further interneship elsewhere.

Dr. W. Love resigned June 30th, 1949, to re-enter private practice.

H. Lonsdale, Foreman of Works, retired on December 31st, 1949. Mr. Lonsdale had been closely associated with the Mental Hospital at Essondale since its earliest inception. As Foreman of Works during this working-lifetime period, he has contributed a great deal to the entire physical plant. Mr. Lonsdale's last job was to supervise the furnishing and equipping of the Crease Clinic, a task well done and a fine one on which to conclude a career.

Dr. A. G. McKinnon joined the medical staff as Medical Superintendent at the Vernon Home for Aged unit on March 13th, 1950.

Dr. R. G. E. Richmond joined the medical staff of the Child Guidance Clinic on November 4th, 1949.

Dr. C. E. Derkson joined the medical staff on April 1st, 1949 .

Dr. B. W. Murphy joined the medical staff on August 1st, 1949.

Dr. J. W. Warne joined the medical staff on June 13th, 1949.

Dr. H. C. Lowe joined the medical staff on July 1st, 1949.

Dr. W. C. Gibson joined the medical staff on July 1st, 1949, as Director of Research.

Dr. J. R. Gosse joined the staff as dental surgeon on June 1th, 1949.

Dr. A. L. Crease, your Director of Mental Hygiene and Psychiatry, retired on March 31st, 1950.

COMMENTS

It is regrettable that throughout the years it has been necessary to delay erecting buildings to house the increased number of patients resident each year. This has come about in two ways. First, there have been two world wars and a period of depression; secondly, there has been some procrastination in the building programme. As a result, overcrowding has taken place which has mitigated greatly against treatment. It has also caused both staff and patients much inconvenience and hardship. Lately, considerable construction has been done, and it is further suggested that this building programme be continued so as to lessen the present overcrowding and prevent further overcrowding in the future.

The erection of the new Clinic as a barrier against admission to the main Hospital is certainly a step in the right direction. However, the Clinic of Psychological Medicine is only the first barrier against Hospital admissions; there should be a further barrier to handle the great bulk of early cases so that many could be prevented from ever being admitted to the Clinic of Psychological Medicine or the Mental Hospital. This unit would be the so-called out-patient department operated by the Government for the treatment of adults as well as children. These barriers are, of course, places for intensive treatment. In every way it is felt that eventually a considerable saving of money will be effected for, as the years go by, expenditure for the care and treatment of patients in the Hospital itself will be greatly lessened. At the present time the number of admittances to the Mental Hospital has greatly increased, the reasons being that facilities for even earlier treatment are not available and the housing situation has become more acute. Diagnosis is now made at an earlier period through increased education concerning psychological medicine.

There has been another outstanding event which has taken place in this field. Provision for education of staff and students is now under way. It is of the standards required by the Canadian and American associations—the Canadian National Committee for Mental Hygiene, the Canadian and American Psychiatric Associations, The American National Committee for Mental Hygiene, the Canadian and American Hospital Associations, the American College of Surgeons, the Royal College of Physicians and Surgeons of Canada. In addition to this, basic research into mental and nervous diseases has been inaugurated and is housed at the University of British Columbia. Dr. William C. Gibson has been appointed its Director. This brings the field of mental illness directly into the realm of medicine at university level. It greatly enhances an intense interest in the clinical subjects. The more costly continued-treatment idea is rapidly fading, and the modern intensive-treatment conception is quickly spreading. It has been amply demonstrated that without the modern application of science, the mounting cost of this illness could not otherwise have been lessened; mere building is not the answer.

ACKNOWLEDGMENTS

On the eve of my retirement, I would like especially to voice my appreciation of the assistance and encouragement given me by our Minister and his most able Deputy, R. A. Pennington, over the years, one becomes more and more conscious of the necessity of such close association and the mutual benefit derived from the sharing of our problems.

May I bring to your favourable notice the valuable and unceasing efforts of Dr. E. J. Ryan and Dr. A. M. Gee, whose loyal services and keen interest have done so much to enhance the onward progress of the Hospital.

The returned-soldier organizations and their various auxiliaries continue to do much for the veterans under our care. They provide extra comforts and entertainment for them besides making regular personal visits. The veterans are most appreciative of the many kindnesses shown them by these branches of the services.

Our branch in New Westminster shows good progress under the careful guidance of Dr. L. E. Sauriol. Regular classes are held in the school under qualified school teachers, and the children show a remarkable response. Increased entertainment and occupational therapy have been established, and the children lead a busy and happy life.

Our patients at Colquitz are under the care of Dr. L. G. C. d'Easum who, with the able assistance of Mr. Morris, has done much toward the betterment of this particular type of patient. This unit is not an easy one but progress has been made. There are more activities and these have been appreciated. One feels that credit is due to those in charge that this unit runs so smoothly.

I would like to commend our Business Manager, F. A. Matheson, for his careful handling of the finances and logistics of the Mental Hospitals. With rising costs, his task has not been an easy one, and it is due to his foresight and interest that we have suffered little from shortages and have our stocks well in hand.

It is not possible to mention individually all those with whom I have been so closely connected during the years. Now, as I retire and look back, I can realize perhaps as never before how great has been your loyal support and co-operation in working for the progress of the Hospital and the betterment of the patients. Much has been accomplished; much more is still to be done, but if we all work as a team then we will reach our goal. I thank you all.

I have the honour to be,

Sir,

Your obedient servant,

A. L. Crease,

Director of Mental Hygiene and Psychiatry.

LABORATORY REPORT

A. L. Crease, Esq., M.D., C.M.,
Director of Mental Hygiene and Psychiatry,
Provincial Mental Hospital, Essondale, B.C.

SIR,—The following is the report of the work performed in the laboratory at Essondale from April 1st, 1949, to March 31st, 1950:—

Blood—	
Kahn, positive	70
Kahn, quantitative	67
Kahn, negative	1,865
Red-blood count and hæmoglobin	2,394
White-blood count and differential	2,505
Sedimentation rate	1,016
Bone-marrow examination	2
Coagulation time	67
Bleeding time	68
Platelet count	12
Reticulocyte count	21
Prothrombin time	17
Glucose	249
Glucose tolerance	9
Insulin sensitivity	2
Non-protein nitrogen	124
Urea nitrogen	1
Creatinine	2
Cholesterol	40
Chloride	4
Bromide	28
Serum—	
Total protein	7
Alb.-glob. ratio	2
Phosphorus	1
Sodium	1
Potassium	1
Icterus index	61
Van den Bergh	29
Hanger flocculation	9
Thymol turbidity	3
Blood—	
Culture	5
Widal	1
Agglutination for *B. abortus*	2
Paul Bunnell	3
Spinal Fluid—	
Kahn, positive	47
Kahn, quantitative	42
Kahn, negative	72
Cell count	122
Colloidal gold	116
Total protein	122
Chloride	4
Glucose	6

Urines—	
Routine	8,866
Acetone	3,251
Quantitative sugar	515
Bromides	1,392
Benzidene	713
Quantitative albumin	175
Friedman	28
Bile	21
Urobilinogen	23
T.B.	1
Iodide	23
Barbiturate	9
Smears—	
Miscellaneous	142
G.C.	40
T.B.	51
Vincent's angina	41
Malaria	29
Trichomonas	2
Diphtheria	485
Dark field	1
Sputum—	
T.B.	297
24-hour specimen for T.B.	36
Cultures—	
Miscellaneous	81
Diphtheria	468
G.C.	2
Typhoid	1,194
Dysentery	400
Fæces—	
Parasites	18
Occult blood	33
Amoebic cysts	1
Urobilin	3
Fat	1
Injections—	
Typhoid vaccine	739
Diphtheria vaccine	173
Staphylococcus toxoid	20
Scarlet Fever toxin	5
Skin Tests—	
Tuberculin (Vollmer)	266
Dick test	3
Schick test	438
Smallpox vaccinations	121
Gastric analysis	6
Gastric contents for T.B.	26
B.M.R.'s	121
Biopsies	4
Autopsies	79

Animal autopsies	51
Sections	1,706
Water for bacterial count	35
E.K.G.	73
Agglutination for typhoid	9
Agglutination for dysentery	6
Rumpel-Leed test	1
Diphtheria virulence test	4
Total number of examinations	31,447

I have, etc.,

G. A. NICOLSON,
Pathologist.

X-RAY REPORT

A. L. Crease, Esq., M.D., C.M.,
Director of Mental Hygiene and Psychiatry,
Provincial Mental Hospital, Essondale, B.C.

SIR,—The following is the report of the work performed in the X-ray Department of the Hospital from April 1st, 1949, to March 31st, 1950:—

Number of films taken	12,937
Number of patients X-rayed	9,634

	Patients	Films
Chests	7,423	7,649
Extremities	502	1,452
Barium meals	43	595
Barium enemas	19	167
Spines	1,148	1,473
Skulls	178	576
Nose	10	32
Ribs	36	68
Shoulders	37	94
Abdomens	52	103
Teeth	35	156
Pelvis	31	39
Jaws	20	48
Sinuses	30	112
Mastoids	5	22
Gall-bladder	20	96
Intravenous pyelograms	15	90
Pneumoencephalograms	12	99
Soft tissue (cheek)	1	3
Soft tissue (neck)	8	27
Heart examinations	6	25
Œsophagus examinations	3	11
	9,634	12,937

I have, etc.,

J. M. JACKSON, M.D.,
Director of Radiology.

PHYSIOTHERAPY REPORT

A. L. Crease, Esq., M.D., C.M.,
Director of Mental Hygiene and Psychiatry,
Provincial Mental Hospital, Essondale, B.C.

SIR,—Following is a report of the treatments given in the Physiotherapy Department in Essondale from April 1st, 1949, to March 31st, 1950:—

	Male	Female	Total
Continuous baths	22	77	99
Foam baths	19	15	34
Electric cabinet baths	4	.....	4
Needle spray, douches, etc.	26	15	41
Massage, active and passive; remedial exercises	68	14	82
Inductothermy, short wave	47	65	112
Infra-red radiation	63	95	158
Ultra-violet radiation	9	15	24
Sitz baths	2	1	3
Foot baths	4	.....	4
Arm baths	1	.....	1
Tub baths	25	.....	25
Chiropody	46	.....	46
Total number of treatments	2,944	5,371	8,315
Total number of patients treated	336	297	633

I have, etc.,

A. E. DAVIDSON,
Clinical Director.

PSYCHOLOGIST'S REPORT

A. L. Crease, Esq., M.D., C.M.,
Director of Mental Hygiene and Psychiatry,
Provincial Mental Hospital, Essondale, B.C.

SIR,—Following is a report of work performed for the fiscal year ended March 31st, 1950:—

Test	P.M.H. Essondale
Ascendence Submissive Study	1
Arthur Point Scale	4
Attitude Interest Analysis Test	4
Benjamin Proverbs	35
Bernreuter	3
Bender Gestalt	3
A.M.T. Number Square Test	1
California Test of Personality	12
Chicago Non-verbal	1
Detroit Reading Tests	3
Gamin (Guilford Martin)	2
General Clerical	2
Golstein Scheerer Cube Test	1
Golstein Scheerer Stick Test	1
Guilford Martin O.Co.Ag.	4
Hanfmann-Kasanin	9
Kent Rosanoff	38

Test	P.M.H. Essondale	
Kuder Preference Record	7	
McQuarrie Test of Mechanical Ability	2	
Manson Evaluation	3	
Mechanical Comprehension	1	
Minnesota Multiphasic Personality Inventory	68	
N.I.I.P. Clerical Test	2	
Otis Self-administering	5	
Perdue Peg Board	3	
Porteus Maze Performance Scale	172	
Prognostic Test of Mechanical Ability	1	
Progressive Achievement	1	
Progressive Matrices	33	
Rapport Word Association	2	
Rorschach	10	
S.T.D.C.R.	1	
Shipley Hartford Retreat Scale	140	
Stanford Binet Form L	38	
Stanford Binet Form M	1	
Strong Vocational Interest	1	
Thematic Apperception	40	
Verbal Absurdities	5	
Wechsler-Bellevue Intelligence Scale	197	
Wechsler Memory Scale	52	
Sentence Completion	2	
Total		911

Psychiatric Nursing Staff

	Female	
California Test of Personality	244	
Kuder Preference Record	244	
Modified Alpha Form 9	244	
Total		732
Grand total		1,643

I have, etc.,

C. WATSON,
Psychologist.

DENTAL REPORT

A. L. Crease, Esq., M.D., C.M.,
Director of Mental Hygiene and Psychiatry,
Provincial Mental Hospital, Essondale, B.C.

SIR,—Following is the annual report of the Dental Department:—

PROVINCIAL MENTAL HOSPITAL, ESSONDALE, JUNE 1ST, 1949, TO MARCH 31ST, 1950

Summary

Extractions	1,045
Fillings	244
Prophylaxis	48
Treatments	27
Examinations	107
Dentures made	54
Dentures repaired	78
Dentures relined	11
Bridge repairs	3

PROVINCIAL MENTAL HOSPITAL, NEW WESTMINSTER, APRIL 1ST, 1949, TO MARCH 31ST, 1950

Summary

Extractions	511
Examinations	245
Cleanings	58
Fillings	97
Denture repairs	3
Complete dentures	3

We have, etc.,

J. R. GOSSE, D.D.S.,
KENNY & MATHISEN, D.D.S.

OPTICAL REPORT

A. L. Crease, Esq., M.D., C.M.,
Director of Mental Hygiene and Psychiatry,
Provincial Mental Hospital, Essondale, B.C.

SIR,—The following is a report of the optical work done at the Provincial Mental Hospital, Essondale, from April 1st, 1949, to March 31st, 1950:—

Refractions: Male, 58; female, 118; Total, 176. Repairs and replacements sent to J. S. Hudson Optical Supplies, 160. Repairs and adjustments performed at hospital, 60.

I have, etc.,

H. H. WOODBRIDGE,
Optometrist.

BEAUTY-PARLOUR REPORT

A. L. Crease, Esq., M.D., C.M.,
Director of Mental Hygiene and Psychiatry,
Provincial Mental Hospital, Essondale, B.C.

SIR,—The following is a report of the appointments made in the beauty-parlor from April 1st, 1949, to March 31st, 1950:—

Shampoos	4,340
Finger-waves	4,255
Marcels	75
Haircuts	4,883
Manicures	1,257
Permanents	446
Oil and scalp treatments	189

I have, etc.,

M. TOWNSEND,

REPORT OF DEPARTMENT OF NURSING

A. L. Crease, Esq., M.D., C.M.,
Director of Mental Hygiene and Psychiatry,
Provincial Mental Hospital, Essondale, B.C.

SIR,—I respectfully submit the report of the Department of Nursing for the fiscal year ended March 31st, 1950.

This year ended with the following personnel: Registered nurses, 18; psychiatric graduates, 76; psychiatric nurses-in-training, 274; nurses' aides, 9; home supervisors, 15—making a total staff of 392. Resignations for the year numbered 185 and new appointments 276. New appointments totalling 114 were required for the eight-hour day. Resignations totalled 7 more than the previous year and reasons for same are as follows: 44 to be married, 30 because of ill-health, 9 illness in family and services required at home, 17 services terminated, 26 for a change in occupation, 11 to take general nurse's training, 32 returned to university (most of these were summer relief staff), 13 felt unsuited to this type of nursing, 2 for personal reasons, and 1 at completion of postgraduate course.

A very important step in the history of nursing was achieved when, on December 1st, 1949, the eight-hour day, forty-four-hour week was instituted for all nurses. This system, although creating many new problems and adjustments, is welcomed by all nursing personnel, who generally are enjoying their new hours and finding their work more enjoyable.

With this change to the eight-hour day, it was necessary to change to a new system of education. Thus on January 3rd, 1950, the Block System of classes was placed in effect. With this new system, students are free from ward-service responsibilities during their course of lectures. This programme is still in its infancy and it is difficult to evaluate or to compare with our old system at this time. It has, however, entailed a great deal more work for teaching personnel and much repetition of class work is required. The eight-hour day has enhanced too the work of those in charge of nursing service.

This year 31 nurses completed the three-year course in psychiatric nursing, 2 registered nurses completed the six-month postgraduate course, and 90 male students received

certificates for their course in psychiatric nursing. The affiliating programme entailed 44 students from the Vancouver General Hospital, 4 degree students from the University of British Columbia, and 2 graduate students were privileged to take this course in clinical and theoretical instruction. Thirteen nurses from the Public Health Division of the University of British Columbia spent three days in observation and instruction at the Hospital. Special clinical demonstrations and lectures were provided for 215 educational students, 75 social workers, 66 students in abnormal psychology, and 24 public health nursing students.

Some changes have taken place in the Training School office personnel. Miss Kirkham, Supervisor of Acute Building, resigned to take a position on the staff of the Ponoka Mental Hospital, Alberta. Miss J. Menzies, from the teaching department, is ably filling this vacancy. Miss J. Shand returned from McGill School of Nursing and has had a very busy year in the teaching department. Miss C. Livingstone, who had been with us for one year in the clinical and teaching department, resigned to return to the University of British Columbia. This vacancy was filled by Mrs. C. Broberg, who in turn resigned in January to take up her household duties. We were very fortunate to secure the services of Mrs. E. Paulson to fill this vacancy. Miss N. Grantham, who has been on our night supervisory staff for some years, is now taking the course in psychiatric teaching and supervision at McGill University. Miss E. Brown has returned from her six-month course at the Neurological Institute, Montreal, and is now well prepared to take over her duties in the operating theatre, Crease Clinic. Until this unit opens, she is acting supervisor in the Women's Building. Miss M. Thiemann returned from her extended holiday in January and upon her return assumed administrative responsibilities in the office.

We feel, this year, we have progressed in our health programme for nurses. A small home was renovated for an Infirmary and in October we moved into this unit from our Infirmary in the Women's Building. This change is a great advantage and an environment which is conducive to " getting well." We have been very fortunate in retaining the services of a registered nurse. This nurse has done considerable follow-up work on nurses as well as her regular duties.

More recreational facilities are, this year, added to our staff recreation programme. During the summer, picnics on the tennis courts were arranged with games, dancing, and refreshments. During the winter months, classes in swimming were provided twice weekly. Instruction was also provided in square dancing and folk-dancing once a week. This addition to our recreation programme was very popular and much enjoyed by all the staff. For this added enjoyment, we thank the staff of the recreation department.

In July a personnel committee was formed and set in operation. This committee deals with nursing problems, recommendations to permanent staff, or dismissals. Through this committee the administrative responsibilities are considerably less heavy.

For all those doctors, nurses, and heads of all departments who have helped in no small measure with the nursing service and educational programme we are extremely grateful. Without their help and co-operation, the accomplishments of the past year could not have been achieved.

We are particularly grateful for the help and co-operation of Dr. Ryan in the many nursing problems which arise.

I have, etc.,

MONA E. PARSONS, R.N.,
Director of Nursing.

OCCUPATIONAL THERAPY DEPARTMENT

A. L. Crease, Esq., M.D., C.M.,
Director of Mental Hygiene and Psychiatry,
Provincial Mental Hospital, Essondale, B.C.

SIR,—The Women's Occupational Therapy Department at Essondale has developed considerably during the past year. This is mainly due to an increased staff, which has enabled us to branch out into new activities and techniques, to increase the output of the maintenance departments, and to contact a far greater number of patients through an active ward-treatment programme.

Semi-monthly Occupational Therapy staff meetings have been resumed, at which time interdepartmental plans and problems are discussed, also several films of special interest to the therapists have been shown.

