

2007 District Health Board Elections

Information for Candidates

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Foreword

Now is an exciting time to be involved in health. Working with other organisations across a range of health and disability services, your local District Health Board (DHB) plays a huge role in your community's wellbeing.

One of the many ways you can be involved in local health and disability decision-making is by standing for election to your DHB board. DHB board members make important choices that affect the lives of everyone who lives in their district. It's a challenging role and if you're elected you'll face many tough decisions. However working as a team with other passionate people, you'll help to make a real difference to the health of your community.

I encourage you to stand for your DHB and make a positive contribution to the way health and disability services are governed in your area. This handbook outlines some of the key things you need to know before making a decision on standing.

I appreciate your time in considering standing and wish all candidates good luck at the 2007 DHB elections.

A handwritten signature in black ink, reading "Pete Hodgson". The signature is written in a cursive style with a large initial "P" and a horizontal line underneath the name.

Hon Pete Hodgson
Minister of Health

Disclaimer

This handbook is intended as a general guide for those people who may be considering standing for a DHB board. The information and advice it contains is correct as at the date of publication. Candidates should obtain specific professional advice on their own circumstances in relation to election matters.

Contents

| | |
|---|-----------|
| Foreword | iii |
| Disclaimer | iv |
| Important dates | 1 |
| DHBs and the New Zealand Health and Disability Sector..... | 2 |
| Who makes up the health and disability sector? | 2 |
| What legislation governs the sector? | 3 |
| What are DHBs' objectives? | 3 |
| What are DHBs' functions? | 4 |
| How are DHBs accountable?..... | 5 |
| How DHB Boards Work | 6 |
| How are boards made up?..... | 6 |
| What is the board's role? | 6 |
| How do representative boards take shape? | 6 |
| Do boards have committees? | 6 |
| What are board members' duties?..... | 7 |
| What happens at board meetings? | 7 |
| Who are board members responsible to? | 8 |
| Do board members receive any training?..... | 8 |
| How much time does being a board member take up?..... | 8 |
| How long do board members serve for? | 9 |
| Are board members paid for their work?..... | 9 |
| Standing for a DHB Board | 10 |
| Who can be a candidate? | 10 |
| Who runs DHB elections? | 10 |
| How can I be nominated?..... | 11 |
| Do I have to pay a deposit? | 12 |
| What are candidate profile statements? | 12 |
| How do I run an election campaign?..... | 13 |
| How much can I spend on my campaign? | 13 |
| Where will my name be on the voting document? | 13 |
| How much support do I need to be elected? | 14 |
| Can I withdraw from the election? | 14 |

| | |
|--|-----------|
| Eligibility Checklist for Candidates | 15 |
| Part 1: Basic eligibility | 15 |
| Part 2: Specific exclusions | 15 |
| Conflict of Interest Statements | 17 |
| What is a conflict of interest statement? | 17 |
| What is the legal definition of a conflict of interest?..... | 17 |
| What things should be identified as conflicts of interest? | 18 |
| How do these requirements apply in practice? | 19 |
| What happens with conflicts of interest after the election? | 19 |
| How do conflicts of interest affect board meetings?..... | 19 |
| Why do these requirements exist?..... | 20 |
| What do conflict of interest statements look like?..... | 20 |
| Single Transferable Voting | 23 |
| How do you vote in an STV election? | 23 |
| How does the STV quota work? | 24 |
| How are STV votes counted?..... | 24 |
| After the Election | 26 |
| When do election results come out?..... | 26 |
| When do new board members take office? | 26 |
| Do I have to declare my electoral expenses?..... | 26 |
| If I'm unsuccessful, can I be considered as an appointed board member? | 27 |
| Who becomes the board's chair and deputy chair?..... | 27 |
| Further Information | 28 |
| Ministry of Health | 28 |
| Local Government New Zealand | 28 |
| Single Transferable Voting..... | 28 |
| Legislation | 28 |
| DHB and Electoral Officer Contact Information | 29 |
| Northern Region | 29 |
| Midland Region | 30 |
| Central Region | 31 |
| Southern Region | 32 |
| Map of North Island DHBs | 33 |
| Map of South Island DHBs | 34 |

Important Dates

Please note the following important dates for the 2007 DHB elections.

| Date | Action |
|----------------------|--|
| 27 July 2007 | Candidate nominations open. |
| 24 August 2007 | Candidate nominations close (at 12 noon). |
| 21–26 September 2007 | Voting documents issued – start of voting period, special votes are issued and early processing of votes begins. |
| 13 October 2007 | Election day – end of voting period (at 12 noon) and announcement of preliminary results (as soon as practical after the close of voting). |
| From 13 October 2007 | Special votes counted and official results declared. |
| 10 December 2007 | Newly elected board members take office. |

DHBs and the New Zealand Health and Disability Sector

District Health Boards (DHBs) are Crown entities responsible for providing and funding health and disability services in 21 districts. A map of North Island DHBs appears on page 33 of this handbook; South Island DHBs appear on page 34.

Who makes up the health and disability sector?

The Minister of Health and the Government set the overall strategic direction for the health and disability sector. This direction is outlined in the *New Zealand Health Strategy*, the *New Zealand Disability Strategy* and a number of other strategies (eg, *He Korowai Oranga: Māori Health Strategy*). These strategies are available on the Ministry of Health's website: <http://www.moh.govt.nz/publications>

A wide range of advocacy and consumer groups, health care providers and health professional groups make significant contributions to the sector, as do many non-government and voluntary groups. The primary government organisations in the sector are the 21 DHBs, working with the Ministry of Health. Other government organisations and agencies also play important roles. These include:

- other health Crown entities: the Alcohol Advisory Council of New Zealand (ALAC), the Crown Health Financing Agency, the Health and Disability Commissioner, the Health Research Council, the Health Sponsorship Council, the Mental Health Commission, the New Zealand Blood Service and the Pharmaceutical Management Agency (PHARMAC)
- the Accident Compensation Corporation (ACC)
- the Ministry of Social Development, including:
 - Child, Youth and Family
 - Office for Disability Issues
 - Work and Income
- the Ministry of Agriculture and Forestry and the Ministry for the Environment (who have biosecurity functions).

More detailed information on the New Zealand health and disability sector is available in the Ministry of Health publication, *New Zealand Health and Disability Sector Overview*. This is available on the Ministry's website: <http://www.moh.govt.nz/publications>

What legislation governs the sector?

While the health and disability sector is subject a large number of acts and regulations, the sector is largely structured through the:

- New Zealand Public Health and Disability Act 2000 (the NZPHD Act)
- Crown Entities Act 2004 (the CE Act)
- Health Act 1956.

The NZPHD Act outlines the responsibilities of the Minister of Health and the role and functions of DHBs. In addition, the NZPHD Act creates several ministerial committees including the National Health Committee, and outlines the roles and functions of the Crown Health Financing Agency, the New Zealand Blood Service and PHARMAC.

