

Vote Health

APPROPRIATION MINISTER(S): Minister of Health (M36)

APPROPRIATION ADMINISTRATOR: Ministry of Health

RESPONSIBLE MINISTER FOR MINISTRY OF HEALTH: Minister of Health

Overview of the Vote

Vote Health (\$18,225 million in 2018/19) is the primary source of funding for New Zealand's health and disability system (ACC is the other major source of public funding). It is a significant investment for the Crown, typically making up around a fifth of government expenditure. The services funded are intended to support all New Zealanders to live well, stay well, and get well, in a health system that is people-powered, provides services closer to home, is designed for value and high performance, and works as one team in a smart system. The Vote consists of:

- \$13,236 million (72.6% of the Vote) is provided to the 20 district health boards (DHBs) for services to meet the needs of each district's population, taking into account regional considerations, government priorities, and the strategic direction set for the health sector. Among the many services provided or funded by DHBs are hospital care; most aged care, mental health, and primary care services; the combined pharmaceuticals budget; and some public health services.
- \$2,926 million (16.1% of the Vote) funds health and disability services, funded at a national level, and managed by the Ministry of Health, consisting of:
 - National Disability Support Services (\$1,269 million or 7.0% of the Vote)
 - Public Health Service Purchasing (\$423 million or 2.3% of the Vote)
 - National Elective Services (\$364 million or 2.0% of the Vote)
 - Primary Health Care Strategy (\$266 million or 1.5% of the Vote)
 - National Maternity Services (\$181 million or 1.0% of the Vote)
 - National Emergency Services (\$130 million or 0.7% of the Vote)
 - National Child Health Services (\$89 million or 0.5% of the Vote)
 - National Personal Health Services (\$78 million or 0.4% of the Vote)
 - National Mental Health Services (\$68 million or 0.4% of the Vote)
 - Other national services (\$58 million or 0.3% of the Vote).
- \$783 million (4.3% of the Vote) for the support, oversight, governance, and development of the health and disability sectors, consisting of:
 - Ministry of Health operating costs (\$207 million or 1.1% of the Vote)
 - Supporting Equitable Pay (\$348 million or 1.9% of the Vote)
 - Health Workforce Training and Development (\$187 million or 1.0% of the Vote)
 - Monitoring and Protecting Health and Disability Consumer Interests (\$30 million or 0.2% of the Vote)
 - Other expenses (\$11 million or 0.1% of the Vote).
- \$27 million (or 0.1% of the Vote) for Other Expenses including \$24 million for Provider Development.
- \$1,253 million (6.9% of the Vote) for capital investment, consisting of:
 - sector capital investment (\$1,090 million or 6.0% of the Vote)
 - equity support for DHB deficits (\$139 million or 0.7% of the Vote)
 - residential care loans (\$15 million or 0.1% of Vote)
 - Ministry of Health capital expenditure (\$9 million or 0.1% of Vote).

Details of these appropriations are set out in Parts 2-4.

Details of Appropriations and Capital Injections

Annual and Permanent Appropriations

Titles and Scopes of Appropriations by Appropriation Type	2017/18		2018/19
	Final Budgeted \$000	Estimated Actual \$000	Budget \$000
Departmental Output Expenses			
Health Sector Information Systems (M36) This appropriation is limited to the provision of information technology services and the publication of data and information derived from these services to the health and disability system.	53,395	52,306	55,618
Managing the Purchase of Services (M36) This appropriation is limited to purchasing services for the public and health and disability sector on behalf of the Crown, for those services where the Ministry has responsibility for the purchasing function (i.e. funding is not devolved to another entity).	42,523	42,523	41,974
Payment Services (M36) This appropriation is limited to the administration and audit of contracts and payments on behalf of the Crown and Crown agencies.	16,440	16,440	17,340
Regulatory and Enforcement Services (M36) This appropriation is limited to implementing, enforcing and administering health- and disability-related legislation and regulations, and provision of regulatory advice to the sector and to Ministers, and support services for committees established under statute or appointed by the Minister pursuant to legislation.	24,111	24,111	24,111
Sector Planning and Performance (M36) This appropriation is limited to advising on and co-ordinating health sector planning and performance improvement; and funding, monitoring, and supporting the governance of, health sector Crown entities, and sector co-ordination.	47,474	47,474	47,426
Total Departmental Output Expenses	183,943	182,854	186,469
Departmental Capital Expenditure			
Ministry of Health - Capital Expenditure PLA (M36) This appropriation is limited to the purchase or development of assets by and for the use of the Ministry of Health, as authorised by section 24(1) of the Public Finance Act 1989.	9,929	9,929	8,837
Total Departmental Capital Expenditure	9,929	9,929	8,837
Non-Departmental Output Expenses			
Auckland Health Projects Integrated Investment Plan (M36) The appropriation is limited to expenses incurred in developing an Integrated Investment Plan for Auckland Health projects.	370	185	1,000
Health and Disability Support Services - Auckland DHB (M36) This appropriation is limited to personal and public health services, and management outputs from Auckland DHB.	1,252,081	1,252,081	1,320,417
Health and Disability Support Services - Bay of Plenty DHB (M36) This appropriation is limited to personal and public health services, and management outputs from Bay of Plenty DHB.	694,749	694,749	724,436
Health and Disability Support Services - Canterbury DHB (M36) This appropriation is limited to personal and public health services, and management outputs from Canterbury DHB.	1,383,508	1,379,508	1,421,052
Health and Disability Support Services - Capital and Coast DHB (M36) This appropriation is limited to personal and public health services, and management outputs from Capital and Coast DHB.	735,633	735,633	765,489

Titles and Scopes of Appropriations by Appropriation Type	2017/18		2018/19
	Final Budgeted \$000	Estimated Actual \$000	Budget \$000
Health and Disability Support Services - Counties-Manukau DHB (M36) This appropriation is limited to personal and public health services, and management outputs from Counties-Manukau DHB.	1,375,692	1,375,692	1,439,807
Health and Disability Support Services - Hawkes Bay DHB (M36) This appropriation is limited to personal and public health services, and management outputs from Hawkes Bay DHB.	482,426	482,426	497,215
Health and Disability Support Services - Hutt DHB (M36) This appropriation is limited to personal and public health services, and management outputs from Hutt DHB.	384,880	384,880	397,128
Health and Disability Support Services - Lakes DHB (M36) This appropriation is limited to personal and public health services, and management outputs from Lakes DHB.	314,712	314,712	326,173
Health and Disability Support Services - MidCentral DHB (M36) This appropriation is limited to personal and public health services, and management outputs from MidCentral DHB.	494,253	494,253	511,676
Health and Disability Support Services - Nelson-Marlborough DHB (M36) This appropriation is limited to personal and public health services, and management outputs from Nelson-Marlborough DHB.	418,363	418,363	437,795
Health and Disability Support Services - Northland DHB (M36) This appropriation is limited to personal and public health services, and management outputs from Northland DHB.	564,289	564,289	599,300
Health and Disability Support Services - South Canterbury DHB (M36) This appropriation is limited to personal and public health services, and management outputs from South Canterbury DHB.	177,019	177,019	181,432
Health and Disability Support Services - Southern DHB (M36) This appropriation is limited to personal and public health services, and management outputs from Southern DHB.	846,386	846,386	876,351
Health and Disability Support Services - Tairāwhiti DHB (M36) This appropriation is limited to personal and public health services, and management outputs from Tairāwhiti DHB.	160,655	160,655	165,267
Health and Disability Support Services - Taranaki DHB (M36) This appropriation is limited to personal and public health services, and management outputs from Taranaki DHB.	335,663	335,663	345,188
Health and Disability Support Services - Waikato DHB (M36) This appropriation is limited to personal and public health services, and management outputs from Waikato DHB.	1,150,497	1,150,497	1,197,666
Health and Disability Support Services - Wairarapa DHB (M36) This appropriation is limited to personal and public health services, and management outputs from Wairarapa DHB.	135,250	135,250	140,030
Health and Disability Support Services - Waitemata DHB (M36) This appropriation is limited to personal and public health services, and management outputs from Waitemata DHB.	1,464,458	1,464,458	1,531,538
Health and Disability Support Services - West Coast DHB (M36) This appropriation is limited to personal and public health services, and management outputs from West Coast DHB.	128,077	128,077	132,618
Health and Disability Support Services - Whanganui DHB (M36) This appropriation is limited to personal and public health services, and management outputs from Whanganui DHB.	218,556	218,556	225,131

Titles and Scopes of Appropriations by Appropriation Type	2017/18		2018/19
	Final Budgeted \$000	Estimated Actual \$000	Budget \$000
Health Sector Projects Operating Expenses (M36) This appropriation is limited to operating expenses associated with the governance, planning and development of health sector capital projects.	10,328	8,628	3,500
Health Workforce Training and Development (M36) This appropriation is limited to the provision, purchase, and support of workforce development for people working in the health and disability sector and of services that support those workforces to be sustainable, flexible, and fit-for-purpose.	186,745	186,745	186,745
Monitoring and Protecting Health and Disability Consumer Interests (M36) This appropriation is limited to the provision, purchase, and support of services that monitor and protect health and disability consumer interests.	29,846	29,846	29,546
National Child Health Services (M36) This appropriation is limited to the provision, purchase, and support of child health services.	83,001	83,001	89,254
National Contracted Services - Other (M36) This appropriation is limited to the purchase of other services directly by the Crown to support the health and disability services sector, including the national management of pharmaceuticals, and health research.	25,220	25,220	28,720
National Disability Support Services (M36) This appropriation is limited to the provision, purchase, and support of disability support services.	1,237,680	1,237,680	1,268,594
National Elective Services (M36) This appropriation is limited to the provision, purchase, and support of elective surgery services.	356,145	354,185	363,517
National Emergency Services (M36) This appropriation is limited to the provision, purchase, and support of emergency services.	110,118	108,118	129,597
National Health Information Systems (M36) This appropriation is limited to the provision of information technology services for the New Zealand health and social sectors.	5,028	5,028	8,042
National Māori Health Services (M36) This appropriation is limited to the provision, purchase, and support of health and disability services that are either for Māori or by Māori.	2,750	2,750	6,828
National Maternity Services (M36) This appropriation is limited to the provision, purchase, and support of maternity services.	166,667	166,667	181,067
National Mental Health Services (M36) This appropriation is limited to the provision, purchase, and support of mental health services.	64,556	64,556	68,094
National Personal Health Services (M36) This appropriation is limited to personal healthcare and support services purchased directly by the Crown, including mobile surgical services, telephone and online advice services, hospice services, sexual and reproductive health services, and services associated with the implementation of the Oral Health and Cancer Control Strategies.	82,707	82,707	78,151
Primary Health Care Strategy (M36) This appropriation is limited to services to implement and deliver the Primary Health Care Strategy.	193,405	193,405	266,396
Problem Gambling Services (M36) This appropriation is limited to the provision, purchase, and support of services that minimise the harm from gambling, in accordance with the Gambling Act 2003.	17,821	14,821	20,941
Public Health Service Purchasing (M36) This appropriation is limited to the provision, purchase, and support of public health services.	375,567	365,340	423,424
Supporting Equitable Pay (M36) This appropriation is limited to costs related to supporting equitable pay for care and support workers, and mental health and addiction support workers.	299,300	299,300	348,000
Total Non-Departmental Output Expenses	15,964,401	15,941,329	16,737,125

Titles and Scopes of Appropriations by Appropriation Type	2017/18		2018/19
	Final Budgeted \$000	Estimated Actual \$000	Budget \$000
Non-Departmental Other Expenses			
International Health Organisations (M36) This appropriation is limited to the Crown funding New Zealand's World Health Organization (WHO) membership and contributing to specific WHO projects.	1,843	1,843	2,030
Legal Expenses (M36) This appropriation is limited to funding the defence and settlement of health-related or disability-related legal claims against the Crown.	2,028	2,028	1,028
Provider Development (M36) This appropriation is limited to supporting the development of health or disability service providers, in particular, those supporting vulnerable populations, such as Māori and Pacific peoples.	18,539	18,539	24,289
Total Non-Departmental Other Expenses	22,410	22,410	27,347
Non-Departmental Capital Expenditure			
Equity for Capital Projects for DHBs and Health Sector Crown Agencies (M36) This appropriation is limited to providing capital contributions to health sector Crown entities or agencies for new investments and reconfiguration of their balance sheets.	120,639	48,866	967,383
Equity Support for DHB deficits (M36) This appropriation is limited to equity injections to District Health Boards to address working capital requirements.	86,924	86,924	139,211
Health Sector Projects (M36) This appropriation is limited to the provision or purchase of health sector assets.	280,662	216,990	123,000
Residential Care Loans - Payments (M36) This appropriation is limited to the provision of interest-free loans to people entering into aged residential care facilities.	15,000	15,000	15,000
Total Non-Departmental Capital Expenditure	503,225	367,780	1,244,594
Multi-Category Expenses and Capital Expenditure			
Policy Advice and Ministerial Servicing MCA (M36) The overarching purpose of this appropriation is to provide policy advice and other support to Ministers in discharging their policy decision-making and other portfolio responsibilities.	20,591	19,791	20,991
Departmental Output Expenses			
Ministerial Servicing This category is limited to the provision of services to Ministers to enable them to discharge their portfolio responsibilities other than policy decision-making.	5,202	5,202	4,702
Policy Advice This category is limited to the provision of advice (including second opinion advice and contributions to policy advice led by other agencies) to support decision-making by Ministers on government policy matters.	15,389	14,589	16,289
Total Multi-Category Expenses and Capital Expenditure	20,591	19,791	20,991
Total Annual and Permanent Appropriations	16,704,499	16,544,093	18,225,363

Capital Injection Authorisations

	2017/18		2018/19
	Final Budgeted \$000	Estimated Actual \$000	Budget \$000
Ministry of Health - Capital Injection (M36)	2,000	2,000	-

Supporting Information

Part 1 - Vote as a Whole

1.1 - New Policy Initiatives

Policy Initiative	Appropriation	2017/18 Final Budgeted \$000	2018/19 Budget \$000	2019/20 Estimated \$000	2020/21 Estimated \$000	2021/22 Estimated \$000
District Health Boards - Additional Support	Health and Disability Support Services - DHBs Non-departmental output expense	-	549,000	549,000	549,000	549,000
Very Low Cost General Practitioner Visits for Community Services Card Holders	Primary Health Care Strategy Non-departmental output expense	500	58,608	100,000	100,000	100,000
	Managing the Purchase of Services Departmental output expense	1,500	400	-	-	-
Disability Support Services - Additional Support	National Disability Support Services Non-departmental output expense	9,000	58,407	54,407	46,407	42,407
Elective Surgical Procedures	National Elective Services Non-departmental output expense	-	31,500	31,500	31,500	31,500
National Maternity Services - Additional Support	National Maternity Services Non-departmental output expense	9,000	25,900	25,900	25,900	25,900
National Bowel Screening Programme Implementation Year Two	Public Health Service Purchasing Non-departmental output expense	-	13,391	13,184	13,314	14,196
	Health Sector Information Systems Departmental output expense	-	4,000	4,000	2,500	2,500
Meeting Air Ambulance Service Cost Pressures	National Emergency Services Non-departmental output expense	-	14,700	14,700	14,700	14,700
	Managing the Purchase of Services Departmental output expense	-	300	300	300	300
National Maternity Services Settlement drawdown from Contingency Fund	National Maternity Services Non-departmental output expense	8,400	8,400	8,400	8,400	8,400
Primary Health Care - Additional Support	Primary Health Care Strategy Non-departmental output expense	-	9,499	9,499	9,499	9,499
Improving Mental Health Services for Children in Canterbury and Kaikōura	National Mental Health Services Non-departmental output expense	700	7,300	10,000	10,000	-
Pay Equity drawdown from Contingency Fund	Supporting Equitable Pay Non-departmental output expense	22,800	-	-	-	-
	Managing the Purchase of Services Departmental output expense	1,200	-	-	-	-

Policy Initiative	Appropriation	2017/18 Final Budgeted \$000	2018/19 Budget \$000	2019/20 Estimated \$000	2020/21 Estimated \$000	2021/22 Estimated \$000
Transforming the Disability Support System drawdown from Contingency Fund	National Disability Support Services Non-departmental output expense	-	5,622	4,829	-	-
	Managing the Purchase of Services Departmental output expense	-	6,971	6,420	-	-
Extending Zero Fees Doctors' Visits to Under 14s	Primary Health Care Strategy Non-departmental output expense	-	2,858	4,900	4,900	4,900
Expansion of School Based Health Services	National Child Health Services Non-departmental output expense	-	4,253	4,253	4,253	4,253
National Bowel Screening Business Case drawdown from Contingency Fund	Public Health Service Purchasing Non-departmental output expense	1,832	3,713	3,585	3,300	3,300
Integrated Therapies Pilot for 18-25 Year Olds	National Mental Health Services Non-departmental output expense	-	1,400	3,630	4,000	-
	Managing the Purchase of Services Departmental output expense	-	620	420	420	-
Radio Assurance	National Emergency Services Non-departmental output expense	-	3,740	-	-	-
Community Organisation Refugee Sponsorship Category	Public Health Service Purchasing Non-departmental output expense	106	249	249	249	249
Developing a Free Annual Health Check for SuperGold Card Holders	Managing the Purchase of Services Departmental output expense	-	1,000	-	-	-
Migrant Settlement Initiative - Stocktake of New Zealand Health System for New Migrants	Sector Planning and Performance Departmental output expense	48	-	-	-	-
Total New Operating Expenditure		55,086	811,831	849,176	828,642	811,104
Savings in the PHARMAC Combined Pharmaceutical Budget	Health and Disability Support Services - DHBs Non-departmental output expense	-	(29,300)	(34,800)	(65,300)	(65,300)
Total Operating Expenditure		55,086	782,531	814,376	763,342	745,804
District Health Boards' Capital Investment	Equity for Capital Projects for DHBs and Health Sector Crown Agencies Non-departmental capital expenditure	-	750,000	-	-	-
Provision for Additional Deficit Support for District Health Boards	Equity Support for DHB Deficits Non-departmental capital expenditure	-	100,000	-	-	-
Total Capital Expenditure		-	850,000	-	-	-
National Bowel Screening Programme IT Solution	Departmental capital injection	2,000	-	-	-	-
Total Initiatives		57,086	1,632,531	814,376	763,342	745,804

1.2 - Trends in the Vote

Summary of Financial Activity

	2013/14	2014/15	2015/16	2016/17	2017/18		2018/19			2019/20	2020/21	2021/22
	Actual \$000	Actual \$000	Actual \$000	Actual \$000	Final Budgeted \$000	Estimated Actual \$000	Departmental Transactions Budget \$000	Non- Departmental Transactions Budget \$000	Total Budget \$000	Estimated \$000	Estimated \$000	Estimated \$000
Appropriations												
Output Expenses	14,002,497	14,297,234	14,746,556	15,228,315	16,148,344	16,124,183	186,469	16,737,125	16,923,594	16,938,427	16,862,674	16,961,933
Benefits or Related Expenses	-	-	-	-	-	-	N/A	-	-	-	-	-
Borrowing Expenses	-	-	-	-	-	-	-	-	-	-	-	-
Other Expenses	27,873	26,480	25,307	102,469	22,410	22,410	-	27,347	27,347	27,347	27,347	27,347
Capital Expenditure	336,432	689,136	487,272	3,043,698	513,154	377,709	8,837	1,244,594	1,253,431	129,434	72,895	62,550
Intelligence and Security Department Expenses and Capital Expenditure	-	-	-	-	-	-	-	N/A	-	-	-	-
Multi-Category Expenses and Capital Expenditure (MCA)												
<i>Output Expenses</i>	20,036	20,878	20,705	20,521	20,591	19,791	20,991	-	20,991	20,991	20,991	20,991
<i>Other Expenses</i>	-	-	-	-	-	-	-	-	-	-	-	-
<i>Capital Expenditure</i>	-	-	-	-	-	-	N/A	-	-	-	-	-
Total Appropriations	14,386,838	15,033,728	15,279,840	18,395,003	16,704,499	16,544,093	216,297	18,009,066	18,225,363	17,116,199	16,983,907	17,072,821
Crown Revenue and Capital Receipts												
Tax Revenue	-	-	-	-	-	-	N/A	-	-	-	-	-
Non-Tax Revenue	655,187	669,571	687,880	675,915	763,154	763,154	N/A	787,334	787,334	809,028	809,028	809,028
Capital Receipts	375,698	147,800	24,648	23,133	27,499	27,499	N/A	27,499	27,499	27,499	27,499	27,499
Total Crown Revenue and Capital Receipts	1,030,885	817,371	712,528	699,048	790,653	790,653	N/A	814,833	814,833	836,527	836,527	836,527

Note - where restructuring of the vote has occurred then, to the extent practicable, prior years information has been restated as if the restructuring had occurred before the beginning of the period covered. In this instance Total Appropriations for the Budgeted and Estimated Actual year may not equal Total Appropriations in the Details of Appropriations and Capital Injections.

Adjustments to the Summary of Financial Activity Table Due to Vote Restructuring

There have been no restructuring adjustments to prior year information in the Summary table.

1.3 - Analysis of Significant Trends

Total Vote: All Appropriations

Vote Health has grown from actual expenditure in 2013/14 of \$14,387 million to budgeted expenditure in 2018/19 of \$18,225 million, an increase of \$3,838 million over five years (around 5.3% per annum). This has mainly been driven by increases to the Vote's Output Expenses, which were \$14,023 million in 2013/14 and are budgeted at \$16,945 million in 2018/19 - an increase of \$2,922 million.

Output Expenses

The growth in the Vote's Output Expenses is driven mainly by additional funding provided to DHBs to address demographic and cost pressures. Their appropriations for 2018/19 are budgeted at \$13,236 million, an increase of \$2,047 million over the actual expenditure in 2013/14. In addition to this expenditure, DHBs are typically contracted by the Ministry of Health for additional national services. In some cases, this funding is being devolved to DHBs, making them directly responsible for services previously administered nationally.

Also contributing to the growth are increases in funding for national services administered by the Ministry of Health, such as disability support services and various public and personal health services. The 2018/19 appropriations for these national services are budgeted for \$2,926 million which is \$486 million greater than the actual expenditure in 2013/14 (an increase of around 4.0% per annum). The main drivers of the increase are the Crown's ongoing investment in:

- disability support services, which has increased by nearly \$182 million (or 16.7%) since 2013/14
- the primary health care strategy, which has increased by nearly \$105 million (or 65.2%) since 2013/14
- additional elective surgeries, which has increased by \$62 million (or 20.5%) since 2013/14.

Funding for the support, oversight, governance, and development of the health and disability sectors has also grown. Actual expenditure of \$394 million in 2013/14 has increased to budgeted expenditure in 2018/19 of \$783 million. The increase has been driven mainly by funding to support pay equity.

Other Expenses

Vote Health also provides funding for Other Expenses, such as grants to support the development of service providers in the health and disability sector, and to fund international health organisations. It also funds the defence and settlement of legal claims. This expenditure has remained relatively constant over time with actual expenditure of \$28 million in 2013/14 and budgeted appropriations of \$27 million in 2018/19.

Capital Expenditure

The Crown continues to invest in sector capital. Appropriations for 2018/19 are \$1,090 million, compared to actual expenditure of \$299 million in 2013/14. As in previous years, this includes funding for multi-year projects and provision for some future expenses or risks.

