SOUTHERN DISTRICT HEALTH BOARD HOSPITAL ADVISORY COMMITTEE

Wednesday, 25 May 2016, 1.00 pm

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

AGENDA

Lead Director: Lexie O'Shea

Item

- 1. Apologies
- 2. Interests Register
- 3. Review of Terms of Reference

4. Provider Arm Monitoring and Performance Reports

- 4.1 Chief Operating Officer Report
- 4.2 Key Performance Indicators
- 4.3 Financial Performance Summary

Closed Session:

RESOLUTION:

That the Hospital Advisory Committee reconvene at the conclusion of the public Disability Support and Community & Public Health Advisory Committees 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:

General subject:	<i>Reason for passing this resolution:</i>	<i>Grounds for passing the resolution:</i>
1. Serious Adverse Events	To protect information where the making available of the information would be likely to prejudice the supply of similar information and it is in the public interest that such information continue to be supplied.	Section 9(2)(ba) of the Official Information Act (OIA) 1982.
2. Emerging and Current Issues	To allow activities and negotiations to be carried on without prejudice or disadvantage.	Sections 9(2)(i) and 9(2)(j) of the OIA.
3. Radiology Update	To allow activities and negotiations (including commercial and industrial negotiations) to be carried on without prejudice or disadvantage.	Section 9(2)(j) of the OIA.
4. Medical Assessment and Planning Unit	To allow activities to be carried on without prejudice or disadvantage.	Section 9(2)(j) of the OIA.
5. Urgent Interim Works Programme	To allow activities and negotiations (including commercial negotiations) to be carried on without prejudice or disadvantage.	Sections 9(2)(i) and 9(2)(j) of the OIA.
6. Recommended Building Assessments for Redevelopment of Dunedin Hospital	,,,,,,, -	Sections 9(2)(i) and 9(2)(j) of the OIA.

APOLOGIES

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

SOUTHERN DISTRICT HEALTH BOARD

Title:	INTERESTS REGISTERS
Report to:	Hospital Advisory Committee
Date of Meeting:	25 May 2016

Summary:

Committee 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.

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).

Changes to Interests Registers since the last meeting:

Nil

Specific implications for consideration (financial/workforce/risk/legal etc):							
Financial:	n/a	n/a					
Workforce:	n/a						
Other:							
Document previously submitted to:		Commissioner's Meeting	Date: 22/04/16				
Prepared by:							
Jeanette Kloos Board Secreta							
Date: 13/05/16							
RECOMMEND	ATION:						
1. That th	1. That the Interests Registers be received and noted.						

SOUTHERN DISTRICT HEALTH BOARD INTERESTS REGISTER COMMISIONER TEAM CONSULTANT/CHAIR FAR COMMITTEE

Board Member	Date of Entry	Interest Disclosed	Nature of Potential Interest with Southern DHB	Management Approach
Kathy GRANT	25.06.2015	Chair, Otago Polytechnic	Southern DHB has agreements with Otago Polytechnic for clinical placements and clinical lecturer cover.	
(Commissioner)	25.06.2015	Director, Dunedin International Airport Limited- (Ended 31.10.2015)	Nil	
	25.06.2015	Director, Dunedin City Holdings Limited	Nil	
	25.06.2015	Trustee, Sport Otago	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	
	25.06.2015	Director, Dunedin Venues Limited	Nil	
		Spouse:		
	25.06.2015	Partner, Gallaway Cook Allan	Nil	
	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	27.06.2015	Independent Director, Surf Life Saving New Zealand	Nil	
(Deputy Commissioner)	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	
	25.06.2015	Independent Chairman, Action Engineering Ltd	Nil	
	25.06.2015	Trustee, Arai Te Uru Kokiri Centre - DELETED 02.09.2015	n/a	
	25.06.2015	Trustee, Orokonui Foundation	Nil	

SOUTHERN DISTRICT HEALTH BOARD INTERESTS REGISTER COMMISIONER TEAM CONSULTANT/CHAIR FAR COMMITTEE

Board Member	Date of Entry	Interest Disclosed	Nature of Potential Interest with Southern DHB	Management Approach
	25.06.2015	Chairman, Dunedin City Treasury Ltd	Nil	
	25.06.2015	Chairman, Dunedin Venues Ltd	Nil	
	25.06.2015	Independent Chair, Innovative Health Technologies (NZ) Ltd	company's product.	
	25.06.2015	Associate Member, Commerce Commission	Potential conflict if complaint made against Southern DHB.	
	23.11.2015	Director, Dunedin Venues Management Ltd - DELETED 26.02.2016	Nil	
Angela PITCHFORD Deputy Commissioner)	03.08.2015	National Clinical Director of Emergency Department Services, Ministry of Health (2/10ths).	Target Champion for `Shorter Stays in Emergency Departments' Health Target	
Richard THOMSON	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.	
	29.03.2010	-Chairman, Composite Retail Group (Removed 21.12.2015)	May have some stores that deal with Southern DHB.	
	06.04.2011	Councillor, Dunedin City Council		
	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.	
Susie Johnstone	21.08.2015	Independent Chair, Audit & Risk Committee, Dunedin City Council	Nil	
Consultant, Finance udit & Risk Committee)	21.08.2015	Trustee, Community Trust of Otago	Southern DHB may apply for funding.	
	21.08.2015	Board Member, REANNZ (Research & Education Advanced Network New Zealand)	Nil	
	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	Nil	

SOUTHERN DISTRICT HEALTH BOARD INTERESTS REGISTER COMMISIONER TEAM CONSULTANT/CHAIR FAR COMMITTEE

Board Member	Date of Entry	Interest Disclosed	Nature of Potential Interest with Southern DHB	Management Approach
		Spouse is Consultant/Advisor to:		
	71 08 7015		Tuapeka Community Health Co Ltd & Tuapeka Health Incorporated have a contract with Southern DHB.	
	21.08.2015	21.08.2015 Wyndham & Districts Community Rest Home Inc Wyndham & Districts Community Rest Home 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 have a contract with Southern DHB.	
	21.08.2015	A number of primary health care providers in rural	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 (Jutha (Ommunity Health (O. 1td	Clutha Community Health Co. Ltd has a contract with Southern DHB.	
		Daughter:		
	21.08.2015	3 rd Year Medical School Student		

SOUTHERN DISTRICT HEALTH BOARD INTERESTS REGISTER EXECUTIVE MANAGEMENT TEAM

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

Employee Name Date of Entry		Interest Disclosed	Nature of Potential Interest with Southern District Health Board			
Sandra BOARDMAN	07.02.2014	Nil				
Pania COOTE	30.09.2011	Affiliation to Awarua, Puketeraki and Moeraki Rūnaka	Possible conflict when contract with Southern DHB comes up for renewal.			
	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			
29.06.201 26.01.201		Member, Te Waipounamu Māori Cancer Leadership Group	Nil			
		National Māori Equity Group (National Screening Unit) - MEG.	Nil			
	26.01.2015	SDHB Child and Youth Health Service Level Alliance Team	Nil			
	26.01.2015	South Island DHBs Medical Diagnostic Laboratory Steering Group.	Nil			
	26.01.2015	Various SDHB operational Advisory Committees	Nil			
Richard BUNTON	17.03.2004	Managing Director of Rockburn Wines Ltd	The only potential conflict would be if the Southern DHB decided to use this product for Southern DHB functions.			
	17.03.2004	Director of Mainland Cardiothoracic Associates Ltd	This company holds the Southern DHB contract for publicly funded Cardiac Surgery. Potential conflict exists in the renegotiation of this contract.			
	17.03.2004	Director of the Southern Cardiothoracic Institute Ltd	This company provides private cardiological services to Otago and Southland. A potential conflict would exist if the Southern DHB were to contract with this company.			
	17.03.2004	Director of Wholehearted Ltd	This company is one used for personal trading and apart from issues raised in second line above no conflict exists.			
	22.06.2012	Chairman, Board of Cardiothoracic Surgery, RACS	No conflict.			

SOUTHERN DISTRICT HEALTH BOARD INTERESTS REGISTER EXECUTIVE MANAGEMENT TEAM

Employee Name	Date of Entry	Interest Disclosed	Nature of Potential Interest with Southern District Health Board			
	29.04.2010	Trustee, Dunedin Heart Unit Trust	No conflict.			
	29.04.2010	Chairman, Dunedin Basic Medical Sciences Trust	No conflict.			
Carole HEATLY	11.02.2014	Trustee, Southern Health Welfare Trust	Southland Hospital Trust.			
Wayne LEACH	14.10.2015	Nil				
Lynda McCUTHEON	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			
Nigel MILLAR		ТВА				
Nicola MUTCH	16.03.2016	Member, International Nominations Committee, Amnesty International	Nil			
		Trustee, Blueskin Resilient Communities Trust	Nil			
		Deputy Chair, Dunedin Fringe Trust	Nil			
Lexie O'SHEA	01.07.2007	Trustee, Gilmour Trust	Southland Hospital Trust, no perceived conflict.			
Dr Jim REID	22.01.2014	Director of both BPAC NZ and BPAC Inc	No conflict.			
		Director of the NZ Formulary	No conflict.			
		Trustee of the Waitaki District Health Trust	Possible conflict in negotiation of new contract.			
		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.			
		Partner at Caversham Medical Centre and a Director of RMC Medical Research Ltd.	No conflict.			

SOUTHERN DISTRICT HEALTH BOARD INTERESTS REGISTER EXECUTIVE MANAGEMENT TEAM

Employee Name	Date of Entry	Interest Disclosed	Nature of Potential Interest with Southern District Health Board
Leanne SAMUEL	01.07.2007	Trustee, Southern Health Welfare Trust	Southland Hospital Trust
	01.07.2007	Member of Community Trust of Southland Health Scholarships Panel. Member National Lead Directors of Nursing	Nil Nil
Clive SMITH	31.03.2016	Nil	

SOUTHERN DISTRICT HEALTH BOARD

Title:		Terms of Reference	e Review	
Report to:		Hospital Advisory Cor	nmittee	
Date of Meet	ing:	25 May 2016		
Summary: The Terms of Reference (ToR) for the Hospital Advisory and modified in November 2014. Minor amendments ar Commissioner's appointment.				
Specific impl	ications	s for consideration ((financial/workforce/r	isk/legal etc):
Financial:	N/A			
Workforce:	N/A			
Other:	N/A			
Document pr submitted to		ly		Date:
Approved by Executive Off				Date:
Prepared by:		I	Presented by:	
Jeanette Kloosterman Board Secretary		Lexie O'Shea Chief Operating Officer		
Date: 13.05.2016				
RECOMMENDATION: That the Commissioner approve the amended terms of reference for			of reference for the	
Hospital Advi	isory Co	ommittee.		



HOSPITAL ADVISORY COMMITTEE (HAC)

Terms of Reference

Accountability

The Hospital Advisory Committee is constituted by section 36, part 3 of The New Zealand Public Health and Disability Act 2000 (The Act).

The procedures of the Committee shall also comply with Schedule 4 of the Act.

The <u>C</u>eommittee is to further comply with the standing orders of the Southern DHB which may not be inconsistent with the Act.

Function and Scope

The statutory functions of HAC are to:

- 1) Monitor the financial and operational performance of the hospitals (and related services) of the DHB.
- 2) Assess strategic issues relating to the provision of hospital services by or through the DHB.
- 3) Give the <u>Board Commissioner</u> advice and recommendations on that monitoring and that assessment.

Responsibilities

To give advice and recommendations to the **Board-Commissioner** on:

- 1) Strategic, Financial and Operational performance as set out in the statutory requirements above.
- Assessing performance against relevant expectations set in the District Annual Plan, Statement of Intent and other relevant accountability documents, documented standards and legislation.
- 3) Monitoring other relevant and agreed key performance indicators.
- 4) Monitoring the capital expenditure programme.
- 5) Ensuring systems are developed to manage clinical and operational risks.

Membership

All members of the Committee are to be appointed by the **Board**Commissioner. The **Board**Commissioner will appoint the Chairperson.

The Committee is to comprise of Board<u>the Commissioner and Deputy Commissioners</u> members, supplemented with external appointees as required.

Membership will provide for Māori representation on the Committee. The Committee may obtain additional advice as and when required.

Where a person, who is not a <u>Board_Deputy Commissionermember</u>, is appointed to the Committee, the person must give the <u>BoardCommissioner</u> a statement that discloses any present or future conflict of interest, or a statement that no such conflicts exist or are likely to exist in the future.

Conflicts of Interest

Where a potential conflict of interest exists with an agenda item, these are to be declared by members and staff. A register of interests shall form part of each Committee meeting agenda.

<u>Quorum</u>

The quorum of members of a committee is:

- (a) if the total number of members of the committee is an even number, half that number; but
- (b) if the total number of members of the committee is an odd number, a majority of the members.

Meetings

<u>A minimum of eight meetings per year are to be held.</u> Meetings for this Committee are generally held bi monthly, up to six times a year.

Review

The Terms of Reference for this Committee shall be reviewed at the beginning of each new Board term.

Management Support

The Chief Executive Officer shall ensure adequate provision of management and administrative support to the Committee.

SOUTHERN DISTRICT HEALTH BOARD

Title:	CI	Chief Operating Officer Report				
Report to:	Но	ospital Advisory Cor	nmittee			
Date of Meet	ing: 25	5 May 2016				
Summary: Considered in these papers are: • April 2016 DHB activity.						
Specific impl	ications f	or consideration (financial/workforce/r	isk/legal etc):		
Financial:	Yes					
Workforce:	Yes					
Other:	No					
Document pr submitted to	-		eport only provided Advisory Committee	Date:		
Approved by	:			Date:		
Prepared by:			Presented by:			
Chief Operating Officer/Deputy CEO		Lexie O'Shea Chief Operating Officer/Deputy CEO				
Date: 12/05/2016						
RECOMMENDATION: That the Hospital Advisory Committee receive the report.						

Chief Operating Officer Report – April 2016

Recommendation

That the Hospital Advisory Committee notes this report.