The CE Act provides a consistent framework for the establishment, governance and operation of Crown entities. It also clarifies accountability relationships and reporting requirements between Crown entities, board members, responsible Ministers (on behalf of the Crown) and the House of Representatives.

The Health Act is focused on public health. It sets out the role of the Ministry of Health in relation to public health, and contains provisions for sanitation, pollution, quarantine and infectious diseases, trading in blood and controlled substances, and screening programmes. An updated Health Act is currently being considered by Parliament.

What are DHBs' objectives?

DHBs' objectives are clearly set out in law.¹ These include:

- improving, promoting and protecting the health of people and communities
- promoting the integration of health services, especially primary and secondary health services
- promoting effective care and support for those in need of personal health services or disability support services
- promoting the inclusion, participation in society and independence of people with disabilities
- reducing health disparities by improving health outcomes for Māori and other population groups
- reducing (with a view to eliminating) health outcome disparities between various population groups within New Zealand by developing and implementing (in consultation with the groups concerned) services and programmes designed to raise their health outcomes to those of other New Zealanders

1 See section 22 of the NZPHD Act.

- exhibiting a sense of social responsibility by having regard to the interests of the people for whom it provides (or arranges the provision of) services
- fostering community participation in health improvement and in planning for the provision of services and for significant changes to the provision of services
- upholding ethical and quality standards commonly expected of providers of services and of public sector organisations
- exhibiting a sense of environmental responsibility by having regard to the environmental implications of its operations
- being a good employer in accordance with section 118 of the CE Act.

DHBs are required to pursue their objectives in accordance with their District Strategic Plans, District Annual Plans and Statements of Intent. DHBs also have to comply with any formal directions given to them by the Minister of Health.²

What are DHBs' functions?

A DHB has certain defined functions in order to achieve its objectives.³ These include:

- ensuring the provision of services for its resident population and for other people as specified in its Crown funding agreement
- actively investigating, facilitating, sponsoring, and developing co-operative and collaborative arrangements with persons in the health and disability sector (or in any other sector) to improve, promote, and protect the health of people, and to promote the inclusion and participation in society and independence of people with disabilities
- issuing relevant information to the resident population, persons in the health and disability sector, and persons in any other sector working to improve, promote, and protect the health of people for the purposes of the two preceding functions
- establishing and maintaining processes to enable Māori to participate in, and contribute to, strategies for Māori health improvement
- continuing to foster the development of Māori capacity for participating in the health and disability sector and for providing for the needs of Māori
- providing relevant information to Māori for the purposes of the two preceding functions
- regularly investigating, assessing, and monitoring the health status of its resident population, any factors that the DHB believes may adversely affect the health status of that population, and the needs of that population for services
- promoting the reduction of adverse social and environmental effects on the health of people and communities

2 See sections 32 and 33 of the NZPHD Act. DHBs also have to follow 'whole of government' directions issued by the Minister for State Services and the Minister of Finance under the CE Act.

3 See section 23 of the NZPHD Act.

- monitoring the delivery and performance of services by it and by persons engaged by it to provide or arrange for the provision of services
- participating, where appropriate, in the training of health practitioners and other workers in the health and disability sector
- providing information to the Minister of Health for the purposes of policy development, planning, and monitoring in relation to the performance of the DHB and to the health and disability support needs of New Zealanders
- providing, or arranging for the provision of, services on behalf of the Crown or any Crown entity within the meaning of the CE Act
- collaborating with preschools and schools within its geographical area on the fostering of health promotion and on disease prevention programmes
- performing any other functions it is for the time being given by or under any enactment, or authorised to perform by the Minister of Health by written notice to the board of the DHB after consultation with it.

How are DHBs accountable?

DHBs are accountable, both to the Government and the House of Representatives, through a framework set out in statute and in Cabinet decisions.

Accountability to the Government is achieved through the following documents.

- **District Strategic Plan:** Sets out the DHB's strategic objectives and or desired DHB population outcomes for a five- to ten-year period. DHBs must consult their resident populations when forming their District Strategic Plans.
- **District Annual Plan:** Sets out in greater detail how the DHB intends to work towards the intermediate outcomes or strategic objectives identified in its District Strategic Plan, for a particular financial year.
- **Crown Funding Agreement:** Specifies the funding to be supplied to the DHB by the Crown in return for the broad outputs expected of DHBs and specific outputs set out in the DHB's District Annual Plan.

The following documents form the main lines of accountability to the House of Representatives.

- **Statement of Intent (SOI):** The SOI is the DHB's key accountability document to the House, and through the House to the public. The SOI provides a high-level focus on the DHB's key financial and non-financial objectives and targets. It is a relatively brief and concise document and is intended to be easily understood by the general public. The SOI is prepared before each financial year and covers the period of the financial year and at least the following two years.
- **Annual Report:** The Annual Report covers the year's activities, against the SOI, including financial performance and the DHB's Statement of Service Performance.

How DHB Boards Work

How are boards made up?

Each DHB board consists of seven elected members, and up to a further four members appointed by the Minister of Health. This structure allows for a range of perspectives, skills and knowledge on each DHB board.

The Minister of Health also appoints a chair and deputy chair for each board from among the board's elected and appointed members.

What is the board's role?

The board of a DHB has all powers necessary for the governance and management of the DHB. However, the board **must** delegate to the DHB's Chief Executive the power to make decisions on management matters relating to the DHB.⁴ This delegation may be made on such terms and conditions as the board thinks fit.

The board's role is therefore one of stewardship, direction-setting and monitoring the DHB's overall performance against its goals. It is not one of day-to-day management (which is the domain of the Chief Executive). The board also has no role in employment decisions, beyond appointing the Chief Executive. By law, the board cannot interfere in matters relating to individual employees.⁵

How do representative boards take shape?

DHB boards are made up of elected and appointed members. In electing seven members, the public typically votes for candidates with a range of backgrounds and experience. The Minister of Health is allowed to appoint up to four more people to each board, to balance the skills and representative qualities of the elected members. For example, the Minister may wish to appoint people with financial or other large entity governance experience, or people from groups not represented among the elected members.

Do boards have committees?

Yes. Under the NZPHD Act, a DHB board has three statutory advisory committees: the hospital advisory committee; the community and public health advisory committee; and the disability support advisory committee. The board is also able to form its own specialist committees to address particular issues (eg, audit and finance matters, Māori health or rural health).

Committee members are appointed by the DHB board. They can be either board members, members of the public or a mixture of both.

⁴ See section 26 of the NZPHD Act.

⁵ See clause 44(4) of Schedule 3 to the NZPHD Act.

What are board members' duties?

