

Appendix II

Overview of Feedback on the Proposal with Responses

Before the close of the consultation period, the DHB received 69 written submissions; 47 were from employees and unions, with a further 22 received from the community. All the submissions were considered by the DHB management, and separated into related themes – 55 feedback themes were identified.

The following table includes the theme categories, the feedback themes, and the response to each feedback theme. The table also includes a breakdown of the number of submissions that contained each feedback theme, and whether the submission was made by staff (6 sub-groupings), unions, or the wider community.

The full submissions considered are available as Appendix IV

#	Category	Feedback	Response	Number of responses							Total staff	Wider community
				Food Services	Dietitians	Other allied health	Doctors	Nurses/Midwives	Other/undefined	Union		
G1	General	General feeling that the current food service model is adequate and should not be changed for the sake of change.	Southern DHB values the food service that our staff work hard to provide to our patients. The proposal for change is not criticism of current service delivery. However, the proposal offers Southern DHB the opportunity to join a national arrangement that will deliver a high standard of food to patients, while also saving the DHB money, and reducing future cost growth.	4		1	7	1	1	1	15	
G2	General	A general concern with respect to outsourcing Food Services to a third party provider and a preference for the service to remain in-house.	A range of options were considered and consulted on in previous stages of the process, and it was determined that the national outsourcing proposal would provide the greatest quantitative and qualitative benefits to DHBs. All DHBs regularly review their services to determine the best model to deliver services. At this time, an outsourced solution, using Compass Group, is viewed as the best way of delivering the food service. In this respect, a single provider of food services will allow the DHB to control costs, while ensuring a high quality service is provided to patients. A robust performance management framework within the arrangement will ensure Compass Group is able to be held to account.	1	2		1	2		4	10	7

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				Food Services	Dietitians	Other allied health	Doctors	Nurses/Midwives	Other/undefined	Union	Total staff	Wider community
G3	General	The DHB (or DHBs collectively) should consider cost savings and revenue opportunities in the current model, rather than outsourcing food services. There is no reason that it couldn't deliver a service that is as efficient as that proposed by Compass Group (which includes a profit margin) could not be delivered by the DHB(s).	Southern DHB on an on-going basis reviews its food services operation, and is unable to match the Compass Group price on a guaranteed sustainable basis. The South Island DHBs had previously considered whether or not they could provide food services on a regional basis, but did not progress this matter. The South Island DHBs also contemplated responding to the original expression of interest but decided on view it was not a viable proposition. Suggestions and proposals submitted during the consultation process were considered. A fuller analysis of those proposals can be found in Section 5 of the DHB Food Services Consultation Summary document (see Appendix I of the Boardbook).	5				1		1	7	
G4	General	The focus on patients' needs appears to be secondary to financial concerns.	The introduction of contracted Nutrition Standards, food quality and focus on patient service is evidence of a strong drive to improve the patient experience. Compass Group will be held to these standards across the life of the contract. The contract also provides for regular reviews of the Nutrition Standards to ensure they evolve to meet dietetic best practice.	1		1	1	1		1	5	7
L1	Logistics	Concern about the ability to transport food into Otago-Southland, and within the region (including Dunedin Hospital to Wakari Hospital) when access is disrupted.	We recognise that food services is a critical service. Business continuity planning was assessed as a criterion through the evaluation process, which concluded with the selection of Compass Group. Compass Group has been able to demonstrate its ability to continue and increase its food service to the Canterbury DHB through and beyond the Canterbury earthquakes. A DHB-specific business continuity and disaster recovery plan is a requirement of the agreement. This will include the requirement to hold levels of stock within each site in the event supply is interrupted. Last minute requests could be met from this stock. Regardless of who the provider of food services to the DHB is, transportation within the region will continue to be a problem. This will be managed in a similar manner to the way in which the DHB manages it at present - with a goal to ensuring that patients receive food services. There is a requirement for storage in Invercargill as part of the contract to address local contingencies.	2	1	2	1	5		2	13	10