In the handicraft workshops and wards, the crafts found to be of most therapeutic value to psychiatric patients have been weaving, rug-hooking, stuffed-toy making, dress-making, embroidery, knitting, crocheting, tatting, painting, and paper-constructive work.

The looms and other equipment for the Crease Clinic Occupational Therapy Department were set up in March of this year, and at present a staff of four are conducting a varied programme in the temporary workshop and wards of that building. Plans for completing the interior of these workshops have been approved and the completed cupboard units and furnishings are to be installed in the near future.

Finger-painting, a comparatively new technique in psychiatric analysis and treatment, has been undertaken by the department this year with very satisfactory results. Weekly classes for small groups of carefully selected patients have been conducted under the close supervision of a therapist and a statistical summary of the findings submitted to the psychiatrists concerned.

Garden and flower picking, also outdoor sketching classes, have been very popular and beneficial to many patients.

The hospital schoolroom, with a fully qualified teacher in charge, is a part of the Women's Occupational Therapy Department and here special classes are held daily for approximately thirty mentally retarded children. Adult patients desirous of continuing their academic studies are given tuition and assistance by the school teacher in fulfilling requirements for correspondence courses arranged through the Department of Education in Victoria.

The Women's Occupational Therapy Department have been happy to comply with many and varied requests from the other departments of the Hospital. In this connection, we have worked in conjunction with Recreational Therapy in providing suitable decorations for special parties and dances at St. Valentine's, St. Patrick's, Easter, Hallowe'en, and Christmas, etc.

Other occasions for which special decorations were provided include graduation ceremonies, graduating nurses' breakfast, opening of the Crease Clinic, banquets, and Dr. Crease's farewell reception.

For the Social Service Convention over 500 felt dogwood brooches were made by the patients.

At Christmastime the department supplied several hundred toys for the children at Essondale and New Westminster; sufficient candy bags were filled for the entire patient-population.

During the past summer, three first-year and one third-year occupational therapy students from the University of Toronto completed a two-month interneship in the Women's Occupational Therapy Department.

Affiliate nurses from general hospitals and the University of British Columbia all spend one week of their two-month stay working in the department. During this time

they work closely with the therapist in planning work for the patients, attend lectures, and learn new craft techniques.

The increasing interest being shown by the general public in the work being carried out in the Women's and Men's Occupational Therapy Workshops at Essondale has been evidenced by the numerous requests received for exhibits of finished articles.

The following displays were set up and supervised during the past year:—

May 10th to 14th, 1949: Industrial fair at Vernon, B.C.

May 12th to 14th, 1949: Fraser Valley Art Group Annual Exhibition at Y.M.C.A., New Westminster.

June 3rd, 1949: Parent-Teacher Association Annual Hobby Show, Port Coquitlam.

August 8th and 9th, 1949: New Westminster Horticultural Society Annual Flower Show.

August 18th: Coquitlam Women's Institute Annual Fair and Flower Show.

August 24th to September 9th, 1949: Pacific National Exhibition and Hobby Show at Vancouver, at which time Essondale was given the Bronze Award Certificate and Medal.

Number of patients admitted for occupational therapy during year, 1,094; patients discontinued, transferred, or discharged during year, 741; total number of hours spent by therapists during year, 8,139.

I have, etc.,

MILLICENT E. WEEKES,
Director, Occupational Therapy Department.

RECREATIONAL THERAPY DEPARTMENT

A. L. Crease, Esq., M.D., C.M.,
Director of Mental Hygiene and Psychiatry,
Provincial Mental Hospital, Essondale, B.C.

SIR,—I beg to submit to you the following report showing programme and attendance figures of the activities promoted by the Recreational Department from April 1st, 1949, to March 31st, 1950:—

Programmes	Number of Programmes	Total Attendance
Bingo gatherings	7	2,560
Swimming	98	3,388
Dances	78	18,079
Bands and concerts	12	8,400
Inter-ward cribbage and checker tournaments	22	660
Crossword and cryptogram, etc., contests	52	*
Physical education periods—		
Outdoor	72	2,871
Indoor	48	975
Picnics	14	371
Music-appreciation periods	58	5,300
Variety parties or programmes	10	3,035
" Leader-group " training periods	15	240
Totals	486	45,879

* Unestimated.

Following are special or progressive inaugurated events to our programme this year, and additional remarks:—

(1) The opening of the East 1 Crease Clinic recreation-room. The opening of this room provided the department with space and equipment to promote daily indoor activities for the first time since its inception without interfering with the regular routine of the wards and day rooms.

(2) Mr. Routley, of the Recreational Therapy staff, attended short refresher courses given by the Canadian Red Cross and The Royal Life Saving Society and received his R.L.S.S. bronze medallion and bar and preliminary instructor certificate, and the Canadian Red Cross safety instructor's certificate.

(3) The addition of the latest square, round, and folk-dances to our dance programmes.

(4) The formation and training of a patient-group to assist in the instructional work of teaching the others the intricacies and patterns of the square and folk-dances. This group training, although in its infancy, has proved to be of great benefit to those chosen as leaders, in restoring their confidence in themselves, and in the assistance given to this department as coinstructors. It is hoped that this group will, on completion of the new gymnasium and auditorium with its increased space and facilities, be enlarged and expanded to cover leadership in all the phases of physical education and recreational activities.

(5) On May 26th, 1949, a staff sports and recreation committee was formed by Dr. A. L. Crease. The committee, consisting of representatives of the senior administrative staff, the medical staff, the male and female nursing staff, and the recreational director, meet at the request of the director and assist him in obtaining facilities and interested leaders to further the programme of staff recreation.

(6) The formation of a staff square and old-time dance group on March 9th, which met weekly during the winter months with a heavy attendance at all sessions and a request for more of them next year.

(7) On September 20th, 1949, classes were formed and special attention was given to swimming and diving instruction for staff during after-hours activities. This also proved to be a popular activity and will be increased next year.

(8) During the extreme cold weather of January and February an attempt was made to clear and flood an area suitable for an ice rink. After much experimenting in various spots, and with the co-operation of the hospital fire department, an ideal location was found on the Colony Farm grounds. Only two days of skating, however, was enjoyed by patients or staff before the milder weather ruined the ice surface. In future years an attempt will be made to form a rink at the first sign of zero weather.

In closing, I would like to express my sincere appreciation for the co-operation and assistance given by the many staff individuals and departments in the promotion and progression of what is still a new department in its infancy.

I have, etc.,

W. R. Brown,
Director of Recreational Therapy.

LIBRARY REPORT

A. L. Crease, Esq., M.D., C.M.,
Director of Mental Hygiene and Psychiatry,
Provincial Mental Hospital, Essondale, B.C.

SIR,—Following is a report of the medical and patients' libraries for the year ended March 31st, 1950:—

MEDICAL LIBRARY

Book collection	866	
New books added (plus two encyclopædias)	278	
		1,144
Journal collection (medical and nursing)	55	
Others	34	
		89
Journals (bound volumes)		71

PATIENT'S LIBRARY

Book collection	3,115	
New books added	509	
Donations	180	
		3,804
Number of borrowers		1,187
Number of books circulated		9,531

EXPENDITURES FOR THE YEAR

Medical library (excluding periodicals)	$1,451.76
Patient's library	1,187.83
Dominion health grant (medical library)	778.15

I have, etc.,

JEAN S. IRVING,
Librarian.

AUDIO-VISUAL DEPARTMENT

A. L. Crease, Esq., M.D., C.M.,
Director of Mental Hygiene and Psychiatry,
Provincial Mental Hospital, Essondale, B.C.

SIR,—Attached herewith is a summary of basic activities of the Audio-Visual Department for the fiscal year 1949–1950. It can be seen that in regard to staff, equipment, and time considerations, motion pictures is the major function, with photography and recording following in that order.

It is interesting to note that the department, while originally for the enjoyment of the patients and still is, is now becoming of equal value to the Hospital and staff, since the equipment performs equally well for all.

The number of educational films shown and(or) loaned out was rather limited, since the 16-mm.-film library was not organized until late in the year. This library, in conjunction with our projection equipment, has now developed into a small-scale film

exchange. A minimum average of shipping and receiving either films or machines amounts to fifteen per week. This phase has been assisted by the department being located at street level and adjacent to the centre of transportation (garage).

Not shown in the summary, and apart from specially constructed amplifying equipment, is the large amount of maintenance work performed not only on our own equipment but on that of other departments and institutions in connection with intercommunicators, sound systems, projection equipment, and office-type wire-recorders. Assistance has been given through the business manager's office to patients owning their own radios and hearing-aids. I am glad to stay that through the completion of this maintenance work no 16-mm. or 35-mm. motion picture show at this Hospital, or on one of our machines on loan, has had to be cancelled owning to defective equipment.

The application of photography to the Hospital increases daily, but not without inherent troubles resulting from cramped quarters and working conditions. This may also be said for the recording equipment, which for best results must be operated in a sound-conditioned room. It is hoped that upon completion of the auditorium the majority of these conditions will be overcome.

During the summer months, music has been played throughout the grounds and has been enjoyed by both patients and staff. Due consideration is given to what type of music is selected, and as in the case of motion pictures, we are guided a great deal by comments from patients, staff, and current literature.

During the year, the department staff was increased to four with the addition of W. Peters, projectionist, and Miss L. Archibald, stenographer.

In conclusion, the services rendered and the progress made has not been without growing pains, nor could it have been done without the fortitude and versatility of the Audio-Visual staff, in conjunction with fine co-operation from many of the departments throughout the Hospital.

Motion Pictures, Recreational

	No. of Shows	Average Attendance	Total Attendance
35-mm. presentations at Essondale	186	200	37,200
35-mm. presentations at New Westminster	90	160	14,400
16-mm. presentations at Essondale, Home for Aged, and Colony Farm	510	90	14,900

16-mm. Films Shipped to Other Institutions

Colquitz	104
P.M.H., New Westminster	101
Home for Aged, Vernon	46
Provincial Home, Kamloops	48
Girls' Industrial School	49
Boys' Industrial School	52
Allco Infirmary, Haney	51
16-mm. projection equipment loaned out	187

Motion Pictures, Educational

	No. of Shows	Average Attendance	Total Attendance
16-mm. presentations	120	24	2,880
16-mm. films loaned out	122	20	2,350
16-mm. presentations conducted away from hospital by Audio-Visual staff	5	----	-------

PHOTOGRAPHY

4-by-5 negatives exposed	240
8-by-10 prints produced	550
11-by-14 prints produced	15
2-by-2 transparencies	18
16-mm. motion picture film exposed (feet)	750

RECORDS AND RECORDINGS

Domestic records loaned out	425
Transcribed 30-minute disks of produced music	20
Minutes of recorded material for clinical and miscellaneous purposes	300
Hours of music played either in dining-rooms or on lawns	110

I have, etc.,

G. H. WALKER,
Director.

CHILD GUIDANCE CLINICS

A. L. Crease, Esq., M.D., C.M.,
Director of Mental Hygiene and Psychiatry,
Provincial Mental Hospital, Essondale, B.C.

SIR,—Attached herewith are consolidated summaries of the work done in the Child Guidance Clinics throughout the Province from April 1st, 1949, to March 31st, 1950.

These tables are based on the complete examination or re-examination of each case. Partial examinations are shown in the reports of psychiatric interviews, psychological examinations, etc.

Table 1 shows in summary the general activities of the Clinics. Once again there has been a noticeable increase in the number of Clinics held, in physical examinations, and in consulting conferences. Clinics were held for the first time in Nakusp and Powell River. All other places listed have been visited on previous occasions.

Table 2 shows the number, sex, and status of all cases, both new and repeat, examined at the Clinics. While the total number of cases seen at the Clinics has shown little change there has been an increase in the number of male children with a decrease in the number of adults.

Table 3 is an analysis of the sources of all cases referred to the Clinics. While the largest number of cases are those referred from social agencies there has been a noticeable increase in cases from institutions, schools, juvenile courts, and particularly from private physicians.

Table 4 is a summary of the problems and disorders presented by the new cases seen at the Clinics. This table does not reveal any significant alterations in trends.

Table 5 is an analysis of age-groups and intelligence. It again shows that the majority of cases seen at the Clinics are in the pre-adolescent age-group with average or better-than-average intelligence.

Table 6 shows the number and types of psychological tests carried out at the Clinics

The most prominent trends in the work of the Clinics have been the increase in the number of cases handled exclusively by the Clinics, the increase in psychiatric work in the correctional field, and the increased amount of treatment that is done.

The functions of the Clinic continue as heretofore, namely, diagnosis, treatment, consultation, training, education, and research. Work in all these fields has been carried on with increased vigour.

During the year the Vancouver Clinic was inspected by many visitors. Those from other countries included Moss, of England; Baker, of Australia; Rinne, of Finland; and Yeo, from Hongkong. All were laudatory in their remarks following their investigations.

The increased demands for clinic service emphasize the need for more professional staff. The present staff continue to work to capacity. Each addition to the staff enables the Clinic to increase its service to the individual case. Therapy is an attempt to modify the physical situation, the emotional situation, and the understanding of people in contact with the child, and at the same time an attempt to modify the child by increasing his understanding of his own reactions. This therapy is usually effective, both in relieving the immediate problem and, in all probability, in increasing the child's resistance to the development of symptoms in later difficult situations.

In a certain proportion of cases it is not possible to carry on therapy on an out-patient basis. These unfortunate children show a marked degree of emotional disturbance and are unable to establish an adequate relationship with their parents or selected foster-parents. Their behaviour is beyond the tolerance of their own families, foster-homes, schools, and community. They require in-patient treatment in a special home with a proportionately large, capable, and well-trained staff. This enables each child to be accepted as an individual in his own right; his capacity to participate in procedures designed to help him is appreciated; he is given a relaxed home-like experience where the importance of material things is not stressed but emphasis is placed on flexibility and tolerance. He is given an opportunity to relate and identify himself with individuals whom he can admire and at the same time obtain satisfaction and recognition as a member of the group.

The need for such an observation and treatment home for pre-adolescent children is becoming more urgent.

I would like to express my appreciation of the co-operation of all those who have made it possible for the clinic to function in an adequate and satisfactory manner.

TABLE 1.—SUMMARY OF CLINICS' ACTIVITY, APRIL 1ST, 1949, TO MARCH 31ST, 1950.

	Vancouver	Abbotsford	Alberni	Courtenay	Cranbrook	Duncan	Kamloops	Nakusp	Nanaimo	New Westminster	Penticton	Powell River	Prince George	Prince Rupert	Trail	Vernon	Victoria	Total
Number of clinics held	261	9	1	1	2	1	1	2	11	1	3	1	2	2	2	3	28	331
Physicals	619	34	3	2	7	1	5	7	37	4	11	4	7	6	9	11	98	865
Urinalysis	488	1	—	1	—	—	—	—	5	—	7	2	—	4	—	7	—	515
Playroom observations	231	—	—	—	—	—	—	—		—	—	—	—	—	—	—	—	231
Case conferences	600	37	3	2	6	1	5	7	38	4	11	4	8	5	9	11	101	852
Consulting conferences	225	3	—	3	3	2	—		13	—	7	—	4	1	—	3	7	271
Psychiatric interviews	1,011	59	6	5	14	2	6	10	66	9	20	9	13	8	17	23	183	1,461

TABLE 2.—NUMBER, SEX, AND STATUS OF ALL CASES EXAMINED AT CHILD GUIDANCE CLINIC, APRIL 1ST, 1949, TO MARCH 31ST, 1950.

	Vancouver	Abbotsford	Alberni	Courtenay	Cranbrook	Duncan	Kamloops	Nakusp	Nanaimo	New Westminster	Penticton	Powell River	Prince George	Prince Rupert	Trail	Vernon	Victoria	Total
New cases	574	30	3	1	7	1	4	6	28	4	11	3	7	6	8	9	81	783
Males—																		
Adults	65																1	66
Children	298	16	1	1	5	1	2	4	24	3	8	3	6	5	5	4	44	430
Females—																		
Adults	28																8	36
Children	183	14	2		2		2	2	4	1	3		1	1	3	5	27	250
Repeat cases	206	4		1			1	1	9			1			1	2	20	246
Males—																		
Adults	45								1								1	47
Children	104	3		1			1	1	7			1				2	10	130
Females—																		
Adults	3																3	6
Children	54	1							1						1		6	63
Total cases	780	34	3	2	7	1	5	7	37	4	11	4	7	6	9	11	101	1,029

TABLE 3.—SOURCES OF ALL CASES REFERRED TO CHILD GUIDANCE CLINIC, APRIL 1ST, 1949, TO MARCH 31ST, 1950

Agency or Source	Number of Cases	Total	Percentage Distribution
1. Social agencies	-----	566	55.00
Children's Aid Society	283		
Social Welfare Branch	200		
Catholic Children's Aid Society	31		
Family Welfare and Children's Aid Society	27		
Family Welfare Bureau	13		
City Social Welfare (Victoria)	5		
City Social Service Department (Vancouver)	4		
Y.W.C.A.	1		
Gordon House	1		
C.N.I.B.	1		
2. Institutions	-----	55	5.35
Fairbridge Farm School	14		
New Haven	41		
3. Medical and health agencies	-----	47	4.57
Public health nurses	23		
Children's Hospital	12		
Saanich Health Department	3		
T.B. Social Service Department	2		
Metropolitan Health Unit	2		
Central V.I. Health Unit	1		
Health Department	1		
Child Health Centre, V.G.H.	1		
V.O.N.	1		
School Mental Hygiene Division	1		
4. Schools	-----	101	9.81
Public—			
Teachers	5		
Attendance officer	3		
Other—			
Boys' Industrial School	64		
Girls' Industrial School	18		
Nursery and play schools	3		
Kindergartens	2		
St. Christopher's School	2		
School for the Deaf and Blind	2		
Vancouver College	1		
Vocational Institute	1		
5. Juvenile Court	54	58	5.64
Provincial Probation Officer	4		
6. Adult Court	-----	82	7.97
Adult Probation Officer	3		
Borstal	79		
7. Private physicians	54	54	5.25
8. Parents, relatives, friends, self	59	59	5.73
9. Other	-----	7	0.68
National Employment Service	2		
Speech therapist	2		
Rainbow Christian Fellowship Home	2		
Lawyer	1		
Totals	-----	1,029	100.00

TABLE 4. — PROBLEMS AND DISORDERS PRESENTED BY THE NEW CASES GIVEN FULL EXAMINATION BY CHILD GUIDANCE CLINIC, APRIL 1ST, 1949, TO MARCH 31ST, 1950