The CE Act sets out DHB board members' duties. Every board member must comply with the CE Act and the NZPHD Act, act with honesty and integrity, act in good faith and not at the expense of the DHB's interests, and act with reasonable care, diligence and skill.⁶ Board members also have a duty not use information received in their capacity as a member that would otherwise not be available to them, unless it is for board purposes.⁷

The board also has a number of collective duties. It must ensure that the DHB:

- acts in a manner consistent with the DHB's District Strategic Plan, District Annual Plan, and any directions under section 33 of the NZPHD Act, or section 103 or 107 of the CE Act⁸
- acts in a manner consistent with its objectives, functions, current Statement of Intent, and Crown Funding Agreement
- performs its functions efficiently and effectively and in a manner consistent with the spirit of service to the public
- operates in a financially responsible manner and, for this purpose, that it prudently manages its assets and liabilities and endeavours to ensure its long-term financial viability and that it acts as a successful going concern.⁹

The board must also ensure that the DHB complies with sections 97, 98, 99 and 101 of the CE Act in respect of any subsidiary entities it may have.¹⁰

The Minister has the power to remove one or all board members for breaching their duties, in addition to other reasons (eg, that an elected member was not entitled to be elected in the first place).¹¹

What happens at board meetings?

At board meetings, members discuss a range of matters to do with the DHB's business. These include reports from various operating parts of the DHB (eg, finance, mental health, elective services) and from subsidiary companies and trusts the DHB might have an interest in. Board members are asked to make decisions on the DHB's strategic direction and monitor the Chief Executive's performance, among other things.

Decisions taken by the board are formalised as resolutions, voted on by members after the board has debated and has discussed the matters at hand. Looking at board agendas, minutes and papers is a good way of seeing what is discussed at a typical meeting.

6 See sections 53 to 56 of the CE Act.

7 See section 57 of the CE Act.

8 See section 27(1) of the NZPHD Act.

9 See sections 49 to 51 of the CE Act.

10 See section 52 of the CE Act and section 21 of the NZPHD Act.

11 See clause 8 of Schedule 3 to the NZPHD Act.

These are available directly from the DHBs or on their websites. DHBs' contact details and website addresses are listed on pages 29–32.

Board meetings are held in public, and both the meeting agenda and the minutes of the meeting are available to the public. Under some circumstances, parts of the meeting may need to be closed to the public.¹²

DHB boards are free to regulate their own procedures at meetings and establish their own policies so long as these aren't inconsistent with the NZPHD Act. Board members are expected to treat all confidential business before the board as strictly confidential (see 'What are board members' duties?' on previous page). Members are also expected to comply with all relevant legislation concerning privacy, especially with regards to individuals. The board may also have a media policy which guides members' dealings with media organisations.

Who are board members responsible to?

While most board members are elected by the public, **all** board members (both elected and appointed) are directly responsible and accountable to the Minister of Health. This is because DHBs are funded by the Government, using taxpayer dollars. It is acknowledged though that elected members provide an important community voice on DHB boards.

Board decision-making is highly transparent. Meetings, agendas and board papers are normally required to be open and available to the public. The DHB's District Strategic Plan is also subject to a public consultation process, as are many other decisions DHBs make.

Do board members receive any training?

Yes. Board members who are not familiar with their obligations and duties as members are expected to undertake and complete any necessary training. DHBs fund this training and keep records of it.

Both the Ministry of Health and individual DHBs usually provide induction/refresher sessions for board members, upon their taking office.

How much time does being a board member take up?

Time requirements for board members vary from DHB to DHB, depending on the way the board works, how efficiently members work and on members' experience.

Board members should be prepared to commit the equivalent of about 60 days per year for board business. This includes preparation time, board meetings, committee meetings, and community liaison activities.

¹² See clause 32 of Schedule 3 to the NZPHD Act.

How long do board members serve for?

An elected member serves a three-year term. This term begins on the 58th day after polling day (10 December 2007) and ends on the equivalent date in 2010 when new boards come into office. Board members may stand for re-election every three years.

Appointed members serve at the Minister of Health's pleasure, and have a term of up to three years. They may, however, be appointed for a shorter time. They may also be reappointed, subject to a upper limit of nine consecutive years on the board. Reappointment is not automatic, and there is no guarantee that any appointed member will be reappointed to a board on the expiry of their term.

Are board members paid for their work?

Yes. The Minister of Health determines board members' terms and conditions of office and levels of remuneration. Board members are paid an annual fee for their service on the board, and fee levels vary from DHB to DHB (depending on the size and assessed complexity of the DHB). Fees currently range from \$16,000 to \$26,000 per annum. The board chair and deputy chair receive a higher fee.

Board members are paid an additional fee of up to \$2500 per annum for each statutory advisory committee they are a member of. Members serving on certain other committees (eg, audit, risk and finance committees) also receive an additional annual fee.

Members are covered for reasonable expenses associated with board and committee business, such as travel costs.

Standing for a DHB Board

Who can be a candidate?

As a general rule, any person who is a New Zealand citizen and is a parliamentary elector can stand for election to a DHB board. However, there are several exceptions to this and these are set out in the NZPHD Act.¹³ Please refer to page 15 of this handbook for further information.

It isn't necessary to be an experienced director or to have particular qualifications to be a DHB board member. Candidates with different backgrounds, skills, expertise and qualifications are welcomed – and in fact desired. Boards work best when members have informed views on many aspects of the DHB's work, rather than a narrow focus on one or two issues.

Overall, the Government expects DHB boards and board members to, among other things, demonstrate the following competencies:

- integrity and ethics
- best practice governance and accountability skills
- strategic leadership.

You do not have to live in the DHB's district to stand for election to its board, but you cannot stand for election in more than one DHB. For example, even if you lived on the North Shore (and therefore within Waitemata DHB's boundaries) you could still run for the board of Auckland DHB, but you could not run for both Auckland DHB and Waitemata DHB.

If you are an elected member of one DHB board, you cannot also be an appointed member of a different DHB board at the same time. However, you are allowed to stand as both a local government candidate (ie, run for election to a council, community board, licensing trust, etc) and as a DHB candidate.

DHB employees are not prevented from being elected as a member of a DHB simply because they are employees of the DHB.¹⁴

Who runs DHB elections?

Each DHB chooses its own independent electoral officer. That person must also be the electoral officer of one of the city or district councils within the DHB's boundaries. The electoral officer appoints a deputy and other officials to help him or her to conduct the election. The electoral officer may also choose to contract a specialist election services provider to perform parts of the electoral process.

¹³ See clause 17 of Schedule 2 to the NZPHD Act.

¹⁴ See clause 7 of Schedule 2 to the NZPHD Act.

How can I be nominated?

To stand for election, you must be nominated by any **two** qualified electors (ie, two people who are on the electoral roll in the district of the DHB for which you wish to stand). You are **not** permitted to nominate yourself.