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				Food Services	Dietitians	Other allied health	Doctors	Nurses/Midwives	Other/undefined	Union	Total staff	Wider community
L2	Logistics	Food products should be purchased locally in order to protect the local economy and reduce food miles.	<p>Compass Group has committed to purchasing food products within New Zealand wherever possible - and expects to be able to do this for the vast majority of food purchased.</p> <p>Compass Group expects to purchase in excess of 95% of food products from within New Zealand where these products are traditionally available (eg bananas will continue to be purchased from overseas).</p> <p>Compass Group has committed to purchasing the following products locally in Otago-Southland:</p> <ul style="list-style-type: none"> • Bakery items – 95% of product from local sourced locally • Fruit Vegetables – Fruit & Vegetables will be sourced from South Island growing regions where seasonally available. • Meat – 22% of the red meat dishes proposed on the menu are made with meat locally. • Food Distribution – all grocery items are procured and delivered through a distributor with local operations. • Kitchen Equipment – Compass Group works extensively across New Zealand with a Dunedin based business to source equipment for kitchen operational requirements. <p>Compass Group expects the overall procurement of food products from Otago-Southland suppliers to increase under the national arrangement.</p>	2	2	2		2		3	11	4
L3	Logistics	Endorsement of the use of New Zealand suppliers for the majority of food products.	Noted			1				1	2	
E1	Employment	Concern about the potential reduction in job numbers, including impact on food service delivery	Compass Group will be contracted to provide a high quality food service to Southern DHB - and will need to ensure the staffing level is appropriate to provide that service. Detailed organisation design for the food service delivery model will be undertaken as part of detailed planning during the initial 3 month mobilisation period prior to Compass Group taking accountability for service delivery. A full review of the most appropriate staffing model to deliver the proposed services will be developed during the mobilisation phase. At its completion a full proposal for change will be presented and a thorough consultation will	1		2	1	1		3	8	

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			<p>commence.</p> <p>Additionally, the DHB will work with all parties, including Unions, staff, Compass and HBL to ensure that any job losses are minimised - including through redeployment back into suitable roles within the DHB, assuming agreement on the terms under which this would occur is able to be reached.</p> <p>Compass Group has a dedicated change specialist, whose role it is to support staff through the change process.</p>									
E2	Employment	Concern that current terms and conditions (including hours) will not be maintained by Compass Group	<p>Part 6A of the Employment Relations Act protects the terms and conditions of employment (including hours) of staff who choose to transfer their employment to Compass Group. Any subsequent changes to terms and conditions would need to occur either through bargaining at a national level, with the agreement of the individual, or following a consultation process.</p>	1					4	5		
E3	Employment	In considering contracting out, Southern DHB shows that it does not value its staff	<p>Southern DHB values its staff - and we recognise that a number of staff have worked in our kitchens for a long time and are very loyal to the DHB.</p> <p>Southern DHB has very close working relationships with its contract partners - and values all people who contribute to patient outcomes.</p>				1	1	2	4		
E4	Employment	Assurances should be provided that Compass Group staff will receive appropriate training and career development.	<p>Compass Group has committed to ongoing training and career development for all staff, in accordance with a training framework set out in its employment agreements. Compass Group offers a training programme for its staff that is linked to the NZQA framework.</p>		1				2	3		
E5	Employment	Concern that the current permanent workforce will become casualised	<p>Compass Group has advised that in order to deliver the proposed foodservice model there will be a clearly defined permanent roster (proposed). Within this roster, all roles required would be permanent. Casuals would be utilised when a situation arises that internal cover is exhausted and there is a need to cover ad hoc and un-planned absence at short notice. This aligns with current practice at Southern DHB.</p>	1					2	3		
E6	Employment	The Meals-on-Wheels Administrator role will be impacted by the proposal.	<p>The Meals-on-Wheels Administrator role will continue to manage the referrals and eligibility processes. As outlined in the proposal document, some other functions will be centralised through Compass Group, but this is not expected to materially impact on this role.</p>	1				1		2		