1. Contract Performance

- Total elective case weights delivered by Southern DHB Provider Arm were 54 above plan in April 2016 (4%). Year to date elective case weights are 267 above plan (2%).
- Total acute case weights delivered by the Southern DHB Provider Arm were 44 below plan in April 2016 (2%). Year to date acute case weights are 567 above plan (2%).
- In comparison to actual year to date case weights delivered to April 2015, acute case weights delivered have increased by 677 case weights (2%) and elective case weights have increased by 378 (3%).

2. Ministers Health Targets

Shorter Stays in the Emergency Department (ED) – Target 95%

- We achieved 92.8% across the two main sites for April. Across the main sites, April 2016 had 3.95% more presentations to ED compared to April 2015 (6598 in 2016 and 6347 in 2015).
- Dunedin ED 93.8% for April 2016. Presentations for the month of April increased by 7.1% (3738) compared to 3491 presentations in April 2015.
- Southland ED 91.2% for April 2016. There has been challenges with access to beds on both sites.
- A number of projects both internal and external are underway in Southland to assist with achieving a consistent target result.

Immunisation – Target 95%

- The target for children aged eight months is 95%. April coverage achieved 93% with a 4.0% decline and 2.1% opt off rate. Interim three month coverage February to April is 94%.
- The target for two year old children remains at 95%. April coverage achieved 96% with a 2.5% decline rate. Interim three month coverage February to April 2016 is 95%.
- The target for four year old children is 90% by June 2016. April coverage achieved 91% with a 4.6% decline rate. Interim three month coverage February to April is 91%.

Faster Cancer Treatment (FCT) - Target 85% (By June 16)

- In quarter 4 we are currently tracking to 79% (for the 62-day indicator) which is higher than last quarter, although short of our anticipated 80%. We expect that with more consistent delivery of treatments during quarter 4 as there are minimal statutory holidays. The Ministry of Health have advised that at the end of September 2016 we will have the full data to determine DHB final performance for 15/16 (target is 85%).
- In the 31-day indicator we are currently tracking to 84% (+2.3%).

Improving Access to Elective Services

Elective Surgical Discharges April 2016									
		Election	e Surgical	Discharge	Activity -	Southern D	HB popula	tion	
		April 2	016	11.5		Year to	Date		Annual
	Actual	Plan	Var	Var %	Actual	Plan	Var	Var %	Plan
SDHB population treated inhouse	871	854	17	2%	8,817	8,573	244	3%	10,372
SDHB population treated by other DHB		43	(43)	(100%)	394	395	(1)	(0%)	483
SDHB population outsourced	15		15		188		188		
ELECTIVE INITIATIVE	886	897	(11)	(1%)	9,399	8,968	431	5%	10,855
Surgical Arranged Admissions	72	68	4	6%	903	670	233	35%	831
Surgical Discharges from a Non-Surgical PUC - Elective	31	32	(1)	(3%)	251	316	(65)	(21%)	392
Surgical Discharges from a Non-Surgical PUC - Arranged	20	26	(6)	(23%)	294	298	(4)	(1%)	360
HEALTH TARGET	1,009	1,023	(14)	(1%)	10,847	10,252	595	6%	12,438
Elective Surgical Caseweights April 2016									
		Elective	e Surgical (Caseweigt	nt Activity -	Southern I	DHB popul	ation	
		April 2	016		22	Year to	Date	1	Annual
	Actual	Plan	Var	Var %	Actual	Plan	Var	Var %	Plan
SDHB population treated inhouse	1,202	1,195	7	1%	11,617	11,993	(376)	(3%)	14,522
SDHB population treated by other DHB		85	(85)	(100%)	850	854	(4)	(0%)	1,034
SDHB population outsourced	24	7	17	242%	260	70	190	273%	84
20.153 BM 1200000.0000000000000000000000000000000	1,225	1,287	(62)	(5%)	12,727	12,917	(190)	(1%)	15,641
	the second se								Contraction of the local division of the loc

(1) IDF volumes for March are as reported to MoH as at 26/04/16; no April data has been loaded and not available as at 11th May

(2) Clinical Records and Coding target is 95% of coding completesd by end of 3rd working day (Dunedin) / 5th day (Southland) post month of discharge, which was achieved this month.

3. Operational Performance

Elective Service Performance Indicators (ESPI):

- The final ESPI position for February 2016 show Southern DHB with a red status for ESPI2 (Patients waiting for First Specialist Assessment (FSA)) and for ESPI5 (Inpatients).
- The preliminary ESPI graphs for March 2016 show Southern DHB with a yellow status for ESPI2 and ESPI5.
- Predicted results for April 2016 has Southern DHB with a red status for ESPI 2 and a yellow status for ESPI5.
- There is a recovery plan underway within the respiratory service which is the key driver for the ESPI 2 position in April.

4. Medical Directorate

- 6000 Bed Days is a collaborative between medicine, surgery and older person's health. Our target is to give healthy days back to the community, reduce length of stay and save 6000 bed days by June 2016. At 30 April 2016, we had saved 5064 bed days, slightly ahead of our target, using a formula which reports observed bed days versus expected bed days. There are a large number of initiatives involving front line staff which supports this work.
- The medical directorate are planning a revamped quality improvement initiative for the new financial year called 'Right time, right place'. This will replace the Saving 6000 bed days and incorporate more formally an Emergency Department work stream (as well as an inpatient work streams). The measures set up to determine progress and improvement as part of the current programme, will carry over.
- The Gastroenterology rebuild project is on plan. The decant to the 5th floor is on track.
- The inpatient service is to open additional resources for the winter. The Internal Medicine Winter Flex unit will be fully operational from June 2016. This will introduce a new model of care and test some of the principles of a Medical Assessment and Planning Unit (MAPU). The operational support includes weekly review of the performance of the unit by nursing, medical, allied health and management. Development of the model of care for a MAPU is underway.

- Further work has been undertaken on the Bed Analysis Tool. This is expected to be ready for trial at the end of May. The aim is to anticipate problems in access to beds as well as provide information that will assist with targeted strategies to improve access on the day.
- The targets for the three Ministry of Health colonoscopy waiting times were met in April 2016. A new joint clinical (University of Otago and Southern DHB) Gastroenterologist has joined the district wide team.

5. Mental Health, Addictions and Intellectual Disability Directorate (MHAID)

- Staff have participated in workshops for the implementation of Stepped Care across the Southern DHB Mental Health Sector. Stepped care is an approach which uses the least intrusive care to meet presenting needs, and enables people to move to a different step (level) of care as their needs change.
- The service's refugee resettlement workforce planning is continuing to ensure we are developing a competent workforce in this area.
- Planning continues on the relocation of Community Programmes to the Wakari Hospital campus.
- A Dialectical Behaviour Therapy (DBT) workshop was held in Dunedin with 77 staff from across the directorate attending. This therapy assists people with complex multi-diagnostic and high-risk problems such as borderline personality disorder. Feedback was excellent and all disciplines and services well represented.
- Two workshops planned and delivered on developing or extending access to Psychological therapies in Dunedin and Invercargill had a high number of attendances from all disciplines across the services. These workshops help inform planning at a local level (using Te Pou tools as a guide) so we can maximise the workforce capabilities, while delivering optimum service and evidence therapy to our service users. Three action groups will work on different aspects of scoping the plan, and feedback any recommendations to a steering group.

6. Surgical Directorate

- Preparation for the planned Intensive Care Unit (ICU) refurbishment is well underway within the directorate and focus for this month at a directorate level has included finalising the decanting plans to free up the space for the refurbished unit, further developments of the design brief for the new area, including planning for capital investment for the unit and staffing models of care and education strategies.
- The detailed design for the Audiology relocation project has been completed with the documentation being reviewed and approved by the stakeholders, including the Project Board, Occupational Health and Safety and Infection Prevention and Control. The building consent for this project has been lodged and is in the system with the next project milestone being the procurement of the main contractor, which is programmed for May.
- The neurosurgery service has welcomed a locum consultant Neurosurgeon into a fixed term position for one year and he will commence work in May 2016.
- Anaesthetic recruitment in Southland continues with offers made to two candidates.
- A Workshop on Brief/Debrief in theatre/perioperative services was held on both sites. This
 was well attended on both sites. The Brief/Debrief is a Health, Quality and Safety Commission
 (HQSC) initiative for reducing perioperative harm. It involves a full team briefing at the
 beginning of the day and a team debrief at the end of the day. The main purpose is to
 improve communication within the perioperative team and reduce the incidence of incidents
 and errors. Brief and debriefs have been started as part of roll out in one theatre on each
 site initially. Planning is underway to roll out the initiative to other theatres.
- The Suture Rationalisation Project has been launched in the Dunedin theatres following a successful project on the Southland site. The first action resulted in greater than suture codes being removed due to no longer being used. The second stage is now underway where the associate charge nurses are to consult with surgeons to rationalise the remaining stock where one suture type might be stocked in three lengths.

- The "Safer Surgery" meeting which is a quality initiative in both theatres is now becoming well established and effecting change and improvements for many areas of theatre activity on both sites. The aim is to standardise practices across the district in the theatre suites.
- A proposal to undertake a co-design project into the waiting Orthopaedic patients across the district has been put forward at the request of the Ministry of Health. It would look into the experience of our consumers leading up to acceptance or denial onto the surgical waitlist.

7. Women's, Children's, Public Health and Support (WCPH&S) Directorate

- Children's Health, recruitment to Senior Medical Officer (SMO) vacancies continue with an offer made to one candidate for the Southland site.
- Short term support has been put in place to assist with increasing time for transcribing follow-up letters from outpatient clinic visits. This is in place as an interim measure while a higher level strategic view is completed to ensure transcription services are sustainable across the organisation.
- In March 2016 54.2% of elective patients referred to Magnetic Resonance Imaging (MRI) had their report distributed within the required timeframes against a target wait time of 85%. This is an improvement from the February result of 47.4% Both Dunedin and Southland Hospital performance improved in March (to 78.6% and 32.5% respectively). Options are being progressed to resolve the barriers to reaching the health target. A locum magnetic resonance imaging (MRT) has been recruited to Southland and a plan for additional scans for long wait patients is being progressed on both sites with a significant improvement expected by end of June 2016.
- Computerised Tomography (CT) in March 2016 achieved 77.9% against a target wait time of 95% improving from 75.6% in February 2016. Southland Hospital continues to perform well at 88.2% and Dunedin increased from 64.3% in February to 70.38% in March. Dunedin is continuing to experience high volumes of inpatient demand and demand for CT guided procedures, which reduces elective capacity. A plan to increase scanning for people waiting longer than 42 days is being progressed and it is expected to reach target wait time by July 2016.

8. Older Person's Health, Clinical Support and Community Services Directorate

- A new video conference unit for Lakes District Hospital meeting/seminar room has been ordered, which will improve regular links (clinical and non clinical) between hospital sites.
- The REACH (community rehabilitation service) for Southland was established in early 2016, and brings together existing community rehabilitation staff into a cohesive MDT (multidisciplinary team). This involves Physiotherapy, Occupational Therapy, Nursing, Rehabilitation Assistant, and consults available from Dietitian, Speech and Language therapy, and Geriatrician as required. The new service structure has resulted in reduced waiting times for patients, development of patient centred goals, and more defined model of service delivery. The General Manager spent a morning with the team recently visiting patients in the community.
- Traumatic Brain Injury Residential Rehabilitation Quality forum took place in Auckland in April 2016, and clinical staff from ISIS Ward Wakari attended. This is a valuable forum that allows funders (ACC) and all New Zealand providers to come together to share benchmark information about their services, and to share quality improvement learnings. Southern will host this quality forum and will be held in Dunedin in October 2016.
- Southern Falls and Fracture Liaison Governance Group. Significant planning is underway to host two (Dunedin and Invercargill) Reducing Harm from Falls workshops for Aged Residential Care teams in May 2016. These will be led by Northern Regions Clinical Leader from First Do No Harm project, who will be travelling down from Whangerei, to share her expertise and learning from the successful Northern Regions projects.
- Directorate and service leadership teams are involved in discussions to TAS Services (who hold Ministry of Health contract for InteRAI training. The InteRAI is the NZ wide clinical needs assessment tool) on the proposed centralising across NZ of InteRAI support services,

Lead Practitioners and Systems Clinicians. If this goes ahead, it will be in July 2016, and training and education on InteRAI tool will be provided by TAS across NZ.

9. Releasing Time to Care (RTC)

- The first RCT cohort commenced in July 2015 and the following wards are now involved: Southland medical (39 beds), Children's Unit (16), 4A (24), 4C (24), 7A (16), 7B (8), 7C (16), 8 Med (46), 8C (14), ED Dunedin.
- There are four underlying principles and consistent in all RTC modules: patient safety, patient experience, valuing patient's time and staff well-being.
- Lean principles are practised to ensure efficiency is a priority.

The focus for the month of May has been:

Knowing How we are Doing

How you are doing against ward objectives, effective and reliable approach to monitoring KPI's and those indicators important to the individual areas.

Patient Status at a Glance

The use of visual management to show important patient information: can be updated regularly, seen 'at a glance' and used effectively. Time is saved looking for information and the patient journey runs smoothly. Staff are interrupted less as information is readily available.

Well Organised Ward

An approach to simplify your workplace and reduce waste by having everything in the right place, at the right time, and ready to go. The 5 's' approach is used to Sort (remove what is not needed), Set (right thing in the right place), Shine (keep things ready to go), Standardise (an agreed consistent process), Sustain (continually improve).

Shift Handover

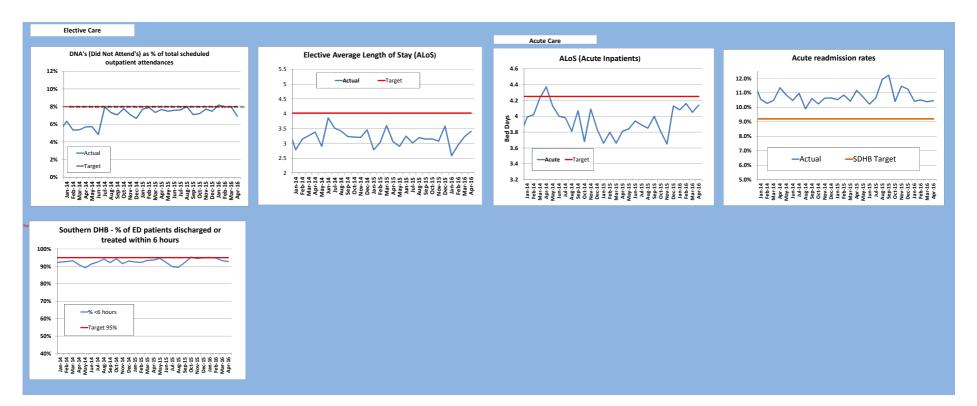
Shift handover is more than just the transfer of information. A good handover has an impact on: improved patient outcomes, avoidable errors, reduction in repetition, increasing safety, improved patient satisfaction.

