

## SOUTHERN DISTRICT HEALTH BOARD

# DISABILITY SUPPORT ADVISORY COMMITTEE and COMMUNITY & PUBLIC HEALTH ADVISORY COMMITTEE

**Thursday, 27 July 2017**

commencing at the conclusion of the public  
Hospital Advisory Committee meeting

**Board Room, Level 2, Main Block,  
Wakari Hospital Campus, 371 Taieri Road, Dunedin**

## A G E N D A

*Lead Director: Liz Disney, Executive Director Planning & Funding*

### Item

1. **Apologies**
2. **Interests Register**
3. **Minutes of Previous Meeting**
4. **Matters Arising**
5. **Review of Action Sheet**
6. **Planning & Funding Report**
  - 6.1 **Planning & Funding Activity**
  - 6.2 **Public Health South Report**
7. **Financial Report**
8. **Contracts Register**

### Southern DHB Values

Kind <i>Manaakitanga</i>	Open <i>Pono</i>	Positive <i>Whaiwhakaaro</i>	Community <i>Whanaungatanga</i>
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**APOLOGIES**

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



**SOUTHERN DISTRICT HEALTH BOARD**

<b>Title:</b>	<b>INTERESTS REGISTERS</b>
<b>Report to:</b>	Disability Support and Community & Public Health Advisory Committees
<b>Date of Meeting:</b>	27 July 2017
<p><b>Summary:</b></p> <p>Commissioner and Executive Team members are required to declare any potential conflicts (pecuniary or non-pecuniary) and agree how these will be managed. A member who makes a disclosure must not take part in any decision relating to their declared interest.</p> <p>Interests declarations, and how they are to be managed, are required to be recorded in the minutes and separate interests register (s36, Schedule 3, NZ Public Health and Disability Act 2000).</p> <p><b>Changes to Interests Registers over the last month:</b></p> <ul style="list-style-type: none"> <li>▪ Nil</li> </ul>	
<b>Specific implications for consideration</b> (financial/workforce/risk/legal etc):	
<b>Financial:</b>	n/a
<b>Workforce:</b>	n/a
<b>Other:</b>	
<p><b>Prepared by:</b></p> <p>Jeanette Kloosterman Board Secretary</p> <p><b>Date:</b> 14/07/2017</p>	
<b>RECOMMENDATION:</b>	
<p><b>1. That the Interests Registers be received and noted.</b></p>	

DSAC/CPHAC Meeting - Public - Interests Register

SOUTHERN DISTRICT HEALTH BOARD  
INTERESTS REGISTER  
COMMISSIONER TEAM

Member	Date of Entry	Interest Disclosed	Nature of Potential Interest with Southern DHB	Management Approach
Kathy GRANT (Commissioner)	25.06.2015	Chair, Otago Polytechnic	Southern DHB has agreements with Otago Polytechnic for clinical placements and clinical lecturer cover.	
	25.06.2015	Director, Dunedin City Holdings Limited	Nil	
	25.06.2015	Trustee of numerous private trusts	Nil	
	25.06.2015	Consultant, Gallaway Cook Allan	Nil	
	25.06.2015	Dunedin Sinfonia Board	Nil	
	25.06.2015	Director, Dunedin City Treasury Limited	Nil	
	18.09.2016	Food Safety Specialists Ltd	Nil. Co-trustee in client trusts - no pecuniary interest.	
	18.09.2016	Director, Warrington Estate Ltd	Nil - no pecuniary interest; provide legal services to the company.	
	18.09.2016	Tall Poppy Ideas Ltd	Nil. Co-trustee in client trusts - no pecuniary interest.	
	18.09.2016	Rangiora Lineside Ltd	Nil. Co-trustee in client trusts - no pecuniary interest.	
	18.09.2016	Otaki Three Limited	Nil. Co-trustee in client trusts - no pecuniary interest.	
			<b>Spouse:</b>	
	25.06.2015	Consultant, Gallaway Cook Allan	Nil (Updated 8 June 2017)	
	25.06.2015	Chair, Slinkskins Limited	Nil	
	25.06.2015	Chair, Parkside Quarries Limited	Nil	
	25.06.2015	Director, South Link Health Services Limited	A SLH entity, Southern Clinical Network, has applied for PHO status.	Step aside from decision-making (refer Commissioner's meeting minutes 02.09.2015).
	25.06.2015	Board Member, Warbirds Over Wanaka Community Trust	Nil	
25.06.2015	Director, Warbirds Over Wanaka Limited	Nil		
25.06.2015	Director, Warbirds Over Wanaka International Airshows Limited	Nil		
25.06.2015	Board Member, Leslie Groves Home & Hospital	Leslie Groves has a contract with Southern DHB for aged care services.		
25.06.2015	Board Member, Dunedin Diocesan Trust Board	Nil		
25.06.2015	Director, Nominee companies associated with Gallaway Cook Allan	Nil		
25.06.2015	Trustee of numerous private trusts	Nil		
25.06.2015 (updated 22.04.2016)	President, Otago Racing Club Inc.	Nil		
Graham CROMBIE (Deputy Commissioner)	27.06.2015	Independent Director, Surf Life Saving New Zealand	Nil	
	25.06.2015	Chairman, Dunedin City Holdings Ltd	Nil	
	25.06.2015	Chairman, Otago Museum	Nil	
	25.06.2015	Chairman, New Zealand Genomics Ltd	Nil	

**SOUTHERN DISTRICT HEALTH BOARD  
INTERESTS REGISTER  
COMMISSIONER TEAM**

Member	Date of Entry	Interest Disclosed	Nature of Potential Interest with Southern DHB	Management Approach
	25.06.2015	Independent Chairman, Action Engineering Ltd	Nil	
	25.06.2015	Trustee, Orokonui Foundation	Nil	
	25.06.2015	Chairman, Dunedin City Treasury Ltd	Nil	
	25.06.2015	Independent Chair, Innovative Health Technologies (NZ) Ltd	Possible conflict if Southern DHB purchased this company's product.	
	25.06.2015	Associate Member, Commerce Commission	Potential conflict if complaint made against Southern DHB.	
	16.01.2017	Director, Dunedin Stadium Property Ltd (previously known as Dunedin Venues Ltd)	Nil	
	08.02.2017	Independent Chair, TANZ eCampus Ltd		
	13.03.2017	Chair, South Island Alliance Information Services		
	18.09.2016	Director and Shareholder, Innovatio Ltd	Vehicle for governance and consulting assignments. Clients listed above.	
<b>Richard THOMSON</b> (Deputy Commissioner)	13.12.2001	Managing Director, Thomson & Cessford Ltd	Thomson & Cessford Ltd is the company name for the Acquisitions Retail Chain. Southern DHB staff occasionally purchase goods for their departments from it.	
	13.12.2002	Chairperson and Trustee, Hawksbury Community Living Trust.	Hawksbury Trust runs residential homes for intellectually disabled adults in Otago and Canterbury. It does not have contracts with Southern DHB.	
	23.09.2003	Trustee, HealthCare Otago Charitable Trust	Health Care Otago Charitable Trust regularly receives grant applications from staff and departments of Southern DHB, as well as other community organisations.	
	05.02.2015	One immediate family member is an employee of Dunedin Hospital (Anaesthetic Technician)		
	07.10.2015	Southern Partnership Group	The Southern Partnership Group will have governance oversight of the CSB rebuild and its decisions may conflict with some positions agreed by the DHB and approved by the Commissioner team.	

