NEW ZEALAND HOSPITALS ACT.

PART I.

Statutory.

1. For the purposes of the Hospitals and Charitable Institutions Act, 1909, New Zealand is divided into thirty-seven hospital districts.

Each hospital district is controlled by a Board, the representatives being elected by the electors of the various contributory authorities in the hospital district—i.e., Borough Councils, Town Boards, County Councils, and Road Boards, or a combination thereof.

The representation on a Board is proportioned to the population and the value of the rateable property in the contributory district.

The representatives of a contributory district retire at every general election of the local authority of that district, and their places are filled by an election held at the same time as that general election. By this means the continuity of Boards is somewhat preserved, by securing the retirement of groups of members at different times—e.g., the borough elections are held every two years, in the month of April, and the County Council elections every three years, in November. The Chairman of the Board holds office for two years' certain tenure.

Subject to a modicum of Government control, a Board is responsible (a) For the local administration of public health; (b) for the management of hospitals; (c) for the administration of poor-law relief.

Revenue

2. The revenue of Boards is derived from four principal sources—(a) Local rates; (b) Government subsidies; (c) payments by persons relieved; (d) voluntary contributions.

During the past four years the receipts from the above-mentioned sources were as follows:—

			£
(a.) Per Government subsidies		<u> </u>	154,070
		1909–10	152,856
	• • •	·· ↑ 19 10–1 1	167,941
		1911-12	189,011
(b.) Per local rates		<u> 1908–9</u>	116, 134
		1909-10	129,012
		·· \ 1910–11	131,525
		1911-12	149,203
(c.) Per voluntary contributions		<u>~1908–9</u>	20,861
		1909-10	31,061
		·· \ 1910-11	35,433
		1911–12	31,656
(d.) Per payments by persons relieved		<u></u> 19 08 −9	$47^{'},777$
	A	1909–10	56,742
	• •	⋯ `` 1910–11	61,983
		1911-12	64,138
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In addition to the above, there are a few hospitals which are possessed of small endowments.

- 3. The rates are collected by a Board by means of levy on the local authority. The Hospital Board has no power to strike a rate, though the levy struck by the Board constitutes a debt payable by the corporation of the authority to the Board, and may be recovered in Court. If any local authority considers the levy excessive, it has the right to appeal to the Minister in charge of the Department, who may cause a commission to be set up to inquire into the circumstances. The opinion of the Minister is final.
 - 4. Government subsidies are granted as follows:—
 - (a.) Ten shillings for every pound of the value of all devises or bequests—the subsidy being limited to £500 in respect of the estate of a single testator.
 - (b.) Twenty-four shillings for every pound of the value of all voluntary contributions, or gifts of money, land, or other property other than devises or bequests.
 - (c.) For every pound levied by the Board from contributory local authorities—(1) £1 in respect of capital expenditure; (2) an amount determined in accordance with the subjoined table in respect of expenditure other than capital expenditure—i.e., maintenance.