

OPHTHAMOLOGY SERVICES PUBLIC FEEDBACK FORM

TEMAKA
DHB



Nelson Marlborough
District Health Board

Information about you: (Optional)

Name: _____

Address: _____

Phone: _____

Organisation represented: (if applicable) _____

Option - Outsourcing:

What do you think about the proposal to outsource Ophthalmology Services?

Option - In House - Changes to current Models of Care:

What do you think about the proposal to maintain Ophthalmology inhouse but with changes to the current models of care?

Additional comment (you may like to include an insert with your returned form)

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SUBMISSIONS CLOSE AT 5 PM ON FRIDAY, 28 JANUARY 2011

Thank you for your input. Please note that all submissions will be made available for public inspection unless you specifically request that yours remain private to the Board. However, you do need to be aware that even a private submission may need to be made available under the Official Information Act. All submitters who have provided contact information will be informed of the final outcome of this consultation.

If you would like more information or would like a speaker to address your group please contact:

Karen Lindsay – Phone: 03 546 1998 or Email: karen.lindsay@nmdhb.govt.nz

The consultation document on Ophthalmology Services for Nelson Marlborough and an electronic version of this form is available on www.nmdhb.govt.nz

Please fold this sheet, seal it and post before 28 January 2011.

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Free Post Authority Number 255



Karen Lindsay
HR Advisor
Human Resources
Nelson Marlborough District Health Board
Private Bag 18
Nelson 7042