



Open Board Meeting

Wednesday, 03 November 2021 1:30pm

Note:

- Open Meeting from 1:30pm
- Public Excluded to follow

Via Zoom

Healthy communities | World-class healthcare | Achieved together Kia kotahi te oranga mo te iti me te rahi o te hāpori

Published 29 October 2021

Karakia

E te Kaihanga e te Wahingaro

E mihi ana mo te ha o to koutou oranga

Kia kotahi ai o matou whakaaro i roto i te tu waatea.

Kia U ai matou ki te pono me te tika

I runga i to ingoa tapu

Kia haumie kia huie Taiki eee.

Creator and Spirit of life

To the ancient realms of the Creator

Thank you for the life we each breathe to help us be of one mind As we seek to be of service to those in need.

Give us the courage to do what is right and help us to always be aware Of the need to be fair and transparent in all we do.

We ask this in the name of Creation and the Living Earth.

Well Being to All.



Open Agenda Meeting of the Board 03 November 2021

Venue: Via Zoom Time: 1.30pm

Board Members	Auckland DHB Executi	ve Leadership		
Pat Snedden (Board Chair)	Ailsa Claire	Chief Executive Officer		
Jo Agnew	Dr Karen Bartholomew	Director of Health Outcomes – ADHB/WDHB		
Doug Armstrong	Mel Dooney	Chief People Officer		
Michelle Atkinson	Margaret Dotchin	Chief Nursing Officer		
Zoe Brownlie	Mark Edwards	Chief Quality, Safety and Risk Officer		
Peter Davis	Dr Debbie Holdsworth	Director of Funding – ADHB/WDHB		
Tama Davis (Board Deputy Chair)	Meg Poutasi	Chief of Strategy, Participation and		
Fiona Lai		Improvement		
Bernie O'Donnell	Michael Shepherd	Interim Director Provider Services		
Michael Quirke	Shayne Tong	Chief Digital Officer		
lan Ward	Sue Waters	Chief Health Professions Officer		
	Justine White	Chief Financial Officer		
	Dr Margaret Wilsher	Chief Medical Officer		
Seat at the Table Appointees	Auckland DHB Senior	Staff		
Krissi Holtz Maria Ngauamo	Marlene Skelton	Corporate Business Manager		
	(Other staff members who attend for a particular item are named at the start of the respective minute)			

Agenda

Please note that agenda times are estimates only

KARAKIA

1.30pm	1	ATTENDANCE AND APOLOGIES
1.5000111	1.	ATTENDANCE AND APOLOGIES

Executive Leadership Team Members, Michael Shepherd, Interim Director Provider Services and Dr Margaret Wilsher, Chief Medical Officer.

1.32pm 2. REGISTER OF INTEREST AND CONFLICTS OF INTEREST

Does any member have an interest they have not previously disclosed?

Does any member have an interest that may give rise to a conflict of interest with a matter on the agenda?

- 1.35pm 3. CONFIRMATION OF CONFIDENTIAL MINUTES 29 September 2021
 - 4. ACTION POINTS NIL
- 1.40pm **5. EXECUTIVE REPORTS**
 - 5.1 Chief Executive's Report
- 1.45pm **6. PERFORMANCE REPORTS**
 - 6.1 Financial Performance Report
 - 7. COMMITTEE REPORTS NIL

- 8. DECISION REPORTS Nil
- 9. INFORMATION REPORTS -Nil
- 10. GENERAL BUSINESS
- 1.55pm 11. RESOLUTION TO EXCLUDE PUBLIC

Next Meeting:	Wednesday, 15 December 2021 at 10.00am
	A+ Trust Room, Clinical Education Centre, Level 5, Auckland City Hospital, Grafton

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Attendance at Board Meetings



2020/2021

Members	8 July 20	12 Aug 20	23 Sept 20	4 Nov 20	16 Dec 20	27 Jan 2021	31 March 2021	26 May 2021
Pat Snedden (Board Chair)	1	1	1	1	1	1	х	1
Joanne Agnew	1	1	1	1	1	1	1	1
Doug Armstrong	1	1	1	1	1	х	1	1
Michelle Atkinson	1	1	1	1	1	1	1	1
Zoe Brownlie	1	1	1	1	1	1	1	1
Peter Davis	1	1	1	1	1	1	1	1
Tama Davis	х	1	1	1	1	1	1	1
Fiona Lai	1	1	1	1	1	1	1	1
Bernie O'Donnell	1	1	1	1	1	1	1	Х
Michael Quirke	1	1	1	1	1	1	1	1
lan Ward	1	1	1	1	Х	1	1	1