There is \$163 million of other capital expenditure appropriated for 2018/19. This comprises equity injections to district health boards to address working capital requirements, residential care loans, and authority for the Ministry of Health to purchase or develop assets for its use.

In 2016/17, additional capital funding of \$2,415 million was provided to replace DHBs' Crown loans with equity. This resulted in a significant increase in the capital expenditure appropriated in that year. See Summary of Financial Activity table in Part 1.2.

Crown Revenue and Capital Receipts

Vote Health receives Crown Revenue from ACC for the purchase of public health acute and other services from DHBs and capital charge revenue from Crown Entities in the health sector. The ACC revenue has increased from \$464 million in 2013/14 to forecast revenue of \$525 million in 2018/19. The capital charge revenue has grown from \$191 million in 2013/14 to forecast revenue of \$262 million in 2018/19. The capital charge revenue has been impacted by changes in the capital charge rate and the replacement of DHBs' Crown loans with equity in 2016/17.

Vote Health receives Capital Receipts in the form of repayments from residential care loans and equity repayments from DHBs. The residential care loan repayments are forecast at \$15 million per annum. The equity repayments from DHBs vary significantly across years. In 2013/14 and 2014/15, Canterbury DHB made significant repayments from the insurance proceeds it received as a result of the Canterbury earthquakes. These repayments contributed towards the Canterbury hospital rebuild funded by capital expenditure appropriations.

Part 2 - Details of Departmental Appropriations

2.1 - Departmental Output Expenses

Health Sector Information Systems (M36)

Scope of Appropriation

This appropriation is limited to the provision of information technology services and the publication of data and information derived from these services to the health and disability system.

Expenses and Revenue

	2017/18		2018/19
	Final Budgeted \$000	Estimated Actual \$000	Budget \$000
Total Appropriation	53,395	52,306	55,618
Revenue from the Crown	53,395	53,395	55,618
Revenue from Others	-	-	-

What is Intended to be Achieved with this Appropriation

This appropriation is intended to provide information technology services and infrastructure to support the operation of New Zealand's health services.

How Performance will be Assessed and End of Year Reporting Requirements

	2017/18		2018/19
	Final Budgeted Standard	Estimated Actual	Budget Standard
Assessment of Performance			
Client Insight and Analytics			
Percentage of published Tier 1 statistics meet Statistics New Zealand standards within agreed timetable	100%	100%	100%
Respondent satisfaction with how the Health Survey is conducted is greater than	90%	90%	90%
National Infrastructure and Ministry Information Systems			
The percentage of time for which key sector- and public-facing systems are available (see Note 1)	99%	100%	99%
Number of security breach incidents	0	0	0

Note 1 - Key sector- and public-facing systems are National Health Index (NHI), National Immunisation Register (NIR), Online Pharmacy, Special Authorities, Oracle Financials, and Web Access.

End of Year Performance Reporting

The Ministry of Health will report performance information for this appropriation in its Annual Report.

Current and Past Policy Initiatives

Policy Initiative	Year of First Impact	2017/18 Final Budgeted \$000	2018/19 Budget \$000	2019/20 Estimated \$000	2020/21 Estimated \$000	2021/22 Estimated \$000
Current Government						
National Bowel Screening Programme Implementation Year Two	2018/19	-	4,000	4,000	2,500	2,500
Previous Government						
National Bowel Screening Programme Rollout	2016/17	2,500	2,500	2,500	2,500	2,500

Managing the Purchase of Services (M36)

Scope of Appropriation

This appropriation is limited to purchasing services for the public and health and disability sector on behalf of the Crown, for those services where the Ministry has responsibility for the purchasing function (i.e. funding is not devolved to another entity).

Expenses and Revenue

	2017/18		2018/19
	Final Budgeted \$000	Estimated Actual \$000	Budget \$000
Total Appropriation	42,523	42,523	41,974
Revenue from the Crown	42,523	42,523	41,974
Revenue from Others	-	-	-

What is Intended to be Achieved with this Appropriation

This appropriation is intended to achieve the administration of health and disability services, purchased on behalf of the Crown in line with Government priorities and the Ministry of Health's strategic intentions (as outlined in the Ministry of Health's Statement of Strategic Intentions).

How Performance will be Assessed and End of Year Reporting Requirements

Assessment of Performance	2017/18		2018/19
	Final Budgeted Standard	Estimated Actual	Budget Standard
The Ministry procurement process is in line with government standards	Achieved	Achieved	Achieved
The ratio of departmental expenditure for the output class against relevant non-departmental expenditure	1:107	1:107	1:107
The percentage of Ministry feedback to Crown Funding Agreement Variation (CFAV) monitoring reports that are supplied to DHBs within agreed timeframes (see Note 1)	95%	100%	95%
The percentage of complaints in regards to Disability Support Services (DSS) that receive either a resolution notification or progress update within 20 days of DSS receiving the complaint	95%	95%	95%

Note 1 - When a monitoring report is received at the Ministry, it is logged into an electronic system. This generates an automated letter to say it has been received. The 'formal response' is the next contact the Ministry has with the provider when necessary. The formal response could be a phone call, email, formal letter or an actual visit.

End of Year Performance Reporting

The Ministry of Health will report performance information for this appropriation in its Annual Report.

Current and Past Policy Initiatives

Policy Initiative	Year of First Impact	2017/18 Final Budgeted \$000	2018/19 Budget \$000	2019/20 Estimated \$000	2020/21 Estimated \$000	2021/22 Estimated \$000
Current Government						
Transforming the Disability Support System drawdown from Contingency Fund	2018/19	-	6,971	6,420	-	-
Integrated Therapies Pilot for 18-25 Year Olds	2018/19	-	620	420	420	-
Developing a Free Annual Health Check for SuperGold Card Holders	2018/19	-	1,000	-	-	-
Meeting Air Ambulance Service Cost Pressures	2018/19	-	300	300	300	300
Very Low Cost General Practitioner Visits for Community Services Card Holders	2017/18	1,500	400	-	-	-
Previous Government						
Pay Equity drawdown from Contingency Fund	2017/18	1,200	-	-	-	-
Disability Support Services - Enabling Good Lives	2017/18	3,300	-	-	-	-
Contraceptive Services for Low Income Women	2017/18	120	120	120	120	120
National Bowel Screening Programme Rollout	2016/17	2,645	2,415	2,340	2,340	2,340
Problem Gambling Services - Continued Support	2016/17	293	293	-	-	-
Healthy Families NZ	2014/15	1,000	1,000	1,000	1,000	1,000

Memorandum Account

	2017/18		2018/19
	Final Budgeted \$000	Estimated Actual \$000	Budget \$000
Problem Gambling			
Opening Balance as at 1 July	(730)	(730)	(540)
Revenue (funded by Problem Gambling Levy)	990	990	990
Expenses	990	800	990
Transfers and Adjustments	-	-	-
Closing Balance at 30 June	(730)	(540)	(540)

Payment Services (M36)

Scope of Appropriation

This appropriation is limited to the administration and audit of contracts and payments on behalf of the Crown and Crown agencies.

Expenses and Revenue

	2017/18		2018/19
	Final Budgeted \$000	Estimated Actual \$000	Budget \$000
Total Appropriation	16,440	16,440	17,340
Revenue from the Crown	16,440	16,440	17,340
Revenue from Others	-	-	-

What is Intended to be Achieved with this Appropriation

This appropriation is intended to provide for timely and appropriate payments to be made to eligible parties (including eligible health service providers and consumers) and contracts to be audited and processed efficiently and effectively.

How Performance will be Assessed and End of Year Reporting Requirements

	2017/18		2018/19
	Final Budgeted Standard	Estimated Actual	Budget Standard
Assessment of Performance			
The percentage of claims paid on time	98%	100%	98%
The percentage of claims processed accurately	95%	99%	95%
The percentage of all draft agreements prepared for funders within target timeframes	95%	85%	95%
The percentage of agreements prepared accurately (see Note 1)	95%	100%	95%
The percentage of calls to the contact centre answered within service specifications for timeliness (20 seconds)	80%	80%	80%
The percentage of calls abandoned by callers prior to being answered by the contact centre is less than	5%	4.5%	5%
The percentage of enquiries resolved within 10 working days	95%	96%	95%
Court written decisions and findings relating to concluded Ministry of Health Audit & Compliance initiated prosecutions contain no adverse judicial comment in regards to the evidential basis of the prosecutions	0	0	0
Percentage of Health Integrity Line complaints that are evaluated within 10 working days of complaint being received is greater than or equal to	95%	100%	95%

Note 1 - All information is deemed to be processed accurately if agreements are legally binding and purchase order information is correctly entered.

End of Year Performance Reporting

The Ministry of Health will report performance information for this appropriation in its Annual Report.

Regulatory and Enforcement Services (M36)

Scope of Appropriation

This appropriation is limited to implementing, enforcing and administering health- and disability-related legislation and regulations, and provision of regulatory advice to the sector and to Ministers, and support services for committees established under statute or appointed by the Minister pursuant to legislation.

Expenses and Revenue

	2017/18		2018/19
	Final Budgeted \$000	Estimated Actual \$000	Budget \$000
Total Appropriation	24,111	24,111	24,111
Revenue from the Crown	10,653	10,653	10,653
Revenue from Others	13,458	13,458	13,458

What is Intended to be Achieved with this Appropriation

This appropriation is intended to ensure that health and disability services are regulated so that appropriate standards are followed.

How Performance will be Assessed and End of Year Reporting Requirements

	2017/18		2018/19
	Final Budgeted Standard	Estimated Actual	Budget Standard
Assessment of Performance			
The percentage of medium and high priority quality incident notifications relating to medicines and medical devices that undergo an initial review within 5 working days	90%	90%	90%
The percentage of all certificates issued to providers under the Health and Disability Services (Safety) Act 2001 within target timeframes	90%	90%	90%
The percentage of all licences and authorities issued to providers under the Medicines Act 1981 and Misuse of Drugs Act 1975 within target timeframes	90%	90%	90%
The percentage of all licences and consents issued to radiation users under the Radiation Safety Act 2016 within 10 working days of the receipt of all information and payment of the required fee	90%	100%	90%
The percentage of all New Medicines Applications (for ministerial consent to market) that receive an initial assessment within 200 days	80%	90%	80%
The percentage of all Changed Medicines Notifications (for ministerial consent to market) responded to within 45 days	100%	100%	100%
Average rating for statutory committee satisfaction with secretariat services provided by the Ministry	4 out of 5 or greater	4	4 out of 5 or greater

End of Year Performance Reporting

The Ministry of Health will report performance information for this appropriation in its Annual Report.

Current and Past Policy Initiatives

Policy Initiative	Year of First Impact	2017/18 Final Budgeted \$000	2018/19 Budget \$000	2019/20 Estimated \$000	2020/21 Estimated \$000	2021/22 Estimated \$000
Previous Government						
Radiation Safety Act - administration of new regulations	2016/17	574	574	574	574	574

Conditions on Use of Appropriation

Reference	Conditions
Medicines Act 1981	The Ministry responds to incident notifications regarding the quality of medicines, medical devices and advertising.
Hazardous Substances and New Organisms (Act) 1996	Section 100 of the Hazardous Substances and New Organisms Act 1996 sets out requirements for appointment of enforcement officers.
Health Act 1956	Section 7A of the Health Act 1956 sets out requirements for the designation by the Director-General of Health of medical officers of health. Section 28 of the Health Act 1956 sets out requirements for appointment by a local authority of environmental health officers. Section 121 of that Act provides that regulations may further prescribe qualifications which environmental health officers must possess. Section 69ZK of the Health Act 1956 sets out requirements for appointment by the Director-General of Health of persons or agencies as drinking-water assessors.
Biosecurity Act 1993	Section 105B of the Biosecurity Act 1993 sets out requirements for appointment by the Director-General of Health of auditors under that Act. Section 103 of the Biosecurity Act 1993 sets out requirements for appointment by a chief technical officer of inspectors/authorised persons to administer or enforce that Act, and/or to carry out a national pest management plan or national pathway plan.
Mental Health (Compulsory Assessment and Treatment) Act 1992	Section 92A of the Mental Health (Compulsory Assessment and Treatment) Act 1992 sets out requirements for delegation by Area Mental Health Services Directors of their powers to a suitably qualified person. Section 93 of the Mental Health (Compulsory Assessment and Treatment) Act 1992 sets out requirements for designation by Area Mental Health Services Directors of health professionals as 'duly authorised officers'.
All recommendations for appointments meet the requirements of health legislation	<ul style="list-style-type: none"> • Crown Entities Act 2004 • New Zealand Public Health and Disability Act 2000 • Health Research Council Act 1990 • Health and Disability Commissioner Act 1994. For regulatory authorities and committees: <ul style="list-style-type: none"> • Health Practitioners Competence Assurance Act 2003 • New Zealand Public Health and Disability Act 2000 • Human Assisted Reproductive Technology Act 2004.

Memorandum Account

	2017/18		2018/19
	Final Budgeted \$000	Estimated Actual \$000	Budget \$000
Office of Radiation Safety			
Opening Balance as at 1 July	631	631	131
Revenue	1,500	1,000	1,500
Expenses	1,500	1,500	1,500
Transfers and Adjustments	-	-	-
Closing Balance at 30 June	631	131	131

	2017/18		2018/19
	Final Budgeted \$000	Estimated Actual \$000	Budget \$000
MedSafe			
Opening Balance as at 1 July	6	6	(794)
Revenue	10,121	8,000	10,121
Expenses	10,121	8,800	10,121
Transfers and Adjustments	-	-	-
Closing Balance at 30 June	6	(794)	(794)

Sector Planning and Performance (M36)

Scope of Appropriation

This appropriation is limited to advising on and co-ordinating health sector planning and performance improvement; and funding, monitoring, and supporting the governance of, health sector Crown entities, and sector co-ordination.

Expenses and Revenue

	2017/18		2018/19
	Final Budgeted \$000	Estimated Actual \$000	Budget \$000
Total Appropriation	47,474	47,474	47,426
Revenue from the Crown	47,325	47,325	47,277
Revenue from Others	149	149	149

What is Intended to be Achieved with this Appropriation

This appropriation is intended to achieve: health sector services are appropriately planned, funded, and monitored; health sector Crown entities, agencies, and companies are appropriately governed; and sector co-ordination is encouraged and assisted.

How Performance will be Assessed and End of Year Reporting Requirements

	2017/18		2018/19
	Final Budgeted Standard	Estimated Actual	Budget Standard
Assessment of Performance			
Planning and funding advice for the financial year is provided to Crown entities by 31 December	Achieved	Achieved	Achieved
The Ministry provides the Minister with advice of all DHB annual plans by 30 June	Achieved	Achieved	Achieved
The percentage of monitoring feedback reports about performance supplied to DHBs within agreed timeframes	100%	100%	100%
The percentage of quarterly and monthly monitoring reports about DHBs provided to the Minister within agreed timeframes	100%	55%	100%
The percentage of quarterly and monthly monitoring reports about Crown entities (excluding DHBs) provided to the Minister within agreed timeframes	100%	100%	100%

Assessment of Performance	2017/18		2018/19
	Final Budgeted Standard	Estimated Actual	Budget Standard
Maintain the capability and capacity to respond to national emergencies and emerging health threats (see Note 1)	Achieved	Achieved	Achieved
The percentage of appointments to DHBs and other health Crown entity boards where advice is presented to the Minister prior to the current appointee's term expiring (see Note 2)	100%	100%	100%

Note 1 - Capability and capacity to respond means the Ministry has the necessary systems, procedures, facilities and staffing in place to initiate and manage at the national level the health response to a national emergency or emerging health threat.

Note 2 - Unexpected resignation or departure prior to the expiration of the term is not included.

End of Year Performance Reporting

The Ministry of Health will report performance information for this appropriation in its Annual Report.

Current and Past Policy Initiatives

Policy Initiative	Year of First Impact	2017/18 Final Budgeted \$000	2018/19 Budget \$000	2019/20 Estimated \$000	2020/21 Estimated \$000	2021/22 Estimated \$000
Previous Government						
Migrant Settlement Initiative - Stocktake of New Zealand Health System for New Migrants (one-off funding)	2017/18	48	-	-	-	-

2.3 - Departmental Capital Expenditure and Capital Injections

Ministry of Health - Capital Expenditure PLA (M36)

Scope of Appropriation

This appropriation is limited to the purchase or development of assets by and for the use of the Ministry of Health, as authorised by section 24(1) of the Public Finance Act 1989.

Capital Expenditure

	2017/18		2018/19
	Final Budgeted \$000	Estimated Actual \$000	Budget \$000
Forests/Agricultural	-	-	-
Land	-	-	-
Property, Plant and Equipment	50	50	50
Intangibles	9,879	9,879	8,787
Other	-	-	-
Total Appropriation	9,929	9,929	8,837

What is Intended to be Achieved with this Appropriation

This appropriation is intended to achieve the renewal, upgrade, or redesign of assets to support the delivery of the Ministry of Health's core functions and responsibilities (refer to Part 2.1).

How Performance will be Assessed and End of Year Reporting Requirements

	2017/18		2018/19
	Final Budgeted Standard	Estimated Actual	Budget Standard
Assessment of Performance			
Expenditure is in accordance with the Ministry of Health's capital asset management plan	Achieved	Achieved	Achieved

End of Year Performance Reporting

The Ministry of Health will report performance information for its departmental outputs in its Annual Report.

Reasons for Change in Appropriation

This appropriation decreased by \$1.092 million to \$8.837 million. This was due to the forecast funding profile for capital investment.

Capital Injections and Movements in Departmental Net Assets

Ministry of Health

Details of Net Asset Schedule	2017/18 Estimated Actual \$000	2018/19 Projected \$000	Explanation of Projected Movements in 2018/19
Opening Balance	32,652	34,652	
Capital Injections	2,000	-	The capital injection for 2017/18 relates to the National Bowel Screening Programme and the National Screening IT Solution.
Capital Withdrawals	-	-	
Surplus to be Retained (Deficit Incurred)	-	-	
Other Movements	-	-	
Closing Balance	34,652	34,652	

Part 3 - Details of Non-Departmental Appropriations

3.1 - Non-Departmental Output Expenses

Auckland Health Projects Integrated Investment Plan (M36)

Scope of Appropriation

The appropriation is limited to expenses incurred in developing an Integrated Investment Plan for Auckland Health projects.

Expenses

	2017/18		2018/19
	Final Budgeted \$000	Estimated Actual \$000	Budget \$000
Total Appropriation	370	185	1,000

What is Intended to be Achieved with this Appropriation

This appropriation is intended to support the Auckland Health Investment Planning Group in assisting the Auckland metro DHBs to develop a comprehensive integrated investment plan to meet the forecast significant population pressures.

How Performance will be Assessed and End of Year Reporting Requirements

An exemption was granted in 2016/17 under s15D(2)(b)(iii) of the PFA as the amount of the appropriation is less than \$5 million.

Reasons for Change in Appropriation

This appropriation increased by a net \$630,000 to \$1 million. This was mainly due to a funding transfer between financial years to support further development of the Northern Region's Investment Planning.

Health and Disability Support Services - Auckland DHB (M36)

Scope of Appropriation

This appropriation is limited to personal and public health services, and management outputs from Auckland DHB.

Expenses

	2017/18		2018/19
	Final Budgeted \$000	Estimated Actual \$000	Budget \$000
Total Appropriation	1,252,081	1,252,081	1,320,417

What is Intended to be Achieved with this Appropriation

This appropriation is intended to achieve services provided by the DHB that align with: Government priorities; the strategic direction set for the health sector by the Ministry of Health; the needs of the district's population; and regional considerations.

How Performance will be Assessed and End of Year Reporting Requirements

Each DHB has a statutory responsibility to prepare:

- an Annual Plan for approval by the Minister of Health (Section 38 of the New Zealand Public Health and Disability Act 2000) - providing accountability to the Minister of Health
- a Statement of Performance Expectations (Section 149C of the Crown Entities Act 2004 as amended by the Crown Entities Amendment Act 2013) - providing financial accountability to Parliament and the public annually
- a Statement of Intent (Section 139 of the Crown Entities Act) - providing accountability to Parliament and the public at least triennially.

These documents are brought together into a single DHB Annual Plan with the Statement of Intent and Statement of Performance Expectations, and is known as the 'Annual Plan'.

The Statement of Performance Expectations provides specific measures/targets for the coming year, with comparative prior year and current year forecast (at a minimum).

Four Output Classes are used by all DHBs to reflect the nature of services provided:

- Prevention
- Early Detection and Management
- Intensive Assessment and Treatment
- Rehabilitation and Support.

End of Year Performance Reporting

The DHB will report performance information in its Annual Report.

Current and Past Policy Initiatives

Policy Initiative	Year of First Impact	2017/18 Final Budgeted \$000	2018/19 Budget \$000	2019/20 Estimated \$000	2020/21 Estimated \$000	2021/22 Estimated \$000
Current Government						
District Health Boards - Additional Support	2018/19	-	71,115	71,115	71,115	71,115
Savings in the PHARMAC Combined Pharmaceuticals Budget	2018/19	-	(2,796)	(3,320)	(6,230)	(6,230)

Policy Initiative	Year of First Impact	2017/18 Final Budgeted \$000	2018/19 Budget \$000	2019/20 Estimated \$000	2020/21 Estimated \$000	2021/22 Estimated \$000
Previous Government						
District Health Boards - Additional support	2017/18	41,419	41,419	41,419	41,419	41,419
Funding Redistribution of Budget 2017 District Health Boards - Additional Support initiative	2017/18	10,614	10,614	10,614	10,614	10,614
Pharmaceuticals - More Publicly Funded Medicines	2017/18	1,887	1,887	1,321	566	566
DHB Efficiency Savings	2017/18	(874)	(874)	(874)	(874)	(874)
District Health Boards - Additional Support	2016/17	45,255	45,255	45,255	45,255	45,255
More Publically Funded Medicines	2016/17	2,714	2,714	2,527	2,527	2,527
District Health Board (DHB) Additional Funding for Pressures	2015/16	36,417	36,417	36,417	36,417	36,417
Reprioritising DHB Savings Delivered by PHARMAC	2015/16	(1,217)	(1,217)	(1,217)	(1,217)	(1,217)
DHB Demographics	2014/15	13,199	13,199	13,199	13,199	13,199
Contribution to DHB cost pressures	2014/15	8,745	8,745	8,745	8,745	8,745
Aged Residential Care - subsidy increase	2014/15	881	881	881	881	881

Reasons for Change in Appropriation

This appropriation increased by \$68.336 million to \$1,320.417 million mainly due to:

- \$71.115 million was provided for the Budget 2018 initiative District Health Boards - Additional Support.

This was partly offset by:

- \$2.796 million of savings due to efficiencies with the transfer of responsibilities for hospital medicines purchasing to PHARMAC as part of their Combined Pharmaceutical Budget.

Conditions on Use of Appropriation

Reference	Conditions
New Zealand Public Health and Disability Act 2000	Section 10(2) (Crown funding agreements) provides that the Minister may, on behalf of the Crown, negotiate or enter into a Crown funding agreement with any person, containing any terms and conditions that may be agreed.

Health and Disability Support Services - Bay of Plenty DHB (M36)

Scope of Appropriation

This appropriation is limited to personal and public health services, and management outputs from Bay of Plenty DHB.