	Children		Adults		Total
	M.	F.	M.	F.	
1. Primary behaviour disorders—					
(*a*) Habit disorders—					
Nail-biting	----	----	----	----	----
Thumb-sucking	1	----	----	----	1
Enuresis	7	7	----	----	14
Masturbation	----	3	----	----	3
Tantrums	6	3	----	----	9
Soiling	1	----	----	----	1
Feeding	2	----	----	----	2
Other	----	----	----	----	----
(*b*) Personality disorders—					
Seclusive states	9	2	----	----	11
Depressed states	----	----	----	----	----
Day-dreaming	5	----	----	----	5
Excessive introspection	1	----	----	----	1
Sensitiveness	1	1	----	----	2
Phantasy	3	1	----	----	4
Aggressiveness	6	4	----	----	10
Feeling of inadequacy	1	3	----	----	4
Negativism	1	----	----	----	1
Other	1	6	1	1	9
(*c*) Neurotic disorders—					
Tics and habit spasms	1	----	----	----	1
Sleep-walking	----	----	----	----	----
Stammering	----	----	----	----	----
Overactivity	1	2	----	----	3
Fears	2	2	----	----	4
Nightmares	1	4	----	----	5
Nervousness	2	4	----	----	6
Anxiety	6	----	----	----	6
Other	1	----	----	----	1
(*d*) Conduct disorders—					
Truancy	1	1	----	----	2
Fighting and quarreling	5	1	----	----	6
Stealing	58	5	6	----	69
Destruction of property	1	----	----	----	1
Use of alcohol	----	1	----	1	2
Cruelty	2	----	----	----	2
Disobedience	7	10	----	1	18
Setting fires	1	----	----	----	1
Untruthfulness	3	1	----	----	4
Sex offences	4	10	1	3	18
Vagrancy	1	----	----	----	1
Running away	3	5	----	----	8
Staying out late	3	5	----	----	8
Breaking and entering	8	----	----	----	8
Bullying	1	----	----	----	1
Assault	2	----	----	----	2
Other	----	----	----	----	----
2. Psychotic and prepsychotic—					
Manic depressive	----	----	----	----	----
Schizophrenia	1	----	1	1	3
With juvenile general paresis	----	----	----	----	----
With epidemic encephalitis	----	----	----	----	----
Undifferentiated	----	----	----	2	2
Other	----	1	----	----	1
3. Psychoneurosis and neurosis—					
Hysterical type	----	----	1	1	2
Psychosthenic type	----	----	----	----	----
Anxiety type	----	----	----	----	----
Other	----	----	----	----	----
4. Convulsive disorders—					
Epilepsy	2	1	----	----	3
Other	1	----	----	----	1
5. Psychopathic personality	1	----	2	1	4
6. Educational disability	3	----	----	----	3
(*a*) Associated with dull normal or border-line intelligence	12	4	----	----	16
(*b*) Special mental disability—					
Writing	----	----	----	----	----
Reading	13	----	----	----	13
Arithmetic	----	----	----	----	----
Other	----	----	----	----	----

TABLE 4. — PROBLEMS AND DISORDERS PRESENTED BY THE NEW CASES GIVEN FULL EXAMINATION BY CHILD GUIDANCE CLINIC, APRIL 1ST, 1949, TO MARCH 31ST, 1950—*Continued*

	Children		Adults		Total
	M.	F.	M.	F.	
7. Behaviour disorder associated with somatic disorder—					
(*a*) Habit disorder	-----	-----	-----	-----	-----
(*b*) Personality disorder	2	1	-----	-----	3
(*c*) Conduct disorder	-----	1	-----	-----	1
8. Mental deficiencies—					
(*a*) Famelial	-----	-----	-----	-----	-----
(*b*) Mongolism	5	-----	-----	-----	5
(*c*) With developmental cranial anomalies	-----	-----	-----	-----	-----
(*d*) With congenital spastics	8	3	-----	-----	11
(*e*) Post-infectional	1	-----	1	-----	2
(*f*) Post-traumatic	2	2	-----	-----	4
(*g*) With epilepsy	3	-----	-----	-----	3
(*h*) With endocrine disorders	1	1	-----	-----	2
(*i*) With other organic nervous disorders	-----	1	-----	1	2
(*j*) Undifferentiated	17	12	1	4	34
(*k*) Other forms	-----	-----	-----	-----	-----
9. Mental retardation	6	3	-----	1	10
10. No ascertained mental deviation—					
(*a*) Problem of physical health and development	1	1	-----	1	3
(*b*) Spastics	3	2	-----	-----	5
(*c*) Speech problems	2	2	-----	-----	4
(*d*) Sight problems	2	-----	-----	-----	2
(*e*) Hearing problems	1	-----	-----	-----	1
(*f*) School problems	-----	1	-----	-----	1
(*g*) Social problems	-----	-----	-----	-----	-----
(1) Placement	19	12	-----	-----	31
(2) Adoption	120	85	-----	-----	205
(3) Unmarried mother	-----	3	-----	21	24
(4) Married mother	-----	-----	-----	3	3
(5) Other	-----	-----	-----	-----	-----
(*h*) Unascertained	-----	-----	-----	-----	-----
(*i*) Normal personality	9	7	-----	-----	16
11. Vocational guidance	4	1	3	9	17
12. Borstal	13	-----	46	-----	59
Totals	411	225	63	51	750

TABLE 5.—CHART COMPARING AGES WITH INTELLIGENCE QUOTIENTS OF ALL NEW CASES SEEN AT CHILD GUIDANCE CLINIC FROM APRIL 1ST, 1949, TO MARCH 31ST, 1950.

Males

Intelligence Quotient	Age in Years									
	1–4	5–9	10–14	15–19	20–24	25–29	30–34	35–39	40+	Total
0–19	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----
20–49	-----	11	4	-----	-----	-----	-----	1	-----	16
50–69	4	12	7	6	1	-----	-----	-----	-----	30
70–79	3	8	14	5	1	-----	-----	-----	-----	31
80–89	20	21	15	17	-----	-----	-----	-----	-----	73
90–99	26	23	32	20	4	-----	-----	-----	-----	105
100–109	35	21	27	25	5	1	-----	-----	-----	114
110–129	40	14	10	30	4	-----	-----	-----	-----	98
130–139	4	1	1	3	1	-----	-----	-----	-----	10
140+	2	2	2	-----	-----	-----	-----	-----	-----	6
Totals	134	113	112	106	16	1	-----	1	-----	483

Females

0–19	-----	-----	-----	-----	-----	-----	-----	-----	-----	-----
20–49	4	5	4	1	1	1	-----	-----	1	17
50–69	4	4	3	4	-----	-----	-----	-----	-----	15
70–79	3	-----	3	4	4	1	1	-----	-----	16
80–89	6	9	5	13	2	1	1	-----	-----	37
90–99	12	12	4	11	2	1	1	3	-----	46
100–109	22	15	11	14	2	2	1	-----	-----	67
110–129	30	10	9	6	-----	1	1	-----	1	58
130–139	6	-----	1	-----	1	-----	-----	-----	-----	8
140+	2	-----	1	-----	-----	-----	-----	-----	-----	3
Totals	89	55	41	53	12	7	5	3	2	267

TABLE 6.—CHILD GUIDANCE CLINIC, PSYCHOLOGISTS' ANNUAL REPORT, 1949–50

Test	Vancouver	Borstal (Oakalla)	New Haven	Abbotsford	Alberni	Courtenay	Cranbrook	Duncan	Kamloops	Nakusp	Nanaimo	New Westminster	Penticton	Powell River	Prince George	Prince Rupert	Trail	Vernon	Victoria	Total
Stanford Binet	450	----	----	25	3	2	4	1	5	7	34	4	10	4	7	4	9	11	76	656
Wechsler-Bellevue	125	55	4	3	----	----	----	----	----	----	3	----	2	----	2	1	----	----	12	207
Cattell Infant Intelligence	54	----	----	1	----	----	2	----	----	----	----	----	----	----	----	----	----	----	1	58
Porteus Maze	4	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	4
Chicago Non-verbal	3	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	3
Goodenough Intelligence	3	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	3
Progressive Matrices	3	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	3
Revised Beta	1	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	1
Bell Adjustment Inventory	1	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	1
Bernreuter Personality Inventory	18	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	4	22
Brown Personality	6	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	6
California Personality	199	----	----	10	----	2	3	----	4	4	26	4	4	4	----	4	3	4	32	303
Fables Test	11	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	2	13
Draw a Person	77	37	6	----	----	----	----	----	----	----	----	----	1	----	----	----	----	1	5	127
Mental Health Analysis	57	----	32	1	----	----	----	----	----	----	----	----	2	----	----	----	----	----	2	94
Minnesota Multiphasic	14	5	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	3	22
P-S Experience Blank	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	2	2
Shipley Hartford	1	55	4	----	----	----	----	----	----	----	----	----	1	----	----	----	----	----	----	61
Thematic Apperception	14	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	2	16
Make a Picture Story	2	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	2
Detroit Reading	11	----	----	----	----	----	----	----	----	----	----	----	2	----	----	----	----	1	1	15
Diagnostic Reading	2	----	----	1	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	3
Dominion Reading	10	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	10
Gray's Oral Reading	1	----	----	1	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	2
Haggerty Reading	52	----	----	1	----	----	----	----	2	1	3	2	4	4	1	----	----	4	11	85
Lee-Clark Reading Readiness	13	----	----	2	----	----	----	----	----	2	----	----	----	----	----	----	----	----	1	18
Michigan Speed of Reading	1	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	1
Monroe Reading	113	----	----	7	----	1	3	----	1	----	15	2	----	----	1	4	3	1	23	174
Ayres Spelling	2	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	2
Clapp-Young Arithmetic	1	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	1
Stanford Arithmetic	6	----	----	----	----	----	----	----	----	----	----	----	1	----	----	----	----	----	2	9
Woody-McCall Arithmetic	1	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	1
Stanford Achievement Battery	1	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	1
Wide Range Achievement	1	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	1
Brainard Occupational Inventory	1	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	1
California Occupational Interest	67	----	32	2	----	----	----	----	1	----	----	----	1	----	----	1	----	----	7	111
Kuder Preference Record	18	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	18
Strong Vocational Interest	2	----	----	----	----	----	----	----	----	----	----	----	1	----	----	----	----	----	1	4

TABLE 6.—CHILD GUIDANCE CLINIC, PSYCHOLOGISTS' ANNUAL REPORT, 1949–50—*Continued*

Test	Vancouver	Borstal (Oakalla)	New Haven	Abbotsford	Alberni	Courtenay	Cranbrook	Duncan	Kamloops	Nakusp	Nanaimo	New Westminster	Penticton	Powell River	Prince George	Prince Rupert	Trail	Vernon	Victoria	Total
Differential Aptitudes—																				
Verbal Reasoning	1	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	1
Abstract Reasoning	1	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	1
Space Relations	2	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	2
Mechanical Reasoning	1	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	1
Language Usage	1	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	1
Minnesota Clerical	7	----	----	----	----	----	----	----	----	----	----	----	1	----	----	----	----	----	----	8
N.I.I.P. Clerical	4	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	1	5
Turse Shorthand	2	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	2
Bennett Mechanical	11	----	----	----	----	----	----	----	1	----	----	----	1	----	----	----	----	----	2	15
McQuarrie Mechanical	1	----	----	----	----	----	----	----	----	----	----	----	1	----	----	----	----	----	----	2
Minnesota Paper Form Board	5	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	2	7
Bennett Assembly	1	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	1
Crawford Tri-dimensional	5	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	5
Minnesota Rate of Manipulation	2	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	2
Purdue Pegboard	17	----	----	2	----	----	----	----	----	----	1	----	1	----	----	----	----	----	3	24
Tweezer Dexterity	10	----	----	----	----	----	----	----	----	----	1	----	----	----	----	----	----	----	2	13
Meier Art Judgment	1	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	1
Stanford Scientific Aptitude	1	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	1
Telebinocular	18	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	1	19
Special Observation	9	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	1	10
Interviews	26	29	8	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	63
Reading Tuition	89	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	----	89
Reports Written	656	52	36	29	3	2	6	1	5	7	37	4	11	4	7	5	9	11	91	976
Conferences	779	55	25	33	3	2	6	2	5	7	36	4	13	4	11	5	9	11	78	1,088

I have, etc.,

ULTAN P. BYRNE, M.D., D.P.H.,
Director.

SOCIAL SERVICE REPORT

REPORT OF PSYCHIATRIC SOCIAL WORKERS' PARTICIPATION IN PROVINCIAL MENTAL HOSPITALS AND HOMES FOR THE AGED

Members of the psychiatric social workers' team attached directly to the Provincial Mental Hospitals and Homes for the Aged have, as in previous years, endeavoured to work as part of the team assisting in the patients' treatment. In order to do this, the psychiatric social worker's headquarters must be at the hospital, with contacts in the community. Few patients exist by themselves but as a part of a family unit within that economic and cultural confines or environment. The human relation factor is too often ignored or insufficiently considered in the quest for a solution and the efficiency of hospital treatment may easily be undermined by poorly formulated discharge plans.

The social workers attached to the hospital and working with patients and families of Greater Vancouver have the advantage of keeping the home and hospital patient closer toegther. The frequent visits of relatives to the hospital and their first-hand contact with the physician is also an advantage. For the patient who comes to the hospital from a more remote area every effort must be made to supplement for the latter advantages. For this reason, in the last year, we have tried to improve our contact with these patients through more frequent ward visits with the patient and closer contact with the attending physician and more studied correspondence with the Provincial Welfare field staff, who have responded by forwarding the required social history with much greater speed than formerly, and have also shown better-formulated family case-work plans. About 50 per cent of the patients assigned to the Social Service Department come from outside of Greater Vancouver.

It must be remembered, however, that the crucial ingredient for a successful programme of this sort is well-trained, experienced, able, and devoted personnel. Mediocre personnel will not get the job done and are almost bound to waste money in poor allocation of time, not overlooking the fact of the poor direction that may be given to the field worker carrying out the plan in the area from which the patient has come and to which he must return.

With added supervisory personnel appointed this last year, there has been a smoother functioning of the department and a better evaluation of duties designed to raise the level of efficiency. In order to broaden our practical teaching, we have held some conferences at the hospital with outside agencies—Children's Aid Society, etc.—and it has been found that each of the collaborating social workers taking part has contributed to the better understanding of the patient and his family needs as well as assisting the hospital team to broaden their horizons.

There has been twelve clinics for the University of British Columbia social-work students. These were given practical demonstration of Mental Hospital social services. Two students from the University of British Columbia social science course received their field-work instruction at the Hospital. The student nurses of the Provincial Mental Hospital were given lectures by a member of the Social Service Department. Public health nurses-in-training each spent a day in our department for orientation purposes. There has also been social workers assigned from the Social Welfare Branch for orientation. Time spent in any of these assignments is felt to give ample return, for without team work from all agencies the work of this department would indeed be severely curtailed.

The advantages of having a resident rehabilitation centre for women patients cannot be overestimated. There has been a great satisfaction in the progress made by patients who have had the extra help afforded by the personal attention given them in more normal

surroundings and where they can take their first steps into the community accompanied by understanding and definite planning. The time involved by the Social Service Department in this project is well justified. The Social Service staff has been particularly fortunate in having many opportunities for continual education afforded by the other departments of the Hospital. The psychiatrists on the staff have that happy faculty of teaching through individual cases and all workers in their contacts have had the benefit. There is that spirit of team play which makes for easy and continual educational benefits.

In going over the year's work of the Social Service Department, we feel very humble, because if it were not for the team play within the Hospital and of the community our efforts would be infinitesimal.

Provincial Mental Hospital and Home for the Aged Statistics, April 1st, 1949, to March 31st, 1950

Number of New Cases Referred to Social Service Department

In Vancouver	630	
Out of Vancouver	774	
		1,404

The number of new admissions was increased by 154 during the past fiscal year.

Disposition

Discharged on probation—		
In Vancouver	217	
Out of Vancouver	279	
		496

This is an increase of 21 cases which were referred for probation services.

Report of Social Service Work Carried Out by Members of the Social Service Department at Essondale

Initial interviews to obtain social histories	3,564
Subsequent case-work interviews with patients, families, doctors, and other social agencies during hospitalization of patients	1,051
Case-work interviews for the purpose of rehabilitation, including follow-up case-work services for patients discharged on probation	2,122

Out-of-town Supervisory Service by Mail

Letters to the Provincial field staff requesting social histories and probation visits, and of a general supervisory nature	2,527	
Letters to other social agencies in and out of British Columbia	551	
Social histories, probation, and other reports, and letters of a general consultative nature received from Provincial field staff	1,538	
Correspondence received from other social agencies in and out of British Columbia	458	
		5,074

Orientation periods for twenty field service staff, twelve public health nurses, one postgraduate nurse, and one council for handicapped.

PROVINCIAL MENTAL HOSPITAL AND HOME FOR THE AGED STATISTICS, APRIL 1ST, 1949, TO MARCH 31ST, 1950—*Continued*

Special Assignments

Applications taken for old-age pension for patients resident in Provincial Homes for the Aged	400
Ward rounds and medical staff clinics attended by members of the Social Service Department	77
Other special assignments, including conferences with other agencies, lectures to nurses, in-service training groups, and community groups	354
Training of university students—	
Field work, students placed	2
Teaching clinics held at the hospital for social service students from University of British Columbia	8

REPORT OF SOCIAL WORKERS' PARTICIPATION IN THE CHILD GUIDANCE CLINICAL SERVICES

In the last year it has been found, as with most Child Guidance Clinics as they age and progress, that a greater percentage of their clientele come from other than social agencies. This has been true of our Clinics. In the last year there has been a 30-per-cent increase in referral from private doctors. In most of these cases it means that the total case-work falls to the psychiatric social worker attached to the Clinic. This is time consuming but much more satisfactory, as treatment of the case is initiated in the very first clinical contact and there is the opportunity to prepare the parents and the child for the clinical examination. There is timing of the examination. Because a case is referred does not always mean that either the parents or the child is ready to fully co-operate. Changes cannot be imported ready-made from the outside but parents have to be ready and willing to make the effort themselves or there is a waste of expensive Government services. Good preparation leads to good participation for both the child and parents and also leads to accepting treatment, which is also carried out through the social worker from the psychiatrist and other members of the clinical team.

Because of the above increase in doctor referrals, the Clinic has been unable to accept all social-agency referrals. However, with the added team in the correctional field more time will be available for these cases.

A full team in the correctional field has made for more time for examination of cases falling into that category and more consistent follow through. As part of the duties of the clinical team a social worker has taken on a special role with the Boys' Industrial School where, as a temporary measure to assist in their growing programme, a Clinic case-work supervisor has been supervising in the school's social-work department and participating in their staff meetings.

The staff of social workers at the Vancouver Clinic has been increased but, while at the end of the fiscal year we had six workers against four workers at the beginning, the actual increase in regard to time on staff has been less than one worker. The supervisor was loaned and one other is on educational leave. However, the additional staff during the latter part of the year, together with the increase in staff of the other professions and team workers, has made it possible to organize our work more satisfactorily and give better service to a larger number of clients. This is clearly indicated by the yearly statistics.

The field training of two male students of social work during their university term was time consuming but profitable to the Clinic, in that it helped to bridge the Clinic's

urgent need for a male case-worker. It is hoped that this need may be filled in the near future.

The services of the Travelling Clinic have been expanded which, of necessity, calls for more social-work participation on the team. We hope this year we will be able to expand in this area. Unfortunately, due to other more pressing demands, a minimum of social workers' time was devoted to the Travelling Clinic work.

Evaluation of the total programme has to be made from time to time in order to avoid any one problem from receiving more than its alloted prominence. In order to do this effectively, the whole staff must be alert and come together to make a sampling survey. But some of the most effective clinical work that can be done is often of a character that is so diffuse in its influence to the community that it cannot be traced to any one case but is a composite of the whole programme.

In a community public service, allied services ask for assistance in evaluating their client. In this last year, the Spastic Paralysis Society, as well as others, has asked the Clinic's help in studying their children. The spade work and preparation for Child Guidance Clinic examination falls on the psychiatric social worker but, because of the often unusual individual capabilities of the children, this is a service well worth while.

If the psychiatric social worker were not a participating part of the clinical team, they alone could not enjoy the promising beginning and the additional progress that is in sight.