Members	28 July 21	29 Sept 21	15 Dec 21
Pat Snedden (Board Chair)	1	1	
Joanne Agnew	1	1	
Doug Armstrong	1	1	
Michelle Atkinson	1	1	
Zoe Brownlie	х	1	
Peter Davis	1	1	
Tama Davis	х	1	
Fiona Lai	1	1	
Bernie O'Donnell	х	1	
Michael Quirke	1	1	
lan Ward	1	1	

Te Toka Tumai | Auckland District Health Board

Board Meeting 03 November 2021

Attendance at Board Meetings



Seat at the Table

Memb	ers	26 May. 21	28 Jul. 21	29 Sep. 21	3 Nov 21	15 Dec. 21	Meeting date		Meeting date
Kirimo	ana Willoughby	1	nm	nm					
Krissi H	Holtz	1	1	1					
Maria	Ngauamo	1	1	1					
Shannon Ioane		1	nm	nm					
	Key: 1 = present, x = absent, # = leave of absence, c = cancelled nm = non member								

Conflicts of Interest Quick Reference Guide

Under the NZ Public Health and Disability Act Board members must disclose all interests, and the full nature of the interest, as soon as practicable after the relevant facts come to his or her knowledge.

An "interest" can include, but is not limited to:

- Being a party to, or deriving a financial benefit from, a transaction
- Having a financial interest in another party to a transaction
- Being a director, member, official, partner or trustee of another party to a transaction or a person who will or may derive a financial benefit from it
- Being the parent, child, spouse or partner of another person or party who will or may derive a financial benefit from the transaction
- Being otherwise directly or indirectly interested in the transaction

If the interest is so remote or insignificant that it cannot reasonably be regarded as likely to influence the Board member in carrying out duties under the Act then he or she may not be "interested in the transaction". The Board should generally make this decision, not the individual concerned.

Gifts and offers of hospitality or sponsorship could be perceived as influencing your activities as a Board member and are unlikely to be appropriate in any circumstances.

- When a disclosure is made the Board member concerned must not take part in any deliberation or decision of the Board relating to the transaction, or be included in any quorum or decision, or sign any documents related to the transaction.
- The disclosure must be recorded in the minutes of the next meeting and entered into the interests register.
- The member can take part in deliberations (but not any decision) of the Board in relation to the transaction if the majority of other members of the Board permit the member to do so.
- If this occurs, the minutes of the meeting must record the permission given and the majority's reasons for doing so, along with what the member said during any deliberation of the Board relating to the transaction concerned.

IMPORTANT

If in doubt – declare.

Ensure the full **nature** of the interest is disclosed, not just the existence of the interest.

This sheet provides summary information only - refer to clause 36, schedule 3 of the New Zealand Public Health and Disability Act 2000 and the Crown Entities Act 2004 for further information (available at www.legisaltion.govt.nz) and "Managing Conflicts of Interest – Guidance for Public Entities" (www.oag.govt.nz).

Register of Interests – Board

Member	Interest	Latest Disclosure
Pat SNEDDEN	Director and Shareholder – Snedden Publishing & Management Consultants	01.07.2021
rat SINLDDLIN	Limited	
	Director and Shareholder – Ayers Contracting Services Limited	
	Director and Shareholder – Data Publishing Limited	
	Shareholder – Ayers Snedden Consultants Ltd	
	Executive Chair – Manaiakalani Education Trust	
	Director – Te Urungi o Ngati Kuri Ltd	
	Director – Wharekapua Ltd	
	Director – Te Paki Ltd	
	Director – Ngati Kuri Tourism Ltd	
	Director – Waimarama Orchards Ltd	
	Chair – Auckland District Health Board	
	Director – Ports of Auckland Ltd	
Jo AGNEW	Professional Teaching Fellow – School of Nursing, Auckland University	30.07.2019
	Casual Staff Nurse – Auckland District Health Board	
	Director/Shareholder 99% of GJ Agnew & Assoc. LTD	
	Trustee - Agnew Family Trust	
	Shareholder – Karma Management NZ Ltd (non-Director, majority shareholder)	
	Member – New Zealand Nurses Organisation [NZNO]	
	Member – Tertiary Education Union [TEU]	
Michelle ATKINSON	Director – Stripey Limited	21.05.2020
menene / managem	Trustee - Starship Foundation	21.03.2020
	Contracting in the sector	
	Chargenet, Director & CEO – Partner	
Doug ARMSTRONG	Trustee – Woolf Fisher Trust (both trusts are solely charitable and own shares in a	21.10.2021
Doug Annistration	large number of companies some health related. I have no beneficial or financial interest	21.10.2021
	Trustee- Sir Woolf Fisher Charitable Trust (both trusts are solely charitable and own	
	shares in a large number of companies some health related. I have no beneficial or	
	financial interest	
	Member – Trans-Tasman Occupations Tribunal	
	Daughter – (daughter practices as a Barrister and may engage in health related work	
	from time to time)	
	Meta – Moto Consulting Firm – (friend and former colleague of the principal, Mr	
	Richard Simpson)	
	NZX shares which may include from time to time the health related shares EBOS , Fisher and Paykel Healthcare, Ryman Healthcare, Green Cross	
	Healthcare	
Zoo DDOMANUE	Co-Director – AllHuman	26.05.2024
Zoe BROWNLIE	Board Member – Waitakere Health and Education Trust	26.05.2021
	Partner – Team Leader, Community Action on Youth and Drugs	
	Advisor – Wellbeing, Diversity and Inclusion at Massey University	
Deter DAVIC	Retirement portfolio – Fisher and Paykel	22.42.2020
Peter DAVIS	Retirement portfolio – Ryman Healthcare	22.12.2020
	Retirement portfolio – Arvida, Metlifecare, Oceania Healthcare, Summerset,	
	Vital Healthcare Properties	
	Chair – The Helen Clark Foundation	
	Director/Owner – Ahikaroa Enterprises Ltd	
William (Tama)	Whanau Director/Board of Directors – Whai Maia Ngati Whatua Orakei	30.06.2021
DAVIS	winding Director/ Doding of Directors — windi Ividia Ivgati Wildtud Orakel	1