Lexie O'Shea, Chief Operating Officer/Deputy CEO Leanne Samuel, Executive Director of Nursing and Midwifery

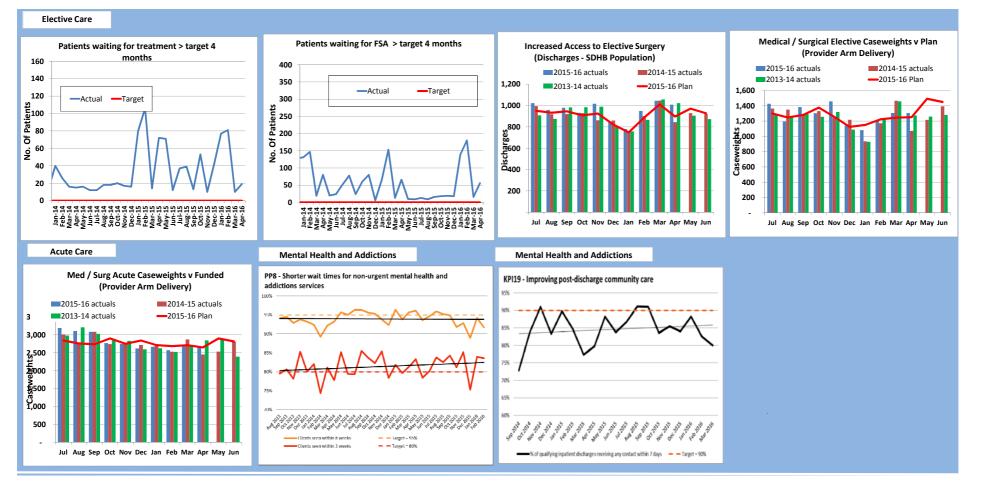
Patient	Safety and Expen	rience - Hospita	l Healthcheck			Cost/Productivity - Hospital Healthcheck							
	Prior year	Actual	Plan / Target	Variance 'v Plan /Target	Trend/rating	Monthly	Prior year	Actual	Plan / Target	Variance 'v Plan /Target	Trend/rating		
B - Improved access to elective surgical services monthly (population based) (845	1,009	1,023	-14 (-1.4%)		1 - Waits >4 months for FSA	66	56	0	56			
Ba - Improved access to elective surgical services ytd (population based)	9,986	10,847	10,252	595 (5.8%)		2 - Treatment >4 months from commitment to treat	72	19	0	19			
						% of accepted referrals for CT scans receiving procedures within 42 days	NA	77%	95%	-18.0%			
Patient	: Safety and Expe	rience - Perforn	nance Report			% of accepted referrals for MRI scans receiving procedures within 42 days	NA	54%	85%	-31.0%			
Monthly	Prior year	Actual	Plan / Target	Variance 'v Plan /Target	Trend/ rating	% accepted referrals for Coronary Angiography within 90 days	NA	86%	95%	-8.9%			
Faster Cancer treatment; % of patients to receive their 1st cancer treatment within 52 days	NA	86%	85%	0.9%		4a - Elective caseweights versus contract (monthly provider arm delivered)	1,073	1,306	1,251	55 (4.4%)			
11 - Reduced in stay in ED	94%	93%	95%	-2.2%		4b - Elective caseweights versus contract (ytd provider arm delivered)	12,442	12,820	12,554	266 (2.1%)			
15 - Acute Readmission Rates (note 2)	11.2%	10.5%	9.9%	0.6%		7a - Acute caseweights versus contract (monthly provider arm delivered)	2,453	2,662	2,706	-44 (-1.6%)			
						7b - Acute caseweights versus contract (ytd provider arm delivered)	27,654	28,331	27,764	567 (2%)			
16 - % of hospitalised smokers provided with advice and help to quit	Popula 95%	tion Health Pending	95%	NA		L							
Key -							Cost/Productivity - P	Performance Repo	rt				
		Meeting target or pl	an			Monthly	Prior year	Actual	Plan / Target	Variance 'v Plan /Target	Trend/ rating		
		underperforming bu	t delivering against ag			5 - Reduction in DNA rates	7.7%	7%	8.0%	-1.1%			
		Underperforming an plan	d exception report re	quired with recovery		9 - ALoS (elective) (Note 4)	3.05	3.40	4.02	0.62 (15.4%)			
						ALoS (Acute inpatient) (Note 4)	3.81	4.14	4.25	0.11 (2.6%)			
Note 3 DOSA rates excludes Cardiac/Cardiology and Neurosurge				gy and Neurosurgery	DOSA (Note 3)	95%	95%	95%	0%				
ote 2 Awaiting new definition from Ministry Note 4 Using SDHB historic definition not the one reported on by the MoH					one reported on by								
P = Pending													

Southern DHB Hospital Advisory Committee - KPIs April 2016 Data

Southern DHB Hospital Advisory Committee - Performance Report April 2016 Data



Southern DHB Hospital Advisory Committee - Hospital Healthcheck April 2016 Data



SOUTHERN DISTRICT HEALTH BOARD

Title:	FI	NANCIAL REPOR	г						
Report to:	Co	mmissioner's Advis	sory Committees						
Date of Meet									
Summary:									
The issues considered in this paper are:									
 April 20 	16 financia	al position.							
Specific impl	ications fo	or consideration (financial/workforce/r	isk/legal etc):					
Financial:	As	set out in report.							
Workforce:	No	specific implication	S						
Other:	n/a								
Document pr submitted to			Not applicable, report submitted directly to Finance Audit and Risk Committee.						
Approved by Executive Off				Date:					
Prepared by:			Presented by:						
Clive Smith Chief Financial	Officer		Clive Smith Chief Financial Offic	er					
Date: 19/05/2016									
RECOMMEND	ATION:								
That the repo	ort be not	ed.							

SOUTHERN DHB FINANCIAL REPORT – Commissioner's Summary

Financial Report for:	April 2016
Report Prepared by:	Clive Smith
Date:	13 May 2016

Overview

Results Summary

	Month			Y	ear to Date		Annual
Actual	Budget	Variance		Actual	Budget	Variance	Budget
\$000	\$000	\$000		\$000	\$000	\$000	\$000
75,577	74,819	758	Revenue	750,871	747,364	3,507	897,053
(29,269)	(30,434)	1,165	Less Personnel Costs	(289,888)	(293,735)	3,847	(354,925)
(50,627)	(47,743)	(2,884)	Less Other Costs	(483,462)	(480,944)	(2,518)	(578,083)
(4,319)	(3,358)	(961)	Net Surplus / (Deficit)	(22,479)	(27,315)	4,836	(35,955)

The April monthly result was a deficit of \$4.3m which was unfavourable to budget by \$0.9m but slightly favourable to forecast. Year to date (YTD) the consolidated deficit is \$4.8m better than budget with a deficit of \$22.5m.

The year to date result has been driven primarily by:

- Additional revenue (partially offset by costs);
- Personnel costs under budget driven mainly by lower food service FTE (due to outsourcing) and medical personnel remaining positive due to Senior Medical FTE being less than budget;
- Other costs being \$2.5m over budget. Provider Arm costs are \$5.5m unfavourable to budget due to expenditure on;
 - o implants,
 - maintenance costs relating to asbestos issue,
 - o food service costs (partially offset by reduced payroll costs) and
 - bad debt write-offs and sundry other costs.

These have been partially offset by favourable year to date Funder costs (primarily Disability Support).

	Month			Y	ear to Date		Annual
Actual	Budget	Variance		Actual	Budget	Variance	Budget
\$000	\$000	\$000		\$000	\$000	\$000	\$000
(213)	7	(220)	Governance	112	(49)	161	5
(1,132)	(1,423)	291	Funder	(12,803)	(16,881)	4,078	(21,051)
(2,974)	(1,941)	(1,033)	Provider	(9,788)	(10,385)	597	(14,910)
(4,319)	(3,357)	(962)	Net Surplus / (Deficit)	(22,479)	(27,315)	4,836	(35,956)

Operational Performance

The April result was \$0.9m unfavourable to budget as above.

Detail Section

<u>Revenue</u>

Ministry of Health revenue was favourable for the month by \$0.6m and \$2.6m year to date, due to additional revenue received as below:

			\$m
Summary	Cost Offset	Apr-16	YTD Apr-16
Under 13 funding	Y	0.14	1.40
Radiology Service Improvement	Y		0.13
IPIF	Y	0.14	0.20
Elective funding	Prior year	-	0.10
In between travel	Y	0.16	0.37
Other contracts not budgeted	Y	0.12	0.26
Colonoscopy Incentive Payments	Partial	0.03	0.14
		0.59	2.60

Other Government is close to budget for the month, although \$1.2m favourable year to date. The year to date favourable variance is due to higher than budgeted blood rebates and revenue received from the dental school.

Other revenue is \$0.2m favourable for the month due to higher than budgeted non-resident revenue. This however has been provided for in doubtful debts as we are unlikely to collect on this debt.

Research accounts are break-even year to date.

DHB Provider

	Month			Y	ear to Date	-	Annual
Actual	Budget	Variance		Actual	Budget	Variance	Budget
\$000	\$000	\$000		\$000	\$000	\$000	\$000
44,036	43,522	514	Revenue	437,438	435,608	1,830	522,741
(28,641)	(30,113)	1,472	Less Personnel Costs	(286,119)	(290,447)	4,328	(350,955)
(18,369)	(15,350)	(3,019)	Less Other Costs	(161,106)	(155,546)	(5,560)	(186,696)
(2,974)	(1,941)	(1,033)	Net Surplus / (Deficit)	(9,787)	(10,385)	598	(14,910)
			Other Costs				
(2,613)	(2,538)	(75)	Outsourced	(26,746)	(26,369)	(377)	(31,458)
(7,877)	(7,010)	(867)	Clinical Supplies	(71,914)	(70,531)	(1,383)	(84,980)
(7,879)	(5,802)	(2,077)	Infrastructure & Non Clinical	(62,446)	(58,646)	(3,800)	(70,258)
(18,369)	(15,350)	(3,019)	Total Other Costs	(161,106)	(155,546)	(5,560)	(186,696)

Personnel Expenses

	Cı	urrent Mont	th		١	ear to Date			Annual		
Part 2: DHB provider	Actual	Budget	Variance	Variance	Actual	Budget	Variance	Variance	Budget		
	\$000	\$000	\$000	%	\$000	\$000	\$000	%	\$000		
Personnel Expenses											
Medical Personnel	(9,762)	(9,831)	69 F	1%	(97,691)	(98,565)	874 F	1%	(118,890)		
Nursing Personnel	(11,239)	(11,852)	613 F	5%	(110,238)	(110,058)	(180) U		(133,259)		
Allied Health Personnel	(3,946)	(4,367)	421 F	10%	(39,877)	(40,431)	554 F	1%	(48,836)		
Support Services Personnel	(415)	(861)	446 F	52%	(5,739)	(8,555)	2,816 F	33%	(10,315)		
Management / Admin Personnel	(3,280)	(3,203)	(76) U	(2%)	(32,575)	(32,838)	263 F	1%	(39,654)		
Personnel Costs Total	(28,641)	(30,113)	1,472 F	5%	(286,119)	(290,447)	4,327 F	1%	(350,955)		

Overall personnel costs were \$1.5m favourable for the month and \$4.3m favourable year to date. As expected, the monthly favourable variance reverses the unfavourable variance in March that arose when stat days and associated costs were recognised in March but budgeted in April.

- a) Medical staff costs were favourable to budget for the month reflecting the timing difference in the stat days recording (i.e. actuals in March v budget in April). Year to date favourable FTE has driven the favourable year to date (ytd) variance.
- b) Nursing staff costs were favourable to budget by \$0.6m reflecting the timing difference in the stat days recording (i.e. actuals in March v budget in April). FTE is 47.5 over budget driven by a variety of short term factors such as leave cover (long term, sick, study), patient watch requirements.
- c) Allied staff costs were favourable to budget by \$0.1m in the month, reflecting the timing difference in the stat days recording (i.e. actuals in March v budget in April) and their favourable variance of 3.8 FTE.
- d) Support staff were \$0.4m favourable to budget for the month and \$2.3m favourable ytd, reflecting the 97FTE Food Service support staff now outsourced. This is offset by reduced revenue and increased outsourced food costs.
- e) Management / Admin costs were \$0.1m favourable to budget for the month, reflecting the timing difference in the stat days recording (i.e. actuals in March v budget in April).

Outsourced Expenses

Outsourced costs were close to budget in April and \$0.4m unfavourable to budget year to date due mainly to outsourced radiology services to cover vacancies and nursing costs on charged by the University associated with research (offset by revenue).

Clinical Supplies Expenses

	Cı	Irrent Mont	th		•	Year to Date			Annual
Part 2: DHB provider	Actual	Budget	Variance	Variance	Actual	Budget	Variance	Variance	Budget
	\$000	\$000	\$000	%	\$000	\$000	\$000	%	\$000
Clinical Supplies									
Treatment Disposables	(2,530)	(2,431)	(99) U	(4%)	(24,966)	(25,127)	161 F	1%	(30,185
Diagnostic Supplies & Other Clinic	(102)	(148)	46 F	31%	(1,471)	(1,541)	70 F	5%	(1,848
Instruments & Equipment	(1,889)	(1,481)	(408) U	(28%)	(14,247)	(14,092)	(156) U	(1%)	(16,988
Patient Appliances	(152)	(179)	27 F	15%	(1,678)	(1,787)	110 F	6%	(2,150
Implants & Prosthesis	(1,026)	(906)	(119) U	(13%)	(9,935)	(9,359)	(576) U	(6%)	(11,356
Pharmaceuticals	(1,702)	(1,581)	(121) U	(8%)	(15,891)	(15,701)	(191) U	(1%)	(18,941
Other Clinical Supplies	(476)	(284)	(192) U	(68%)	(3,726)	(2,925)	(801) U	(27%)	(3,511
Clinical Supplies Total	(7,877)	(7,010)	(867) U	(12%)	(71,914)	(70,531)	(1,383) U	(2%)	(84,980

Clinical supply costs were \$0.9m unfavourable to budget for the month and \$1.4m unfavourable to budget YTD.

