

SOUTHERN DISTRICT HEALTH BOARD MEETING

Thursday, 5 February 2015, 9.00 am

Board Room, Community Services Building
Southland Hospital Campus, Invercargill

A G E N D A

Tab

1. Chair's Opening Comments
2. [Apologies](#)
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5. Matters Arising
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Advisory Committee Reports:

9. Disability Support Advisory Committee and Community & Public Health Advisory Committee
 - a) [Minutes of 10 December 2014 meeting](#)
 - b) [Verbal report of 4 February 2015 meeting](#)
 - c) Draft Strategic Health Services Plan (included in DSAC/CPHAC agenda)
10. Hospital Advisory Committee
 - a) [Verbal report of 4 February 2015 meeting](#)
11. [Contracts Register](#)
12. [Resolution to Exclude the Public](#)

Public Excluded Session:

RESOLUTION:
That the Board exclude the public for the agenda items listed below.

The general subject of each matter to be considered while the public is excluded, the reason for passing this resolution in relation to each matter, and the specific grounds under section 32, Schedule 3 of the NZ Public Health and Disability Act 2000 for the passing of this resolution are as follows:

General subject:	Reasons for passing this resolution:	Grounds for passing the resolution:
Previous Public Excluded Board Minutes	As per reasons set out in previous agenda	S 32(a), Schedule 3, NZ Public Health and Disability Act 2000 – that the public conduct of this part of the meeting would be likely to result in the disclosure of information for which good reason for withholding exists under sections 9(2)(a), 9(2)(f), 9(2)(i), 9(2)(j) of the Official Information Act 1982, that is withholding the information is necessary to: protect the privacy of natural persons; maintain the constitutional conventions which protect the confidentiality of advice tendered by Ministers of the Crown and officials; to enable a Minister of the Crown or any Department or organisation holding the information to carry on, without prejudice or disadvantage, commercial activities and negotiations.
Review of Public Excluded Action Sheet	To allow activities to be carried on without prejudice or disadvantage	As above, sections 9(2)(i) and 9(2)(j).
Annual Plan 2014/15	Plan is subject to Ministerial approval	As above, section 9(2)(f)
Public Excluded Advisory Committee Reports a) Disability Support and Community & Public Health Advisory Committees ▪ 10 December 2014 ▪ 4 February 2015 b) Hospital Advisory Committee ▪ 4 February 2015 ▪ Contract & Lease Approvals c) Iwi Governance Committee ▪ 4 February 2015 d) Audit & Risk Committee ▪ 10 December 2014	Commercial sensitivity and to allow activities and negotiations to be carried on without prejudice or disadvantage	As above, sections 9(2)(i) and 9(2)(j).
HBL Food Services Update	To allow activities and negotiations to be carried on without prejudice or disadvantage	As above, section 9(2)(j).
Contract Approvals ▪ Planning & Funding	Commercial sensitivity and to allow activities and negotiations to be carried on without prejudice or disadvantage	As above, sections 9(2)(i) and 9(2)(j).

Southern DHB Board Meeting - Agenda

General subject:	Reasons for passing this resolution:	Grounds for passing the resolution:
Gifting of Shares in Māori Freehold Land	To allow activities and negotiations to be carried on without prejudice or disadvantage	As above, section 9(2)(j).
Risk Report	To allow activities to be carried on without prejudice or disadvantage	As above, sections 9(2)(i) and 9(2)(j).
Legal Issues	To allow activities to be carried on without prejudice or disadvantage	As above, sections 9(2)(j) and 9(2)(ba)(i)
South Link Health – Retained Earnings	To allow activities to be carried on without prejudice or disadvantage	As above, sections 9(2)(i) and 9(2)(j).
Governance – IoD Report Follow-up	To allow activities to be carried on without prejudice or disadvantage	As above, sections 9(2)(j).

APOLOGIES

No apologies have been received, at the time of going to print.

SOUTHERN DISTRICT HEALTH BOARD

Title:	INTERESTS REGISTERS	
Report to:	Board	
Date of Meeting:	5 February 2015	
Notifications received since the last meeting:		
<ul style="list-style-type: none"> ▪ Nil 		
Specific implications for consideration (financial/workforce/risk/legal etc):		
Financial:	n/a	
Workforce:	n/a	
Other:		
Document previously submitted to:	Board and Advisory Committees	Date: 10-11/12/14
Prepared by: Jeanette Kloosterman Board Secretary Date: 21/01/15	Presented by: Joe Butterfield Board Chairman	
RECOMMENDATIONS:		
1. That the Interests Registers be received and noted.		

Southern DHB Board Meeting - Interests Registers

Board Member	Date of Entry	Interest Disclosed	Nature of Potential Interest with Southern DHB
Sandra COOK	01.09.2011	1. Te Runanga o Ngāi Tahu	1. Holds a "right of first refusal" over certain Crown properties. Also seen as a Treaty partner and affiliates may hold contracts from Southern DHB from time to time. Is also a founding member of the Whānau Ora commissioning agency, Te Putahitanga o Te Waipounamu, established March 2014.
Kaye CROWTHER	09.11.2007 14.08.2008 12.02.2009 05.09.2012 01.03.2012	1. Employee of Crowe Horwath NZ Ltd 2. Trustee of Wakatipu Plunket Charitable Trust. 3. Corresponding member for Health and Family Affairs, National Council of Women. 4. Trustee for No 10 Youth Health Centre, Invercargill. 5. DHB representative on the Gore Social Sector Trial Stakeholder Group.	1. Possible conflict if DHB contracts HR services from JCL and Progressive Consulting, which are subsidiaries of Crowe Horwath NZ Ltd 2. Nil. 3. Nil. 4. Possible conflict with funding requests. 5. Nil.
Mary GAMBLE	09.12.2013	1. Member, Rural Women New Zealand.	1. RWNZ is the owner of Access Home Health Ltd, which has a contract with the Southern DHB to deliver home care.
Anthony (Tony) HILL	09.12.2013 02.12.2014	1. Chairman, Southern PHO Community Advisory Committee and ex officio Southern PHO Board. 2. Secretary/Manager, Lakes District Air Rescue Trust. Daughter: 3. Registrar, Cardiothoracics, Southern DHB	1. Possible conflict with PHO contract funding. 2. Possible conflict with contract funding.
Tuari POTIKI	09.12.2013 05.08.2014	1. University of Otago staff member. 2. Deputy Chair, Te Rūnaka o Ōtākou. 3. Chair, NZ Drug Foundation. 4. Director, Te Tapuae o Rehua Ltd 5. Director Te Rūnaka Ōtākou Ltd	1. Possible Conflicts between Southern DHB and University interests. 2. Possible conflict with contract funding. 3. Nil. 4. Nil 5. Nil
Branko SIJNJA*	07.02.2008 04.02.2009 22.06.2010 08.05.2014	1. Director, Clutha Community Health Company Limited. 2. 0.8 FTE Director Rural Medical Immersion Programme, University of Otago School of Medicine. 3. 0.2 FTE Employee, Clutha Health First General Practice. 4. President, New Zealand Medical Association	1. Operates publicly funded secondary health services under contract to Southern DHB. 2. Possible conflicts between Southern DHB and University interests. 3. Employed as a part-time GP.

Southern DHB Board Meeting - Interests Registers

Board Member	Date of Entry	Interest Disclosed	Nature of Potential Interest with Southern DHB
Richard THOMSON	13.12.2001 23.09.2003 29.03.2010 06.04.2011 21.11.2013 & 03.04.2014	<ol style="list-style-type: none"> 1. Managing Director, Thomson & Cessford Ltd. 2. Chairperson and Trustee, Hawksbury Community Living Trust. 3. Trustee, HealthCare Otago Charitable Trust. 4. Chairman, Composite Retail Group. 5. Councillor, Dunedin City Council. 6. Three immediate family members are employees of Dunedin Hospital (Radiographer and Anaesthetic Technician). 	<ol style="list-style-type: none"> 1. Thomson & Cessford Ltd is the company name for the Acquisitions Retail Chain. Southern DHB staff occasionally purchase goods for their departments from it. 2. Hawksbury Trust runs residential homes for intellectually disabled adults in Otago and Canterbury. It does not have contracts with Southern DHB. 3. Health Care Otago Charitable Trust regularly receives grant applications from staff and departments of Southern DHB, as well as other community organisations. 4. May have some stores that deal with Southern DHB.
Janis Mary WHITE (Crown Monitor)	31.07.2013	<ol style="list-style-type: none"> 1. Member, Pharmac Board. 2. Chair, CTAS (Central Technical Advisory Service). 	

*Mr Ward and Dr Sijnja have both tendered their resignations from SCL Otago Southland Ltd (SCLOS) but these cannot be effected until contract variation executed by SDHB and SCLOS constitution varied.

SOUTHERN DISTRICT HEALTH BOARD

INTERESTS REGISTER FOR THE EXECUTIVE MANAGEMENT TEAM

As at November 2014

Employee Name	Date of Entry	Interest Disclosed	Nature of Potential Interest with Southern District Health Board
Steve Addison	16.08.2014	1. Chair, Board of Trustees, Columba College 2. Mother-in-law, Gore District Councillor	
Peter Beirne	20.06.2013	Nil	
Sandra Boardman	07.02.2014	Nil	
Richard Bunton	17.03.2004 22.06.2012 29.04.2010	3. Managing Director of Rockburn Wines Ltd. 4. Director of Mainland Cardiothoracic Associates Ltd. 5. Director of the Southern Cardiothoracic Institute Ltd. 6. Director of Wholehearted Ltd. 7. Chairman, Board of Cardiothoracic Surgery, RACS. 8. Trustee, Dunedin Heart Unit Trust. 9. Chairman, Dunedin Basic Medical Sciences Trust.	1. The only potential conflict would be if the Southern DHB decided to use this product for Southern DHB functions. 2. This company holds the Southern DHB contract for publicly funded Cardiac Surgery. Potential conflict exists in the renegotiation of this contract. 3. This company provides private cardiological services to Otago and Southland. A potential conflict would exist if the Southern DHB were to contract with this company. 4. This company is one used for personal trading and apart from issues raised in '2' no conflict exists. 5. No conflict. 6. No conflict. 7. No conflict.
Carole Heatly	11.02.2014	1. Southern Health Welfare Trust (Trustee).	1. Southland Hospital Trust.
Lynda McCutcheon	22.06.2012	1. Member of the University of Otago, School of Physiotherapy, Admissions Committee.	1. Lead contact for University of Otago undergraduate clinical placements (Allied Health, Scientific & Technical professions) in Southern DHB.
Lexie O'Shea	01.07.2007	1. Trustee, Gilmour Trust.	1. Southland Hospital Trust.
John Pine	17.11.201	Nil.	
Dr Jim Reid	22.01.2014	1. Director of both BPAC NZ and BPAC Inc 2. Director of the NZ Formulary 3. Trustee of the Waitaki District Health Trust 4. Employed 2/10 by the University of Otago	

Southern DHB Board Meeting - Interests Registers

Employee Name	Date of Entry	Interest Disclosed	Nature of Potential Interest with Southern District Health Board
		and am now Deputy Dean of the Dunedin School of Medicine. 5. Partner at Caversham Medical Centre and a Director of RMC Medical Research Ltd.	
Leanne Samuel	01.07.2007 01.07.2007 16.04.2014	1. Southern Health Welfare Trust (Trustee). 2. Member of Community Trust of Southland Health Scholarships Panel. 3. Member National Lead Directors of Nursing and Nurse Executives of New Zealand.	1. Southland Hospital Trust. 2. Nil. 3. Nil.
David Tulloch	23.11.2010 02.06.2011 17.08.2012	1. Southland Urology (Director). 2. Southern Surgical Services (Director). 3. UA Central Otago Urology Services Limited (Director). 4. Trustee, Gilmour Trust.	1. Potential conflict if DHB purchases services. 2. Potential conflict if DHB purchases services. 3. Potential conflict if DHB purchases services. 4. Southland Hospital Trust.

Minutes of the Southern District Health Board Meeting

Thursday, 11 December 2014, 9.00 am
Board Room, Wakari Hospital Campus, Dunedin

Present:	Mr Joe Butterfield	Chair
	Mr Tim Ward	Deputy Chair
	Dr John Chambers	
	Mr Neville Cook	(until 12.27 pm)
	Mrs Kaye Crowther	
	Mrs Mary Gamble	(by teleconference)
	Mr Tony Hill	
	Mr Tuari Potiki	(until 2.00 pm)
	Dr Branko Sijnja	
	Mr Richard Thomson	
In Attendance:	Dr Jan White	Crown Monitor
	Ms Carole Heatly	Chief Executive Officer
	Mrs Lexie O'Shea	Deputy Chief Executive Officer/Executive Director Patient Services
	Mr Peter Beirne	Executive Director Finance
	Mrs Sandra Boardman	Executive Director Planning & Funding
	Mrs Leanne Samuel	Executive Director Nursing & Midwifery
	Mr Steve Addison	Executive Director Communications
	Mr John Pine	Executive Director Human Resources (until 9.15 am)
	Ms Jeanette Kloosterman	Board Secretary

1.0 OPENING COMMENTS

The Chairman welcomed everyone to the meeting.

2.0 APOLOGIES

An apology was received from Ms Sandra Cook.

3.0 DECLARATION OF INTERESTS

It was resolved:

"That the Interests Register be received."

4.0 DEPUTATION - SERVICE AND FOOD SERVICES UNION

The Chairman welcomed a delegation from the Service and Food Workers' Union (SFWU) and stated that the proposed national food services contract was a big issue for the Board, as it was for staff. He advised that management would be meeting with food services staff later in the day and, if the proposal proceeded, there would be a formal consultation process with them early in the new year.