Expenses

	2017/18		2018/19
	Final Budgeted \$000	Estimated Actual \$000	Budget \$000
Total Appropriation	694,749	694,749	724,436

What is Intended to be Achieved with this Appropriation

This appropriation is intended to achieve services provided by the DHB that align with: Government priorities; the strategic direction set for the health sector by the Ministry of Health; the needs of the district's population; and regional considerations.

How Performance will be Assessed and End of Year Reporting Requirements

Please refer to the performance reporting information as shown in "Health and Disability Support Services - Auckland DHB".

End of Year Performance Reporting

The DHB will report performance information in its Annual Report.

Current and Past Policy Initiatives

Policy Initiative	Year of First Impact	2017/18 Final Budgeted \$000	2018/19 Budget \$000	2019/20 Estimated \$000	2020/21 Estimated \$000	2021/22 Estimated \$000
Current Government						
District Health Boards - Additional Support	2018/19	-	31,327	31,327	31,327	31,327
Savings in the PHARMAC Combined Pharmaceuticals Budget	2018/19	-	(1,646)	(1,955)	(3,668)	(3,668)
Previous Government						
District Health Boards - Additional support	2017/18	24,622	24,622	24,622	24,622	24,622
Funding Redistribution of Budget 2017 District Health Boards - Additional Support initiative	2017/18	(256)	(256)	(256)	(256)	(256)
Pharmaceuticals - More Publicly Funded Medicines	2017/18	1,122	1,122	785	337	337
DHB Efficiency Savings	2017/18	(524)	(524)	(524)	(524)	(524)
District Health Boards - Additional Support	2016/17	28,836	28,836	28,836	28,836	28,836
More Publicly Funded Medicines	2016/17	1,627	1,627	1,515	1,515	1,515
District Health Board (DHB) Additional Funding for Pressures	2015/16	19,107	19,107	19,107	19,107	19,107
Reprioritising DHB Savings Delivered by PHARMAC	2015/16	(631)	(631)	(631)	(631)	(631)
DHB Demographics	2014/15	14,657	14,657	14,657	14,657	14,657
Contribution to DHB cost pressures	2014/15	4,985	4,985	4,985	4,985	4,985
Aged Residential Care - subsidy increase	2014/15	530	530	530	530	530

Reasons for Change in Appropriation

This appropriation increased by \$29.687 million to \$724.436 million mainly due to:

- \$31.327 million was provided for the Budget 2018 initiative District Health Boards - Additional Support.

This was partly offset by:

- \$1.646 million of savings due to efficiencies with the transfer of responsibilities for hospital medicines purchasing to PHARMAC as part of their Combined Pharmaceutical Budget.

Conditions on Use of Appropriation

Reference	Conditions
New Zealand Public Health and Disability Act 2000	Section 10(2) (Crown funding agreements) provides that the Minister may, on behalf of the Crown, negotiate or enter into a Crown funding agreement with any person, containing any terms and conditions that may be agreed.

Health and Disability Support Services - Canterbury DHB (M36)

Scope of Appropriation

This appropriation is limited to personal and public health services, and management outputs from Canterbury DHB.

Expenses

	2017/18		2018/19
	Final Budgeted \$000	Estimated Actual \$000	Budget \$000
Total Appropriation	1,383,508	1,379,508	1,421,052

What is Intended to be Achieved with this Appropriation

This appropriation is intended to achieve services provided by the DHB that align with: Government priorities; the strategic direction set for the health sector by the Ministry of Health; the needs of the district's population; and regional considerations.

How Performance will be Assessed and End of Year Reporting Requirements

Please refer to the performance reporting information as shown in "Health and Disability Support Services - Auckland DHB".

End of Year Performance Reporting

The DHB will report performance information in its Annual Report.

Current and Past Policy Initiatives

Policy Initiative	Year of First Impact	2017/18 Final Budgeted \$000	2018/19 Budget \$000	2019/20 Estimated \$000	2020/21 Estimated \$000	2021/22 Estimated \$000
Current Government						
District Health Boards - Additional Support	2018/19	-	45,104	45,104	45,104	45,104
Savings in the PHARMAC Combined Pharmaceuticals Budget	2018/19	-	(3,167)	(3,762)	(7,059)	(7,059)

Policy Initiative	Year of First Impact	2017/18 Final Budgeted \$000	2018/19 Budget \$000	2019/20 Estimated \$000	2020/21 Estimated \$000	2021/22 Estimated \$000
Previous Government						
District Health Boards - Additional support	2017/18	47,755	47,755	47,755	47,755	47,755
Funding Redistribution of Budget 2017 District Health Boards - Additional Support initiative	2017/18	(2,693)	(2,693)	(2,693)	(2,693)	(2,693)
Pharmaceuticals - More Publicly Funded Medicines	2017/18	2,176	2,176	1,523	653	653
DHB Efficiency Savings	2017/18	(1,055)	(1,055)	(1,055)	(1,055)	(1,055)
District Health Boards - Additional Support	2016/17	32,125	32,125	32,125	32,125	32,125
More Publicly Funded Medicines	2016/17	3,147	3,147	2,930	2,930	2,930
Supporting Health Services in Canterbury	2015/16	5,480	5,480	-	-	-
District Health Board (DHB) Additional Funding for Pressures	2015/16	21,533	21,533	21,533	21,533	21,533
Reprioritising DHB Savings Delivered by PHARMAC	2015/16	(670)	(670)	(670)	(670)	(670)
DHB Demographics	2014/15	18,889	18,889	18,889	18,889	18,889
Contribution to DHB cost pressures	2014/15	10,236	10,236	10,236	10,236	10,236
Aged Residential Care - subsidy increase	2014/15	1,067	1,067	1,067	1,067	1,067

Reasons for Change in Appropriation

This appropriation increased by \$37.544 million to \$1,421.052 million mainly due to:

- \$45.104 million was provided for the Budget 2018 initiative District Health Boards - Additional Support, and
- \$5.245 million was provided for a technical change in funding due to the difference between capital charge expense and the interest paid on debt.

This was partly offset by:

- \$5.598 million was carried forward from 2016/17 to 2017/18 only reflecting the timing of funding for work on earthquake repairs, and
- \$3.167 million of savings due to efficiencies with the transfer of responsibilities for hospital medicines purchasing to PHARMAC as part of their Combined Pharmaceutical Budget.

Note - This appropriation increased by \$4 million in 2017/18 only due to funding being transferred from the Equity for Capital Projects for DHBs and Health Sector Crown Agencies appropriation for Canterbury Earthquake repairs expenditure.

Conditions on Use of Appropriation

Reference	Conditions
New Zealand Public Health and Disability Act 2000	Section 10(2) (Crown funding agreements) provides that the Minister may, on behalf of the Crown, negotiate or enter into a Crown funding agreement with any person, containing any terms and conditions that may be agreed.

Health and Disability Support Services - Capital and Coast DHB (M36)

Scope of Appropriation

This appropriation is limited to personal and public health services, and management outputs from Capital and Coast DHB.

Expenses

	2017/18		2018/19
	Final Budgeted \$000	Estimated Actual \$000	Budget \$000
Total Appropriation	735,633	735,633	765,489

What is Intended to be Achieved with this Appropriation

This appropriation is intended to achieve services provided by the DHB that align with: Government priorities; the strategic direction set for the health sector by the Ministry of Health; the needs of the district's population; and regional considerations.

How Performance will be Assessed and End of Year Reporting Requirements

Please refer to the performance reporting information as shown in "Health and Disability Support Services - Auckland DHB".

End of Year Performance Reporting

The DHB will report performance information in its Annual Report.

Current and Past Policy Initiatives

Policy Initiative	Year of First Impact	2017/18 Final Budgeted \$000	2018/19 Budget \$000	2019/20 Estimated \$000	2020/21 Estimated \$000	2021/22 Estimated \$000
Current Government						
District Health Boards - Additional Support	2018/19	-	31,515	31,515	31,515	31,515
Savings in the PHARMAC Combined Pharmaceuticals Budget	2018/19	-	(1,669)	(1,982)	(3,718)	(3,718)
Previous Government						
District Health Boards - Additional support	2017/18	25,001	25,001	25,001	25,001	25,001
Funding Redistribution of Budget 2017 District Health Boards - Additional Support initiative	2017/18	(3,709)	(3,709)	(3,709)	(3,709)	(3,709)
Pharmaceuticals - More Publicly Funded Medicines	2017/18	1,138	1,138	797	342	342
DHB Efficiency Savings	2017/18	(558)	(558)	(558)	(558)	(558)
District Health Boards - Additional Support	2016/17	15,060	15,060	15,060	15,060	15,060
More Publically Funded Medicines	2016/17	1,656	1,656	1,542	1,542	1,542
District Health Board (DHB) Additional Funding for Pressures	2015/16	11,547	11,547	11,547	11,547	11,547
Reprioritising DHB Savings Delivered by PHARMAC	2015/16	(360)	(360)	(360)	(360)	(360)
DHB Demographics	2014/15	9,068	9,068	9,068	9,068	9,068
Contribution to DHB cost pressures	2014/15	5,531	5,531	5,531	5,531	5,531
Aged Residential Care - subsidy increase	2014/15	564	564	564	564	564

Reasons for Change in Appropriation

This appropriation increased by \$29.856 million to \$765.489 million mainly due to:

- \$31.515 million was provided for the Budget 2018 initiative District Health Boards - Additional Support.

This was partly offset by:

- \$1.669 million of savings due to efficiencies with the transfer of responsibilities for hospital medicines purchasing to PHARMAC as part of their Combined Pharmaceutical Budget.

Conditions on Use of Appropriation

Reference	Conditions
New Zealand Public Health and Disability Act 2000	Section 10(2) (Crown funding agreements) provides that the Minister may, on behalf of the Crown, negotiate or enter into a Crown funding agreement with any person, containing any terms and conditions that may be agreed.

Health and Disability Support Services - Counties-Manukau DHB (M36)

Scope of Appropriation

This appropriation is limited to personal and public health services, and management outputs from Counties-Manukau DHB.

Expenses

	2017/18		2018/19
	Final Budgeted \$000	Estimated Actual \$000	Budget \$000
Total Appropriation	1,375,692	1,375,692	1,439,807

What is Intended to be Achieved with this Appropriation

This appropriation is intended to achieve services provided by the DHB that align with: Government priorities; the strategic direction set for the health sector by the Ministry of Health; the needs of the district's population; and regional considerations.

How Performance will be Assessed and End of Year Reporting Requirements

Please refer to the performance reporting information as shown in "Health and Disability Support Services - Auckland DHB".

End of Year Performance Reporting

The DHB will report performance information in its Annual Report.

Current and Past Policy Initiatives

Policy Initiative	Year of First Impact	2017/18 Final Budgeted \$000	2018/19 Budget \$000	2019/20 Estimated \$000	2020/21 Estimated \$000	2021/22 Estimated \$000
Current Government						
District Health Boards - Additional Support	2018/19	-	66,206	66,206	66,206	66,206
Savings in the PHARMAC Combined Pharmaceuticals Budget	2018/19	-	(3,206)	(3,808)	(7,146)	(7,146)
Previous Government						
District Health Boards - Additional support	2017/18	47,822	47,822	47,822	47,822	47,822
Funding Redistribution of Budget 2017 District Health Boards - Additional Support initiative	2017/18	(6,631)	(6,631)	(6,631)	(6,631)	(6,631)
Pharmaceuticals - More Publicly Funded Medicines	2017/18	2,179	2,179	1,525	654	654
DHB Efficiency Savings	2017/18	(1,044)	(1,044)	(1,044)	(1,044)	(1,044)
District Health Boards - Additional Support	2016/17	49,009	49,009	49,009	49,009	49,009
More Publically Funded Medicines	2016/17	3,176	3,176	2,957	2,957	2,957
District Health Board (DHB) Additional Funding for Pressures	2015/16	21,486	21,486	21,486	21,486	21,486
Reprioritising DHB Savings Delivered by PHARMAC	2015/16	(669)	(669)	(669)	(669)	(669)
DHB Demographics	2014/15	26,485	26,485	26,485	26,485	26,485
Contribution to DHB cost pressures	2014/15	10,083	10,083	10,083	10,083	10,083
Aged Residential Care - subsidy increase	2014/15	1,055	1,055	1,055	1,055	1,055

Reasons for Change in Appropriation

This appropriation increased by \$64.115 million to \$1,439.807 million due to:

- \$66.206 million was provided for the Budget 2018 initiative District Health Boards - Additional Support, and
- \$1.112 million was provided for a technical change in funding due to the difference between capital charge expense and interest paid on debt.

This was partly offset by:

- \$3.206 million of savings due to efficiencies with the transfer of responsibilities for hospital medicines purchasing to PHARMAC as part of their Combined Pharmaceutical Budget.

Conditions on Use of Appropriation

Reference	Conditions
New Zealand Public Health and Disability Act 2000	Section 10(2) (Crown funding agreements) provides that the Minister may, on behalf of the Crown, negotiate or enter into a Crown funding agreement with any person, containing any terms and conditions that may be agreed.

Health and Disability Support Services - Hawkes Bay DHB (M36)

Scope of Appropriation

This appropriation is limited to personal and public health services, and management outputs from Hawkes Bay DHB.

Expenses

	2017/18		2018/19
	Final Budgeted \$000	Estimated Actual \$000	Budget \$000
Total Appropriation	482,426	482,426	497,215

What is Intended to be Achieved with this Appropriation

This appropriation is intended to achieve services provided by the DHB that align with: Government priorities; the strategic direction set for the health sector by the Ministry of Health; the needs of the district's population; and regional considerations.

How Performance will be Assessed and End of Year Reporting Requirements

Please refer to the performance reporting information as shown in "Health and Disability Support Services - Auckland DHB".

End of Year Performance Reporting

The DHB will report performance information in its Annual Report.

Current and Past Policy Initiatives

Policy Initiative	Year of First Impact	2017/18 Final Budgeted \$000	2018/19 Budget \$000	2019/20 Estimated \$000	2020/21 Estimated \$000	2021/22 Estimated \$000
Current Government						
District Health Boards - Additional Support	2018/19	-	15,924	15,924	15,924	15,924
Savings in the PHARMAC Combined Pharmaceuticals Budget	2018/19	-	(1,128)	(1,340)	(2,515)	(2,515)
Previous Government						
District Health Boards - additional support	2017/18	17,072	17,072	17,072	17,072	17,072
Funding Redistribution of Budget 2017 District Health Boards - Additional Support initiative	2017/18	(1,996)	(1,996)	(1,996)	(1,996)	(1,996)
Pharmaceuticals - More Publicly Funded Medicines	2017/18	778	778	544	233	233
DHB Efficiency Savings	2017/18	(370)	(370)	(370)	(370)	(370)
District Health Boards - Additional Support	2016/17	10,842	10,842	10,842	10,842	10,842
More Publically Funded Medicines	2016/17	1,131	1,131	1,053	1,053	1,053
District Health Board (DHB) Additional Funding for Pressures	2015/16	17,053	17,053	17,053	17,053	17,053
Reprioritising DHB Savings Delivered by PHARMAC	2015/16	(572)	(572)	(572)	(572)	(572)
DHB Demographics	2014/15	4,092	4,092	4,092	4,092	4,092
Contribution to DHB cost pressures	2014/15	3,590	3,590	3,590	3,590	3,590
Aged Residential Care - subsidy increase	2014/15	373	373	373	373	373

Reasons for Change in Appropriation

This appropriation increased by \$14.789 million to \$497.215 million mainly due to:

- \$15.924 million was provided for the Budget 2018 initiative District Health Boards - Additional Support.

This was partly offset by:

- \$1.128 million of savings due to efficiencies with the transfer of responsibilities for hospital medicines purchasing to PHARMAC as part of their Combined Pharmaceutical Budget.

Conditions on Use of Appropriation

Reference	Conditions
New Zealand Public Health and Disability Act 2000	Section 10(2) (Crown funding agreements) provides that the Minister may, on behalf of the Crown, negotiate or enter into a Crown funding agreement with any person, containing any terms and conditions that may be agreed.

Health and Disability Support Services - Hutt DHB (M36)

Scope of Appropriation

This appropriation is limited to personal and public health services, and management outputs from Hutt DHB.

Expenses

	2017/18		2018/19
	Final Budgeted \$000	Estimated Actual \$000	Budget \$000
Total Appropriation	384,880	384,880	397,128

What is Intended to be Achieved with this Appropriation

This appropriation is intended to achieve services provided by the DHB that align with: Government priorities; the strategic direction set for the health sector by the Ministry of Health; the needs of the district's population; and regional considerations.

How Performance will be Assessed and End of Year Reporting Requirements

Please refer to the performance reporting information as shown in "Health and Disability Support Services - Auckland DHB".

End of Year Performance Reporting

The DHB will report performance information in its Annual Report.

Current and Past Policy Initiatives

Policy Initiative	Year of First Impact	2017/18 Final Budgeted \$000	2018/19 Budget \$000	2019/20 Estimated \$000	2020/21 Estimated \$000	2021/22 Estimated \$000
Current Government						
District Health Boards - Additional Support	2018/19	-	13,119	13,119	13,119	13,119
Savings in the PHARMAC Combined Pharmaceuticals Budget	2018/19	-	(874)	(1,038)	(1,948)	(1,948)
Previous Government						
District Health Boards - Additional support	2017/18	13,155	13,155	13,155	13,155	13,155
Funding Redistribution of Budget 2017 District Health Boards - Additional Support initiative	2017/18	(3,656)	(3,656)	(3,656)	(3,656)	(3,656)
Pharmaceuticals - More Publicly Funded Medicines	2017/18	599	599	420	180	180
DHB Efficiency Savings	2017/18	(302)	(302)	(302)	(302)	(302)
District Health Boards - Additional Support	2016/17	7,980	7,980	7,980	7,980	7,980
More Publically Funded Medicines	2016/17	873	873	813	813	813
District Health Board (DHB) Additional Funding for Pressures	2015/16	6,138	6,138	6,138	6,138	6,138
Reprioritising DHB Savings Delivered by PHARMAC	2015/16	(191)	(191)	(191)	(191)	(191)
DHB Demographics	2014/15	4,365	4,365	4,365	4,365	4,365
Contribution to DHB cost pressures	2014/15	2,922	2,922	2,922	2,922	2,922
Aged Residential Care - subsidy increase	2014/15	305	305	305	305	305

Reasons for Change in Appropriation

This appropriation increased by \$12.248 million to \$397.128 million mainly due to:

- \$13.119 million was provided for the Budget 2018 initiative District Health Boards - Additional Support.

This was partly offset by:

- \$874,000 of savings due to efficiencies with the transfer of responsibilities for hospital medicines purchasing to PHARMAC as part of their Combined Pharmaceutical Budget.

Conditions on Use of Appropriation

Reference	Conditions
New Zealand Public Health and Disability Act 2000	Section 10(2) (Crown funding agreements) provides that the Minister may, on behalf of the Crown, negotiate or enter into a Crown funding agreement with any person, containing any terms and conditions that may be agreed.

Health and Disability Support Services - Lakes DHB (M36)

Scope of Appropriation

This appropriation is limited to personal and public health services, and management outputs from Lakes DHB.

Expenses

	2017/18		2018/19
	Final Budgeted \$000	Estimated Actual \$000	Budget \$000
Total Appropriation	314,712	314,712	326,173

What is Intended to be Achieved with this Appropriation

This appropriation is intended to achieve services provided by the DHB that align with: Government priorities; the strategic direction set for the health sector by the Ministry of Health; the needs of the district's population; and regional considerations.

How Performance will be Assessed and End of Year Reporting Requirements

Please refer to the performance reporting information as shown in "Health and Disability Support Services - Auckland DHB".

End of Year Performance Reporting

The DHB will report performance information in its Annual Report.

Current and Past Policy Initiatives

Policy Initiative	Year of First Impact	2017/18 Final Budgeted \$000	2018/19 Budget \$000	2019/20 Estimated \$000	2020/21 Estimated \$000	2021/22 Estimated \$000
Current Government						
District Health Boards - Additional Support	2018/19	-	12,019	12,019	12,019	12,019
Savings in the PHARMAC Combined Pharmaceuticals Budget	2018/19	-	(740)	(879)	(1,650)	(1,650)
Previous Government						
District Health Boards - Additional support	2017/18	11,157	11,157	11,157	11,157	11,157
Funding Redistribution of Budget 2017 District Health Boards - Additional Support initiative	2017/18	3,454	3,454	3,454	3,454	3,454
Pharmaceuticals - More Publicly Funded Medicines	2017/18	508	508	356	152	152
DHB Efficiency Savings	2017/18	(236)	(236)	(236)	(236)	(236)
District Health Boards - Additional Support	2016/17	13,935	13,935	13,935	13,935	13,935
More Publically Funded Medicines	2016/17	731	731	680	680	680
District Health Board (DHB) Additional Funding for Pressures	2015/16	5,519	5,519	5,519	5,519	5,519

Policy Initiative	Year of First Impact	2017/18 Final Budgeted \$000	2018/19 Budget \$000	2019/20 Estimated \$000	2020/21 Estimated \$000	2021/22 Estimated \$000
Reprioritising DHB Savings Delivered by PHARMAC	2015/16	(162)	(162)	(162)	(162)	(162)
DHB Demographics	2014/15	2,411	2,411	2,411	2,411	2,411
Contribution to DHB cost pressures	2014/15	2,296	2,296	2,296	2,296	2,296
Aged Residential Care - subsidy increase	2014/15	238	238	238	238	238

Reasons for Change in Appropriation

This appropriation increased by \$11.461 million to \$326.173 million mainly due to:

- \$12.019 million was provided for the Budget 2018 initiative District Health Boards - Additional Support.

This was partly offset by:

- \$740,000 of savings due to efficiencies with the transfer of responsibilities for hospital medicines purchasing to PHARMAC as part of their Combined Pharmaceutical Budget.

Conditions on Use of Appropriation

Reference	Conditions
New Zealand Public Health and Disability Act 2000	Section 10(2) (Crown funding agreements) provides that the Minister may, on behalf of the Crown, negotiate or enter into a Crown funding agreement with any person, containing any terms and conditions that may be agreed.

Health and Disability Support Services - MidCentral DHB (M36)

Scope of Appropriation

This appropriation is limited to personal and public health services, and management outputs from MidCentral DHB.

Expenses

	2017/18		2018/19
	Final Budgeted \$000	Estimated Actual \$000	Budget \$000
Total Appropriation	494,253	494,253	511,676

What is Intended to be Achieved with this Appropriation

This appropriation is intended to achieve services provided by the DHB that align with: Government priorities; the strategic direction set for the health sector by the Ministry of Health; the needs of the district's population; and regional considerations.

How Performance will be Assessed and End of Year Reporting Requirements

Please refer to the performance reporting information as shown in "Health and Disability Support Services - Auckland DHB".

End of Year Performance Reporting

The DHB will report performance information in its Annual Report.