The major drivers of the monthly unfavourable variance were;

- \$0.4m Minor purchases over budget, being the equipment purchased ytd < \$2k.
 - \$0.2m Cardiac implants over budget due to increased volumes and
- \$0.2m Research costs over budget (offset by a combination of higher than budgeted revenue and lower than budgeted outsourced costs)

The main unfavourable variances year to date are;

- Implants and prostheses \$0.6m unfavourable driven by
 - \$0.3m Cardiac implants over budget year to date due to volume and phasing of procedures.
 - \$0.2m Increased use of shunts and stents driven by acute patients.
 - \$0.2m increased other implants.
 - o offsetting this partially is an underspend in spinal plates and screws
- Other Clinical Supplies \$0.8m unfavourable driven by
 - \circ \$0.3m Air ambulance costs higher than budgeted.
 - \$0.4m Research costs over budget offset by revenue.

Infrastructure & Non-Clinical Expenditure

	Cı	urrent Mont	h		Y	Year to Date			Annual
Part 2: DHB provider	Actual	Budget	Variance	Variance	Actual	Budget	Variance	Variance	Budget
	\$000	\$000	\$000	%	\$000	\$000	\$000	%	\$000
Infrastructure & Non Clinical Expenses									
Hotel Services, Laundry & Cleaning	(1,385)	(1,105)	(280) U	(25%)	(13,469)	(11,810)	(1,659) U	(14%)	(14,024
Facilities	(2,495)	(1,846)	(649) U	(35%)	(18,637)	(17,923)	(714) U	(4%)	(21,618
Transport	(366)	(353)	(13) U	(4%)	(3,482)	(3,400)	(82) U	(2%)	(4,101
IT Systems & Telecommunications	(1,093)	(1,059)	(34) U	(3%)	(9,792)	(10,361)	569 F	5%	(12,495
Interest & Financing Charges	(1,103)	(1,184)	82 F	7%	(11,279)	(11,844)	565 F	5%	(14,213
Professional Fees & Expenses	(619)	(128)	(491) U	(382%)	(1,699)	(1,298)	(401) U	(31%)	(1,555
Other Operating Expenses	(818)	(125)	(693) U	(553%)	(4,087)	(2,010)	(2,077) U	(103%)	(2,252
Infrastructure & Non-Clinical Supplies	(7,879)	(5,802)	(2,077) U	(36%)	(62,446)	(58,646)	(3,800) U	(6%)	(70,258

Infrastructure and non-clinical costs were \$2.1m over budget for the month due to;

- \$0.3m Additional food costs offset by lower than budgeted personnel costs.
- \$0.7m Facility costs over budget relating to the removal of asbestos.
- \$0.5m Unbudgeted costs relating to the NIP (National Infrastructure Platform) business case being fully provided for.
- \$0.4m Increased doubtful debts offset by revenue.

Year to date, these were also the drivers of the \$3.8m unfavourable variances as follows:

- \$1.8m Additional food costs offset by lower than budgeted personnel costs.
- \$0.7m Facility costs over budget relating to the removal of asbestos.
- \$0.5m Unbudgeted costs relating to the NIP (National Infrastructure Platform) business case written off.
- \$0.4m Increased doubtful debts offset by revenue.
- \$1.7m Unallocated savings initiatives being budgeted here. This is offset by savings in payroll costs and additional revenue.

Offset by favourable variances in

- \$0.6m lower than budgeted capital charge payments (\$0.3m ytd) and interest costs (\$0.3m ytd)
- \$0.5m favourable IT Systems and Telecommunication costs due mainly to software maintenance fees actuals being less than budget.

<u>FTE</u>

Provider Arm FTE increased 30 from last month, driven by Nursing personnel that were 18 FTE over budget.

For the purposes of management reporting, the budget numbers below have had the impact of the food service outsourcing removed to enable a meaningful comparison of actuals to budget.

Staff Type	Apr-15	Jun-15	Dec-15	Mar-16	Apr-16	Apr-16	Variance	YTD
	Actual	Actual	Actual	Actual	Actual	Budget	to Budget	Variance
SMO	246	241	248	251	247	253	2	9
RMO	274	270	289	269	275	278	9	4
Nursing Personnel	1,655	1,628	1,618	1,649	1,679	1,631	(18)	(5)
Allied Health Personnel	657	651	638	647	653	665	18	14
Support Personnel	188	187	104	103	101	107	4	6
Management & Administration	616	616	628	638	631	635	(2)	9
Total Full Time Equivalents (FTE	3,636	3,593	3,525	3,556	3,586	3,569	13	37

Funder Summary

	Month			Y	ear to Date		Annual
Actual	Budget	Variance		Actual	Budget	Variance	Budget
\$000	\$000	\$000		\$000	\$000	\$000	\$000
71,203	70,783	420	Revenue	709,503	706,979	2,524	848,545
(72,334)	(72,207)	(127)	Less Expenses	(722,306)	(723,861)	1,555	(869,596)
(1,131)	(1,424)	293	Net Surplus / (Deficit)	(12,803)	(16,882)	4,079	(21,051)
			Expenses				
(52,365)	(51,589)	(776)	Personal Health	(518,949)	(517,837)	(1,112)	(621,785)
(7,148)	(7,416)	268	Mental Health	(73,875)	(74,205)	330	(89,036)
(110)	(101)	(9)	Public Health	(991)	(1,008)	17	(1,210)
(11,679)	(12,031)	352	Disability Support	(118,012)	(120,265)	2,253	(144,799)
(83)	(121)	38	Maori Health	(1,145)	(1,212)	67	(1,454)
(949)	(949)	0	Other	(9,334)	(9,334)	0	(11,312)
(72,334)	(72,207)	(127)	Total Expenses	(722,306)	(723,861)	1,555	(869,596)

The Funder result was \$0.3m favourable to budget for the month and \$4.1m favourable ytd. Lower than budgeted expenditure in Disability Support expenditure was the main driver for this. The overspend in Personal Health expenditure is offset by additional revenue.

The main drivers in the Personal Health unfavourable variance was Pharmaceutical expenditure (timing difference), Immunisation costs (also expected to be a timing difference) and Palliative Care expenditure (under budget year to date).

Spending on Disability Support Services remained less than budget driven by lower demand in Aged Residential Care Rest Homes and Hospital Beds that were \$0.5m less than budget for the month (7% of budget).

On a year to date basis, the \$4.1m favourable variance is due to:

Revenue - \$2.5m favourable year to date. As per the table in the revenue section, this variance is due to unbudgeted revenue contracts received that have in the main, offset costs attached.

Expenditure - \$1.5m favourable year to date due to the following;

Personal Health Expenditure - \$1.1m unfavourable year to date due to:

- **Laboratories** \$0.3m favourable due to main contract to SCL over budgeted by \$30k per month.
- **Pharmaceuticals** \$0.7m unfavourable due to timing difference in phasing of Pharmac forecast (on which the monthly accrual is based) and the budget phasing. The latest Pharmac forecast is now very close to the full year budget.
- **Primary Health Care Strategy and Capitated combined** \$1.3m unfavourable due to additional expenditure for U13's VLCA which were not budgeted. The expenditure is offset by extra revenue.
- **Palliative Care** \$0.7m favourable. This is a demand driven service that has seen a change in criteria for eligibility from 3 months to 6 weeks is driving the under budget spend.
- **Medical Outpatients** \$0.7m unfavourable due to \$0.5m unbudgeted spend on PET scan costs and \$0.1m of unbudgeted expenditure for renal medicine training. Haemophilia national pool costs are over budget by \$0.1m
- **Price Adjusters and Premium** \$0.3m unfavourable due to coding change in the Rural Trust contracts. The contract for one Rural Trust has a negative adjuster line to account for the 5% savings reduction.
- **Travel & accommodation** \$0.5m favourable. Demand driven service currently running under budget.

Disability and Support Service Expenditure - \$2.2m favourable year to date due to:

- Favourable price and volume variances in Residential Care: Rest Homes and Hospitals of \$2m along with savings in Long Term Support Chronic Health Conditions which were favourable to budget.
- Unfavourable variances in ATR and In-between travel offset by revenue partially offsetting the above.

Financial Statements

The following financial statements are attached:

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

Part 1: DHB Governance and Funding Administration Actual \$(000) Budget \$(000) e Actual \$(000) Budget \$(000) e e e Budget \$(000) e e Actual \$(000) Budget \$(000) % S(000) % S(Cu	rrent Mor	nth		Ye	ear to Dat	te		Annua
Funding Administration \$(000) \$(000) \$(000) \$(000) \$(000) \$(000) \$(000) \$(000) \$(000) \$(000) \$(000) \$(000) \$(000) \$(000) \$(000) \$(000) \$(000) \$(000) \$(000) \$(000) \$(000) \$(000) \$(000) \$(000) \$(000) \$(000) \$(000) \$(000) \$(000) \$(000) \$(000) \$(000) \$(000) \$(000) \$(000) \$(000) \$(000) \$(000) \$(000) \$(000) \$(000) \$(000) \$(000) \$(000) \$(000) \$(000) \$(000) \$(000) \$(000) \$(000) \$(000) \$(000) \$(000) \$(000) \$(000) \$(000) \$(000) \$(000) \$(000) \$(000) \$(000) \$(000) \$(000) \$(000) \$(000) \$(000) \$(000) \$(000) \$(000) \$(000) \$(000) \$(000) \$(000) \$(000) \$(000) \$(000) \$(000) \$(000) \$(000) \$(000) \$(000) \$(000) \$(000)	Part 1: DHB Governance and				е				е	Budget
Part 1.1: Statement of Financial Performance Part 2 P	Funding Administration	\$(000)	•	\$(000)	%	\$(000)	-	\$(000)	%	\$(000)
Government and Crown Agency sourced Internal - DHB Funder to DHB Provider Other DHB's - 3 (8) U 9,334 9,334 9,334 9,334 9,334 9,334 9,334 9,334 9,334 9,334 9,334 9,334 9,334 9,334 9,334 9,334 9,334 9,334 9,334 9,334 9,334 9,334 9,334 9,334 9,334 9,334 9,334 9,334 9,334 9,334 9,334 9,334 9,334 9,334 9,334 9,334 9,334 9,334 9,334 9,334 9,334 9,334 9,334 9,334 9,334 9,334 9,334 9,334 9,334 9,334 9,334 9,334 9,334 9,334 9,334 9,334 9,334 9,334 9,334 9,334 9,334 9,334 9,334 9,334 9,334 9,334 9,334 9,334 9,334 9,334 9,334 9,334 9,334 9,334 9,334 9,334 9,334 9,334 9,334 9,334 9,334 9,334 9,334 9	Part 1.1: Statement of Financial Performance									
Internal - DHB Funder to DHB Frovider Other DHB's Cother Covernment Cother Covernment Covernment and Crown Agency Sourced Tos Overnment and Crown Agency Sourced Tos Overnment and Crown Agency Sourced Tos Severnment Covernment RevENUE TOTAL 949 949 9,334 9,334 9,334 9,11,3 Cher DHB's Covernment and Crown Agency Sourced Tos Overnment and Crown Agency Sourced Tos 949 957 (8) U (1%) 9,334 9,314 (65) U (1%) 11,4 Covernment Covernment RevENUE TOTAL 949 957 (8) U (1%) 9,344 9,411 (65) U (1%) 11,4 Severnment Actions 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - - - - - - 1 - <td>REVENUE</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td>	REVENUE									
Other Income REVENUE TOTAL - 1 - 1 - 1 - 1 F REVENUE TOTAL 949 957 (8) U (1%) 9,347 9,411 (64) U (1%) 11,44 EXPENSES Personnel Madagement / Admin Personnel - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - -	Other DHB's Other Government	-	- 8	(8) U	(1%)	12 -	- 77	(77) U	(1%)	11,312
Personnel Expenses - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - -				(0) 0	(170)	·	•,•••		(170)	,
EXPENSES Personnel Expenses		-	- 957	(8) []	(1%)		-		(1%)	11 40
Personnel Expenses Medical Personnel (18) (18) (18) (18) (18) (18) (18) (18) (18) (18) (18) (18) (18) (18) (18) (18) (18) (18) (18) (18) (18) (18) (18) (18) (18) (18) (18) (18) (18) (18) (18) (16) (12) (21) (29) (21) (29) (21) (21) (21) (21) (21) (21) (21) (21) (21) (21) (21) (21) (21) (21) (21) (21) (21) (21) (21) (21) (21) (21) (21) (21) (21) (21) (21) (21)		545	331	(0) 0	(170)	3,347	3,411	(04) 0	(170)	11,40
Medical Personnel - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - -	EXPENSES									
Personnel Costs Total (628) (321) (307) U (96%) (3,769) (3,288) (480) U (15%) (3,97 Outsourced Expenses Medical Personnel - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - <t< td=""><td>Nursing Personnel Allied Health Personnel Support Services Personnel</td><td>-</td><td>- - -</td><td>. ,</td><td></td><td>(79) - -</td><td>- - -</td><td>(79) U</td><td></td><td>-</td></t<>	Nursing Personnel Allied Health Personnel Support Services Personnel	-	- - -	. ,		(79) - -	- - -	(79) U		-
Medical Personnel - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - -	Management / Admin Personnel Personnel Costs Total									(3,970 (3,970
Treatment Disposables - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - -	Nursing Personnel Allied Health Personnel Support Personnel Management / Administration Personnel Outsourced Clinical Services Outsourced Corporate / Governance Services	(98) (188)	- (129) (166)	32 F (22) U	(13%)	(987) (1,959)	(1,311) (1,703)	324 F (255) U	25%	(315 (1,569 (2,034 (3,919
Hotel Services, Laundry & Cleaning Facilities (1) (1) 9% (10) (10) (1 Facilities Transport (33) (14) (19) U (133%) (207) (132) (76) U (57%) (16) IT Systems & Telecommunications (4) (6) 2 F 36% (36) (63) 26 F 42% (76) (26) Professional Fees & Expenses (28) (22) (6) U (28%) (300) (220) (80) U (37%) (26 Professional Fees & Expenses (76) (210) 134 F 64% (1,079) (1,603) 524 F 33% (2,02) Other Operating Expenses (31) (24) (7) U (29%) (194) (239) 45 F 19% (28) Democracy Subsidiaries & Joint Ventures (193) (334) 141 F 42% (2,130) (2,842) 711 F 25% (3,51)	Treatment Disposables Diagnostic Supplies & Other Clinical Supplies Instruments & Equipment Patient Appliances Implants & Prosthesis Pharmaceuticals Other Clinical Supplies	- - - - - - -	-			- - - - - -	- - - - - -			
Total Expenses (1,162) (950) (212) U (22%) (9,235) (9,459) 225 F 2% (11,39	Facilities Transport IT Systems & Telecommunications Interest & Financing Charges Professional Fees & Expenses Other Operating Expenses Democracy	(33) (4) (28) (76) (31) (20)	(14) (6) (22) (210) (24) (57)	2 F (6) U 134 F (7) U 38 F	(133%) 36% (28%) 64% (29%) 66%	(207) (36) (300) (1,079) (194) (302)	(132) (63) (220) (1,603) (239) (575)	26 F (80)U 524 F 45 F 272 F	42% (37%) 33% 19% 47%	(12 (160 (75 (264 (2,022 (287 (689
	Total Expenses	(1,162)	(950)	(212) U	(22%)	(9,235)	(9,459)	225 F	2%	(11.399
Net Surplus/ (Deficit) (213) 7 (220) U 112 (49) 161 F 331%	Net Surplus/ (Deficit)	(.,)	(000)	(, 3	(/)	(0,200)	(0,100)	• .		(,000