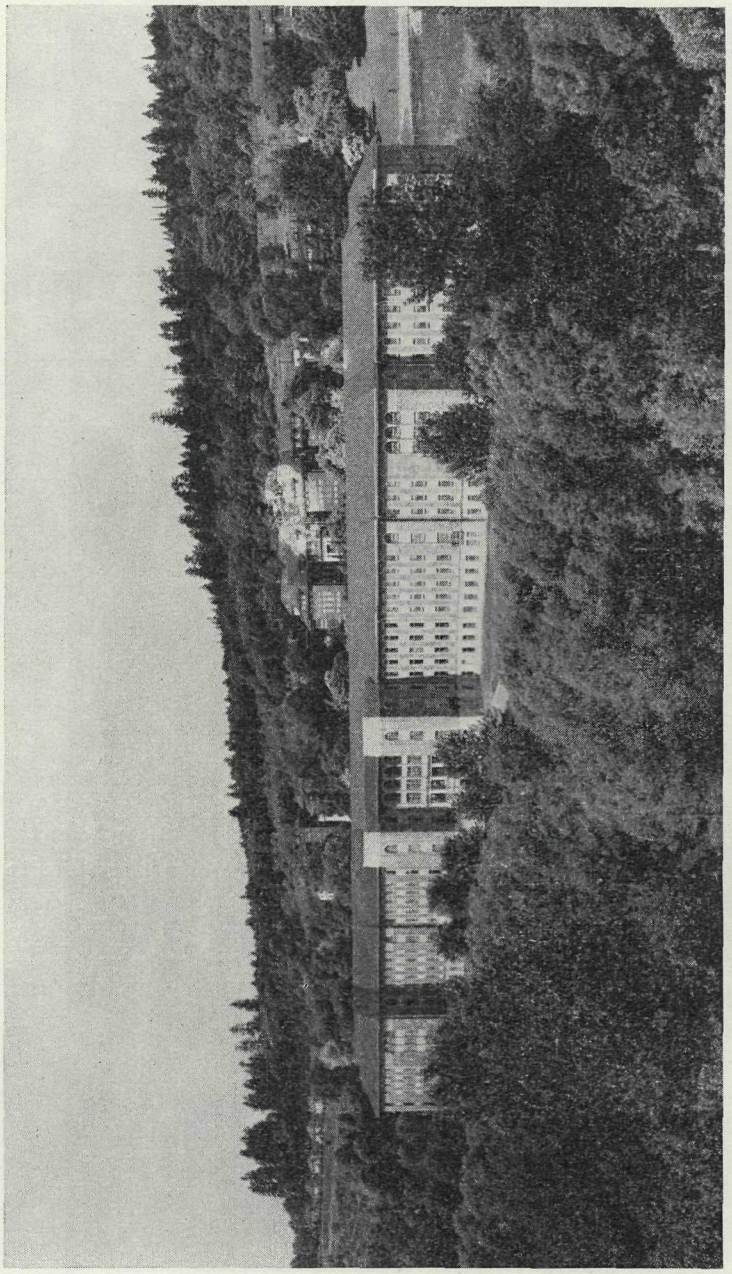
The Clinical Director's report should be read in conjunction with this report, as psychiatric social workers are only a part of the team which participates in the work of the Child Guidance Clinics.

STATISTICAL REPORT OF THE PSYCHIATRIC SOCIAL WORKERS, PROVINCIAL CHILD GUIDANCE CLINICS, FOR THE FISCAL YEAR APRIL 1ST, 1949, TO MARCH 31ST, 1950

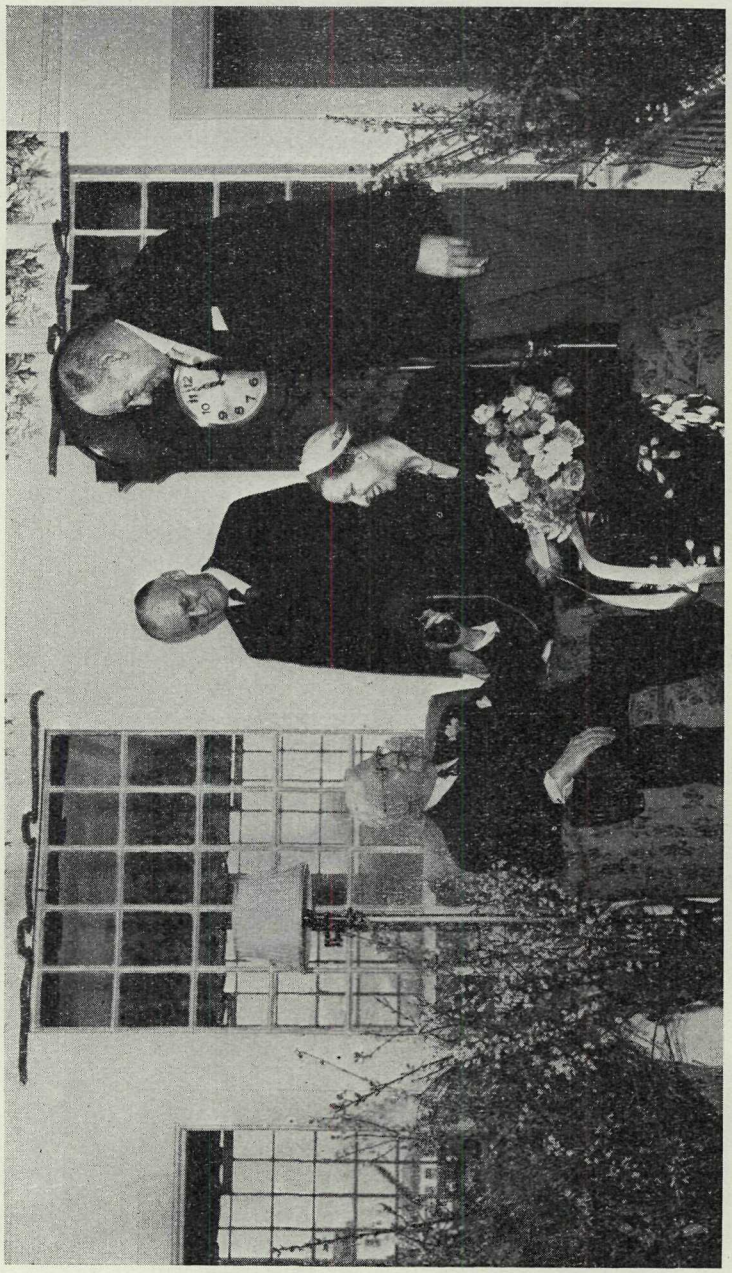
	Vancouver	Victoria	1949–50 Total	1948–49 Total	Increase
Case-work services—Total number of cases brought forward from previous fiscal year	84	34	118	98*	Per Cent 20
Private case-referrals—					
New	168	67	235	150	57
Reopened in present fiscal year	10	8	18	25	
Reopened from previous fiscal year	15	9	24		
Total intake	193	84	277	175	58
Total cases carried (84+193—10)	267	110	377	262	43
Cases closed during fiscal year	138	41	179	158	
Cases carried over to fiscal year 1950–51	129	69	198	115†	72
Total number case-work interviews with and regarding clients	2,722	937	3,659	1,540	137
Conferences attended in agency diagnostic service	868	90	958	1,017	—6
Conferences attended on private cases	158	57	215	239	77
Consultation with psychiatrist on private cases	183	25	208		
Periods of supervision	432	144	576	298	93
Persons seen for orientation	106	28	.....	71	88
Other interviews and contacts	87	99	186	186	Same
Travelling clinics (total)	36	7	43	32	34
Cases given service	197	26	223	150	49

* Last year's increase in cases.
† This year's increase in cases.

J. F. KILBURN,
Provincial Supervisor, Psychiatric Social Work.



Crease Clinic of Psychological Medicine, Essondale, B.C.



Reception in honour of Dr. and Mrs. A. L. Crease, March 10th, 1949.
Dr. Crease, Dr. Gee, Mrs. Crease, Mr. Pennington.

STATISTICAL TABLES

Table No. 1.—Showing the Operations of the Hospitals—Essondale, New Westminster, and Saanich—from April 1st, 1949, to March 31st, 1950

Movement of Population	Male	Female	Total	Total		
				Male	Female	Total
In residence, Essondale, March 31st, 1949	1,873	1,559	3,432			
In residence, New Westminster, March 31st, 1949	368	265	633			
In residence, Saanich, March 31st, 1949	290		290			
On probation, carried forward from 1948–49, Essondale	100	116	216			
On probation, carried forward from 1948–49, New Westminster	7	3	10			
On probation, carried forward from 1948–49, Saanich	2	.....	2			
On escape, carried forward from 1948–49, Essondale	.....	.....	.....			
On escape, carried forward from 1948–49, New Westminster	.....	.....	.....			
On escape, carried forward from 1948–49, Saanich	1	.....	1			
				2,641	1,943	4,584
Admitted during the year 1949–50—						
By ordinary forms	570	468	1,038			
By urgency forms	39	20	59			
By voluntary forms	213	84	297			
From the Yukon	6	2	8			
By warrant	.....	.....	.....			
By Order in Council	12	1	13			
				840	575	1,415
Total under treatment, Essondale, New Westminster, and Saanich, April 1st, 1949, to March 31st, 1950	.....	.....	.....	3,481	2,518	5,999
Discharged during period of April 1st, 1949 to March 31st, 1950—						
(*a*) From Essondale—						
As recovered	102	92	194			
As improved	148	189	337			
As unimproved	170	75	245			
Without psychosis	164	32	196			
Not insane	.....	.....	.....			
On probation and still out	96	105	201			
Escaped, but not discharged	3	1	4			
Died	123	67	190			
	806	561	1,367			
(*b*) From New Westminster—						
As improved	1	.....	1			
As unimproved	4	1	5			
On probation and still out	3	1	4			
Escaped, but not discharged	.....	.....	.....			
Died	4	2	6			
	12	4	16			
(*c*) From Saanich—						
As recovered	1	.....	1			
As improved	2	.....	2			
As unimproved	1	.....	1			
On probation and still out	3	.....	3			
Escaped, but not discharged	1	.....	1			
Died	6	.....	6			
	14	.....	14			
Total discharged from Essondale, New Westminster, and Saanich	.....	.....	.....	832	565	1,397
Total in residence, Essondale, New Westminster, and Saanich	.....	.....	.....	2,649	1,953	4,602
Essondale—						
Total on books, March 31st, 1949	1,973	1,675	3,648			
Admissions during 1949–50	840	575	1,415			
Received from New Westminster	15	5	20			
Received from Saanich	5	.....	5			
				2,833	2,255	5,088
Discharged during 1949–50	806	561	1,367			
Transferred to New Westminster	42	45	87			
Transferred to Saanich	17	.....	17			
				865	606	1,471
Total in residence, Essondale, March 31st, 1950	.....	.....	.....	1,968	1,649	3,617

TABLE NO. 1.—SHOWING THE OPERATIONS OF THE HOSPITALS—ESSONDALE, NEW WESTMINSTER, AND SAANICH—FROM APRIL 1ST, 1949, TO MARCH 31ST, 1950—*Continued*

Movement of Population	Male	Female	Total	Total		
				Male	Female	Total
New Westminster—						
Total on books, March 31st, 1949	375	268	643			
Received from Essondale	42	45	87			
				417	313	730
Discharged during 1949–50	12	4	16			
Returned to Essondale	15	5	20			
				27	9	36
Total in residence, New Westminster, March 31st, 1950	.....	.....	.....	390	304	694
Saanich—						
Total on books, March 31st, 1949	293	.....	293			
Received from Essondale	17	.....	17			
Received from New Westminster	.....	.....	.....			
				310	.....	310
Discharged during 1949–50	14	.....	14			
Returned to Essondale	5	.....	5			
				19	.....	19
Total in residence, Saanich, March 31st, 1950	.....	.....	.....	291	.....	291
Total in residence, Essondale, March 31st, 1950	1,968	1,649	3,617			
Total in residence, New Westminster, March 31st, 1950	390	304	694			
Total in residence, Saanich, March 31st, 1950	291	.....	291			
Grand total in residence, Essondale, New Westminster, and Saanich, March 31st, 1950	.....	.....	.....	2,649	1,953	4,602

Daily average population	4,486.53
Percentage of discharges on admissions (not including deaths)	69.47
Percentage of recoveries on admissions	13.71
Percentage of deaths on whole number under treatment	3.37

TABLE NO. 2.—SHOWING IN SUMMARY FORM THE OPERATIONS OF THE HOSPITAL SINCE ITS INCEPTION

Year	Admissions	Discharges		Deaths	Number Resident at the Close of Each Year	Increase	Decrease	Whole Number Treated	Percentage of Recoveries to Admissions	Percentage of Discharges to Admissions (Deaths Excluded)	Percentage of Deaths to Whole Number under Treatment
		Recovered	Not Recovered								
1872	18	1	.....	1	16	.....	.....	18	5.55	5.55	5.55
1873	15	10	2	5	14	.....	2	31	66.66	80.00	16.12
1874	12	4	.....	3	19	5	.....	26	33.33	33.33	11.53
1875	29	3	3	10	32	13	.....	48	10.34	26.89	20.83
1876	22	11	3	5	35	3	.....	54	50.00	63.63	9.35
1877	14	4	4	3	38	3	.....	49	28.57	78.57	6.12
1878	16	7	3	8	36	.....	2	54	43.75	62.50	16.16
1879	18	4	1	8	41	5	.....	54	22.22	27.77	14.81
1880	17	5	.....	5	48	7	.....	58	29.41	29.41	8.62
1881	13	5	3	5	48	.....	.....	61	38.46	61.54	8.19
1882	7	3	1	2	49	1	.....	55	42.85	57.14	3.63
1883	8	4	1	3	49	.....	.....	57	50.00	62.50	5.26
1884	10	2	4	2	51	2	.....	59	20.00	60.00	3.33
1885	20	5	.....	5	61	10	.....	71	25.00	25.00	6.94
1886	27	10	6	6	66	5	.....	88	37.03	59.25	6.81
1887	36	15	5	5	77	11	.....	102	41.66	55.55	4.80
1888	26	12	6	3	82	5	.....	103	46.15	69.23	2.87
1889	41	14	5	4	100	18	.....	123	34.15	46.34	3.25
1890	52	17	6	12	117	17	.....	152	32.69	44.23	7.64
1891	49	19	4	20	123	6	.....	166	38.77	46.94	11.69

TABLE NO. 2.—SHOWING IN SUMMARY FORM THE OPERATIONS OF THE HOSPITAL SINCE ITS INCEPTION—*Continued*

Year	Admissions	Discharges		Deaths	Number Resident at the Close of Each Year	Increase	Decrease	Whole Number Treated	Percentage of Recoveries to Admissions	Percentage of Discharges to Admissions (Deaths Excluded)	Percentage of Deaths to Whole Number under Treatment
		Recovered	Not Recovered								
1892	52	17	10	13	135	12	.....	175	32.69	51.92	6.95
1893	44	14	18	14	133	.....	2	179	31.81	72.72	7.60
1894	80	13	19	19	162	29	.....	213	16.25	40.00	8.92
1895	62	29	11	20	164	2	.....	224	46.77	64.51	8.92
1896	64	23	25	9	171	7	.....	228	35.93	75.00	3.94
1897	74	20	8	14	203	32	.....	246	27.03	37.83	5.69
1898	81	27	13	19	221	18	.....	285	33.33	49.38	6.66
1899	101	31	32	21	234	13	.....	327	30.69	62.37	6.42
1900	113	38	27	29	258	24	.....	356	33.63	57.52	8.14
1901	115	40	20	25	284	26	.....	377	34.78	52.17	6.63
1902	121	30	31	25	311	27	.....	413	24.79	50.41	6.06
1903	139	38	37	26	349	38	.....	466	27.34	53.96	5.57
1904	115	46	26	26	321	.....	28	480	40.00	62.61	5.42
1905	123	43	33	27	348	27	.....	505	33.33	61.78	5.34
1906	150	36*	43	28	388	43	.....	552	23.03	52.06	5.04
1907	221	48	43	39	461	73	.....	666	21.30	41.20	5.08
1908	230	68*	56	57	507	46	.....	765	28.30	53.90	7.44
1909	232	73†	77	40	536	29	.....	816	31.00	64.60	6.40
1910	280	84	82	41	595	48	.....	896	30.00	59.28	4.57
1911	332	67‡	114	60	690	105	.....	1,034	19.57	54.42	5.83
1912	375	74*	128	76	752	62	.....	1,065	18.90	53.80	7.02
1913	380	90§	146	67	919	167	.....	1,264	22.63	62.10	5.30
1914	402	58	126	74	1,027	108	.....	1,364	14.43	45.77	5.43
1915	332	83	91	89	1,090	63	.....	1,437	25.00	52.41	6.19
1916	353	73†	96	80	1,205	115	.....	1,527	20.68	47.87	5.24
1917	371	88	78	106	1,301	96	.....	1,650	23.72	44.74	6.42
1918	375	75	95	132	1,347	46	.....	1,753	20.00	45.33	7.47
Jan. 1, 1919, to March 31, 1920	574	116	221	132	1,458	111	.....	2,025	20.20	58.71	6.51
1920–1921	489	88	173	122	1,566	108	.....	2,043	14.17	72.60	5.97
1921–1922	478	96	178	114	1,649	83	.....	2,137	20.08	57.32	5.33
1922–1923	438	91	167	133	1,697	48	.....	2,180	20.77	59.36	6.10
1923–1924	447	84†	121	163	1,784	87	.....	2,234	18.56	64.20	7.25
1924–1925	461	63	242	138	1,884	100	.....	2,327	13.66	66.16	5.93
1925–1926	475	57‖	240	142	1,995	111	.....	2,434	12.00	62.53	5.83
1926–1927	494	76§	171	161	2,125	130	.....	2,565	15.38	50.00	6.27
1927–1928	542	75*	252	147	2,269	144	.....	2,743	13.28	60.33	5.36
1928–1929	543	92†	294	181	2,347	78	.....	2,914	16.76	71.07	6.21
1929–1930	602	118*	311	223	2,411	64	.....	3,063	19.10	71.26	7.28
1930–1931	632	70*	235	191	2,550	139	.....	3,148	10.60	64.24	6.06
1931–1932	562	58¶	299	181	2,676	126	.....	3,214	10.32	63.52	5.63
1932–1933	635	44§	323	195	2,824	148	.....	3,390	6.92	58.42	5.75
1933–1934	610	61‡	309	200	2,960	136	.....	3,530	10.00	60.65	5.66
1934–1935	653	71*	349	321	3,080	120	.....	3,721	10.87	64.32	5.94
1935–1936	679	63*	304	291	3,180	100	.....	3,838	9.27	54.05	7.58
1936–1937	793	78‡	300	268	3,301	121	.....	4,067	9.96	63.60	6.59
1937–1938	834	74	330	207	3,487	186	.....	4,255	8.87	67.30	4.86
1938–1939	827	72‡	345	208	3,612	125	.....	4,471	8.71	78.72	4.65
1939–1940	869	111**	455	230	3,710	98	.....	4,713	11.39	88.50	4.88
1940–1941	864	107¶	410	254	3,836	126	.....	4,781	12.38	79.97	5.31
1941–1942	834	71††	400	255	3,902	66	.....	4,843	8.51	56.46	6.54
1942–1943	803	91‡‡	443	260	3,925	23	.....	4,919	11.32	66.50	5.31
1943–1944	840	87	423	309	3,960	35	.....	4,965	10.36	61.66	6.02
1944–1945	822	96§§	377	300	4,019	59	.....	4,960	10.46	58.39	6.04
1945–1946	834	117††	352	240	4,110	91	.....	5,014	14.02	57.43	5.84
1946–1947	880	97§§	496	238	4,151	41	.....	5,174	11.02	68.18	4.59
1947–1948	1,111	124¶¶	560	240	4,269	118	.....	5,447	11.34	63.64	4.40
1948–1949	1,260	137‖‖	748	209	4,355	86	.....	5,758	10.87	76.59	3.63
1949–1950	1,415	195	787	202	4,602	247	.....	5,999	13.78	69.40	3.37

* Three not insane. † One not insane. ‡ Two not insane. § Four not insane. ‖ Six not insane.
¶ Five not insane. ** Twelve not insane. †† Ten not insane. ‡‡ Eight not insane. §§ Seven not insane.
¶¶ Three not insane; 196 without psychosis. ‖‖ Two not insane; seventy-eight without psychosis.