DSAC/CPHAC Meeting - Public - Interests Register

SOUTHERN DISTRICT HEALTH BOARD  
INTERESTS REGISTER  
ADVISORY COMMITTEE MEMBERS

Committee Member	Date of Entry	Interest Disclosed	Nature of Potential Interest with Southern DHB	Management Approach
<b>Susie JOHNSTONE</b>	21.08.2015	Independent Chair, Audit & Risk Committee, Dunedin City Council	Nil	
(Consultant, Finance Audit & Risk Committee)	21.08.2015	Board Member, REANNZ (Research & Education Advanced Network New Zealand)	REANNZ is the provider of Eduroam (education roaming) wireless network. SDHB has an agreement allowing the University to deploy access points in SDHB facilities.	
	21.08.2015	Advisor to a number of primary health provider clients in rural Otago	All of the primary health provider clients in rural Otago are likely to have a contract through Southern DHB and/or the WellSouth Primary Care Network.	
	18.01.2016	Audit and Risk Committee member, Office of the Auditor-General	Audit NZ, the DHB's auditor, is a business unit of the Office of the Auditor General.	
	16.09.2016	Director, Shand Thomson Ltd	Nil	
	16.09.2016	Director, Harrison Nominees Ltd	Nil. Co-trustee in client trusts - no pecuniary interest.	
	16.09.2016	Director, Abacus ST companies.	Nil. Co-trustee in client trusts - no pecuniary interest.	
	16.09.2016	Director, Shand Thomson Nominees Ltd	Nil. Co-trustee in client trusts - no pecuniary interest.	
	16.09.2016	Director, Johnstone Afforestation Co Ltd	Nil. Co-trustee in client trusts - no pecuniary interest.	
	16.09.2016	Director, Shand Thomson Nominees (2005) Ltd	Nil. Co-trustee in client trusts - no pecuniary interest.	
	16.09.2016	Director, McCrostie Nominees Ltd	Nil. Co-trustee in client trusts - no pecuniary interest.	
		<b>Spouse is Consultant/Advisor to:</b>		
	21.08.2015	Tuapeka Community Health Co Ltd & Tuapeka Health Incorporated	Tuapeka Community Health Co Ltd & Tuapeka Health Incorporated have a contract with Southern DHB.	
	21.08.2015	Wyndham & Districts Community Rest Home Inc	Wyndham & Districts Community Rest Home Inc has a contract with Southern DHB.	
	21.08.2015	Roxburgh District Medical Services Trust	Roxburgh District Medical Services Trust has a contract with Southern DHB.	
	21.08.2015	West Otago Health Ltd & West Otago Health Trust	West Otago Health Ltd & West Otago Health Trust have a contract with Southern DHB.	
	21.08.2015	A number of primary health care providers in rural Otago	All of the primary health provider clients in rural Otago are likely to have a contract through Southern DHB and/or the WellSouth Primary Care Network.	
	21.08.2015	Director, Clutha Community Health Co. Ltd	Clutha Community Health Co. Ltd has a contract with Southern DHB.	
	26.09.2016	Director, Abacus ST companies.	Nil. Co-trustee in client trusts - no pecuniary interest.	
		<b>Daughter:</b>		
	21.08.2015	4th Year Medical School Student		
<b>Suzanne CRENGLE</b> (HAC Member)	10.10.2016	General Practitioner, Invercargill Medical Centre		
	10.10.2016	Member, Te Waipounamu Māori Leadership Group Cancer		
	10.10.2016	Executive Member, Ōraka Aparima Rūnaka		
	20.01.2017	Board Member, Royal NZ College of General Practitioners		
	20.01.2017	Member, Perinatal and Maternity Mortality Review Committee		
	20.01.2017	Two private trusts, with no interests in DHB matters		
	23.03.2017	Associate Professor, Department of Preventive and Social Medicine, University of Otago (from 1 May 2017)		
<b>Donna MATAHAERE-ATARIKI</b> (CPHAC/DSAC and IGC Member)	27.02.2014	Trustee WellSouth	Possible conflict with PHO contract funding.	
	27.02.2014	Trustee Whare Hauora Board	Possible conflict with SDHB contract funding.	
	27.02.2014	Deputy Chair, NGO Council, Ministry of Health	Nil	
	27.02.2014	Council Member, University of Otago	Possible conflict between SDHB and University of Otago.	
	27.02.2014	Chair, Ōtākou Rūnanga	Nil	
	17.06.2014	Gambling Commissioner	Nil	
	05.09.2016	Board Member and Shareholder, Arai Te Uru Whare Hauora Limited	Possible conflict when contracts with Southern DHB come up for renewal.	



DSAC/CPHAC Meeting - Public - Interests Register

SOUTHERN DISTRICT HEALTH BOARD  
INTERESTS REGISTER  
ADVISORY COMMITTEE MEMBERS

Committee Member	Date of Entry	Interest Disclosed	Nature of Potential Interest with Southern DHB	Management Approach
	05.09.2016	Board Member and Shareholder, Otākou Health Limited	Possible conflict when contracts with Southern DHB come up for renewal.	
	05.09.2016	Southern DHB, Iwi Governance Committee	Possible conflict with SDHB contract funding.	
	09.02.2017	Director and Shareholder, VIII(8) Limited	Nil	
	01.09.2016	Southern DHB, Disability and Support Advisory Committee	Possible conflict with SDHB contract funding.	
<b>Odele STEHLIN</b>	01.11.2010	Waihopai Runaka General Manager	Possible conflict when contracts with Southern DHB come up for renewal.	
Waihōpai Rūnaka – Chair IGC	01.11.2010	Waihopai Runaka Social Services Manager	Possible conflict with contract funding.	
	01.11.2010	WellSouth Iwi Governance Group	Nil	
	01.11.2010	Recognised Whānau Ora site	Nil	
	24.05.2016	Healthy Families Leadership Group member	Nil	
	23.02.2017	Te Rūnanga alternative representative for Waihopai Rūnaka on Ngai Tahu.	Nil	
<b>Sumaria BEATON</b>	27.04.2017	Southland Warm Homes Trust	Nil	
IGC - Awarua Rūnaka				
<b>Taare BRADSHAW</b>	17.03.2017	Director, Murihiku Holdings Ltd	Nil	
IGC - Hokonui Rūnaka				
<b>Victoria BRYANT</b>	06.05.2015	Charge Nurse Manager, Otago Public Health	Nil	
IGC - Puketeraki Rūnaka	06.05.2015	Member - College of Primary Nursing (NZNO)	Nil	
	06.05.2015	Member - Te Rūnanga o Ōtākou	Nil	
	06.05.2015	Member Kati Huirapa Rūnaka ki Puketeraki	Nil	
	06.05.2015	President Fire in Ice Outrigger Canoe Club	Nil	
	24.05.2017	Puketeraki representative for Te Kaika VLCA located in College Street	Possible conflict with funding in health setting.	
	24.05.2017	Member, South Island Alliance - Raising Healthy Kids	Nil	
<b>Justine CAMP</b>	31.01.2017	Research Fellow - Dunedin School of Medicine - Better Start National Science Challenge	Nil	
IGC - Moeraki Rūnaka		Member - University of Otago (UoO) Treaty of Waitangi Committee and UoO Ngai Tahu Research Consultation Committee	Nil	
		Member - Dunedin City Council - Creative Partnership Dunedin	Nil	
		Moana Moko - Māori Art Gallery/Ta Moko Studio - looking at Whānau Ora funding and other funding in health setting	Possible conflict with funding in health setting.	
		<b>Daughter is</b> a member of the Community Health Council	Nil	
<b>Terry NICHOLAS</b>	06.05.2015	Treasurer, Hokonui Rūnanga Inc.	Nil	
IGC - Hokonui Rūnaka	06.05.2015	Member, TRoNT Audit and Risk Committee	Nil	
	06.05.2015	Director, Te Waipounamu Māori Cultural Heritage Centre	Nil	
	06.05.2015	Trustee, Hokonui Rūnanga Health & Social Services Trust	Possible conflict when contracts with Southern DHB come up for renewal.	
	06.05.2015	Trustee, Ancillary Claim Trust	Nil	
	06.05.2015	Director, Hokonui Rūnanga Research and Development Ltd	Nil	
	06.05.2015	Director, Rangimanuka Ltd	Nil	
	06.05.2015	Member, Te Here Komiti	Nil	
	06.05.2015	Member, Arahua Holdings Ltd	Nil	
	06.05.2015	Member, Liquid Media Patents Ltd	Nil	
	06.05.2015	Member, Liquid Media Operations Ltd	Nil	
<b>Ann WAKEFIELD</b>	03.10.2012	Executive member of Ōraka Aparima Rūnaka Inc.	Nil	
IGC - Ōraka Aparima Rūnaka	09.02.2011	Member of Māori Advisory Committee, Southern Cross	Nil	
	03.10.2012	Te Rūnanga representative for Ōraka-Aparima Rūnaka Inc. on Ngai Tahu.	Nil	

**SOUTHERN DISTRICT HEALTH BOARD  
INTERESTS REGISTER  
EXECUTIVE LEADERSHIP TEAM**

*Management of staff conflicts of interest is covered by SDHB's Conflict of Interest Policy and Guidelines.*

<b>Employee Name</b>	<b>Date of Entry</b>	<b>Interest Disclosed</b>	<b>Nature of Potential Interest with Southern District Health Board</b>
<b>Mike COLLINS</b>	15.09.2016	Wife, NICU Nurse	
<b>Pania COOTE</b>	26.05.2016	Ngai Tahu registered.	Nil
	30.09.2011	Member, Southern Cancer Network	Nil
	30.09.2011	Member, Aotearoa New Zealand Association of Social Workers (ANZASW)	Nil
	30.09.2011	Member, SIT Social Work Committee	Nil
	29.06.2012	Member, Te Waipounamu Māori Cancer Leadership Group	Nil
	26.01.2015	National Māori Equity Group (National Screening Unit) – MEG.	Nil
	26.01.2015	SDHB Child and Youth Health Service Level Alliance Team	Nil
	19.09.2016	Shareholder (2%), Bluff Electrical 2005 Ltd	
<b>Liz DISNEY</b>	27.02.2017	Nil	
<b>Chris FLEMING</b>	25.09.2016	Lead Chief Executive for Health of Older People, both nationally and for the South Island	
	25.09.2016	Chair, South Island Alliance Leadership Team	
	25.09.2016	Lead Chief Executive South Island Palliative Care Workstream	
	25.09.2016	Lead Chief Executive South Island Child Health Workstream	