	Cı	Irrent Mon	nth		Y	′ear to Dat	е		Annua
Part 2: DHB provider	Actual \$(000)	Budget \$(000)	Variance \$(000)	Variance %	Actual \$(000)	Budget \$(000)	Variance \$(000)	Variance %	Budge \$(000)
REVENUE									
Ministry of Health									
MoH - Personal Health MoH - Mental Health	225	117	108 F	93%	1,469	1,168	301 F	26%	1,40
MoH - Public Health	617	- 565	53 F	9%	5,620	- 5,648	(28) U		6,77
MoH - Disability Support Services	366	368		070	3,536	3,695		(4%)	4,43
MoH - Maori Health	-	-	. ,		-	-	. ,	()	,
Clinical Training Agency	637	624		2%	6,021	6,019			7,26
Internal - DHB Funder to DHB Provider Ministry of Health Total	39,662 41,507	39,493 41,167		1%	396,083 412,729	395,300 411,828	783 F 901 F		474,32 494,2 0
Other Government									
Other DHB's	34	25		34%	366	241	125 F		2
Training Fees and Subsidies	(23)	17		(236%)	223	169			2
Accident Insurance Other Government	855 408	765 464		(12%)	7,903 5,449	7,741	161 F 869 F	2%	9,36 5,50
Other Government Total	1,274	1,271		(12%)	5,449 13,941	4,580 12,732		<u>19%</u> 9%	15,30
Government and Crown Agency Total	42,781	42,438	343 F	1%	426,670	424,560	2,110 F		509,57
Other Revenue									
Patient / Consumer Sourced	544	256	288 F	112%	3,150	2,834	316 F	11%	3,29
Other Income	712	828		(14%)	7,618	8,214		(7%)	9,87
Other Revenue Total	1,255	1,084	171 F	16%	10,768	11,048	(280) U	(3%)	13,17
REVENUE TOTAL	44,036	43,522	514 F	1%	437,438	435,608	1,831 F		522,74
EXPENSES									
Personnel Expenses	(0.700)	(0.004)	00 F	40/	(07.004)	(00 505)	074 5	40/	(110.00
Medical Personnel Nursing Personnel	(9,762) (11,239)	(9,831) (11,852)		1%	(97,691) (110,238)	(98,565)	874 F (180) U	1%	(118,89) (133,25)
Allied Health Personnel	(3,946)	(4,367)		10%		(40,431)		1%	
Support Services Personnel	(415)	(861)		52%	(5,739)	(8,555)		33%	× /
Management / Admin Personnel	(3,280)	(3,203)		(2%)	(32,575)	(32,838)	263 F	1%	(39,65
Personnel Costs Total	(28,641)	(30,113)	1,472 F	5%	(286,119)	(290,447)	4,327 F	1%	(350,95
Outsourced Expenses									
Medical Personnel	(397)	(320)		(24%)	(3,332)	(3,557)	225 F	6%	(4,18
Nursing Personnel Allied Health Personnel	(6) (73)	(5) (68)	(1) U (5) U	(23%) (8%)	(393) (871)	(46) (768)	(347) U (103) U	()	(5) (904
Support Personnel	(48)	(37)		(30%)	(227)	(368)	```	38%	(90-
Management / Administration Personnel	(10)	(2)		(91%)	(56)	(20)	(35) U		(2
Outsourced Clinical Services	(2,006)	(2,042)		2%		(20,825)	(240) U		(24,94
Outsourced Corporate / Governance Services	(79)	(65)	(14) U	(21%)	(802)	(785)	(17) U	(2%)	(90
Outsourced Funder Services Outsourced Services Total	- (2,613)	(2,538)	(75) U	(3%)	(26,746)	(26,369)	(378) U	(1%)	(31,45
	(2,010)	(1,000)	(10)0	(0,0)	(20,140)	(10,000)	(0.0) 0	(170)	(01,40
Clinical Supplies Treatment Disposables	(2,530)	(2,431)	(99) U	(4%)	(24,966)	(25,127)	161 F	1%	(30,18
Diagnostic Supplies & Other Clinical Supplies	(102)	(148)	. ,	31%		(1,541)	70 F		
Instruments & Equipment	(1,889)	(1,481)	(408) U	(28%)	(14,247)	(14,092)	(156) U	(1%)	(16,98
Patient Appliances	(152)	(179)		15%	(1,678)	(1,787)		6%	(2,15
Implants & Prosthesis	(1,026)	(906)		(13%)	(9,935)	(9,359)		(6%)	(11,35
Pharmaceuticals Other Clinical Supplies	(1,702)	(1,581)		(8%)	(15,891)	(15,701)			(18,94
Clinical Supplies	(476) (7,877)	(284) (7,010)	(192) U (867) U	(68%) (12%)	(3,726) (71,914)	(2,925) (70,531)	(801) U (1,383) U	(27%) (2%)	(3,51 (84,98
nfrastructure & Non Clinical Expenses									
Hotel Services, Laundry & Cleaning	(1,385)	(1,105)		(25%)	(13,469)		(1,659) U	(14%)	(14,02
Facilities	(2,495)	(1,846)		(35%)	(18,637)	(17,923)	(714) U		(21,61
Transport IT Systems & Telecommunications	(366) (1,093)	(353) (1,059)	(13) U (34) U	(4%) (3%)	(3,482) (9,792)	(3,400) (10,361)	(82) U 569 F		(4,10 (12,49
Interest & Financing Charges	(1,103)	(1,039)		(3%)		(10,301)			(12,49)
Professional Fees & Expenses	(619)	(128)		(382%)	(1,699)	(1,298)		(31%)	(1,55
Other Operating Expenses	(818)	(125)		(553%)	(4,087)	(2,010)		• • • • •	(2,25
Democracy Subsidiaries & Joint Ventures	-	-			-	-			
Infrastructure & Non-Clinical Supplies Total	(7,879)	(5,802)	(2,077) U	(36%)	(62,446)	(58,646)	(3,800) U	(6%)	(70,25
Total Expenses	(47,010)	(45,463)	(1,547) U	(3%)	(447,226)	(445,993)	(1,233) U		(537,65
Net Surplus/ (Deficit)	(2,974)	(4 0 44)	(1,033) U	(53%)	(9,788)	(10,385)	598 F	6%	(14,91

Funder Arm - Financial Stater	nents								
	Cı	irrent Mon	th		Y	ear to Dat	e		Annual
Part 3: DHB Funds	Actual \$(000)	Budget \$(000)	Variance \$(000)	Variance %	Actual \$(000)	Budget \$(000)	Variance \$(000)	Variance %	Budget \$(000)
Part 3.1: Statement of Financial Performance									
REVENUE									
Ministry of Health									
MoH - Vote Health Non Mental Health	59,145	59,246	(101) U		590,593		(1,019) U		710,10
MoH - Vote Health Mental Health PBF Adjustments	7,012	7,012			70,122	70,122			84,14
MoH Funding Subcontracts	3,382	2,861	521 F	18%	32,138	28,607	3,531 F	12%	34,32
Ministry of Health Total	69,539	69,119	420 F	1%	692,852	690,340			828,57
Other Government	50	50				545			
IDF's - Mental Health Services IDF's - All others (non Mental health)	52 1,612	52 1,612			515 16,136	515 16,124			61 19,34
Other Government Total	1,664	1,664			16,651	16,639			19,96
Government and Crown Agency Sourced Total	71,203	70,783	420 F	1%	709,503	706,979	2,524 F		848,54
REVENUE TOTAL	71,203	70,783	420 F	1%	709,503	706,979	2,524 F		848,54
EXPENSES									
Outsourced Expenses									
Outsourced Funder Services	(949)	(949)			(9,334)	(9,334)			(11,312
Payments to Providers									
Personal Health									
Personal Health to allocate	-	-			-	-			
Child and Youth	(437)	(372)	(64) U	(17%)	(3,875)	(3,724)	. ,	(4%)	(4,469
Laboratory Infertility Treatment Services	(1,443) (8)	(1,486) (102)	43 F 94 F	3% 92%	(14,574) (266)	(14,855) (999)		2% 73%	(17,82 (1,20)
Maternity	(265)	(220)	(45) U	(21%)	(2,373)	(2,217)		(7%)	(2,65)
Maternity (Tertiary & Secondary)	(1,342)	(1,342)			(13,431)	(13,425)			(16,110
Pregnancy and Parenting Education	(10)	(9)	(1) U	(12%)	(112)	(109)	(3) U	(3%)	(127
Maternity Payment Schedule Neo Natal	- (647)	- (647)			- (6,473)	- (6,473)			(7,767
Sexual Health	(87)	(87)			(873)	(873)			(1,04
Adolescent Dental Benefit	(89)	(223)	134 F	60%	(1,833)	(2,024)	191 F	9%	(2,393
Other Dental Services	- (152)	- (90)	(60) 11	(60%)	-	-	236 F	26%	(1.00
Dental - Low Income Adult Child (School) Dental Services	(153) (632)	(632)	(62) U	(69%)	(668) (6,216)	(904) (6,315)		20%	(1,084 (7,578
Secondary / Tertiary Dental	(216)	(217)	1 F	1%	(2,282)	(2,170)		(5%)	(2,604
Pharmaceuticals	(6,303)	(5,877)	(426) U	(7%)	(63,142)	(62,440)	. ,	(1%)	(75,154
Pharmaceutical Cancer Treatment Drugs	(430)	(475)	45 F 8 F	9% 66%	(4,283)	(4,749)		10% 67%	(5,699
Pharmacy Services Management Referred Services	(4)	(11)	OF	00%	(38)	(114)	70 F	07 70	(13
General Medical Subsidy	(52)	(79)	27 F	34%	(593)	(792)	199 F	25%	(95
Primary Practice Services - Capitated	(3,791)	(3,785)	(6) U		(37,907)	(37,850)			(45,42
Primary Health Care Strategy - Care	(345)	(336)	(9) U	(3%)	(3,379)	(3,355)	(24) U	(1%)	(4,02)
Primary Health Care Strategy - Health Primary Health Care Strategy - Other	(504)	(389)	(114) U	(29%)	(5,128)	(3,093)	(1,234) U	(32%)	(4,67)
Practice Nurse Subsidy	(19)	(16)	(3) U	(17%)	(166)	(163)	(4) U	(2%)	(19
Rural Support for Primary Health Pro	(1,349)	(1,343)	(7) U		(13,577)	(13,548)			(16,23
Immunisation	(640)	(485)	(155) U 17 F	(32%)	(2,019)	(1,936)	· · ·	(4%)	(2,63
Radiology Palliative Care	(427) (683)	(444) (579)	(104) U	4% (18%)	(4,612) (5,116)	(4,441) (5,791)		(4%) 12%	(5,329 (6,949
Meals on Wheels	(41)	(54)	13 F	24%	(553)	(545)		(2%)	(0,04
Domicilary & District Nursing	(1,619)	(1,666)	47 F	3%	(16,585)	(16,712)		1%	(20,044
Community based Allied Health	(670)	(649)	(21) U	(3%)	(6,701)	(6,548)		(2%)	(7,84)
Chronic Disease Management and Educa Medical Inpatients	(300) (6,726)	(249) (6,726)	(51) U	(20%)	(2,498) (67,263)	(2,500) (67,263)			(2,999 (80,71
Medical Outpatients	(3,711)	(3,644)	(67) U	(2%)	(37,169)	(36,475)		(2%)	(43,764
Surgical Inpatients	(11,290)	(11,213)	(77) U	(1%)	(112,276)				(134,55
Surgical Outpatients	(1,780)	(1,751)	(29) U	(2%)	(17,717)	(17,539)		(1%)	(21,04)
Paediatric Inpatients Paediatric Outpatients	(702) (225)	(702) (225)			(7,016) (2,266)	(7,016) (2,254)		(1%)	(8,42 (2,70
Pacific Peoples' Health	(12)	(223)	9 F	41%	(236)	(2,204)		(11%)	(25
	(1,852)	(1,859)	6 F		(18,557)	(18,619)	62 F	. ,	(22,33
Emergency Services						(040)	120 F	200/	(72
Emergency Services Minor Personal Health Expenditure	(58)	(55)	(3) U	(6%)	(493)	(613)		20%	
Emergency Services	(58) (656) (302)	(605) (358)	(3) U (52) U 56 F	(6%) 9% 16%	(493) (6,369) (3,839)	(613) (6,047) (4,372)	(323) U	20% 5% 12%	(7,25) (7,25) (5,24)

Funder (cont.)