Te Toka Tumai | Auckland District Health Board

Board Meeting 03 November 2021

	Director – Comprehensive Care PHO Board	
	Board Member – Supporting Families Auckland	
	•	
	Board Member – District Maori Leadership Board	
	Iwi Affiliations – Ngati Whatua, Ngati Haua and Ngati Tuwharetoa	
	Director Board of New Zealand Health Partnerships	
	Elected Member – Ngati Whatua o Orakei Trust Board	
	Board Member – Auckland Health Foundation	
Krissi HOLTZ	Primary Employer – ASB Bank	07.07.2021
Shannon IOANE	Member – Public Service Association (PSA)	07.07.2021
3110111071112	Employee at Starship Children's Hospital – Allied Health/Child Health ADHB	07.07.2021
Fiona LAI	Member – Pharmaceutical Society NZ	03.09.2021
TIONA LAI	Casual Pharmacist – Auckland DHB	03.03.2021
	Member – PSA Union	
	Puketapapa Local Board Member – Auckland Council	
	Member – NZ Hospital Pharmacists' Association	
	Board of Trustee – Mt Roskill Primary School	
	Vaccinator – Tamaki Health	
Maria NGAUAMO	Employee – NZ Ministry of Foreign Affairs and Trade (MFAT)	18/10/21
Bernie O'DONNELL	Chairman Manukau Urban Māori Authority(MUMA)	08.07.2021
	Chairman UMA Broadcasting Limited	
	Board Member National Urban Māori Authority (NUMA)	
	Board Member Whānau Ora Commissioning Agency	
	National Board-Urban Maori Representative – Te Matawai	
	Board Member - Te Mātāwai. National Māori language Board	
	Owner/Operator- Mokokoko Limited	
	Senior Advisor to DCE – Oranga Tamariki	
	Engagement Advisor – Ministerial Advisory Panel – Oranga Tamariki	
	Kura Ratapu – Radio Waatea - Wife Chief Operating Officer – Mercy Radiology Group	
Michael QUIRKE	Convenor and Chairperson – Child Poverty Action Group	30.08.2021
	Director of Strategic Partnerships for Healthcare Holdings Limited	
	Board Director – healthAlliance	
	Director - New Zealand Musculoskeletal Imaging Limited	
Ian WARD	Director – Ward Consulting Services Limited	21.05.2020
IGII WAND	Director – Cavell Corporation Limited	21.03.2020
	Trustee of various family trusts	
	Oceania Healthcare – wife shareholder	
Kirimoana WILLOUGHBY	Employer – Ngati Whatua Orakei Whai Maia Ltd	05.07.2021



Minutes Meeting of the Board 29 September 2021

Minutes of the Auckland District Health Board meeting held on Wednesday, 29 September 2021 via Zoom commencing at 10:00am

Board Members PresentAuckland DHB Executive Leadership Team PresentPat Snedden (Board Chair)Ailsa ClaireChief Executive OfficerJo AgnewMel DooneyChief People OfficerDoug ArmstrongMargaret DotchinChief Nursing OfficerMichelle AtkinsonMichael ShepherdInterim Director Provider Services

Zoe Brownlie Shayne Tong Chief Digital Officer
Peter Davis Justine White Chief Financial Officer

Tama Davis (Board Deputy Chair)

Fiona Lai Bernie O'Donnell

Michael Quirke Ian Ward

Seat at the Table Appointees

Krissi Holtz Maria Ngauamo **Auckland DHB Senior Staff Present**

Carly Orr Director Communications and Stakeholder

Engagement

Marlene Skelton Corporate Business Manager

(Other staff members who attend for a particular item are named at the start of the minute for that item)

KARAKIA

Tama Davis led the Board in a karakia.