Karena Kelland, Delegate, supported by Catherine Herd, Delegate, and Anna Huffstutler, Organiser, SFWU, made representations to the Board urging it not to proceed with the Health Benefit Ltd (HBL) Food Services Proposal. Ms Kelland expressed the staff's loyalty to the Southern DHB and their wish to preserve the current in-house food services at both the Invercargill and Dunedin sites.

The Chairman thanked the presenters for their attendance and advised that their comments would be taken into account, along with other factors, by the Board.

The SFWU deputation and the Executive Director Human Resources left the meeting.

5.0 CONFIRMATION OF PREVIOUS MINUTES

It was resolved:

"That the minutes of the 6 November 2014 Board meeting be approved and adopted as a true and correct record."

6.0 MATTERS ARISING FROM PREVIOUS MINUTES

There were no matters arising from the previous minutes that were not covered by the agenda.

7.0 ACTION SHEET

It was resolved:

"That the action sheet be received."

8.0 CHIEF EXECUTIVE OFFICER'S REPORT

The Chief Executive Officer's (CEO) monthly report (tab 7), was taken as read and the CEO took questions from members.

Age Related Residential Care

The Board requested the number of patients moved following the withdrawal of psychogeriatric services in Riverton and Gore.

Southern Clinical Council

The CEO reported that the Clinical Council would be holding its first meeting the following day and would be considering the draft terms of reference and procedural issues.

Health Targets – Quarter One

The Board noted the improved performance against the Health Targets for quarter one, in particular the gains made in shorter stays in the Emergency Department.

The Executive Director Planning & Funding reported that WellSouth had also made significant improvement in its performance against the preventative care health targets and Integrated Performance Incentive Framework (IPIF).

It was resolved:

“That the Chief Executive Officer’s report be received.”

9.0 PROVIDER ARM REPORT

A report on Provider Arm activity for October 2014 (tab 8) was taken as read and the Executive Director of Patient Services took questions from members.

It was resolved:

“That the Executive Director of Patient Service’s report be received.”

10.0 FINANCIAL REPORT

The Financial Report for the period ended 31 October 2014 (tab 9) was taken as read and the Executive Director Finance provided the following updates for November:

- The adverse trend in Inter District Flows (IDFs) had reversed and was positive by \$150k;
- The unusual trend in clinical supplies compared to activity had reversed and was positive;
- Infrastructure and non-clinical supplies were also positive in November.

The Executive Director Finance took questions from members on the financial statements.

It was resolved:

“That the Financial Report be received.”

11.0 DEFICIT SUPPORT

A recommendation from the Audit and Risk Committee was tabled (tab 11).

It was resolved:

“That the Board request \$7.4 million of deficit support for 2014/15 from the Minister of Health, which is the amount budgeted to be received in December 2014 and half of the \$14.8m deficit support signalled in the Annual Plan.”

12.0 DSAC/CPHAC MEMBERSHIP

It was resolved:

"That the Disability Support and Community & Public Health Advisory Committees' membership be amended to include the Chair of WellSouth Primary Health Network or in his/her absence the DHB's nominated trustee on the PHO."

13.0 ADVISORY COMMITTEE REPORTS

Disability Support Advisory Committee and Community & Public Health Advisory Committee

The minutes of the Disability Support Advisory Committee (DSAC) and Community & Public Health Advisory Committee (CPHAC) meeting held on 5 November 2014 were circulated with the agenda (tab 10).

It was resolved:

"That the minutes be received."

The Board received a verbal report from Mr Tim Ward on the meeting of the committees held on 10 December 2014.

It was resolved:

"That the verbal report be received."

Hospital Advisory Committee

The minutes of the Hospital Advisory Committee (HAC) meeting held on 5 November 2014 were circulated with the agenda (tab 12).

It was resolved:

"That the minutes be received."

14.0 CONTRACTS REGISTER

Mr Butterfield declared an interest in the Corstorphine Baptist Community Trust and withdrew. Mr Ward took the Chair for this item.

The Funding contracts register for October 2014 was circulated with the agenda (tab 12) for members' information.

It was resolved:

"That the contracts register be received."

PUBLIC EXCLUDED SESSION

At 10.15 am, it was resolved:

“That the public be excluded from the meeting for consideration of the following agenda items.”

General subject:	Reasons for passing this resolution:	Grounds for passing the resolution:
Previous Public Excluded Board Minutes	As per reasons set out in previous agenda	S 32(a), Schedule 3, NZ Public Health and Disability Act 2000 – that the public conduct of this part of the meeting would be likely to result in the disclosure of information for which good reason for withholding exists under sections 9(2)(a), 9(2)(f), 9(2)(i), 9(2)(j) of the Official Information Act 1982, that is withholding the information is necessary to: protect the privacy of natural persons; maintain the constitutional conventions which protect the confidentiality of advice tendered by Ministers of the Crown and officials; to enable a Minister of the Crown or any Department or organisation holding the information to carry on, without prejudice or disadvantage, commercial activities and negotiations.
Review of Public Excluded Action Sheet	To allow activities to be carried on without prejudice or disadvantage	As above, sections 9(2)(i) and 9(2)(j).
Annual Plan 2014/15	Plan is subject to Ministerial approval	As above, section 9(2)(f)
South Link Health – Retained Earnings	To allow activities to be carried on without prejudice or disadvantage	As above, sections 9(2)(i) and 9(2)(j).
Public Excluded Advisory Committee Reports a) Disability Support and Community & Public Health Advisory Committees ▪ 5 November 2014 ▪ 10 December 2014 b) Hospital Advisory Committee ▪ 5 November 2014 c) Iwi Governance Committee/MAG-MH Workshop ▪ 5 November 2014 d) Audit & Risk Committee ▪ 10 December 2014	Commercial sensitivity and to allow activities and negotiations to be carried on without prejudice or disadvantage	As above, sections 9(2)(i) and 9(2)(j).

General subject:	Reasons for passing this resolution:	Grounds for passing the resolution:
HBL Food Services Business Case	Commercial sensitivity and to allow activities and negotiations to be carried on without prejudice or disadvantage	As above, sections 9(2)(i) and 9(2)(j).
Contract & Lease Approvals <ul style="list-style-type: none"> ▪ Provider ▪ Planning & Funding 	Commercial sensitivity and to allow activities and negotiations to be carried on without prejudice or disadvantage	As above, sections 9(2)(i) and 9(2)(j).
Risk Report	To allow activities to be carried on without prejudice or disadvantage	As above, sections 9(2)(i) and 9(2)(j).
Legal Issues	To allow activities to be carried on without prejudice or disadvantage	As above, sections 9(2)(j) and 9(2)(ba)(i).
HBL National Infrastructure Project	Commercial sensitivity	As above, section 9(2)(i).
Governance Items	To allow activities to be carried on without prejudice or disadvantage	As above, sections 9(2)(j).

The public session of the meeting then closed.

Confirmed as a true and correct record:

Chairman: _____

Date: _____

Southern District Health Board

BOARD MEETING ACTION SHEET

As at 26 January 2015

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Action Point No.	SUBJECT	ACTION REQUIRED	BY	STATUS	EXPECTED COMPLETION DATE
298-2014/08	ED Attendances – GP Vouchers (Minute item 8.0)	Report on the three month trial to be submitted to Board in December/February.	EDPS	An ED update will be submitted to HAC.	February
326-2014/12	Aged Residential Care (Minute item 8.0)	Number of patients moved following the withdrawal of psychogeriatric services in Riverton and Gore to be advised.	EDP&F	Gore: 2: one resident was reassessed as hospital level and moved to Queenstown (where they had resided) and the other resident moved to a psychogeriatric unit in Invercargill. Riverton: Zero (provider was planning to exit from service for some time and exited after last psychogeriatric resident passed away).	Completed

SOUTHERN DISTRICT HEALTH BOARD

Title:	CHIEF EXECUTIVE OFFICER'S REPORT	
Report to:	Board	
Date of Meeting:	5 February 2015	
Summary: The issues considered in this paper are:		
<ul style="list-style-type: none"> ▪ Monthly DHB activity. 		
Specific implications for consideration (financial/workforce/risk/legal etc):		
Financial:	No specific implications.	
Workforce:	No specific implications.	
Other:	No specific implications.	
Document previously submitted to:	Not applicable, report submitted directly to Board.	Date: n/a
Approved by Chief Executive Officer:		Date: 02/12/2014
Prepared by:	Presented by:	
Date: 27/01/2015	Carole Heatly Chief Executive Officer	
RECOMMENDATION:		
1. That the Board receive the report.		

CHIEF EXECUTIVE OFFICER'S REPORT

1. DHB FINANCIAL PERFORMANCE

The December result was \$2.3m unfavourable to the draft budget, with a deficit of \$5.4m. Year to date is \$5.0m worse than budget with a deficit of \$14.9m.

A detailed analysis of the financial situation is contained in the Financial Report (agenda item 8).

2. PROVIDER ARM

Contract Performance

- Total acute caseweights delivered (cwd) by the Southern DHB Provider Arm were 153 under plan in December 2014 (5%). Year to date, they are 420 cwd over plan (3%).
- Total elective caseweights delivered (cwd) by the Southern DHB Provider Arm were 147 over plan in December 2014 (14%). Year to date, they are 306 cwd over plan (4%).

Financial Performance

- An unfavourable variance of \$831k was recorded by the Southern DHB Provider Arm for the month of December 2014. Year to date, the Provider Arm is \$1.1m unfavourable.
- Revenue for December 2014 was favourable by \$521k. Expenses for December 2014 were unfavourable against plan by \$1.3m.

3. PLANNING AND FUNDING

Age Related Residential Care (ARRC) – InterRAI Assessments

89% of people admitted to Age Related Residential Care (ARRC) in 2013-14 have at least one corresponding interRAI-HC assessment completed between 2012-13 Quarter 4 and 2013-14 Quarter 4. This is high in comparison to many DHBs.

Community Pharmacy Services Agreement

The Stage 4 rollout of the Community Pharmacy Service Agreement (CPSA) has now been implemented and early information and data is being received regarding the modification to the funding model. That is, the introduction of Relative Value Units with a reversion to fee for service for designated services. This should not have a major impact on pharmaceutical expenditure, albeit Southern DHB will closely monitor expenditure in the next few months once pharmaceutical claims have been processed and reflected in the costs to DHBs.

Palliative Care – Exceptional Circumstances

Planning & Funding is changing the way Southern DHB contracts for Exceptional Circumstances – Palliative Care, from individual contracts for each client to a facility

contract with hospital level Age Related Residential Care (ARRC) facilities, that will be used when an approved client is placed there, similar to how the ARRC and Long Term Support/Chronic Health Conditions contracts work. This should reduce the administrative workload for the contracts team in Planning & Funding. At the same time, we are reviewing our guidelines for eligibility for residential placements for Palliative Care, to assure that they are in line with other DHBs and consistent with our guidelines for other services.

Free Care for Under 6s

Every GP practice in Southern DHB's area now provides free care for the under 6 age group.

4. MINISTER'S LETTER OF EXPECTATIONS

Attached for noting is a copy of the Minister of Health's "Letter of Expectations" to DHBs for 2015/16.

Carole Heatly
Chief Executive Officer

27 January 2015



Office of Hon Dr Jonathan Coleman

Minister of Health
Minister for Sport and Recreation
Member of Parliament for Northcote

17 DEC 2014

Mr Joe Butterfield
Chair
Southern DHB
Private Bag 1921
DUNEDIN 9054

Dear Chair

A handwritten signature in blue ink that reads "Joe".

Letter of expectations for DHBs and subsidiary entities 2015/16

Thank you for the continued contribution you and your staff are making to a better public health service. It is important that we drive a team approach across the system.

While recognising these are tight economic times, the Government is committed to improving the health of New Zealanders and will continue to invest in key health services. Investment in our public health services has risen from a budget of \$11.8 billion in 2008/09 to \$15.6 billion in 2014/15. Health is the only portfolio with this sort of increase, which demonstrates the Government's on-going commitment to protecting and growing our public health services.

Fiscal Discipline/Management of the Health Portfolio

As I have discussed with you previously, DHBs need to budget and operate within allocated funding and must have detailed plans to improve year-on-year financial performance. This includes seeking efficiency gains and improvements in purchasing, productivity and quality aspects of DHBs' operation and service delivery. You and your Board must monitor and hold your Chief Executive accountable against these expectations as keeping to budget allows investment into new and more health initiatives.

Improvements through national, regional and sub-regional initiatives must continue to be a key focus for all DHBs. I recognise that DHBs want to have a greater role in the process of making back office savings to reinvest into frontline services, and want greater control of the implementation phase of the four health shared service business cases. It is essential that these business cases are implemented swiftly and savings achieved. The current transition process in place to shift responsibility for implementation of the business cases takes these considerations on board.

Leadership

Strong clinical leadership and engagement should be embedded in DHBs and utilised in all aspects of DHBs' core business eg budgeting and service design. Clinically driven service changes are encouraged where these make sense for patients and encourage positive

system changes. DHBs are expected to include clear detail in their annual plans for 2015/16 that shows how they will foster clinical leadership.

DHB governance, senior management and clinical leaders need to work together in order to ensure we are heading in the same direction. As agents of the Crown you and your Board must assure yourselves that you have in place the appropriate clinical and executive leadership to deliver on the Government's objectives. I expect you to spend time talking with clinical leaders and fostering, encouraging and supporting clinically-led decision making.