	Cı	rrent Mon	th		Y	ear to Dat	e		Annual
Part 3: DHB Funds	Actual	Budget	Variance	Variance	Actual	Budget	Variance	Variance	Budget
	\$(000)	\$(000)	\$(000)	%	\$(000)	\$(000)	\$(000)	%	\$(000)
Mental Health Mental Health to allocate									
Acute Mental Health Inpatients	(1,310)	(1,310)			(13,101)	(13,101)			- (15,721
Sub-Acute & Long Term Mental Health	(366)	(366)			(3,655)	(3,655)			(4,386
Crisis Respite	(300)	(8)	9 F	108%	(3,055) (68)	(3,033) (82)	14 F	17%	(4,300
Alcohol & Other Drugs - General	(74)	(15)	(58) U	(378%)	(262)	(155)	(107) U	(69%)	(186
Alcohol & Other Drugs - Child & Youth	(, , ,	(3)	(00) 0 3 F	(01070)	(30)	(30)	(107)0	(1%)	(36
Methadone	(95)	(95)	01		(946)	(946)		(170)	(1,136
Dual Diagnosis - Alcohol & Other Drugs	(293)	(344)	51 F	15%	(3,392)	(3,446)	54 F	2%	(4,134
Dual Diagnosis - MH/ID	(5)	(5)			(50)	(50)			(60
Eating Disorder	(11)	(11)			(108)	(108)			(130
Maternal Mental Health	(7)	(3)	(3) U		(35)	(35)			(42
Child & Youth Mental Health Services	(963)	(1,035)	72 F	7%	(10,298)	(10,370)	72 F	1%	(12,440
Forensic Services	(556)	(556)			(5,557)	(5,557)			(6,668
Kaupapa Maori Mental Health Services	(159)	(153)	(6) U	(4%)	(1,528)	(1,528)			(1,833
Kaupapa Maori Mental Health - Residential	-	-			-	-			-
Kaupapa Maori Mental Health - Inpati	-	-			-	-			-
Mental Health Community Services	(1,914)	(1,862)	(52) U	(3%)	(18,617)	(18,629)	12 F		(22,353
Prison/Court Liaison	-	-			-	-			-
Mental Health Workforce Development	-	-			-	-			-
Day Activity & Work Rehabilitation S	(130)	(198)	69 F	35%	(1,886)	(1,988)	102 F	5%	(2,385
Mental Health Funded Services for Older People	()	(36)			(358)	(358)			(430
Advocacy / Peer Support - Consumer	(45)	(48)	2 F	5%	(469)	(475)	7 F		(570
Other Home Based Residential Support	(210)	(388)	178 F	46%	(4,021)	(3,882)	(140) U	. ,	(4,658
Advocacy / Peer Support - Families	(74)	(60)	(13) U	(22%)	(694)	(614)	(79) U		(735
Community Residential Beds & Service	(437)	(454)	17 F	4%	(4,176)	(4,543)	367 F		(5,451
Minor Mental Health Expenditure	(34)	(30)	(4) U	(12%)	(307)	(304)	(3) U		(365
Inter District Flow Mental Health	(432)	(435)	3 F	1%	(4,318)	(4,350)	32 F	1%	(5,220
Mental Health Total	(7,148)	(7,416)	267 F	4%	(73,875)	(74,205)	330 F		(89,036
Public Health									
Alcohol & Drug	_	-			_	_			_
Communicable Diseases	(4)	(4)			(37)	(37)			(44
Injury Prevention	(4)	(4)			(37)	(37)			(44
Screening Programmes		_				_			_
Mental Health	(21)	(11)	(10) U	(87%)	(173)	(113)	(59) U	(52%)	(136
Nutrition and Physical Activity	(28)	(27)	(10) U	(6%)	(292)	(267)	(26) U		(320
Physical Environment	(20)	(27)	(2)0	(070)	(202)	(207)	(20) 0	(1070)	(020
Public Health Infrastructure	-	_			-	-			-
Sexual Health	-	-			-	-			-
Social Environments	-	-			-	-			-
Tobacco Control	(59)	(59)	1 F	1%	(491)	(591)	100 F	17%	(710
Well Child Promotion	2	-	2 F	.,.	2	(001)	2 F		-
Meningococcal	-	-			-	-			-
Public Health Total	(110)	(101)	(9) U	(9%)	(991)	(1,008)	17 F	2%	(1,210
			.,		. ,				
Disability Support Services									
AT & R (Assessment, Treatment and Re	(2,181)	(2,149)	(32) U	(1%)	(21,828)	(21,545)	(283) U	(1%)	(25,843
Information and Advisory	(11)	(11)		2%	(109)	(113)	4 F	4%	(135
Needs Assessment	(162)	(157)	(5) U	(3%)	(1,621)	(1,572)	(49) U	(3%)	(1,885
Service Co-ordination	(20)	(20)		(1%)	(199)	(196)	(4) U	(2%)	(235
Home Support	(1,665)	(1,501)	(164) U	(11%)	(15,286)	(15,007)	(278) U	(2%)	(18,009
Carer Support	(132)	(120)	(12) U	(10%)	(1,496)	(1,370)	(125) U		(1,654
Residential Care: Rest Homes	(3,043)	(3,264)	221 F	7%	(31,992)	(32,596)	603 F		(39,324
Residential Care: Loans Adjustment	23	23	(1) U	(2%)	212	230	(18) U		276
Long Term Chronic Conditions	(5)	-	(5) U		(49)	-	(49) U		-
Residential Care: Hospitals	(3,914)	(4,154)	240 F	6%	(39,211)	(41,267)	2,056 F	5%	(49,804
Ageing in Place	-	-			-	-			-
Environmental Support Services	(8)	(11)	3 F	29%	(94)	(111)	18 F		(133
Day Programmes	(3)	(54)	50 F	94%	(327)	(551)	225 F	41%	(661
Expenditure to Attend Treatment ETAT	-	-			-	-			-
Minor Disability Support Expenditure	(17)	(6)	(11) U	(167%)	(114)	(106)	(7) U		(119
Respite Care	(114)	(143)	29 F	20%	(1,348)	(1,432)	83 F	6%	(1,718
Child Development	(90)	(90)			(896)	(896)			(1,075
Community Health Services & Support	(39)	(75)	36 F	48%	(684)	(748)	65 F		(898
Inter District Flow Disability Support	(298)	(298)			(2,972)	(2,985)	12 F		(3,582
Disability Support Other	-	-			-	-			-
Disability Support Services Total	(11,679)	(12,031)	351 F		(118,012)		2,253 F		(144,799

Funder (cont.)

	Cu	irrent Mon	th		Y	'ear to Dat	e		Annual
Part 3: DHB Funds	Actual	Budget	Variance	Variance	Actual	Budget	Variance	Variance	Budget
	\$(000)	\$(000)	\$(000)	%	\$(000)	\$(000)	\$(000)	%	\$(000)
Maori Health									
Maori Service Development	(34)	(41)	7 F	17%	(358)	(407)	48 F	12%	(488)
Maori Provider Assistance Infrastruc	-	-			-	-			-
Maori Workforce Development	-	-			-	-			-
Minor Maori Health Expenditure	-	-			-	-			-
Whanau Ora Services	(50)	(81)	31 F	38%	(787)	(805)	18 F		(966)
Maori Health Total	(83)	(121)	38 F	31%	(1,145)	(1,212)	67 F	5%	(1,454)
Internal Allocations	-	-			-	-			-
Total Expenses	(72,335)	(72,206)	(129) U		(722,306)	(723,861)	1,555 F		(869,596)
Summary of Results									
Subtotal of IDF Revenue	1,664	1,664			16,651	16,639	11 F		19,967
Subtotal all other Revenue	69,539	69,119	420 F	1%	692,852	690,340	2,512 F		828,578
Revenue Total	71,203	70,783	420 F	1%	709,503	706,979	2,524 F		848,545
Subtotal of IDF Expenditure	(3,272)	(3,299)	26 F	1%	(33,764)	(33,165)	(599) U	(2%)	(39,762)
Subtotal all other Expenditure	(69,062)	(68,908)	(155) U		(688,543)	(690,696)	2,153 F		(829,834)
Expenses Total	(72,335)	(72,206)	(129) U		(722,306)	(723,861)	1,555 F		(869,596)
Net Surplus/ (Deficit)	(1,132)	(1,423)	291 F	20%	(12,803)	(16,881)	4,078 F	24%	(21,051)

SDHB Consolidated - Financial Statements

	Cı	urrent Mon	th		١	ear to Dat	e		Annual
Part 4: DHB Consolidated	Actual	Budget	Variance	Variance	Actual	Budget	Variance	Variance	Budget
	\$(000)	\$(000)	\$(000)	%	\$(000)	\$(000)	\$(000)	%	\$(000)
REVENUE									
Ministry of Llockh									
Ministry of Health MoH - Vote Health Non Mental Health	59.145	59,246	(101) U		590,593	501 611	(1,019) U		710,10
MoH - Vote Health Mental Health	, -	,	(101) 0		· · · ·	70.122			
PBF Adjustments	7,012	7,012			70,122	70,122			84,14
MoH Funding Subcontracts	3,382	2.861	521 F	18%	32.138	- 28.607	3,531 F	12%	34.32
MoH - Personal Health	225	2,001	108 F	93%	1.469	1,168	- ,	26%	1,40
Molt - Personal Health	225	117	100 1	9376	1,409	1,100	3011	2070	1,40
MoH - Public Health	- 617	- 565	53 F	9%	5,620	- 5,648	(28) U		6,77
MoH - Disability Support Services	366	368	(2) U	570	3,536	3,695	· · ·		4,43
Mol - Maori Health	- 500	500	(2) 0		5,550	3,095	(150)0	(470)	4,43
Clinical Training Agency	- 637	- 624	12 F	2%	6.021	- 6.019	3 F		7,26
Internal - DHB Funder to DHB Provider	037	024	IZ F	270	0,021	0,019	эг	(40%)	7,20
Ministry of Health Total	71,384	70,793	592 F	1%	709,498	706,868	2,630 F	(40%)	848,45
initial y of mealur rotal	71,304	10,195	JJZ 1	1 /0	705,450	700,000	2,030 P		040,45
Other Government									
IDF's - Mental Health Services	52	52			515	515			61
IDF's - All others (non Mental health)	1.612	1.612			16.136	16.124			19.34
Other DHB's	34	25	8 F	34%	378	241		57%	29
Training Fees and Subsidies	(23)	17	(40) U	(236%)	223	169		32%	20
Accident Insurance	855	765	90 F	12%	7,903	7,741			9,36
Other Government	408	472	(64) U	(14%)	5,449	4,657		17%	5,59
Other Government Total	2,938	2,942	(5) U		30,604	29,448	1,156 F	4%	35,42
Government and Crown Agency Total	74,322	73,735	587 F	1%	740,102	736,316	3,786 F	1%	883,88
Other Revenue									
Patient / Consumer Sourced	544	256	288 F	112%	3,150	2,834	316 F	11%	3,29
Other Income	712	828	(117) U	(14%)	7.619	8,214			9,87
Other Revenue Total	1,255	1,084	171 F	16%	10,769	11,048		(3%)	13,17
REVENUE TOTAL	75,577	74,819	758 F	1%	750.871	747.364	3.507 F		897.05
REVENUE TOTAL	15,577	74,019	730 F	1 70	750,071	747,304	3,307 F		097,05
EXPENSES									
Personnel Expenses									
Medical Personnel	(9,762)	(9,831)	69 F	1%	(97,708)	(98,565)	856 F	1%	(118,890
Nursing Personnel	(11,256)	(11,852)	597 F		(110,317)				(1133,259
Allied Health Personnel	(3,946)	(4,367)	421 F	10%	· · ·	(40,431)	· · ·	1%	
Support Services Personnel	(415)	(4,007) (861)	446 F	52%	((8,555)		33%	(-)
Management / Admin Personnel	(3,891)	(3,524)	(367) U	(10%)	(36,247)	(36,126)			(43,624
Personnel Costs Total	(29,269)	(30,434)	1,165 F	4%		(293,735)		1%	
Outsourced Expenses									
Medical Personnel	(397)	(320)	(78) U	(24%)	(3,332)	(3,557)		6%	(4,182
Nursing Personnel	(6)	(5)	(1) U	(23%)	(393)	(46)			(55
Allied Health Personnel	(73)	(68)	(5) U	(8%)	(871)	(768)			(904
Support Personnel	(48)	(37)	(11) U	(30%)	(227)	(368)	140 F	38%	(441
Management / Administration Personnel	(60)	(2)	(58) U		(445)	(335)	(110) U	(33%)	(340
Outsourced Clinical Services	(2,006)	(2,042)	36 F	2%	(21,066)	(20,825)	(240) U	(1%)	(24,942
Outsourced Corporate / Governance Services	(176)	(194)	18 F	9%	(1,789)	(2,096)		`15 %	(2,478
Outsourced Funder Services	(188)	(166)	(22) U	(13%)	(1.959)	(1.703)			(2.034

4.3

Consolidated (cont.)