Nomination forms are available from DHB electoral officers. DHB electoral officers and their contact details appear on pages 29–32 of this handbook. Nominations open on Friday, 27 July 2007 and close promptly at 12 noon on Friday, 24 August 2007.

Your nomination must meet certain criteria.¹⁵ These criteria are incorporated into the nomination form. Your nomination has to be in writing, be addressed to the relevant electoral officer, be dated, and include:

- your full name and address
- the name under which you are seeking election (note that titles such as ‘Doctor’ cannot be used)
- the office you are standing for
- how you comply with the candidate qualification requirements
- the full names, addresses and signatures of the two electors who are nominating you
- a conflict of interest statement, which sets out any current or anticipated conflicts of interest you have (more information on conflict of interest statements can be found on pages 17–22).

Your nomination can also include a candidate profile statement and a recent passport-sized photo (more information on candidate profile statements is on pages 12–13).

Nominations will only be accepted if the candidate gives their consent to the nomination. This is done by giving written notice to the electoral officer, prior to the close of nominations (12 noon on Friday, 24 August 2007).

It’s usual practice to file all your necessary documents together, along with your deposit (see over).

Please do not leave lodging your nomination to the last minute. If your nomination paper has been lodged early and the electoral officer identifies something wrong with it, it’s more likely that there’ll be enough time to have this corrected before the nomination period closes.

¹⁵ See section 55(2) of the Local Electoral Act 2001 (the LE Act) and regulation 25(3) of the Local Electoral Regulations 2001 (the LE Regs).

Do I have to pay a deposit?

Yes. A deposit of \$200 (including GST) must also be received by the electoral officer before 12 noon on Friday, 24 August 2007.¹⁶ This deposit is refunded if you:

- withdraw or retire from the election before election day
- die before the close of voting
- become incapable (under the Local Electoral Act 2001 (the LE Act) or any other act) of holding office before the close of voting
- are successfully elected to the board, or receive votes greater than 25 percent of the final quota of votes, as determined at the last stage of the vote count¹⁷
- are elected without an actual election needing to occur (ie, there are fewer candidates than there are vacancies to fill).

The deposit is **not** refunded if you fail to receive votes greater than 25 percent of the final quota of votes, as determined at the last stage of the vote count. More information on how the quota works under Single Transferable Voting (STV) can be found on page 24.

What are candidate profile statements?

As a candidate, you have the opportunity to complete a candidate profile statement.¹⁸ These statements are sent to voters with their voting documents. Candidate profile statements can only contain:

- information about you
- any group or organisation you claim to be affiliated with (as identified in your nomination), or that you identify as an ‘independent’ candidate
- your contact details
- your policies and intentions if elected.

Statements can be written in:

- English or Māori, or both (to a maximum of 150 words in each language), or
- in any other language (to a maximum of 150 words in total for both the statement and any translation into another language).

If candidate profile statements are submitted in more than one language, profiles must contain substantially the same information in each language.

Statements must be sent to the DHB’s electoral officer prior to the close of nominations (12 noon on Friday, 24 August 2007). There is also the option of including a recent

¹⁶ See section 55(2) of the LE Act and regulation 25(3) of the LE Regs.

¹⁷ See regulation 94 of the LE Regs.

¹⁸ See section 61 of the LE Act.

passport-sized photograph, which appears alongside your statement in the voting pack that's sent to voters.

DHBs are elected 'at-large'. Unlike ward or constituency arrangements, this means that every voter living in a DHB district is able to express a preference for every candidate who stands for the board. To assist voters in identifying local candidates, you should identify your suburb and city, or other locality of residence, at the start of your candidate profile statement.

How do I run an election campaign?

We can't advise you on how to conduct a campaign. Some successful candidates spend very little on their campaigns; others spend a lot. Decisions on the best way to tackle an election are yours. You may wish to discuss your campaign with friends and family/whānau, or talk to people who've stood at previous local or DHB elections.

How much can I spend on my campaign?

The maximum amount of money candidates can spend on electoral expenses (including GST) depends on the size of the DHB's population, as follows.¹⁹

| DHB resident population | Maximum electoral expenses |
|-------------------------|----------------------------|
| 20,000–39,999 | \$20,000 |
| 40,000–59,999 | \$30,000 |
| 60,000–79,999 | \$40,000 |
| 80,000–99,999 | \$50,000 |
| 100,000–149,999 | \$55,000 |
| 150,000–249,999 | \$60,000 |
| 250,000 or more | \$70,000 |

The DHB's electoral officer will be able to inform you of the electoral expense limit in the DHB you are standing for.

Where will my name be on the voting document?

DHBs decide the method for ordering candidate names on the voting document. Names can be arranged alphabetically by surname, in 'pseudo-random' order (where names are 'drawn out of a hat' and that order appears on every document), or in random order (where every voting document effectively has a different order on it). The DHB's electoral officer will be able to tell you what order the DHB has selected.

¹⁹ See section 111 of the LE Act.

How much support do I need to be elected?

To be elected to a DHB, you will need to get a little over 12.5 percent of the vote (remembering that in an ‘at large’ system, voters from the whole of the DHB’s district can vote for you). Pages 23–25 have further information on the STV voting system used for DHB elections.

Can I withdraw from the election?

Yes. You may withdraw from the election at any time before polling day (Saturday, 13 October 2007) by giving written notice to the electoral officer. If you withdraw before polling day, you are entitled to receive your deposit back.

Eligibility Checklist for Candidates

Basic eligibility criteria are found in the LE Act. Further grounds for disqualifying certain persons from a DHB board are found in the NZPHD Act. The following checklist will help you to see whether you're eligible to be elected to a DHB board.

Part 1: Basic eligibility

| Question | Response |
|---|----------|
| Are you a New Zealand citizen? ²⁰ | YES / NO |
| Are you enrolled as a parliamentary elector? (ie, someone who is enrolled to vote at parliamentary elections) ²¹ | YES / NO |

If you answered **YES** to both questions in Part 1 then, depending on your answers to the questions in Part 2, you may be eligible to stand as a candidate for a DHB board. If you answered **NO** to either question, you're not eligible to stand.

Part 2: Specific exclusions

| Question | Response |
|---|----------|
| Are you a person to whom section 30(2)(a) to (f) of the Crown Entities Act applies? That is: (a) a person who is an undischarged bankrupt (b) a person who is prohibited from being a director or promoter of, or being concerned or taking part in the management of, an incorporated or unincorporated body under the Companies Act 1993, or the Securities Act 1978, or the Securities Markets Act 1988, or the Takeovers Act 1993 (c) a person who is subject to a property order under the Protection of Personal and Property Rights Act 1988 (d) a person in respect of whom a personal order has been made under that Act that reflects adversely on the person's: (i) competence to manage his or her own affairs in relation to his or her property, or (ii) capacity to make or communicate decisions relating to any particular aspect or aspects of his or her personal care and welfare | YES / NO |

²⁰ See section 25 of the LE Act.