Integration between Primary and Secondary Care

Integrating primary care with other parts of the health service is vital for better management of long-term conditions, mental health, an aging population and patients in general. The pathways to achieve better co-ordinated health and social services need to be developed and supported by clinical leaders in both community and hospital settings. I expect DHBs to move services closer to home in 2015/16, and DHBs need to have clear evidence of how they plan to do this. The key to better health, as well as financial sustainability, is earlier intervention and population-based initiatives delivered in the community.

National Health Targets

The national health targets are very important for driving overall hospital performance, and have resulted in major improvements in the health outcomes of New Zealanders. Health target performance continues to improve, but DHBs must remain focussed on achieving and improving performance against the targets, particularly the primary care targets, which are still some way from being achieved. I expect DHBs to work directly with primary health organisations and individual practices to drive performance against the primary care targets, and to provide clear and specific plans for achieving all national health targets in their annual plans.

As you are aware, from quarter two of 2014/15, the 62 day Faster Cancer Treatment indicator has become the cancer health target with a target achievement level of 85 percent by July 2016 and then increasing to 90 percent by July 2017. The addition of this indicator ensures continued focus on improving cancer services.

Targets will continue to evolve over time, reflecting a range of dynamic factors. Any changes to current targets for 2015/16 are expected to be known early next year, and may entail adjustments to the electives, more heart and diabetes checks and better help for smokers to quit targets.

I also expect to see elective surgery access further boosted by [\$50 million of] new funding to target more orthopaedic and general surgery, and the development of community-based intervention teams to treat musculoskeletal pain non-surgically.

Clinicians should focus on implementation of the agreed clinical prioritisation tools to support appropriate access for patients.

Tackling Key Drivers of Morbidity

As Minister of Sport and Recreation as well as Minister of Health, I am looking to strengthen the link between physical activity and keeping New Zealanders healthy. Obesity is a major risk factor for diabetes and other chronic conditions, which are key drivers of morbidity. We are currently doing a stocktake of 'what works' to reduce obesity, but in the meantime I expect all DHBs to be considering what they can do to help reduce the incidence of obesity in New Zealand.

A key Government priority is reducing the number of children living in material hardship. DHBs are already working closely with other social sector organisations to achieve sector goals in relation to the Government's Better Public Services initiatives and other cross-agency initiatives, such as Whānau Ora, Social Sector Trials, Children's Action Plan and Youth Mental Health. I expect district health boards to support cross-agency work that delivers outcomes for children across a range of dimensions – health, education, social and justice.

Refreshed New Zealand Health Strategy

At my request, the Ministry of Health is planning to update and refresh the New Zealand Health Strategy. Once this process is completed, the Strategy will provide DHBs and the wider sector with a clear strategic direction and road map for delivery of health services to New Zealanders into the future. I expect DHBs to take an active part in the consultation for the refresh of the Strategy.

Additionally, a renewed focus on strategic direction should be evident in DHB annual plans for 2015/16. Therefore, all DHBs must refresh their statements of intent in 2015/16 and build these in to their annual plans. I also encourage you to take a strong interest in the Ministry of Health's four-year plan when it is available, as it will provide further clarity on how the sector is expected to manage its resources and prioritise activities over the next four years.

Finally, please keep in mind that the Budget 2015 process will clarify these and other Government priorities, and more information will be provided when available. Please share this letter with your clinical leaders and local primary care networks.

I thank you for the considerable effort you and your team are making, and I look forward to working with you in the future.

Yours sincerely



Hon Dr Jonathan Coleman
Minister of Health

SOUTHERN DISTRICT HEALTH BOARD

Title:	FINANCIAL REPORT	
Report to:	Board	
Date of Meeting:	5 February 2015	
Summary: The issues considered in this paper are:		
<ul style="list-style-type: none"> ▪ December 2014 financial position. 		
Specific implications for consideration (financial/workforce/risk/legal etc):		
Financial:	As set out in report.	
Workforce:	No specific implications	
Other:	n/a	
Document previously submitted to:	Not applicable, report submitted directly to Board.	Date: n/a
Approved by Chief Executive Officer:	Yes	Date: 27/01/2014
Prepared by:	Presented by:	
Date:	Peter Beirne Executive Director Finance	
RECOMMENDATION:		
1. That the report be received.		

SOUTHERN DHB FINANCIAL REPORT

Financial Report for: December 2014
Report Prepared by: Peter Beirne
Date: 23 January 2015

Recommendations:

- That the Board note the Financial Report

Overview Section

Results Summary

Month			Year to Date			Annual	
Actual	Budget	Variance	Actual	Budget	Variance	Budget	
\$' 000	\$' 000	\$' 000	\$' 000	\$' 000	\$' 000	\$' 000	
73,953	73,093	860	Revenue	441,336	439,983	1,353	879,525
(30,203)	(29,688)	(515)	Less Personnel Costs	(169,979)	(169,590)	(389)	(339,397)
(49,110)	(46,474)	(2,636)	Less Other Costs	(286,297)	(280,303)	(5,994)	(554,960)
(5,360)	(3,069)	(2,291)	Net Surplus / (Deficit)	(14,940)	(9,910)	(5,030)	(14,832)

The December result was \$2.3m unfavourable to budget, with a deficit of \$5.4m. Year to date is \$5.0m worse than budget with a deficit of \$14.9m.

Detailed information is included in Hospital Advisory Committee and CPHAC/DSAC papers.

Operational Performance

Month			Year to Date			Annual	
Actual	Budget	Variance	Actual	Budget	Variance	Budget	
\$' 000	\$' 000	\$' 000	\$' 000	\$' 000	\$' 000	\$' 000	
(109)	(30)	(79)	Governance	(371)	(84)	(287)	(3)
(1,375)	6	(1,381)	Funder	(2,912)	649	(3,561)	6,317
(3,876)	(3,045)	(831)	Provider	(11,657)	(10,477)	(1,180)	(21,147)
(5,360)	(3,069)	(2,291)	Net Surplus / (Deficit)	(14,940)	(9,912)	(5,028)	(14,833)

The December result was a deficit of \$2.3m, with the Provider \$0.8m worse than budget and the Funder Arm unfavourable for the month (\$1.4m) and year to date (\$3.6m).

Balance Sheet and Cash flow

Cash is \$8.1m at the end of December and less than \$9.6m budget due to underperformance against budget offset by timing items.

Detail Section

Revenue

Other Government and other revenue are collectively \$0.5m favourable for the month and now \$0.1m YTD favourable. MoH revenue is favourable for month (\$0.3m) and YTD (\$1.26m). Revenue includes gain on sale of surplus property of \$93k.

Year to date additional funder revenue is \$0.96m, with the following additional revenue contracts. This is partly offset by less than budgeted revenue in a small number of other contract lines.

Exemplar CEP Enhanced Alcohol & Other Drug Service	\$79k	Additional revenue due to late start in contract – Mental Health - Alcohol and Drugs
Rural Sustainability Support	\$150k	Unbudgeted and Cost offset Personal Health – Primary Care
Sleepover Settlement	\$168k	Unbudgeted and Cost offset DSS – Home Support
Orthopaedic Pathway Programme 340071-00	\$53k	Unbudgeted and cost offset Personal Health
ARC rest home price increase from October 2014	\$335k	Unbudgeted and cost offset in DSS –ongoing, appears shortfall is \$50k per month
National Patient Flow System Development	\$91K	Cost offset, first of two payments
Radiology Service Improvement Initiative	\$81K	Partial Cost Offset to date

Personnel Expenses

Allied health was \$0.13m favourable for the month, continuing positive trends. Other staff groups were adverse. Overall Personnel costs are \$0.5m unfavourable for the month and \$0.49m YTD unfavourable.

Outsourced Expenses

Outsourced costs were adverse to budget for the month by \$0.3m and close to budget YTD.

Clinical Supplies Expenses

Clinical supply costs are unfavourable this month by \$0.26m, and adverse \$0.24m YTD.

Infrastructure & Non-Clinical Expenditure

Infrastructure and Non clinical costs are unfavourable in the month by \$0.2m and unfavourable year to date by \$0.57m.

Financial Statements

The following financial statements are attached:

- Governance P&L
- Provider P&L
- Funder P&L
- DHB Consolidated Results P&L
- Balance Sheet
- Cashflow Statement

Southern District Health Board
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Part 1: DHB Governance and Funding Administration	Current Month				Year to Date				Annual Budget
	Actual	Budget	Variance	Variance	Actual	Budget	Variance	Variance	Budget
	\$(000)	\$(000)	\$(000)	%	\$(000)	\$(000)	\$(000)	%	\$(000)
Part 1.1: Statement of Financial Performance									
REVENUE									
Government and Crown Agency sourced									
Internal - DHB Funder to DHB Provider	725	725			4,353	4,353			8,785
Other DHB's	-	-			-	-			-
Other Government	8	8			46	46			92
Government and Crown Agency Sourced Total	733	733			4,399	4,399			8,877
Other Income	-	-			5	-	5 F		-
REVENUE TOTAL	733	733			4,403	4,399	5 F		8,877
EXPENSES									
Personnel Expenses									
Medical Personnel	(2)	(22)	20 F	93%	(16)	(124)	108 F	87%	(247)
Nursing Personnel	-	(1)	1 F		-	(4)	4 F		(9)
Allied Health Personnel	-	-			-	-			-
Support Services Personnel	-	-			-	-			-
Management / Admin Personnel	(309)	(328)	19 F	6%	(1,883)	(1,874)	(10) U	(1%)	(3,666)
Personnel Costs Total	(310)	(350)	40 F	11%	(1,899)	(2,002)	103 F	5%	(3,922)
Outsourced Expenses									
Medical Personnel	-	-			-	-			-
Nursing Personnel	-	-			-	-			-
Allied Health Personnel	-	-			-	-			-
Support Personnel	-	-			-	-			-
Management / Administration Personnel	-	-			5	-	5 F		-
Outsourced Clinical Services	-	-			-	-			-
Outsourced Corporate / Governance Services	(116)	(123)	6 F	5%	(741)	(735)	(6) U	(1%)	(1,471)
Outsourced Funder Services	(208)	(134)	(74) U	(55%)	(1,085)	(803)	(282) U	(35%)	(1,606)
Outsourced Services Total	(324)	(256)	(67) U	(26%)	(1,821)	(1,539)	(282) U	(18%)	(3,077)
Clinical Supplies									
Treatment Disposables	-	-		(164%)	(1)	-		(765%)	-
Diagnostic Supplies & Other Clinical Supplies	-	-			-	-			-
Instruments & Equipment	-	-		(78%)	-	-		(117%)	-
Patient Appliances	-	-			-	-			-
Implants & Prosthesis	-	-			-	-			-
Pharmaceuticals	-	-			-	-			-
Other Clinical Supplies	-	-			-	-			-
Clinical Supplies Total	-	-		(135%)	(1)	-	(1) U	(560%)	-
Infrastructure & Non Clinical Expenses									
Hotel Services, Laundry & Cleaning	(1)	(1)		3%	(9)	(9)	(1) U	(7%)	(18)
Facilities	-	-			-	-			-
Transport	(11)	(18)	7 F	37%	(77)	(107)	29 F	27%	(212)
IT Systems & Telecommunications	(4)	(9)	5 F	54%	(27)	(54)	27 F	50%	(108)
Interest & Financing Charges	(14)	(22)	8 F	38%	(81)	(132)	51 F	38%	(264)
Professional Fees & Expenses	(115)	(43)	(71) U	(164%)	(494)	(260)	(233) U	(90%)	(521)
Other Operating Expenses	(24)	(21)	(2) U	(11%)	(135)	(126)	(9) U	(7%)	(252)
Democracy	(39)	(42)	3 F	7%	(230)	(254)	23 F	9%	(507)
Subsidiaries & Joint Ventures	-	-			-	-			-
Infrastructure & Non-Clinical Supplies Total	(208)	(157)	(51) U	(32%)	(1,054)	(941)	(113) U	(12%)	(1,881)
Internal Allocations	-	-			-	-			-
Other	-	-			-	-			-
Total Expenses	(842)	(764)	(78) U	(10%)	(4,774)	(4,482)	(292) U	(7%)	(8,880)
Net Surplus/ (Deficit)	(109)	(30)	(78) U	(257%)	(371)	(84)	(288) U	(344%)	(3)
Zero Check	-	-			-	-			-
Interest Costs from CHFA	-	-			-	-			-
Capital Charge	-	-			-	-			-
Part 1.2 : Full Time Equivalent Numbers									
Medical Personnel	-	n/m			-	n/m			n/m
Nursing Personnel	-	n/m			-	n/m			n/m
Allied Health Personnel	-	n/m			-	n/m			n/m
Support Personnel	-	n/m			-	n/m			n/m
Management / Administration Personnel	28	n/m			28	n/m			n/m
Total Full Equivalents (FTE's)	28	n/m			28	n/m			n/m