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N1	National agreement and Services governance	Concern that savings have been inaccurately calculated, and will not be able to be delivered.	The financial model used to determine benefits has been reviewed internally within HBL and externally by HBL's professional advisors. Southern DHB has also been provided with a copy of the model for review and validation. Projected benefits are based on forecast assumptions that have been agreed with HBL's Evaluation Team and Commercial Advisory Group, made up of Sector representatives from across the country. In his Independent Review, Pat Snedden noted that the benefits are "verifiable, material and potentially achievable in my judgment." The benefits set out in the business case will be tracked and audited on an ongoing basis with reports on their achievement.		1	1	1	2		3	8	4
N2	National agreement and Services governance	Concern that Compass Group will hold a national monopoly.	Legal advice has been sought on this matter, which indicated that - were a national arrangement to come into effect - this would not be a national food services monopoly. Pat Snedden's independent review states that "there is market capability of alternative service provision with adaptive capability if required".					2		4	6	
N3	National agreement and Services governance	Concern that unexpected implementation costs may not have been taken into consideration.	The financial projections include \$1.15m provision in year 1 for implementation costs which relates to: - \$840k for the costs associated with the mobilisation project team, technology implementation and related change management costs. This figure reflects SDHB's share of mobilisation costs to implement the proposed Food Services solution. Of this figure, \$360k relates to a share of national mobilisation costs, \$170k relates to mobilisation costs that are specific to Southern DHB, and a \$310k provision has been included for any redundancy costs. This redundancy provision is based on a national estimate of projected numbers, a portion of which has then been allocated to Southern DHB on the basis of population size. It has been included as a planning assumption to ensure the Business Case is robust and provides a conservative estimate of potential benefits. It should not be taken as indicative of numbers of staff who may receive redundancy compensation. - \$190k for costs associated with the management of food services during the transition period. - \$120k for Sector Implementation costs. This reflects an estimate of		2					2	4	

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			additional costs expected to be incurred by Southern DHB to implement the proposed Food Services solution. In addition to the \$1.15m there is also a Business Case and pre-mobilisation charge of \$230k, this figure reflects costs already incurred by HBL on behalf of Southern DHB to develop the Food Services Business Case for Consultation. This cost will be paid if the proposed solution goes ahead or not.									
N4	National agreement and Services governance	Concern that the financial savings will be eroded in the event that fewer than 20 DHBs become a party to the agreement.	The contract Southern DHB is proposing to join includes a mechanism which allows pricing to be varied in the event that some DHBs decide not to participate (i.e. if meal volumes are less than 100% of the Sector). Prices can only vary within a pre-determined band based on the number of participating DHBs and their meal volumes. Southern DHB is currently projecting benefits of \$7.26M over 15 years – assuming 60-70% of national Food volumes become covered by the national arrangement. These benefits could vary (up or down) depending on the number of other DHBs that choose to participate in the arrangement. Note: the three Auckland Metro DHBs plus all of Compass Group's existing customers account for 60% of volume in the Sector. Other DHBs in addition to these are also expected to join the arrangement. In his independent review of the Business Case, Pat Snedden stated that "these benefits are verifiable, material and potentially achievable in my judgement".	1	2					1	4	
N5	National agreement and Services governance	Appropriate audit mechanisms should be included in the arrangement.	The central contract management function which will be owned by the Sector, will establish an independent audit programme to monitor and report on Compass Group's performance, including food safety, quality and adherence to Key Performance Indicators. The agreement provides for financial consequences in the event agreed standards are not met. Southern DHB will retain a local contract manager to ensure local matters are able to be dealt with swiftly. Southern DHB will also play a governance role with respect to the agreement - which will include a review of audit results.		1					3	4	
N6	National agreement	Performance KPIs should ensure quality control and include	Agreed. Customer satisfaction surveys and quality control reviews have been provided for in the performance management framework.							3	3	2