1. ATTENDANCE AND APOLOGIES

There were no apologies.

2. REGISTER AND CONFLICTS OF INTEREST (Pages 7-9)

Doug Armstrong is to supply an email outlining changes to his interests register.

3. CONFIRMATION OF MINUTES 28 JULY 2021 (Pages 10-27)

Matters Arising

Doug Armstrong drew attention to page 14 of the agenda and paragraph three asking whether there was a report around the Waikato Cyber Attack that was ready to be released. Shayne Tong advised that it had not been released yet and when it was there would be different levels of information that could be shared in the public domain.

Shayne Tong undertook to follow up and present an update at a future Board meeting.

Doug Armstrong drew attention to page 20 of the agenda and the comment around the competency of the vaccination workforce and asked what had been undertaken to make better use of the newly trained vaccinator workforce that would enable them to administer

other types of vaccines. Ailsa Claire advised that the regulations that were approved only allowed this workforce to administer a COVID vaccination. A review is occurring to determine what other groups of people these COVID vaccinators would be suitable to vaccinate. The general assumption is that it would probably only be vaccines for adults. Children's vaccinations are administered differently. It is important to leave a legacy especially for Maori and pacific partners.

Resolution: Moved Tama Davis / Seconded Ian Ward

That the minutes of the Board meeting held on 28 July 2021 be confirmed as a true and accurate record.

Carried

3.1 Confirmation of Emergency Board Meeting Minutes of 1 September 2021 (Pages 28-31)

Resolution: Moved Pat Snedden / Seconded Tama Davis

That the minutes of the Emergency Board meeting held on 01 September 2021 be confirmed as a true and accurate record.

Carried

4. ACTION POINTS - NIL

There were none to review.

5. EXECUTIVE REPORTS

5.1 Chief Executive's Report (*Pages 32-40*)

The Chief Executive, Ailsa Claire asked that the report be taken as read, highlighting as follows:

COVID Update

Efforts continue to contain the recent Delta COVID outbreak. Of concern are the growing number of Māori and Pacific cases.

Within the Hospital the first vaccination rate sits at 97.7% and 93.4% have had their full vaccination.

There are currently 160 vaccination sites within the community, including primary care and pharmacies. The latter are now administering 50% of all vaccinations and are now the sites reaching a higher number of Māori and Pacific people.

In metro Auckland for every 100,000 persons/population the rate of vaccination for all ethnicities is 825 per 1000, for Pacific it is 695 per 1000 and for Māori it is 603 per 1000. While the Pacific ratio has increased there is still a significant gap when it comes to Māori.

Large numbers of people continue to be tested with 21% of those being Māori and 24% Pacific people. 19.4% of the Auckland DHB population have had to be tested, some 90,277 people.

Vaccinations administered have been falling with two thirds of vaccinations administered being second vaccinations and only one third being a first vaccination. The rates through centres were now around 15,000 per day with a capacity to deliver 30,000 vaccinations a day. A more targeted approach was now being taken within communities reaching into groups like schools and churches so the actual rate of vaccination will go down as you deal with discrete smaller hard to reach groups of people.

Opening of Kidney Unit in Tamaki

This unit was built in partnership with the Tamaki Development Agency who supplied the land. It is a mobile facility and has allowed the closure of the aged Greenlane facility.

Performance Report

The report is showing the challenge that COVID has placed on the health system. The biggest concern is the immunisation rate of children and the MMR catch-up required. An advantage of being able to provide COVID vaccinations to young people 12 and older is that it enables the MMR vaccination to be given at the same time. This will also be done when approval is given for COVID vaccinations to 5–12-year-olds.

Ailsa Claire advised that it is very different vaccinating children than it is adults and although now the DHB have permission to double vaccinate for both COVID and MMR it cannot be done with the existing COVID vaccinators. It requires the release of qualified nurses and practitioners.