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Part 2: DHB provider	Current Month				Year to Date				Annual Budget
	Actual	Budget	Variance	Variance	Actual	Budget	Variance	Variance	
	\$(000)	\$(000)	\$(000)	%	\$(000)	\$(000)	\$(000)	%	
Part 2.1: Statement of Financial Performance									
REVENUE									
Ministry of Health									
MoH - Vote Health Non Mental Health	-	-	-	-	-	-	-	-	-
MoH - Vote Health Mental Health	-	-	-	-	-	-	-	-	-
PBF Adjustments	-	-	-	-	-	-	-	-	-
MoH Funding Subcontracts	-	-	-	-	-	-	-	-	-
MoH - Personal Health	-	28	(28) U		221	170	51 F	30%	339
MoH - Mental Health	-	-	-	-	-	-	-	-	-
MoH - Public Health	240	11	230 F		293	64	229 F	361%	127
MoH - Disability Support Services	733	740	(7) U	(1%)	4,800	4,620	180 F	4%	9,040
MoH - Maori Health	-	-	-	-	-	-	-	-	-
Clinical Training Agency	507	526	(19) U	(4%)	3,706	3,709	(3) U		7,418
Internal - DHB Funder to DHB Provider	37,288	37,569	(281) U	(1%)	225,322	225,684	(362) U		450,549
Ministry of Health Total	38,769	38,874	(105) U		234,341	234,246	95 F		467,473
Other Government									
IDF's - Mental Health Services	-	-	-	-	-	-	-	-	-
IDF's - All others (non Mental health)	-	-	-	-	-	-	-	-	-
Other DHB's	115	25	90 F	356%	149	151	(2) U	(1%)	302
Training Fees and Subsidies	41	17	24 F	139%	135	103	32 F	31%	206
Accident Insurance	901	846	55 F	6%	5,098	5,429	(331) U	(6%)	10,406
Other Government	466	473	(7) U	(1%)	2,725	2,801	(76) U	(3%)	5,598
Other Government Total	1,523	1,361	161 F	12%	8,108	8,484	(377) U	(4%)	16,512
Government and Crown Agency Total	40,292	40,236	56 F		242,449	242,730	(281) U		483,985
Other Revenue									
Patient / Consumer Sourced	347	230	116 F	50%	1,501	1,540	(39) U	(3%)	3,515
Other Income	1,203	854	349 F	41%	5,584	5,074	510 F	10%	10,199
Other Revenue Total	1,550	1,084	465 F	43%	7,086	6,615	471 F	7%	13,714
REVENUE TOTAL	41,841	41,320	521 F	1%	249,535	249,345	190 F		497,699
EXPENSES									
Personnel Expenses									
Medical Personnel	(10,134)	(9,862)	(272) U	(3%)	(56,444)	(56,731)	287 F	1%	(113,250)
Nursing Personnel	(11,045)	(10,855)	(190) U	(2%)	(62,763)	(61,693)	(1,069) U	(2%)	(124,838)
Allied Health Personnel	(4,201)	(4,335)	134 F	3%	(23,869)	(24,715)	847 F	3%	(49,159)
Support Services Personnel	(889)	(844)	(45) U	(5%)	(4,966)	(4,826)	(140) U	(3%)	(9,718)
Management / Admin Personnel	(3,623)	(3,442)	(182) U	(5%)	(20,038)	(19,623)	(415) U	(2%)	(38,509)
Personnel Costs Total	(29,893)	(29,337)	(556) U	(2%)	(168,080)	(167,588)	(492) U		(335,475)
Outsourced Expenses									
Medical Personnel	(453)	(554)	101 F	18%	(2,371)	(3,145)	774 F	25%	(6,104)
Nursing Personnel	(16)	-	(16) U		(43)	-	(43) U		-
Allied Health Personnel	(36)	(36)		(1%)	(318)	(218)	(100) U	(46%)	(421)
Support Personnel	(34)	(21)	(12) U	(57%)	(183)	(128)	(54) U	(43%)	(256)
Management / Administration Personnel	(15)	(1)	(14) U		(65)	(6)	(59) U	(977%)	(12)
Outsourced Clinical Services	(2,203)	(1,838)	(365) U	(20%)	(11,792)	(11,144)	(647) U	(6%)	(22,257)
Outsourced Corporate / Governance Services	(142)	(151)	9 F	6%	(789)	(856)	67 F	8%	(1,706)
Outsourced Funder Services	-	-	-	-	-	-	-	-	-
Outsourced Services Total	(2,898)	(2,602)	(296) U	(11%)	(15,561)	(15,497)	(63) U		(30,756)
Clinical Supplies									
Treatment Disposables	(2,737)	(2,308)	(428) U	(19%)	(15,400)	(14,483)	(917) U	(6%)	(28,710)
Diagnostic Supplies & Other Clinical Supplies	(169)	(148)	(21) U	(14%)	(919)	(945)	26 F	3%	(1,818)
Instruments & Equipment	(1,402)	(1,341)	(61) U	(5%)	(8,541)	(8,083)	(458) U	(6%)	(16,010)
Patient Appliances	(162)	(190)	28 F	15%	(1,060)	(1,133)	72 F	6%	(2,268)
Implants & Prosthesis	(897)	(825)	(72) U	(9%)	(5,393)	(5,761)	369 F	6%	(11,607)
Pharmaceuticals	(1,278)	(1,555)	277 F	18%	(8,930)	(9,360)	430 F	5%	(18,395)
Other Clinical Supplies	(285)	(300)	15 F	5%	(1,671)	(1,907)	236 F	12%	(3,774)
Clinical Supplies Total	(6,929)	(6,667)	(262) U	(4%)	(41,913)	(41,671)	(243) U	(1%)	(82,583)
Infrastructure & Non Clinical Expenses									
Hotel Services, Laundry & Cleaning	(1,065)	(1,036)	(29) U	(3%)	(6,633)	(6,357)	(276) U	(4%)	(12,640)
Facilities	(1,774)	(1,735)	(39) U	(2%)	(11,008)	(10,810)	(198) U	(2%)	(21,682)
Transport	(313)	(350)	37 F	10%	(2,004)	(2,127)	123 F	6%	(4,212)
IT Systems & Telecommunications	(935)	(909)	(27) U	(3%)	(5,586)	(5,460)	(127) U	(2%)	(10,930)
Interest & Financing Charges	(1,262)	(1,253)	(9) U	(1%)	(7,550)	(7,516)	(34) U		(15,032)
Professional Fees & Expenses	(116)	(115)	(1) U		(604)	(696)	91 F	13%	(1,367)
Other Operating Expenses	(532)	(361)	(171) U	(47%)	(2,252)	(2,101)	(152) U	(7%)	(4,168)
Democracy	-	-	-	-	-	-	-	-	-
Subsidiaries & Joint Ventures	-	-	-	-	-	-	-	-	-
Infrastructure & Non-Clinical Supplies Total	(5,997)	(5,758)	(239) U	(4%)	(35,637)	(35,066)	(571) U	(2%)	(70,032)

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Part 2: DHB provider	Current Month				Year to Date				Annual
	Actual	Budget	Variance	Variance	Actual	Budget	Variance	Variance	Budget
	\$(000)	\$(000)	\$(000)	%	\$(000)	\$(000)	\$(000)	%	\$(000)
Other Costs and Internal Allocations	-	-			-	-			-
Total Expenses	(45,717)	(44,365)	(1,353) U	(3%)	(261,191)	(259,821)	(1,370) U	(1%)	(518,846)
Net Surplus/ (Deficit)	(3,876)	(3,045)	(831) U	(27%)	(11,657)	(10,477)	(1,180) U	(11%)	(21,147)
<i>Zero Check</i>	-	-			-	-			-
Part 2.1 A: Supplementary Information to Statement of Financial Performance									
Depreciation - Clinical Equipment	(634)	(656)	22 F	3%	(3,929)	(3,945)	16 F		(7,847)
Depreciation - Non Res Buildings & Plant	(651)	(661)	10 F	2%	(3,913)	(3,882)	(31) U	(1%)	(8,095)
Depreciation - Motor Vehicles	(23)	(17)	(5) U	(32%)	(136)	(105)	(31) U	(29%)	(208)
Depreciation - Information Technology	(271)	(245)	(26) U	(11%)	(1,577)	(1,474)	(103) U	(7%)	(2,975)
Depreciation - Other Equipment	(50)	(49)	(1) U	(2%)	(323)	(297)	(26) U	(9%)	(596)
Total Depreciation	(1,628)	(1,628)	(1) U		(9,878)	(9,702)	(176) U	(2%)	(19,721)
Interest Cost from Funder Loans	-	-			-	-			-
Interest Costs from CHFA	(386)	(378)	(8) U	(2%)	(2,293)	(2,268)	(25) U	(1%)	(4,537)
Financing Component of Operating Leases	(29)	(31)	2 F	5%	(175)	(184)	9 F	5%	(368)
Capital Charge	(844)	(841)	(4) U		(5,067)	(5,043)	(23) U		(10,087)
Part 1.2 : Full Time Equivalent Numbers									
Medical Personnel	512	n/m			512	n/m			n/m
Nursing Personnel	1,621	n/m			1,615	n/m			n/m
Allied Health Personnel	648	n/m			649	n/m			n/m
Support Personnel	194	n/m			196	n/m			n/m
Management / Administration Personnel	638	n/m			643	n/m			n/m
Total Full Time Equivalents (FTE's)	3,613	n/m			3,614	n/m			n/m

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Part 3: DHB Funds	Current Month				Year to Date				Annual Budget
	Actual	Budget	Variance	Variance	Actual	Budget	Variance	Variance	
	\$(000)	\$(000)	\$(000)	%	\$(000)	\$(000)	\$(000)	%	
Part 3.1: Statement of Financial Performance									
REVENUE									
Ministry of Health									
MoH - Vote Health Non Mental Health	57,843	57,837	7 F		347,046	347,022	24 F		694,043
MoH - Vote Health Mental Health	6,925	6,925			41,549	41,549			83,097
PBF Adjustments	-	-			-	-			-
MoH Funding Subcontracts	3,161	3,020	141 F	5%	19,165	18,388	777 F	4%	36,507
MoH - Personal Health	-	-			-	-			-
MoH - Mental Health	-	-			-	-			-
MoH - Public Health	-	-			-	-			-
MoH - Disability Support Services	-	-			-	-			-
MoH - Maori Health	-	-			-	-			-
Clinical Training Agency	-	-			-	-			-
Internal - DHB Funder to DHB Provider	-	-			-	-			-
Ministry of Health Total	67,930	67,782	148 F		407,760	406,958	802 F		813,647
Other Government									
IDF's - Mental Health Services	45	45			271	271			541
IDF's - All others (non Mental health)	1,418	1,508	(90) U	(6%)	9,042	9,047	(5) U		18,094
Other DHB's	-	-			-	-			-
Training Fees and Subsidies	-	-			-	-			-
Accident Insurance	-	-			-	-			-
Other Government	-	-			-	-			-
Other Government Total	1,463	1,553	(90) U	(6%)	9,313	9,318	(5) U		18,635
Government and Crown Agency Sourced Total	69,393	69,334	58 F		417,073	416,276	797 F		832,283
Other Revenue									
Patient / Consumer Sourced	-	-			-	-			-
Other Income	-	-			-	-			-
Other Revenue Total	-	-			-	-			-
REVENUE TOTAL	69,393	69,334	58 F		417,073	416,276	797 F		832,283
EXPENSES									
Outsourced Expenses									
Outsourced Funder Services	(725)	(725)			(4,353)	(4,353)			(8,785)
Other Outsourced Expenses	-	-			-	-			-
Other Expenses	-	-			-	-			-
Payments to Providers									
Personal Health									
Personal Health to allocate	-	(83)	83 F		-	(500)	500 F		(1,000)
Child and Youth	(383)	(382)			(2,298)	(2,295)	(3) U		(4,589)
Laboratory	(1,521)	(1,465)	(55) U	(4%)	(9,283)	(8,791)	(491) U	(6%)	(17,582)
Infertility Treatment Services	(92)	(101)	9 F	9%	(549)	(603)	54 F	9%	(1,207)
Maternity	(262)	(262)			(1,583)	(1,571)	(12) U	(1%)	(3,142)
Maternity (Tertiary & Secondary)	(1,381)	(1,394)	13 F	1%	(8,290)	(8,361)	71 F	1%	(16,722)
Pregnancy and Parenting Education	(15)	(12)	(3) U	(25%)	(74)	(74)	1 F	1%	(148)
Maternity Payment Schedule	-	-			-	-			-
Neo Natal	(660)	(660)			(3,962)	(3,962)			(7,923)
Sexual Health	(88)	(88)			(531)	(531)			(1,062)
Adolescent Dental Benefit	(191)	(213)	22 F	10%	(1,139)	(1,225)	86 F	7%	(2,385)
Other Dental Services	-	-			-	-			-
Dental - Low Income Adult	(76)	(78)	1 F	2%	(491)	(466)	(25) U	(5%)	(932)
Child (School) Dental Services	(609)	(630)	21 F	3%	(3,719)	(3,782)	63 F	2%	(7,582)
Secondary / Tertiary Dental	(255)	(242)	(13) U	(5%)	(1,806)	(1,453)	(352) U	(24%)	(2,906)
Pharmaceuticals	(6,727)	(6,726)	(2) U		(38,624)	(38,587)	(37) U		(73,400)
Pharmaceutical Cancer Treatment Drugs	(278)	(386)	108 F	28%	(2,291)	(2,314)	23 F	1%	(4,628)
Pharmacy Services	(75)	(69)	(6) U	(8%)	(342)	(416)	74 F	18%	(832)
Management Referred Services	-	250	(250) U		-	500	(500) U		2,000
General Medical Subsidy	(35)	(86)	51 F	60%	(462)	(514)	52 F	10%	(952)
Primary Practice Services - Capitated	(3,477)	(3,511)	34 F	1%	(21,039)	(21,066)	27 F		(42,132)
Primary Health Care Strategy - Care	(323)	(318)	(5) U	(2%)	(1,912)	(1,907)	(5) U		(3,814)
Primary Health Care Strategy - Health	(358)	(337)	(22) U	(6%)	(2,109)	(2,020)	(89) U	(4%)	(4,041)
Primary Health Care Strategy - Other	(313)	(255)	(58) U	(23%)	(1,317)	(1,529)	212 F	14%	(3,058)
Practice Nurse Subsidy	(14)	(16)	3 F	17%	(82)	(98)	16 F	16%	(195)
Rural Support for Primary Health Pro	(1,375)	(1,384)	8 F	1%	(8,253)	(8,302)	49 F	1%	(16,604)
Immunisation	(174)	(173)	(1) U		(901)	(1,066)	165 F	15%	(2,871)
Radiology	(478)	(465)	(14) U	(3%)	(2,817)	(2,787)	(30) U	(1%)	(5,575)
Palliative Care	(508)	(495)	(13) U	(3%)	(3,139)	(2,971)	(168) U	(6%)	(5,942)
Meals on Wheels	(53)	(53)			(321)	(321)			(642)
Domestic & District Nursing	(1,491)	(1,429)	(62) U	(4%)	(8,837)	(8,583)	(254) U	(3%)	(17,159)
Community based Allied Health	(584)	(584)	(1) U		(3,507)	(3,502)	(5) U		(7,004)
Chronic Disease Management and Educa	(327)	(255)	(71) U	(28%)	(1,578)	(1,532)	(46) U	(3%)	(3,064)