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	and Services governance	independent customer satisfaction surveys.										
N7	National agreement and Services governance	Concern about the 15-year term of the agreement and the ability for DHBs to exit the arrangement within the course of that term, for example, if Compass Group fails to perform.	The contract is a 15 year agreement, with an option for DHBs to terminate at their own election after each 5 year period. If a DHB were to choose to exit the agreement, they would incur a penalty in doing so. The agreement provides for regular reviews and audits of performance, and a robust performance management framework. There is provision for DHBs to exit the agreement where Compass Group has failed in a significant and/or repeated way to meet the standards set out in the contract.	1						2	3	2
N8	National agreement and Services governance	Endorsement of the financial savings to the DHB.	Noted			1				1	2	
N9	National agreement and Services governance	The agreement and Relationship Charter should include KPIs relating to good employer obligations - including maintenance of staff terms and conditions, upskilling for workers, access to training, worker health and safety, union relations.	We recognise the importance of good employment relationships in the delivery of a high performing food service and achieve good patient outcomes. The agreement provides a set of 'good employer' obligations that Compass Group is required to adhere to.							2	2	
N10	National agreement and Services governance	Concern about ability to manage the contract to control quality and maintain projected savings.	A dedicated central contract management function, with specialist capability, will be established by HBL to undertake the central contract management function. Day-to-day operational management of the contract will remain with the DHBs. A robust performance management framework within the arrangement will ensure Compass Group is held to account, with comprehensive auditing and performance reporting requirements. Savings will be tracked centrally and regularly reported on to DHBs.							1		
N11	National agreement and Services	Concern that the DHB will be left to 'pick up the costs' after the fact.	The Food Services Agreement sets out the "Exit Activities" that Compass Group would need to undertake in the event the contract was terminated in whole or part – these activities are designed to ensure							1		

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	governance		service continuity through any exit period. This includes provision for the manner in which assets will be treated at the end of the agreement, and is designed to ensure DHBs will be able to provide the service, even with a change in supplier.										
M1	Meals-on-Wheels	Concern about food safety in the event Meals-on-Wheels are allowed to cool and then reheated. Suggestion that warnings should be placed on Meals-on-Wheels meals cautioning clients against reheating them, and training provided to volunteer drivers.	The Ministry of Health guidelines require Meals-on-Wheels providers to provide a hot meal to recipients. This is an inherent risk in the delivery of heated meals, which we will continue to manage. Meals-on-Wheels will be well labelled to warn recipients against reheating their meals. Recipients will also have the option to have frozen meals delivered to them - allowing them to heat the meal at a time that is convenient to them. Meals-on-Wheels volunteer drivers will be trained in food safety, including meal temperature. Compass Group will also provide training to volunteer drivers with respect to food safety. Southern DHB already uses frozen Meals-on-Wheels in some areas, which are accompanied by a 1-page food safety information sheet.	1	2			1	1	3	8	1	
M2	Meals-on-Wheels	Concern about the quality of meals with the move to a Cook Freeze preparation method.	Meals will continue to comply with the Ministry of Health service specification for Meals-on-Wheels, and will now also need to comply with the contracted Nutrition Standards for Meals-on-Wheels. The individual snap frozen meals proposed for Meals-on-Wheels will be prepared using the latest technology in packaging and freezing to ensure the highest quality meals are produced. Recipients will still receive a hot meal to their door (which is also a requirement of the Ministry of Health service specification). Where travel distance is beyond reasonable expectations to retain the delivered meal as hot, and in some locations where weekend meals are provided, the Meals-on-Wheels standard provides for supply of frozen meals, current practice in some DHBs. Volunteers involved in delivery will receive Food Safe training relative to meal deliveries and meals will be labelled with Food Safe instructions.	1	2			1		1	5		
M3	Meals-on-Wheels	Concern about a reduction in options for clients to make Meals-on-Wheels payments	The Compass Group proposal is based on a direct debit payment method. A careful transition process including a comprehensive communications plan is currently being developed which would ensure a smooth transition for Meals on Wheels recipients. In addition, Compass Group would be supportive with other payment options on a case by case basis.	1	2				1		4		