²¹ See section 25 of the LE Act.

(e) a person who has been convicted of an offence punishable by imprisonment for a term of two years or more, or who has been sentenced to imprisonment for any other offence, unless that person has obtained a pardon, served the sentence, or otherwise suffered the penalty imposed on the person YES / NO

(f) a member of Parliament.²²

Have you been removed as a DHB board member since the last DHB elections, under clause 9(c) or 9(e) of Schedule 3 to the NZPHD Act?²³ YES / NO

Did you previously fail to declare a material conflict of interest before accepting nomination as candidate at the last DHB election?²⁴ YES / NO

If you answered **YES** to any of the questions in Part 2, it's likely that you're not eligible to stand as a candidate at a DHB election. If you're in any doubt as to your eligibility to stand, you should seek professional legal advice.

22 See clause 17(1)(a) of Schedule 2 to the NZPHD Act. Members of Parliament can stand for election as a DHB board member but cannot be appointed to a DHB board by the Minister of Health.

23 See clause 17(1)(e) of Schedule 2 to the NZPHD Act.

24 See clause 17(1)(f) of Schedule 2 to the NZPHD Act.

Conflict of Interest Statements

As a DHB candidate, you're required to provide the DHB's electoral officer with a statement as to your current conflicts of interest, and any you believe are likely to emerge in the future. Completing a conflict of interest statement is a **legal requirement** for all candidates²⁵ on consenting to being nominated. Failure to disclose a conflict of interest may result in your removal from the board if you are elected.

Conflict of interest statements serve to increase public confidence and transparency in DHB decision making. It's in everyone's best interests for candidates to be as open and as frank with the public as possible. This helps to avoid any suggestion that the public was not made aware of actual or potential conflicts of interest when considering candidates for election.

The existence of a conflict of interest does not disqualify you as a potential board member. Disclosing the conflict enables it to be managed, using the procedures set out in the NZPHD Act.²⁶ If you are in any doubt as to whether you have conflicts of interest, you should seek professional advice.

What is a conflict of interest statement?

You **must** provide a conflict of interest statement to the electoral officer. This is a statement, completed by you in good faith, that:

- discloses any conflicts of interest you have with the DHB, as at the date of your notice of consent to nomination, or states that you have no such conflicts of interest as at that date, and
- discloses any such conflicts of interest that you believe are likely to arise in future, or states that you do not believe that any such conflicts of interest are likely to arise in the future.

Your conflict of interest statement will be supplied to all voters with their voting documents.

What is the legal definition of a conflict of interest?

Conflicts of interest are defined in section 6 of the NZPHD Act as follows:

conflict of interest in relation to a person and a DHB, includes–

- (a) the person's interest in a transaction (within the meaning of subsection (2)) of the DHB; and
- (b) the person's interest that would, if the person were a member of the board of the DHB or a member of a committee of that board or a delegate of that board, be an interest in a transaction (within the meaning of subsection (2)) of the DHB; and
- (c) to avoid any doubt, the employment or engagement of the person, or of the person's spouse or partner, as an employee or contractor of the DHB.

²⁵ See clause 6 of Schedule 2 to the NZPHD Act.

²⁶ See clause 36 of Schedule 3 to the NZPHD Act.

Subsection (2) states:

For the purposes of this Act, a person who is a member of a board of a DHB or a member of a committee of such board or a delegate of such board is **interested in a transaction** of a DHB if, and only if, the board member or the member of the committee or the delegate—

- (a) is a party to, or will derive a financial benefit from, the transaction; or
- (b) has a financial interest in another party to the transaction; or
- (c) is a director, member, official, partner, or trustee of another party to, or a person who will or may derive a financial benefit from, the transaction, not being a party that is—
 - (i) the Crown; or
 - (ii) a publicly-owned health and disability organisation;²⁷ or
 - (iii) a body that is wholly owned by 1 or more publicly-owned health and disability organisations; or
- (d) is the parent, child, spouse or partner of another party to, or person who will or may derive a financial benefit from, the transaction; or
- (e) is otherwise directly or indirectly interested in the transaction.

Section 6 goes on to say, in subsection (3):

A person is not interested in a transaction for the purposes of subsection (2)—

- (a) if his or her interest is so remote or insignificant that it cannot reasonably be regarded as likely to influence him or her in carrying out his or her responsibilities under this Act or another Act; or
- (b) because he or she receives remuneration or other benefits authorised under this Act or another Act.

The NZPHD Act specifically provides that an employee of a DHB may stand for election to the board,²⁸ even though their employment creates a conflict of interest.

What things should be identified as conflicts of interest?

Many DHB candidates will have connections to the health service through their own or a family member's employment. They may also have business connections to the DHB, such as providing services which the DHB purchases or subsidises, or there is a possibility that they will provide such services at some point in the future.

In writing your conflict of interest statement, you need to consider not only your current circumstances, but also the possibility of any future conflicts of interest. Most candidates will be able to disclose their interests in a simple statement. Some examples of conflict of interest statements are set out later on in this section, starting at page 20.

²⁷ Publicly owned health and disability organisations are defined as DHBs, PHARMAC, the New Zealand Blood Service and the Crown Health Financing Agency.

²⁸ See clause 7 of Schedule 2 to the NZPHD Act.

The general rule of thumb is, 'If in doubt, declare it'.

How do these requirements apply in practice?

The 'remoteness test' set out in section 6(3) to the NZPHD Act is not further defined. Whether a conflict is 'so remote or insignificant' that it wouldn't affect a member's duties is initially a matter of judgement for candidates.

You may have a conflict of interest in a situation where you do not derive a personal benefit at all. For example, a board member who is a trustee of a community health trust partly funded by the DHB would have a potential conflict of interest with respect to their involvement with that trust.

A practical test of whether an interest is significant is whether any voter would consider it to be relevant to their voting decision. Would they care if the interest was not disclosed and they found out about it later? If they might care, then the interest should be declared. Where there is any doubt as to the significance of an interest, it should still be declared.

What happens with conflicts of interest after the election?

If you're successfully elected to the board, you're required to ensure that your conflict of interest statement is included in the DHB's interests register. You must also ensure that any changes to your circumstances described in your statement are incorporated into the register.

Conflicts of interest should always be at the front of a board member's mind. The process for their disclosure and management is an ongoing one.²⁹ Board members must disclose interests as soon as practicable after the relevant facts have come to their knowledge. These interests are then recorded in the minutes of the board meeting and entered into the interests register.

How do conflicts of interest affect board meetings?

Having disclosed a conflict of interest, a board member is not permitted to take part in any decisions made by the board in relation to matters affected by the conflict. Members 'sitting out' in this manner are also removed from the meeting's quorum (the minimum number of members necessary for a valid decision to be made). If a majority of the other board members agree, the member with the conflict of interest may take part in the board's discussion on the issue but is still excluded from voting.