Table No. 3.—Showing the Total Number of Admissions, Discharges, and Deaths from April 1st, 1949, to March 31st, 1950

Months	Admissions			Discharges			Deaths		
	Male	Female	Total	Male	Female	Total	Male	Female	Total
1949									
April	60	49	109	44	32	76	13	3	16
May	57	43	100	45	32	77	9	7	16
June	73	52	125	42	26	68	15	6	21
July	86	51	137	42	28	70	6	5	11
August	66	60	126	43	40	83	9	10	19
September	46	56	102	51	24	75	11	2	13
October	71	51	122	44	32	76	14	3	17
November	93	46	139	65	32	97	6	2	8
December	66	42	108	53	34	87	10	10	20
1950									
January	61	30	91	29	30	59	18	9	27
February	73	46	119	77	40	117	15	3	18
March	88	49	137	58	39	97	7	9	16
Totals	840	575	1,415	593	389	982	133	69	202

Table No. 4.—Showing the Civil State of Patients Admitted from April 1st, 1949, to March 31st, 1950

Civil State	Male	Female	Total
Married	239	262	501
Single	412	157	569
Divorced	40	22	62
Widowed	59	87	146
Separated	88	47	135
Unknown	2	.....	2
Totals	840	575	1,415

TABLE NO. 5.—SHOWING RELIGIOUS DENOMINATIONS OF PATIENTS ADMITTED FROM APRIL 1ST, 1949, TO MARCH 31ST, 1950

Religious Denominations	Male	Female	Total
Agnostic	1	1	2
Apostolic	1	.....	1
Athiest	.....	1	1
Buddhist	2	2	4
Christian Science	4	3	7
Confucian	3	.....	3
Congregationalist	1	.....	1
Doukhobor	4	4	8
Evangelist	1	.....	1
Greek Catholic	2	.....	2
Greek Orthodox	14	4	18
Hebrew	3	.....	3
Hindu	1	.....	1
Jehovah Witness	6	4	10
Lutheran	55	33	88
Mennonite	5	7	12
Nazarene	.....	1	1
None	6	2	8
Pentecostal	3	1	4
Plymouth Brethren	1	1	2
Protestant	537	404	941
Roman Catholic	167	98	265
Rosicrucian	1	.....	1
Russian Orthodox	.....	2	2
Salvation Army	5	3	8
Seventh-day Adventist	2	1	3
Sikh	4	.....	4
Spiritualist	.....	1	1
Theosophist	1	.....	1
Unity	.....	1	1
Unknown	10	1	11
Totals	840	575	1,415

TABLE NO. 6.—SHOWING THE DEGREE OF EDUCATION OF THOSE ADMITTED FROM APRIL 1ST, 1949, TO MARCH 31ST, 1950

Degree of Education	Male	Female	Total
Superior	20	7	27
Good	160	153	313
Common	445	299	744
Poor	121	73	194
None	91	43	134
Unknown	3	.....	3
Totals	840	575	1,415

Table No. 7.—Showing the Nationality of Those Admitted from April 1st, 1949, to March 31st, 1950

Nationality	Male	Female	Total
Australia	3	-----	3
Austria	2	2	4
Belgium	1	-----	1
Besarabia	1	1	2
China	13	2	15
Czechoslovakia	5	3	8
Denmark	3	2	5
England	94	87	181
Finland	3	3	6
France	1	1	2
Germany	4	2	6
Greece	3	1	4
Holland	3	1	4
Hungary	4	2	6
Iceland	-----	1	1
India	5	1	6
Ireland	23	14	37
Italy	2	2	4
Japan	-----	2	2
Latvia	1	1	2
Lithuania	2	1	3
Norway	12	6	18
Orkney Islands	-----	1	1
Poland	10	5	15
Roumania	5	2	7
Russia	12	9	21
San Juan Islands	1	-----	1
Scotland	42	40	82
South Africa	2	1	3
Sweden	9	5	14
Switzerland	4	1	5
Ukrania	2	-----	2
United States	52	33	85
Wales	3	5	8
Yugoslavia	6	-----	6
Yukon	3	1	4
Unknown	2	2	4
Canada—			
Alberta	45	40	85
British Columbia	189	122	311
Manitoba	39	32	71
New Brunswick	12	6	18
Newfoundland	2	2	4
Nova Scotia	17	3	20
Ontario	100	49	149
Prince Edward Island	-----	-----	-----
Quebec	28	10	38
Saskatchewan	70	71	141
Totals	840	575	1,415

Table No. 8.—Showing What Districts Contributed Patients from April 1st, 1949, to March 31st, 1950

Place of Residence	Male	Female	Total
Abbotsford	4	2	6
Agassiz	1	.....	1
Alberni	3	1	4
Aldergrove	2	2	4
Alert Bay	.....	1	1
Armstrong	1	2	3
Ashcroft	2	2	4
Atlin	1	.....	1
Baldonnel	.....	1	1
Beaver Cove	.....	1	1
Bella Bella	1	.....	1
Bradner	1	.....	1
Bralorne	1	1	2
Brookmere	1	.....	1
Burnaby	12	13	25
Burns Lake	3	.....	3
Campbell River	1	.....	1
Canal Flats	1	.....	1
Canim Lake	1	.....	1
Castlegar	1	.....	1
Chapman Camp	.....	1	1
Cheam View	1	.....	1
Chemainus	.....	1	1
Chilliwack	6	2	8
Clayhurst	.....	1	1
Clearwater	.....	1	1
Clinton	.....	1	1
Cloverdale	4	5	9
Coldstream	1	.....	1
Colwood	.....	1	1
Coombs	.....	1	1
Comox	1	1	2
Copper Mountain	1	.....	1
Courtenay	2	1	3
Cowichan	2	.....	2
Cowley, Y.T.	1	.....	1
Cranberry Lake	1	1	2
Cranberry	.....	1	1
Cranbrook	3	2	5
Creston	.....	1	1
Crofton	.....	1	1
Cumberland	2	.....	2
Dawson	3	.....	3
Dawson Creek	2	3	5
Decker Lake	.....	1	1
Deroche	2	.....	2
Dewdney	2	.....	2
Duncan	9	3	12
Dunster	.....	1	1
East Wellington	1	.....	1
Edgewood	1	.....	1
Enderby	2	1	3
Esquimalt	2	1	3
Evelyn	1	.....	1
Fairmont	1	.....	1
Falkland	.....	1	1
Fernie	2	.....	2
Fort Fraser	.....	1	1
Fort St. George	1	1	2
Fort St. John	3	.....	3
Gibsons Landing	3	1	4
Glade	1	1	2
Glen Valley	1	.....	1
Grand Forks	2	.....	2
Grindrod	1	.....	1
Hammond	.....	2	2
Haney	2	4	6
Hazelton	.....	2	2
Heffley Creek	.....	1	1
Holberg	1	.....	1
Honeymoon Bay	.....	1	1
Hope	4	1	5
Hunter Creek	1	.....	1
Carried forward	110	74	184

Place of Residence	Male	Female	Total
Brought forward	110	74	184
Invermere	1	.....	1
Kamloops	9	9	18
Kanaka	.....	1	1
Kelowna	11	5	16
Kimberley	1	2	3
Kispiox	.....	1	1
Ladner	4	2	6
Ladysmith	1	.....	1
Laidlaw	1	.....	1
Lake Cowichan	.....	1	1
Lang Bay	.....	1	1
Langley	1	.....	1
Langley Prairie	7	2	9
Lantzville	.....	1	1
Lillooet	1	.....	1
Lumby	1	4	5
Lund	.....	1	1
Lytton	1	.....	1
Maillardville	.....	1	1
Matsqui	1	2	3
Madeira Park	.....	1	1
Merritt	1	.....	1
Metchosin	1	.....	1
Michel	1	.....	1
Milner	1	.....	1
Mission	3	5	8
Mitchell Island	1	.....	1
Mount Lehman	1	3	4
Nakusp	4	2	6
Nanaimo	7	8	15
Naramata	.....	1	1
Natal	1	1	2
Nelson	5	12	17
New Denver	2	1	3
New Westminster	66	37	103
Norman Wells	1	.....	1
North Vancouver	13	8	21
Oakalla	12	2	14
Ocean Falls	3	.....	3
Okanagan Falls	3	.....	3
Oliver	2	.....	2
Ootsa Lake	.....	1	1
Osoyoos	3	1	4
Parksville	1	.....	1
Peachland	.....	1	1
Pender Harbour	1	.....	1
Penticton	3	5	8
Pitt Meadows	.....	1	1
Port Alberni	2	.....	2
Port Alice	.....	1	1
Port Coquitlam	13	2	15
Port Edwards	.....	1	1
Port Kells	1	1	2
Port Moody	2	1	3
Port Washington	.....	1	1
Pouce Coupe	1	.....	1
Powell River	3	3	6
Prince George	9	6	15
Prince Rupert	5	4	9
Princeton	4	.....	4
Progress	1	.....	1
Qualicum	1	.....	1
Quathiaski Cove	1	.....	1
Quesnel	6	.....	6
Quilchena	1	.....	1
Revelstoke	2	1	3
Richmond	1	2	3
Roberts Creek	2	.....	2
Rosedale	1	.....	1
Ross River, Y.T.	.....	1	1
Ruskin	1	.....	1
Saanich	6	8	14
Carried forward	349	229	578

Table No. 8.—Showing What Districts Contributed Patients from April 1st, 1949, to March 31st, 1950—*Continued*

Place of Residence	Male	Female	Total	Place of Residence	Male	Female	Total
Brought forward	349	229	578	*Brought forward*	378	255	633
Salmon Arm	4	1	5	Tranquille	2	.....	2
Salmo	.....	1	1	Ucluelet	1	.....	1
Salt Spring Island	1	1	2	Vancouver	372	255	627
Sardis	2	1	3	Vanderhoof	3	2	5
Sechelt	1	.....	1	Vernon	6	5	11
Seton	1	.....	1	Victoria	53	46	99
Shoreacre	.....	1	1	Waldo	.....	1	1
Sicamous	1	.....	1	Walnut Grove	.....	1	1
Silverdale	1	.....	1	Websters Corners	1	.....	1
Silver Creek	.....	1	1	Wells	.....	1	1
Smithers	1	.....	1	West Arrow Park	1	.....	1
Spallumcheen	1	.....	1	Westbank	1	2	3
Spillimacheen	.....	1	1	Westholme	1	.....	1
Squamish	2	.....	2	West Summerland	1	1	2
Steveston	1	1	2	West Vancouver	4	1	5
Stewart	.....	1	1	Westview	3	1	4
Summerland	2	1	3	Whonnock	2	1	3
Surrey	2	4	6	Whalley	1	.....	1
Taghum	1	.....	1	White Horse	2	.....	2
Tappen	.....	1	1	White Rock	6	1	7
Terrace	1	.....	1	Williams Lake	2	.....	2
Tofino	1	.....	1	Yarrow	.....	1	1
Trail	6	11	17	Youbou	.....	1	1
Carried forward	378	255	633	Totals	840	575	1,415

Table No. 9.—Showing the Occupations of Those Admitted from April 1st, 1949, to March 31st, 1950

Occupation	Male	Female	Total	Occupation	Male	Female	Total
Accountant	12	.....	12	*Brought forward*	95	26	121
Analyst	1	.....	1	Domestic	.....	12	12
Auto metal repair	1	.....	1	Dressmaker	.....	2	2
Baker	.....	1	1	Driller	1	.....	1
Bank manager	1	.....	1	Druggist	2	.....	2
Barber	2	.....	2	Dog breeder	.....	1	1
Bar-tender	3	.....	3	Electrician	9	.....	9
Book-keeper	4	4	8	Elevator operator	.....	1	1
Boilermaker	1	.....	1	Engineer	9	.....	9
Brakeman	2	.....	2	Engineer (marine)	6	.....	6
Brewery-worker	1	.....	1	Engineer (stationary)	3	.....	3
Bridgeman	1	.....	1	Engineer (steam)	2	.....	2
Bushman	1	.....	1	Factory worker	1	2	3
Cabinetmaker	1	.....	1	Farmer	59	.....	59
Café owner	2	.....	2	Fireman	4	.....	4
Caretaker	2	1	3	First-aid Attendant	5	.....	5
Carpenter	14	.....	14	Fisherman	8	.....	8
Cashier	.....	1	1	Fish-filleter	.....	1	1
Caterpillar operator	1	.....	1	Florist	2	.....	2
Chambermaid	.....	4	4	Flunkey	2	.....	2
Chemist	1	.....	1	Foreman	3	.....	3
Chimney sweep	1	.....	1	Foundryman	1	.....	1
Clerk	6	10	16	Fuel dealer	1	.....	1
Commercial traveller	2	.....	2	Gardener	3	.....	3
Conductor (railway)	1	.....	1	Glass-worker	2	.....	2
Contractor	3	.....	3	Hairdresser	.....	3	3
Construction worker	2	.....	2	Homemaker	.....	334	334
Cook	19	2	21	Hotelman	1	.....	1
Customs inspector	1	.....	1	Housekeeper	.....	14	14
Deck-hand	2	.....	2	Iron-moulder	1	.....	1
Dentist	1	.....	1	Janitor	5	.....	5
Derrickman	1	.....	1	Jeweller	1	.....	1
Designer	1	1	2	Joiner	1	.....	1
Diamond-driller	2	.....	2	Blacksmith	1	.....	1
Dish-washer	2	2	4	Groundsman	1	.....	1
Carried forward	95	26	121	*Carried forward*	229	396	625

TABLE NO. 9.—SHOWING THE OCCUPATIONS OF THOSE ADMITTED FROM APRIL 1ST, 1949, TO MARCH 31ST, 1950—*Continued*

Occupation	Male	Female	Total	Occupation	Male	Female	Total
Brought forward	229	396	625	*Brought forward*	648	525	1,173
Labourer	133	.....	133	Retired	72	8	80
Landlady	.....	3	3	Roofer	2	.....	2
Landlord	1	.....	1	Sales clerk	1	5	6
Laundress	.....	4	4	Salesman	30	.....	30
Laundryman	3	.....	3	Sales manager	1	.....	1
Lawyer	2	.....	2	School-teacher	2	3	5
Logger	52	.....	52	Seaman	10	.....	10
Longshoreman	4	.....	4	Sea captain	1	.....	1
Lumber-grader	1	.....	1	Seamstress	.....	1	1
Manager	3	.....	3	Secretary	1	2	3
Machinist	3	.....	3	Sectionman	4	.....	4
Manufacturing agent	1	.....	1	Shingle-packer	.....	1	1
Meat-cutter	3	.....	3	Ship-carpenter	3	.....	3
Mechanic	19	.....	19	Shipwright	2	.....	2
Mill-worker	16	.....	16	Shipper	1	.....	1
Millwright	1	.....	1	Sign-painter	1	.....	1
Miner	8	.....	8	Smelterman	2	.....	2
Mining engineer	1	.....	1	Social worker	.....	1	1
Motorman	1	.....	1	Spice-grinder	1	.....	1
Musician	1	.....	1	Steam-fitter	1	.....	1
Naval officer	1	.....	1	Steel-checker	1	.....	1
Newspaperman	4	.....	4	Stenographer	.....	12	12
News vendor	.....	1	1	Steward	4	.....	4
None	116	101	217	Student	13	2	15
Nurse	.....	6	6	Storekeeper	3	1	4
Nurse's aide	.....	4	4	Supervisor	1	.....	1
Orchardist	1	.....	1	Tailor	2	.....	2
Orderly	2	.....	2	Taxi-driver	2	.....	2
Painter	13	.....	13	Teacup-reader	.....	1	1
P.B.X. operator	.....	1	1	Telegraph operator	1	1	2
Physician	1	.....	1	Telephone operator	.....	2	2
Physiotherapist	1	.....	1	Timekeeper	1	.....	1
Pipe-fitter	1	.....	1	Tinsmith	1	.....	1
Plasterer	4	.....	4	Truck-driver	8	.....	8
Plumber	1	.....	1	Tug-boat operator	1	.....	1
Policeman	2	.....	2	Upholsterer	1	.....	1
Power-machine operator	.....	4	4	Waiter	9	.....	9
Practical nurse	.....	5	5	Waitress	.....	9	9
Printer	6	.....	6	Warehouseman	3	.....	3
Prospector	2	.....	2	Watchman	1	.....	1
Radio technician	7	.....	7	Welder	4	.....	4
Railway worker	1	.....	1	Wireless operator	1	.....	1
Rancher	3	.....	3	X-ray technician	.....	1	1
Carried forward	648	525	1,173	Totals	840	575	1,415

TABLE NO. 10.—SHOWING THE AGES OF THOSE ADMITTED FROM APRIL 1ST, 1949, TO MARCH 31ST, 1950

Age	Male	Female	Total
Under 15 years	51	21	72
,, 20 ,,	33	23	56
,, 25 ,,	43	29	72
,, 30 ,,	86	50	136
,, 35 ,,	64	90	154
,, 40 ,,	92	60	152
,, 45 ,,	76	43	119
,, 50 ,,	85	52	137
,, 55 ,,	72	47	119
,, 60 ,,	43	34	77
,, 65 ,,	58	33	91
,, 70 ,,	39	41	80
,, 75 ,,	24	24	48
,, 80 ,,	36	8	44
Over 80 ,,	38	20	58
Totals	840	575	1,415

TABLE NO. 11.—SHOWING THE NUMBER OF ATTACKS IN THOSE ADMITTED FROM APRIL 1ST, 1949, TO MARCH 31ST, 1950

Number of Attacks	Male	Female	Total
First	378	289	667
Second	90	122	212
Third	30	36	66
Fourth	9	7	16
Fifth	2	2	4
Sixth	2	1	3
Seventh	-----	-----	-----
Eighth	-----	-----	-----
Several	39	34	73
Without psychosis	185	39	224
Unknown	105	45	150
Totals	840	575	1,415

TABLE NO. 12.—SHOWING THE ALLEGED DURATION OF ATTACK PRIOR TO ADMISSION FROM APRIL 1ST, 1949, TO MARCH 31ST, 1950

Duration of Attack	Male	Female	Total
Under 1 week	62	40	102
,, 3 months	157	160	317
,, 6 ,,	37	44	81
,, 12 ,,	33	29	62
,, 2 years	30	29	59
,, 5 ,,	43	60	103
,, 10 ,,	14	28	42
,, 15 ,,	4	6	10
Over 15 ,,	2	6	8
Not insane	-----	-----	-----
Without psychosis	185	39	224
Unknown	186	96	282
Life	87	38	125
Totals	840	575	1,415

TABLE NO. 13.—SHOWING STATISTICS ON HEREDITY IN THOSE ADMITTED FROM APRIL 1ST, 1949, TO MARCH 31ST, 1950

Heredity	Male	Female	Total
Paternal branch	-----	-----	-----
Maternal branch	-----	1	1
Heredity	2	2	4
Heredity, inferred	-----	-----	-----
Heredity, unknown	653	533	1,186
Without psychosis	185	39	224
Totals	840	575	1,415