**SOUTHERN DISTRICT HEALTH BOARD  
INTERESTS REGISTER  
EXECUTIVE LEADERSHIP TEAM**

<b>Employee Name</b>	<b>Date of Entry</b>	<b>Interest Disclosed</b>	<b>Nature of Potential Interest with Southern District Health Board</b>
	25.09.2016	Deputy Chair, InterRAI NZ	
	10.02.2017	Director, South Island Shared Service Agency	Shelf company owned by South Island DHBs.
	10.02.2017	Director & Shareholder, Carlisle Hobson Properties Ltd	Nil.
<b>Lynda McCUTCHEON</b>	22.06.2012	Member of the University of Otago, School of Physiotherapy, Admissions Committee	Lead contact for University of Otago undergraduate clinical placements (Allied Health, Scientific & Technical professions) in Southern DHB.
	19.08.2015	Member of the National Directors of Allied Health	Nil
	04.07.2016	NZ Physiotherapy Board: Professional Conduct Committee (PCC) member	No perceived conflict. If complaint involves SDHB staff member or contractor, will not sit on PCC.
	18.09.2016	Shareholder, Marketing Business Ltd	Nil
<b>Nigel MILLAR</b>	04.07.2016	Member of South Island IS Alliance group	This group works on behalf of all the SI DHBs and may not align with the SDHB on occasions.
	04.07.2016	Fellow of the Royal Australasian College of Physicians	Obligations to the College may conflict on occasion where the college for example reviews training in services.
	04.07.2016	Fellow of the Royal Australasian College of Medical Administrators	Obligations to the College may conflict on occasion where the college for example reviews training in services.
	04.07.2016	NZ InterRAI Fellow	InterRAI supplies the protocols for aged care assessment in SDHB via a licence with the MoH.
	04.07.2016	Son - employed by Orion Health	Orion Health supplies Health Connect South.
	04.07.2016	Clinical Lead for HQSC Atlas of Healthcare variation	HQSC conclusions or content in the Atlas may adversely affect the SDHB.
<b>Nicola MUTCH</b>	16.03.2016	Member, International Nominations Committee, Amnesty International	Nil
		Deputy Chair, Dunedin Fringe Trust	Nil
<b>Lexie O'SHEA</b>	01.07.2007	Trustee, Gilmour Trust	Southland Hospital Trust, no perceived conflict.
<b>Dr Jim REID</b>	22.01.2014	Director of both BPAC NZ and BPAC Inc	No conflict.
	22.01.2014	Director of the NZ Formulary	No conflict.

**SOUTHERN DISTRICT HEALTH BOARD  
INTERESTS REGISTER  
EXECUTIVE LEADERSHIP TEAM**

<b>Employee Name</b>	<b>Date of Entry</b>	<b>Interest Disclosed</b>	<b>Nature of Potential Interest with Southern District Health Board</b>
	22.01.2014	Trustee of the Waitaki District Health Trust	Possible conflict in negotiation of new contract.
	22.01.2014	Employed 2/10 by the University of Otago and am now Deputy Dean of the Dunedin School of Medicine	Possible conflict in any negotiations with Dunedin School of Medicine.
	22.01.2014	Partner at Caversham Medical Centre and a Director of RMC Medical Research Ltd.	No conflict.
	19.09.2016	Director, ProHealth Holdings Ltd	No conflict. Holding company for share of Caversham Health Centre.
<b>Leanne SAMUEL</b>	01.07.2007	Trustee, Southern Health Welfare Trust	Southland Hospital Trust
	01.07.2007	Member of Community Trust of Southland Health Scholarships Panel.	Nil
	16.04.2014	Member National Lead Directors of Nursing and Nurse Executives of New Zealand.	Nil
<b>Clive SMITH</b>	31.03.2016	Nil	

## Southern District Health Board

### Minutes of the Joint Meeting of the Disability Support Advisory Committee and Community & Public Health Advisory Committee held on Wednesday, 24 May 2017, commencing at 10.30 am, in the Board Room, Southland Hospital Campus, Invercargill

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<b>Present:</b>	Mr Graham Crombie Mr Richard Thomson	Acting Commissioner Deputy Commissioner
<b>In Attendance:</b>	Mr Chris Fleming Ms Liz Disney  Mrs Lexie O'Shea Dr Nicola Mutch Mrs Leanne Samuel Mr Clive Smith Mrs Jane Wilson  Ms Jeanette Kloosterman	Chief Executive Officer Acting Executive Director Planning & Funding Deputy CEO/Chief Operating Officer Director of Strategic Communications Executive Director Nursing & Midwifery Chief Financial Officer Implementation Manager, Commissioner's Office Board Secretary

#### 1.0 WELCOME

The Acting Commissioner welcomed members of the public, including Dr Sue Crengle, to the meeting.

#### 2.0 APOLOGIES

Apologies were received from Mrs Kathy Grant, Commissioner, and Ms Donna Matahaere-Atariki, Committee Member.

#### 3.0 DECLARATION OF INTERESTS

The Interests Registers were circulated with the agenda and received at the preceding meeting of the Hospital Advisory Committee.

#### 4.0 PREVIOUS MINUTES

**Recommendation:**

**"That the minutes of the meeting held on 23 March 2017 be approved and adopted as a true and correct record."**

**Agreed**

#### 5.0 MATTERS ARISING AND REVIEW OF ACTION SHEET

The Commissioner Team reviewed the action sheet (tab 5) and the Acting Executive Director Planning & Funding gave a brief update on the Primary Options for Acute Care, Outpatients, and Long Term Conditions Projects.

## **6.0 PLANNING AND FUNDING REPORT**

### **Planning and Funding**

The Planning and Funding Report (tab 6.1) was taken as read and the Acting Executive Director Planning and Funding (EDP&F) provided the following updates.

#### **Primary Maternity**

The Primary Maternity Project report had been reviewed by the Executive Leadership Team and would be reviewed by the Finance, Audit & Risk Committee. It outlines the consultation process that has been completed to date, the outcome of that and recommendations for further engagement.

#### **Pay Equity**

The Planning & Funding Team were working through the process for the care and support workers' pay equity settlement with the Ministry of Health. Whilst this would have a positive impact on recruitment and retention of support staff in aged residential care and community support services, there would be some challenges, as parts of the workforce were not covered by the settlement.

#### **Radiology Systems Project**

Work was continuing with Central Otago Health Services Ltd (COHSL) on the implementation of the new radiology service delivery model. A plan, with agreed milestones, had been developed with the aim of putting the new model in place by 1 December 2017.

#### **Outpatients Project**

Due to its complexity, the timeline for the Outpatients Project had been revised.

#### **Recommendation:**

**"That the Planning and Funding Report be noted."**

**Agreed**

## **7.0 ANNUAL PLAN AND MĀORI HEALTH PLAN PROGRESS REPORT**

The Acting Executive Director Planning and Funding presented a progress report on the 2016/17 Southern DHB Annual Plan and Southern Māori Health Plans as at quarter three (tab 7), then took questions.

#### **Recommendation:**

**"That the Committees note the progress in Quarter Three in delivering the Southern DHB Annual Plan 2016/17 and Southern Māori Health Plan 2016/17, and the intended actions where activity is incomplete."**

**Agreed**

**8.0 FINANCIAL REPORT**

In presenting the Funder financial results for April 2017 (tab 8), the Acting Executive Director Planning and Funding commented that there were no major changes to what had been reported in previous months.

The Acting Executive Director Planning & Funding then answered questions on inter-district flows (IDFs) and pharmaceuticals.

**Recommendation:**

**“That the report be received.”**

**Agreed**

**9.0 CONTRACTS REGISTER**

The Funding contracts register for March 2017 was circulated with the agenda (tab 9) for information.

**Recommendation:**

**“That the Contracts Register be noted.”**

**Agreed**

**CONFIDENTIAL SESSION**

**At 10.55 am, it was resolved that the Disability Support and Community & Public Health Advisory Committees reconvene at the conclusion of the public excluded section of the Hospital Advisory Committee meeting and move into committee to consider the agenda item listed below.**

<i>General subject:</i>	<i>Reason for passing this resolution:</i>	<i>Grounds for passing the resolution:</i>
1. Previous Public Excluded Meeting Minutes	As set out in previous agenda.	As set out in previous agenda.