		urrent Mon				ear to Dat			Annual
Part 4: DHB Consolidated	Actual \$(000)	Budget \$(000)	Variance \$(000)	Variance %	Actual \$(000)	Budget \$(000)	Variance \$(000)	Variance %	Budget \$(000)
Clinical Sumplian	+()	(000)	+()			((***)	+()		<i>(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</i>
Clinical Supplies	(2,530)	(2 421)	(00) 11	(40/)	(24.067)	(25 127)	160 F	10/	(20 105
Treatment Disposables Diagnostic Supplies & Other Clinical Supplies	(2,550)	(2,431) (148)	(99) U 46 F	(4%) 31%	(24,967) (1,471)	(25,127) (1,541)	70 F	1% 5%	(30,185 (1,848
Instruments & Equipment	(1,889)	(1,481)	(408) U	(28%)	(14,247)	(14,092)	(156) U	(1%)	(16,989
			(400) U 27 F	(20%)	(14,247)	(14,092)	(130) U 110 F	6%	(10,909) (2,150)
Patient Appliances Implants & Prosthesis	(152) (1,026)	(179) (906)	(119) U	(13%)	(9,935)	(9,359)		(6%)	(11,356
Pharmaceuticals		. ,	(119) U (121) U	(13%)		(15,701)	(191) U	(0%)	(18,941
Other Clinical Supplies	(1,702) (476)	(1,581) (284)	(121) U (192) U	(68%)	(15,891)	(15,701) (2,925)	(191) U (801) U	(27%)	(18,941) (3,511
Clinical Supplies Total	(7,877)	(7,010)	(192) U	(12%)	(3,726) (71,914)		(1,383) U	(27%)	(84,980
Infractivity & New Clinical Evenence									
Infrastructure & Non Clinical Expenses Hotel Services, Laundry & Cleaning	(1,386)	(1,106)	(280) U	(25%)	(12 470)	(11 020)	(1,659) U	(14%)	(14,036
Facilities		(1,100)	(280) U (649) U	(35%)	(13,479) (18,637)	(17,923)	(1,039) U (714) U	(14%)	(21,618
Transport	(2,495) (399)	(1,840) (367)	(32) U	(35%)	(3,690)	(3,532)	(14) U (158) U	(4%)	
•	. ,	. ,	• •	. ,	,		. ,	• • •	(4,261
IT Systems & Telecommunications	(1,097)	(1,066)	(32) U	(3%)	(9,828)	(10,423)		6%	(12,570
Interest & Financing Charges	(1,131)	(1,206)	76 F	6%	(11,580)	(12,064)	484 F	4%	(14,477
Professional Fees & Expenses	(695)	(338)	(357) U	(106%)	(2,778)	(2,902)		4%	(3,578
Other Operating Expenses	(849)	(149)	(700) U	(469%)	(4,282)		(2,033) U	(90%)	(2,539
Democracy	(20)	(57)	38 F	66%	(302)	(575)	272 F	47%	(689
Subsidiaries & Joint Ventures	-	-			-	-			
Infrastructure & Non-Clinical Supplies Total	(8,072)	(6,136)	(1,936) U	(32%)	(64,576)	(61,488)	(3,088) U	(5%)	(73,768
Payments to Providers									
Personal Health									
Personal Health to allocate	-	-			-	-			-
Child and Youth	(98)	(33)	(64) U	(194%)	(483)	(332)	(151) U	(46%)	(398
Laboratory	(1,443)	(1,486)	43 F	3%	(14,574)	(14.855)	281 F	2%	(17,827
Infertility Treatment Services	(8)	(102)	94 F	92%	(79)	(812)		90%	(1,015
Maternity	(243)	(198)	(45) U	(23%)	(2,148)	(1,992)	(156) U	(8%)	(2,388
Maternity (Tertiary & Secondary)	. ,	. ,	(40) 0	(2070)	,	,	(130) U (6) U	(89%)	
	(1)	(1)	(1) []	(170()	(13)	(7)	• • •		(8
Pregnancy and Parenting Education	(8)	(7)	(1) U	(17%)	(86)	(82)	(3) U	(4%)	(95
Maternity Payment Schedule	-	-			-	-			-
Neo Natal	-	-		(00())	-	-		(10())	-
Sexual Health	(1)	(1)		(3%)	(15)	(15)		(1%)	(17
Adolescent Dental Benefit	(63)	(196)	134 F	68%	(1,568)	(1,760)	191 F	11%	(2,076
Other Dental Services	-	-			-	-			-
Dental - Low Income Adult	(125)	(62)	(62) U		(387)	(623)	236 F	38%	(747
Child (School) Dental Services	(35)	(35)			(247)	(346)	99 F	29%	(415
Secondary / Tertiary Dental	(132)	(133)	1 F	1%	(1,441)	(1,329)	(112) U	(8%)	(1,595
Pharmaceuticals	(5,875)	(5,633)	(242) U	(4%)	(59,704)	(59,858)	155 F		(72,044
Pharmaceutical Cancer Treatment Drugs	-	-	. ,	. ,	-	-			_
Pharmacy Services	(4)	(11)	8 F	66%	(38)	(114)	76 F	67%	(137
Management Referred Services	-	-			-	-			-
General Medical Subsidy	(52)	(79)	27 F	34%	(593)	(792)	199 F	25%	(952
Primary Practice Services - Capitated	(3,791)	(3,785)	(6) U	0170	(37,907)	(37,850)	(56) U	2070	(45,421
Primary Health Care Strategy - Care	(345)	(336)	(0) U	(3%)	(3,379)	(3,355)	(24) U	(1%)	(4,026
Primary Health Care Strategy - Health	(504)	(389)	(114) U	(29%)	(5,128)	,	(1,234) U	(32%)	(4,672
Primary Health Care Strategy - Other	(304)	(303)	(114)0	(2370)	(0,120)	(0,000)	(1,204) 0	(3270)	(4,072
Practice Nurse Subsidy	(19)	(16)	(3) U	(17%)	(166)	(163)	(4) U	(2%)	(195
Rural Support for Primary Health Pro		(1,271)	(3) U (7) U	• •	(12,861)	(12,832)	(30) U	(270)	
	(1,278)			(1%)				00/	(15,374
Immunisation	(572)	(436)	(136) U	(31%)	(1,333)	(1,445)	112 F	8%	(2,048
Radiology	(149)	(167)	17 F	10%	(1,840)	(1,669)	(171) U	(10%)	(2,003
Palliative Care	(683)	(579)	(104) U	(18%)	(5,116)	(5,791)	674 F	12%	(6,949
Meals on Wheels	(6)	(19)	13 F	69%	(202)	(194)	(8) U	(4%)	(232
Domicilary & District Nursing	(513)	(560)	47 F	8%	(5,526)	(5,653)	127 F	2%	(6,773
Community based Allied Health	(176)	(154)	(21) U	(14%)	(1,753)	(1,600)	(152) U	(10%)	(1,908
Chronic Disease Management and Educa	(145)	(94)	(51) U	(54%)	(947)	(949)	3 F		(1,138
Medical Inpatients	-	-			-	-			-
Medical Outpatients	(468)	(401)	(67) U	(17%)	(4,736)	(4,043)	(694) U	(17%)	(4,845
Surgical Inpatients	(96)	(19)	(77) U	(409%)	(337)	(190)	(147) U	(77%)	(228
Surgical Outpatients	(179)	(149)	(29) U	(20%)	(1,604)	(1,523)	(81) U	(5%)	(1,822
Paediatric Inpatients	(- (110)	(_3) 0	(_0/0)	(.,301)	(.,520)	(01) 0	(0,0)	
Paediatric Outpatients		-			(12)	-	(12) U		_
	(2)	- (14)	9 F	700/	• • •	- (112)			/125
Pacific Peoples' Health	(3)	(11)		78%	(137)	(113)	(24) U		(135
Emergency Services	(149)	(156)	6 F	4%	(1,523)	(1,585)	62 F	4%	(1,896
Minor Personal Health Expenditure	(43)	(40)	(3) U	(8%)	(343)	(463)		26%	(542
Price adjusters and Premium	(156)	(105)	(52) U	50%	(1,369)	(1,047)	(323) U	31%	(1,256
Travel & Accomodation	(294)	(350)	56 F	16%	(3,759)	(4,293)	533 F	12%	(5,150
				10/	(00 170)		(0.10) 11		
Inter District Flow Personal Health	(2,542)	(2,565)	23 F	1%	(26,473)	(25,831)	(643) U	(2%)	(30,96

Consolidated (cont.)

	Cı	Irrent Mon	th		Y	ear to Dat	е		Annual
Part 4: DHB Consolidated	Actual	Budget	Variance	Variance	Actual	Budget	Variance	Variance	Budget
	\$(000)	\$(000)	\$(000)	%	\$(000)	\$(000)	\$(000)	%	\$(000)
Mental Health									
Mental Health to allocate									
Acute Mental Health Inpatients	-	-			-	-			-
Sub-Acute & Long Term Mental Health		-				-			_
Crisis Respite	3	(6)	9 F	145%	(47)	(61)	14 F	23%	(73)
Alcohol & Other Drugs - General	(74)	(15)	(58) U	(378%)	(262)	(155)	(107) U		(186)
Alcohol & Other Drugs - Child & Youth	(1-1)	(13)	(30) U 3 F	(0/0/0)	(30)	(100)	(107)0	(1%)	(36)
Methadone		(3)	51		(30)	(30)		(170)	(30)
Dual Diagnosis - Alcohol & Other Drugs	(12)	(63)	51 F	81%	(575)	(629)	54 F	9%	(754)
Dual Diagnosis - Alconol & Other Drugs Dual Diagnosis - MH/ID	(12)	(03)	511	0170	(373)	(029)	J 4 I	570	(734)
Eating Disorder	(11)	(11)			(108)	(108)			(130)
Maternal Mental Health	(7)	(11)	(3) U		(35)	(35)			(130)
Child & Youth Mental Health Services	(382)	(454)	(3) 0 72 F	16%	(4,491)	(4,564)	72 F	2%	(5,472)
Forensic Services	(302)	(+5+)	12 1	10 /0	(4,431)	(+,30+)	12 1	270	(0,472)
Kaupapa Maori Mental Health Services	(12)	(6)	(6) U		(61)	(61)			(74)
Kaupapa Maori Mental Health - Residentual	(12)	(0)	(0) 0		(01)	(01)			(1-)
Kaupapa Maori Mental Health - Inpati		-				-			-
Mental Health Community Services	(156)	(104)	(52) U	(50%)	(1,038)	(1,050)	12 F	1%	(1,258)
Prison/Court Liaison	(150)	(10-)	(32) 0	(0070)	(1,000)	(1,000)	12 1	170	(1,200)
Mental Health Workforce Development									
Day Activity & Work Rehabilitation S	(66)	(135)	69 F	51%	(1,252)	(1,354)	102 F	8%	(1,624)
Mental Health Funded Services for Older Peop		(100)	00 1	0170	(1,202)	(1,004)	102 1	070	(1,024)
Advocacy / Peer Support - Consumer	(21)	(23)	2 F	10%	(226)	(233)	7 F	3%	(280)
Other Home Based Residential Support	(152)	(330)	178 F	54%	(3,439)	(3,299)	(140) U		(3,959)
Advocacy / Peer Support - Families	(63)	(50)	(13) U	(27%)	(588)	(508)	(79) U		(608)
Community Residential Beds & Service	(437)	(454)	17 F	(27 %)	(4,176)	(4,543)	367 F		(5,451)
Minor Mental Health Expenditure	(34)	(30)	(4) U	(12%)	(307)	(304)	(3) U		(365)
Inter District Flow Mental Health	(432)	(435)	3 F	1%	(4,318)	(4,350)	(3) O 32 F		(5,220)
Mental Health Total	(1,856)	(2,124)	267 F	13%	(20,953)	(21,283)	330 F		(25,530)
Public Health									
Alcohol & Drug									
Communicable Diseases	-	-			-	-			-
Injury Prevention	-	-			-	-			-
Mental Health	(10)	-	(10) U		(59)	-	(59) U		-
Screening Programmes	(10)	-	(10) 0		(39)	-	(39) 0		-
Nutrition and Physical Activity	(28)	(27)	(2) U	(6%)	(292)	(267)	(26) U	(10%)	(320)
Physical Environment	(20)	(21)	(2) 0	(0 /0)	(232)	(207)	(20) 0	(1070)	(520)
Public Health Infrastructure	_	-			-	-			-
Sexual Health	-	-			-	-			-
Social Environments	-	-			-	-			-
Tobacco Control	(33)	(33)	1 F	2%	(232)	(333)	100 F	30%	(399)
Well Child Promotion	(33)	(33)	2 F	2 %	(232)	(333)	100 F 2 F		(399)
Meningococcal	2	-	2 F		2	-	2 F		-
Public Health Total	(69)	(60)	(9) U	(16%)	(582)	(599)	17 F	3%	(719)
	(69)	(00)	(9) 0	(10%)	(302)	(599)	17 F	3%	(719)

4.3

Consolidated (cont.)