²⁹ See clause 36 of Schedule 3 to the NZPHD Act.

Why do these requirements exist?

These legal requirements were enacted to protect the interests of the Crown, the public and board members, and to provide for transparency in decision-making. The requirements allow voters to be fully aware of the conflicts of interest that candidates may have. They also provide boards with the information required to manage conflicts appropriately.

What do conflict of interest statements look like?

The following conflict of interest statements are examples only. You should complete your own statement after careful consideration of any past, present and future conflicts of interest you may have.

Conflict of Interest Statement

I have the following current conflicts of interest with the Somewhere District Health Board (DHB):

- (a) I am a senior employee of DEF Company Ltd, a health service provider which is funded in part by the DHB
- (b) my wife is currently employed by the DHB as a medical specialist
- (c) my brother is a community pharmacist in Smallville and is subject to a contractual arrangement with the DHB
- (d) my daughter is a community health advocate.

To the best of my knowledge and belief, I have no other conflicts of interest with the DHB at the date of my notice of consent to being nominated as a candidate for membership of the board of the DHB.

I do not believe that any conflicts of interest are likely to arise in future, other than the continuation of the conflicts of interest stated above.

Signed

Full name of candidate

Dated

Conflict of Interest Statement

I am currently employed by the Somewhere District Health Board (DHB) as a medical radiologist. To the best of my knowledge and belief, I have no other conflicts of interest with the DHB at the date of my notice of consent to being nominated as a candidate for membership of the board of the DHB.

I do not believe that any conflicts of interest are likely to arise in the future, other than my intended continued employment by the DHB.

Signed

Full name of candidate

Dated

Conflict of Interest Statement

My husband is currently employed by the Somewhere District Health Board (DHB) as a nurse. To the best of my knowledge and belief, I have no other conflicts of interest with the DHB at the date of my notice of consent to being nominated as a candidate for membership of the board of the DHB.

I do not believe that any conflicts of interest are likely to arise in the future, other than my husband's continued employment by the DHB.

Signed

Full name of candidate

Dated

Conflict of Interest Statement

To the best of my knowledge and belief, I have no conflicts of interest with the Somewhere District Health Board (DHB) at the date of my notice of consent to being nominated as a candidate for membership of the board of the DHB.

I do not believe that any such conflicts of interest are likely to arise in future, except that my current employer, the ABC Company Ltd, is tendering for the provision of cleaning services for Somewhere DHB. In the event that they are successful in this tender, I may have a conflict of interest in this regard.

Signed

Full name of candidate

Dated

Conflict of Interest Statement

To the best of my knowledge and belief, I have no conflicts of interest with the Somewhere District Health Board (DHB) at the date of my notice of consent to being nominated as a candidate for membership of the board of the DHB, and I do not believe that any such conflicts of interest are likely to arise in future.

Signed

Full name of candidate

Dated

Single Transferable Voting

DHB elections use the Single Transferable Voting (STV) system to elect candidates to boards. Under STV, voters rank their desired candidates in order of preference. Candidates are elected when they reach a specific level of support from voters ('the STV quota').

How do you vote in an STV election?

When casting an STV vote, voters write a '1' beside the candidate they most prefer, a '2' beside the candidate they next prefer, and so on. Voters can rank as many or as few candidates as they wish: their vote will be valid as long as a unique first preference appears on the voting document.

An STV voting document may look something like this.

| SOMEWHERE DISTRICT HEALTH BOARD ELECTION OF SEVEN (7) MEMBERS | |
|---|----------------|
| NOTE: THIS IS AN STV ELECTION | |
| 1. Please rank the candidates in order of preference (ie, '1', '2', '3' etc) by clearly writing a '1' within the box immediately after the name of the candidate you most prefer, a '2' within the box immediately after the name of your second most preferred candidate, and so on. | |
| 2. You can rank as many or as few candidates as you wish . There are 10 candidates. | Number Here |
| APPLE, Anaru | 7 |
| BANANA, Belinda | 3 |
| CARROT, Christine | 2 |
| DATE, Daniel | |
| EGGPLANT, Etevis | 1 |
| FIG, Fiona | 5 |
| GRAPE, Gerald | 8 |
| HARICOT, Helen | |
| ILAM-HARDY, Ingrid | 4 |
| JALAPENO, Jose | 6 |

The way the voter has completed the sample voting document above means they are saying, 'I prefer Etevis Eggplant the most so I'll put a "1" beside her name, then my next preferred candidate is Christine Carrot so I'll put a "2" beside her, then I like Belinda Banana next so I'll put a "3" beside her', and so on. The voter decided to stop ranking candidates at Gerald Grape (who the voter marked '8'), remembering that voters can express preferences for as many or as few candidates as they wish – it's not necessary to rank all the candidates on the voting document.

How does the STV quota work?

In order to be elected, candidates must reach the STV quota. The STV quota is calculated as follows:³⁰

$$\text{STV quota} = \frac{\text{number of valid voting documents}}{(\text{number of vacancies} + 1)}$$

The STV quota is constructed this way to ensure that only the required number of candidates are elected. For example, when just one vacancy is being filled, a candidate needs slightly more than half the votes to be elected. If a candidate has more than half the votes, then no other candidates can have as many votes.

Similarly, if two vacancies are being filled, then any candidate with more than one-third of the votes remaining in the count will be elected. This is because there can be at most one other candidate (who can fill the other vacancy) who will receive as many votes.

As an example, in a DHB election with 80,000 valid voting documents cast and seven positions on the board, the STV quota would be:

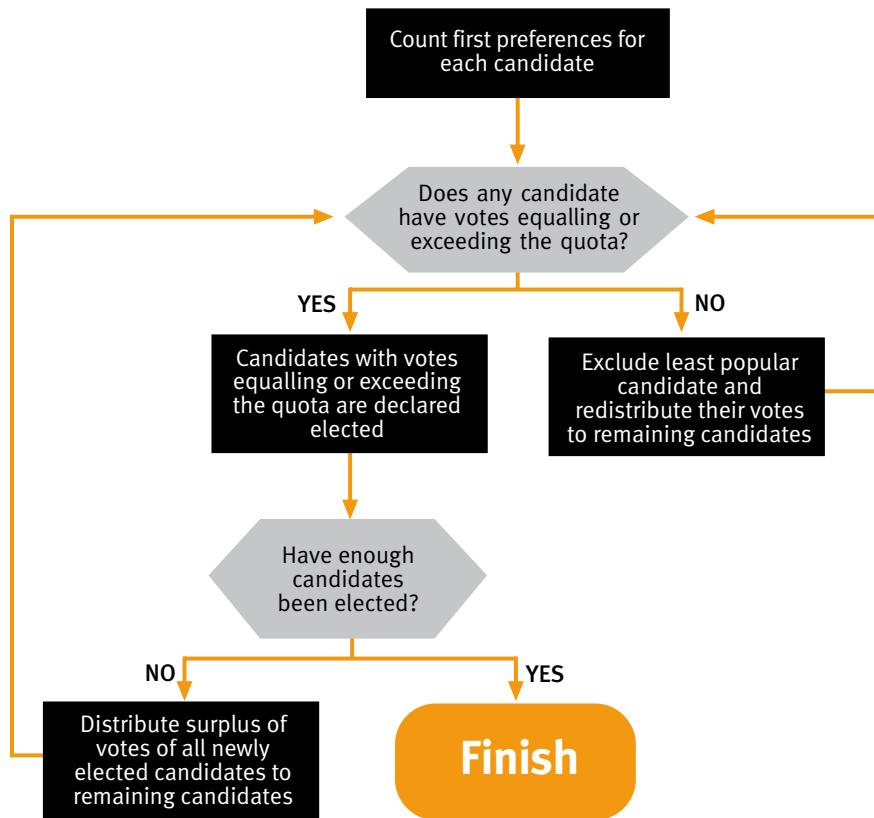
$$\begin{aligned}\text{STV quota} &= \frac{\text{number of valid voting documents}}{(\text{number of vacancies} + 1)} \\ &= \frac{80,000}{(7 + 1)} \\ &= 10,000\end{aligned}$$

Therefore, based on a DHB election with the above figures, candidates would need to receive just over 10,000 votes to be elected to the board. This works out to be a little over 12.5 percent of the vote.

How are STV votes counted?

The Department of Internal Affairs has developed computer software which counts STV vote preferences. This software is used by DHB electoral officers to calculate the election results. The process for counting vote preferences under STV (as performed by the calculation software) is shown on the next page.

³⁰ An extra billionth of a vote is added to the STV quota to remove the small risk that two or more candidates may be tied for a position.



This method means that candidates with enough support to be elected do not keep more votes than they need to be elected. Rather, the excess votes they receive are redistributed, in order of voter preference, to help elect other candidates.

At the other end of the scale, where no candidate has sufficient support to achieve the quota and there are still vacancies to fill, the least popular candidate is removed from the count and, again, their votes are used to assist other candidates in being elected. This is done on the basis that it is impossible for that candidate to be elected, even if all the remaining votes were transferred to them.

The cycle stops when all available positions have been filled. In the case of DHBs, there are seven elected member vacancies per board.

After the Election

DHB elections are held in conjunction with local government elections. Voting is by postal vote, which ends at 12 noon on Saturday, 13 October 2007. Only registered residential electors in the DHB you stand for will be able to vote for you.

When do election results come out?

A preliminary result will be issued by the DHB electoral officer as soon as practicable after 12 noon on Saturday, 13 October 2007. DHB election results may take longer to come out than local government results. This is because local government elections are mostly held under the First Past the Post system, in which the counting process is normally quicker.

A final result cannot be calculated until all votes (including special votes) have been processed. Final results are likely to be released in the week following election day.

When do new board members take office?

Board members elected at the 2007 elections will take office on Monday, 10 December 2007 (58 days after the election). If you are elected to the board, the DHB will contact you shortly after the final result is announced to discuss further arrangements.

Do I have to declare my electoral expenses?

Yes. All candidates have to file an electoral expense return with the DHB electoral officer. This must be completed and filed no later than 55 days after the final election result is declared (ie, the deadline will be around mid-December 2007).

The return must include:

- your electoral expenses
- the name and address of each person who made a donation to you and the amount of each donation
- the amount of any anonymous donation exceeding \$1000 and the fact that it was made anonymously.

An electoral expense return will accompany your nomination paper. You should hold on to this and complete and return it to the DHB's electoral officer after the election. Further information on electoral expense returns is available from the DHB's electoral officer (see pages 29–32 for a list of DHB electoral officers).

If I'm unsuccessful, can I be considered as an appointed board member?

Yes. Once the elections have taken place, the Minister of Health considers the need to make up to four additional appointments to each board.

In appointing additional members to the board, the Minister considers a range of people who may be able to assist the DHB in best achieving its functions and objectives. This may include people who stood for election but missed out on being elected.

The Ministry of Health assists the Minister in the appointment process, and maintains a database of people who have expressed an interest in serving as appointed members.

An online application form is available on the Ministry's website:

<http://www.moh.govt.nz/dhbappointments>.

You can also post your CV, marked 'Confidential', to: Manager – Governance, DHB Funding & Performance, Ministry of Health, PO Box 5013, Wellington.

If you are successfully elected to one DHB board, you are not allowed to be an appointed member on another DHB board at the same time.

The Minister is likely to consider potential appointments immediately after the election. If you wish to be considered for appointment as well as standing for election, please file your details with the Ministry well before election day.

Who becomes the board's chair and deputy chair?

The Minister of Health appoints each board's chair and deputy chair. These positions can be filled by elected or appointed board members.

Further Information

DHB elections are governed by the LE Act and the Local Electoral Regulations 2001. Certain provisions of the NZPHD Act also apply. For further information about election procedures and processes, please contact the DHB's electoral officer. Your DHB will be able to provide general information about health and disability services in your area.

Contact details for DHBs and electoral officers are provided on the following pages. You can also get information on DHB elections, and local elections in general, from the following organisations.

Ministry of Health

The Ministry of Health provides national information on DHB elections.

Tel: (04) 496 2000

Email: vote2007@moh.govt.nz

Fax: (04) 496 2191

Web: www.moh.govt.nz/dhbelections

Local Government New Zealand

Local Government New Zealand is the representative body for district, city and regional councils.

Tel: (04) 924 1200

Email: info@lgnz.co.nz

Fax: (04) 924 1230

Web: www.lgnz.co.nz

Electoral Enrolment Centre

To stand as a candidate and to vote in DHB elections, you must be on the electoral roll.

Tel: 0800 ENROL NOW (0800 36 76 56)

Email: enrol@elections.org.nz

Fax: (04) 801 0709

Web: www.elections.org.nz

Single Transferable Voting

The Department of Internal Affairs provides public information on Single Transferable Voting (STV).

Tel: (04) 460 2200

Email: stv@dia.govt.nz

Fax: (04) 460 2201

Web: www.stv.govt.nz

Legislation

The acts and regulations outlined in this handbook can be accessed online. Most libraries also hold copies, although it's important to check that those copies are the most up-to-date ones.

Web: www.legislation.govt.nz

DHB and Electoral Officer Contact Information

Your DHB can provide you with more information about health and disability services in your area. Further information on standing as a DHB candidate (including information specific to your area, such as campaign expenditure limits) is available from DHB electoral officers.