Confirmed as a true and correct record:

Commissioner: \_\_\_\_\_

Date: \_\_\_\_\_





**Southern District Health Board**  
**DISABILITY SUPPORT AND COMMUNITY & PUBLIC HEALTH ADVISORY COMMITTEES MEETING**  
**ACTION SHEET**  
**As at 12 July 2017**

5

DATE	SUBJECT	ACTION REQUIRED	BY	STATUS	EXPECTED COMPLETION DATE
22 Nov 2016	<b>Primary Maternity Services</b> (Minute item 6.0)	Draft report to be rewritten and released with a covering letter. New group to be established to develop a set of principles and recommendations.	EDP&F	The primary maternity report was released in late May. A workshop is planned for 12 July to discuss and test a set of principles and options for the configuration of primary maternity services across the Southern district.	September 2017
26 Jan 2017	<b>Urgent Care: Primary Options for Acute Care</b> (Minute item 4.0)	Pathways to enable GP access to IV antibiotics, IV fluids and biopsies to be completed by quarter three.	EDP&F	An acute demand management programme of work for 2017/18 was endorsed by the Alliance Leadership Team. It focuses on POAC, ambulance diversion, acute plans, integrated rehabilitation, and medicines reconciliation on discharge. The implementation plan will be presented to ALT in July.	August 2017
26 Jan 2017	<b>Outpatients Project</b> (Minute item 4.0)	First work stream cardiology; paediatrics being considered – progress to be reported.	EDP&F	A telehealth workshop has been planned for early July with key stakeholders. The outcome of the workshop will be to establish a system wide understanding of telehealth opportunities.	Underway
26 Jan 2017	<b>Health of Older People</b> (Minute item 4.0)	Community based wraparound service to be completed by quarter three.	EDP&F	A revised business case was presented to ALT in May, and the implementation plan was presented in June. Initial services are scheduled to commence from September.	Underway
23 Mar 2017	<b>Long Term Conditions</b> (Minute item 5.0)	Committees to be advised whether the other practices approached have confirmed their	EDP&F	Four general practices are now confirmed (Centennial, Wanaka, Mosgiel Health Centre and Bester McKay (Invercargill)).	Completed

DSAC/CPHAC Meeting - Public - Review of Action Sheet

DATE	SUBJECT	ACTION REQUIRED	BY	STATUS	EXPECTED COMPLETION DATE
		participation in the <i>Do the Right Thing</i> pilot.		Testing is underway in two practices, with the first PDSA cycles started.	

**SOUTHERN DISTRICT HEALTH BOARD**

<b>Title:</b>	<b>Planning and Funding Report</b>		
<b>Report to:</b>	Disability Support and Community & Public Health Advisory Committees		
<b>Date of Meeting:</b>	27 July 2017		
<b>Summary:</b>	Monthly report on the Planning and Funding activities and progress to date.		
<b>Specific implications for consideration</b> (financial/workforce/risk/legal etc.):			
<b>Financial:</b>	N/A		
<b>Workforce:</b>	N/A		
<b>Other:</b>	N/A		
<b>Document previously submitted to:</b>	N/A		<b>Date:</b>
<b>Approved by Chief Executive Officer:</b>	N/A		<b>Date:</b>
<b>Prepared by:</b> Planning & Funding Team  <b>Date:</b> 13 July 2017		<b>Presented by:</b> Liz Disney Acting Executive Director Planning & Funding	
<b>RECOMMENDATION:</b> <b>That the Committees note the content of this paper for the priority projects.</b>			

6.1

## **EXECUTIVE HIGHLIGHTS**

### **Aged Related Residential Care Agreements**

100% of our ARRC agreements were returned by 3 July 2017.

### **Community Pharmacy Services Agreement (CPSA)**

All 75 pharmacies signed and returned their CPSA agreements by 30 June 2017.

### **Primary Maternity Facility Contracts**

Agreement has now been reached to renew two primary maternity contracts (Central Southland Charitable Trust (Winton) and Northern Southland Health Ltd (Lumsden) until 30 September 2018.

### **University of Otago – School of Dentistry**

Agreement has been reached with the Dental School on scope and range of services to be provided in 2017/18, covering inpatient, outpatient and emergency dental services for people on low incomes.

### **Pressure Injury Prevention and Management (PIPM)**

The mandatory reporting of Pressure Injuries in Aged Care Facilities, which has been occurring since early 2016, has resulted in integrated follow up and investigation, with SDHB wound care nurses providing advice and support to facilities and SDHB investigating any wounds which originated or worsened while in secondary care. This is a good example of integration in the health system.

**SPECIFIC PROJECTS -**

<b>Priority Area</b>	<b>Aim</b> <ul style="list-style-type: none"> <li>• <b>Why?</b></li> <li>• <b>Intended benefit</b></li> </ul>	<b>Overall Approach</b>
<b>Urgent Care Network</b>	<p>To reduce the increasing burden on emergency departments and hospital admissions by patients who can be safely and appropriately treated in the community, and to ensure that patients have access to long-term clinically and financially sustainable after-hours medical care</p>	<p>An acute demand management programme of work for 2017/18 was endorsed by the Alliance Leadership Team. This builds on work done by the Urgent Care and other Networks, and focuses on starting work to meet the modified service assumption of the Detailed Services Plan - Part B. It focuses on POAC, ambulance diversion, acute plans, integrated rehabilitation, and medicines reconciliation on discharge. Preparation for implementation has commenced, governed by a Programme Team from the DHB and PHO. An implementation plan will go to ALT in July.</p>
<b>Long Term Condition Network</b>	<p>To reduce the impact of multi-morbidity on patients and our health system.</p> <p>Intended improvements include:</p> <ul style="list-style-type: none"> <li>• Better co-ordinated care and improved self-management</li> <li>• Prevent/Delay/Reduced impact of multi-morbidity</li> <li>• Targeted funding to most complex and costly patients</li> </ul>	<p>Four general practices are now confirmed (additions are Mosgiel Health Centre and Bester McKay (Invercargill)). Testing is underway in two practices, with the first PDSA cycles started. The tools to be tested are built, and preparations underway for testing with practices. Progress is still slower than planned due to limited WellSouth capacity, but June saw substantial progress.</p>
<b>Health of Older People Network</b>	<p>A District-Wide Model of Care for Older People that will improve the long term sustainability of whole of system for older people in Southern District.</p> <p>Intended benefits include:</p> <ul style="list-style-type: none"> <li>▪ Care closer to home in familiar surroundings which will support the older person to regain strength and independence</li> </ul>	<p>Overall implementation plan has been completed and the Programme Governance Group has met for the first time. Membership of this group is:</p> <ul style="list-style-type: none"> <li>• Wendy Findlay (Nursing Director, WellSouth)</li> <li>• Margaret O'Connor (Nurse Practitioner, Older Persons' Health)</li> <li>• Robert West (General Manager, Older Persons' Health)</li> </ul>

Priority Area	Aim <ul style="list-style-type: none"> <li>• <b>Why?</b></li> <li>• <b>Intended benefit</b></li> </ul>	Overall Approach
	<ul style="list-style-type: none"> <li>▪ Reduced admission to hospital (via alternative community-based care)</li> <li>▪ Patients will receive the right care and support based on a comprehensive geriatric assessment</li> <li>▪ Improved coordination between health providers</li> </ul>	<ul style="list-style-type: none"> <li>• Sharon Adler (Portfolio Manager, Older Persons' Health)</li> <li>• Karl Metzler (Gore Health CEO)</li> <li>• Support is provided by Michelle O'Brien, Alliance South Support Manager.</li> </ul> <p>Planning for the General Practice pilot is underway with services planned to commence in September 2017.</p>
<b>Radiology Systems Project</b>	<p>The clinical question that is being considered is:</p> <p><i>"How do we configure a district wide radiology system that is clinically effective, supports convenient access for patients and clinicians, best utilises existing equipment and resources and lives within the funding available"</i></p>	<p>Work continues on commissioning a new radiology model of care at Dunstan Hospital.</p> <p>Recent work has focussed on:</p> <ul style="list-style-type: none"> <li>- The steps necessary to achieve IANZ accreditation.</li> <li>- Establishing appropriate service and maintenance contracts for radiology equipment.</li> <li>- Determining specific equipment needs for x-ray and ultrasound.</li> <li>- Establishing a commissioning group that meets every three weeks to manage and enact the commissioning process.</li> </ul>
<b>Outpatients Project</b>	<p>The project has three key aims:</p> <ul style="list-style-type: none"> <li>• Review the location of outpatient services by type and specialty</li> <li>• Provide direction as to where outpatient services should be located if there was to be equitable access across the district.</li> </ul>	<p>A telehealth workshop has been planned for early July with key stakeholders. The outcome of the workshop will be to establish a system wide understanding of telehealth opportunities.</p>

Priority Area	Aim <ul style="list-style-type: none"> <li>• <b>Why?</b></li> <li>• <b>Intended benefit</b></li> </ul>	Overall Approach
	<ul style="list-style-type: none"> <li>• Explore the implications of any changes in volumes and what that would mean for current contracts.</li> </ul>	
<p><b>Raise HOPE- Growing Community Rehabilitation Services</b></p>	<p>To support more people with complex mental health needs to live and participate meaningfully in their own communities.</p>	<p>Proposed service model tabled at the June Mental Health and Addiction Network and endorsed by the Network.</p> <p>Finalising a Business Case continues to be delayed as financial information and related analysis has yet to be provided.</p>