Current and Past Policy Initiatives

Policy Initiative	Year of First Impact	2017/18 Final Budgeted \$000	2018/19 Budget \$000	2019/20 Estimated \$000	2020/21 Estimated \$000	2021/22 Estimated \$000
Current Government						
District Health Boards - Additional Support	2018/19	-	18,596	18,596	18,596	18,596
Savings in the PHARMAC Combined Pharmaceuticals Budget	2018/19	-	(1,173)	(1,393)	(2,614)	(2,614)
Previous Government						
District Health Boards - Additional support	2017/18	17,681	17,681	17,681	17,681	17,681
Funding Redistribution of Budget 2017 District Health Boards - Additional Support initiative	2017/18	(5,496)	(5,496)	(5,496)	(5,496)	(5,496)
Pharmaceuticals - More Publicly Funded Medicines	2017/18	806	806	564	242	242
DHB Efficiency Savings	2017/18	(389)	(389)	(389)	(389)	(389)
District Health Boards - Additional Support	2016/17	15,229	15,229	15,229	15,229	15,229
More Publically Funded Medicines	2016/17	1,180	1,180	1,099	1,099	1,099
District Health Board (DHB) Additional Funding for Pressures	2015/16	7,894	7,894	7,894	7,894	7,894
Reprioritising DHB Savings Delivered by PHARMAC	2015/16	(245)	(245)	(245)	(245)	(245)
DHB Demographics	2014/15	5,282	5,282	5,282	5,282	5,282
Contribution to DHB cost pressures	2014/15	3,765	3,765	3,765	3,765	3,765
Aged Residential Care - subsidy increase	2014/15	393	393	393	393	393

Reasons for Change in Appropriation

This appropriation increased by \$17.423 million to \$511.676 million due to:

- \$18.596 million was provided for the Budget 2018 initiative District Health Boards - Additional Support.

This was partly offset by:

- \$1.173 million of savings due to efficiencies with the transfer of responsibilities for hospital medicines purchasing to PHARMAC as part of their Combined Pharmaceutical Budget.

Conditions on Use of Appropriation

Reference	Conditions
New Zealand Public Health and Disability Act 2000	Section 10(2) (Crown funding agreements) provides that the Minister may, on behalf of the Crown, negotiate or enter into a Crown funding agreement with any person, containing any terms and conditions that may be agreed.

Health and Disability Support Services - Nelson-Marlborough DHB (M36)

Scope of Appropriation

This appropriation is limited to personal and public health services, and management outputs from Nelson-Marlborough DHB.

Expenses

	2017/18		2018/19
	Final Budgeted \$000	Estimated Actual \$000	Budget \$000
Total Appropriation	418,363	418,363	437,795

What is Intended to be Achieved with this Appropriation

This appropriation is intended to achieve services provided by the DHB that align with: Government priorities; the strategic direction set for the health sector by the Ministry of Health; the needs of the district's population; and regional considerations.

How Performance will be Assessed and End of Year Reporting Requirements

Please refer to the performance reporting information as shown in "Health and Disability Support Services - Auckland DHB".

End of Year Performance Reporting

The DHB will report performance information in its Annual Report.

Current and Past Policy Initiatives

Policy Initiative	Year of First Impact	2017/18 Final Budgeted \$000	2018/19 Budget \$000	2019/20 Estimated \$000	2020/21 Estimated \$000	2021/22 Estimated \$000
Current Government						
District Health Boards - Additional Support	2018/19	-	20,417	20,417	20,417	20,417
Savings in the PHARMAC Combined Pharmaceuticals Budget	2018/19	-	(996)	(1,183)	(2,220)	(2,220)
Previous Government						
District Health Boards - Additional support	2017/18	14,852	14,852	14,852	14,852	14,852
Funding Redistribution of Budget 2017 District Health Boards - Additional Support initiative	2017/18	(137)	(137)	(137)	(137)	(137)
Pharmaceuticals - More Publicly Funded Medicines	2017/18	677	677	474	203	203
DHB Efficiency Savings	2017/18	(320)	(320)	(320)	(320)	(320)
District Health Boards - Additional Support	2016/17	8,783	8,783	8,783	8,783	8,783
More Publically Funded Medicines	2016/17	980	980	913	913	913
District Health Board (DHB) Additional Funding for Pressures	2015/16	15,315	15,315	15,315	15,315	15,315
Reprioritising DHB Savings Delivered by PHARMAC	2015/16	(515)	(515)	(515)	(515)	(515)
DHB Demographics	2014/15	5,887	5,887	5,887	5,887	5,887
Contribution to DHB cost pressures	2014/15	3,093	3,093	3,093	3,093	3,093
Aged Residential Care - subsidy increase	2014/15	324	324	324	324	324

Reasons for Change in Appropriation

This appropriation increased by \$19.432 million to \$437.795 million mainly due to:

- \$20.417 million was provided for the Budget 2018 initiative District Health Boards - Additional Support.

This was partly offset by:

- \$996,000 of savings due to efficiencies with the transfer of responsibilities for hospital medicines purchasing to PHARMAC as part of their Combined Pharmaceutical Budget.

Conditions on Use of Appropriation

Reference	Conditions
New Zealand Public Health and Disability Act 2000	Section 10(2) (Crown funding agreements) provides that the Minister may, on behalf of the Crown, negotiate or enter into a Crown funding agreement with any person, containing any terms and conditions that may be agreed.

Health and Disability Support Services - Northland DHB (M36)

Scope of Appropriation

This appropriation is limited to personal and public health services, and management outputs from Northland DHB.

Expenses

	2017/18		2018/19
	Final Budgeted \$000	Estimated Actual \$000	Budget \$000
Total Appropriation	564,289	564,289	599,300

What is Intended to be Achieved with this Appropriation

This appropriation is intended to achieve services provided by the DHB that align with: Government priorities; the strategic direction set for the health sector by the Ministry of Health; the needs of the district's population; and regional considerations.

How Performance will be Assessed and End of Year Reporting Requirements

Please refer to the performance reporting information as shown in "Health and Disability Support Services - Auckland DHB".

End of Year Performance Reporting

The DHB will report performance information in its Annual Report.

Current and Past Policy Initiatives

Policy Initiative	Year of First Impact	2017/18 Final Budgeted \$000	2018/19 Budget \$000	2019/20 Estimated \$000	2020/21 Estimated \$000	2021/22 Estimated \$000
Current Government						
District Health Boards - Additional Support	2018/19	-	36,358	36,358	36,358	36,358
Savings in the PHARMAC Combined Pharmaceuticals Budget	2018/19	-	(1,360)	(1,615)	(3,030)	(3,030)
Previous Government						
District Health Boards - Additional support	2017/18	20,266	20,266	20,266	20,266	20,266
Funding Redistribution of Budget 2017 District Health Boards - Additional Support initiative	2017/18	6,297	6,297	6,297	6,297	6,297
Pharmaceuticals - More Publicly Funded Medicines	2017/18	923	923	646	277	277
DHB Efficiency Savings	2017/18	(409)	(409)	(409)	(409)	(409)
District Health Boards - Additional Support	2016/17	25,022	25,022	25,022	25,022	25,022
More Publically Funded Medicines	2016/17	1,331	1,331	1,239	1,239	1,239
District Health Board (DHB) Additional Funding for Pressures	2015/16	21,713	21,713	21,713	21,713	21,713
Reprioritising DHB Savings Delivered by PHARMAC	2015/16	(734)	(734)	(734)	(734)	(734)
DHB Demographics	2014/15	6,203	6,203	6,203	6,203	6,203
Contribution to DHB cost pressures	2014/15	3,989	3,989	3,989	3,989	3,989
Aged Residential Care - subsidy increase	2014/15	414	414	414	414	414

Reasons for Change in Appropriation

This appropriation increased by \$35.011 million to \$599.300 million mainly due to:

- \$36.358 million was provided for the Budget 2018 initiative District Health Boards - Additional Support.

This was partly offset by:

- \$1.360 million of savings due to efficiencies with the transfer of responsibilities for hospital medicines purchasing to PHARMAC as part of their Combined Pharmaceutical Budget.

Conditions on Use of Appropriation

Reference	Conditions
New Zealand Public Health and Disability Act 2000	Section 10(2) (Crown funding agreements) provides that the Minister may, on behalf of the Crown, negotiate or enter into a Crown funding agreement with any person, containing any terms and conditions that may be agreed.

Health and Disability Support Services - South Canterbury DHB (M36)

Scope of Appropriation

This appropriation is limited to personal and public health services, and management outputs from South Canterbury DHB.

Expenses

	2017/18		2018/19
	Final Budgeted \$000	Estimated Actual \$000	Budget \$000
Total Appropriation	177,019	177,019	181,432

What is Intended to be Achieved with this Appropriation

This appropriation is intended to achieve services provided by the DHB that align with: Government priorities; the strategic direction set for the health sector by the Ministry of Health; the needs of the district's population; and regional considerations.

How Performance will be Assessed and End of Year Reporting Requirements

Please refer to the performance reporting information as shown in "Health and Disability Support Services - Auckland DHB".

End of Year Performance Reporting

The DHB will report performance information in its Annual Report.

Current and Past Policy Initiatives

Policy Initiative	Year of First Impact	2017/18 Final Budgeted \$000	2018/19 Budget \$000	2019/20 Estimated \$000	2020/21 Estimated \$000	2021/22 Estimated \$000
Current Government						
District Health Boards - Additional Support	2018/19	-	4,830	4,830	4,830	4,830
Savings in the PHARMAC Combined Pharmaceuticals Budget	2018/19	-	(412)	(490)	(919)	(919)
Previous Government						
District Health Boards - Additional support	2017/18	6,248	6,248	6,248	6,248	6,248
Funding Redistribution of Budget 2017 District Health Boards - Additional Support initiative	2017/18	(1,178)	(1,178)	(1,178)	(1,178)	(1,178)
Pharmaceuticals - More Publicly Funded Medicines	2017/18	285	285	199	85	85
DHB Efficiency Savings	2017/18	(140)	(140)	(140)	(140)	(140)
District Health Boards - Additional Support	2016/17	3,695	3,695	3,695	3,695	3,695
More Publically Funded Medicines	2016/17	415	415	386	386	386
District Health Board (DHB) Additional Funding for Pressures	2015/16	2,836	2,836	2,836	2,836	2,836

Policy Initiative	Year of First Impact	2017/18 Final Budgeted \$000	2018/19 Budget \$000	2019/20 Estimated \$000	2020/21 Estimated \$000	2021/22 Estimated \$000
Reprioritising DHB Savings Delivered by PHARMAC	2015/16	(88)	(88)	(88)	(88)	(88)
DHB Demographics	2014/15	1,436	1,436	1,436	1,436	1,436
Contribution to DHB cost pressures	2014/15	1,356	1,356	1,356	1,356	1,356
Aged Residential Care - subsidy increase	2014/15	141	141	141	141	141

Reasons for Change in Appropriation

This appropriation increased by \$4.413 million to \$181.432 million mainly due to:

- \$4.830 million was provided for the Budget 2018 initiative District Health Boards - Additional Support.

This was partly offset by:

- \$412,000 of savings due to efficiencies with the transfer of responsibilities for hospital medicines purchasing to PHARMAC as part of their Combined Pharmaceutical Budget.

Conditions on Use of Appropriation

Reference	Conditions
New Zealand Public Health and Disability Act 2000	Section 10(2) (Crown funding agreements) provides that the Minister may, on behalf of the Crown, negotiate or enter into a Crown funding agreement with any person, containing any terms and conditions that may be agreed.

Health and Disability Support Services - Southern DHB (M36)

Scope of Appropriation

This appropriation is limited to personal and public health services, and management outputs from Southern DHB.

Expenses

	2017/18		2018/19
	Final Budgeted \$000	Estimated Actual \$000	Budget \$000
Total Appropriation	846,386	846,386	876,351

What is Intended to be Achieved with this Appropriation

This appropriation is intended to achieve services provided by the DHB that align with: Government priorities; the strategic direction set for the health sector by the Ministry of Health; the needs of the district's population; and regional considerations.

How Performance will be Assessed and End of Year Reporting Requirements

Please refer to the performance reporting information as shown in "Health and Disability Support Services - Auckland DHB".

End of Year Performance Reporting

The DHB will report performance information in its Annual Report.

Current and Past Policy Initiatives

Policy Initiative	Year of First Impact	2017/18 Final Budgeted \$000	2018/19 Budget \$000	2019/20 Estimated \$000	2020/21 Estimated \$000	2021/22 Estimated \$000
Current Government						
District Health Boards - Additional Support	2018/19	-	31,932	31,932	31,932	31,932
Savings in the PHARMAC Combined Pharmaceuticals Budget	2018/19	-	(1,977)	(2,348)	(4,406)	(4,406)
Previous Government						
District Health Boards - Additional support	2017/18	29,681	29,681	29,681	29,681	29,681
Funding Redistribution of Budget 2017 District Health Boards - Additional Support initiative	2017/18	(5,668)	(5,668)	(5,668)	(5,668)	(5,668)
Pharmaceuticals - More Publicly Funded Medicines	2017/18	1,352	1,352	947	406	406
DHB Efficiency Savings	2017/18	(651)	(651)	(651)	(651)	(651)
District Health Boards - Additional Support	2016/17	27,256	27,256	27,256	27,256	27,256
More Publically Funded Medicines	2016/17	1,975	1,975	1,839	1,839	1,839
District Health Board (DHB) Additional Funding for Pressures	2015/16	13,329	13,329	13,329	13,329	13,329
Reprioritising DHB Savings Delivered by PHARMAC	2015/16	(415)	(415)	(415)	(415)	(415)
DHB Demographics	2014/15	7,369	7,369	7,369	7,369	7,369
Contribution to DHB cost pressures	2014/15	6,363	6,363	6,363	6,363	6,363
Aged Residential Care - subsidy increase	2014/15	658	658	658	658	658

Reasons for Change in Appropriation

This appropriation increased by \$29.965 million to \$876.351 million mainly due to:

- \$31.932 million was provided for the Budget 2018 initiative District Health Boards - Additional Support.

This was partly offset by:

- \$1.977 million of savings due to efficiencies with the transfer of responsibilities for hospital medicines purchasing to PHARMAC as part of their Combined Pharmaceutical Budget.

Conditions on Use of Appropriation

Reference	Conditions
New Zealand Public Health and Disability Act 2000	Section 10(2) (Crown funding agreements) provides that the Minister may, on behalf of the Crown, negotiate or enter into a Crown funding agreement with any person, containing any terms and conditions that may be agreed.

Health and Disability Support Services - Tairāwhiti DHB (M36)

Scope of Appropriation

This appropriation is limited to personal and public health services, and management outputs from Tairāwhiti DHB.

Expenses

	2017/18		2018/19
	Final Budgeted \$000	Estimated Actual \$000	Budget \$000
Total Appropriation	160,655	160,655	165,267

What is Intended to be Achieved with this Appropriation

This appropriation is intended to achieve services provided by the DHB that align with: Government priorities; the strategic direction set for the health sector by the Ministry of Health; the needs of the district's population; and regional considerations.

How Performance will be Assessed and End of Year Reporting Requirements

Please refer to the performance reporting information as shown in "Health and Disability Support Services - Auckland DHB".

End of Year Performance Reporting

The DHB will report performance information in its Annual Report.

Current and Past Policy Initiatives

Policy Initiative	Year of First Impact	2017/18 Final Budgeted \$000	2018/19 Budget \$000	2019/20 Estimated \$000	2020/21 Estimated \$000	2021/22 Estimated \$000
Current Government						
District Health Boards - Additional Support	2018/19	-	4,986	4,986	4,986	4,986
Savings in the PHARMAC Combined Pharmaceuticals Budget	2018/19	-	(375)	(445)	(835)	(835)
Previous Government						
District Health Boards - Additional support	2017/18	5,661	5,661	5,661	5,661	5,661
Funding Redistribution of Budget 2017 District Health Boards - Additional Support initiative	2017/18	459	459	459	459	459
Pharmaceuticals - More Publicly Funded Medicines	2017/18	258	258	181	77	77
DHB Efficiency Savings	2017/18	(120)	(120)	(120)	(120)	(120)
District Health Boards - Additional Support	2016/17	7,054	7,054	7,054	7,054	7,054
More Publically Funded Medicines	2016/17	374	374	348	348	348
District Health Board (DHB) Additional Funding for Pressures	2015/16	2,487	2,487	2,487	2,487	2,487
Reprioritising DHB Savings Delivered by PHARMAC	2017/18	(77)	(77)	(77)	(77)	(77)
DHB Demographics	2014/15	1,221	1,221	1,221	1,221	1,221
Contribution to DHB cost pressures	2014/15	1,185	1,185	1,185	1,185	1,185
Aged Residential Care - subsidy increase	2014/15	121	121	121	121	121

Reasons for Change in Appropriation

This appropriation increased by \$4.612 million to \$165.267 million mainly due to:

- \$4.986 million was provided for the Budget 2018 initiative District Health Boards - Additional Support.

This was partly offset by:

- \$375,000 of savings due to efficiencies with the transfer of responsibilities for hospital medicines purchasing to PHARMAC as part of their Combined Pharmaceutical Budget.

Conditions on Use of Appropriation

Reference	Conditions
New Zealand Public Health and Disability Act 2000	Section 10(2) (Crown funding agreements) provides that the Minister may, on behalf of the Crown, negotiate or enter into a Crown funding agreement with any person, containing any terms and conditions that may be agreed.

Health and Disability Support Services - Taranaki DHB (M36)

Scope of Appropriation

This appropriation is limited to personal and public health services, and management outputs from Taranaki DHB.

Expenses

	2017/18		2018/19
	Final Budgeted \$000	Estimated Actual \$000	Budget \$000
Total Appropriation	335,663	335,663	345,188

What is Intended to be Achieved with this Appropriation

This appropriation is intended to achieve services provided by the DHB that align with: Government priorities; the strategic direction set for the health sector by the Ministry of Health; the needs of the district's population; and regional considerations.

How Performance will be Assessed and End of Year Reporting Requirements

Please refer to the performance reporting information as shown in "Health and Disability Support Services - Auckland DHB".

End of Year Performance Reporting

The DHB will report performance information in its Annual Report.

Current and Past Policy Initiatives

Policy Initiative	Year of First Impact	2017/18 Final Budgeted \$000	2018/19 Budget \$000	2019/20 Estimated \$000	2020/21 Estimated \$000	2021/22 Estimated \$000
Current Government						
District Health Boards - Additional Support	2018/19	-	10,296	10,296	10,296	10,296
Savings in the PHARMAC Combined Pharmaceuticals Budget	2018/19	-	(770)	(914)	(1,715)	(1,715)
Previous Government						
District Health Boards - Additional support	2017/18	11,616	11,616	11,616	11,616	11,616
Funding Redistribution of Budget 2017 District Health Boards - Additional Support initiative	2017/18	(3,474)	(3,474)	(3,474)	(3,474)	(3,474)
Pharmaceuticals - More Publicly Funded Medicines	2017/18	529	529	370	159	159
DHB Efficiency Savings	2017/18	(258)	(258)	(258)	(258)	(258)
District Health Boards - Additional Support	2016/17	6,998	6,998	6,998	6,998	6,998
More Publically Funded Medicines	2016/17	774	774	721	721	721
District Health Board (DHB) Additional Funding for Pressures	2015/16	13,610	13,610	13,610	13,610	13,610
Reprioritising DHB Savings Delivered by PHARMAC	2015/16	(460)	(460)	(460)	(460)	(460)
DHB Demographics	2014/15	3,208	3,208	3,208	3,208	3,208
Contribution to DHB cost pressures	2014/15	2,496	2,496	2,496	2,496	2,496
Aged Residential Care - subsidy increase	2014/15	261	261	261	261	261

Reasons for Change in Appropriation

This appropriation increased by \$9.525 million to \$345.188 million mainly due to:

- \$10.296 million was provided for the Budget 2018 initiative District Health Boards - Additional Support.

This was partly offset by:

- \$770,000 of savings due to efficiencies with the transfer of responsibilities for hospital medicines purchasing to PHARMAC as part of their Combined Pharmaceutical Budget.

Conditions on Use of Appropriation

Reference	Conditions
New Zealand Public Health and Disability Act 2000	Section 10(2) (Crown funding agreements) provides that the Minister may, on behalf of the Crown, negotiate or enter into a Crown funding agreement with any person, containing any terms and conditions that may be agreed.

Health and Disability Support Services - Waikato DHB (M36)

Scope of Appropriation

This appropriation is limited to personal and public health services, and management outputs from Waikato DHB.

Expenses

	2017/18		2018/19
	Final Budgeted \$000	Estimated Actual \$000	Budget \$000
Total Appropriation	1,150,497	1,150,497	1,197,666

What is Intended to be Achieved with this Appropriation

This appropriation is intended to achieve services provided by the DHB that align with: Government priorities; the strategic direction set for the health sector by the Ministry of Health; the needs of the district's population; and regional considerations.

How Performance will be Assessed and End of Year Reporting Requirements

Please refer to the performance reporting information as shown in "Health and Disability Support Services - Auckland DHB".

End of Year Performance Reporting

The DHB will report performance information in its Annual Report.

Current and Past Policy Initiatives

Policy Initiative	Year of First Impact	2017/18 Final Budgeted \$000	2018/19 Budget \$000	2019/20 Estimated \$000	2020/21 Estimated \$000	2021/22 Estimated \$000
Current Government						
District Health Boards - Additional Support	2018/19	-	49,816	49,816	49,816	49,816
Savings in the PHARMAC Combined Pharmaceuticals Budget	2018/19	-	(2,637)	(3,132)	(5,877)	(5,877)
Previous Government						
District Health Boards - Additional support	2017/18	39,525	39,525	39,525	39,525	39,525
Funding Redistribution of Budget 2017 District Health Boards - Additional Support initiative	2017/18	4,385	4,385	4,385	4,385	4,385
Pharmaceuticals - More Publicly Funded Medicines	2017/18	1,801	1,801	1,260	540	540
DHB Efficiency Savings	2017/18	(827)	(827)	(827)	(827)	(827)
District Health Boards - Additional Support	2016/17	49,121	49,121	49,121	49,121	49,121
More Publically Funded Medicines	2016/17	2,601	2,601	2,422	2,422	2,422
District Health Board (DHB) Additional Funding for Pressures	2015/16	43,957	43,957	43,957	43,957	43,957

Policy Initiative	Year of First Impact	2017/18 Final Budgeted \$000	2018/19 Budget \$000	2019/20 Estimated \$000	2020/21 Estimated \$000	2021/22 Estimated \$000
Reprioritising DHB Savings Delivered by PHARMAC	2015/16	(1,474)	(1,474)	(1,474)	(1,474)	(1,474)
DHB Demographics	2014/15	14,770	14,770	14,770	14,770	14,770
Contribution to DHB cost pressures	2014/15	8,096	8,096	8,096	8,096	8,096
Aged Residential Care - subsidy increase	2014/15	835	835	835	835	835

Reasons for Change in Appropriation

This appropriation increased by \$47.169 million to \$1,197.666 million mainly due to:

- \$49.816 million was provided for the Budget 2018 initiative District Health Boards - Additional Support.

This was partly offset by:

- \$2.637 million of savings due to efficiencies with the transfer of responsibilities for hospital medicines purchasing to PHARMAC as part of their Combined Pharmaceutical Budget.

Conditions on Use of Appropriation

Reference	Conditions
New Zealand Public Health and Disability Act 2000	Section 10(2) (Crown funding agreements) provides that the Minister may, on behalf of the Crown, negotiate or enter into a Crown funding agreement with any person, containing any terms and conditions that may be agreed.

Health and Disability Support Services - Wairarapa DHB (M36)

Scope of Appropriation

This appropriation is limited to personal and public health services, and management outputs from Wairarapa DHB.