Northern Region

Northland DHB

PO Box 742
WHANGAREI
Tel: (09) 470 0000
Fax: (09) 470 0001
Web: www.northlanddhb.org.nz

Electoral Officer: Dale Ofsoske
Tel: (09) 307 7211
Fax: (09) 307 7443
Email: dale.ofsoske@aucklandcity.govt.nz

Waitemata DHB

Private Bag 93 503
Takapuna
AUCKLAND
Tel: (09) 486 8900
Fax: (09) 441 8957
Web: www.waitematadhb.govt.nz

Electoral Officer: Dale Ofsoske
Tel: (09) 307 7211
Fax: (09) 307 7443
Email: dale.ofsoske@aucklandcity.govt.nz

Auckland DHB

PO Box 92 189
AUCKLAND
Tel: (09) 630 9943 extn 8077
Fax: (09) 631 0727
Web: www.adhb.govt.nz

Electoral Officer: Dale Ofsoske
Tel: (09) 307 7211
Fax: (09) 307 7443
Email: dale.ofsoske@aucklandcity.govt.nz

Counties Manukau DHB

Private Bag 94 052
South Auckland Mail Centre
AUCKLAND
Tel: (09) 262 9500
Fax: (09) 262 9501
Web: www.cmdhb.org.nz

Electoral Officer: John Skelton
Tel: (09) 262 8900
Fax: (09) 262 5759
Email: jskelton@manukau.govt.nz

Midland Region

Waikato DHB

PO Box 934
HAMILTON
Tel: (07) 839 4679
Fax: (07) 839 4327
Web: www.waikatodhb.govt.nz

Electoral Officer: Warwick Lampp
Tel: (03) 377 3530
Fax: (03) 377 1474
Email: wlampp@electionz.com

Lakes DHB

Private Bag 3023
ROTORUA
Tel: (07) 348 1199
Fax: (07) 349 7897
Web: www.lakesdhb.govt.nz

Electoral Officer: Peter Christophers
Tel: (07) 350 0209
Fax: (07) 346 3143
Email: peter.christophers@rdc.govt.nz

Bay of Plenty DHB

Private Bag 12 024
TAURANGA
Tel: (07) 579 8000
Fax: (07) 577 8366
Web: www.bopdhb.govt.nz

Electoral Officer: Dale Ofsoske
Tel: (09) 307 7211
Fax: (09) 307 7443
Email: dale.ofsoske@aucklandcity.govt.nz

Tairāwhiti DHB

Private Bag 7001
GISBORNE
Tel: (06) 869 0501
Fax: (06) 869 0542
Web: www.tdh.org.nz

Electoral Officer: Simon Jeune
Tel: (06) 867 2049 (ext 8322)
Fax: (06) 867 8076
Email: simonj@gdc.govt.nz

Taranaki DHB

Private Bag 2016
NEW PLYMOUTH
Tel: (06) 753 6139
Fax: (06) 753 7770
Web: www.tdhb.org.nz

Electoral Officer: Barry Rollo
Tel: (06) 759 6109
Fax: (06) 759 6072
Email: rollob@npdc.govt.nz

Central Region

Hawke's Bay DHB

Private Bag 6023
NAPIER
Tel: (06) 878 1690
Fax: (06) 878 1648
Web: www.hawkesbaydhb.govt.nz

Deputy Electoral Officer: Carol Gilbertson
Tel: (06) 835 9216
Fax: (06) 835 3601
Email: carol@hbrc.govt.nz

Whanganui DHB

Private Bag 3003
WANGANUI
Tel: (06) 348 3216
Fax: (06) 348 1315
Web: www.wdhd.org.nz

Electoral Officer: Noeline Moosman
Tel: (06) 349 0001
Fax: (06) 349 0000
Email: noeline.moosman@wanganui.govt.nz

MidCentral DHB

PO Box 2056
PALMERSTON NORTH
Tel: (06) 350 8061
Fax: (06) 355 0616
www.midcentral.co.nz

Electoral Officer: John Annabell
Tel: (06) 356 8199
Fax: (06) 355 4115
Email: john.annabell@pncc.govt.nz

Hutt Valley DHB

Private Bag 31 907
LOWER HUTT
Tel: (04) 570 9488
Fax: (04) 570 9228
www.huttvalleydhb.org.nz

Electoral Officer: Stuart Duncan
Tel: (04) 570 6839
Fax: (04) 570 6871
Email: stuart.duncan@huttcity.govt.nz

Capital & Coast DHB

Private Bag 7902
WELLINGTON SOUTH
Tel: (04) 385 5999
Fax: (04) 385 5881
Web: www.ccdhb.org.nz

Electoral Officer: Ross Bly
Tel: (04) 499 4444
Fax: (04) 801 3020
Email: ross.bly@wcc.govt.nz

Wairarapa DHB

PO Box 96
MASTERTON
Tel: (06) 946 9800
Fax: (06) 946 9801
Web: www.wairarapa.dhb.org.nz

Electoral Officer: Milan Hautler
Tel: (06) 379 6626
Fax: (06) 379 7832
Email: milan@cdc.govt.nz

Southern Region

Nelson Marlborough DHB

Private Bag 18
NELSON
Tel: (03) 546 1723
Fax: (03) 546 1747
Web: www.nmdhb.govt.nz

Electoral Officer: Richard Palmer
Tel: (03) 546 0436
Fax: (03) 546 0279
Email: richard.palmer@ncc.govt.nz

West Coast DHB

PO Box 387
GREYMOOUTH
Tel: (03) 768 0499
Fax: (03) 768 2791
Web: www.westcoastdhd.org.nz

Electoral Officer: Richard Simpson
Tel: (03) 756 9035
Fax: (03) 756 9046
Email: richards@westlanddc.govt.nz

Canterbury DHB

PO Box 1600
CHRISTCHURCH
Tel: (03) 364 4106
Fax: (03) 364 4101
Web: www.cdhd.org.nz

Electoral Officer: Max Robertson
Tel: (03) 371 1533
Fax: (03) 371 1786
Email: max.robertson@ccc.govt.nz

South Canterbury DHB

Private Bag 911
TIMARU
Tel: (03) 684 4000
Fax: (03) 688 0238
Web: www.scdhd.org.nz

Electoral Officer: Mark Low
Tel: (03) 687 7280
Fax: (03) 687 7205
Email: markl@timdc.govt.nz

Otago DHB

Private Bag 1921
DUNEDIN
Tel: (03) 474 0999
Fax: (03) 474 7639
Web: www.otagodhd.govt.nz

Electoral Officer: Pam Jordan
Tel: (03) 477 4000
Fax: (03) 474 3594
Email: pjordan@dcc.govt.nz

Southland DHB

PO Box 828
INVERCARGILL
Tel: (03) 218 1949
Fax: (03) 214 7228
Web: www.sdhb.govt.nz

Electoral Officer: Susan Jones
Tel: (03) 209 0330
Fax: (03) 209 0357
Email: sjones@goredc.govt.nz

Map of South Island DHBs

