

Council and the Defence Research Board administer medical research programs, and the Department of Agriculture has certain health responsibilities connected with food production.

The Department of National Health and Welfare administers controls over food and drugs including narcotics, operates quarantine and immigration medical services, carries out international health obligations, and provides health services to Indians, Eskimos and other special groups. It serves in an advisory and co-ordinating capacity to the provinces and administers grants to provincial health and national voluntary agencies.

The Department advises on the visual eligibility of applicants for blindness allowances and co-operates with the provinces in the provision of surgical or remedial treatment for recipients of these allowances. Under the Public Works Health Act, supervision of health conditions is provided for persons employed on federal public works. Other programs of health or medical supervision and counselling are provided to the federal Civil Service and to the Department of Transport in all matters pertaining to the safety, health and comfort of air crew and passengers.

Co-ordination with the provinces on health matters is facilitated by the Dominion Council of Health. The membership of the Council includes the Deputy Minister of National Health who acts as chairman, the chief health officer of each province, and five appointees of the Governor in Council representing the universities, labour, agriculture and French- and English-speaking women's organizations. The Council meets semi-annually to review current problems. Its decisions or recommendations, though purely advisory, provide the federal and provincial governments with the opinions of a group of senior health administrators. Several federal-provincial technical advisory committees of the Council deal with specific aspects of public health.

**National Health Grant Program.**—The National Health Grant Program, inaugurated in 1948, initially made ten federal grants available to the provinces for the development and strengthening of public health and hospital services. Nine are continuing grants: the Hospital Construction, Professional Training, General Public Health, Public Health Research, Mental Health, Tuberculosis Control, Cancer Control, Venereal Disease Control, and Crippled Children Grants. The Health Survey Grant lapsed in 1953 following completion of provincial health surveys. In 1953, after a review of the first five years of the Program, three new grants were established: Child and Maternal Health, Medical Rehabilitation, and Laboratory and Radiological Services.

In 1958, federal assistance under the Hospital Construction Grant was increased to \$2,000 per hospital bed, regardless of type—double the previous grant for active treatment beds. In addition, funds were made available to meet one-third of the cost of approved alterations and renovations to existing facilities. The provinces must at least match federal contributions under the Grant. There is also matching requirement in the Cancer and Venereal Disease Grants and in the case of services (as distinct from equipment and training of personnel) in those for Medical Rehabilitation, and Laboratory and Radiological Services.

Up to Mar. 31, 1958, aid for construction was approved for 68,743 beds, 9,112 bassinets, 12,730 nurses' beds, and space in community health centres and combined laboratories exceeding 7,800 bed equivalents. Approximately 20,000 health workers had been trained or were undergoing special training, and 6,200 additional health workers had been employed with federal grant assistance.

Since the inception of the program, the provinces have steadily increased utilization of the grants. Payments to the provinces in 1957-58 totalled \$34,606,064 or 78 p.c. of the amount available; the average utilization during ten years of the program was 70 p.c.