Expenses

	2017/18		2018/19
	Final Budgeted \$000	Estimated Actual \$000	Budget \$000
Total Appropriation	135,250	135,250	140,030

What is Intended to be Achieved with this Appropriation

This appropriation is intended to achieve services provided by the DHB that align with: Government priorities; the strategic direction set for the health sector by the Ministry of Health; the needs of the district's population; and regional considerations.

How Performance will be Assessed and End of Year Reporting Requirements

Please refer to the performance reporting information as shown in "Health and Disability Support Services - Auckland DHB".

End of Year Performance Reporting

The DHB will report performance information in its Annual Report.

Current and Past Policy Initiatives

Policy Initiative	Year of First Impact	2017/18 Final Budgeted \$000	2018/19 Budget \$000	2019/20 Estimated \$000	2020/21 Estimated \$000	2021/22 Estimated \$000
Current Government						
District Health Boards - Additional Support	2018/19	-	5,092	5,092	5,092	5,092
Savings in the PHARMAC Combined Pharmaceuticals Budget	2018/19	-	(317)	(377)	(707)	(707)
Previous Government						
District Health Boards - Additional support	2017/18	4,760	4,760	4,760	4,760	4,760
Funding Redistribution of Budget 2017 District Health Boards - Additional Support initiative	2017/18	(1,478)	(1,478)	(1,478)	(1,478)	(1,478)
Pharmaceuticals - More Publicly Funded Medicines	2017/18	217	217	152	65	65
DHB Efficiency Savings	2017/18	(104)	(104)	(104)	(104)	(104)
District Health Boards - Additional Support	2016/17	2,826	2,826	2,826	2,826	2,826
More Publically Funded Medicines	2016/17	316	316	294	294	294
District Health Board (DHB) Additional Funding for Pressures	2015/16	5,462	5,462	5,462	5,462	5,462
Reprioritising DHB Savings Delivered by PHARMAC	2015/16	(185)	(185)	(185)	(185)	(185)
DHB Demographics	2014/15	1,431	1,431	1,431	1,431	1,431
Contribution to DHB cost pressures	2014/15	1,003	1,003	1,003	1,003	1,003
Aged Residential Care - subsidy increase	2014/15	105	105	105	105	105

Reasons for Change in Appropriation

This appropriation increased by \$4.780 million to \$140.030 million mainly due to:

- \$5.092 million was provided for the Budget 2018 initiative District Health Boards - Additional Support.

This was partly offset by:

- \$317,000 of savings due to efficiencies with the transfer of responsibilities for hospital medicines purchasing to PHARMAC as part of their Combined Pharmaceutical Budget.

Conditions on Use of Appropriation

Reference	Conditions
New Zealand Public Health and Disability Act 2000	Section 10(2) (Crown funding agreements) provides that the Minister may, on behalf of the Crown, negotiate or enter into a Crown funding agreement with any person, containing any terms and conditions that may be agreed.

Health and Disability Support Services - Waitemata DHB (M36)

Scope of Appropriation

This appropriation is limited to personal and public health services, and management outputs from Waitemata DHB.

Expenses

	2017/18		2018/19
	Final Budgeted \$000	Estimated Actual \$000	Budget \$000
Total Appropriation	1,464,458	1,464,458	1,531,538

What is Intended to be Achieved with this Appropriation

This appropriation is intended to achieve services provided by the DHB that align with: Government priorities; the strategic direction set for the health sector by the Ministry of Health; the needs of the district's population; and regional considerations.

How Performance will be Assessed and End of Year Reporting Requirements

Please refer to the performance reporting information as shown in "Health and Disability Support Services - Auckland DHB".

End of Year Performance Reporting

The DHB will report performance information in its Annual Report.

Current and Past Policy Initiatives

Policy Initiative	Year of First Impact	2017/18 Final Budgeted \$000	2018/19 Budget \$000	2019/20 Estimated \$000	2020/21 Estimated \$000	2021/22 Estimated \$000
Current Government						
District Health Boards - Additional Support	2018/19	-	70,419	70,419	70,419	70,419
Savings in the PHARMAC Combined Pharmaceuticals Budget	2018/19	-	(3,319)	(3,942)	(7,398)	(7,398)
Previous Government						
District Health Boards - Additional support	2017/18	49,544	49,544	49,544	49,544	49,544
Funding Redistribution of Budget 2017 District Health Boards - Additional Support initiative	2017/18	12,603	12,603	12,603	12,603	12,603
Pharmaceuticals - More Publicly Funded Medicines	2017/18	2,257	2,257	1,580	677	677
DHB Efficiency Savings	2017/18	(1,072)	(1,072)	(1,072)	(1,072)	(1,072)
District Health Boards - Additional Support	2016/17	43,950	43,950	43,950	43,950	43,950
More Publically Funded Medicines	2016/17	3,251	3,251	3,027	3,027	3,027
District Health Board (DHB) Additional Funding for Pressures	2015/16	29,893	29,893	29,893	29,893	29,893
Reprioritising DHB Savings Delivered by PHARMAC	2015/16	(965)	(965)	(965)	(965)	(965)
DHB Demographics	2014/15	38,661	38,661	38,661	38,661	38,661
Contribution to DHB cost pressures	2014/15	10,407	10,407	10,407	10,407	10,407
Aged Residential Care - subsidy increase	2014/15	1,083	1,083	1,083	1,083	1,083

Reasons for Change in Appropriation

This appropriation increased by \$67.080 million to \$1,531.538 million mainly due to:

- \$70.419 million was provided for the Budget 2018 initiative District Health Boards - Additional Support.

This was partly offset by:

- \$3.319 million of savings due to efficiencies with the transfer of responsibilities for hospital medicines purchasing to PHARMAC as part of their Combined Pharmaceutical Budget.

Conditions on Use of Appropriation

Reference	Conditions
New Zealand Public Health and Disability Act 2000	Section 10(2) (Crown funding agreements) provides that the Minister may, on behalf of the Crown, negotiate or enter into a Crown funding agreement with any person, containing any terms and conditions that may be agreed.

Health and Disability Support Services - West Coast DHB (M36)

Scope of Appropriation

This appropriation is limited to personal and public health services, and management outputs from West Coast DHB.

Expenses

	2017/18		2018/19
	Final Budgeted \$000	Estimated Actual \$000	Budget \$000
Total Appropriation	128,077	128,077	132,618

What is Intended to be Achieved with this Appropriation

This appropriation is intended to achieve services provided by the DHB that align with: Government priorities; the strategic direction set for the health sector by the Ministry of Health; the needs of the district's population; and regional considerations.

How Performance will be Assessed and End of Year Reporting Requirements

Please refer to the performance reporting information as shown in "Health and Disability Support Services - Auckland DHB".

End of Year Performance Reporting

The DHB will report performance information in its Annual Report.

Current and Past Policy Initiatives

Policy Initiative	Year of First Impact	2017/18 Final Budgeted \$000	2018/19 Budget \$000	2019/20 Estimated \$000	2020/21 Estimated \$000	2021/22 Estimated \$000
Current Government						
District Health Boards - Additional Support	2018/19	-	2,876	2,876	2,876	2,876
Savings in the PHARMAC Combined Pharmaceuticals Budget	2018/19	-	(256)	(305)	(571)	(571)
Previous Government						
District Health Boards - Additional support	2017/18	3,896	3,896	3,896	3,896	3,896
Funding Redistribution of Budget 2017 District Health Boards - Additional Support initiative	2017/18	(781)	(781)	(781)	(781)	(781)
Pharmaceuticals - More Publicly Funded Medicines	2017/18	177	177	124	53	53
DHB Efficiency Savings	2017/18	(86)	(86)	(86)	(86)	(86)
District Health Boards - Additional Support	2016/17	2,608	2,608	2,608	2,608	2,608
More Publicly Funded Medicines	2016/17	264	264	246	246	246
District Health Board (DHB) Additional Funding for Pressures	2015/16	2,019	2,019	2,019	2,019	2,019
Reprioritising DHB Savings Delivered by PHARMAC	2015/16	(64)	(64)	(64)	(64)	(64)
DHB Demographics	2014/15	1,843	1,843	1,843	1,843	1,843
Contribution to DHB cost pressures	2014/15	937	937	937	937	937
Aged Residential Care - subsidy increase	2014/15	87	87	87	87	87

Reasons for Change in Appropriation

This appropriation increased by \$4.541 million to \$132.618 million due to:

- \$2.876 million was provided for the Budget 2018 initiative District Health Boards - Additional Support, and
- \$1.921 million was provided for a technical change in funding due to the difference between capital charge expense and interest paid on debt.

This was partly offset by:

- \$256,000 of savings due to efficiencies with the transfer of responsibilities for hospital medicines purchasing to PHARMAC as part of their Combined Pharmaceutical Budget.

Conditions on Use of Appropriation

Reference	Conditions
New Zealand Public Health and Disability Act 2000	Section 10(2) (Crown funding agreements) provides that the Minister may, on behalf of the Crown, negotiate or enter into a Crown funding agreement with any person, containing any terms and conditions that may be agreed.

Health and Disability Support Services - Whanganui DHB (M36)

Scope of Appropriation

This appropriation is limited to personal and public health services, and management outputs from Whanganui DHB.

Expenses

	2017/18		2018/19
	Final Budgeted \$000	Estimated Actual \$000	Budget \$000
Total Appropriation	218,556	218,556	225,131

What is Intended to be Achieved with this Appropriation

This appropriation is intended to achieve services provided by the DHB that align with: Government priorities; the strategic direction set for the health sector by the Ministry of Health; the needs of the district's population; and regional considerations.

How Performance will be Assessed and End of Year Reporting Requirements

Please refer to the performance reporting information as shown in "Health and Disability Support Services - Auckland DHB".

End of Year Performance Reporting

The DHB will report performance information in its Annual Report.

Current and Past Policy Initiatives

Policy Initiative	Year of First Impact	2017/18 Final Budgeted \$000	2018/19 Budget \$000	2019/20 Estimated \$000	2020/21 Estimated \$000	2021/22 Estimated \$000
Current Government						
District Health Boards - Additional Support	2018/19	-	7,053	7,053	7,053	7,053
Savings in the PHARMAC Combined Pharmaceuticals Budget	2018/19	-	(482)	(572)	(1,074)	(1,074)
Previous Government						
District Health Boards - Additional support	2017/18	7,267	7,267	7,267	7,267	7,267
Funding Redistribution of Budget 2017 District Health Boards - Additional Support initiative	2017/18	(659)	(659)	(659)	(659)	(659)
Pharmaceuticals - More Publicly Funded Medicines	2017/18	331	331	232	99	99
DHB Efficiency Savings	2017/18	(161)	(161)	(161)	(161)	(161)
District Health Boards - Additional Support	2016/17	4,416	4,416	4,416	4,416	4,416
More Publically Funded Medicines	2016/17	484	484	449	449	449
District Health Board (DHB) Additional Funding for Pressures	2015/16	3,405	3,405	3,405	3,405	3,405
Reprioritising DHB Savings Delivered by PHARMAC	2015/16	(106)	(106)	(106)	(106)	(106)
DHB Demographics	2014/15	1,798	1,798	1,798	1,798	1,798
Contribution to DHB cost pressures	2014/15	1,647	1,647	1,647	1,647	1,647
Aged Residential Care - subsidy increase	2014/15	165	165	165	165	165

Reasons for Change in Appropriation

This appropriation increased by \$6.575 million to \$225.131 million mainly due to:

- \$7.053 million was provided for the Budget 2018 initiative District Health Boards - Additional Support.

This was partly offset by:

- \$482,000 of savings due to efficiencies with the transfer of responsibilities for hospital medicines purchasing to PHARMAC as part of their Combined Pharmaceutical Budget.

Conditions on Use of Appropriation

Reference	Conditions
New Zealand Public Health and Disability Act 2000	Section 10(2) (Crown funding agreements) provides that the Minister may, on behalf of the Crown, negotiate or enter into a Crown funding agreement with any person, containing any terms and conditions that may be agreed.

Health Sector Projects Operating Expenses (M36)

Scope of Appropriation

This appropriation is limited to operating expenses associated with the governance, planning and development of health sector capital projects.

Expenses

	2017/18		2018/19
	Final Budgeted \$000	Estimated Actual \$000	Budget \$000
Total Appropriation	10,328	8,628	3,500

What is Intended to be Achieved with this Appropriation

This appropriation is intended to enable the planning for major DHB capital projects.

How Performance will be Assessed and End of Year Reporting Requirements

	2017/18		2018/19
	Final Budgeted Standard	Estimated Actual	Budget Standard
Assessment of Performance			
The key project milestones for major DHB capital projects are delivered as per agreed timeframes	Achieved	Achieved	Achieved

End of Year Performance Reporting

Performance information will be reported in the Minister's Vote Health Report in Relation to Selected Non-Departmental Appropriations.

Reasons for Change in Appropriation

This appropriation decreased by \$6.828 million to \$3.500 million due to one-off increases in the appropriation in 2017/18 as noted below, partly offset by:

- \$3.492 million was due to funding transfers between years for the Dunedin Hospital redevelopment.

Note - This appropriation increased by \$10.320 million in 2017/18 only mainly due to funding transferred from the Equity for Capital Projects for DHBs and Health Sector Crown Agencies appropriation to develop business cases, including \$6 million for the Dunedin Hospital redevelopment and \$3.200 million for the Parkside redevelopment in Christchurch.

Health Workforce Training and Development (M36)

Scope of Appropriation

This appropriation is limited to the provision, purchase, and support of workforce development for people working in the health and disability sector and of services that support those workforces to be sustainable, flexible, and fit-for-purpose.

Expenses

	2017/18		2018/19
	Final Budgeted \$000	Estimated Actual \$000	Budget \$000
Total Appropriation	186,745	186,745	186,745

What is Intended to be Achieved with this Appropriation

This appropriation is intended to achieve the following: the New Zealand health sector is supported to develop a sustainable, flexible, and fit-for-purpose workforce through the funding of clinical training and other initiatives.

How Performance will be Assessed and End of Year Reporting Requirements

Assessment of Performance	2017/18		2018/19
	Final Budgeted Standard	Estimated Actual	Budget Standard
Medicine Workforce			
The number of first year general practitioner trainees supported by the Ministry of Health funding is equal to or greater than	180	185	180
Percentage of vocationally registered general practitioners trained in New Zealand with support from Ministry of Health funding who are still practising in New Zealand after:			
• two years is equal to or greater than	80%	92%	80%
• five years is equal to or greater than	80%	78%	80%
The number of training units for vocational registrars (excluding general practitioners) supported by Ministry of Health funding is equal to or greater than	1,206	1,206	1,206

Assessment of Performance	2017/18		2018/19
	Final Budgeted Standard	Estimated Actual	Budget Standard
Percentage of vocationally registered specialist doctors (excluding general practitioners) trained in New Zealand with support from Ministry of Health funding who are still practising in New Zealand after:			
• two years is equal to or greater than	70%	82%	70%
• five years is equal to or greater than	80%	80%	80%
The number of post-graduate year one trainees supported by Ministry of Health funding is equal to or greater than	490	490	490
Percentage of post-graduate year one trainees trained in New Zealand with support from Ministry of Health funding who were still practising in New Zealand after:			
• two years is equal to or greater than	90%	91%	90%
• five years is equal to or greater than	85%	90%	85%
Nursing Workforce			
The number of Nursing Entry to Practice (NETP) trainees supported by Ministry of Health funding is equal to or greater than	1,135	1,131	1,135
The number of New Entry to Specialty Practice (NESP) nurse trainees supported by Ministry of Health funding is equal to or greater than	163	158	163
Midwifery Workforce			
The number of midwifery first year of practice trainees supported by Ministry of Health funding is equal to or greater than	161	161	161
Mental Health Workforce			
Percentage of workers supported by the Ministry of Health development funding who achieve a mental health and addiction specific qualification	100%	100%	100%
Disability Support Workers			
Percentage of disability support workers supported by the Ministry of Health development funding who achieved competency at NZQA qualification levels	100%	100%	100%
Māori and Pacific Multi-disciplinary Workforce			
Percentage of eligible Māori workforce accessing support provided by the Ministry of Health who successfully complete their training programme	100%	100%	100%
Percentage of eligible Pacific workforce accessing support provided by the Ministry of Health who successfully complete their training programme	100%	100%	100%
Voluntary Bonding Scheme (VBS)			
People are being retained in the scheme: The percentage of registrants who applied for payment in the previous year who applied for payment in the current academic year, where this is allowable under the terms of the scheme	75%	75%	75%

End of Year Performance Reporting

Performance information will be reported in the Minister's Vote Health Report in Relation to Selected Non-Departmental Appropriations.

Service Providers

Provider	2017/18 Final Budgeted \$000	2017/18 Estimated Actual \$000	2018/19 Budget \$000	Expiry of Resourcing Commitment
Crown Entities				
DHBs	120,704	120,704	Not yet known	Ongoing
University of Auckland	3,403	3,403	Not yet known	Ongoing
Auckland UniServices Limited	2,532	2,532	Not yet known	Ongoing
University of Otago	2,287	2,287	Not yet known	Ongoing
Non-Governmental Organisations				
Royal New Zealand College of General Practitioners	21,959	21,959	Not yet known	Ongoing
Te Pou Limited	16,379	16,379	Not yet known	Ongoing
Te Rau Matatini Limited	4,243	4,243	Not yet known	Ongoing
New Zealand College of Midwives	4,123	4,123	Not yet known	Ongoing
Other NGOs	11,115	11,115	Not yet known	Ongoing
Total	186,745	186,745	186,745	

Current and Past Policy Initiatives

Policy Initiative	Year of First Impact	2017/18 Final Budgeted \$000	2018/19 Budget \$000	2019/20 Estimated \$000	2020/21 Estimated \$000	2021/22 Estimated \$000
Previous Government						
Health Workforce Training and Development - Additional support	2017/18	1,919	1,919	1,919	1,919	1,919
Health Workforce Training and Development - Additional Support	2016/17	2,695	2,695	2,695	2,695	2,695
Workforce: Post-Graduate Education And Training of Doctors	2014/15	7,658	7,658	7,658	7,658	7,658

Conditions on Use of Appropriation

Reference	Conditions
Health Practitioners Competence Assurance Act 2003	Section 115 sets out conditions for designating health services as a health profession.

Monitoring and Protecting Health and Disability Consumer Interests (M36)

Scope of Appropriation

This appropriation is limited to the provision, purchase, and support of services that monitor and protect health and disability consumer interests.

Expenses

	2017/18		2018/19
	Final Budgeted \$000	Estimated Actual \$000	Budget \$000
Total Appropriation	29,846	29,846	29,546

What is Intended to be Achieved with this Appropriation

This appropriation is intended to protect the rights of people using health and disability services. This includes addressing the concerns of whānau and investigating alleged breaches of patients' rights.

How Performance will be Assessed and End of Year Reporting Requirements

	2017/18		2018/19
	Final Budgeted Standard	Estimated Actual	Budget Standard
Assessment of Performance			
Mental health reviews and inquiries			
The percentage of District Mental Health Inspectors' monthly reports, on their duties undertaken, sent to the Director of Mental Health, within one month after completion	90%	90%	90%
The annual report by the Mental Health Review Tribunal, on their duties undertaken, to the Director of Mental Health, by the due date (31 October)	Achieved	Achieved	Achieved
Report one, as part of the six monthly reports, administered by the Tribunal's secretariat, to the Director of Mental Health, is received by 20 October	Achieved	Achieved	Achieved
Report two, as part of the six monthly reports, administered by the Tribunal's secretariat, to the Director of Mental Health, is received by 20 May	Achieved	Achieved	Achieved
The start of the Mental Health Tribunal review held within 28 days of receipt of the application	75%	75%	75%

Health and Disability Commissioner

The performance measures are those contained in the Crown entity's Statement of Performance Expectations.

Health Quality and Safety Commission

The performance measures are those contained in the Crown entity's Statement of Performance Expectations.

End of Year Performance Reporting

Performance information will be reported in the Minister's Vote Health Report in Relation to Selected Non-Departmental Appropriations; Crown entity performance information will be reported in their respective Annual Reports.

Service Providers

Provider	2017/18 Final Budgeted \$000	2017/18 Estimated Actual \$000	2018/19 Budget \$000	Expiry of Resourcing Commitment
Crown Entities				
Health Quality & Safety Commission	13,476	13,476	Not yet known	Ongoing
Health & Disability Commissioner	12,870	12,870	Not yet known	Ongoing
Mental Health District Inspectors	3,500	3,500	Not yet known	Ongoing
Total	29,846	29,846	29,546	

Current and Past Policy Initiatives

Policy Initiative	Year of First Impact	2017/18 Final Budgeted \$000	2018/19 Budget \$000	2019/20 Estimated \$000	2020/21 Estimated \$000	2021/22 Estimated \$000
Previous Government						
Severe Acute Maternal Morbidity (SAMM) audit	2015/16	500	500	500	500	500
District Health Inspectors - cost pressures	2014/15	500	500	500	500	500

Conditions on Use of Appropriation

Reference	Conditions
Health and Disability Commissioner Act 1994	Sections 8-10 provide for the appointment of Commissioners.
New Zealand Public Health and Disability Act 2000	The Health Quality and Safety Commission (HQSC) is established under Part 4 (section 59A) of the Act.
Mental Health (Compulsory Assessment and Treatment) Act 1992	Section 102, the Mental Health Review Tribunal's primary function is to consider whether patients subject to compulsory treatment orders are mentally disordered as defined by the Act.
Mental Health (Compulsory Assessment and Treatment) Act 1992	Section 94, District Inspectors are barristers and solicitors appointed by the Minister of Health to uphold the rights of patients as set out in the Act and under section 98A they report monthly to the Director of Mental Health.

National Child Health Services (M36)

Scope of Appropriation

This appropriation is limited to the provision, purchase, and support of child health services.

Expenses

	2017/18		2018/19
	Final Budgeted \$000	Estimated Actual \$000	Budget \$000
Total Appropriation	83,001	83,001	89,254

What is Intended to be Achieved with this Appropriation

This appropriation is intended to provide services that support the development of New Zealand children and establish a foundation for those children to live longer, healthier, and more independent lives.

How Performance will be Assessed and End of Year Reporting Requirements

	2017/18		2018/19
	Final Budgeted Standard	Estimated Actual	Budget Standard
Assessment of Performance			
Infants receive their full Well Child/Tamariki Ora (WCTO) Entitlement			
Percentage of enrolled infants (0-12 months) who receive all core WCTO contacts (see Note 1)	85%	85%	85%
Telephone information and advisory services delivered by Plunkettline to support the Well Child/Tamaki Ora Framework:			
<ul style="list-style-type: none"> The percentage of time the phone line service is available 24/7 is greater than or equal to 	99%	100%	99%
B4 School Checks (B4SCs)			
Percentage of the population delivered B4SCs	90%	90%	90%
Percentage of the high deprivation population delivered B4SCs	90%	90%	90%

Note 1 - Enrolling with a WCTO provider at birth or as soon as possible thereafter allows sufficient time for WCTO providers to deliver the first core contact on time at around 6 weeks and therefore meet the quality indicator of delivering the full entitlement to children in the first year of life (if core 1 is missed, they are unable to meet the full entitlement measure).

End of Year Performance Reporting

Performance information will be reported in the Minister's Vote Health Report in Relation to Selected Non-Departmental Appropriations.