**SOUTHERN DISTRICT HEALTH BOARD**

<b>Title:</b>	<b>PUBLIC HEALTH SERVICE REPORT</b>	
<b>Report to:</b>	Community and Public Health Advisory Committee	
<b>Date of Meeting:</b>	11 July 2017	
<b>Summary:</b> Considered in these papers are: <ul style="list-style-type: none"> <li>▪ Public Health Service Activity</li> </ul>		
<b>Specific implications for consideration</b> (financial/workforce/risk/legal etc):		
<b>Financial:</b>	n/a	
<b>Workforce:</b>	n/a	
<b>Other:</b>	n/a	
<b>Document previously submitted to:</b>	n/a	<b>Date:</b> n/a
<b>Approved by:</b>	Jenny Hanson Nurse Director, Women's, Children's, Public Health and Support Directorate	<b>Date:</b>
<b>Prepared by:</b> Lynette Finnie, Service Manager, Public Health Service Women's, Children's, Public Health and Support Directorate <b>Date:</b> 23/6/17		<b>Presented by:</b>
<b>RECOMMENDATION:</b>  <b>1. That CPHAC receives the Public Health Service Activity Report.</b>		

**PUBLIC HEALTH SERVICE REPORT TO THE SOUTHERN DHB  
Community and Public Health Advisory Committee Report  
11 July 2017**

**Social Media Promotion for Smokefree**

The Smokefree team ran a campaign called 'Fuel Your Way to Being Smokefree' during April and May on the Smokefree South Facebook page. The campaign encouraged people who smoke to contact the team via the Facebook page and ask to be referred to the Southern Stop Smoking Service. They then went into a draw to win one of four MTA vouchers. A set of 18 posts were developed to engage people in the campaign. The most popular post had a reach of over 30,000 people and there were over 161,000 views of our advertisements placed on online media (e.g. NZ Herald, The Hits). Four hundred and seventy seven people clicked onto the advertisement to be taken directly to the Smokefree South Facebook page where further information about the campaign was available.

By the end of the campaign 73 referrals had been made to the Southern Stop Smoking Service. There was a significant increase in the number of people engaged in the page, with many 'tagging' friends and family into the posts and sharing posts for wider viewing. People shared both their stop smoking stories and their challenges and what started to develop was a community of support.

We are pleased with the reach of this promotion using social media as we were able to connect with many people in the community who may not respond to other methods of engagement traditionally used.

**South Island Public Health Partnership - Public Health Service Level Alliance**

In 2016 a proposal for a Public Health Service Level Alliance under the South Island Alliance was approved. This Alliance will enable the South Island DHBs to work more effectively together and with external partners, utilising our combined resources to jointly solve problems, develop innovative solutions to public health challenges and achieve improved health and well-being for all people of the South Island. This seeks to address the lack of a collaborative, whole of system approach to tackling wicked public health problems at a regional level and build a multi-sector multi-agency alliance to build well-being in our communities. This sits comfortably with the current Government 'social investment' approach.

Currently the Alliance is in the formation phase. The Alliance membership will be drawn from across the social sector and from health, social care, education, justice, local government, non-government organisations and the commercial sector. The formation group is currently working through issues such as how to enable effective representation from diverse sectors that will be able to deliver acceptance of an alliance approach and engagement with the new ways of working.

The group is trying to establish a vision, intent and way of working. One proposal that is currently being considered is that the Alliance might seek to identify and engage with three 'wicked social problems' as priorities over its first few years. Examples of potential wicked problems discussed included:

- 'Whare ora' approach to housing. The link between housing and health and well-being is well established. This concept was to look at housing issues as a whole, not just focusing on narrow technical aspects such as retro-fitting of insulation because 'a home is more than a warm house'.
- 'Ki Uta Ki Tai' – From the mountains to the sea. A more integrated approach to managing the physical environment that recognises the impact that air and water quality and land use have on well-being.

- 'Best start in life'. Recognising the importance of early years and the lifetime costs where societies fail their next generation. This would build on a variety of existing social sector approaches but would seek better co-ordination, reduced duplication and more consistency across the South Island.

Continued development of the partnership between South Island Public Health Units will be required to ensure effective engagement in the Public Health Alliance. The proposed Alliance way of working presents challenges to the wider health sector to understand and respond to an agenda focused on generating health and well-being rather than responding to sickness, as well as to the ability of the public health workforce to exert the necessary influence within the health sector to get support for this change in approach.

Getting broad engagement across the social sector is challenging. Central government has emphasised the importance of a 'social investment' approach to tackling wider social issues. The Social Investment Unit will relaunch as the Social Investment Agency on 1 July. Engaging with that Unit/Agency as a means to boost the profile and likelihood of success of the Alliance is being considered.

A further two workshops have been proposed to further develop the concept of the Alliance vision, intent and purpose and to consider likely membership. Following this work a wider process of engagement across the social sector will be required to establish the willingness to pursue this initiative and identify the 'wicked problems' to be the initial focus of the Alliance's work.



**SOUTHERN DISTRICT HEALTH BOARD**

<b>Title:</b>	<b>FINANCIAL REPORT</b>	
<b>Report to:</b>	Disability Support and Community & Public Health Advisory Committees	
<b>Date of Meeting:</b>	27 July 2017	
<b>Summary:</b> The issues considered in this paper are: <ul style="list-style-type: none"> <li>▪ June 2017 Funds result</li> </ul>		
<b>Specific implications for consideration</b> (financial/workforce/risk/legal etc):		
<b>Financial:</b>	As set out in report.	
<b>Workforce:</b>	No specific implications	
<b>Other:</b>	n/a	
<b>Document previously submitted to:</b>	Not applicable, report submitted directly to DSAC/CPHAC	<b>Date:</b> n/a
<b>Prepared by:</b> Planning & Funding Team  <b>Date:</b> July 2017		<b>Presented by:</b> Liz Disney Acting Executive Director Planning & Funding
<b>RECOMMENDATION:</b> <b>1. That the report be received.</b>		

## FUNDER FINANCIAL REPORT – June 2017

**Financial Report for:**       **June 2017**  
**Report Prepared by:**       **Jim Smith**  
**Date:**                               **10 July 2017**

### 1. Overview

#### Results Summary

Month			Year to Date				
Actual \$' 000	Budget \$' 000	Variance \$' 000		Actual \$' 000	Budget \$' 000	Variance \$' 000	Annual Budget \$000
72,479	73,819	(1,338)	Revenue	887,603	885,822	1,781	885,822
70,407	74,579	4,172	Less Other Costs	890,015	892,380	2,365	892,380
2,073	(761)	2834	Net Surplus / (Deficit)	(2,412)	(6,557)	4,146	(6,557)
			<b>Expenses</b>				
49,447	53,514	4068	Personal Health	638,023	639,990	1,967	639,990
7,347	7,404	56	Mental Health	88,128	88,846	719	88,846
97	109	12	Public Health	1,166	1,312	146	1,312
12,420	12,452	32	Disability Support	149,642	149,050	(592)	149,050
112	116	4	Maori Health	1,262	1,388	125	1,388
983	983	0	Other	11,794	11,794	0	11,794
70,407	74,579	4172	Expenses	890,015	892,379	(2,365)	892,380

#### Summary Comment:

For June the Funder had a surplus of \$2.07m against a budget deficit of \$0.76m, which is \$2.83m favourable. Year to date (YTD) is \$4.15m favourable.

Revenue is unfavourable by \$1.34m for June due to additional electives \$1m, Inter-District Flow (IDF) wash-up impact of \$0.18m, In Between Travel (IBT) revenue of \$0.21m and refugee revenue of \$0.09m offset by Debt to Equity and Capital Charge rate change reduction of \$0.43m. Revenue is \$1.78m favourable YTD. Costs overall were favourable by \$4.72m in June and \$2.36m favourable YTD.

Revenue is favourable YTD by \$1.78m due to: an accrual for additional In Between Travel revenue to match the YTD expenditure overspend of \$2.12m, 2015/16 IBT wash-up of \$0.47m, additional Performance Management revenue of \$0.37m, 2016/17 IDF YTD wash-up of \$0.178m, extra Care Plus and VLCA (Very Low Cost Access) funding of \$0.42m and Refugee funding of \$1.14m. The extra revenue above is offset by a Capital Charge reduction of \$2.47m, due to debt to equity and rate change, with an offsetting reduction in Provider Arm expenditure. The reduction in additional electives (\$1m) is offset by additional funding received for 15/16 Health Target and 15/16 orthopaedic and general surgery electives wash-up.

Expenditure for the month is favourable to budget by \$4.71m, with the main reason being the Change Initiative Fund which is \$3.52m favourable, Pharmaceuticals \$0.58m favourable and Rest Homes \$0.36m favourable.

Expenditure YTD is \$2.36m favourable with the main reasons being "Change Initiative Provision" \$4.33m favourable, Price Adjusters and Premiums \$1.71m favourable, Palliative Care \$0.65m favourable and Residential Care Rest Homes \$1.95m favourable, offset by IDFs \$2.44m unfavourable, IBT \$1.67m unfavourable and Surgical Inpatients \$1.0m unfavourable.

