Of the Boards so set up in 1876, none, except Hokitika and Wanganni, was given any power to levy a rate on the rateable property in the district. The next year, 1877, power was given to the Governor, where there was no Harbour Board, to vest the control and management of any wharves in any local authority. In 1878 the first general Harbours Act was passed, providing for a uniform method of control of all harbours in the Dominion. All existing Harbour Boards were brought under this Act, and provision was made that future Harbour Boards were to be constituted only by special Act of Parliament. The Act reconstituted the Boards, making separate provision for each existing Board. Some members were to be elected by the ratepayers of the borough, road district, or county; some by local bodies (in some cases restricted to their own members); some by the payers of harbour dues; some by the payers of dues on ships, or both combined; on some Boards the Mayor of the borough was an ex officio member, and the Chairman of the county near the port was often an ex officio member. In some cases a Mayor and a Chairman were both ex officio members. Of the twenty-two Boards constituted by the Harbours Act, 1878, sixteen of them contained one two, three, or four (and in one case, Moeraki, seven, the total membership of the Board) members appointed by the Governor. In five cases the local Chamber of Commerce was represented (the Chairman of the Auckland Chamber of Commerce being an ex officio member of the Auckland Harbour Board).

No additional rating-powers were given, but it was stated that where rating-power was given by special Act of Parliament it was to be exercised in accordance with the Rating Act, 1876. The Counties Amendment Act, 1885, enabled the Governor, by Order in Council, to declare a County Council or a Road Board to be a Harbour Board. The broad outlines of harbour control faid down in the Harbours Act, 1878, have remained to the present day. In 1910 the election of ordinary members to Harbour Boards was brought within the Local Elections and Polls Act, 1908, and the franchise was that exercised by the elector in the ordinary elections in the constituent district. Perhaps the most important change subsequent to this date was the passing of the Westport Harbour Act, 1920, by which the control of the Westport Harbour was taken away from the Westport Harbour Board and vested in the Crown. The chief reason for this step was that the export of coal from Westport was of such great importance that the harbour district could not provide the necessary finance from rates.

From time to time since the 1878 Act was passed new Harbour Boards have been constituted by Act of Parliament and by Order in Council, and some Harbour Boards have been dissolved. In the case of some of the small Harbour Boards the territorial local authority, usually the county, is constituted the Harbour Board, but for administrative purposes its operations as a Harbour Board are distinct from its operations as a county. These cases are of very great interest, however, because they prove that it is feasible for a territorial local authority actually to administer a harbour, with a consequent saving of administrative expenditure, both in terms of salaries and office expenses.

(b) Hospital Boards

Prior to 1885, when the first Hospital and Charitable Institutions Act was passed, there was no definite system of hospital control. Some institutions were maintained entirely by the Government, others by voluntary bodies with a varying degree of Government assistance and municipal assistance. Permissive legislation existed under which hospital districts could be created, and local authorities could rate for hospital purposes, but this was availed of only to a limited extent. The Act of 1885 marks the origin of the present system of hospital control in the Dominion setting up a system of corporate control of hospitals throughout the country. The Colony was divided into twenty-eight administrative districts under the control of Hospital and Charitable aid Boards, whose members were appointed by local authorities in their respective areas. Under the Act of 1885 representation of local authority districts on the Boards was apportioned in relation to population. By the Act of 1886 the basis of apportionment was altered to that of the population and the amount of the contributions of the local authorities. As such contributions were levied in proportion to rateable values, the method of apportioning the representation was substantially as it is to-day. Under this Act several groups of contiguous districts were united for the purposes of administering charitable aid. In certain areas there were found both a Hospital Board and a Charitable-aid Board, each levying on local authorities within their districts.

The next important step was the Act of 1909, which set up one Hospital and Charitable-aid Board in each district. Under this Act members of Boards were elected by the electors of the contributory local authorities. Previously they had been elected or appointed by the local authorities themselves. This Act introduced a graduated scale of government subsidies, the subsidies varying from 12s. 3d. to 24s. 3d. in the pound, and were designed to give the maximum subsidy to the district which had both the lowest rateable value per head of the population and the lowest rate of levy per head of the population. The law governing Hospital Boards at present is contained in the Hospital and Charitable Institutions Act, 1926, which is a consolidation of earlier enactments.

Under the 1909 Act, 36 hospital districts were constituted. By subsequent legislation from 10 to 25 additional districts were constituted by subdivisions of existing districts, and when the Consolidation Act was passed in 1926 there were 47 districts. The 1909 Act and the 1926 Act contained provisions for the amalgamation of contiguous districts if the Board agreed, a provision which was availed of on two occasions, once in 1930, when the Picton and Wairau Hospital Districts were united to form the Marlborough Hospital District, and in 1931 when the Matakaoa and Waiapu Hospital Districts were united to form the Waiapu Hospital District.

The question of Hospital Boards was in the forefront during the depression, and in 1932 an amendment to the Hospital and Charitable Institutions Act made provision for the appointing of a Commission of Inquiry to report on the advisability of the amalgamation of two or more contiguous districts. This provision has been availed of on two occasions, once in 1937, when the Thames, Waihi, and Coromandel Hospital Districts were merged into one district, and in 1938, when the Southland