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M4	Meals-on-Wheels	Concern about the supply of Meals-on-Wheels to outlying locations.	Compass Group will only provide Meals-on-Wheels to locations that are currently supplied by the DHB. Provision of Meals-on-Wheels to small centres (currently undertaken by third party suppliers) will not change.		1						1	
P1	Patient meals	Concern that a change in food preparation model will result in a deterioration of patient meal quality.	Southern DHB already uses a Cook Chill preparation method for its patient meals. The contracted Nutrition Standard will ensure patients receive high quality meals that meet their nutritional needs.				2	2		3	7	2
P2	Patient meals	Endorsement of the common national standards.	Noted.	1	2	1				2	6	1
P3	Patient meals	Appropriate clinical involvement and input into determining patient dietary and meal requirements should not diminish. Interaction between clinical dietitians and the food service should continue.	Clinical involvement in these key areas will continue. Where this is delegated in current practice (for example, to nurses) this would also continue. The requirement for continuing clinical interaction with the food service is acknowledged. This is intended to continue. The detail of how this will work will be worked through during the detailed planning period as part of the Mobilisation period.		3	1				2	6	
P4	Patient meals	Menu and food service delivery needs to take into account the needs of different patient types - in particular, non-standard patient groups (eg mental health, disabled patients, paediatrics, patients with eating disorders or swallowing disorders), and needs to ensure variety for all groups. The current standard (including choice and frequency of service) should not be eroded.	Noted. We recognise that tailoring menus and food service delivery to different patient groups is critical - and this is a core part of the service delivery model. A Food and Nutrition Advisory Group made up of clinicians and food services management - including input from Southern DHB - considered nutrition and menu requirements across the patient profile, in order to develop the National Nutrition and Menu Standard. Dr Heather Spence, in her independent analysis of food service offering at Southern DHB, based on a sample of the 2 week menu concluded that the DHB current service meets some of the requirements of the national nutrition standard and that introduction of this standard would offer an improvement in elements of macro and micro nutrients and choice relative to current day. Compass Group will liaise with the DHB to ensure specific local requirements are understood.	1	2	1				1	5	
P5	Patient meals	Concern that inpatients will be fed reheated frozen meals that have been transported from	There appears to be a misunderstanding of the proposed food service model for inpatient meals. Inpatients will receive a meal that has been prepared onsite using a mixture of fresh, chilled and frozen ingredients.			1	1	1		1	4	6

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				Food Services	Dietitians	Other allied health	Doctors	Nurses/Midwives	Other/undefined	Union	Total staff	Wider community
		Auckland or Christchurch.	Common nutrition standards will ensure that patients receive a high quality meal that meets their nutritional needs. Individual frozen meals have been proposed for Meals-on-Wheels recipients only. These will be delivered hot, in accordance with the Ministry of Health specification for Meals-on-Wheels.									
P6	Patient meals	The range of therapeutic diets, as a minimum, needs to reflect current availability and patient profiles, including renal, bariatric, diabetic, paediatric, eating disorders.	Agreed. Therapeutic diets will be provided based on current practice at the seven DHBs that Compass Group currently provides food services to (including Waitemata and Counties Manukau DHBs), together with information provided on the Auckland and MidCentral therapeutic diets. The Therapeutic diet variations required at each DHB will be established as part of the detailed planning during mobilisation.	1	2	1					4	
P7	Patient meals	There needs to be greater clarity of the role of nurses and HCAs versus Catering Associates in patient meal delivery and collection, particularly in specialised wards (eg meal set up, meal selection, special diet requirements, after hours preparation of meals by nurses).	Nursing involvement is expected to remain largely the same as it is today. The involvement of nursing staff in patient meal delivery and collection will vary by ward and DHB. Through mobilisation, the best model for Catering Associate involvement on each ward will be confirmed. Where Catering Associates are deployed to support food services on wards, special training will be provided to all staff involved in the meal service.	1	1			1		1	4	
P8	Patient meals	A preference for meals to be produced and prepared locally.	As is the case at present, meal preparation includes a combination of: <ul style="list-style-type: none"> • Bulk reheating of pre-prepared meal components • Bulk preparation and cooking of meals from a combination of fresh, frozen and chilled ingredients and meal base components A single meal is likely to include multiple preparation methods – for example, bulk reheating of casserole, plus assembly of a fresh salad from pre-cut fresh vegetables plus cooking of potatoes. Under the proposed arrangement with Compass Group, there will be a higher proportion of bulk reheating of pre-prepared meal components than is currently the case. All meals will be plated and patient trays assembled on-site.			1				2	3	1
P9	Patient meals	Endorsement of the dedicated Catering Associate role.	Noted		2	1					3	