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Part 3: DHB Funds	Current Month				Year to Date				Annual Budget
	Actual	Budget	Variance	Variance	Actual	Budget	Variance	Variance	
	\$(000)	\$(000)	\$(000)	%	\$(000)	\$(000)	\$(000)	%	
Medical Inpatients	(5,653)	(5,653)			(33,918)	(33,918)			(67,836)
Medical Outpatients	(3,700)	(3,669)	(30) U	(1%)	(22,142)	(22,017)	(125) U	(1%)	(44,034)
Surgical Inpatients	(10,630)	(10,647)	16 F		(63,860)	(63,881)	21 F		(127,762)
Surgical Outpatients	(1,686)	(1,694)	7 F		(10,119)	(10,163)	44 F		(20,326)
Paediatric Inpatients	(644)	(644)			(3,867)	(3,867)			(7,733)
Paediatric Outpatients	(275)	(269)	(7) U	(2%)	(1,620)	(1,613)	(7) U		(3,226)
Pacific Peoples' Health	(17)	(22)	4 F	19%	(112)	(129)	18 F	14%	(259)
Emergency Services	(1,638)	(1,634)	(4) U		(9,851)	(9,803)	(48) U		(19,606)
Minor Personal Health Expenditure	(65)	(100)	34 F	35%	(542)	(597)	56 F	9%	(1,194)
Price adjusters and Premium	(633)	(505)	(127) U	25%	(3,512)	(3,031)	(481) U	16%	(6,063)
Travel & Accommodation	(431)	(326)	(105) U	(32%)	(2,718)	(2,565)	(154) U	(6%)	(4,864)
Inter District Flow Personal Health	(2,353)	(2,399)	46 F	2%	(14,645)	(14,394)	(252) U	(2%)	(28,787)
Personal Health Total	(49,850)	(49,464)	(385) U	(1%)	(298,158)	(296,608)	(1,550) U	(1%)	(588,785)
Mental Health									
Mental Health to allocate	9	(29)	38 F	133%	57	(172)	228 F	133%	(343)
Acute Mental Health Inpatients	(1,143)	(1,143)			(6,860)	(6,860)			(13,720)
Sub-Acute & Long Term Mental Health	(304)	(304)			(1,823)	(1,823)			(3,646)
Crisis Respite	(10)	(7)	(3) U	(48%)	(44)	(40)	(4) U	(9%)	(80)
Alcohol & Other Drugs - General	(327)	(327)			(1,962)	(1,962)			(3,924)
Alcohol & Other Drugs - Child & Youth	(102)	(102)			(612)	(612)			(1,224)
Methadone	(94)	(94)			(566)	(566)			(1,132)
Dual Diagnosis - Alcohol & Other Drugs	(45)	(45)		(1%)	(266)	(268)	2 F	1%	(536)
Dual Diagnosis - MH/ID	(5)	(5)			(30)	(30)			(60)
Eating Disorder	(30)	(16)	(14) U	(85%)	(90)	(96)	6 F	6%	(193)
Maternal Mental Health	(4)	(4)			(22)	(22)			(44)
Child & Youth Mental Health Services	(888)	(820)	(68) U	(8%)	(5,236)	(4,920)	(317) U	(6%)	(9,839)
Forensic Services	(513)	(513)			(3,077)	(3,077)			(6,154)
Kaupapa Maori Mental Health Services	(152)	(152)			(914)	(914)			(1,827)
Kaupapa Maori Mental Health - Residential	-	-			-	-			-
Kaupapa Maori Mental Health - Inpati	-	-			-	-			-
Mental Health Community Services	(1,868)	(1,878)	11 F	1%	(11,231)	(11,270)	39 F		(22,539)
Prison/Court Liaison	(45)	(45)			(267)	(267)			(534)
Mental Health Workforce Development	-	-			-	-			-
Day Activity & Work Rehabilitation S	(200)	(200)			(1,197)	(1,197)			(2,394)
Mental Health Funded Services for Older People	(36)	(36)			(214)	(214)			(429)
Advocacy / Peer Support - Consumer	(58)	(58)			(348)	(348)	1 F		(696)
Other Home Based Residential Support	(377)	(373)	(4) U	(1%)	(2,393)	(2,239)	(154) U	(7%)	(4,479)
Advocacy / Peer Support - Families	(52)	(52)			(314)	(314)			(629)
Community Residential Beds & Service	(471)	(457)	(14) U	(3%)	(2,708)	(2,739)	32 F	1%	(5,478)
Minor Mental Health Expenditure	(27)	(32)	5 F	15%	(189)	(191)	2 F	1%	(382)
Inter District Flow Mental Health	(403)	(399)	(3) U	(1%)	(2,416)	(2,396)	(19) U	(1%)	(4,793)
Mental Health Total	(7,143)	(7,090)	(53) U	(1%)	(42,722)	(42,537)	(184) U		(85,075)
Public Health									
Alcohol & Drug	(36)	(36)			(215)	(215)			(431)
Communicable Diseases	(97)	(97)			(582)	(582)			(1,165)
Injury Prevention	-	-			-	-			-
Screening Programmes	(122)	(112)	(11) U	(9%)	(922)	(939)	17 F	2%	(1,609)
Mental Health	(22)	(22)			(133)	(133)			(267)
Nutrition and Physical Activity	(48)	(49)	1 F	2%	(289)	(296)	7 F	2%	(592)
Physical Environment	(36)	(36)			(216)	(216)			(431)
Public Health Infrastructure	(128)	(128)			(766)	(766)			(1,533)
Sexual Health	(12)	(12)			(72)	(72)			(144)
Social Environments	(38)	(38)			(227)	(227)			(455)
Tobacco Control	(60)	(94)	34 F	36%	(559)	(564)	4 F	1%	(1,127)
Well Child Promotion	-	-			-	-			-
Meningococcal	-	-			-	-			-
Public Health Total	(599)	(624)	24 F	4%	(3,983)	(4,011)	28 F	1%	(7,753)
Disability Support Services									
AT & R (Assessment, Treatment and Re	(1,986)	(1,986)			(11,915)	(11,915)			(23,830)
Information and Advisory	(12)	(12)			(71)	(71)			(143)
Needs Assessment	(169)	(160)	(9) U	(6%)	(1,099)	(958)	(141) U	(15%)	(1,916)
Service Co-ordination	(19)	(19)			(126)	(117)	(9) U	(8%)	(234)
Home Support	(1,501)	(1,423)	(79) U	(6%)	(9,253)	(8,535)	(718) U	(8%)	(17,070)
Carer Support	(135)	(144)	9 F	7%	(817)	(865)	49 F	6%	(1,731)
Residential Care: Rest Homes	(3,797)	(2,995)	(802) U	(27%)	(19,977)	(17,780)	(2,197) U	(12%)	(35,274)
Residential Care: Loans Adjustment	19	23	(3) U	(14%)	91	136	(45) U	(33%)	272
Long Term Chronic Conditions	(8)	(8)			(48)	(48)			(97)
Residential Care: Hospitals	(4,050)	(3,942)	(108) U	(3%)	(23,031)	(23,398)	368 F	2%	(46,416)
Ageing in Place	(2)	(2)			(15)	(15)			(30)
Environmental Support Services	(106)	(110)	4 F	4%	(616)	(659)	43 F	6%	(1,318)
Day Programmes	(38)	(45)	7 F	16%	(209)	(277)	69 F	25%	(554)
Expenditure to Attend Treatment ETAT	-	-			-	-			-
Minor Disability Support Expenditure	(8)	(17)	9 F	52%	(50)	(105)	55 F	52%	(210)
Respite Care	(125)	(95)	(29) U	(31%)	(819)	(571)	(248) U	(43%)	(1,143)
Community Health Services & Support	(85)	(81)	(5) U	(6%)	(358)	(483)	125 F	26%	(966)

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Part 3: DHB Funds	Current Month				Year to Date				Annual
	Actual	Budget	Variance	Variance	Actual	Budget	Variance	Variance	Budget
	\$(000)	\$(000)	\$(000)	%	\$(000)	\$(000)	\$(000)	%	\$(000)
Inter District Flow Disability Support	(280)	(256)	(24) U	(9%)	(1,575)	(1,538)	(36) U	(2%)	(3,077)
Disability Support Other	-	-			-	-			-
Disability Support Services Total	(12,303)	(11,273)	(1,030) U	(9%)	(69,887)	(67,201)	(2,686) U	(4%)	(133,736)
Maori Health									
Maori Service Development	(57)	(38)	(19) U	(50%)	(264)	(227)	(36) U	(16%)	(455)
Maori Provider Assistance Infrastruc	-	-			-	-			-
Maori Workforce Development	-	-			-	-			-
Minor Maori Health Expenditure	-	-			-	-			-
Whanau Ora Services	(91)	(115)	24 F	21%	(618)	(689)	71 F	10%	(1,378)
Maori Health Total	(148)	(153)	5 F	3%	(882)	(916)	34 F	4%	(1,833)
Internal Allocations	-	-			-	-			-
Total Expenses	(70,768)	(69,329)	(1,439) U	(2%)	(419,984)	(415,627)	(4,357) U	(1%)	(825,966)
Summary of Results									
Subtotal of IDF Revenue	1,463	1,553	(90) U	(6%)	9,313	9,318	(5) U		18,635
Subtotal all other Revenue	67,930	67,782	148 F		407,760	406,958	802 F		813,647
Revenue Total	69,393	69,334	58 F		417,073	416,276	797 F		832,283
Subtotal of IDF Expenditure	(3,036)	(3,055)	18 F	1%	(18,636)	(18,328)	(307) U	(2%)	(36,657)
Subtotal all other Expenditure	(67,732)	(66,274)	(1,458) U	(2%)	(401,348)	(397,299)	(4,050) U	(1%)	(789,309)
Expenses Total	(70,768)	(69,329)	(1,439) U	(2%)	(419,984)	(415,627)	(4,357) U	(1%)	(825,966)
Net Surplus/ (Deficit)	(1,375)	6	(1,381) U		(2,912)	649	(3,560) U	(549%)	6,317
Zero Check	-	-			-	-			-