The following was covered during discussion:

Bernie O'Donnell was advised that although from the outset engagement had occurred with Māori and Pacific and prioritisation of those populations had been attempted it had been a large learning experience. Māori partners had helped design the initial MaxVax events and had hoped that Māori and Pacific people would engage with those events. What has been an issue and a struggle to provide is the required support and capacity for our Māori and Pacific partners. These partners need to become sustainable in the long term as a lot of capacity has already been built into these groups. That is dependent on COVID funding from the NRHCC or from the COVID Centre so conversations are being had how this Māori and Pacific workforce remains sustainable and grows.

Doug Armstrong drew attention to page 40 of the agenda and patient experience where 1 in 10 rate their experience as less than very good or excellent and asked for more detail.

Doug also asked about patient rights and if any patient had asked to be informed whether they were being treated by or had encountered people who were not vaccinated or tested and whether the patient charter needed to be amended accordingly.

Ailsa Claire advised that, with the Board Chairs agreement, routine reports as seen in previous meetings were being presented in abbreviated form while those staff who prepared them were seconded to dealing with COVID but detail can be provided.

In terms of people's rights to care and treatment all go through a consent process prior to surgery.

Resolution:

That the Chief Executives report for 11 July 2021 – 12 September 2021 be received.

Carried

6. PERFORMANCE REPORTS

6.1 Financial Performance Report - Highlights (*Pages 41-44*)

The Chief Financial Officer, Justine White asked that the report be taken as read, highlighting as follows:

The August business as usual position was slightly favourable to budget at \$23k. The impact of COVID in that month has been significant through the lack of IDF revenue and reduction in planned care undertaken and comes at a cost of \$7M unfavourable.

Pat Snedden asked for an overview of the historic position around treatment of wash-up in these areas. Justine White advised that in the last financial year the COVID Centre made the decision that they would not fund for that through the COVID appropriation and the cost of loss of IDF revenue and reduction in planned care revenue were set to one side. However, no decisions had yet been made around treatment of these things in this financial year. It is likely that a large proportion of this will form a difference to budget.

Justine White drew attention to personnel and non-clinical cost advising that it was expected that some of the non-clinical cost could be claimed back.

Resolution:

That the Board receives this Financial Report for the period ended 31 August 2021 Carried

- 7. COMMITTEE REPORTS NIL
- 8. DECISION REPORTS NIL
- 9. INFORMATION REPORTS
- 9.1 Statement of Performance Expectations (SPE) Performance Report: Quarter Four 2020/21 (Pages 45-59)

The Chief Executive, Ailsa Claire asked that the report be taken as read.

There were no questions.

Resolution:

That the Statement of Performance Expectations (SPE) Performance Report: Quarter Four 2020/21 be received.

Carried

10. GENERAL BUSINESS

There was none.

11. RESOLUTION TO EXCLUDE PUBLIC (*Pages 60-63*)

Resolution: Moved Tama Davis / Seconded Jo Agnew

That in accordance with the provisions of Clauses 32 and 33, Schedule 3, of the New Zealand Public Health and Disability Act 2000 the public now be excluded from the meeting for consideration of the following items, for the reasons and grounds set out below:

General subject of item to be considered	Reason for passing this resolution in relation to the item	Grounds under Clause 32 for the passing of this resolution
3.0 Confirmation of Confidential Minutes 28 July 2021	Commercial Activities Information contained in this report is related to commercial activities and Auckland DHB would be prejudiced or disadvantaged if that information was made public [Official Information Act 1982 s9(2)(i)]	That the public conduct of the whole or the relevant part of the meeting would be likely to result in the disclosure of information which good reason for withholding would exist under any of sections 6, 7, or 9 (except section 9(2)(g)(i)) of the Official Information Act 1982 [NZPH&D Act 2000]
3.1 Confirmation of the Emergency Board Confidential Meeting Minutes of 1 September 2021	Commercial Activities Information contained in this report is related to commercial activities and Auckland DHB would be prejudiced or disadvantaged if that information was made public [Official Information Act 1982 s9(2)(i)]	That the public conduct of the whole or the relevant part of the meeting would be likely to result in the disclosure of information which good reason for withholding would exist under any of sections 6, 7, or 9 (except section 9(2)(g)(i)) of the Official Information Act 1982 [NZPH&D Act 2000]
4.0 Confidential Action Points - Nil	N/A	That the public conduct of the whole or the relevant part of the meeting would be likely to result in the disclosure of information which good reason for withholding would exist under any of sections 6, 7, or 9 (except section 9(2)(g)(i)) of the Official Information Act 1982 [NZPH&D Act 2000]
5.0 Risk Report - Nil	N/A	That the public conduct of the whole or the relevant part of the meeting would be likely to result in the disclosure of information which good reason for withholding would