TABLE NO. 14.—SHOWING THE ALLEGED CAUSE OF ATTACK IN THOSE ADMITTED FROM APRIL 1ST, 1949, TO MARCH 31ST, 1950

Alleged Cause	Male	Female	Total
Alcohol	116	13	129
Alzheimer's disease	1	7	8
Arteriosclerosis	51	36	87
Brain tumour	6	-----	6
Cardiovascular disease	-----	1	1
Cerebral damage	2	-----	2
Congenital	87	41	128
Constitutional	428	382	810
Drugs	3	1	4
Encephalitis	1	2	3
Epilepsy	21	14	35
Heredity	2	2	4
Heredity, inferred	-----	-----	-----
Heredity, paternal	-----	-----	-----
Heredity, maternal	-----	1	1
Huntington's chorea	1	3	4
Hypertension	-----	1	1
Intracranial neoplasm	1	-----	1
Jacob Creutzfeld's disease	1	-----	1
Lues (syphilis)	17	7	24
Myxœdema	1	-----	1
Parkinson's disease	-----	3	3
Periosterosis of right tibia	1	-----	1
Pick's disease	1	1	2
Post-encephalitic Parkinsonism	-----	1	1
Rh factor	-----	2	2
Senility	90	56	146
Trauma	7	-----	7
Tuberculosis	1	-----	1
Unknown	1	1	2
Totals	840	575	1,415

TABLE NO. 15.—SHOWING THE STATE OF BODILY HEALTH IN THOSE ADMITTED FROM APRIL 1ST, 1949, TO MARCH 31ST, 1950

Bodily Condition	Male	Female	Total
In good health	394	283	677
In average health	420	281	701
In reduced health	26	11	37
Totals	840	575	1,415

TABLE NO. 16.—SHOWING THE FORM OF MENTAL DISORDER IN THOSE ADMITTED FROM APRIL 1ST, 1949, TO MARCH 31ST, 1950

Form of Disorder	Male	Female	Total
Arteriosclerotic dementia	51	38	89
Epilepsy with feeble-mindedness	2	1	3
Epilepsy with psychosis	15	13	28
General paresis	17	7	24
Imbecility and idiocy	71	28	99
Involutional melancholia	15	27	42
Manic depressive	29	61	90
Mental deficiency with psychosis	6	7	13
Moron	15	10	25
Paranoia	3	.....	3
Paranoid state	10	10	20
Psychoneurosis	42	43	85
Pre-senile psychosis	4	9	13
Psychopathic personality with psychosis	10	7	17
Psychosis with somatic disease	4	9	13
Psychosis due to new growth	6	1	7
Psychosis with neurological disturbance	.....	1	1
Psychosis due to organic disease	1	.....	1
Schizophrenia	225	200	425
Senile dementia	91	54	145
Toxic psychosis—			
Alcohol	22	4	26
Drugs	2	1	3
Korsakoff	3	3	6
Toxin unknown	1	.....	1
Traumatic psychosis	7	.....	7
Undiagnosed psychosis	3	2	5
Without psychosis—			
Alcoholism	90	7	97
Epilepsy without psychosis	5	2	7
Primary behaviour disorder	.....	1	1
Psychopathic personality without psychosis	83	28	111
Simple adult maladjustment	6	1	7
Brain tumour without psychosis	1	.....	1
Totals	840	575	1,415

TABLE NO. 17.—SHOWING THE NUMBER ALLOWED OUT ON PROBATION AND RESULTS FROM APRIL 1ST, 1949, TO MARCH 31ST, 1950

Results	Male	Female	Total
Discharged recovered	103	92	195
Discharged improved	151	189	340
Discharged unimproved	175	76	251
Not insane	.....	.....	.....
Without psychosis	164	32	196
Returned to hospital	50	52	102
Still out at end of year	104	107	211
Totals	747	548	1,295

TABLE NO. 18.—SHOWING THE ALLEGED DURATION OF INSANITY PRIOR TO ADMISSION IN THOSE DISCHARGED FROM APRIL 1ST, 1949, TO MARCH 31ST, 1950

Alleged Duration	Male	Female	Total
Less than 1 week	33	30	63
,, ,, 1 month	76	51	127
,, ,, 2 months	39	42	81
,, ,, 3 ,,	18	26	44
,, ,, 6 ,,	27	25	52
,, ,, 12 ,,	25	23	48
,, ,, 2 years	25	23	48
,, ,, 3 ,,	14	13	27
3 years and over	30	46	76
Without psychosis	164	32	196
Not insane	----	----	----
Unknown	142	78	220
Totals	593	389	982

TABLE NO. 19.—SHOWING THE LENGTH OF RESIDENCE OF THOSE DISCHARGED FROM APRIL 1ST, 1949, TO MARCH 31ST, 1950

Length of Residence	Discharged Recovered		Discharged Improved		Discharged Unimproved		Without Psychosis	
	Male	Female	Male	Female	Male	Female	Male	Female
Under 1 month	15	6	7	7	82	41	111	14
,, 2 months	14	17	13	15	6	5	25	8
,, 3 ,,	17	24	11	21	3	4	16	3
,, 6 ,,	32	28	55	60	13	7	9	3
,, 12 ,,	18	15	29	49	14	8	3	1
,, 2 years	4	1	20	20	13	3	----	1
,, 3 ,,	1	----	6	7	5	1	----	1
,, 4 ,,	----	----	----	2	2	2	----	----
,, 5 ,,	----	----	1	3	2	1	----	----
5 years and over	2	1	9	5	35	4	----	1
Totals	103	92	151	189	175	76	164	32

TABLE NO. 20.—RECORD OF DEATHS FROM APRIL 1ST, 1949, TO MARCH 31ST, 1950, ESSONDALE, NEW WESTMINSTER, AND SAANICH

Sex	Age	Time in Hospital			Certified Cause
		Years	Months	Days	
F.	82	2	9	30	Bronchopneumonia.
M.	62	18	8	19	Chronic myocarditis.
M.	18	—	8	10	Intestinal hæmorrhage; tuberculous enteritis.
M.	64	—	—	25	Diabetic coma due to diabetes mellitus.
M.	83	3	2	10	Senility with dementia.
M.	66	—	1	27	Bronchopneumonia.
F.	67	1	6	2	Bronchopneumonia; old cerebral hæmorrhage; hypertension.
M.	57	27	2	12	Bronchopneumonia.
M.	63	—	—	6	Chronic myocarditis.
M.	67	6	10	31	Chronic myocarditis.
F.	81	—	—	13	Chronic myocarditis; hypertensive cardiovascular disease.
M.	68	—	—	15	Cerebral hæmorrhage.
M.	59	—	—	5	Bronchopneumonia.
M.	52	15	6	19	Bilateral pulmonary tuberculosis.
M.	55	—	—	8	Encephalomalacea due to arteriosclerosis.
F.	59	—	8	2	Acute coronary thrombosis; chronic myocarditis.
F.	64	1	3	18	Acute decompensation due to chronic myocarditis; hypertension, bilateral, due to renal calculi.
M.	61	10	8	26	Pulmonary embolism with infarction, left lower lobe; mitral stenosis with cardiac dilatation and hypertrophy.
M.	38	6	5	3	Bronchopneumonia.
F.	70	5	8	9	Coronary thrombosis.
F.	49	—	5	2	Chronic myocarditis.
F.	45	15	7	16	Cirrhosis of the liver.
M.	51	13	11	12	Bronchopneumonia due to cerebral defect due to operation; removal of brain tumour.
M.	56	5	6	6	Carcinoma of the cecum.
F.	54	11	3	14	Status asthmaticus; bronchial asthma; emphysema.
F.	65	—	9	24	Chronic myocarditis.
M.	43	—	—	23	Glioma, left frontal temporal.
M.	66	4	6	19	Senility with dementia.
M.	76	2	11	4	Terminal bronchopneumonia.
M.	67	16	11	7	Tuberculous peritonitis.
F.	77	3	11	24	Bronchopneumonia.
M.	63	—	7	2	Terminal bronchopneumonia.
F.	61	—	—	22	Cerebral hæmorrhage; hypertensive cardiovascular disease.
M.	59	8	10	23	Cerebral hæmorrhage.
M.	65	2	11	30	Right hemiplegia due to cerebral hæmorrhage.
M.	49	17	4	30	Pulmonary œdema; arteriosclerotic heart disease.
M.	49	22	5	3	Uremia due to chronic nephritis.
F.	52	1	7	25	Chronic myocarditis; arteriosclerotic cardiovascular disease.
F.	62	31	8	1	Bronchopneumonia; arteriosclerosis.
F.	67	38	2	6	Bronchopneumonia; hypochromic anæmia.
M.	55	3	2	27	Pulmonary tuberculosis.
M.	57	3	6	23	Cerebral hæmorrhage.
M.	63	36	8	10	Bronchopneumonia associated with chronic myocardial degeneration.
F.	74	—	2	7	Bronchopneumonia; chronic myocarditis due to acute failure; fracture of right hip.
M.	67	—	3	13	Terminal bronchopneumonia; vascular syphilis.
M.	68	—	6	8	Ruptured stomach ulcer.
M.	50	—	5	8	Chronic myocarditis; luetic aortitis.
M.	34	—	—	18	Cerebral œdema with cerebellar herniation; encephalitis; pulmonary congestion and œdema.
M.	68	—	—	17	Pulmonary tuberculosis; cerebral hæmorrhage due to generalized arteriosclerosis.
M.	64	12	3	29	Coronary occlusion.
M.	34	3	8	11	Pulmonary tuberculosis.
M.	70	2	8	18	Terminal pneumonia; chronic myocarditis.
M.	82	5	6	17	Senility with dementia.
F.	62	—	5	6	Bronchopneumonia; carcinoma of the innominate bone.
F.	65	—	—	19	Chronic myocarditis due to actue cardiac failure (nephritis and hypertension contributory).
F.	21	—	—	6	Cerebral œdema due to acute mania; pulmonary congestion; pyelonephritis.
M.	68	—	—	6	Terminal pneumonia; chronic myocarditis, rheumatic.
M.	27	—	—	4	Bronchopneumonia.
M.	63	8	10	11	Bronchopneumonia.
M.	84	—	—	16	Bronchopneumonia.
F.	51	—	1	18	Organic psychosis (Pick's disease).
F.	67	—	2	2	Apoplectic stroke; hypertensive heart disease.
F.	36	3	4	21	Generalized carcinomatosis, primary site upper pole right kidney, probably hypernephroma.
M.	76	—	1	4	Bronchopneumonia.
F.	58	—	6	12	Acute septicæmia due to acute pyelonephritis; associated dermatitis.

TABLE NO. 20.—RECORD OF DEATHS FROM APRIL 1ST, 1949, TO MARCH 31ST, 1950, ESSONDALE, NEW WESTMINSTER, AND SAANICH—*Continued*

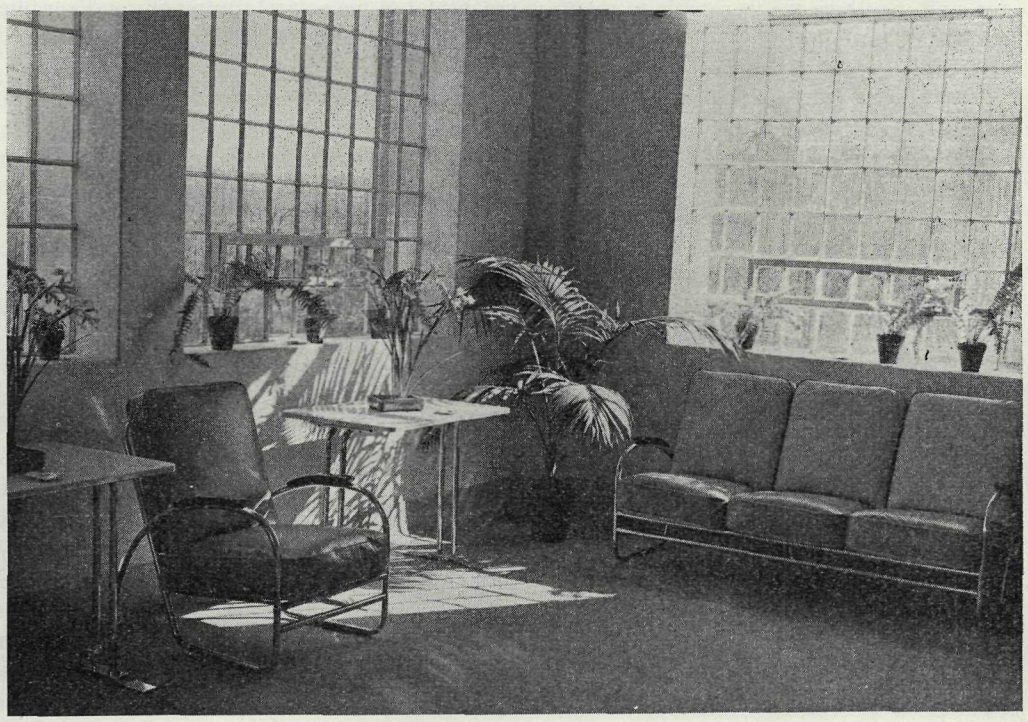
Sex	Age	Time in Hospital			Certified Cause
		Years	Months	Days	
F.	63	....	2	31	Bronchopneumonia.
F.	67	....	....	5	Coronary thrombosis.
M.	56	....	....	14	Bilateral pulmonary tuberculosis.
M.	69	....	1	1	Cerebral hæmorrhage.
M.	32	14	9	14	Bilateral pulmonary tuberculosis.
F.	59	6	2	24	Apoplectic stroke.
F.	83	2	2	8	Coronary sclerosis.
M.	48	....	4	14	Suffocation, hanged by neck.
F.	20	9	4	12	Pulmonary tuberculosis.
F.	54	5	1	19	Bronchopneumonia.
M.	66	19	7	11	Bilateral pulmonary tuberculosis.
M.	69	15	5	10	General paresis of the insane.
F.	55	17	4	....	Pelvic and bone tuberculosis.
F.	48	....	....	12	Chronic passive congestion.
M.	70	9	9	23	Nephrosis.
F.	68	....	6	21	Hepatic failure; carcinoma of the head of the pancreas.
M.	55	13	2	14	Epilepsy.
M.	53	6	7	15	Left subdiaphragmatic abscess with multiple abscesses of the spleen.
M.	67	....	5	26	Chronic myocarditis.
M.	68	20	3	7	Terminal pneumonia; senility.
M.	63	....	3	7	Senility.
M.	67	3	10	16	Bronchopneumonia; arteriosclerotic heart disease.
F.	51	7	3	29	Chronic myocarditis; cerebral embolism; hæmiplegia.
M.	67	....	10	10	Chronic myocarditis; cerebral arteriosclerosis.
F.	69	....	2	16	Chronic myocarditis; auricular fibrillation and cardiac decompensation; squamous cell carcinoma right cheek and left side of nose.
M.	59	....	....	28	Cerebral hæmorrhage; hypertension.
M.	62	....	....	20	Perforated gastric ulcer; coronary arteriosclerosis.
M.	67	32	6	27	Myocardial infarction due to coronary thrombosis.
M.	66	....	3	28	Chronic myocarditis due to arteriosclerotic cardiovascular disease.
M.	69	2	2	13	Terminal pneumonia; chronic myocarditis due to arteriosclerotic cardiovascular disease.
M.	69	6	2	7	Bronchopneumonia.
M.	69	2	....	27	Terminal bronchopneumonia; chronic bronchitis.
M.	54	2	3	18	Bronchopneumonia.
M.	70	10	1	24	General peritonitis; perforated gastric ulcer.
M.	65	....	3	10	Bronchopneumonia; brain tumour.
M.	84	30	10	9	Terminal bronchopneumonia.
M.	51	4	10	26	Myocardial infarction due to coronary thrombosis.
M.	62	....	....	20	Lobar pneumonia due to exhaustion due to acute mania.
F.	23	2	1	26	Exhaustion due to idiocy.
F.	30	....	....	7	Asphyxia due to strangulation (suicide).
M.	63	18	10	28	Bronchogenic carcinoma.
M.	70	....	8	16	Chronic myocarditis.
M.	63	....	11	15	Bronchopneumonia due to chronic myocarditis, fatty degeneration (non-rheumatic).
F.	65	2	9	27	Coronary occlusion; arteriosclerotic cardiovascular disease.
M.	72	18	4	24	Terminal pneumonia.
M.	66	15	7	31	Coronary occlusion.
M.	61	11	....	9	Pyelonephritis due to cystitis.
M.	64	....	1	20	Massive retroperitoneal hæmorrhage due to ruptured arteriosclerotic aneurysm of abdominal aorta.
F.	61	....	....	9	Carcinoma of the cervix with infiltration of the bladder and metastasis of the hip bones and lumbar spine.
M.	61	12	6	18	Acute pulmonary œdema due to uremia due to chronic glomerulonephritis; hypertensive heart disease.
F.	48	15	7	16	Perforation of the colon; adenocarcinoma of the sigmoid.
F.	50	2	5	6	Cerebral hæmorrhage due to arteriosclerosis.
M.	49	....	....	5	Asphyxia due to strangulation due to hanging.
M.	71	....	....	18	Chronic myocarditis due to arteriosclerosis; chronic asthma.
F.	61	34	10	8	Pulmonary embolism; pulmonary tuberculosis.
M.	41	13	3	24	Bilateral pulmonary tuberculosis.
F.	29	17	1	29	Cerebral hæmorrhage, Pons; cerebral œdema, post-encephalitic parkinsonism; inanition.
F.	69	3	11	9	Bronchopneumonia; arteriosclerotic cardiovascular disease; inanition.
F.	49	8	....	28	Cachexia due to carcinoma, right breast, with metastasis to lung and liver.
M.	62	....	....	1	Lobar pneumonia; carcinoma of right lung.
M.	7	....	....	1	Bronchopneumonia.
M.	69	2	3	22	Coronary thrombosis.
M.	69	....	....	25	Chronic myocarditis due to arteriosclerosis.
F.	67	7	5	27	Acute cardiac decompensation; chronic myocarditis.
F.	53	10	7	4	Cerebral hæmorrhage; hypertension.
M.	68	28	....	30	Coronary thrombosis.
M.	66	....	3	29	Terminal pneumonia.

