REPRESENTATION ON BOARDS.

Para. 7. The present method of allocation of representation of contributory local authorities and the ratepayers on Hospital Boards, having regard also to the nature of the suffrage.

Evidence was heard upon the proposal that election of members to Boards be superseded by nomination of members by contributory local authorities. The suggestion was generally opposed by Hospital Boards, but found favour with some contributory local authorities. Sufficient reasons were not advanced to justify your Commission recommending any alteration in the existing form of election of members to Hospital Boards, or in the existing forms of franchise, except in the following instances:—

- (a.) Allocation of Representation of Contributory Districts.—It was pointed out that the number of representations of each contributory district is determined under the Act after taking into consideration the relative population and the relative rateable capital value in each district, and the practice has been to give equal weight to each factor in arriving at such representation. As the levy is made directly on the ratepayer, your Commission is of opinion that, in arriving at the representation, greater consideration should be given to the rateable property than to the population; and your Commission recommends that the proportion be two-thirds to one-third.
- (b.) Franchise.—Instances were cited before your Commission of the unfairness of two or more contributory districts with different forms of franchise being joined in a combined district within a hospital district. For instance, a county, voting on a ratepayers roll, is at a disadvantage when joined with a borough, voting on the manhood suffrage, in an election for representatives for the Local Hospital Board. With the extended franchise the borough electors are able to dominate an election, the county ratepayers roll being further reduced by the Act to each elector having one vote only.

Your Commission recommends that the ratepayers' suffrage should apply throughout the combined district. The ratepayers rolls, taken from the valuation rolls, could more easily be compiled than manhood-suffrage rolls, and would have the further advantage of representing the payers of the hospital levy.

GOVERNMENT REPRESENTATION ON BOARDS.

Para. 8. The desirability or otherwise of providing for Government representation upon Hospital Boards by means of nominated members.

In view of the extensive powers of control possessed by the Minister, your Commission fails to see that any good purpose would be served by the nomination of Government representatives on Hospital Boards, and that opinion generally was expressed in evidence by the various Boards.

Your Commission, however, considers that section 75 (2) of the Hospitals and Charitable Institutions Act, 1909, should be amended by the insertion of the words "or an Assistant Inspector" after the words "The Inspector-General"; and that section 34 be deleted, and the following substituted: "No appointment of any medical officer, or of a master, manager, or matron of any institution, or of a secretary of a Board, shall be made unless the Minister has previously approved of such appointment."

Your Commission, however, is of opinion that there should be a Government nominee on each of the Boards controlling the base hospitals at Auckland, Wellington, Christchurch, and Dunedin. Such nominees should be selected to represent the outlying districts, in view of the special allocation of subsidy from those outlying districts to the Boards of the base hospitals for the development of special departments. Your Commission also recommends the appointment of a Government nominee to represent the Medical Faculty of the University of Otago.