Service Providers

Provider	2017/18 Final Budgeted \$000	2017/18 Estimated Actual \$000	2018/19 Budget \$000	Expiry of Resourcing Commitment
Crown Entities				
DHBs	28,206	28,206	Not yet known	Ongoing
Non-Governmental Organisations				
Royal New Zealand Plunket Society	53,310	53,310	Not yet known	Ongoing
Other NGOs	1,485	1,485	Not yet known	Ongoing
Total	83,001	83,001	89,254	

Current and Past Policy Initiatives

Policy Initiative	Year of First Impact	2017/18 Final Budgeted \$000	2018/19 Budget \$000	2019/20 Estimated \$000	2020/21 Estimated \$000	2021/22 Estimated \$000
Current Government						
Expansion of School Based Health Services	2018/19	-	4,253	4,253	4,253	4,253
Previous Government						
School-Based Health Services - Additional Support	2016/17	70	70	70	70	70
National Child Health Services - Pressure	2015/16	2,961	2,961	2,961	2,961	2,961
Demographic and cost pressures	2014/15	1,645	1,645	1,645	1,645	1,645

Conditions on Use of Appropriation

Reference	Conditions
New Zealand Public Health and Disability Act 2000	Section 3 of the Act provides for the provision of health and disability services including child health services.

National Contracted Services - Other (M36)*Scope of Appropriation*

This appropriation is limited to the purchase of other services directly by the Crown to support the health and disability services sector, including the national management of pharmaceuticals, and health research.

Expenses

	2017/18		2018/19
	Final Budgeted \$000	Estimated Actual \$000	Budget \$000
Total Appropriation	25,220	25,220	28,720

Note - This appropriation decreased by \$3.500 million in 2017/18 only due to funding being transferred to the National Maternity Services, National Elective Services and National Disability Support Services appropriations to address service pressures.

What is Intended to be Achieved with this Appropriation

This appropriation is intended to provide health-related services that align with Government priorities or the strategic direction for health services (see the Ministry of Health's Statement of Strategic Intentions) but are out of scope for other national services appropriations in Vote Health. Examples include: funding for the basic operating costs of PHARMAC and the Health Research Council.

How Performance will be Assessed and End of Year Reporting Requirements

PHARMAC

The performance measures are those contained in the Crown entity's Statement of Performance Expectations.

Health Research Council

The performance measures are those contained in the Crown entity's Statement of Performance Expectations.

End of Year Performance Reporting

Crown entity performance information will be reported in each entity's respective Annual Report.

Service Providers

Provider	2017/18 Final Budgeted \$000	2017/18 Estimated Actual \$000	2018/19 Budget \$000	Expiry of Resourcing Commitment
Crown Entities				
PHARMAC	21,988	21,988	Not yet known	Ongoing
Other Crown Entities	285	285	Not yet known	Ongoing
Non-Governmental Organisations				
NGOs	2,947	2,947	Not yet known	Ongoing
Total	25,220	25,220	28,720	

Current and Past Policy Initiatives

Policy Initiative	Year of First Impact	2017/18 Final Budgeted \$000	2018/19 Budget \$000	2019/20 Estimated \$000	2020/21 Estimated \$000	2021/22 Estimated \$000
Previous Government						
Healthy Homes Initiative - Expansion	2016/17	4,500	4,500	4,500	4,500	4,500
Other Nationally Purchased Health Services - Additional Support	2016/17	400	400	400	400	400
Palliative Care Community Service Support Roles	2015/16	7,000	7,000	7,000	7,000	7,000
Pressures funding for contract lens and chaplaincy services	2014/15	22	22	22	22	22

Conditions on Use of Appropriation

Reference	Conditions
New Zealand Public Health and Disability Act 2000	The Pharmaceutical Management Agency (PHARMAC) is established under Part 4 (sections 46-52) of the Act.

National Disability Support Services (M36)

Scope of Appropriation

This appropriation is limited to the provision, purchase, and support of disability support services.

Expenses

	2017/18		2018/19
	Final Budgeted \$000	Estimated Actual \$000	Budget \$000
Total Appropriation	1,237,680	1,237,680	1,268,594

Components of the Appropriation

	2017/18		2018/19
	Final Budgeted \$000	Estimated Actual \$000	Budget \$000
Residential Care	544,864	544,915	Not yet known
Community Care	275,728	276,831	Not yet known
Environmental Support	152,736	152,776	Not yet known
Funded Family Care	9,578	9,456	Not yet known
Other disability support services	254,774	253,702	Not yet known
Total	1,237,680	1,237,680	1,268,594

What is Intended to be Achieved with this Appropriation

This appropriation is intended to provide support for disabled people and their families/whānau to enable them to live good lives.

How Performance will be Assessed and End of Year Reporting Requirements

	2017/18		2018/19
	Final Budgeted Standard	Estimated Actual	Budget Standard
Assessment of Performance			
Needs Assessment and Service Co-ordination			
All new eligible Disability Support Services clients are assessed within 20 days of referral is equal to or greater than	80%	85%	80%
All new clients assessed as being eligible for Ministry-funded support are provided with their support options within 20 days of assessment is equal to or greater than	85%	90%	85%

Assessment of Performance	2017/18		2018/19
	Final Budgeted Standard	Estimated Actual	Budget Standard
Community Support Services			
The percentage of self-directed funding arrangements to improve the person's choice, control and flexibility, (e.g. Choices in Community Living, Individualised Funding, Enhanced Individualised Funding, Flexible Disability Supports, Personal Budgets and Enabling Good Lives) within the total client population is greater than or equal to	10%	15%	10%
The percentage of people engaged in early intervention by completing Behaviour Support Treatment Programme to prevent inappropriate behaviour from becoming permanent is greater than or equal to	75%	75%	75%
Residential to Community Support Services			
Percentage of Disability Support Service clients moving from mainstream residential service to community support services increases over time so that the percentage receiving community support services is greater than or equal to	77%	77%	77%
Environmental Support			
The percentage of equipment available and supplied from the Ministry of Health's standardised equipment list to ensure value for money is greater than or equal to	75%	75%	75%
Quality			
The percentage of services that have implemented audit/evaluation requirements within the time required by the auditor	90%	100%	90%
Stakeholder Engagement			
Percentage of stakeholders surveyed assess the engagement and content of the DSS external forums (e.g. Consumer Consortium, Provider Forums etc.) as meeting expectations or above	80%	85%	80%

End of Year Performance Reporting

Performance information will be reported in the Minister's Vote Health Report in Relation to Selected Non-Departmental Appropriations.

Service Providers

Provider	2017/18 Final Budgeted \$000	2017/18 Estimated Actual \$000	2018/19 Budget \$000	Expiry of Resourcing Commitment
Crown Entities				
DHBs	125,358	127,681	Not yet known	Ongoing
Enable New Zealand (an operating division of MidCentral DHB)	83,834	86,427	Not yet known	Ongoing

Provider	2017/18 Final Budgeted \$000	2017/18 Estimated Actual \$000	2018/19 Budget \$000	Expiry of Resourcing Commitment
Non-Governmental Organisations				
IDEA Services Limited	213,371	212,546	Not yet known	Ongoing
NZ Care Group	67,623	72,112	Not yet known	Ongoing
Manawanui in Charge Ltd	65,062	72,520	Not yet known	Ongoing
Spectrum Care Trust	47,362	47,478	Not yet known	Ongoing
Geneva Healthcare Limited	26,530	25,116	Not yet known	Ongoing
Te Roopu Taurima O Manukau Trust	28,408	26,992	Not yet known	Ongoing
Hohepa Services Limited	22,865	22,839	Not yet known	Ongoing
Environmental Health Management Services Limited	24,954	27,268	Not yet known	Ongoing
Healthcare Of New Zealand	26,155	24,979	Not yet known	Ongoing
Community Living Limited	19,489	23,068	Not yet known	Ongoing
Other NGOs	486,669	468,654	Not yet known	Ongoing
Total	1,237,680	1,237,680	1,268,594	

Current and Past Policy Initiatives

Policy Initiative	Year of First Impact	2017/18 Final Budgeted \$000	2018/19 Budget \$000	2019/20 Estimated \$000	2020/21 Estimated \$000	2021/22 Estimated \$000
Current Government						
Transforming the Disability Support System drawdown from Contingency Fund	2018/19	-	5,622	4,829	-	-
Disability Support Services - Additional Support	2017/18	9,000	58,407	54,407	46,407	42,407
Previous Government						
Disability Support Services - Additional support	2017/18	44,562	44,562	44,562	44,562	44,562
Disability Support Services - Additional Support	2016/17	42,296	42,296	42,296	42,296	42,296
In-Between Travel	2015/16	14,000	14,000	14,000	14,000	14,000
Disability Support: Community Residential Services - Pressure	2015/16	12,307	12,307	12,307	12,307	12,307
Disability Support Services - Pressures	2015/16	9,800	9,800	9,800	9,800	9,800
Disability Support: Home and Community Support Services - Pressure	2015/16	6,090	6,090	6,090	6,090	6,090
Disability Support: Environmental Support Services - Pressure	2015/16	2,241	2,241	2,241	2,241	2,241
Disability Support: Other Services and Minimum Wage Increase - Pressure	2015/16	5,683	5,683	5,683	5,683	5,683
Disability Support: High and Complex Services Cost Pressure	2015/16	510	510	510	510	510
Home based support (In-Between Travel)	2014/15	24,000	24,000	24,000	24,000	24,000
Demographic and cost pressures	2014/15	24,812	24,812	24,812	24,812	24,812
Vocational services for school leavers with disabilities and very high needs	2014/15	1,500	1,500	1,500	1,500	1,500
Aged Residential Care - subsidy increase	2014/15	400	400	400	400	400

Reasons for Change in Appropriation

This appropriation increased by \$30.914 million to \$1,268.594 million mainly due to:

- \$49.407 million was due to a net increase in funding between 2017/18 to 2018/19, from the Budget 2018 initiative Disability Support Services - Additional Support, and
- \$5.622 million was drawdown from the Disability Support Services - Enabling Good Lives contingency, established in Budget 2017, to continue the transformation of the disability support system.

Note - This appropriation increased by \$24.115 million in 2017/18 only due to funding being transferred from the Public Health Service Purchasing, National Māori Health Services, Provider Development, Primary Health Care Strategy, National Child Health Services and National Contracted Services - Other appropriations to meet pressures on disability support services.

Conditions on Use of Appropriation

Reference	Conditions
Health and Disability Services (Safety) Act 2001	The provision of health and disability services, including rehabilitation services, physiotherapy services; services provided to people with disabilities or people who are frail (whether because of their age or for some other reason), for their care or support or to promote their independence; and rest home care services that are residential care provided for the care or support of, or to promote the independence of, people who are frail.
New Zealand Public Health and Disability Act 2000	Sections 70A - 70E provide that the Ministry may pay family members for providing support care to their disabled children only where expressly permitted under an applicable family care policy (or otherwise expressly authorised by law). Section 70E in particular bars complaints of discrimination based on such policies to the Human Rights Commission/courts/tribunals (subject to certain conditions).
Disabled Persons Community Welfare Act 1975	Section 25A sets out the right of review for persons in residential care to assess the adequacy of the disability services or whether or not the person's needs are appropriately met.

National Elective Services (M36)

Scope of Appropriation

This appropriation is limited to the provision, purchase, and support of elective surgery services.

Expenses

	2017/18		2018/19
	Final Budgeted \$000	Estimated Actual \$000	Budget \$000
Total Appropriation	356,145	354,185	363,517

What is Intended to be Achieved with this Appropriation

This appropriation is intended to improve access to elective procedures by funding more procedures and improvements to how elective procedures are provided or supported.

How Performance will be Assessed and End of Year Reporting Requirements

The Electives initiative supports agreed levels of delivery of surgical discharges. All of these are used to support the delivery of the Health Target. The output is the agreed Health Target discharges, above the base funding for each DHB, which are funded through non-departmental expenditure funding only. This is only a proportion of each DHB's total health target expectation. The Bariatric initiative supports agreed levels of bariatric surgery discharges above DHB base levels. The Quality initiative is targeted funding to support DHBs in maintaining timely access, implementing system change or new models of care to create capacity to elective surgery.

Assessment of Performance	2017/18		2018/19
	Final Budgeted Standard	Estimated Actual	Budget Standard
General Surgery and Orthopaedics Initiative			
DHBs achieve contracted Orthopaedic and General Surgery Initiative volumes	100%	100%	100%
Mobility Action Programme			
Programmes achieve targeted outcomes	100%	100%	100%
Electives Initiative Discharges (see Note 1)			
Auckland DHB	5,605	5,605	5,605
Bay of Plenty DHB	2,430	2,430	2,430
Canterbury DHB	5,962	5,962	5,962
Capital and Coast DHB	2,718	2,718	2,718
Counties Manukau DHB	4,549	4,549	4,549
Hawkes Bay DHB	1,749	1,749	1,749
Hutt Valley DHB	1,500	1,500	1,500
Lakes DHB	1,073	1,073	1,073
MidCentral DHB	1,967	1,967	1,967
Nelson Marlborough DHB	1,423	1,423	1,423
Northland DHB	1,999	1,999	1,999
South Canterbury DHB	479	479	479
Southern DHB	2,934	2,934	2,934
Tairāwhiti DHB	372	372	372
Taranaki DHB	1,121	1,121	1,121
Waikato DHB	4,410	4,410	4,410
Wairarapa DHB	396	396	396
Waitemata DHB	6,193	6,193	6,193
West Coast DHB	271	271	271
Whanganui DHB	593	593	593
Total Electives Initiative Discharges	47,744	47,744	47,744
Bariatric Initiative			
DHBs deliver the total agreed number of bariatric surgery procedures	127	127	127

Assessment of Performance	2017/18		2018/19
	Final Budgeted Standard	Estimated Actual	Budget Standard
Quality Initiative			
All 20 DHBs deliver quality initiatives that support improved access and timeliness of elective services	100%	100%	100%
Mobile Surgical Services			
Mobile Surgical Services achieved contracted volumes	100%	100%	100%
Mobile Surgical Services deliver rural health professional development according to contractual requirements	100%	100%	100%

Note 1 - The 2018/19 targets for the Electives and Bariatric initiatives are indicative. Following the Budget announcements, the Ministry of Health will negotiate the actual targets with the district health boards, to reflect the additional funding made available in Budget 2018.

End of Year Performance Reporting

Performance information will be reported in the Minister's Vote Health Report in Relation to Selected Non-Departmental Appropriations.

Service Providers

Provider	2017/18 Final Budgeted \$000	2017/18 Estimated Actual \$000	2018/19 Budget \$000	Expiry of Resourcing Commitment
Crown Entities				
DHBs	348,995	347,035	Not yet known	Ongoing
Non-Governmental Organisations				
NGOs	7,150	7,150	Not yet known	Ongoing
Total	356,145	354,185	363,517	

Current and Past Policy Initiatives

Policy Initiative	Year of First Impact	2017/18 Final Budgeted \$000	2018/19 Budget \$000	2019/20 Estimated \$000	2020/21 Estimated \$000	2021/22 Estimated \$000
Current Government						
Elective Surgical Procedures	2018/19	-	31,500	31,500	31,500	31,500
Previous Government						
Elective Surgery - Government's Health Target	2017/18	6,000	6,000	6,000	6,000	6,000
Elective Surgery - Government's Health Target	2016/17	24,000	24,000	24,000	24,000	24,000
Additional 2000 Elective Procedures	2015/16	12,000	12,000	12,000	12,000	12,000
More Elective Surgery, Reducing Pain, and Increasing Prevention	2015/16	12,000	-	-	-	-
Electives Health Target - increased discharges	2014/15	25,000	25,000	25,000	25,000	25,000
Electives - bariatric surgery	2014/15	2,500	-	-	-	-
National Intestinal Failure Services	2014/15	300	300	300	300	300

Reasons for Change in Appropriation

This appropriation increased by \$7.372 million to \$363.517 million mainly due to:

- \$31.500 million was provided for the Budget 2018 initiative Elective Surgical Procedures.

This was partly offset by:

- \$12 million was due to time limited funding ceasing for the Budget 2015 initiative More Elective Surgery, Reducing Pain, and Increasing Prevention
- \$4.628 million was carried forward from 2016/17 to 2017/18 only, reflecting the timing of expenditure for Orthopaedic and General Surgery initiative, and
- \$2.500 million was due to time limited funding ceasing for the Budget 2014 initiative Bariatric Surgery.

Note - This appropriation increased in 2017/18 only due to \$4 million being transferred from the National Health Information Systems and National Contracted Services - Other appropriations to fund additional elective surgeries and higher than expected organ transplant volumes.

National Emergency Services (M36)

Scope of Appropriation

This appropriation is limited to the provision, purchase, and support of emergency services.

Expenses

	2017/18		2018/19
	Final Budgeted \$000	Estimated Actual \$000	Budget \$000
Total Appropriation	110,118	108,118	129,597

What is Intended to be Achieved with this Appropriation

This appropriation is intended to provide emergency services to assist people who require urgent acute health care (for example, air and road ambulances) are provided in a timely fashion.

How Performance will be Assessed and End of Year Reporting Requirements

Assessment of Performance	2017/18		2018/19
	Final Budgeted Standard	Estimated Actual	Budget Standard
Emergency calls are triaged and services dispatched effectively and efficiently:			
<ul style="list-style-type: none"> • Call response times - percentage of calls answered in 15 seconds 	95%	95%	95%
Ambulance response times - for immediately life-threatening incidents an ambulance reaches the scene within:			
<ul style="list-style-type: none"> • Urban reached in 8 minutes 	50%	52%	50%
<ul style="list-style-type: none"> • Urban reached in 20 minutes 	95%	95%	95%
<ul style="list-style-type: none"> • Rural reached in 12 minutes 	50%	50%	50%
<ul style="list-style-type: none"> • Rural reached in 30 minutes 	95%	95%	95%

Assessment of Performance	2017/18		2018/19
	Final Budgeted Standard	Estimated Actual	Budget Standard
Percentage of air ambulance activations that are within the target times:			
• Day response in 10 minutes	50%	62%	50%
• Night response in 20 minutes	50%	79%	50%

End of Year Performance Reporting

Performance information will be reported in the Minister's Vote Health Report in Relation to Selected Non-Departmental Appropriations.

Service Providers

Provider	2017/18 Final Budgeted \$000	2017/18 Estimated Actual \$000	2018/19 Budget \$000	Expiry of Resourcing Commitment
Non-Governmental Organisations				
Order of St John	81,321	81,321	Not yet known	Ongoing
Wellington Free Ambulance Service	8,333	8,333	Not yet known	Ongoing
Central Emergency Communications Ltd	5,048	5,048	Not yet known	Ongoing
Air Ambulance Providers	13,310	13,310	Not yet known	Ongoing
Other NGOs	2,106	106	Not yet known	Ongoing
Total	110,118	108,118	129,597	

Current and Past Policy Initiatives

Policy Initiative	Year of First Impact	2017/18 Final Budgeted \$000	2018/19 Budget \$000	2019/20 Estimated \$000	2020/21 Estimated \$000	2021/22 Estimated \$000
Current Government						
Radio Assurance	2018/19	-	3,740	-	-	-
Meeting Air Ambulance Service Cost Pressures	2018/19	-	14,700	14,700	14,700	14,700
Previous Government						
Emergency Ambulance Services - additional support	2017/18	8,571	11,571	14,571	17,571	17,571
Ambulance Services - Additional Support	2016/17	3,711	3,711	3,711	3,711	3,711
Ambulance Services - Pressure	2015/16	3,350	3,350	3,350	3,350	3,350
Air and road ambulance - demographics and cost pressures	2014/15	2,136	2,136	2,136	2,136	2,136

Reasons for Change in Appropriation

This appropriation increased by \$19.479 million to \$129.597 million mainly due to:

- \$14.700 million was provided for the Budget 2018 initiative Meeting Air Ambulance Service Cost Pressures, and
- \$3.740 million was provided for the Budget 2018 initiative Radio Assurance.

National Health Information Systems (M36)

Scope of Appropriation

This appropriation is limited to the provision of information technology services for the New Zealand health and social sectors.

Expenses

	2017/18		2018/19
	Final Budgeted \$000	Estimated Actual \$000	Budget \$000
Total Appropriation	5,028	5,028	8,042

Note - This appropriation decreased by \$3.014 million in 2017/18 only mainly due to funding being transferred to the National Elective Services appropriation for additional elective surgeries and higher than expected organ transplant volumes.

What is Intended to be Achieved with this Appropriation

This appropriation is intended to fund or purchase health information systems on behalf of the health and social sectors, making that procurement more efficient and effective.

How Performance will be Assessed and End of Year Reporting Requirements

	2017/18		2018/19
	Final Budgeted Standard	Estimated Actual	Budget Standard
Assessment of Performance			
The percentage of scheduled updates to the New Zealand Formulary, a key sector independent resource, providing healthcare professionals with the clinically validated medicines for patients, delivered in line with contractual requirements	100%	100%	100%

End of Year Performance Reporting

Performance information will be reported in the Minister's Vote Health Report in Relation to Selected Non-Departmental Appropriations.

Service Providers

Provider	2017/18 Final Budgeted \$000	2017/18 Estimated Actual \$000	2018/19 Budget \$000	Expiry of Resourcing Commitment
Non-Governmental Organisations				
Momentum Health Care Incorporated	1,088	1,088	Not yet known	Ongoing
New Zealand Medicines Formulary Limited Partnership	2,214	2,214	Not yet known	Ongoing
Other NGOs	1,726	1,726	Not yet known	Ongoing
Total	5,028	5,028	8,042	

National Māori Health Services (M36)

Scope of Appropriation

This appropriation is limited to the provision, purchase, and support of health and disability services that are either for Māori or by Māori.

Expenses

	2017/18		2018/19
	Final Budgeted \$000	Estimated Actual \$000	Budget \$000
Total Appropriation	2,750	2,750	6,828

Note - This appropriation decreased by \$4.078 million in 2017/18 only due to funding being transferred to the National Disability Support Services appropriation to meet service pressures.

What is Intended to be Achieved with this Appropriation

This appropriation is intended to provide support and encouragement for: (i) health services provided by Māori, and (ii) for health services for Māori.

How Performance will be Assessed and End of Year Reporting Requirements

	2017/18		2018/19
	Final Budgeted Standard	Estimated Actual	Budget Standard
Assessment of Performance			
Funding and purchasing of services to reduce Māori health disparities and improve Māori health outcomes			
Rongoā (traditional Māori healing) services			
The percentage of Rongoā providers delivering their minimum contracted number of client contacts	100%	100%	100%
Provision and funding to support the delivery of health services for Māori			
The percentage of providers who deliver services in accordance with their provider contracts with the Ministry of Health	100%	100%	100%

End of Year Performance Reporting

Performance information will be reported in the Minister's Vote Health Report in Relation to Selected Non-Departmental Appropriations.

Service Providers

Provider	2017/18 Final Budgeted \$000	2017/18 Estimated Actual \$000	2018/19 Budget \$000	Expiry of Resourcing Commitment
Non-Governmental Organisations				
NGOs	2,750	2,750	6,828	Ongoing
Total	2,750	2,750	6,828	

National Maternity Services (M36)

Scope of Appropriation

This appropriation is limited to the provision, purchase, and support of maternity services.

Expenses

	2017/18		2018/19
	Final Budgeted \$000	Estimated Actual \$000	Budget \$000
Total Appropriation	166,667	166,667	181,067

What is Intended to be Achieved with this Appropriation

This appropriation is intended to ensure that women are supported with antenatal care, care during labour and birth, and postnatal care, so that the health of both mothers and babies is promoted.