TABLE NO. 20.—RECORD OF DEATHS FROM APRIL 1ST, 1949, TO MARCH 31ST, 1950, ESSONDALE, NEW WESTMINSTER, AND SAANICH—*Continued*

Sex	Age	Time in Hospital			Certified Cause
		Years	Months	Days	
F.	61	----	3	1	Bronchopneumonia; cardiac enlargement and decompensation; hypertensive cardiovascular disease.
M.	1½	----	1	23	Bronchopneumonia; cerebral atrophy.
M.	2	----	6	16	Bronchopneumonia.
M.	59	33	11	16	Empyema; bronchopneumonia.
M.	68	1	2	31	Cerebral hæmorrhage due to arteriosclerosis.
F.	29	4	3	23	Asphyxiation due to strangulation.
F.	64	8	8	18	Bronchopneumonia; hæmiplegia.
M.	71	5	8	3	Lobar pneumonia.
F.	63	8	1	26	Carcinoma of tail of pancreas with extensive intra-abdominal spread and metastatic intra-abdominal spread and metastic involvement of liver and left lung.
M.	85	----	----	1	Coronary thrombosis; general arteriosclerosis.
M.	77	24	9	16	Acute pulmonary œdema due to arteriosclerotic heart disease.
F.	58	----	5	13	Chronic glomerulonephritis with exacerbation.
M.	81	15	4	10	Senility with dementia.
M.	65	6	8	9	General paresis of the insane.
M.	80	3	8	20	Chronic myocarditis.
F.	80	----	----	3	Chronic myocarditis.
M.	62	----	3	13	Cerebral thrombosis
M.	69	----	7	4	Bronchopneumonia.
M.	47	24	5	21	Bronchopneumonia.
M.	60	20	9	27	Paralytic ileus due to perforated duodenal ulcer.
F.	62	3	6	25	Tuberculous pneumonia due to pulmonary tuberculosis.
M.	69	5	3	19	Bilateral bronchopneumonia.
F.	60	----	1	9	Cerebral hæmorrhage.
M.	65	----	9	6	Bronchopneumonia.
M.	60	----	2	24	Bronchopneumonia.
F.	81	31	10	3	Tuberculous bronchopneumonia; generalized arteriosclerosis.
F.	82	15	10	3	Tuberculous meningitis; pulmonary tuberculosis; generalized arteriosclerosis.
M.	83	----	2	2	Bronchopneumonia.
M.	65	2	3	11	Acute pulmonary œdema due to pernicious anæmia.
F.	56	12	8	25	Bronchopneumonia.
M.	56	31	3	3	Uremia due to gangrene of sigmoid colon due to obstruction of the large bowel.
M.	59	5	5	12	Acute coronary thrombosis due to chronic myocarditis.
F.	31	----	3	29	Asphyxiation due to strangulation due to hanging (suicide).
M.	60	1	8	30	Hæmorrhagic pancreatitis due to perforated duodenal ulcer.
M.	63	----	3	6	Chronic myocarditis.
M.	61	----	9	21	Pulmonary embalus.
M.	71	----	----	8	Bronchopneumonia.
M.	75	----	9	21	Senility with dementia.
M.	57	17	1	18	Coronary thrombosis.
M.	61	----	----	27	Pulmonary tuberculosis.
M.	61	----	3	16	Lobar pneumonia.
M.	67	1	1	2	Bronchopneumonia.
M.	65	1	6	5	Bronchopneumonia.
F.	35	----	4	1	Coronary insufficiency; status asthmaticus.
M.	77	42	----	5	Bronchopneumonia.
F.	77	21	7	10	Carcinoma, head of pancreas.
F.	71	30	3	16	Empyema, right side, due to bronchopneumonia; pyonephrosis, left kidney.
F.	51	4	4	25	Chronic passive congestion; rheumatic fever.
M.	47	6	6	13	Terminal pneumonia.
M.	76	19	5	3	Pneumococcal meningitis.
M.	51	----	----	11	Bronchopneumonia; brain tumor (glioma), left frontal lobe.
M.	47	----	----	9	Pulmonary tuberculosis.
M.	48	----	----	10	Cerebral œdema due to equine encephalitis.
F.	59	16	5	27	Bilateral pulmonary tuberculosis.
F.	43	2	----	----	Asphyxia due to strangulation due to hanging (suicide).
F.	64	21	4	16	Bilateral pulmonary tuberculosis.
F.	58	----	4	----	Bronchopneumonia.
F.	64	23	10	9	Cerebral hæmorrhage; arteriosclerosis.
M.	21	5	4	12	Pulmonary tuberculosis.
M.	28	12	----	12	Suffocation during epileptic seizure.
F.	15	8	8	7	Tubercular meningitis.
F.	62	40	2	6	Dementia præcox, demented; purulent meningitis.
M.	5*	----	----	27	Microcephalic idiocy with epilepsy.
M.	3	----	3	7	Tracheo-bronchitis due to measles.
M.	79	34	----	10	Myocardial degeneration.
M.	66	24	3	26	Carcinoma of nose.
M.	68	28	8	12	Myocardial degeneration.
M.	37	6	11	13	Accidental death, fractured skull.
M.	63	27	11	21	Coronary thrombosis.
M.	32	8	2	21	Pulmonary tuberculosis.

* Months.

Day Room, Crease Clinic.



Sun-porch, Crease Clinic.

PART II.—FINANCIAL

BUSINESS MANAGER'S REPORT

A. L. Crease, Esq., M.D., C.M.,
Director of Mental Hygiene and Psychiatry,
Provincial Mental Hospital, Essondale, B.C.

SIR,—I beg to submit for your consideration the financial report of the Provincial Mental Hospitals of British Columbia for the year ended March 31st, 1950, which includes various tables and cost statements.

The daily average population for the three hospitals at Essondale, New Westminster, and Saanich, for the year under review, was 4,495 as against 4,314 in the previous year.

Gross operating costs rose from $4,319,706 to $4,777,770, with the daily *per capita* cost increasing from $2.74 to $2.91. The greater portion of this increase was due to the increase in the cost-of-living bonus paid to employees, but higher costs are also reflected in dietary figures as well as nursing and ward supplies, which covers clothing, boots and slippers, bedding, towels, linen, soap, and such like commodities.

Patients' maintenance collections increased from $477,680 to $542,137.

Purchases of milk, cream, meats, vegetables, fruit, etc., from Colony Farm amounted to $300,462 for the Essondale and New Westminster Hospitals. This is an increase of nearly $54,000 over the year 1948–49, when most of the farm crops were destroyed by flood waters.

During the year a total of $170, 732 was received from the Dominion mental health grants for equipment and personnel training for the mental health programme of the Province of British Columbia. Details of this expenditure are given in the financial statement. These funds were of a great assistance to us, as in addition to providing training for staff members we were able to secure a great deal of necessary equipment and supplies for the treatment of the patients. The mental health grants were particularly of assistance in the equipping of the Crease Clinic.

This has been a very active year and one in which considerable expansion has taken place. The main items of interest at the Provincial Mental Hospital, Essondale, were the opening of the new 220-bed unit for veterans at Colony Farm on August 31st, 1949; the official opening of the Crease Clinic of Psychological Medicine by the Honourable Geo. S. Pearson, Provincial Secretary and Minister of Health and Welfare, on November 16th, 1949; the completion of three new Nurses' Homes and the conversion of a staff residence into a Nurses' Infirmary; and the addition of twenty bedrooms at the fire hall in order to provide accommodation for volunteer firemen. In addition to the above, a new 100-bed unit was also completed at the Provincial Mental Hospital at New Westminster.

Dr. A. L. Crease, Director of Mental Hygiene and Psychiatry, retired on superannuation on March 31st, 1950, after more than thirty-five years of service with the Government. In recognition of this long and faithful service on behalf of the mentally ill, the Government saw fit to honour him by naming the new Clinic of Psychological Medicine the "Crease Clinic." A reception for Dr. and Mrs. Crease was held in the Crease Clinic on March 10th, 1950, when they were presented with a grandfathers clock, an easy chair, and a pair of binoculars by R. A. Pennington, Deputy Provincial Secretary, on behalf of the staff.

H. Lonsdale, Public Works Superintendent, was also retired on superannuation on July 31st, 1949. Mr. Lonsdale joined the public works staff at Essondale, March 24th, 1913. S. M. Schofield, Resident Engineer at Essondale, succeeded Mr. Lonsdale as Public Works Superintendent and Thomas Lamb was appointed Foreman of Works and assistant to Mr. Schofield.

In closing, I would like to express my appreciation of the many courtesies shown and the close co-operation that has been maintained between the various departments of the Government and the staff of the hospitals at all times.

All of which is respectfully submitted.

F. A. MATHESON,
Business Manager.

PSYCHOPATHIC DEPARTMENT

EXPENSE STATEMENT, MARCH 31ST, 1950

Salaries	$52,414.79
Office supplies	1,060.86
Telephone and telegraphs	869.36
Travelling expenses	7,008.13
Fuel, water, light, and power	1,063.24
Incidental expenses	1,731.03
Cost-of-living bonus	9,271.68
	$73,419.09

NOTE.—The above expenses absorbed into the New Westminster, Essondale, and Saanich statements on basis of population: Essondale, 78 per cent; New Westminster, 15 per cent; and Saanich, 7 per cent.

HEADQUARTERS DEPARTMENT

EXPENSE STATEMENT, MARCH 31ST, 1950

Salaries	$45,422.40
Office supplies	2,327.16
Travelling expenses	596.19
Incidental expenses	114.60
Cost-of-living bonus	8,776.20
	$57,236.55

NOTE.—The above expenses absorbed into the New Westminster, Essondale, and Saanich statements on basis of population: Essondale, 78 per cent; New Westminster, 15 per cent; and Saanich, 7 per cent.

FINANCIAL TABLES

TABLE A.—SHOWING THE AVERAGE NUMBER OF PATIENTS IN RESIDENCE EACH YEAR, THE TOTAL AMOUNTS SPENT FOR MAINTENANCE, AND GROSS PER CAPITA COST (For Past Ten Years)

Year	Average Number in Residence	Maintenance Expenditure	*Per Capita* Cost
1940–41, New Westminster	$611.17	$269,354.39	$440.71
1940–41, Essondale	2,884.96	1,114,944.32	386.46
1940–41, Saanich	279.95	114,496.86	408.99
1941–42, New Westminster	607.40	265,107.15	436.46
1941–42, Essondale	2,976.62	1,080,329.80	362.93
1941–42, Saanich	286.40	134,961.02	471.23
1942–43, New Westminster*	605.17	286,077.54	472.72
1942–43, Essondale	3,042.06	1,157,787.55	380.59
1942–43, Saanich	284.06	146,898.22	517.14
1943–44, New Westminster	601.15	306,150.79	509.28
1943–44, Essondale	3,047.75	1,317,789.96	432.38
1943–44, Saanich	279.61	163,226.64	583.77
1944–45, New Westminster	606.25	373,672.82	616.37
1944–45, Essondale	3,072.84	1,558,923.64	507.32
1944–45, Saanich	277.87	207,979.27	748.48
1945–46, New Westminster	610.36	433,041.89	709.49
1945–46, Essondale	3,163.61	1,769,363.15	559.29
1945–46, Saanich	283.67	210,798.32	743.11
1946–47, New Westminster	626.29	497,945.37	795.07
1946–47, Essondale	3,217.03	2,117,563.62	658.24
1946–47, Saanich	286.48	231,894.65	809.46
1947–48, New Westminster	628.00	662,357.80	1,054.70
1947–48, Essondale	3,275.41	2,622,349.15	800.62
1947–48, Saanich	290.31	298,773.55	1,029.15
1948–49, New Westminster	631.75	800,776.92	1,267.55
1948–49, Essondale	3,394.08	3,162,819.02	931.86
1948–49, Saanich	287.76	356,110.21	1,237.52
1949–50, New Westminster	650.83	891,944.27	1,370.55
1949–50, Essondale	3,556.78	3,500,902.41	984.29
1949–50, Saanich	287.02	384,874.24	1,340.93

* Maintenance expenditure includes cost-of-living bonus paid employees. This is also included in all subsequent years' reports.

Table B.—Showing Gross Cost for Past Ten Years, Analysed under Its Various Headings

Year	Salaries	Office Supplies and Postage	Travelling Expenses	Fuel, Water, Light, and Power	Repairs and Renewals	Furniture and Fixtures, Bedding, etc.	Provisions	Clothing, Boots, and Slippers	Medical and Surgical Supplies	Examination, Committal, and Transportation	Incidentals and Unforeseen	Total Gross
1940–41, New Westminster	$132,386.53	$1,608.75	$272.68	$25,128.91	$24,832.82	$9,216.51	$52,683.19	$14,129.24	$3,692.96	.....	$5,402.80	$269,354.39
1940–41, Essondale	460,268.98	9,175.05	3,653.37	92,831.28	104,110.10	28,397.46	261,418.03	65,609.35	21,626.89	$9,716.41	58,137.40	1,114,944.32
1940–41, Saanich	56,456.72	524.78	154.74	8,460.16	9,934.43	1,249.80	28,306.83	5,070.33	436.84	201.05	3,701.18	114,496.86
1941–42, New Westminster	135,708.66	1,170.08	301.15	26,700.86	21,577.59	2,194.44	58,760.40	8,402.80	3,361.89	8.00	6,921.28	265,107.15
1941–42, Essondale	476,303.17	8,893.36	4,194.31	96,972.60	87,444.58	18,973.60	253,680.71	51,219.99	34,865.48	11,247.61	36,534.39	1,080,329.80
1941–42, Saanich	61,683.08	723.51	271.91	10,634.01	10,115.62	884.79	34,867.93	8,324.96	1,309.12	7.50	6,138.59	134,961.02

Above headings discontinued in 1942. *See* new table, B 1.

Table B 1.—Showing Gross Cost for Year, Analysed under Its Various Headings

Year	Salaries	Office, Stores, and General	Medical Care	Nursing and Ward Services	Dietary	Light, Water, Heat, and Power	Laundry	Cars and Trucking	Occupational and Recreational Therapy	Miscellaneous Expense	Buildings, Grounds, and General Maintenance	Cost-of-living Bonus	Total Gross
1942–43, New Westminster*	$144,927.75	$1,051.58	$1,284.50	$14,235.83	$57,282.00	$29,537.10	$611.05	$244.30	$25.36	$4,466.30	$19,044.83	$13,366.94	$286,077.54
1942–43, Essondale	488,751.46	8,806.79	40,543.88	76,986.24	287,670.62	96,122.55	1,864.26	2,853.32	1,511.39	25,290.38	80,775.07	46,611.59	1,157,787.55
1942–43, Saanich	66,848.86	907.57	1,565.18	7,623.45	35,659.20	10,010.10	1,004.26	1,153.65	.....	8,879.13	7,336.80	5,910.02	146,898.22
1943–44, New Westminster	152,484.40	1,224.48	3,440.68	11,427.55	62,061.84	26,645.63	393.38	330.12	25.15	4,941.17	19,885.16	23,291.23	306,150.79
1943–44, Essondale	553,675.20	13,947.73	36,165.04	97,956.23	319,684.72	99,141.97	1,696.78	4,313.74	599.06	21,178.84	83,812.72	85,617.93	1,317,789.96
1943–44, Saanich	72,714.71	1,192.39	1,112,03	12,028.31	38,714.10	10,552.81	10.53	1,255.13	44.06	8,699.39	7,105.16	9,798.02	163,226.64
1944–45, New Westminster	*	13,687.27	18,921.99	164,667.51	49,658.65	46,895.53	5,946.13	215.27	5,012.42	11,956.05	23,314.97	34,297.03	374,572.82
1944–45, Essondale	*	53,408.50	109,695.27	656,302.24	314,784.01	130,615.43	12,202.33	9,557.86	21,154.17	49,518.59	80,259.12	121,426.12	1,558,923.64
1944–45, Saanich	*	8,100.32	5,170.23	72,514.51	41,585.24	22,709.00	1,579.98	3,581.63	4,071.49	25,310.65	9,606.29	13,749.93	207,979.27
1945–46, New Westminster	*	15,446.81	20,228.57	180,468.22	62,679.46	52,198.79	5,235.32	199.10	7,017.30	10,272.78	41,966.28	37,329.26	433,041.89
1945–46, Essondale	*	54,469.75	137,132.56	730,416.42	385,869.31	151,226.83	14,949.16	11,534.53	24,395.82	35,779.99	90,816.75	132,772.03	1,769,363.15
1945–46, Saanich	*	9,452.65	6,087.78	82,757.48	34,388.90	22,453.01	2,665.02	3,238.65	5,321.78	20,384.44	9,511.67	14,536.94	210,798.32
1946–47, New Westminster	*	15,000.90	26,149.11	203,152.83	71,960.62	54,338.21	5,498.75	344.59	10,787.43	10,354.46	50,581.99	49,776.48	497,945.37
1946–47, Essondale	*	61,993.27	192,930.21	797,445.45	454,642.88	182,145.74	17,215.56	14,368.56	29,619.98	52,737.68	139,277.36	175,186.93	2,117,563.62
1946–47, Saanich	*	10,086.20	6,274.03	90,202.94	53,338.17	25,169.14	2,162.46	5,120.65	6,882.94	4,832.47	10,391.12	17,434.53	231,894.65
1947–48, New Westminster	*	18,503.04	34,455.80	287,828.02	107,480.66	64,259.89	6,212.63	370.19	15,486.03	16,688.23	55,086.39	55,986.92	662,357.80
1947–48, Essondale	*	71,330.85	237,775.88	1,007,430.81	635,850.92	196,783.37	27,134.69	16,680.24	49,632.53	50,739.05	147,265.19	181,725.62	2,622,349.15
1947–48, Saanich	*	12,253.53	7,643.58	119,515.66	78,881.36	31,518.66	2,939.29	4,552.58	8,146.14	3,303.55	10,420.95	19,598.25	298,773.55
1948–49, New Westminster	*	21,519.55	43,442.25	341,029.30	138,010.01	47,908.97	8,183.28	558.12	18,930.78	15,358.92	80,277.44	85,558.30	800,776.92
1948–49, Essondale	*	80,033.18	281,081.52	1,151,639.39	793,249.75	176,506.71	31,360.94	18,262.08	71,448.60	52,593.37	224,606.34	282,037.14	3,162,819.02
1948–49, Saanich	*	12,734.74	9,095.59	142,367.47	97,515.36	20,623.51	3,400.18	1,879.27	9,187.62	3,432.46	25,505.72	30,368.29	356,110.21
1949–50, New Westminster	*	23,047.85	47,493.46	376,572.76	149,492.92	47,720.02	8,437.61	3,510.17	24,116.75	11,782.78	83,950.37	115,869.58	891,994.27
1949–50, Essondale	*	87,504.99	292,877.95	1,240,859.68	869,300.64	186,406.31	30,180.54	30,706.47	71,587.83	61,306.81	252,549.34	377,621.85	3,500,902.41
1949–50, Saanich	*	17,003.19	9,805.25	144,337.18	101,799.38	23,789.13	3,840.08	6,275.66	9,344.04	3,682.82	25,781.47	39,216.04	384,874.24

* Salaries have been included in figures under the various headings.

