

The "cottage hospital" scheme operates on a voluntary prepayment basis and is designed to provide hospital service to approximately 150,000 and domiciliary medical care to about 100,000 of the population of outlying areas. Services are provided through 17 small provincially operated hospitals having a total capacity of about 430 beds; most of them are equipped with laboratory and X-ray facilities. Medical officers and nursing stations in adjoining communities supplement these services. In most cottage hospital areas, prepayment of \$15 annually for the head of each family and \$7.50 for single adults entitles subscribers to out-patient diagnosis and treatment, to home visits by the doctor and to hospitalization, as required. When necessary, hospitalized cases may be referred to the general hospital at St. John's or to hospitals outside the Province. Hospitalization for maternity is provided only in complicated cases. In three areas, additional premium payments are required to purchase medical services outside of hospitals. In districts not served by doctors, nursing services are provided on payment of a small annual fee. In general, the cost of medical and hospital care for indigents is borne by the Province, but beneficiaries under such programs as federal Old Age Security are usually required to pay premiums in cottage hospital areas.

Prince Edward Island.—The Health Branch of the Department of Health and Welfare includes Divisions of Public Health Nursing, Nutrition, Sanitary Engineering, Dental Health, Laboratories, Venereal Disease Control, Cancer Control, Tuberculosis Control, Mental Health and Vital Statistics.

Generalized public health nursing services are conducted by ten district nurses, and sanitary services are provided by three inspectors under the direction of a public health engineer. Free dental treatment is available for needy children at permanent clinics in Charlottetown and Summerside and for children in Grade I classes in rural areas through two mobile units. Laboratory facilities are being decentralized through the establishment in the larger hospitals of branches that remain under the supervision of the Central Laboratory at Charlottetown. A provincial venereal disease clinic is operated at Charlottetown.

Free diagnostic services for tuberculosis are made available through two stationary clinics and a mobile unit operated by the Division of Tuberculosis Control; in addition a mobile X-ray unit is provided by the Tuberculosis League. At the Provincial Sanatorium at Charlottetown, treatment services though not unqualifiedly free, are heavily subsidized by the Province; rehabilitation training and employment-placement services are provided. The Sanatorium contains a special treatment unit for poliomyelitis patients with residual paralysis; the Province pays one-half the cost of hospital care, physiotherapy and special nursing services.

Free diagnostic services for cancer are given at a clinic located at Charlottetown. Hospitalization for diagnosis is provided without charge for a period of three days for indigent cancer patients. A mental health diagnostic clinic has been opened at Charlottetown, and a speech therapy service has been established for school children with speech and hearing impairments.

Per diem grants are made to general hospitals for all patients and the Province also defrays the cost of operating the Falconwood Mental Hospital and the Provincial Infirmary.

Nova Scotia.—The principal Divisions of the Department of Public Health are Laboratories, Neuropsychiatry, Hospitals, Vital Statistics, Dental Hygiene, Nutrition, Nursing Service and Sanitary Engineering. In addition, a provincial