		exist under any of sections 6, 7, or 9 (except section 9(2)(g)(i)) of the Official Information Act 1982 [NZPH&D Act 2000]
6.1 Chief Executive's Confidential Verbal Report	Commercial Activities Information contained in this report is related to commercial activities and Auckland DHB would be prejudiced or disadvantaged if that information was made public [Official Information Act 1982 s9(2)(i)] Negotiations Information relating to commercial and/or industrial negotiations in progress is incorporated in this report and would prejudice or disadvantage if made public at this time [Official Information Act 1982 s9(2)(j)] Prevent Improper Gain Information contained in this report could be used for improper gain or advantage if it is made public at this time [Official Information Act 1982S9(2)(k)]	That the public conduct of the whole or the relevant part of the meeting would be likely to result in the disclosure of information which good reason for withholding would exist under any of sections 6, 7, or 9 (except section 9(2)(g)(i)) of the Official Information Act 1982 [NZPH&D Act 2000]
7.0 Performance Reports - Nil	N/A	That the public conduct of the whole or the relevant part of the meeting would be likely to result in the disclosure of information which good reason for withholding would exist under any of sections 6, 7, or 9 (except section 9(2)(g)(i)) of the Official Information Act 1982 [NZPH&D Act 2000]
8.0 Committee Reports - Nil	N/A	That the public conduct of the whole or the relevant part of the meeting would be likely to result in the disclosure of information which good reason for withholding would exist under any of sections 6, 7, or 9 (except section 9(2)(g)(i)) of the Official Information Act 1982 [NZPH&D Act 2000]
9.1 Kotui Hauora Delegated Authority	Commercial Activities Information contained in this report is related to commercial activities and Auckland DHB would be prejudiced or disadvantaged if that	That the public conduct of the whole or the relevant part of the meeting would be likely to result in the disclosure of information which good reason for withholding would

	information was made public [Official Information Act 1982 s9(2)(i)] Negotiations Information relating to commercial and/or industrial negotiations in progress is incorporated in this report and would prejudice or disadvantage if made public at this time [Official Information Act 1982 s9(2)(j)]	exist under any of sections 6, 7, or 9 (except section 9(2)(g)(i)) of the Official Information Act 1982 [NZPH&D Act 2000]
9.2 ACH Site Access	Information contained in this report is related to commercial activities and Auckland DHB would be prejudiced or disadvantaged if that information was made public [Official Information Act 1982 s9(2)(i)] Prejudice to Health or Safety Information about measures protecting the health and safety of members of the public is enclosed in this report and those measures would be prejudiced by publication at this time [Official Information Act 1982 s9(2)(c)]	That the public conduct of the whole or the relevant part of the meeting would be likely to result in the disclosure of information which good reason for withholding would exist under any of sections 6, 7, or 9 (except section 9(2)(g)(i)) of the Official Information Act 1982 [NZPH&D Act 2000]
9.3 Northern Regional Service Plan	Commercial Activities Information contained in this report is related to commercial activities and Auckland DHB would be prejudiced or disadvantaged if that information was made public [Official Information Act 1982 s9(2)(i)]	That the public conduct of the whole or the relevant part of the meeting would be likely to result in the disclosure of information which good reason for withholding would exist under any of sections 6, 7, or 9 (except section 9(2)(g)(i)) of the Official Information Act 1982 [NZPH&D Act 2000]
9.4 Fleet Replacement Programme	Commercial Activities Information contained in this report is related to commercial activities and Auckland DHB would be prejudiced or disadvantaged if that information was made public [Official Information Act 1982 s9(2)(i)]	That the public conduct of the whole or the relevant part of the meeting would be likely to result in the disclosure of information which good reason for withholding would exist under any of sections 6, 7, or 9 (except section 9(2)(g)(i)) of the Official Information Act 1982
		[NZPH&D Act 2000]