## 2. Results by Grouping

The following table shows revenue and expenditure by Output Class:

	Month				Year to Date		
	Actual \$' 000	Budget \$' 000	Variance \$' 000		Actual \$' 000	Budget \$' 000	Variance \$' 000
				<b>Revenue</b>			
51,408	52,953	(1,545)	Personal Health	634,094	634,846	(1,346)	
7,370	7,361	9	Mental Health	88,259	88,332	(92)	
90	103	(13)	Public Health	1,119	1,272	(153)	
12,512	12,303	209	Disability Support	150,945	148,223	2,734	
116	116	0	Maori Health	1,392	1,392	0	
983	983	0	Funding and Governance	11,794	11,794	0	
72,479	73,819	(1,340)	Revenue total	887,603	885,822	1,781	
			<b>Expenses</b>				
49,447	53,515	4,067	Personal Health	638,023	639,990	1,966	
7,347	7,404	56	Mental Health	88,128	88,846	719	
97	109	12	Public Health	1,166	1,312	146	
12,420	12,452	32	Disability Support	149,642	149,050	(592)	
112	116	4	Maori Health	1,262	1,388	125	
983	983	0	Funding and Governance	11,794	11,794	0	
70,406	74,578	4,172	Expenses total	890,015	892,380	2,365	
			<b>Surplus (Deficit)</b>				
1961	(562)	(2,522)	Personal Health	(3,929)	(5,144)	620	
23	(43)	65	Mental Health	131	(514)	627	
(7)	(6)	(1)	Public Health	(47)	(40)	(7)	
92	(149)	241	Disability Support	1,303	(827)	2,142	
4	0	4	Maori Health	130	4	125	
0	0	0	Funding and Governance	0	0	0	
2073	(760)	2,831		(2,412)	(6,521)	3,507	

- Revenue YTD is \$1.78m favourable to budget due to additional 15/16 Electives revenue, additional IBT revenue (including 15/16 wash-up) and additional refugee funding, offset by reduction in 2017/18 electives funding wash-up.
- Personal Health payments are favourable YTD by \$1.96m due to favourable variances in "Change Initiative Provision", palliative care and price adjusters, offset by IDF wash-ups along with additional 15/16 Electives and additional refugee expenditure.
- DSS payments are unfavourable by \$0.59m and is mainly due to IBT expenditure.
- Mental Health expenditure is favourable mainly due to an over accrual in 2015/16.





**Personal Health expenditure variance notes:**

1. **Pharmaceuticals & PCT (NGO & Provider) – \$0.04m favourable YTD.**  
The budget includes \$1.15m YTD of expected savings relating to Clinical Pharmacists. The budget also includes \$0.57m reduction YTD relating to an increase in the Primary Mental Health budget in Primary Practice Services Capitated. The unfavourable variance in the PCT line is due to PD-1 Cancer treatments. June expenditure includes a credit of \$0.58m relating to GST on pharmacy rebate and is the main reason for the favourable variance in June.
2. **Management Referred Services - \$3.52m favourable YTD.**  
Change Management Initiative fund.
3. **PHO (all lines combined) - \$0.56m unfavourable YTD.**  
Due to additional Refugee expenditure of \$0.75m (revenue offset), Performance Management \$0.37m unfavourable (revenue offset), Care Plus and VLCA \$0.42m unfavourable (revenue offset). Offset by Primary Mental Health budget that was transferred from pharmaceuticals \$0.50m YTD, 15/16 year-end over accruals for Care Plus and Management fees \$0.49m favourable and Clinical Pharmacist \$0.14m favourable where there was a delayed start.
4. **Rural Support for Primary Health Providers- \$0.82m unfavourable YTD.**  
Relates to expenditure incurred where the budget is sitting in Price Adjusters and Premiums.
5. **Palliative Care - \$0.65m favourable YTD**  
Demand driven service. 2015/16 over accrual is the main reason for the year to date variance.
6. **Medical Outpatients - \$0.49m unfavourable YTD.**  
Due to PET Scan wash-up for 2015/16 being higher than June accrual and National Haemophilia expense higher than budgeted.
7. **Surgical Inpatients - \$1.03m unfavourable YTD.**  
Due to 15/16 Orthopaedic Electives and Electives Health Target funding transfer to the Provider Arm (revenue offset).
8. **Minor Personal Health - \$0.27m favourable YTD.**  
Due to St John South Island patient transport where no expenditure has been incurred.
9. **Price Adjusters and Premium - \$1.71m favourable YTD.**  
Budget includes \$1.42m YTD of rural support for Rural Trusts where expenditure has been incurred in other lines (mainly in Rural Support for Primary Health Providers). Sleepover Settlements are also \$0.20m favourable due to an over accrual in June 16.
10. **Inter District Flow Personal Health - \$2.52m unfavourable YTD**  
2015/16 wash-up higher than June 16 accrual by \$ 0.47m and PET Scan expenditure transferred to IDFs \$0.49m unfavourable YTD. The YTD wash-up for 2016/17 of \$1.21m has been included in the YTD expenditure.

## Mental Health

Mental Health June 2017	Current Month				Year to Date				Annual Budget \$(000)	Note
	Actual \$(000)	Budget \$(000)	Variance \$(000)	Variance %	Actual \$(000)	Budget \$(000)	Variance \$(000)	Variance %		
<b>Mental Health - Provider Arm</b>										
Mental Health to allocate	-	-	-	-	-	-	-	-	0	
Acute Mental Health Inpatients	1,314	1,314	-	0%	15,773	15,773	-	0%	15,773	
Sub-Acute & Long Term Mental Health	367	367	-	0%	4,401	4,401	-	0%	4,401	
Crisis Respite	2	2	-	0%	25	25	-	0%	25	
Alcohol & Other Drugs - General	-	-	-	-	-	-	-	-	0	
Methadone	95	95	-	0%	1,139	1,139	-	0%	1,139	
Dual Diagnosis - Alcohol & Other Drugs	283	283	-	0%	3,391	3,391	-	0%	3,391	
Dual Diagnosis - MH/ID	5	5	-	0%	60	60	-	0%	60	
Child & Youth Mental Health Services	583	583	-	0%	6,990	6,990	-	0%	6,990	
Forensic Services	558	558	-	0%	6,690	6,690	-	0%	6,690	
Kaupapa Maori Mental Health Services	147	147	-	0%	1,765	1,765	-	0%	1,765	
Mental Health Community Services	1,764	1,764	-	0%	21,164	21,164	-	0%	21,164	
Prison/Court Liaison	-	-	-	-	-	-	-	-	0	
Day Activity & Work Rehabilitation S	64	64	-	0%	764	764	-	0%	764	
Mental Health Funded Services for Older People	36	36	-	0%	432	432	-	0%	432	
Advocacy / Peer Support - Consumer	24	24	-	0%	292	292	-	0%	292	
Other Home Based Residential Support	58	58	-	0%	702	702	-	0%	702	
Advocacy / Peer Support - Families	11	11	-	0%	128	128	-	0%	128	
	<b>5,311</b>	<b>5,311</b>			<b>63,716</b>	<b>63,716</b>			<b>63,716</b>	
<b>Mental Health - NGO</b>										
Mental Health to allocate	-	-	-	-	-	-	-	-	0	
Crisis Respite	3	6	2 F	41%	38	70	32 F	45%	70	
Alcohol & Other Drugs - General	18	16	(3) U	(19%)	240	186	(53) U	(29%)	186	
Alcohol & Other Drugs - Child & Youth	-	3	3 F		-	36	36 F		36	
Dual Diagnosis - Alcohol & Other Drugs	38	64	26 F	41%	437	771	334 F	43%	771	11
Eating Disorder	11	11	-	0%	130	130	-	0%	130	
Maternal Mental Health	3	3	-	0%	42	42	-	0%	42	
Child & Youth Mental Health Services	444	437	(8) U	(2%)	5,300	5,240	(61) U	(1%)	5,240	
Forensic Services	-	-	-	-	-	-	-	-	0	
Kaupapa Maori Mental Health Services	6	6	-	(5%)	74	70	(4) U	(5%)	70	
Mental Health Community Services	108	101	(7) U	(7%)	1,279	1,210	(68) U	(6%)	1,210	
Day Activity & Work Rehabilitation S	116	116	-	0%	1,404	1,394	(10) U	(1%)	1,394	
Advocacy / Peer Support - Consumer	23	23	-	0%	279	280	1 F	0%	280	
Other Home Based Residential Support	340	343	3 F	1%	4,006	4,121	116 F	3%	4,121	
Advocacy / Peer Support - Families	60	70	9 F	14%	748	834	86 F	10%	834	
Community Residential Beds & Service	383	428	46 F	11%	4,814	5,140	326 F	6%	5,140	12
Minor Mental Health Expenditure	39	33	(6) U	(19%)	378	391	12 F	3%	391	
Inter District Flow Mental Health	434	434	-	0%	5,176	5,213	37 F	1%	5,213	
	<b>2,035</b>	<b>2,094</b>	<b>56 F</b>	<b>3%</b>	<b>24,411</b>	<b>25,128</b>	<b>718 F</b>	<b>3%</b>	<b>25,128</b>	
<b>Total Mental Health</b>	<b>7,346</b>	<b>7,405</b>	<b>56 F</b>	<b>1%</b>	<b>88,127</b>	<b>88,844</b>	<b>718 F</b>	<b>1%</b>	<b>88,844</b>	

**Mental Health expenditure variance notes:****11. Dual Diagnosis – Alcohol & Other Drugs - \$0.33m favourable YTD**

Due to Downie Stewart Integrated contract now paid via Ministry of Health.