	Cu	Irrent Mon	th		Y	'ear to Dat	е		Annual
Part 4: DHB Consolidated	Actual	Budget	Variance	Variance	Actual	Budget	Variance	Variance	Budget
	\$(000)	\$(000)	\$(000)	%	\$(000)	\$(000)	\$(000)	%	\$(000)
Disability Support Services									
AT & R (Assessment, Treatment and Re	(315)	(284)	(32) U	(11%)	(3,172)	(2,890)	(283) U	(10%)	(3,457)
Information and Advisory	(11)	(11)	(02) 0	2%	(109)	(113)	(200) 0 4 F	4%	(135)
Needs Assessment	(24)	(29)	5 F	17%	(248)	(299)	51 F	17%	(358)
Service Co-ordination	(24)	(29)	51	17 /0	. ,	(299)	(4) U		(330)
	-	(1 501)	(164) 11	(110/)	(4)	(15 007)			(10,000)
Home Support	(1,665)	(1,501)	(164) U	(11%)	(15,286)	(15,007)	(278) U	· · ·	(18,009)
Carer Support	(132)	(120)	(12) U	(10%)	(1,496)	(1,370)	(125) U		(1,654)
Residential Care: Rest Homes	(3,043)	(3,264)	221 F	7%	(31,992)	(32,596)	603 F	2%	(39,324)
Residential Care: Loans Adjustment	23	23	(1) U	(2%)	212	230	(18) U		276
Long Term Chronic Conditions	(5)	-	(5) U		(49)	-	(49) U		-
Residential Care: Hospitals	(3,914)	(4,154)	240 F	6%	(39,211)	(41,267)	2,056 F	5%	(49,804)
Ageing in Place	-	-			-	-			-
Environmental Support Services	(6)	(9)	3 F	36%	(71)	(89)	18 F	20%	(107)
Day Programmes	(3)	(54)	50 F	94%	(327)	(551)	225 F	41%	(661)
Expenditure to Attend Treatment ETAT	-	-			-	·			-
Minor Disability Support Expenditure	(17)	(6)	(11) U	(167%)	(72)	(64)	(7) U	(11%)	(77)
Respite Care	(114)	(143)	29 F	20%	(1,348)	(1,432)	83 F	6%	(1,718)
Child Development	(114)	(140)	20 1	2070	(1,040)	(1,402)	00 1	070	(1,710)
Community Health Services & Support	(18)	(54)	36 F	67%	(473)	(538)	65 F	12%	(646)
	()	· · ·	30 F	07 70	. ,	· · ·		1270	· · ·
Inter District Flow Disability Support	(298)	(298)			(2,972)	(2,985)	12 F		(3,582)
Disability Support Other	-	-			-	-			-
Disability Support Services Total	(9,544)	(9,905)	361 F	4%	(96,618)	(98,972)	2,353 F	2%	(119,256)
Maori Health									
Maori Service Development	(18)	(25)	7 F	28%	(201)	(249)	48 F	19%	(299)
Maori Provider Assistance Infrastruc	()	()		2070	(_0.)	(=,			(_00)
Moari Workforce Development	_	-			_	_			_
Minor Maori Health Expenditure	-	-			_	-			-
Whanau Ora Services	- (44)	-	24 5	420/	(706)	(704)	10 F	20/	(000)
	(41)	(72)	31 F	43%	(706)	(724)	18 F	2%	(869)
Maori Health Total	(59)	(97)	38 F	39%	(907)	(973)	67 F	7%	(1,168)
Internal Allocations	-	-			-	-			-
Total Evenence	(70,906)	(70 477)	(4 740) 11	(29/)	(772.350)	(774 670)	4 220 E		(022.000)
Total Expenses	(79,896)	(70,177)	(1,719) U	(2%)	(773,350)	(774,079)	1,329 F		(933,008)
Net Surplus/ (Deficit)	(4,319)	(3,358)	(961) U	(29%)	(22,479)	(27,315)	4,837 F	18%	(35,955)
Part 4.1 A: Supplementary Information to Stat	ement of F	inancial P	erformance)					
Depreciation - Clinical Equipment	(726)	(717)	(8) U	(1%)	(6,827)	(6,861)	34 F		(8,316)
			(0) U	(170)		()	34 F 66 F	10/	()
Depreciation - Non Residential Buildings & Pla		(673)	0 5	0.07	(6,600)	(6,666)		1%	(8,016)
Depreciation - Motor Vehicles	(23)	(25)	2 F	8%	(226)	(237)	10 F	4%	(286)
Depreciation - Information Techology	(347)	(368)	20 F	6%	(3,292)	(3,443)	151 F	4%	(4,194)
Depreciation - Other Equipment	(39)	(46)	8 F	16%	(448)	(445)	(3) U		(539)
Total Depreciation	(1,807)	(1,829)	22 F	1%	(17,393)	(17,651)	258 F	1%	(21,351)
Interest Cost from Funder Loans	-	-			-	-			-
Interest Costs from CHFA	(343)	(389)	47 F	12%	(3,633)	(3,895)	262 F	7%	(4,674)
Financing Component of Operating Leases	(23)	(32)	9 F	29%	(251)	(318)	67 F	21%	(382)

	Current	Previous			Current Year	
Part 4: DHB Consolidated	Month Actual \$ (000)	Month Actual \$(000)	Movement \$(000)	Current Budget \$(000)	Opening Balance Sheet \$(000)	Annual Budget \$(000)
Part 4.2: Balance Sheet						
Current Assets						
Petty Cash	8	8	-	16	16	16
Bank	75	(59)	134	-	(152)	-
Short Term Investments - HBL	1,955	2,626	(671)	(499)	3,795	(832
Short Term Investments	-	-	-	-	-	-
Prepayments Accounts Receivable	2,849 8,372	2,672 8,753	177 (381)	1,592 7,318	1,592 6,353	1,59) 7,42
Provision for Doubtful Debts	(2,739)	(2,377)	(362)	(2,377)	(2,377)	(2,37)
Accrued Debtors	26,626	24,223	2,403	24,599	24,599	24,59
Inventory / Stock	4,554	4,522	31	4,677	4,677	4,67
Assets Held for Resale	451	451	-	-	451	-
Current Assets Total	42,151	40,820	1,331	35,324	38,954	35,099
Non Current Assets						
Land, Buildings & Plant	253,840	253,370	470	263,420	252,401	266,555
Clinical Equipment (incl Finance Leases)	118,751	118,482	269	123,353	114,286	125,28
Other Equipment (incl Finance Leases)	15,465	15,528	(62)	15,974	15,324	16,12
Information Technology	44,963	44,548	415	48,365	43,132	49,53
Motor Vehicles	2,332	2,332	-	2,332	2,332	2,33
Provision Depreciation - Buildings & Plant	(16,797)	(16,123)	(673)	(16,796)	(10,200)	(18,132
Provision Depreciation - Clinical Equipment	(85,722)	(84,998)	(724)	(85,877)	(79,017)	(87,333
Provision Depreciation - Other Equipment	(12,551)	(12,512)	(39)	(12,552)	(12,107)	(12,646
Provision Depreciation - Information Technol	(34,756)	(34,406)	(349)	(34,986)	(31,544)	(35,738
Provision Depreciation - Motor Vehicles	(1,389)	(1,367)	(23)	(1,400)	(1,163)	(1,449
WIP	10,957	10,907	50	5,333	5,333	5,333
Investment in Associates Long Term Investments	- 4,469	4,469	-	- 4,469	- 4,469	- 4,469
Non Current Assets Total	299,562	300,229	(667)	311,634	303,246	314,33
	,		(001)	011,001	••••,= ••	01.,000
Current Liabilities						
Accounts Payable Control	(6,088)	(7,917)	1,829	(5,809)	(6,352)	(6,364
Accrued Creditors	(38,250)	(34,693)	(3,557)	(30,281)	(30,601)	(30,217
Income Received in Advance	(1,600)	(1,886)	286	(340)	(340)	(340
Capital Charge Payable GST & Tax Provisions	(2,935) (9,797)	(2,201) (6,040)	(734)	(2,943) (4,007)	- (4,519)	(3,28
Term Loans - Finance Leases (current portic	(1,269)	(1,396)	(3,757) 127	(1,426)	(1,426)	(1,426
Term Loans - Crown (current portion)	(16,766)	(1,390)	-	(16,210)	(16,843)	(15,999
Payroll Accrual & Clearing Accounts	(15,114)	(16,977)	1,863	(20,756)	(16,221)	(18,788
Employee Entitlement Provisions	(51,343)	(50,146)	(1,197)	(48,258)	(50,338)	(48,258
Current Liabilities Total	(143,161)	(138,021)	(5,140)	(130,030)	(126,640)	(124,677
WORKING CAPITAL	(101,009)	(97,200)	(3,809)	94,706	87,686	89,578
		, , ,				
NET FUNDS EMPLOYED	198,553	203,029	(4,476)	216,928	215,560	224,75
Non Current Liabilities						
Long Service Leave - Non Current Portion	(3,203)	(3,203)	-	(3,203)	(3,203)	(3,203
Retirement Gratuities - Non Current Portion	(10,844)	(10,844)	-	(12,361)	(10,888)	(12,36
Other Employee Entitlement Provisions	(1,473)	(1,473)	-	-	(1,473)	-
Term Loans - Finance Leases (non current p Term Loans - Crown (non current portion)	(2,501) (83,999)	(2,667)	166	(2,830)	(3,646)	(2,850
Custodial Funds	(83,999)	(83,990) 19	(9)	(84,317)	(84,317)	(84,31
Non Current Liabilities Total	(102,000)	(102,157)	157	(102,711)	(103,527)	(102,73 ⁻
Crown Equity Crown Equity	(179,788)	(179,788)	-	(219,285)	(179,788)	(231,28
Crown Equity Injection	(17,704)	(17,704)	-	(0,200)	(10,704)	(5,154
Crown Equity Repayments	707	707	-	-	707	70
Trust and Special Funds (no restricted use)	(5,314)	(5,202)	(112)	-	(5,406)	-
Revaluation Reserve	(94,120)	(94,120)	-	(94,120)	(94,120)	(94,120
Retained Earnings - DHB Governance & Fur	3,910	3,697	213	-	4,023	-
Retained Earnings - DHB Provider	143,422	140,336	3,086	-	133,726	-
Retained Earnings - Funds	52,334	51,202	1,132	-	39,531	-
	199,666	195,235	4,431	199,188	177,280	207,82
Retained Earnings - Total			/ 310	(114 217)	(112 031)	(100 00
Crown Equity Total	(96,552)	(100,871)	4,319	(114,217)	(112,031)	(122,02

SDHB Balance Sheet continued

	Current	Previous			Current Year	
Part 4: DHB Consolidated	Month Actual \$ (000)	Month Actual \$(000)	Movement \$(000)	Current Budget \$(000)	Opening Balance Sheet \$(000)	Annual Budget \$(000)
Part 4.3: Statement of Movement in Equity						
Total equity at beginning of the period	(102,034)	(102,034)	-	(117,575)	(102,035)	(112,032)
Net Results for Period	22,479	18,159	4,319	3,358	-	35,955
Revaluation of Fixed Assets	-	-	_	-	-	-
Equity Injections - Deficit Support	(17,165)	(17,165)	-	-	(10,165)	(41,500)
Equity Injections - Capital Projects	(539)	(539)	-	-	(539)	(5,154)
Equity Repayments	707	707	-	-	707	707
Other	-		-	-	-	-
Movement in Trust and Special Funds	-		-	-	-	-
Total Equity at end of the period	(96,552)	(100,872)	4,319	(114,217)	(112,032)	(122,024)

SDHB Cashflow

	Cu	irrent Mon	ith	Y	'ear to Dat	e	Annual
Part 4: DHB Consolidated	Actual	Budget	Variance	Actual	Budget	Variance	Budget
	\$(000)	\$(000)	\$(000)	\$(000)	\$(000)	\$(000)	\$(000)
Part 4.4 Statement of Cashflows							
Operating Revenue							
Government and Crown Agency Revenue	72,376	73,693	(1,317) U	733,528	735,536	(2,008) U	882,979
Other Revenue Received	1,194	1,104	90 F	9,787	9,396	391 F	
Total Receipts	73,570	74,798	(1,228) U	743,315	744,932	(1,617) U	894,209
Payments for Personnel	(29,936)	(29,849)	(87) U	(290,035)	(291,281)	1,246 F	(354,438)
Payments for Supplies	(10,830)	(13,328)	2,498 F	(96,609)	(133,247)		(159,493)
Capital Charge Paid	-	-		(4,403)	(4,382)	. ,	
GST (Net) & Tax	3,757	-	3,757 F	5,278	(698)	5,976 F	(1,360)
Payment to own DHB Provider (Eliminated)	-	-		-	-		
Payment to own DHB Governance & Funding Admin	-	(2,200)	(242) 11	-	-	(1.004) 11	(20.760)
Payments to other DHBs Payments to Providers	(3,640) (31,724)	(3,299) (28,832)	(342) U	(35,029) (316,889)	(33,165) (286,203)	(1,864) U (30,686) U	
Total Payments	(72,373)	(20,032)		(737,687)	(748,976)		(907,930)
Net Cashflow from Operating	1,197	(510)	1,707 F	5,628	(4,044)	9,671 F	(13,721)
ind outside in our operating	1,101	(010)	.,	0,020	(1,011)	0,0111	(10,121)
Investing Activities			(a=)			<i>(</i> <i>(</i>) <i>((</i>) <i>((((((((((</i>	
Interest Receipts 3rd Party	61	158	(97) U	982	1,583	(601) U	1,900
Sale of Fixed Assets	-	-		1	451	(450) U	451
Capital Expenditure							
Land, Buildings & Plant	(672)	(1,568)	896 F	(5,486)	(11,018)	5,533 F	(14,154)
Clinical Equipment	(81)	(967)	885 F	(4,567)	(9,067)	4,499 F	(11,000)
Other Equipment	54	(75)	129 F	(156)	(650)	494 F	(800)
Information Technology	(143)	(533)	390 F	(3,067)	(4,733)	1,666 F	(5,800)
Motor Vehicles	-	-		-	-		-
Work in Progress (Check)	-	-	0.000 F	-	-	40.402 5	-
Total Capital Expenditure	(842)	(3,143)	2,300 F	(13,276)	(25,468)	12,193 F	(31,754)
Increase in Investments and Restricted & Trust Funds As	-	-		-	-		-
Net Cashflow from Investing	(781)	(2,984)	2,203 F	(12,293)	(23,434)	11,141 F	(29,403)
Financing Activities							
Equity Injections - Capital	-	-		4,150	-	4,150 F	5,154
Equity Injections - Deficit Support	-			7,000		(22,500) U	41,500
Interest Paid	(343)	(421)	79 F	(3,633)	(4,215)	582 F	(5,058)
New Debt	(504)	(074)	(204) 11	(4 740)	(4.040)	(40.4) 11	(4.000)
Private Sector CHFA	(591)	(271)	(321) U	(1,740)	(1,316)		(1,396)
CHFA	(20)	-	(20) U	(712)	(633)	(79) U	(844)
Repaid Debt							
Private Sector	-	-		-	-		
CHFA	-	-		-	-		
Other Non-Current Liability Movement							
Other Equity Movement	-	-		(19)	-	(19) U	(707)
Net Cashflow from Financing	(954)	(692)	(262) U	5,046	23,336	(18,290) U	38,649
Net Cashflow	(538)	(4 490)	3 ,648 F	(1 640)	(4,142)	2 522 5	(4,475)
Plus Cash (Opening)	2,575		(1,127) U	(1,619) 3,658	3,658	2,523 F	3,658
Cash (Closing)	2,075	(483)		2,039	(484)		(817)
Corpy Ecoupied Chook							
Carry Forward Check							
Closing Cash made up of:	•	10		•	40		40
Petty Cash Bank (Overdraft)	8 75	16		8 75	16		16 (832)
Short Term Investments	75 1,955	(499)		1,955	- (499)		(032)
	1,900	(499)		1,900	(499)		