	[Official Information Act 1982 s9(2)(i)]	exist under any of sections 6, 7, or 9 (except section 9(2)(g)(i)) of the Official Information Act 1982 [NZPH&D Act 2000]
9.6 Women's Health Update	Commercial Activities Information contained in this report is related to commercial activities and Auckland DHB would be prejudiced or disadvantaged if that information was made public [Official Information Act 1982 s9(2)(i)] Negotiations Information relating to commercial and/or industrial negotiations in progress is incorporated in this report and would prejudice or disadvantage if made public at this time [Official Information Act 1982 s9(2)(j)]	That the public conduct of the whole or the relevant part of the meeting would be likely to result in the disclosure of information which good reason for withholding would exist under any of sections 6, 7, or 9 (except section 9(2)(g)(i)) of the Official Information Act 1982 [NZPH&D Act 2000]
9.7 Sale and Supply of Alcohol Act	Commercial Activities Information contained in this report is related to commercial activities and Auckland DHB would be prejudiced or disadvantaged if that information was made public [Official Information Act 1982 s9(2)(i)]	That the public conduct of the whole or the relevant part of the meeting would be likely to result in the disclosure of information which good reason for withholding would exist under any of sections 6, 7, or 9 (except section 9(2)(g)(i)) of the Official Information Act 1982 [NZPH&D Act 2000]
9.8 Smokefree Aotearoa 2025	Commercial Activities Information contained in this report is related to commercial activities and Auckland DHB would be prejudiced or disadvantaged if that information was made public [Official Information Act 1982 s9(2)(i)]	That the public conduct of the whole or the relevant part of the meeting would be likely to result in the disclosure of information which good reason for withholding would exist under any of sections 6, 7, or 9 (except section 9(2)(g)(i)) of the Official Information Act 1982 [NZPH&D Act 2000]
10.0 Discussion Reports – Nil	N/A	That the public conduct of the whole or the relevant part of the meeting would be likely to result in the disclosure of information which good reason for withholding would exist under any of sections 6, 7, or 9 (except section 9(2)(g)(i)) of the Official Information Act 1982 [NZPH&D Act 2000]
11.1 COVID Delegated	Commercial Activities Information contained in this report	That the public conduct of the whole or the relevant part of the

Authority	is related to commercial activities and Auckland DHB would be prejudiced or disadvantaged if that information was made public [Official Information Act 1982 s9(2)(i)]	meeting would be likely to result in the disclosure of information which good reason for withholding would exist under any of sections 6, 7, or 9 (except section 9(2)(g)(i)) of the Official Information Act 1982 [NZPH&D Act 2000]
11.2 HealthSource Operational Performance Report – August 2021	Commercial Activities Information contained in this report is related to commercial activities and Auckland DHB would be prejudiced or disadvantaged if that information was made public [Official Information Act 1982 s9(2)(i)]	That the public conduct of the whole or the relevant part of the meeting would be likely to result in the disclosure of information which good reason for withholding would exist under any of sections 6, 7, or 9 (except section 9(2)(g)(i)) of the Official Information Act 1982 [NZPH&D Act 2000]
12.0 General Business	N/A	That the public conduct of the whole or the relevant part of the meeting would be likely to result in the disclosure of information which good reason for withholding would exist under any of sections 6, 7, or 9 (except section 9(2)(g)(i)) of the Official Information Act 1982 [NZPH&D Act 2000]

Carried

The meeting closed at 12.45pm.

Signed as a true and correct record of the Board meeting held on Wednesday, 29 September 2021

Chair:		Date:	
-	Pat Snedden		

Chief Executive's Report



Recommendation

That the Chief Executives report for 13 September 2021 – 29 October 2021 be received.

Prepared by: Ailsa Claire (Chief Executive)

1. Introduction

This report covers the period from 13 September 2021 – 29 October 2021

2. Events and News

2. 1 COVID-19 outbreak

On August 17, COVID-19 was detected in the community. Since then our teams have responded and adapted as we continue to manage our patients, communities and staff safely.

We have robust processes in place to keep our staff, our patients and others on our sites safe. There is a strong focus on testing. We continue to have a dedicated testing site close to Auckland City Hospital.

Screening for patients continues using the processes we have in place as part of our ongoing COVID-19 response.

Whilst we have had to reduce the number of whānau visiting, we are committed to enabling access to whānau for patients in our care, whilst balancing risk of COVID-19 and the risk of harm of not having whānau visit.

Additional facilities work has taken place rapidly on one of our wards – designated as our main ward for COVID-19 patients. We owe a huge thank you to our facilities team and contractors to get this work done so quickly.

There are many heroes and people to be thanked and recognised throughout this latest community outbreak. We are celebrating their stories in a special edition of our magazine Te Whetu Mārama.

Our people have been amazing and we continue to look at ways to support welfare and wellbeing through our Employee Support Centre, RAISE and other ways.

2.2 Living with COVID-19 ongoing response

COVID-19 is in our community and as restrictions ease we are likely to see increasing numbers of patients in hospital and community services with COVID-19.

A Living with COVID Steering Group has been set up to work to help us understand and plan to live with COVID-19, which includes caring for people with the virus as well as delivering excellent care in all of our services, and keeping our workforce safe.

We are using modelling information to predict cases in ICU and in our hospitals to help with this planning.

The planning is around eleven work streams. Each work stream has Te Tiriti and equity at the heart. You can see the work streams in the Living with COVID-19 image.

Some of this work is being done at pace due to the current outbreak, and while we plan for the international borders opening in the future.