**12. Community Residential Beds and Services - \$0.32m favourable YTD.**

This is mainly due a one-off reduction due to a correction for a May 15 accrual that was not reversed. Expenditure is also demand driven and is favourable YTD.

**Disability Support Services**

DSS June 2017	Current Month				Year to Date				Annual	Variance Note
	Actual \$(000)	Budget \$(000)	Variance \$(000)	Variance %	Actual \$(000)	Budget \$(000)	Variance \$(000)	Variance %	Budget \$(000)	
<b>Disability Support Services - Provider Arm</b>										
AT & R (Assessment, Treatment and Re Information and Advisory)	1,894	1,894	-	0%	22,731	22,731	-	0%	22,731	
Needs Assessment	121	121	-	0%	1,457	1,457	-	0%	1,457	
Service Co-ordination	20	20	-	0%	236	236	-	0%	236	
Home Support	-	-	-	0%	-	-	-	0%	0	
Carer Support	-	-	-	0%	-	-	-	0%	0	
Residential Care: Rest Homes	-	-	-	0%	-	-	-	0%	0	
Residential Care: Loans Adjustment	-	-	-	0%	-	-	-	0%	0	
Long Term Chronic Conditions	-	-	-	0%	-	-	-	0%	0	
Residential Care: Hospitals	-	-	-	0%	-	-	-	0%	0	
Ageing in Place	-	-	-	0%	-	-	-	0%	0	
Environmental Support Services	2	2	-	0%	27	27	-	0%	27	
Day Programmes	-	-	-	0%	-	-	-	0%	0	
Expenditure to Attend Treatment ETAT	-	-	-	0%	-	-	-	0%	0	
Minor Disability Support Expenditure	-	-	-	0%	102	102	-	0%	102	
Respite Care	-	-	-	0%	-	-	-	0%	0	
Child Development	90	90	-	0%	1,075	1,075	-	0%	1,075	
Community Health Services & Support	21	21	-	0%	253	253	-	0%	253	
	<b>2,148</b>	<b>2,148</b>	<b>-</b>	<b>0%</b>	<b>25,881</b>	<b>25,881</b>	<b>-</b>	<b>0%</b>	<b>25,881</b>	
<b>Disability Support Services - NGO</b>										
AT & R (Assessment, Treatment and Re Information and Advisory)	346	345	(1) U	(0%)	4,144	4,136	(7) U	(0%)	4,136	
Needs Assessment	11	12	1 F	11%	130	145	16 F	11%	145	
Service Co-ordination	20	20	-	2%	235	241	6 F	3%	241	
Home Support	-	-	-	0%	(1)	-	1 F	0%	0	
Carer Support	1,846	1,761	(85) U	(5%)	23,091	21,423	(1,668) U	(8%)	21,423	13
Residential Care: Rest Homes	173	132	(41) U	(31%)	1,840	1,588	(253) U	(16%)	1,588	
Residential Care: Loans Adjustment	3,020	3,346	326 F	10%	37,505	39,451	1,946 F	5%	39,451	14
Long Term Chronic Conditions	(25)	(23)	2 F	(7%)	(204)	(276)	(72) U	26%	-276	
Residential Care: Hospitals	8	-	(8) U	0%	63	-	(63) U	0%	0	
Environmental Support Services	4,307	4,114	(192) U	(5%)	50,214	49,269	(945) U	(2%)	49,269	15
Day Programmes	6	9	2 F	27%	83	105	22 F	21%	105	
Minor Disability Support Expenditure	27	56	29 F	52%	468	673	205 F	30%	673	
Respite Care	14	13	(1) U	(10%)	106	156	50 F	32%	156	
Child Development	199	129	(69) U	(54%)	1,630	1,552	(78) U	(5%)	1,552	
Community Health Services & Support	-	-	-	0%	-	-	-	0%	0	
Inter District Flow Disability Support	56	60	4 F	6%	526	720	194 F	27%	720	
	267	332	65 F	20%	3,933	3,986	53 F	1%	3,986	
	<b>10,275</b>	<b>10,306</b>	<b>32 F</b>	<b>0%</b>	<b>123,763</b>	<b>123,169</b>	<b>(593) U</b>	<b>(0%)</b>	<b>123,169</b>	
<b>Total Disability Support Services</b>	<b>12,423</b>	<b>12,454</b>	<b>32 F</b>	<b>0%</b>	<b>149,644</b>	<b>149,050</b>	<b>(593) U</b>	<b>(0%)</b>	<b>149,050</b>	

**Disability Support Services expenditure variance notes;**

- 13. Home Support** - \$1.67m unfavourable YTD.  
IBT expenditure over budget, offset by additional revenue.
- 14. Residential Care Rest Homes** - \$1.94m favourable YTD.  
Mainly due to volume variance on forecasts.
- 15. Residential Care Hospitals** - \$0.94m unfavourable YTD.  
Mainly due to volume variance on forecasts.

**Public Health**

Public Health June 2017	Current Month				Year to Date				Annual	Variance Note
	Actual \$(000)	Budget \$(000)	Variance \$(000)	Variance %	Actual \$(000)	Budget \$(000)	Variance \$(000)	Variance %	Budget \$(000)	
<b>Public Health - Provider Arm</b>										
Alcohol & Drug	-	-	0 F	0%	-	-	0 F	0%		0
Communicable Diseases	4	4	0 F	0%	44	44	0 F	0%		44
Mental Health	-	11	11 F	100%	12	136	125 F	91%		136
Screening Programmes	-	-	0 F	0%	-	-	0 F	0%		0
Nutrition and Physical Activity	-	-	0 F	0%	-	-	0 F	0%		0
Physical Environment	-	-	0 F	0%	-	-	0 F	0%		0
Public Health Infrastructure	-	-	0 F	0%	-	-	0 F	0%		0
Sexual Health	-	-	0 F	0%	-	-	0 F	0%		0
Social Environments	-	-	0 F	0%	-	-	0 F	0%		0
Tobacco Control	34	34	0 F	0%	408	408	0 F	0%		408
	<b>38</b>	<b>49</b>	<b>11 F</b>	<b>22%</b>	<b>464</b>	<b>588</b>	<b>125 F</b>	<b>21%</b>		<b>588</b>
<b>Public Health - NGO</b>										
Mental Health	15	4	(11) U	73%	168	43	(124) U	288%		
Nutrition and Physical Activity	37	37	0 F	0%	454	450	(5) U	(1%)		450
Physical Environment	-	-	0 F	0%	-	-	0 F	0%		0
Public Health Infrastructure	-	-	0 F	0%	-	-	0 F	0%		0
Sexual Health	-	-	0 F	0%	-	-	0 F	0%		0
Social Environments	-	-	0 F	0%	-	-	0 F	0%		0
Tobacco Control	7	19	13 F	65%	80	231	151 F	65%		231
Well Child Promotion	-	-	0 F	0%	-	-	0 F	0%		0
	<b>59</b>	<b>60</b>	<b>2 F</b>	<b>3%</b>	<b>702</b>	<b>724</b>	<b>22 F</b>	<b>3%</b>		<b>681</b>
<b>Total Public Health</b>	<b>97</b>	<b>109</b>	<b>13 F</b>	<b>12%</b>	<b>1,166</b>	<b>1,312</b>	<b>147 F</b>	<b>11%</b>		<b>1,269</b>

**Public Health expenditure variance notes:**

YTD favourable variance in Tobacco Control is offset by a revenue reduction.