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Part 4: DHB Consolidated	Current Month				Year to Date				Annual Budget
	Actual	Budget	Variance	Variance	Actual	Budget	Variance	Variance	
	\$(000)	\$(000)	\$(000)	%	\$(000)	\$(000)	\$(000)	%	
Part 4.1: Statement of Financial Performance									
REVENUE									
Ministry of Health									
MoH - Vote Health Non Mental Health	57,843	57,837	7 F		347,046	347,022	24 F		694,043
MoH - Vote Health Mental Health	6,925	6,925			41,549	41,549			83,097
PBF Adjustments	-	-			-	-			-
MoH Funding Subcontracts	3,161	3,020	141 F	5%	19,165	18,388	777 F	4%	36,507
MoH - Personal Health	-	28	(28) U		221	170	51 F	30%	339
MoH - Mental Health	-	-			-	-			-
MoH - Public Health	240	11	230 F		293	64	229 F	361%	127
MoH - Disability Support Services	733	740	(7) U	(1%)	4,800	4,620	180 F	4%	9,040
MoH - Maori Health	-	-			-	-			-
Clinical Training Agency	507	526	(19) U	(4%)	3,706	3,709	(3) U		7,418
Internal - DHB Funder to DHB Provider	-	-			-	-			-
Ministry of Health Total	69,410	69,087	323 F		416,779	415,520	1,259 F		830,571
Other Government									
IDF's - Mental Health Services	45	45			271	271			541
IDF's - All others (non Mental health)	1,418	1,508	(90) U	(6%)	9,042	9,047	(5) U		18,094
Other DHB's	115	25	90 F	356%	149	151	(2) U	(1%)	302
Training Fees and Subsidies	41	17	24 F	139%	135	103	32 F	31%	206
Accident Insurance	901	846	55 F	6%	5,098	5,429	(331) U	(6%)	10,406
Other Government	474	481	(7) U	(1%)	2,771	2,847	(76) U	(3%)	5,690
Other Government Total	2,993	2,922	72 F	2%	17,466	17,848	(381) U	(2%)	35,239
Government and Crown Agency Total	72,404	72,009	395 F	1%	434,246	433,368	878 F		865,811
Other Revenue									
Patient / Consumer Sourced	347	230	116 F	50%	1,501	1,540	(39) U	(3%)	3,515
Other Income	1,203	854	349 F	41%	5,589	5,074	515 F	10%	10,199
Other Revenue Total	1,550	1,084	465 F	43%	7,091	6,615	476 F	7%	13,714
REVENUE TOTAL	73,953	73,093	860 F	1%	441,336	439,983	1,353 F		879,525
EXPENSES									
Personnel Expenses									
Medical Personnel	(10,136)	(9,884)	(252) U	(3%)	(56,460)	(56,855)	395 F	1%	(113,497)
Nursing Personnel	(11,045)	(10,856)	(189) U	(2%)	(62,763)	(61,698)	(1,065) U	(2%)	(124,846)
Allied Health Personnel	(4,201)	(4,335)	134 F	3%	(23,869)	(24,715)	847 F	3%	(49,159)
Support Services Personnel	(889)	(844)	(45) U	(5%)	(4,966)	(4,826)	(140) U	(3%)	(9,718)
Management / Admin Personnel	(3,932)	(3,769)	(163) U	(4%)	(21,921)	(21,496)	(425) U	(2%)	(42,175)
Personnel Costs Total	(30,203)	(29,688)	(516) U	(2%)	(169,979)	(169,590)	(389) U		(339,397)
Outsourced Expenses									
Medical Personnel	(453)	(554)	101 F	18%	(2,371)	(3,145)	774 F	25%	(6,104)
Nursing Personnel	(16)	-	(16) U		(43)	-	(43) U		-
Allied Health Personnel	(36)	(36)		(1%)	(318)	(218)	(100) U	(46%)	(421)
Support Personnel	(34)	(21)	(12) U	(57%)	(183)	(128)	(54) U	(43%)	(256)
Management / Administration Personnel	(15)	(1)	(14) U		(60)	(6)	(54) U	(887%)	(12)
Outsourced Clinical Services	(2,203)	(1,838)	(365) U	(20%)	(11,792)	(11,144)	(647) U	(6%)	(22,257)
Outsourced Corporate / Governance Services	(258)	(274)	16 F	6%	(1,531)	(1,592)	61 F	4%	(3,177)
Outsourced Funder Services	(208)	(134)	(74) U	(55%)	(1,085)	(803)	(282) U	(35%)	(1,606)
Outsourced Services Total	(3,222)	(2,858)	(363) U	(13%)	(17,382)	(17,036)	(346) U	(2%)	(33,833)
Clinical Supplies									
Treatment Disposables	(2,737)	(2,308)	(429) U	(19%)	(15,400)	(14,483)	(917) U	(6%)	(28,710)
Diagnostic Supplies & Other Clinical Supplies	(169)	(148)	(21) U	(14%)	(919)	(945)	26 F	3%	(1,818)
Instruments & Equipment	(1,402)	(1,341)	(61) U	(5%)	(8,541)	(8,083)	(458) U	(6%)	(16,010)
Patient Appliances	(162)	(190)	28 F	15%	(1,060)	(1,133)	72 F	6%	(2,268)
Implants & Prosthesis	(897)	(825)	(72) U	(9%)	(5,393)	(5,761)	369 F	6%	(11,607)
Pharmaceuticals	(1,278)	(1,555)	277 F	18%	(8,930)	(9,360)	430 F	5%	(18,395)
Other Clinical Supplies	(285)	(300)	15 F	5%	(1,671)	(1,907)	236 F	12%	(3,774)
Clinical Supplies Total	(6,929)	(6,667)	(262) U	(4%)	(41,914)	(41,671)	(243) U	(1%)	(82,583)
Infrastructure & Non Clinical Expenses									
Hotel Services, Laundry & Cleaning	(1,067)	(1,038)	(29) U	(3%)	(6,643)	(6,366)	(276) U	(4%)	(12,658)
Facilities	(1,774)	(1,735)	(39) U	(2%)	(11,008)	(10,810)	(198) U	(2%)	(21,682)
Transport	(324)	(367)	43 F	12%	(2,081)	(2,233)	152 F	7%	(4,424)
IT Systems & Telecommunications	(939)	(918)	(22) U	(2%)	(5,614)	(5,514)	(100) U	(2%)	(11,038)
Interest & Financing Charges	(1,276)	(1,275)	(1) U		(7,631)	(7,648)	17 F		(15,296)
Professional Fees & Expenses	(230)	(159)	(72) U	(45%)	(1,098)	(956)	(142) U	(15%)	(1,888)
Other Operating Expenses	(556)	(382)	(174) U	(45%)	(2,387)	(2,227)	(161) U	(7%)	(4,420)
Democracy	(39)	(42)	3 F	7%	(230)	(254)	23 F	9%	(507)
Subsidiaries & Joint Ventures	-	-			-	-			-
Infrastructure & Non-Clinical Supplies Total	(6,205)	(5,915)	(290) U	(5%)	(36,691)	(36,007)	(684) U	(2%)	(71,913)

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Part 4: DHB Consolidated	Current Month				Year to Date				Annual
	Actual	Budget	Variance	Variance	Actual	Budget	Variance	Variance	Budget
	\$(000)	\$(000)	\$(000)	%	\$(000)	\$(000)	\$(000)	%	\$(000)
Payments to Providers									
Personal Health									
Personal Health to allocate	-	(83)	83 F		-	(500)	500 F		(1,000)
Child and Youth	(34)	(34)		(1%)	(207)	(204)	(3) U	(2%)	(408)
Laboratory	(1,520)	(1,465)	(55) U	(4%)	(9,280)	(8,789)	(491) U	(6%)	(17,577)
Infertility Treatment Services	-	(9)	9 F		-	(54)	54 F		(657)
Maternity	(220)	(220)			(1,333)	(1,322)	(12) U	(1%)	(2,643)
Maternity (Tertiary & Secondary)	(1)	(14)	13 F	95%	(11)	(81)	71 F	87%	(163)
Pregnancy and Parenting Education	(13)	(10)	(3) U	(32%)	(58)	(59)	1 F	1%	(117)
Maternity Payment Schedule	-	-			-	-			-
Neo Natal	-	-			-	-			-
Sexual Health	(2)	(1)		(1%)	(9)	(9)		(1%)	(18)
Adolescent Dental Benefit	(165)	(187)	22 F	12%	(980)	(1,067)	86 F	8%	(2,068)
Other Dental Services	-	-			-	-			-
Dental - Low Income Adult	(54)	(55)	1 F	2%	(357)	(332)	(25) U	(7%)	(665)
Child (School) Dental Services	(14)	(35)	21 F	61%	(150)	(213)	63 F	30%	(444)
Secondary / Tertiary Dental	(139)	(126)	(13) U	(10%)	(1,109)	(756)	(352) U	(47%)	(1,512)
Pharmaceuticals	(6,602)	(6,434)	(168) U	(3%)	(37,281)	(36,837)	(444) U	(1%)	(69,900)
Pharmaceutical Cancer Treatment Drugs	(17)	-	(17) U		(17)	-	(17) U		-
Pharmacy Services	(67)	(61)	(6) U	(10%)	(290)	(364)	74 F	20%	(728)
Management Referred Services	-	250	(250) U		-	500	(500) U		2,000
General Medical Subsidy	(35)	(86)	51 F	60%	(462)	(514)	52 F	10%	(952)
Primary Practice Services - Capitated	(3,477)	(3,511)	34 F	1%	(21,039)	(21,066)	27 F		(42,132)
Primary Health Care Strategy - Care	(323)	(318)	(5) U	(2%)	(1,912)	(1,907)	(5) U		(3,814)
Primary Health Care Strategy - Health	(358)	(337)	(22) U	(6%)	(2,006)	(2,020)	14 F	1%	(4,041)
Primary Health Care Strategy - Other	(313)	(255)	(58) U	(23%)	(1,317)	(1,529)	212 F	14%	(3,058)
Practice Nurse Subsidy	(14)	(16)	3 F	17%	(82)	(98)	16 F	16%	(195)
Rural Support for Primary Health Pro	(1,305)	(1,313)	8 F	1%	(7,829)	(7,878)	49 F	1%	(15,756)
Immunisation	(104)	(104)	(1) U		(483)	(648)	165 F	25%	(2,035)
Radiology	(210)	(196)	(14) U	(7%)	(1,207)	(1,176)	(30) U	(3%)	(2,353)
Palliative Care	(501)	(488)	(13) U	(3%)	(3,098)	(2,930)	(168) U	(6%)	(5,860)
Meals on Wheels	(20)	(20)			(120)	(120)			(241)
Domiciliary & District Nursing	(497)	(435)	(62) U	(14%)	(2,871)	(2,617)	(254) U	(10%)	(5,228)
Community based Allied Health	(168)	(168)	(1) U		(1,010)	(1,005)	(5) U		(2,011)
Chronic Disease Management and Educa	(166)	(95)	(71) U	(75%)	(616)	(570)	(46) U	(8%)	(1,140)
Medical Inpatients	-	-			-	-			-
Medical Outpatients	(428)	(397)	(30) U	(8%)	(2,509)	(2,384)	(125) U	(5%)	(4,769)
Surgical Inpatients	(2)	(19)	16 F	88%	(91)	(112)	21 F	19%	(224)
Surgical Outpatients	(139)	(146)	7 F	5%	(834)	(878)	44 F	5%	(1,756)
Paediatric Inpatients	-	-			-	-			-
Paediatric Outpatients	(7)	-	(7) U		(7)	-	(7) U		-
Pacific Peoples' Health	(8)	(12)	4 F	36%	(53)	(70)	18 F	25%	(140)
Emergency Services	(159)	(156)	(4) U	(2%)	(981)	(933)	(48) U	(5%)	(1,867)
Minor Personal Health Expenditure	(39)	(74)	34 F	47%	(387)	(443)	56 F	13%	(886)
Price adjusters and Premium	(211)	(83)	(127) U	153%	(981)	(501)	(481) U	96%	(1,002)
Travel & Accommodation	(426)	(322)	(105) U	(33%)	(2,693)	(2,539)	(154) U	(6%)	(4,813)
Inter District Flow Personal Health	(2,353)	(2,399)	46 F	2%	(14,645)	(14,394)	(252) U	(2%)	(28,787)
Personal Health Total	(20,110)	(19,433)	(677) U	(3%)	(118,314)	(116,420)	(1,894) U	(2%)	(228,958)
Mental Health									
Mental Health to allocate	-	(38)	38 F		-	(228)	228 F		(457)
Acute Mental Health Inpatients	-	-			-	-			-
Sub-Acute & Long Term Mental Health	-	-			-	-			-
Crisis Respite	(8)	(5)	(3) U	(70%)	(31)	(28)	(4) U	(13%)	(55)
Alcohol & Other Drugs - General	(55)	(55)			(328)	(328)			(656)
Alcohol & Other Drugs - Child & Youth	(102)	(102)			(612)	(612)			(1,224)
Methadone	-	-			-	-			-
Dual Diagnosis - Alcohol & Other Drugs	(37)	(36)		(1%)	(215)	(217)	2 F	1%	(435)
Dual Diagnosis - MH/ID	-	-			-	-			-
Eating Disorder	(30)	(16)	(14) U	(85%)	(90)	(96)	6 F	6%	(193)
Maternal Mental Health	(4)	(4)			(22)	(22)			(44)
Child & Youth Mental Health Services	(310)	(241)	(68) U	(28%)	(1,765)	(1,448)	(317) U	(22%)	(2,896)
Forensic Services	(4)	(4)			(22)	(22)			(43)
Kaupapa Maori Mental Health Services	(6)	(6)			(37)	(37)			(74)
Kaupapa Maori Mental Health - Residential	-	-			-	-			-
Kaupapa Maori Mental Health - Inpati	-	-			-	-			-
Mental Health Community Services	(116)	(127)	11 F	8%	(720)	(759)	39 F	5%	(1,518)
Prison/Court Liaison	-	-			-	-			-
Mental Health Workforce Development	-	-			-	-			-
Day Activity & Work Rehabilitation S	(136)	(136)			(818)	(818)			(1,636)
Mental Health Funded Services for Older People	-	-			-	-			-
Advocacy / Peer Support - Consumer	(23)	(23)			(139)	(140)	1 F		(280)
Other Home Based Residential Support	(319)	(315)	(4) U	(1%)	(2,045)	(1,891)	(154) U	(8%)	(3,782)
Advocacy / Peer Support - Families	(52)	(52)			(314)	(314)			(629)
Community Residential Beds & Service	(471)	(457)	(14) U	(3%)	(2,708)	(2,739)	32 F	1%	(5,478)
Minor Mental Health Expenditure	(27)	(32)	5 F	15%	(189)	(191)	2 F	1%	(382)