How Performance will be Assessed and End of Year Reporting Requirements

Assessment of Performance	2017/18		2018/19
	Final Budgeted Standard	Estimated Actual	Budget Standard
Lead Maternity Carer (see Note 1)			
Percentage of women giving birth in the year registered with a Lead Maternity Carer (LMC) within the first trimester, who receive primary maternity services through the Section 88 Primary Maternity Services Notice 2007	73%	73%	73%
Percentage of women giving birth in the year who receive primary maternity services through the Section 88 Primary Maternity Services Notice 2007	93%	93%	93%
Total number of women giving birth in the year who receive primary maternity services through the Section 88 Primary Maternity Services Notice 2007 based on birth data for the year	56,000	56,000	56,000

Note 1 - Lead Maternity Carers (LMCs) deliver quality maternity services in compliance with the Section 88 Primary Maternity Services Notice 2007 which excludes DHB primary maternity services.

End of Year Performance Reporting

Performance information will be reported in the Minister's Vote Health Report in Relation to Selected Non-Departmental Appropriations.

Service Providers

Provider	2017/18 Final Budgeted \$000	2017/18 Estimated Actual \$000	2018/19 Budget \$000	Expiry of Resourcing Commitment
Crown Entities				
DHBs	2,800	2,800	Not yet known	Ongoing
Non-Governmental Organisations				
Midwives	161,317	161,317	Not yet known	Ongoing
Other NGOs	2,550	2,550	Not yet known	Ongoing
Total	166,667	166,667	181,067	

Current and Past Policy Initiatives

Policy Initiative	Year of First Impact	2017/18 Final Budgeted \$000	2018/19 Budget \$000	2019/20 Estimated \$000	2020/21 Estimated \$000	2021/22 Estimated \$000
Current Government						
National Maternity Services - Additional Support	2017/18	9,000	25,900	25,900	25,900	25,900
Previous Government						
National Maternity Services Settlement drawdown from Contingency Fund	2017/18	8,400	8,400	8,400	8,400	8,400
Community midwives - cost and volume pressures	2015/16	4,882	4,882	4,882	4,882	4,882

Reasons for Change in Appropriation

This appropriation increased by \$14.400 million to \$181.067 million mainly due to:

- \$16.900 million was due to a net increase in funding between 2017/18 to 2018/19, from the Budget 2018 initiative National Maternity Services - Additional Support.

Note - This appropriation increased by \$2.500 million in 2017/18 only due to funding being transferred from the National Contracted Services - Other appropriation to meet service pressures.

Conditions on Use of Appropriation

Reference	Conditions
New Zealand Public Health and Disability Act 2000	Section 88 sets out the process for giving notice of payment terms or conditions to any person. The Ministry has issued a Notice pursuant to section 88 of the Act, the "Primary Maternity Services Notice 2007," which sets out terms and conditions.

National Mental Health Services (M36)

Scope of Appropriation

This appropriation is limited to the provision, purchase, and support of mental health services.

Expenses

	2017/18		2018/19
	Final Budgeted \$000	Estimated Actual \$000	Budget \$000
Total Appropriation	64,556	64,556	68,094

What is Intended to be Achieved with this Appropriation

This appropriation is intended to ensure that people are supported with mental health issues, including addiction, and work is undertaken to respond to suicidal behaviour and reduce its impact on communities.

How Performance will be Assessed and End of Year Reporting Requirements

	2017/18		2018/19
	Final Budgeted Standard	Estimated Actual	Budget Standard
Assessment of Performance			
Mental Health Programmes			
Inpatient Mental Health Services; national specialist Ashburn clinic: the number of occupied bed days	7,200	8,000	7,200
Mental Health Services			
Mother/Baby unit (see Note 1)			
The total number of bed days that Ministry of Health funded Mother/Baby unit beds are occupied	767	767	767
Addictions			
The number of clients receiving Alcohol and Other Drugs treatment to overcome their addiction is greater than or equal to	25,000	26,500	25,000
The number of clients receiving outpatient services (including intensive outpatient care) to overcome their addiction is greater than or equal to	46,000	55,000	46,000
The number of clients receiving Opioid Substitution Treatment services to overcome their addiction is greater than or equal to	5,200	5,500	5,200
Deliver on the Drivers of Crime Action Plan:			
Positive Parenting Programme (Triple P)			
The number of practitioners trained	60	60	60
The number of families receiving an intervention	1,800	1,800	1,800

Note 1 - The Ministry funds three Mother/Baby unit beds for use during the year.

End of Year Performance Reporting

Performance information will be reported in the Minister's Vote Health Report in Relation to Selected Non-Departmental Appropriations.

Service Providers

Provider	2017/18 Final Budgeted \$000	2017/18 Estimated Actual \$000	2018/19 Budget \$000	Expiry of Resourcing Commitment
Crown Entities				
DHBs	27,064	27,064	Not yet known	Ongoing
Health Promotion Agency	7,078	7,078	Not yet known	Ongoing
ESR (Institute of Environmental Science and Research)	1,650	1,650	Not yet known	Ongoing
Non-Governmental Organisations				
Ashburn Hall Charitable Trust	5,125	5,125	Not yet known	Ongoing
Odyssey House Trust	4,133	4,133	Not yet known	Ongoing
The Salvation Army New Zealand Trust	2,286	2,286	Not yet known	Ongoing
Te Rau Matatini Limited	2,000	2,000	Not yet known	Ongoing
Other NGOs	15,220	15,220	Not yet known	Ongoing
Total	64,556	64,556	68,094	

Current and Past Policy Initiatives

Policy Initiative	Year of First Impact	2017/18 Final Budgeted \$000	2018/19 Budget \$000	2019/20 Estimated \$000	2020/21 Estimated \$000	2021/22 Estimated \$000
Current Government						
Integrated Therapies Pilot for 18-25 Year Olds	2018/19	-	1,400	3,630	4,000	-
Improving Mental Health Services for Children in Canterbury and Kaikōura	2017/18	700	7,300	10,000	10,000	-
Previous Government						
Responding to Mental Health Concerns at an Earlier Stage	2016/17	3,000	3,000	3,000	3,000	3,000
Supporting Health Services in Canterbury	2016/17	1,000	1,000	-	-	-

Reasons for Change in Appropriation

This appropriation increased by \$3.538 million to \$68.094 million mainly due to:

- \$6.600 million was due to a net increase in funding between 2017/18 and 2018/19 for the Improving Mental Health Services for Children in Canterbury and Kaikōura initiative, and
- \$1.400 million was provided for the Budget 2018 initiative Integrated Therapies for 18-25 Year Olds.

This was offset by:

- \$2.664 million was due to funding transfers between years to complete programmes that support the Methamphetamine Action Plan, and
- \$921,000 was carried forward from 2016/17 to 2017/18 only, for Substance Addiction (Compulsory Assessment and Treatment).

Note - This appropriation increased by \$877,000 in 2017/18 only due to funding being transferred from the National Child Health Services and Provider Development appropriations to meet pressures on the Fit for Future programme.

Conditions on Use of Appropriation

Reference	Conditions
New Zealand Public Health and Disability Act 2000	The Health Promotion Agency (HPA) is established under Part 4 (sections 57-59) of the Act. Section 59 outlines provisions relating to grants, sponsorship, and other matters. Subsection 1 expressly provides that the HPA may, amongst other things, make grants to any entity with which the HPA is engaged and spends funds received the previous year, without further appropriation by Parliament. Subsection 2 sets out conditions or limitations on such spending.
Substance Addiction (Compulsory Assessment and Treatment) Act 2017	Section 12 details the principles under which powers conferred by the Act are to be exercised. Section 35 provides for the objective of the compulsory treatment given to a patient.

National Personal Health Services (M36)

Scope of Appropriation

This appropriation is limited to personal healthcare and support services purchased directly by the Crown, including mobile surgical services, telephone and online advice services, hospice services, sexual and reproductive health services, and services associated with the implementation of the Oral Health and Cancer Control Strategies.

Expenses

	2017/18		2018/19
	Final Budgeted \$000	Estimated Actual \$000	Budget \$000
Total Appropriation	82,707	82,707	78,151

Components of the Appropriation

	2017/18		2018/19
	Final Budgeted \$000	Estimated Actual \$000	Budget \$000
Cancer Control	18,201	18,201	Not yet known
Helplines	22,649	22,649	Not yet known
Hospice & Palliative Care	7,292	7,292	Not yet known
Other	34,565	34,565	Not yet known
Total	82,707	82,707	78,151

What is Intended to be Achieved with this Appropriation

This appropriation is intended to achieve the following: people are supported with the identification, management, and treatment of personal health conditions (for example, treatment for cancer, and hospice services).

How Performance will be Assessed and End of Year Reporting Requirements

	2017/18		2018/19
	Final Budgeted Standard	Estimated Actual	Budget Standard
Assessment of Performance			
Nationally Purchased Personal Health			
National telehealth services			
Phone line service is available 24/7	99%	99%	99%
Call abandonment rate (percentage less than)	10%	10%	10%
Percentage of calls answered within 20 seconds greater than	80%	80%	80%
Percentage of surveyed callers satisfied or very satisfied with the National Telehealth Service greater than	95%	90%	90%
Palliative Care			
Six monthly DHB reports show Palliative Care innovations are being delivered	100%	100%	100%
High Cost Treatment Pool			
The percentage of completed applications managed within three weeks	100%	100%	100%
National Renal Transplant Service (NRTS)			
The NRTS supports the increase in live organ donors of 10 per annum	10	10	10
Long Term Conditions			
Diabetes			
DHBs report quarterly to show implementation of 'Living well with Diabetes' is achieved in line with project plans and quality standards for diabetes care	100%	100%	100%
Cardiac Services			
Completion rates of the surgical registry is greater than or equal to 80%, for all 5 relevant DHBs	5 DHBs	5 DHBs	5 DHBs
The national percentage of completed registry entries for patients who present with Acute Coronary Syndrome (ACS) and have undergone coronary angiography	93%	93%	93%
The national percentage of patients presenting with suspected Acute Coronary Syndrome (ACS) receiving an angiogram within 3 days of admission (where day of admission is day zero)	70%	70%	70%
Stroke Services Improvement			
All DHBs will provide an organised acute stroke service as recommended in the NZ Clinical guidelines for stroke management	20	20	20
Oral Health Promotion Campaign			
Average number of decayed missing and filled teeth (DMFT) per child at age 5 is equal to or less than	1.81	1.81	1.81

End of Year Performance Reporting

Performance information will be reported in the Minister's Vote Health Report in Relation to Selected Non-Departmental Appropriations.

Service Providers

Provider	2017/18 Final Budgeted \$000	2017/18 Estimated Actual \$000	2018/19 Budget \$000	Expiry of Resourcing Commitment
Crown Entities				
DHBs	27,859	27,859	Not yet known	Ongoing
Accident Compensation Corporation	2,350	2,350	Not yet known	Ongoing
Central Region's Technical Advisory Services Limited	7,355	7,355	Not yet known	Ongoing
Northern Regional Alliance Limited	1,396	1,396	Not yet known	Ongoing
Non-Governmental Organisations				
Homecare Medical (NZ) Limited Partnership	23,051	23,051	Not yet known	Ongoing
Interchurch Council for Hospital Chaplaincy	2,684	2,684	Not yet known	Ongoing
Other NGOs	18,012	18,012	Not yet known	Ongoing
Total	82,707	82,707	78,151	

Current and Past Policy Initiatives

Policy Initiative	Year of First Impact	2017/18 Final Budgeted \$000	2018/19 Budget \$000	2019/20 Estimated \$000	2020/21 Estimated \$000	2021/22 Estimated \$000
Previous Government						
Organ Donation - National Strategy	2017/18	700	700	700	700	700
Cancer: Faster Cancer Treatment	2014/15	5,350	5,350	5,350	5,350	5,350
Oral Health: Better Oral Health Promotion	2014/15	2,500	2,500	2,500	2,500	2,500

Conditions on Use of Appropriation

Reference	Conditions
New Zealand Public Health and Disability Act 2000	Section 59 outlines provisions relating to grants, sponsorship, and other matters. Subsection 1 expressly provides that the Health Promotion Agency (HPA) may, amongst other things, make grants to any entity with which the HPA is engaged and spends funds received the previous year, without further appropriation by Parliament. Subsection 2 sets out conditions or limitations on such spending.

Primary Health Care Strategy (M36)

Scope of Appropriation

This appropriation is limited to services to implement and deliver the Primary Health Care Strategy.

Expenses

	2017/18		2018/19
	Final Budgeted \$000	Estimated Actual \$000	Budget \$000
Total Appropriation	193,405	193,405	266,396

Components of the Appropriation

	2017/18		2018/19
	Final Budgeted \$000	Estimated Actual \$000	Budget \$000
Very Low Cost Access	60,582	60,582	Not yet known
Care Plus	68,782	68,782	Not yet known
Free Under 13s	34,420	34,420	Not yet known
System Level Measures	23,770	23,770	Not yet known
Other	5,851	5,851	Not yet known
Total	193,405	193,405	266,396

What is Intended to be Achieved with this Appropriation

This appropriation is intended to provide accessible primary care services to New Zealand communities, enabling people to live healthier, more independent lives.

How Performance will be Assessed and End of Year Reporting Requirements

	2017/18		2018/19
	Final Budgeted Standard	Estimated Actual	Budget Standard
Assessment of Performance			
Access to affordable primary health care services			
The number of high needs patients in Very Low Cost Access (VLCA) practices	785,000	785,000	785,000
The percentage of Community Service Card (CSC) holders accessing subsidised General Practice (GP) visits	-	-	70%
The percentage of New Zealand children who receive free access to Under 13 services during day time and after hours	98%	99%	98%
The percentage of New Zealand children who receive free access to Under 14 services during day time and after hours	-	-	75%
The number of patients receiving a long term conditions (LTC) service in pharmacies nationally	140,000	140,000	140,000
Rural retention and locum support	Achieved	Achieved	Achieved

End of Year Performance Reporting

Performance information will be reported in the Minister's Vote Health Report in Relation to Selected Non-Departmental Appropriations.

Service Providers

Provider	2017/18 Final Budgeted \$000	2017/18 Estimated Actual \$000	2018/19 Budget \$000	Expiry of Resourcing Commitment
Crown Entities				
DHBs	187,806	187,806	Not yet known	Ongoing
Non-Governmental Organisations				
The New Zealand Rural General Practice Network Incorporated	1,839	1,839	Not yet known	Ongoing
Other NGOs	3,760	3,760	Not yet known	Ongoing
Total	193,405	193,405	266,396	

Current and Past Policy Initiatives

Policy Initiative	Year of First Impact	2017/18 Final Budgeted \$000	2018/19 Budget \$000	2019/20 Estimated \$000	2020/21 Estimated \$000	2021/22 Estimated \$000
Current Government						
Extending Zero Fees Doctors' Visits to Under 14s	2018/19	-	2,858	4,900	4,900	4,900
Primary Health Care - Additional Support	2018/19	-	9,499	9,499	9,499	9,499
Very Low Cost General Practitioner Visits for Community Services Card Holders	2017/18	500	58,608	100,000	100,000	100,000
Previous Government						
Primary Health Care - Additional support	2017/18	9,585	9,585	9,585	9,585	9,585
Primary Health Care - Additional Support	2016/17	14,329	14,329	14,329	14,329	14,329
Under 13s - Free Prescriptions & GP Visits	2015/16	30,000	30,000	30,000	30,000	30,000
Primary Health Care - Pressure	2015/16	3,779	3,805	3,805	3,805	3,805
Primary care - demographics and contribution to cost pressures	2014/15	3,325	3,325	3,325	3,325	3,325
Rural General Practice - flexible funding	2014/15	2,000	2,000	2,000	2,000	2,000

Reasons for Change in Appropriation

This appropriation increased by \$72.991 million to \$266.396 million mainly due to:

- \$58.108 million was due to a net increase in funding between 2017/18 to 2018/19 from the Budget 2018 initiative Very Low Cost General Practitioner Visits for Community Services Card Holders
- \$9.499 million was provided for the Budget 2018 initiative Primary Health Care - Additional Support, and
- \$2.858 million was provided for the Budget 2018 initiative Extending Zero Fees Doctors' Visits to Under 14s.

Problem Gambling Services (M36)

Scope of Appropriation

This appropriation is limited to the provision, purchase, and support of services that minimise the harm from gambling, in accordance with the Gambling Act 2003.

Expenses

	2017/18		2018/19
	Final Budgeted \$000	Estimated Actual \$000	Budget \$000
Total Appropriation	17,821	14,821	20,941

What is Intended to be Achieved with this Appropriation

This appropriation is intended to provide services to reduce the harm caused by problem gambling.

How Performance will be Assessed and End of Year Reporting Requirements

	2017/18		2018/19
	Final Budgeted Standard	Estimated Actual	Budget Standard
Assessment of Performance			
Implementation of the Preventing and Minimising Gambling Harm (PMGH) Strategy			
The number of people accessing support from problem gambling services	6,750	6,750	6,750
The number of brief only interventions delivered	6,000	6,000	6,000

End of Year Performance Reporting

Performance information will be reported in the Minister's Vote Health Report in Relation to Selected Non-Departmental Appropriations.

Service Providers

Provider	2017/18 Final Budgeted \$000	2017/18 Estimated Actual \$000	2018/19 Budget \$000	Expiry of Resourcing Commitment
Crown Entities				
Health Promotion Agency	3,567	2,067	Not yet known	Ongoing
Non-Governmental Organisations				
Problem Gambling Foundation	4,827	4,827	Not yet known	Ongoing
The Salvation Army New Zealand Trust	1,990	1,990	Not yet known	Ongoing
Other NGOs	7,437	5,937	Not yet known	Ongoing
Total	17,821	14,821	20,941	

Current and Past Policy Initiatives

Policy Initiative	Year of First Impact	2017/18 Final Budgeted \$000	2018/19 Budget \$000	2019/20 Estimated \$000	2020/21 Estimated \$000	2021/22 Estimated \$000
Previous Government						
Problem Gambling Services - Continued Support	2016/17	6,994	6,914	-	-	-

Reasons for Change in Appropriation

This appropriation increased by \$3.120 million to \$20.941 million. This was due to transfers between years to continue work on the problem gambling services plan.

Public Health Service Purchasing (M36)

Scope of Appropriation

This appropriation is limited to the provision, purchase, and support of public health services.

Expenses

	2017/18		2018/19
	Final Budgeted \$000	Estimated Actual \$000	Budget \$000
Total Appropriation	375,567	365,340	423,424

Components of the Appropriation

	2017/18		2018/19
	Final Budgeted \$000	Estimated Actual \$000	Budget \$000
National Screening Services	124,262	120,935	Not yet known
Nutrition & Physical Activity	33,598	33,598	Not yet known
Emergency Preparedness	10,203	10,203	Not yet known
Tobacco	25,075	25,075	Not yet known
Communicable Diseases	28,770	28,170	Not yet known
Sexual Health	20,817	20,817	Not yet known
Rheumatic Fever	5,000	5,000	Not yet known
Science Purchasing	11,728	11,728	Not yet known
Safe Water Subsidy Scheme	10,687	4,687	Not yet known
Alcohol & Drug	15,619	15,619	Not yet known
Public Health Infrastructure	13,307	13,307	Not yet known
Other Services	76,501	76,201	Not yet known
Total	375,567	365,340	423,424

What is Intended to be Achieved with this Appropriation

This appropriation is intended to support communities with the identification, management, and treatment of public health issues. This includes, for example, health promotion, screening for cancer and other conditions, investigating environmental or border health issues, and identifying and managing communicable diseases.

How Performance will be Assessed and End of Year Reporting Requirements

Assessment of Performance	2017/18		2018/19
	Final Budgeted Standard	Estimated Actual	Budget Standard
National Screening Unit			
National Cervical Screening Programme (NCSP) eligible women to be screened every three years			
The number of women screened within the last three years, as a proportion of the eligible population (women aged 25 - 69 hysterectomy adjusted)	80%	80%	80%
The number of Māori women screened within the last three years, as a proportion of the eligible population (Māori women aged 25-69 hysterectomy adjusted)	80%	80%	80%
The number of Pacific women screened within the last three years, as a proportion of the eligible population (Pacific women aged 25-69 hysterectomy adjusted)	80%	80%	80%
The number of Asian women screened within the last three years, as a proportion of the eligible population (Asian women aged 25-69 hysterectomy adjusted)	80%	80%	80%
BreastScreen Aotearoa (BSA) eligible women to be screened every two years			
Women screened within the last two years, as a proportion of the eligible population (women aged 45-69 years)	70%	70%	70%
Māori women screened within the last two years, as a proportion of the eligible population (Māori women aged 45-69 years)	70%	70%	70%
Pacific women screened within the last two years, as a proportion of the eligible population (Pacific women aged 45-69 years)	70%	70%	70%
Bowel Screening Programme			
Phased implementation of bowel cancer screening programme with the following deliverables to be achieved in 2018/19:			
• implementation in five DHBs	100%	100%	100%
• establishment of a National Coordination Centre and	100%	100%	100%
• establishment of four Regional Centres	100%	100%	100%
Better Help for Smokers to Quit Health Target			
Primary Care indicator	90%	90%	90%
Pregnancy indicator	90%	90%	90%
Environmental and Border Health			
Providers of environmental and border protection scientific, surveillance, analysis, and/or advisory services, with contracts over \$500,000 per annum, deliver milestones in accordance with contract requirements	95%	100%	95%
The number of training courses, workshops and forums provided to public health statutory officers from DHB public health units during the year	15	15	15

Assessment of Performance	2017/18		2018/19
	Final Budgeted Standard	Estimated Actual	Budget Standard
Services for Children			
The proportion of infants exclusively and fully breastfeeding at:			
• Six weeks	75%	73%	75%
• Three months	57%	59%	57%
Other Child and Youth - Violence Intervention Programme			
DHBs achieve Violence Intervention Programme benchmark audit scores of 80/100	90%	94%	90%
DHBs have improved programme responsiveness to Māori as required by the evaluation measurement	90%	93%	90%
Rheumatic Fever			
Number of DHBs with high incidence rates of rheumatic fever maintain or reduce rheumatic fever rates as per contracted targets (rate per 100,000) (see Note 1)	100%	100%	5 DHBs or more
Annual Influenza Immunisation Programme			
Number of vaccine doses distributed annually is equal to or greater than	1.2 million	1.2 million	1.2 million
Percentage of over 65 year-olds immunised	75%	75%	75%
Sexual and Reproductive Health			
New Zealand AIDS Foundation			
The percentage of all clients tested for HIV/AIDS who are provided with a pre- and post-counselling session	100%	100%	100%
Convene and facilitate National HIV/AIDS Forum	Achieved	Achieved	Achieved
New Zealand Family Planning Association			
The percentage of general consultations fully delivered across the 17 relevant DHB regions as per contract	100%	100%	100%
The percentage of pregnancy/maternity single episode consultations fully delivered across the 17 relevant DHB regions as per contract	100%	100%	100%
Emergency Preparedness			
Maintain emergency management capability and capacity in DHBs (see Note 2)	Achieved	Achieved	Achieved
Contracted providers for the maintenance of the national reserve supply of pandemic stock deliver milestones, in accordance with contractual requirements	95%	95%	95%
Providers of national road ambulance services deliver emergency management capability and capacity milestones, in accordance with contractual requirements (see Note 3)	95%	95%	95%

Note 1 - Although rheumatic fever had reduced nationally by 16 percent from 2012 to 3.2 cases per 100,000 population in the 2016/17 financial year, the Ministry continues to focus efforts on reducing rheumatic fever rates with the 11 DHBs with high incidence rates.