TABLE C.—SUMMARY OF STATEMENT SHOWING THE GROSS AND NET PER CAPITA COST OF PATIENTS IN THE THREE INSTITUTIONS

Gross operating costs—		
New Westminster	$891,994.27	
Essondale	3,500,902.41	
Saanich	384,874.24	
Gross cost for the three institutions		$4,777,770.92
Less collections remitted to Treasury		542,137.14
Net cost for the three institutions		$4,235,633.78
Daily average population for the three institutions		4,494.63
Gross *per capita* cost, one year		$1,063.00
Gross *per capita* cost, one day		$2.91
Net *per capita* cost, one year		$942.38
Net *per capita* cost, one day		$2.58

TABLE D.—EXPENSE STATEMENT OF THE NEW WESTMINSTER HOSPITAL FOR TWELVE MONTHS ENDED MARCH 31ST, 1950

Salaries, Supplies, and Operating Expenses	Vouchered Expenditure	Service and Supplies from Other Departments			Inventory Adjustment		Less Credits	Actual Cost of Operations	Yearly *per Capita* Cost
		Psychopathic	Headquarters	Public Works Department	Plus on Hand, March 31st, 1949	Less on Hand, March 31st, 1950			
Office, stores, and general	$14,686.95	$1,340.75	$7,251.86	.....	.....	.....	$231.71	$23,047.85	$35.41
Medical care	39,848.67	7,862.22	.....	.....	$2,763.12	$2,980.55	.....	47,493.46	72.97
Nursing and ward services	383,981.63	.....	.....	.....	31,785.90	32,542.27	6,652.50	376,572.76	578.61
Dietary	164,989.50	.....	.....	.....	9,383.10	12,493.68	12,386.00	149,492.92	229.70
Light, heat, water, and power	49,027.88	159.49	.....	.....	1,631.03	3,098.38	.....	47,720.02	73.32
Laundry	8,437.61	.....	.....	.....	.....	.....	.....	8,437.61	12.97
Cars and trucking	3,510.17	.....	.....	.....	.....	.....	.....	3,510.17	5.39
Occupational and recreational therapy	24,310.30	.....	.....	.....	.....	.....	193.55	24,116.75	37.06
Miscellaneous expenses	11,524.50	259.65	17.19	.....	.....	.....	18.56	11,782.78	18.10
Buildings, grounds, and general maintenance	.....	.....	.....	$84,784.31	5,051.81	5,885.75	.....	83,950.37	128.99
Cost-of-living bonus	101,132.72	1,390.75	1,316.43	12,029.68	.....	.....	.....	115,869.58	178.03
Totals	$801,449.93	$11,012.86	$8,585.48	$96,813.99	$50,614.96	$57,000.63	$19,482.32	$891,994.27	$1,370.55

Provincial Secretary's Department, vouchered expenditure	$801,449.93
Less credits	19,482.32
Net vouchered expenditure as per Public Accounts	$781,967.61

TABLE E.—EXPENSE STATEMENT OF THE ESSONDALE HOSPITAL FOR TWELVE MONTHS ENDED MARCH 31ST, 1950

Salaries, Supplies, and Operating Expenses	Vouchered Expenditure	Service and Supplies from Other Departments			Inventory Adjustment		Less Credits	Actual Cost of Operations	Yearly *per Capita* Cost
		Psychopathic	Headquarters	Public Works Department	Plus on Hand, March 31st, 1949	Less on Hand, March 31st, 1950			
Office, stores, and general	$44,028.00	$6,971.91	$37,709.69	.....	.....	.....	$1,204.61	$87,504.99	$24.60
Medical care	293,063.08	40,883.53	.....	.....	$18,666.29	$23,831.31	35,903.64	292,877.95	82.34
Nursing and ward services	1,318,111.17	.....	.....	.....	93,519.34	82,257.09	88,513.74	1,240,859.68	348.87
Dietary	1,044,660.33	.....	.....	.....	59,055.45	70,308.96	164,106.18	869,300.64	244.41
Light, heat, water, and power	235,209.19	829.32	.....	.....	600.78	3,292.68	46,940.30	186,406.31	52.41
Laundry	35,730.54	.....	.....	.....	.....	.....	5,550.00	30,180.54	8.48
Cars and trucking	32,998.08	.....	.....	.....	.....	.....	2,291.61	30,706.47	8.63
Occupational and recreational therapy	76,299.10	.....	.....	.....	.....	.....	4,711.27	71,587.83	20.13
Miscellaneous expenses	64,625.47	1,350.21	89.39	.....	.....	.....	4,758.26	61,306.81	17.24
Buildings, grounds, and general maintenance	.....	.....	.....	$259,853.91	40,621.10	47,925.67	.....	252,549.34	71.01
Cost-of-living bonus	331,846.60	7,231.91	6,845.44	31,697.90	.....	.....	.....	377,621.85	106.17
Totals	$3,476,571.56	$57,266.88	$44,644.52	$291,551.81	$212,462.96	$227,615.71	$353,979.61	$3,500,902.41	$984.29

Provincial Secretary's Department, vouchered expenditure	$3,476,571.56
Less credits	353,979.61
Net vouchered expenditure as per Public Accounts	$3,122,591.95

Table F.—Expense Statement of the Saanich Hospital for Twelve Months Ended March 31st, 1950

Salaries, Supplies, and Operating Expenses	Vouchered Expenditure	Service and Supplies from Other Departments			Inventory Adjustment		Less Credits	Actual Cost of Operations	Yearly *per Capita* Cost
		Psychopathic	Headquarters	Public Works Department	Plus on Hand, March 31st, 1949	Less on Hand, March 31st, 1950			
Office, stores, and general	$15,103.92	$625.69	$3,384.20				$2,110.62	$17,003.19	$59.24
Medical care	6,136.21	3,669.04						9,805.25	34.16
Nursing and ward services	141,185.29				$22,421.78	$18,028.15	1,241.74	144,337.18	502.88
Dietary	107,353.08				4,498.16	5,091.32	4,960.54	101,799.38	354.68
Light, heat, water, and power	21,249.51	74.43			4,330.54	1,865.35		23,789.13	82.88
Laundry	3,836.99				412.75	369.66	40.00	3,840.08	13.38
Cars and trucking	6,530.66						255.00	6,275.66	21.87
Occupational and recreational therapy	9,344.04							9,344.04	32.56
Miscellaneous expenses	3,553.63	121.17	8.02					3,682.82	12.83
Buildings, grounds, and general maintenance				$26,256.27	5,076.40	5,551.20		25,781.47	89.82
Cost-of-living bonus	35,076.29	649.02	614.33	2,876.40				39,216.04	136.63
Totals	$349,369.62	$5,139.35	$4,006.55	$29,132.67	$36,739.63	$30,905.68	$8,607.90	$384,874.24	$1,340.93

Provincial Secretary's Department, vouchered expenditure	$349,369.62
Less credits	8,607.90
Net vouchered expenditure as per Public Accounts	$340,761.72

Remarks

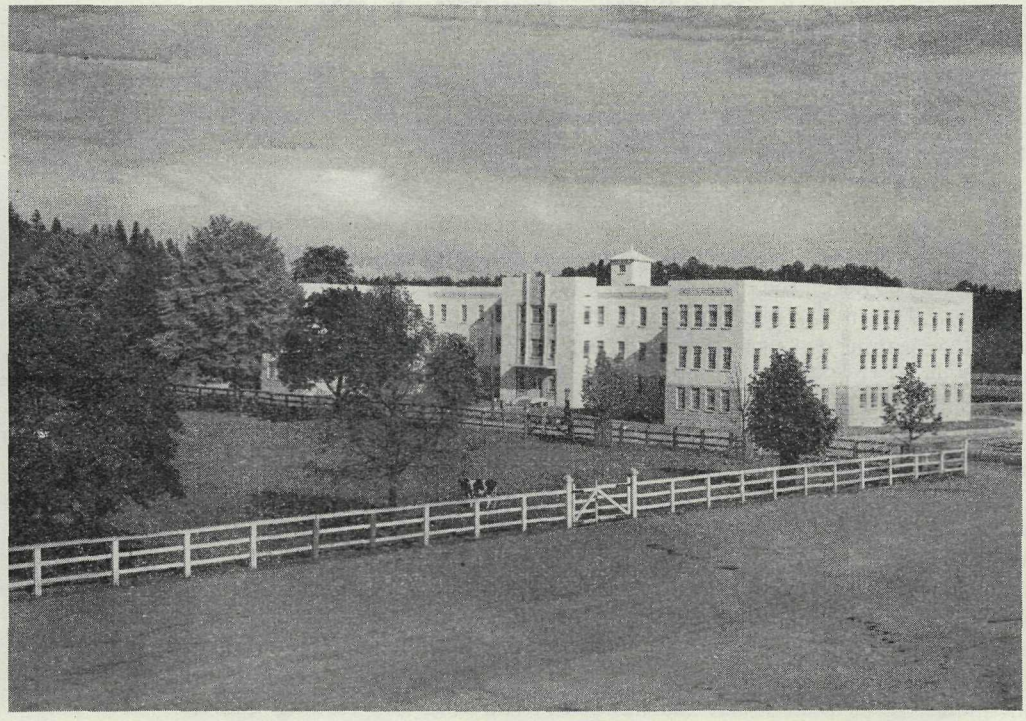
	New Westminster	Essondale	Saanich
Total patients in residence, March 31st, 1950	694	3,617	291
Daily average population for one year	650.83	3,556.78	287.02
Gross maintenance *per capita* cost, one year	$1,370.55	$984.29	$1,340.93
Gross maintenance *per capita* cost, one day	$3.75	$2.70	$3.67

Revenue of Mental Hospitals for Past Ten Years

1940–41	$229,045.45	1945–46	$350,163.87
1941–42	238,532.90	1946–47	339,561.71
1942–43	261,986.32	1947–48	350,995.41
1943–44	322,522.87	1948–49	477,680.57
1944–45	317,735.15	1949–50	542,137.14

Expenditures Made under Dominion Mental Health Grants for Province of British Columbia

Crease Clinic—		
Equipment	$37,798.98	
Staff and personnel training	11,854.21	
		$49,653.19
Mental Hospital, Essondale—		
Equipment	$6,877.65	
Staff and personnel training	60,030.18	
		66,907.83
Mental Hospital, New Westminster—Equipment		4,230.70
Mental Home, Colquitz—Equipment		3,324.43
Child Guidance Clinics—		
Vancouver—Equipment	$1,612.08	
Victoria—Equipment	1,456.06	
		3,068.14
University of British Columbia—Training equipment		22,684.72
Royal Jubilee Hospital—Equipment		77.96
Vancouver General Hospital—Equipment		6,652.88
City of Vancouver—Staff and supplies		8,555.27
City of Victoria—Staff and supplies		1,410.00
General Personnel Training—		
Teachers	$3,283.72	
Short-term postgraduate	883.50	
		4,167.22
Total		$170,732.34



New Veterans' Unit, Colony Farm.

Dining-room, Veterans' Building, Colony Farm.

PART III.—COLONY FARM

BUSINESS MANAGER'S REPORT ON COLONY FARM

A. L. Crease, Esq., M.D., C.M.,
Director of Mental Hygiene and Psychiatry,
Essondale, B.C.

SIR,—Herewith please find profit and loss and various other financial statements and reports covering the operations of Colony Farm for the year ended March 31st, 1950.

It will be noted that the profit for the year amounted to $32,671, after providing for all operating costs, as against a loss of $15,382 in the previous year, when flood waters wiped out most of the farm crops. Departments showing substantial profits were dairy and herds, hogs, cannery, orchard and truck garden, and field crops.

Farm-maintenance costs increased from $52,515 to $63,635, due chiefly to dyke repairs and improvements.

Farm sales of stock, meats, vegetables, milk, cream, and other produce amounted to $361,018. Of this amount Government institutions received $330,615 and $30,402 was from sales of breeding stock to sundry persons.

I am pleased to report that on June 1st, 1949, W. P. Richardson, formerly with the Department of Agriculture, was appointed Assistant Superintendent of Farms.

It should be noted that although some replacements, necessitated by the fires of 1947–48, have been made, our facilities for looking after the dairy herd are still not adequate. It is hoped that the new dairy, milking and feeding quarters, farm office, etc., will be provided in the near future, as without these the farm is operating under very difficult conditions.

All of which is respectfully submitted.

F. A. MATHESON,
Business Manager.
J. A. HAY,
Superintendent of Farms.

PROFIT AND LOSS ACCOUNT, YEAR ENDED MARCH 31ST, 1950

Department	Debits	Credits	Loss	Gain
Dairy and Herds	$127,410.45	$137,301.83	.....	$9,891.38
Work-horses, sales and deaths	210.00	10.00	$200.00	.....
Work-horses, Labour Account	7,787.39	8,280.00	.....	492.61
Hogs	69,644.67	91,348.64	.....	21,703.97
Cannery	58,055.39	67,677.20	.....	9,621.81
Orchard and Truck-garden	24,218.20	46,672.65	.....	22,454.45
Tractors	13,569.42	18,000.00	.....	4,430.58
Trucks	5,725.75	5,970.00	.....	244.25
Farm Maintenance	64,174.49	539.25	63,635.24	.....
Field Crops and Pasturage	26,247.98	75,303.40	.....	49,055.42
Cost-of-living bonus	21,388.20	.....	21,388.20	.....
Totals	$418,531.94	$451,102.97	$85,223.44	$117,894.47 85,223.44
Profit for the year	.....	.....	.....	$32,671.03

DAIRY AND HERDS DEPARTMENT

Profit and Loss Account, March 31st, 1950

Receipts

By sales—		
Live animals	$25,619.75	
Beef supplied to institutions	3,607.06	
Dairy produce	112,529.02	
By credit for manure	3,300.00	
Inventory, March 31st, 1950	90,630.00	
		$235,685.83

Expenses

Salaries and upkeep	$44,066.19	
Feed	80,619.26	
Horse-labour	600.00	
Trucking	1,125.00	
Tractor-work	1,000.00	
Inventory, March 31st, 1949	98,384.00	
		225,794.45
Profit for year		$9,891.38

WORK-HORSE DEPARTMENT

Profit and Loss Account, March 31st, 1950

Receipts

1 horse sold	$10.00	
Horse-labour charged to crops, etc.	8,180.00	
Credit for manure	100.00	
Inventory, March 31st, 1950	940.00	
		$9,230.00

Expenses

Salaries and upkeep	$6,238.89	
Feed and pasturage	1,548.50	
Inventory, March 31st, 1949	1,150.00	
		8,937.39
Profit for year		$292.61

HOG DEPARTMENT

Profit and Loss Account, March 31st, 1950

Receipts

By sales—		
Live hogs	$4,144.96	
Pork supplied Essondale Hospital	57,613.83	
Pork supplied New Westminster Hospital	4,997.85	
		$66,756.64
By credit for manure		600.00
Inventory, March 31st, 1950		23,992.00
		$91,348.64

Expenses

Salaries and upkeep	$7,617.60	
Feed	38,899.07	
Light and power	800.00	
Fuel	200.00	
Horse-labour	1,660.00	
Truck	1,040.00	
Tractor	2,000.00	
	$52,216.67	
Inventory, March 31st, 1949	17,428.00	
		69,644.67
Profit for year		$21,703.97

CANNERY

Profit and Loss Account, March 31st, 1950

Receipts

Supplies to—		
Mental Hospital, Essondale	$52,575.65	
Mental Hospital, New Westminster	9,861.55	
Mental Home, Colquitz	4,008.20	
Tranquille Sanatorium	1,231.80	
		$67,677.20

Expenses

Salaries	$4,980.00	
Repairs	393.99	
Fruit and vegetables	27,112.88	
Sugar, spice, etc.	9,496.15	
Cans, crates, and containers	10,222.37	
Fuel	1,200.00	
Water	500.00	
Light and power	900.00	
Tractor-hauling	2,000.00	
Truck-hauling	1,250.00	
		58,055.39
Profit for year		$9,621.81

ORCHARD AND TRUCK-GARDEN

Profit and Loss Account, March 31st, 1950

Receipts		
Produce supplied to—		
Mental Hospital, Essondale	$28,661.19	
Mental Hospital, New Westminster	3,154.48	
Boys' Industrial School	162.83	
Colony Farm cannery	2,169.65	
	$34,148.15	
Inventory, March 31st, 1950	12,524.50	
		$46,672.65
Expenses		
Salaries, seeds, etc.	$6,907.60	
Fertilizer, spray, and manure	1,500.00	
Horse-labour	1,000.00	
Tractor-work	2,000.00	
Trucking	250.00	
Fuel	50.00	
	$11,707.60	
Inventory, March 31st, 1949	12,510.60	
		24,218.20
Profit for year		$22,454.45

FIELD CROPS AND PASTURAGE

Profit and Loss Account, March 31st, 1950

Crop	Acreage	Yield (Tons)	Yield per Acre	Value	
Potatoes	77.0	1,175.00	15.26	$55,225.00	
Mangels	7.0	238.00	34.00	1,428.00	
Turnips	4.5	152.00	33.77	5,350.40	
Hay—					
Clover	5.5	17.00	3.09	442.00	
Oat	28.0	85.00	3.04	1,700.00	
Silage	120.0	1,192.00	9.90	7,152.00	
Onions	3.0	18.24	6.08	1,856.00	
Pasturage	215.0			2,150.00	
					$75,303.40
Costs					
Horse-labour				$2,320.00	
Tractor-work				9,050.00	
Trucking				1,805.00	
Manure				2,500.00	
Fertilizer and spray				3,926.05	
Seed and sets				5,326.93	
Supervision				1,320.00	
					26,247.98
Profit					$49,055.42

TRACTORS

Profit and Loss Account, March 31st, 1950

9,000 hours' work at $2		$18,000.00
Expenses		
Salaries and upkeep	$11,974.08	
Gasoline	1,595.34	
		13,569.42
Profit		$4,430.58

TRUCKS

2,388 hours' work at $2.50		$5,970.00
Expenses		
Salaries and upkeep	$5,268.25	
Gasoline and oil	457.50	
		5,725.75
Profit		$244.25

GENERAL EXPENSES OF MAINTENANCE AND ADMINISTRATION

Profit and Loss Account, March 31st, 1950

Salaries and miscellaneous expenses	$27,680.93	
Horse-labour	600.00	
Trucking	500.00	
Tractor-work	1,600.00	
Gasoline and oil	523.74	
Sundry	20.25	
		$30,924.92
Proportion, Headquarters expense	$2,100.00	
Repairs through Public Works Department	29,196.95	
Loss on inventory of equipment	1,479.87	
		32,776.82
		$63,701.74
Less sundry credits		66.50
		$63,635.24

MISCELLANEOUS STATEMENTS, INVENTORIES, ETC.

Mental Hospital, Essondale—Produce Supplied by Colony Farm for Year Ended March 31st, 1950

Dairy produce—		
Milk, 1,223,662 lb.	$67,301.44	
Cream, 697 quarts	592.46	
Table cream, 6,435.6 gallons	14,160.06	
		$82,053.96
Meats—		
Veal, 9,949 lb.	$3,482.15	
Hearts, livers, etc., 432.25 lb.	124.91	
Fresh pork, 183,761 lb.	56,944.12	
Pork plucks, 3,444 lb.	669.71	
		61,220.89
Fruits and vegetables—		
Fresh	$70,593.74	
Canned	52,575.65	
		123,169.39
Sundries—Horse-labour		2,000.00
		$268,444.24

Mental Hospital, New Westminster—Produce Supplied by Colony Farm for Year Ended March 31st, 1950

Dairy produce—		
Milk, 47,450 lb.	$2,609.75	
Cream, 145 quarts	123.26	
Table cream, 1,131 gallons	2,488.51	
		$5,221.52
Meats—		
Fresh pork, 15,896 lb.	$4,930.30	
Pork plucks, 347 lb.	67.55	
		4,997.85
Fruits and vegetables—		
Fresh	$11,937.52	
Canned	9,861.55	
		21,799.07
		$32,018.44

Accounts Receivable, March 31st, 1950

Sundry amounts due from live stock, etc., sold	$2,523.73

Remittances to Treasury

Sundry remittances to Treasury during year 1949–50 in payment of live stock and produce	$359,087.53

MISCELLANEOUS STATEMENTS, INVENTORIES, ETC.—*Continued*

Summary of Equipment Inventories, March 31st, 1950

Equipment in dairy	$4,311.46
Equipment in cannery	4,512.50
Horse and cattle barns and piggery	3,445.50
Farm implements	24,867.80
Pumping-stations and land-clearing	2,188.00
Butcher-shop	44.00
Carpenter-shop	1,476.95
Blacksmith-shop	754.50
	$41,600.71

Orchard and Truck-gardens

Apiary supplies	$116.00
Plum-trees	1,806.00
Prune-trees	1,842.00
Pear-trees	1,523.00
Apple-trees	574.00
Cherry-trees	371.00
Rhubarb-clumps	3,000.00
Strawberry-plants	1,600.00
Vegetables on hand	80.00
Garden tools and equipment	1,612.50
	$12,524.50

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