Southern District Health Board

Dec-14

Part 4: DHB Consolidated	Current Month				Year to Date				Annual Budget
	Actual	Budget	Variance	Variance	Actual	Budget	Variance	Variance	
	\$(000)	\$(000)	\$(000)	%	\$(000)	\$(000)	\$(000)	%	
Inter District Flow Mental Health	(403)	(399)	(3) U	(1%)	(2,416)	(2,396)	(19) U	(1%)	(4,793)
Mental Health Total	(2,101)	(2,048)	(53) U	(3%)	(12,472)	(12,287)	(184) U	(2%)	(24,575)
Public Health									
Alcohol & Drug	-	-	-	-	-	-	-	-	-
Communicable Diseases	-	-	-	-	-	-	-	-	-
Injury Prevention	-	-	-	-	-	-	-	-	-
Mental Health	-	-	-	-	-	-	-	-	-
Screening Programmes	-	-	-	-	-	-	-	-	-
Nutrition and Physical Activity	(26)	(27)	1 F	4%	(154)	(161)	7 F	4%	(321)
Physical Environment	-	-	-	-	-	-	-	-	-
Public Health Infrastructure	-	-	-	-	-	-	-	-	-
Sexual Health	-	-	-	-	-	-	-	-	-
Social Environments	-	-	-	-	-	-	-	-	-
Tobacco Control	21	(12)	34 F	269%	(71)	(75)	4 F	6%	(150)
Well Child Promotion	-	-	-	-	-	-	-	-	-
Meningococcal	-	-	-	-	-	-	-	-	-
Public Health Total	(5)	(39)	35 F	89%	(224)	(235)	11 F	5%	(471)
Disability Support Services									
AT & R (Assessment, Treatment and Re Information and Advisory	(297)	(297)	-	-	(1,785)	(1,785)	-	-	(3,569)
Needs Assessment	(31)	(22)	(9) U	(43%)	(271)	(130)	(141) U	(109%)	(260)
Service Co-ordination	-	-	-	-	(9)	-	(9) U	-	-
Home Support	(1,501)	(1,423)	(79) U	(6%)	(9,253)	(8,535)	(718) U	(8%)	(17,070)
Carer Support	(135)	(144)	9 F	7%	(817)	(865)	49 F	6%	(1,731)
Residential Care: Rest Homes	(3,797)	(2,995)	(802) U	(27%)	(19,977)	(17,780)	(2,197) U	(12%)	(35,274)
Residential Care: Loans Adjustment	19	23	(3) U	(14%)	91	136	(45) U	(33%)	272
Long Term Chronic Conditions	-	-	-	-	-	-	-	-	-
Residential Care: Hospitals	(4,050)	(3,942)	(108) U	(3%)	(23,031)	(23,398)	368 F	2%	(46,416)
Ageing in Place	-	-	-	-	-	-	-	-	-
Environmental Support Services	(104)	(108)	4 F	4%	(603)	(646)	43 F	7%	(1,291)
Day Programmes	(38)	(45)	7 F	16%	(209)	(277)	69 F	25%	(554)
Expenditure to Attend Treatment ETAT	-	-	-	-	-	-	-	-	-
Minor Disability Support Expenditure	-	(9)	9 F	-	-	(55)	55 F	-	(109)
Respite Care	(125)	(95)	(29) U	(31%)	(819)	(571)	(248) U	(43%)	(1,143)
Community Health Services & Support	(64)	(60)	(5) U	(8%)	(232)	(357)	125 F	35%	(714)
Inter District Flow Disability Support	(280)	(256)	(24) U	(9%)	(1,575)	(1,538)	(36) U	(2%)	(3,077)
Disability Support Other	-	-	-	-	-	-	-	-	-
Disability Support Services Total	(10,415)	(9,385)	(1,030) U	(11%)	(58,559)	(55,873)	(2,686) U	(5%)	(111,079)
Maori Health									
Maori Service Development	(41)	(22)	(19) U	(85%)	(170)	(133)	(36) U	(27%)	(266)
Maori Provider Assistance Infrastruc	-	-	-	-	-	-	-	-	-
Moari Workforce Development	-	-	-	-	-	-	-	-	-
Minor Maori Health Expenditure	-	-	-	-	-	-	-	-	-
Whanau Ora Services	(83)	(107)	24 F	22%	(571)	(641)	70 F	11%	(1,281)
Maori Health Total	(124)	(129)	5 F	4%	(740)	(774)	33 F	4%	(1,547)
Internal Allocations	-	-	-	-	-	-	-	-	-
Total Expenses	(79,313)	(76,162)	(3,151) U	(4%)	(456,276)	(449,893)	(6,382) U	(1%)	(894,356)
Net Surplus/ (Deficit)	(5,360)	(3,069)	(2,291) U	(75%)	(14,939)	(9,911)	(5,029) U	(51%)	(14,832)
<i>Zero Check</i>	-	-	-	-	-	-	-	-	-
Part 4.1 A: Supplementary Information to Statement of Financial Performance									
Depreciation - Clinical Equipment	(634)	(656)	22 F	3%	(3,929)	(3,945)	16 F	-	(7,847)
Depreciation - Non Residential Buildings & Plant	(651)	(661)	10 F	2%	(3,913)	(3,882)	(31) U	(1%)	(8,095)
Depreciation - Motor Vehicles	(23)	(17)	(5) U	(32%)	(136)	(105)	(31) U	(29%)	(208)
Depreciation - Information Technology	(271)	(245)	(26) U	(11%)	(1,577)	(1,474)	(103) U	(7%)	(2,975)
Depreciation - Other Equipment	(50)	(49)	(1) U	(2%)	(323)	(297)	(26) U	(9%)	(596)
Total Depreciation	(1,628)	(1,628)	(1) U	-	(9,878)	(9,702)	(176) U	(2%)	(19,721)
Interest Cost from Funder Loans	-	-	-	-	-	-	-	-	-
Interest Costs from CHFA	(386)	(378)	(8) U	(2%)	(2,293)	(2,268)	(25) U	(1%)	(4,537)
Financing Component of Operating Leases	(29)	(31)	2 F	5%	(175)	(184)	9 F	5%	(368)
Capital Charge	(844)	(841)	(4) U	-	(5,067)	(5,043)	(23) U	-	(10,087)

Southern District Health Board

Dec-14

Part 4: DHB Consolidated	Current Month Actual \$ (000)	Previous Month Actual \$ (000)	Movement \$ (000)	Current Budget \$ (000)	Current Year Opening Balance Sheet \$ (000)	Annual Budget \$ (000)
Part 4.2: Balance Sheet						
Current Assets						
Petty Cash	16	16	-	-	16	-
Bank	(75,172)	(199)	(74,973)	-	(285)	-
Short Term Investments - HBL	83,772	12,911	70,861	-	12,711	-
Short Term Investments	-	-	-	-	-	-
Prepayments	4,257	4,362	(105)	-	2,115	-
Accounts Receivable	8,836	10,430	(1,593)	-	10,434	-
Provision for Doubtful Debts	(2,686)	(2,486)	(200)	-	(2,486)	-
Accrued Debtors	18,493	20,092	(1,599)	-	21,599	-
Inventory / Stock	4,898	4,715	183	-	4,792	-
Assets Held for Resale	569	1,099	(530)	-	1,099	-
Current Assets Total	42,983	50,939	(7,956)	-	49,994	-
Non Current Assets						
Land, Buildings & Plant	250,607	250,547	60	-	250,340	-
Clinical Equipment (incl Finance Leases)	108,910	108,420	490	-	108,627	-
Other Equipment (incl Finance Leases)	15,212	15,211	1	-	15,190	-
Information Technology	39,686	39,279	407	-	38,708	-
Motor Vehicles	2,343	2,343	-	-	2,343	-
Provision Depreciation - Buildings & Plant	(6,263)	(5,615)	(648)	-	(2,354)	-
Provision Depreciation - Clinical Equipment	(75,076)	(74,442)	(634)	-	(73,360)	-
Provision Depreciation - Other Equipment	(11,813)	(11,763)	(50)	-	(11,560)	-
Provision Depreciation - Information Technology	(29,458)	(29,245)	(213)	-	(28,263)	-
Provision Depreciation - Motor Vehicles	(1,038)	(1,015)	(23)	-	(902)	-
WIP	7,987	6,800	1,186	-	4,577	-
Investment in Associates	-	-	-	-	-	-
Long Term Investments	4,425	4,337	88	-	3,586	-
Non Current Assets Total	305,520	304,855	665	-	306,933	-
Current Liabilities						
Accounts Payable Control	(10,326)	(4,621)	(5,705)	-	(7,132)	-
Accrued Creditors	(26,791)	(32,429)	5,638	-	(31,970)	-
Income Received in Advance	(519)	(1,595)	1,076	-	(539)	-
Capital Charge Payable	-	(4,222)	4,222	-	-	-
GST & Tax Provisions	(9,098)	(5,846)	(3,252)	-	(5,359)	-
Term Loans - Finance Leases (current portion)	(1,396)	(1,133)	(263)	-	(2,330)	-
Term Loans - Crown (current portion)	(13,093)	(12,976)	(116)	-	(12,976)	-
Payroll Accrual & Clearing Accounts	(13,137)	(13,574)	437	-	(14,593)	-
Employee Entitlement Provisions	(46,913)	(46,836)	(78)	-	(47,795)	-
Current Liabilities Total	(121,271)	(123,231)	1,959	-	(122,695)	-
WORKING CAPITAL	(78,288)	(72,291)	(5,997)	-	(72,700)	-
NET FUNDS EMPLOYED	227,232	232,564	(5,332)	-	234,232	-
Non Current Liabilities						
Long Service Leave - Non Current Portion	(3,030)	(3,030)	-	-	(3,030)	-
Retirement Gratuities - Non Current Portion	(10,778)	(10,778)	-	-	(10,863)	-
Other Employee Entitlement Provisions	(1,320)	(1,320)	-	-	(1,320)	-
Term Loans - Finance Leases (non current portion)	(2,836)	(3,138)	302	-	(1,565)	-
Term Loans - Crown (non current portion)	(88,438)	(88,108)	(330)	-	(88,250)	-
Custodial Funds	-	-	-	-	-	-
Non Current Liabilities Total	(106,402)	(106,374)	(28)	-	(105,017)	-
Crown Equity						
Crown Equity	(179,788)	(179,788)	-	-	(179,788)	-
Crown Equity Injection	(6,554)	(6,554)	-	-	-	-
Crown Equity Repayments	-	-	-	-	-	-
Trust and Special Funds (no restricted use)	(5,032)	(5,065)	32	-	(4,947)	-
Revaluation Reserve	(94,120)	(94,570)	450	-	(94,570)	-
Retained Earnings - DHB Governance & Funding	4,394	4,285	109	84	4,023	3
Retained Earnings - DHB Provider	117,829	114,435	3,394	10,477	106,537	21,147
Retained Earnings - Funds	42,442	41,067	1,375	(649)	39,531	(6,317)
Crown Equity Total	(120,830)	(126,190)	5,360	9,912	(129,215)	14,834
NET FUNDS EMPLOYED	(227,232)	(232,564)	5,332	(9,912)	(234,232)	(14,834)
Zero Check	-	-	-	9,912	-	14,834
Part 4.3: Statement of Movement in Equity						
Total equity at beginning of the period	(129,215)	(129,215)	-	-	(129,215)	-
Net Results for Period	14,939	9,579	5,360	9,911	-	14,832
Revaluation of Fixed Assets	-	-	-	-	-	-
Equity Injections - Deficit Support	(6,015)	(6,015)	-	-	-	-
Equity Injections - Capital Projects	(539)	(539)	-	-	-	-
Equity Repayments	-	-	-	-	-	-
Other	-	-	-	-	-	-
Movement in Trust and Special Funds	(105)	(105)	-	-	(105)	-
Total Equity at end of the period	(120,935)	(126,295)	5,360	9,911	(129,320)	14,832

Board Cash Flow - Southern Dec-14

Part 4: DHB Consolidated	Current Month			Year to Date			Annual
	Actual	Budget	Variance	Actual	Budget	Variance	Budget
	\$(000)	\$(000)	\$(000)	\$(000)	\$(000)	\$(000)	\$(000)
Part 4.4 Statement of Cashflows							
Operating Revenue							
Government and Crown Agency Revenue	74,720	72,009	2,711 F	439,128	433,368	5,760 F	865,811
Other Revenue Received	1,282	933	350 F	5,959	5,705	254 F	11,894
Total Receipts	76,002	72,941	3,061 F	445,087	439,073	6,015 F	877,705
Payments							
Payments for Personnel	(30,563)	(29,688)	(875) U	(172,402)	(169,590)	(2,812) U	(339,397)
Payments for Supplies	(7,855)	(12,542)	4,687 F	(77,149)	(77,383)	234 F	(153,352)
Interest Paid	(872)	(409)	(463) U	(2,457)	(2,453)	(5) U	(4,905)
Capital Charge Paid	(5,067)	(841)	(4,226) U	(5,067)	(5,043)	(23) U	(10,087)
GST (Net) & Tax	3,252	-	3,252 F	3,738	-	3,738 F	-
Payment to own DHB Provider (Eliminated)	-	-	-	-	-	-	-
Payment to own DHB Governance & Funding Admin	-	-	-	-	-	-	-
Payments to other DHBs	(3,036)	(3,055)	18 F	(18,636)	(18,328)	(307) U	(36,657)
Payments to Providers	(34,871)	(27,979)	(6,892) U	(177,155)	(167,261)	(9,893) U	(329,973)
Total Payments	(79,012)	(74,512)	(4,500) U	(449,127)	(440,059)	(9,068) U	(874,371)
Net Cashflow from Operating	(3,010)	(1,571)	(1,439) U	(4,040)	(986)	(3,053) U	3,334
Investing Activities							
Interest Receipts 3rd Party	174	152	22 F	1,025	910	115 F	1,820
Sale of Fixed Assets	93	-	93 F	107	-	107 F	-
Capital Expenditure							
Land, Buildings & Plant	(63)	(661)	598 F	(270)	(3,882)	3,612 F	(8,095)
Clinical Equipment	(490)	(656)	166 F	(2,040)	(3,945)	1,905 F	(7,847)
Other Equipment	(1)	(49)	48 F	(92)	(297)	205 F	(596)
Information Technology	(365)	(245)	(121) U	(1,011)	(1,474)	462 F	(2,975)
Motor Vehicles	-	(17)	17 F	-	(105)	105 F	(208)
Work in Progress (Check)	(1,186)	-	(1,186) U	(3,409)	-	(3,409) U	-
Total Capital Expenditure	(2,106)	(1,628)	(478) U	(6,823)	(9,702)	2,880 F	(19,721)
Increase in Investments and Restricted & Trust Funds Assets	(88)	-	(88) U	(838)	-	(838) U	-
Net Cashflow from Investing	(1,927)	(1,476)	(451) U	(6,530)	(8,792)	2,263 F	(17,901)
Financing Activities							
Equity Injections	-	-	-	6,554	-	6,554 F	-
New Debt							
Private Sector	232	-	232 F	15,990	-	15,990 F	-
CHFA	698	(22)	720 F	698	(132)	830 F	(264)
Repaid Debt							
Private Sector	(370)	-	(370) U	(16,551)	-	(16,551) U	-
CHFA	(266)	-	(266) U	(480)	-	(480) U	-
Other Non-Current Liability Movement							
Other Equity Movement	-	-	-	-	-	-	-
Net Cashflow from Financing	295	(22)	317 F	6,212	(132)	6,344 F	(264)
Net Cashflow	(4,642)	(3,069)	(1,573) U	(4,357)	(9,911)	5,554 F	(14,832)
Plus Cash (Opening)	12,727	12,727	-	-	12,727	(12,727) U	13,293
Cash (Closing)	8,085	9,658	(1,573) U	(4,357)	2,817	(7,174) U	(1,539)
Carry Forward Check							
Closing Cash made up of:							
Petty Cash	16	16	-	-	16	16 F	16
Bank (Overdraft)	(75,172)	(75,172)	-	-	(75,172)	(75,172) U	(75,107)
Short Term Investments	83,772	83,772	-	-	83,772	83,772 F	84,272
Total Cashflow Cash (Closing)	8,615	8,615	-	-	8,615	(8,615) U	9,181