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				Food Services	Dietitians	Other allied health	Doctors	Nurses/Midwives	Other/undefined	Union	Total staff	Wider community
P10	Patient meals	Suggestion that the menu range, menu items and service method should be tested prior to implementation.	During the detailed planning period as part of Mobilisation prior to Compass Group being accountable for the food service, extensive testing and operational validation will be conducted on-site to ensure the proposed model is able to operate effectively and meets patient needs. In addition, Southern DHB will benefit from the lessons learned from the implementation of the food services model at Auckland DHB.		1					1	2	
P11	Patient meals	Endorsement of greater range of meal choices.	Noted			1					1	
P12	Patient meals	Concern that the amount of waste generated and the cost of disposal will increase.	<p>It is anticipated that the meal ordering process and food preparation will reduce the amount of food waste as patients are more likely to receive a meal that they are willing to eat. It is expected that general waste, including packaging, will decrease, as outlined in the Consultation document.</p> <p>Measurement of food waste from all sources will determine the outcomes and appropriate management practices.</p> <p>A food waste baseline will be set at the outset of the contract. A food waste audit will be carried out on all existing operations prior to mobilising and again following full operations under Compass Group to determine the baseline.</p> <p>Waste generated by food services will be collected by Compass Group and continue to be disposed of by the DHB.</p>								0	2
CA1	Cafeteria Services	Concern that the cafeteria will become open to members of the public and/or that staff will no longer be able to reheat their meals in the cafeteria.	The proposal does not include opening cafeterias to members of the public. Any decision to open cafeterias to the public would be made by the DHB separately to this process. Staff will still be able to reheat meals in the cafeterias, where they are able to do so presently and free issues will continue to be available where they are currently.				1	1		1	3	

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CG1	Compass Group	There is a concern about the trustworthiness of Compass Group as a food service provider	<p>Compass Group is currently contracted to seven DHBs, providing 44% of patient meals in New Zealand, and is in the process of mobilising its operations at Auckland DHB - and has a range of other food service clients in New Zealand. Compass has a strong record in the delivery of food services in New Zealand and abroad, servicing over 2000 hospitals globally.</p> <p>Compass Group is committed to the highest standards of business conduct. Compass Group has arrangements for the receipt, in confidence, of complaints regarding accounting, risk issues, internal controls, auditing issues and related matters. Its Audit Committee receives regular updates on bribery and fraud trends and activity in the business - and has a clear 'no tolerance' policy for fraud, dishonesty and deception.</p> <p>In operating in New Zealand, Compass Group is required to adhere to local regulations and laws, including, for example, those regarding food safety, occupational health and safety, and food standards.</p>					2		1	3	3
CG2	Compass Group	Preference for a New Zealand-owned food service provider, with experience in the Otago-Southland region.	<p>A robust procurement process was run by Health Benefits Limited on behalf of the DHBs, initially via GETS, which was open to any party to tender a proposal, including all DHBS. Two New Zealand businesses - PRI Flight Catering and Jina's World of Fresh Produce - tendered proposals as part of this process. No DHBs or DHB regions chose to respond, although the South Island Alliance did consider making a submission. These proposals did not meet the evaluation criteria.</p> <p>Compass Group has extensive operations in the Otago-Southland region.</p>		1			1			2	2
C1	Consultation Process	Insufficient information has been provided to support staff and unions to prepare their submissions	<p>Refer to summary of consultation process set out in Summary of Changes document.</p> <p>The consultation at this stage relates only to the high level proposal for Southern DHB to join a national food services arrangement - the detailed impacts on individual staff are not yet known. If the decision is made to proceed, a further detailed consultation will occur with affected staff with respect to the impact on individuals. All information about the potential impacts on individual staff members that are known at this time has been provided to staff.</p> <p>Pat Snedden, was engaged on behalf of the unions to review all</p>							3	3	