Note 2 - Capability and capacity in DHBs: Each DHB develops, maintains and exercises a DHB Health Emergency Plan (HEP) (which meets the DHBs responsibilities under the Civil Defence Emergency Management Act 2002 and the National Health Emergency Plan 2015) and has sufficient numbers of staff trained to support an emergency response.

Note 3 - Capability and capacity in road ambulance services: Service providers maintain emergency plans (that are integrated with other health agency plans) to enable coordinated health care delivery during an emergency, maintenance of emergency equipment, participation in exercises and to ensure they have sufficient numbers of staff trained to support an emergency response.

End of Year Performance Reporting

Performance information will be reported in the Minister's Vote Health Report in Relation to Selected Non-Departmental Appropriations.

Service Providers

Provider	2017/18 Final Budgeted \$000	2017/18 Estimated Actual \$000	2018/19 Budget \$000	Expiry of Resourcing Commitment
Crown Entities				
DHBs	177,913	176,795	Not yet known	Ongoing
ESR (Institute of Environmental Science and Research)	14,963	14,963	Not yet known	Ongoing
Auckland UniServices Limited	4,763	4,763	Not yet known	Ongoing
State Owned Enterprises				
New Zealand Post Limited	5,002	5,002	Not yet known	Ongoing
Local Government				
Auckland Council	4,059	4,059	Not yet known	Ongoing
Non-Governmental Organisations				
BreastScreen Auckland	5,003	5,003	Not yet known	Ongoing
New Zealand Family Planning Association Incorporated	11,854	11,854	Not yet known	Ongoing
Screen South Ltd	10,587	10,587	Not yet known	Ongoing
United Fresh New Zealand Incorporated	7,804	7,804	Not yet known	Ongoing
New Zealand AIDS Foundation Charitable Trust	4,230	4,230	Not yet known	Ongoing
Pacific Radiology Group Limited	4,242	4,242	Not yet known	Ongoing
CBG Health Research Limited	3,875	3,875	Not yet known	Ongoing
National Heart Foundation of NZ - Auckland	3,249	3,249	Not yet known	Ongoing
Needle Exchange Services Trust Incorporated	2,204	2,204	Not yet known	Ongoing
Other NGOs	115,819	106,710	Not yet known	Ongoing
Total	375,567	365,340	423,424	

Current and Past Policy Initiatives

Policy Initiative	Year of First Impact	2017/18 Final Budgeted \$000	2018/19 Budget \$000	2019/20 Estimated \$000	2020/21 Estimated \$000	2021/22 Estimated \$000
Current Government						
National Bowel Screening Programme Implementation Year Two	2018/19	-	13,391	13,184	13,314	14,196
Previous Government						
National Bowel Screening Business Case drawdown from Contingency Fund	2017/18	1,832	3,713	3,585	3,300	3,330
Community Organisation Refugee Sponsorship Category	2017/18	106	249	249	249	249
National Bowel Screening Programme	2017/18	7,238	6,282	5,701	6,898	6,898
Water Fluoridation (Assistance)	2017/18	3,000	3,000	3,000	3,000	3,000
Contraceptive Services for Low Income Women	2017/18	1,380	3,880	5,880	5,880	5,880
Primary Care Services	2015/16	3,904	3,904	3,904	3,904	3,904
Intensive Alcohol and Drug Support for Pregnant Women - Extension of Services	2016/17	3,000	3,000	3,000	3,000	3,000
Public Health Services - Additional Support	2016/17	1,559	1,559	1,559	1,559	1,559
National Bowel Screening Programme Establishment	2016/17	6,616	3,072	2,820	2,820	2,820
Bowel Cancer Screening Pilot Extension	2015/16	3,000	-	-	-	-
Public Health - Pressure	2015/16	4,218	4,218	4,218	4,218	4,218
Healthy Families New Zealand	2014/15	9,000	9,000	9,000	9,000	9,000
Public health demographic and cost pressures	2014/15	3,925	3,925	3,925	3,925	3,925
NZ Health Survey - biomedical testing	2014/15	289	289	289	289	289

Reasons for Change in Appropriation

This appropriation increased by \$47.857 million to \$423.424 million mainly due to:

- \$13.391 million was provided for the Budget 2018 initiative National Bowel Screening Programme Implementation Year Two
- \$7.197 million was due to funding transfers between years for the Sanitary Works Subsidy Scheme to match the expected profile of payments under the scheme
- \$6.500 million was due to funding transfers between years for the National Bowel Screening programme to support the roll-out of the programme
- \$6 million was due to the transfer of funding to support fluoridation subsidy payments to local councils from 2017/18 to 2018/19
- \$2.760 million was due to the transfer of funding for the Contraceptive Services for Low Income Women initiative from 2017/18 to 2018/19
- \$2.500 million was due to a net increase in funding between 2017/18 to 2018/19 from the Budget 2017 initiative Contraceptive Services for Low Income Women

- \$1.881 million was due to a net increase in funding between 2017/18 to 2018/19 from the drawdown of funding from the National Bowel Screening Programme contingency fund, established in Budget 2017, to implement the programme at Southern and Counties Manukau DHBs, and
- \$1.440 million was due to the transfer from 2017/18 to 2018/19 to reflect timing of expenditure to support the Fetal Alcohol Disorder Action Plan.

This was partly offset by:

- \$3.544 million was due to a net decrease in funding from 2017/18 to 2018/19 for the Budget 2016 initiative National Bowel Screening Programme Rollout, and
- \$2 million was transferred to Vote Labour for Treatment Services for Victims of Sexual Abuse and Assault.

Note - This appropriation decreased by \$13.069 million in 2017/18 only due to funding being transferred to the National Disability Support Services appropriation to meet service pressures.

Supporting Equitable Pay (M36)

Scope of Appropriation

This appropriation is limited to costs related to supporting equitable pay for care and support workers, and mental health and addiction support workers.

Expenses

	2017/18		2018/19
	Final Budgeted \$000	Estimated Actual \$000	Budget \$000
Total Appropriation	299,300	299,300	348,000

What is Intended to be Achieved with this Appropriation

This appropriation is intended to support the achievement of pay equity in the care and support, mental health and addiction sectors.

How Performance will be Assessed and End of Year Reporting Requirements

An exemption was granted under s15D(2)(b)(ii) of the PFA as end-of-year performance information for the appropriation is not likely to be informative as this appropriation is an interim measure to enable providers to be reimbursed for additional costs incurred in relation to the care and support worker pay equity settlement.

Note - Performance information for National Disability Support Services will be reported in the Minister's Vote Health Report in Relation to Selected Non-Departmental Appropriations; and performance information for aged residential care services purchased by DHBs can be found in DHBs' Annual Reports.

Current and Past Policy Initiatives

Policy Initiative	Year of First Impact	2017/18 Final Budgeted \$000	2018/19 Budget \$000	2019/20 Estimated \$000	2020/21 Estimated \$000	2021/22 Estimated \$000
Previous Government						
Pay Equity drawdown from Contingency Fund	2017/18	22,800	-	-	-	-
Equitable Pay for Care and Support Workers	2017/18	279,000	348,000	377,000	356,000	472,000

Reasons for Change in Appropriation

This appropriation increased by \$48.700 million to \$348 million mainly due to:

- \$69 million was provided for the Budget 2017 initiative Equitable Pay for Care and Support Workers to reflect the increased pay rates to care and support workers from 1 July 2018.

This was partly offset by:

- \$22.800 million was drawdown from the Pay Equity contingency fund for pay equity payments to care and support workers for 2017/18 only.

Note - This appropriation decreased by \$2.500 million in 2017/18 only due to funding being transferred to the Managing the Purchase of Services appropriation for pay equity implementation costs.

3.4 - Non-Departmental Other Expenses

International Health Organisations (M36)

Scope of Appropriation

This appropriation is limited to the Crown funding New Zealand's World Health Organization (WHO) membership and contributing to specific WHO projects.

Expenses

	2017/18		2018/19
	Final Budgeted \$000	Estimated Actual \$000	Budget \$000
Total Appropriation	1,843	1,843	2,030

Note - This appropriation decreased by \$187,000 in 2017/18 only due to funding being transferred to the Legal Expenses appropriation to meet forecast legal costs.

What is Intended to be Achieved with this Appropriation

This appropriation is intended to ensure that New Zealand maintains its membership in the World Health Organization (WHO) and contributes to specific WHO projects.

How Performance will be Assessed and End of Year Reporting Requirements

An exemption was granted under s15D(2)(b)(iii) of the PFA as the amount of the appropriation is less than \$5 million.

Service Providers

Provider	2017/18 Final Budgeted \$000	2017/18 Estimated Actual \$000	2018/19 Budget \$000	Expiry of Resourcing Commitment
World Health Organization (WHO)	1,843	1,843	2,030	Ongoing

Legal Expenses (M36)

Scope of Appropriation

This appropriation is limited to funding the defence and settlement of health-related or disability-related legal claims against the Crown.

Expenses

	2017/18		2018/19
	Final Budgeted \$000	Estimated Actual \$000	Budget \$000
Total Appropriation	2,028	2,028	1,028

Note - This appropriation increased by \$1 million in 2017/18 only due to funding being transferred from the Provider Development and International Health Organisations appropriations to meet forecast legal costs.

What is Intended to be Achieved with this Appropriation

This appropriation is intended to enable action to be taken regarding legal claims related to Vote Health, and these are funded and appropriate settlements are made, as appropriate.

How Performance will be Assessed and End of Year Reporting Requirements

An exemption was granted under s15D(2)(b)(iii) of the PFA as the amount of the appropriation is less than \$5 million.

Provider Development (M36)

Scope of Appropriation

This appropriation is limited to supporting the development of health or disability service providers, in particular, those supporting vulnerable populations, such as Māori and Pacific peoples.

Expenses

	2017/18		2018/19
	Final Budgeted \$000	Estimated Actual \$000	Budget \$000
Total Appropriation	18,539	18,539	24,289

Note - This appropriation decreased by \$5.750 million in 2017/18 only due to funding being transferred to the National Disability Support Services, National Mental Health Services, National Personal Health Services and Legal Expenses appropriations to address service pressures and forecast legal expenses.

What is Intended to be Achieved with this Appropriation

This appropriation is intended to provide for third-party health services, particularly those providing predominantly for Māori and Pacific peoples, to be supported to become more effective, efficient, and sustainable.

How Performance will be Assessed and End of Year Reporting Requirements

Assessment of Performance	2017/18		2018/19
	Final Budgeted Standard	Estimated Actual	Budget Standard
To support Māori providers to build their capability and capacity			
The number of Māori providers contracted for development activities	92	93	92
Percentage of Māori providers that demonstrate improved management, access or quality of services through Results Based Accountability (RBA) reporting	90%	90%	90%
Hauora Māori Scholarships - To support Māori students onto a health career pathway			
The number of students funded to undertake training towards a Health career	520	520	520
Te Ao Auahatanga Hauora Māori - Innovation Funds			
The number of Māori providers contracted to implement Te Kakano (Seeding) innovations	30	30	30
The percentage of Te Ruinga (spreading) innovation programmes monitored quarterly that show progress towards sustainability	90%	90%	90%
Pacific Provider Development			
To recruit and retain Pacific health professionals onto a health career pathway			
The number of Pacific students funded through the Ministry of Health Pacific Health Scholarships is at least	160	160	160
The percentage course completion for students through the Postgraduate Certificate in Specialty Care (Pacific Health), Postgraduate Diploma in Specialty Care (Pacific Health) and Master of Nursing Health Programme is at least	80%	80%	80%

End of Year Performance Reporting

Performance information will be reported in the Minister's Vote Health Report in Relation to Selected Non-Departmental Appropriations.

Service Providers

Provider	2017/18 Final Budgeted \$000	2017/18 Estimated Actual \$000	2018/19 Budget \$000	Expiry of Resourcing Commitment
Crown Entities				
DHBs	2,399	2,399	Not yet known	Ongoing
Non-Governmental Organisations				
Alliance Health Plus Trust	1,200	1,200	Not yet known	Ongoing
NGOs	14,940	14,940	Not yet known	Ongoing
Total	18,539	18,539	24,289	

3.5 - Non-Departmental Capital Expenditure**Equity for Capital Projects for DHBs and Health Sector Crown Agencies (M36)***Scope of Appropriation*

This appropriation is limited to providing capital contributions to health sector Crown entities or agencies for new investments and reconfiguration of their balance sheets.

Capital Expenditure

	2017/18		2018/19
	Final Budgeted \$000	Estimated Actual \$000	Budget \$000
Total Appropriation	120,639	48,866	967,383

What is Intended to be Achieved with this Appropriation

This appropriation is intended to achieve the following: equity funding is provided to DHBs to fund the cost of capital projects, where the DHB is unable to fund the projects entirely within their cash flows.

How Performance will be Assessed and End of Year Reporting Requirements

	2017/18		2018/19
	Final Budgeted Standard	Estimated Actual	Budget Standard
Assessment of Performance			
DHB seeking equity funding for approved business cases receive that funding	100%	100%	100%

End of Year Performance Reporting

The DHBs will report performance information for this appropriation in their Annual Reports.

Current and Past Policy Initiatives

Policy Initiative	Year of First Impact	2017/18 Final Budgeted \$000	2018/19 Budget \$000	2019/20 Estimated \$000	2020/21 Estimated \$000	2021/22 Estimated \$000
Current Government						
District Health Boards' Capital Investment	2018/19	-	750,000	-	-	-
Previous Government						
DHB Capital Investment Pool	2017/18	150,000	-	-	-	-

Reasons for Change in Appropriation

This appropriation increased by \$846.744 million to \$967.383 million mainly due to:

- \$750 million was provided for the Budget 2018 initiative District Health Boards' Capital Investment
- \$182.612 million was due to funding transfers between years to reflect the forecast funding profile for Canterbury Earthquake repairs
- \$53.838 million was due to funding transfers between years to reflect the forecast funding drawdowns required for DHB projects
- \$26.500 million was due to funding transfers between years to reflect the forecast funding profile for Counties Manukau DHBs recladding of the Scott Building
- \$24.400 million was due to funding transfers between years to reflect the forecast funding profile for Waitemata DHB's Mason Forensic Clinic and Capital Recycling Approach, and
- \$5.400 million was due to funding transferred from 2017/18 to 2018/19 to reflect the forecast funding profile for Southern DHB's Intensive Care Unit and Gastroenterology Unit projects.

This was partly offset by:

- \$150 million was due to time limited funding ceasing for the Budget 2017 initiative DHB Capital Investment Pool
- \$90 million was provided for in Budget 2017 as part of the change in DHB financing from Debt to Equity, and
- \$40 million was carried forward from 2016/17 to 2017/18 only reflecting the timing of funding for work on Canterbury Earthquake repairs.

Note - This appropriation decreased by \$83.994 million in 2017/18 only due to the following funding transfers:

- \$36.612 million was transferred to the Health Sector Projects appropriation for the Outpatients Facility at Christchurch Hospital
- \$19.710 million was transferred to the Health Sector Projects appropriation to fund costs associated with the construction of the Acute Services Building in Christchurch
- \$12 million was transferred to the Health Sector Projects appropriation to fund costs associated with the Energy Centre Tunnel for Canterbury DHB

- \$11.672 million was transferred to the Health Sector Projects appropriation to fund costs associated with the Buller Integrated Family Health Centre, and
- \$4 million was transferred to the Health and Disability Support Services - Canterbury DHB appropriation for Canterbury Earthquake repairs expenditure.

Conditions on Use of Appropriation

All expenditure from this appropriation requires the joint agreement of the Minister of Health and the Minister of Finance.

Equity Support for DHB deficits (M36)

Scope of Appropriation

This appropriation is limited to equity injections to District Health Boards to address working capital requirements.

Capital Expenditure

	2017/18		2018/19
	Final Budgeted \$000	Estimated Actual \$000	Budget \$000
Total Appropriation	86,924	86,924	139,211

What is Intended to be Achieved with this Appropriation

This appropriation is intended to achieve the following: DHBs are supported to maintain their working capital.

How Performance will be Assessed and End of Year Reporting Requirements

An exemption was granted under s15D(2)(b)(ii) of the PFA as the end-of-year performance information for the appropriation is not likely to be informative in the light of the nature of the transaction or causal event giving rise to the capital expenditure because the funding is, in essence, a contingency.

Note that DHBs will report performance information in their Annual Reports.

Current and Past Policy Initiatives

Policy Initiative	Year of First Impact	2017/18 Final Budgeted \$000	2018/19 Budget \$000	2019/20 Estimated \$000	2020/21 Estimated \$000	2021/22 Estimated \$000
Current Government						
Provision for Additional Deficit Support for District Health Boards	2018/19	-	100,000	-	-	-

Reasons for Change in Appropriation

This appropriation increased by \$52.287 million to \$139.211 million due to:

- \$100 million was provided for the Budget 2018 initiative Provision for Additional Deficit Support for District Health Boards.

This was partly offset by:

- \$36.924 million was carried forward from 2016/17 to 2017/18 only, and
- \$10.789 million was due to a net decrease in funding between 2017/18 and 2018/19 from a previous funding transfer from the Health Services Funding appropriation.

Conditions on Use of Appropriation

All expenditure from this appropriation requires the joint agreement of the Minister of Health and the Minister of Finance.

Health Sector Projects (M36)

Scope of Appropriation

This appropriation is limited to the provision or purchase of health sector assets.

Capital Expenditure

	2017/18		2018/19
	Final Budgeted \$000	Estimated Actual \$000	Budget \$000
Total Appropriation	280,662	216,990	123,000

What is Intended to be Achieved with this Appropriation

This appropriation is intended to provide for capital projects delivered on behalf of the Crown, supporting health sector organisations to deliver health services for New Zealanders.

How Performance will be Assessed and End of Year Reporting Requirements

	2017/18		2018/19
	Final Budgeted Standard	Estimated Actual	Budget Standard
Assessment of Performance			
All Cabinet approved hospital redevelopment project meets project milestones	100%	100%	100%

End of Year Performance Reporting

Performance information will be reported in the Minister's Vote Health Report in Relation to Selected Non-Departmental Appropriations.

Reasons for Change in Appropriation

This appropriation decreased by \$157.662 million to \$123 million mainly due to:

- \$59.409 million was due to funding transfers between years to reflect the timing of work for health sector capital projects, and
- \$30 million was carried forward from 2016/17 to 2017/18 only to reflect the timing of work for hospital redevelopments in Canterbury, West Coast and Southern DHBs.

Note 1 - This appropriation increased by a net \$69.674 million in 2017/18 only due to the following transfers:

- \$36.612 million was transferred from the Equity for Capital Projects for DHBs and Health Sector Crown Agencies appropriation for the outpatients facility at Christchurch Hospital
- \$19.710 million was transferred from the Equity for Capital Projects for DHBs and Health Sector Crown Agencies appropriation for the construction of the Acute Services Building in Christchurch
- \$12 million was transferred from the Equity for Capital Projects for DHBs and Health Sector Crown Agencies appropriation to fund costs associated with Energy Centre Tunnel for Canterbury DHB
- \$11.672 million was transferred from the Equity for Capital Projects for DHBs and Health Sector Crown Agencies appropriation to fund costs associated with the Buller Integrated Family Health Centre, and
- \$10.320 million was transferred to the Health Sector Projects Operating Expenses appropriation to develop business cases, mainly due to \$6 million for the Dunedin Hospital redevelopment and \$3.200 million for the Parkside redevelopment in Christchurch.

Note 2 - Funding is appropriated so that the cost of health sector capital projects can be met. Unspent funding is carried forward to meet the expenditure profile of the agreed projects.

Residential Care Loans - Payments (M36)

Scope of Appropriation

This appropriation is limited to the provision of interest-free loans to people entering into aged residential care facilities.

Capital Expenditure

	2017/18		2018/19
	Final Budgeted \$000	Estimated Actual \$000	Budget \$000
Total Appropriation	15,000	15,000	15,000

What is Intended to be Achieved with this Appropriation

This appropriation is intended to ensure that New Zealanders who are entering residential care facilities receive an appropriate level of financial assistance so they can afford that care.

How Performance will be Assessed and End of Year Reporting Requirements

	2017/18		2018/19
	Final Budgeted Standard	Estimated Actual	Budget Standard
Assessment of Performance			
Percentage of entitled people are able to access residential care loans	100%	100%	100%

End of Year Performance Reporting

Performance information will be reported in the Minister's Vote Health Report in Relation to Selected Non-Departmental Appropriations.

Part 4 - Details of Multi-Category Expenses and Capital Expenditure

Multi-Category Expenses and Capital Expenditure

Policy Advice and Ministerial Servicing (M36)

Overarching Purpose Statement

The overarching purpose of this appropriation is to provide policy advice and other support to Ministers in discharging their policy decision-making and other portfolio responsibilities.

Scope of Appropriation

Departmental Output Expenses

Ministerial Servicing

This category is limited to the provision of services to Ministers to enable them to discharge their portfolio responsibilities other than policy decision-making.

Policy Advice

This category is limited to the provision of advice (including second opinion advice and contributions to policy advice led by other agencies) to support decision-making by Ministers on government policy matters.

Expenses, Revenue and Capital Expenditure

	2017/18		2018/19
	Final Budgeted \$000	Estimated Actual \$000	Budget \$000
Total Appropriation	20,591	19,791	20,991
Departmental Output Expenses			
Ministerial Servicing	5,202	5,202	4,702
Policy Advice	15,389	14,589	16,289
Funding for Departmental Output Expenses			
Revenue from the Crown	20,591	20,591	20,991
Ministerial Servicing	5,202	5,202	4,702
Policy Advice	15,389	15,389	16,289

What is Intended to be Achieved with this Appropriation

This appropriation is intended to ensure that Ministers are supported and advised so they can discharge their portfolio responsibilities.

How Performance will be Assessed for this Appropriation

Assessment of Performance	2017/18		2018/19
	Final Budgeted Standard	Estimated Actual	Budget Standard
Departmental Output Expenses			
Ministerial Servicing			
This category is intended to achieve the following: Ministers are provided with support so that they can discharge their portfolio responsibilities			
The percentage of responses provided to the Minister within agreed timeframes; for written parliamentary questions and Ministerial letters	96%	90%	96%
The percentage of responses provided to the Minister within agreed timeframes, for requested briefings	96%	88%	96%
The percentage of Ministerial letters that required no revision	98%	99%	98%
The percentage of responses to Official Information Act requests provided to the Minister within the agreed timeframe (for requests made to the Minister) or to the requestor within the statutory timeframe, including where extended in line with the Act (for requests made to the Ministry)	95%	79%	95%
Policy Advice			
This category is intended to achieve the following: Ministers are provided with policy advice that appropriately informs them on issues affecting the health portfolio, Government priorities, and when otherwise appropriate			
The average score attained by written policy advice as assessed by an external reviewer	greater than 7 out of 10	7/10	greater than 7 out of 10
Total policy function cost per output hour	\$175 to \$185	\$175	\$175 to \$185

End of Year Performance Reporting

The Ministry of Health will report performance information for this appropriation in its Annual Report.