Southern District Health Board

Minutes of the Joint Meeting of the Disability Support Advisory Committee and Community & Public Health Advisory Committee held on Wednesday, 10 December 2014, commencing at 10.00 am, in the Board Room, Wakari Hospital Campus, Dunedin

Present:	Mr Tim Ward Mr Neville Cook Mrs Kaye Crowther Mr Stuart Heal	Acting Chair
In Attendance:	Mr Joe Butterfield Dr John Chambers Mr Tony Hill Dr Jan White Mrs Sandra Boardman Mr Peter Beirne Ms Carole Heatly Ms Jeanette Kloosterman Mr Ian Macara	Board Chairman (until 10.30 am) Board Member Board Member (from 10.25 am) Crown Monitor Executive Director, Planning & Funding Executive Director Finance Chief Executive Officer Board Secretary Chief Executive, WellSouth Primary Health Network

9.1

1.0 WELCOME

The Acting Chair welcomed everyone to the meeting.

2.0 APOLOGIES

Apologies were received from Ms Sandra Cook, Committee Chair, Dr Branko Sijnja, Committee Member, and Mr David Tulloch, Chief Medical Officer.

3.0 PRESENTATION – CANCER SERVICES

The Committees received a presentation from Ron Craft, Portfolio Manager, and Blair McLaren, Specialist, Oncology & Haematology, on the cancer planning framework and current priorities (tab 3). This included an overview of the:

- New Zealand Cancer Control Strategy
- Cancer Network structure
- Key strategic directions of the Southern Cancer Network and its programmes of work
- Role of the Otago/Southland Local Cancer Network and its goals
- Registrations by ethnicity for Southern and New Zealand 2005-07 for lung, breast, cervical, prostate, colorectal and melanoma cancers

Mr Craft informed the Committees that their presentation had been prepared prior to the release the previous day of the Minister’s Cancer Plan 2015-18, which they had yet to analyse.

The Committees:

- Noted that New Zealand has the highest rate of colorectal cancer in the world and Southern has the highest rate of colorectal cancer registrations in New Zealand;
- Noted that it was likely colorectal cancer screening would be funded by 2016;
- Requested that management report back on their planning for the follow-up services, including colonoscopy, that will be required following the introduction of colorectal cancer screening;
- Expressed their support for training nurses to undertake colonoscopies.

Mr Tony Hill joined the meeting at 10.25 am.

The Acting Chair thanked Messrs Craft and McLaren for the preparation that had gone into their informative presentation.

Mr Butterfield left the meeting at 10.30 am.

4.0 MEMBERS' DECLARATION OF INTEREST

It was resolved:

"That the Interests Register be noted."

5.0 PREVIOUS MINUTES

It was resolved:

"That the minutes of the joint meeting of the Disability Support Advisory Committee and Community & Public Health Advisory Committee held on 5 November 2014 be approved and adopted as a true and correct record."

6.0 MATTERS ARISING

There were no items arising from the previous minutes that were not covered by the agenda.

7.0 ACTION SHEET

The Committees reviewed the action sheet (tab 7) and:

- Noted advice from the WellSouth Chief Executive that another Invercargill practice had joined the free after-hours care for under six-year olds, which reduced the number of Invercargill practices outside the scheme to two;
- Noted the Executive Director Planning & Funding's advice that Alliance South had a planning day scheduled for February and additional items may be added to their Work Plan as a result of that;
- Requested that Alliance South's A3 problem solving sheets, showing KPIs to measure progress, be submitted to the next meeting.

8.0 PLANNING & FUNDING REPORT

The Planning and Funding report (tab 8) was taken as read and the Executive Director Planning and Funding highlighted the following items:

- WellSouth announced on 11 November 2014 that a third Very Low Cost Access (VLCA) practice, Nga Kete Matauranga Pounamu Charitable Trust, had been established in the Southern district;
- Progress was being made to ensure rural health funding is allocated to where service needs are greatest;
- Consultation on the Southern Strategic Health Services Plan (SHSP) closed on 21 November 2014. Seventeen roadshows were held and 900 submissions received. The final draft plan will be submitted to Board in February 2015.

The Executive Director Planning and Funding then took questions from members.

Public Health South Report

The Committees requested:

- That management check Well Child providers are promoting the BURP breastfeeding smartphone application;
- The KPIs for the initiatives referred to in Public Health South's report, eg the Stop Smoking Clinic.

9.0 QUARTER ONE DHB PERFORMANCE

The Executive Director Planning & Funding presented an overview of performance against health targets and indicators for quarter one 2014/15 (tab 9) and advised that there were data issues with the two targets not achieved.

Primary Health

Health Targets

Mr Heal informed the Committees that, for the first quarter, WellSouth had achieved four of its five health targets and the fifth was close to target.

The Chief Executive, WellSouth, reported that a plan had been agreed with the Ministry of Health to achieve the cardiovascular health target by June 2015.

After Hours Care

The Chief Executive, WellSouth, provided an update on after-hours care in the district.

It was resolved:

"That the Committees note the quarter one DHB performance report."

10.0 FINANCIAL REPORT

The Executive Director Planning & Funding presented the Funder Financial Report for the period ended 31 October 2014 (tab 10) and provided the following updates:

- Inter district flows (IDFs), which had been negative in October, were positive in November;
- Travel and accommodation were again positive in November;
- Mental Health and Public Health were in line with budget for November;
- The trends in Disability Support were continuing, with aged residential care over budget but hospital level beds had been positive;
- The Pharmac forecast had been received. Further analysis of this was required but it indicated that there would be \$600k further cost for the year.

The Executive Director Planning & Funding informed the Committees:

- That the Pharmac forecast did not include hospital medicines rebates, which would offset the adverse shift;
- Health Partners were analysing aged residential care to identify the areas SDHB should be targeting.

The Executive Director Finance and Executive Director Planning & Funding then took questions from members on the financial statements.

11.0 WORK PLAN

The Committees reviewed the DSAC/CPHAC work plan for 2015 (tab 11) and requested that actual dates be inserted in the "reporting frequency" column.

CONFIDENTIAL SESSION

At 11.40 am it was resolved that the public be excluded for the following agenda items.

General subject:	Reason for passing this resolution:	Grounds for passing the resolution:
1. Previous Minutes	As per reasons set out in previous agenda	S 34(a), Schedule 4, NZ Public Health and Disability Act 2000 – that the public conduct of this part of the meeting would be likely to result in the disclosure of information for which good reason for withholding exists under sections 9(2)(i), 9(2)(j) and 9(2)(f)(iv) of the Official Information Act 1982, that is, the withholding of the information is necessary to enable a Minister of the Crown or any Department or organisation holding the information to carry out, without prejudice or disadvantage, commercial activities and negotiations, and to maintain the constitutional convention protecting the confidentiality of advice tendered by Ministers of the Crown and officials.

General subject:	Reason for passing this resolution:	Grounds for passing the resolution:
2. 2015/16 Funder Financial Planning	To allow activities to be carried out without prejudice	As above, section 9(2)(i) and (j).

The meeting closed at 12.45 pm.

Confirmed as a correct record:

Chairperson

Date

Unconfirmed

9.1

DSAC/CPHAC Meeting, 4 February 2015 - Verbal report from Ms Sandra Cook, DSAC/CPHAC Chair

9.2

Hospital Advisory Committee Meeting, 4 February 2015 - Verbal report from Mr Tony Hill, HAC Chair

SOUTHERN DISTRICT HEALTH BOARD

Title:	CONTRACTS REGISTER		
Report to:	Southern District Health Board		
Date of Meeting:	5 February 2015		
Summary: Funding contracts signed under delegation by Executive Director Planning & Funding and Chief Executive Officer and contracts approved by Board executed since last report.			
Specific implications for consideration (financial/workforce/risk/legal etc):			
Financial:	Nil		
Workforce:	Nil		
Other:	Nil		
Document previously submitted to:	n/a		Date:
Prepared by: Sandra Boardman Executive Director Planning and Funding Date: 20/01/2014		Presented by: Sandra Boardman Executive Director Planning and Funding	
RECOMMENDATION: 1. That the Board note the attached Contracts Register.			

Southern DHB Board Meeting - Contracts Register

FUNDING ADMINISTRATION
CONTRACTS REGISTER (EXPENSES) - DECEMBER 2014

PROVIDER NAME	DESCRIPTION OF SERVICES	ANNUAL AMOUNT	CONTRACT/VARIATION END DATE	APPROVED BY
Contract Value of - \$0 - \$100,000 (Level 3)				
Aged Residential Care Facilities Variation to Agreement	Exceptional Circumstances palliative care for named individuals x 22	\$327,250.37	Various	Executive Director Planning & Funding
PACT Group Agreement	Individual Funding Agreement for Care	\$56,658.95	31.10.15	Executive Director Planning & Funding 10.11.14
Balmac Pharmacy 2011 Limited t.a Balmac Pharmacy Variation to Agreement	Pharmacy Services	\$13,875.00 (Estimate)	30.06.15	Executive Director Planning & Funding 29.10.14
Dunedin Community Care Trust Variation to Agreement	Community Residential Care for a named individuals x 2	\$35,458.11	28.02.15	Executive Director Planning & Funding
Ryman Healthcare Ltd t.a. Yvette Williams Variation to Agreement	Long Term Support - Chronic Health Conditions	\$62,688.00 (Estimate)	22.01.16	Executive Director Planning & Funding 09.12.14
Oxford Court Lifecare Ltd t.a Oxford Court Variation to Agreement	Long Term Support - Chronic Health Conditions	\$36,851.76 (Estimate)	11.01.16	Executive Director Planning & Funding 09.12.14
North Otago Asthma Society Inc - Disability Information Variation to Agreement	Disability Information (DIAS)	\$6,270.50	31.12.15	Executive Director Planning & Funding 22.12.14
Total for Level 3		\$539,052.69		
Contract Value of - \$100,000 - \$500,000 (Level 2)				
Waiau Health Trust Limited Variation to Agreement	Community Health Services Main Agreement	\$ 178,862.00	31.08.15	Executive Director Planning & Funding 09.09.14
Otago Accommodation Trust Agreement	Supportive Landlord Service	\$ 285,929.82	30.11.17	Executive Director Planning & Funding 02.09.14
Ashburn Hall Charitable Trust t.a Ashburn Clinic Variation to Agreement	Community Based Eating Disorders Service	\$ 465,000.00	30.11.17	Executive Director Planning & Funding 11.11.14
Uruuruwhenua Health Variation to Agreement	Smoking Cessation Services	\$ 199,878.00	30.06.16	Executive Director Planning & Funding 29.10.14

Southern DHB Board Meeting - Contracts Register

FUNDING ADMINISTRATION
 CONTRACTS REGISTER (EXPENSES) - DECEMBER 2014

Te Kahui Reo Whakakotahi o Te Kakakura Agreement	Kaupapa Maori NASC	\$ 200,459.67	31.10.17	Executive Director Planning & Funding 01.12.14
WellSouth Primary Health Network Variation to Agreement	Workforce Development	\$ 200,000.00	31.10.15	Executive Director Planning & Funding 22.12.14
Total for Level 2		\$ 1,530,129.49		
Contract Value of - \$500,000 - 1 Million (Level 1)				
Total for Level 1		\$ -		
Contract Value of - \$1 Million and Over (Board)				
Corstorphine Baptist Community Trust Agreement	Mental Health Services	\$ 5,192,463.60	30.09.17	Southern DHB Board 06.11.14
WellSouth Primary Health Network Variation to Agreement	Rural Premium	\$ 2,088,192.03	30.06.15	Southern DHB Board 06.11.14
Total for Board Level		\$ 7,280,655.63		

Grand Total \$ 9,349,837.81