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			information (including confidential information) relating to the Business Cases and provide a report on this. His report was made available to unions and staff as part of the consultation process. Mr Snedden also made the following comment in this report: <i>"It is my observation that attention to the workforce who have had to deal with much uncertainty has provided the most challenges for all parties to manage in this process to date, and only in part due to the necessary confidentiality that surrounds tender negotiations. This also includes ensuring staff are fully engaged and fully understand the information provided. There has been considerable communication, including both regular and ad-hoc meetings between DHB and staff and unions. Despite best efforts by the DHB they have not been in a position to provide the information, in a timely manner, that staff would like in order to determine their individual futures. Compass can only provide the certainty once the SDHB has made the decision."</i>									
C2	Consultation Process	The consultation period was insufficient for full engagement with stakeholders. Communications were not sufficiently proactive or open. Too little too late.	Staff and unions have been consulted at numerous points as part of the development of this Business Case - including with respect to the Indicative Case for Change and through staff and union workshops held subsequent to that. We acknowledge that this has been a long process. The length of the consultation period was agreed between the unions and DHBs, and was extended by a further four weeks to eight weeks to allow unions to prepare an alternative proposal. A Union Advisory Group has been involved in the planning for consultation for a number of months - including the provision of prior information. Refer to summary of consultation process set out in the Summary of Changes document.						1	1		
F1	Food safety	Concern that Compass Group will not meet food safety and infection control standards.	Compass Group operates site specific Food Safety Plans that are approved by the Ministry for Primary Industries. Each applicable Compass Group site is audited annually by external food safety experts for compliance to the approved food safety plan. This is a Pass/Fail audit, which includes a high level of scrutiny, and does not include graded ratings. Any critical non-conformances are notified to the Ministry of Primary Industries. To date, Compass Group has had no			1	1		3	5	1	

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			critical non-conformances on its sites. Compass Group will develop a food safety plan for each food preparation method at each DHB, incorporating all standard DHB infection controls, and obtain approval for these plans from the Ministry of Primary Industries prior to full operations commencing. These will be audited by Telarc, an approved Ministry of Primary Industries food safety auditor. Due to the fact that Compass Group applies site-specific food safety plans at all its sites, it is already compliant with the new Food Safety Act requirements.									
H1	Healthy eating standards	The DHB should introduce healthy eating guidelines to ensure vending machines and cafeterias on SDHB sites are not promoting unhealthy food choices.	At its April meeting, the Southern DHB Board adopted a Healthy Food and Beverage Policy and Position Statement. The DHB will implement this policy over coming months. Compass Group will meet the requirements of this policy as part of the agreement.		1	1	1				3	
MM1	Menu Management System	Concern that Saffron does not have the qualities and applications that CBORD has, and that the investment in the CBORD application, processes and training will be lost.	Compass Group chose Saffron as the best menu management system for the New Zealand Health Sector, after assessing a range of options, including CBORD. Saffron will be configured to support the contract requirements for the provision of food services including the specific details of the Standard and Therapeutic diets required. Multiple diet codes can be accommodated for individual patients. The initial diet codes in Saffron have been developed from Auckland DHB's current CBORD diet codes. As part of the work being undertaken in Auckland, the existing TrendCare processes and links to CBORD are being modified to link to Saffron. A similar mapping exercise will occur here. The way in which clinicians interact with TrendCare and the menu management system (whether CBORD or Saffron) will not materially change. Training and communications on the changes from CBORD to Saffron will be provided, including demonstrations. SDHB has utilised CBORD for some time and it will be continued to be used during the mobilisation phase. The business case includes assumptions for cost of the move to Saffron. If there is any loss of value of investment in excess of business case assumptions this would	3	2	1			1	7		