**Maori Health Expenditure**

Maori Health June 2017	Current Month				Year to Date				Annual	Variance Note
	Actual \$(000)	Budget \$(000)	Variance \$(000)	Variance %	Actual \$(000)	Budget \$(000)	Variance \$(000)	Variance %	Budget \$(000)	
<b>Maori Health - Provider Arm</b>										
Maori Service development	16	16	0 F	0%	192	192	0 F	0%		192
Maori Provider Assistance Infrastructure	-	-	0 F	0%	-	-	0 F	0%		
Maori Workforce Development	-	-	0 F	0%	-	-	0 F	0%		
Minor Maori Health Expenditure	-	-	0 F	0%	-	-	0 F	0%		
Whanau Ora Services	8	8	0 F	0%	96	96	0 F	0%		96
<b>Maori Health - Provider Arm Total</b>	<b>24</b>	<b>24</b>	<b>0 F</b>	<b>0%</b>	<b>288</b>	<b>288</b>	<b>0 F</b>	<b>0%</b>		<b>288</b>
<b>Maori Health - NGO</b>										
Maori Service development	20	23	3 F	13%	243	280	37 F	13%		281
Maori Provider Assistance Infrastructure	-	-	0 F	0%	-	-	0 F	0%		
Maori Workforce Development	-	-	0 F	0%	-	-	0 F	0%		
Minor Maori Health Expenditure	-	-	0 F	0%	-	-	0 F	0%		
Whanau Ora Services	68	68	0 F	0%	729	818	89 F	11%		819
<b>Maori Health - NGO Total</b>	<b>88</b>	<b>91</b>	<b>3 F</b>	<b>3%</b>	<b>972</b>	<b>1,098</b>	<b>126 F</b>	<b>11%</b>		<b>1,100</b>
<b>Total Maori Health</b>	<b>112</b>	<b>115</b>	<b>3 F</b>	<b>5%</b>	<b>1,260</b>	<b>1,386</b>	<b>126 F</b>	<b>9%</b>		<b>1,388</b>

**Maori Health Services expenditure variance notes:**

The Whanau Ora Services variance is due to an accrual for a contract for Feb-July 2016. The service was not provided for that period.

**SOUTHERN DISTRICT HEALTH BOARD**

<b>Title:</b>	<b>CONTRACTS REGISTER</b>	
<b>Report to:</b>	Community & Public Health and Disability Support Advisory Committees	
<b>Date of Meeting:</b>	27 July 2017	
<b>Summary:</b> Funding contracts signed under delegation by Executive Director Planning & Funding and Chief Executive Officer and contracts approved by the Commissioner executed since last report.		
<b>Specific implications for consideration</b> (financial/workforce/risk/legal etc):		
<b>Financial:</b>	Nil	
<b>Workforce:</b>	Nil	
<b>Other:</b>	Nil	
<b>Document previously submitted to:</b>	n/a	<b>Date:</b> n/a
<b>Prepared by:</b> Planning and Funding Staff  <b>Date:</b> July 2017		<b>Presented by:</b> Liz Disney Acting Executive Director Planning and Funding
<b>RECOMMENDATION:</b> <b>1. That the Committees note the attached Contracts Register.</b>		

DSAC/CPHAC Meeting - Public - Contracts Register  
**FUNDING ADMINISTRATION**  
**CONTRACTS REGISTER (EXPENSES) MAY-JUNE 2017**

PROVIDER NAME	DESCRIPTION OF SERVICES	ANNUAL AMOUNT	CONTRACT/VARIATION END DATE	APPROVED BY
<b>Contract Value of - \$0 - \$100,000 (Level 3)</b>				
St Clair Park Residential Centre Variation to Agreement	Residential Long Term Care	\$1,661.92	23.02.17	Acting EDP&F 05.04.17
Michael Jameson Variation to Agreement	Endodontic Treatment	\$9,644.22	30.06.18	Acting EDP&F 05.04.17
McGlynn Homes Ltd - Variation to Agreement	LTS-CHC - Community Residential Support Services for NHI BAN2715	\$62,885.85 (Total Contract Value \$125,771.70)	30.04.19	Acting EDP&F 05.04.17
Lake Dunstan Pharmacy Ltd New Agreement	Community Pharmacy Services Agreement	Demand Driven	30.06.17	Acting EDP&F 21.03.17
NZ Family Planning Association Inc - Variation to Agreement	HPV Service	Demand Driven - Variation to eligibility clause only	Evergreen	Acting EDP&F 21.03.17
WellSouth Primary Health Network New Letter of Agreement	LTC Risk Assessment & Self Management Tools	\$50,465.00	30.06.17	Acting EDP&F 05.04.17
Babington's Pharmacy Ltd Variation to Agreement	Addition of Clozapine Services Purchase Unit	Demand Driven	30.06.17	Acting EDP&F 02-May-17
Kiwi Elderly Care Limited t-a Kimberley Rest Home Variation to Agreement	Long Term Support-Chronic Health Conditions	\$8,236.39	03.08.17	Acting EDP&F 02-May-17
Glenhays Limited Assignment from North & South No. 1 Ltd	Age Related Respite Care - Southanjer Rest Home	\$23,568.86 (Estimated p.a.)	03.08.20	Acting EDP&F 02.05.17

DSAC/CPHAC Meeting - Public - Contracts Register  
**FUNDING ADMINISTRATION**  
**CONTRACTS REGISTER (EXPENSES) MAY-JUNE 2017**

Glenhays Limited Assignment from North & South No. 1 Ltd	Age Related Respite Care - Northanjer Rest Home	Demand Driven	03.08.20	Acting EDP&F 02.05.17
Windsor Pharmacy (2009) Ltd Variation to Agreement	Community Pharmacy Agreement - addition of Special Foods Purchase Unit	Demand Driven	30-Jun-17	EDP&F 23.11.16
The Interchurch Council for Hospital Chaplaincy New Agreement	Chaplaincy Services	\$38,961.00 (Total Contract Value \$78312.00)	30.06.18	Acting EDP&F 29.03.17
Reed Street Healthcare Limited Variation to Agreement	Short Term Palliative	\$7,349.10 Total Contract Value \$10,132.85	25.07.17	Acting EDP&F 15.05.17
Student Health Otago Polytechnic Variation to Agreement	Dunedin After Hours (Overnight) Primary Care Funding	\$2,256.00	31.12.16	EDP&F 13.01.16
WellSouth Primary Health Network New Service Schedule	Community Pharmacy Portal in Healthone	\$50,861.00	30.06.17	Acting EDP&F 15.05.17
Albany Rest Home (2004) Ltd Variation to Agreement	Long Term Support-Chronic Health Conditions	\$5,000.00 (Estimated p.a.)	03.08.20	Acting EDP&F 02.06.17
Waiau Health Trust New Agreement	Maternity Support Services	\$46,000.00	31.03.17	Acting EDP&F 15.05.17
Fiordland Medical Practice Variation to Agreement	Ambulatory Integrated Medical Services	\$12,541.25 (Total Contract Value \$25,082.50)	30.09.18	EDP&F 23.12.16
<b>Total for Level 3</b>		<b>\$ 280,469.59</b>		

DSAC/CPHAC Meeting - Public - Contracts Register  
**FUNDING ADMINISTRATION**  
**CONTRACTS REGISTER (EXPENSES) MAY-JUNE 2017**

<b>Contract Value of - \$100,000 - \$500,000 (Level 2)</b>				
Glenhays Limited Assignment from North & South No. 1 Ltd	Aged Residential Care - Northanjer Rest Home	\$277,241.60 (Estimated p.a.)	03.08.20	Acting EDP&F 02.05.17
International Waste Limited - Variation to Agreement	Collection & Disposal of unused pharmaceuticals and sharps	\$120,737.60 (Total Contract Value \$241,475.20)	30.06.19	Acting EDP&F 15.05.17
Creative Arts Trust Variation to Agreement	Arts Based Day Activities	\$343,775.97	31.05.18	Acting EDP&F 12.06.17
<b>Total for Level 2</b>		<b>\$ 621,017.57</b>		
<b>Contract Value of - \$500,000 - 1 Million (Level 1)</b>				
Glenhays Limited Assignment from North & South No. 1 Ltd	Aged Residential Care - Southanjer Rest Home	\$579,209.33 (Estimated p.a.)	03.08.20	CEO 08.05.17
Otago Mental Health Support Trust Variation to Agreement	Consumer Advocacy & Development Network	\$267,095.01 (Total contract value \$801,285.03)	30.06.20	CEO 25.05.17
St Clair Park Residential Centre Ltd Variation to Agreement	Residential Long Term Care	\$504,561.40	30.06.18	CEO 06.06.17
<b>Total for Level 1</b>		<b>\$ 1,350,865.74</b>		
<b>Contract Value of - \$1 Million and Over (Commissioner)</b>				
University of Otago - School of Dentistry	Emergency Dental Treatments	\$362,151.93	30.06.17	Commissioner
Otago Community Hospice Trust Variation to Agreement	Palliative Care Services	\$3,588,314.81 (Total Contract Value \$7,176,629.62)	30.06.19	Commissioner 21.06.17
<b>Total for Board Level</b>		<b>\$ 3,950,466.74</b>		

**Grand Total \$ 6,202,819.64**



**Closed Session:**

**RESOLUTION:**

That the Disability Support and Community & Public Health Advisory Committees reconvene at the conclusion of the public excluded section of the Hospital Advisory Committee meeting and move into committee to consider 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 34, Schedule 4 of the NZ Public Health and Disability Act (NZPHA) 2000 for the passing of this resolution are as follows:

<i>General subject:</i>	<i>Reason for passing this resolution:</i>	<i>Grounds for passing the resolution:</i>
1. Previous Public Excluded Meeting Minutes	As set out in previous agenda.	As set out in previous agenda.