#	Category	Feedback	Response	Number of responses								
				Food Services	Dietitians	Other allied health	Doctors	Nurses/Midwives	Other/undefined	Union	Total staff	Wider community
			be low compared to the ongoing annual savings gained. The proposed tablet technology is able to operate in an off-line mode, which means that where WIFI is not available, orders will still be able to be taken - and these will then sync once a WIFI connection is restored.									
MM2	Menu Management System	Concern about the ability of Catering Associates to communicate adequately with patients that have speech language impairments.	It is recognised that a spoken menu and tablet technology is not appropriate for every patient group. Where it is not appropriate for it to be deployed, a paper menu option will continue to be used. The tablets will provide the opportunity for Catering Associates to better communicate with patients who have speech language difficulties. People with speech language difficulties will be identified by TrendCare. We note some feedback indicated a misunderstanding of the way in which tablets will be used. For clarity, tablets will be used by Catering Associates, not directly by the patients. Catering Associates will receive training on interacting with different patient groups.			1					1	
MM3	Menu Management System	Endorsement of the Saffron menu management system and associated tablet technology.	Noted		1						1	
O1	Other	The food service delivery model should learn from international best practice with respect to the sustainability - including food miles, energy use, water use - and seek to minimise transportation, fossil fuel consumption using commercial imperatives.	DHBs are clear in their intention to reduce waste and energy consumption and to look at ways to make DHB facilities more environmentally sustainable and community-centric. Compass Group will partner with DHBs to achieve their sustainability and health objectives. Food miles are not currently measured by Southern DHB. A significant proportion of food products are already sourced from outside the Otago-Southland region. Within Compass Group regular reviews constantly encourage the company to challenge and rethink the way in which value is delivered to clients and consumers. There are a number of environmental benefits to be derived from the service model of today aligned to a shared vision for sustainable Food Service for tomorrow, with priorities to be agreed with DHBs. Examples that Compass Group is able to capture within their business internationally can be shared to support best practice into the New Zealand business. The proposed solution will result in a significant	1	1	3	1			2	8	7

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				Food Services	Dietitians	Other allied health	Doctors	Nurses/Midwives	Other/undefined	Union	Total staff	Wider community
			<p>reduction in deliveries by:</p> <p>1. Reducing the number of input ingredients for meals by procuring finished or prepared product, with a reduction in the number of stock keeping units (SKUs) required to be ordered to support the menu structure.</p> <p>2. Maximising the efficiencies of its delivery systems with a national standardised menu and better scheduling of delivery and production to forecast nationally. This in turn will reduce the waste that occurs when the shelf-life of opened product expires as it does not align with the multiple menu cycles currently in place. This reduction in direct Food waste also saves the associated energy and water used throughout the food production life cycle.</p> <p>In addition Compass Group will no longer be transporting product that will immediately attribute to waste – for example, vegetable peels, meat and fish trimmings, packaging which will generally find its way into landfill due to the lack of suitable composting facilities. Due to the partnership arrangements in place and the ability to work with and influence suppliers, Compass Group continues to be a leader in their field and will work together with DHB initiatives and suppliers to achieve further sustainability initiatives to the future.</p>									
O2	Other	Concern that jobs will be lost from the Otago-Southland region.	The proposal provides for the retention of the majority of the workforce in food services at the DHB. However, the proposal does presume the loss of some roles from the food service.	1	1	1		1	3	7	6	
O3	Other	Concern that Compass Group will no longer contribute to trade training and hospitality initiatives across the district, including dietetic placements for MDiet students.	Compass Group take pride in its extensive training programmes, both internally and externally. A new starter in an entry level position will be ensured a great start through Compass Group's detailed induction plan and will also have access to ongoing development training. This includes training for development through to management level, via its apprenticeship and management development programmes, underpinned by a focus on Great People – Real Opportunities. Compass Group currently supports the Mdiet programmes at Auckland, Massey and Otago Universities. This support includes lecturing in all three foodservice programmes, providing student foodservice placements and also intern and volunteer opportunities with Compass Group.		2					2		

#	Category	Feedback	Response	Number of responses								
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O4	Other	Endorsement of the reduction in waste.	Noted		1	1					2	
Q1	Quality	The food available in cafeterias and by function catering at the moment is of high quality. Concerns that price will increase, and quality and service will decrease.	There is no intention to reduce quality or range in cafeterias, noting any requirements to comply with DHB healthy eating guidelines. A range of price options will continue to be available. There is no intention to reduce quality, range or service standard provided by the function catering service. A range of price options will continue to be available.				5	1		1	7	1