In doing this, we are linking with colleagues nationally and learning as much as possible

from around the world. Many other countries have already gone through this stage, and we can use their lessons to do things better.



2.3 COVID-19 Vaccinations

We know that vaccination makes a difference and that vaccination is our route out of the current restrictions. As lead CE for Northern Region vaccinations I've been incredibly proud of the work of the team dedicated to leading this work, staff from the three Auckland DHBs who have supported the vaccination drive.

Auckland DHB has led the way in staff vaccination numbers as at the time of writing 98.1% first vaccination and 95.7% of our staff are fully vaccinated

We continue to have conversations with the very small number of people who are unvaccinated, as the deadline date for vaccine mandates for health workers gets closer.

3. Auckland DHB at a glance





Patients

In September and October 2021 across Auckland DHB:

224,066 outpatient appointments took place

10,602 presentations to the Adult and Children's Emergency Departments

2542 patients had planned surgery

In October 2021 the mean occupancy for the Adult hospital at 12am was **634**



Communications

in September and October

185 media requests

72 Official Information requests

1,269 emails to the generic communications inbox

305,250 page views on the Auckland DHB website

There's been a **20.1%** increase in people coming to the Auckland DHB website from Google compared to 2020.

Financial Performance Report for the period ended 30 September 2021

Recommendation

That the Board receives this Financial Report for the period ended 30 September 2021

Prepared by: Auxilia Nyangoni, Deputy Chief Financial Officer Endorsed by: Justine White, Chief Financial Officer

Date: 26 October 2021

1. Statement of Financial Performance for the period ending 30 September 2021

The September 2021 net financial result for the month is a deficit of \$1.7M, which is favourable to the budget deficit of \$5.5M by \$3.8M, mainly due to Covid-19 impact on volumes which resulted in clinical supplies costs being lower than planned for non wash-up procedures. For the year to date, the financial result is a deficit of \$13.7M, which is \$3.8M unfavourable to the budget deficit of \$9.8M, mainly driven by unfunded Covid impacts. The table below summarises the financial result for the period ending 30 September 2021 and, includes the distribution of this across DHB divisions and by driver areas (i.e. Business as Usual (BAU) operations, Covid-19 and Holidays Act).

Y	v	,	,,

Clinical Supplies Funder Payments - NGOs and IDF Outflows Infrastructure & Non-Clinical Supplies

Total Expenditure Net Surplus / (Deficit)

Result	bν	Division	\$000s

Outsourced Other Services

Funder Provider Governance Net Surplus / (Deficit)

COVID-19 Net impact on bottom-line Holidays Act Impact BAU Net impact on bottom-line Net Surplus / (Deficit)

Month (Sep-2021)				
Actual	Budget	Variance		
195,114	160,899	34,215 F		
8,182	8,495	313 U		
60,800	66,133	5,332 U		
(9,908)	1,535	11,443 U		
254,188	237,062	17,126 F		
110,751	106,756	3,995 U		
5,266	2,355	2,910 U		
3,136	3,812	676 F		
9,318	7,376	1,941 U		
27,067	30,545	3,478 F		
76,035	73,778	2,256 U		
24,359	17,935	6,424 U		
255,932	242,558	13,374 U		
(1,745)	(5,496)	3,752 F		

Month (Sep-2021)				
Actual	Budget	Variance		
1,325	0	1,325 F		
(2,971)	(5,479)	2,508 F		
(98)	(17)	81 U		
(1,745)	(5,496)	3,752 F		

1,058 U	0	(1,058)
0 F	(3,334)	(3,334)
4,809 F	(2,162)	2,647
3,751 F	(5,496)	(1,745)

Year to Date 2021-22				
Actual	Budget	Variance		
510,262	482,776	27,487 F		
23,948	25,491	1,544 U		
188,272	198,399	10,127 U		
4,182	4,651	469 U		
726,664	711,317	15,347 F		
328,617	314,403	14,213 U		
12,038	7,066	4,972 U		
10,398	11,471	1,073 F		
25,046	22,129	2,917 U		
86,728	90,924	4,196 F		
210,880	221,335	10,455 F		
66,616	53,826	12,791 U		
740,323	721,155	19,168 U		
(13,659)	(9,838)	3,821 U		

Year to Date 2021-22				
Actual	Actual Budget			
2,007	0	2,007 F		
(15,788)	(9,793)	5,997 U		
122	(45)	167 F		
(13,659)	(9,838)	3,821 U		

8,487 U	(18)	(8,505)
0 F	(10,001)	(10,001)
4,666 F	181	4,847
3,821 U	(9,838)	(13,659)

Commentary on Significant Variances for the Year to Date

Revenue

Total revenue for the year to date is \$15.3M (2.2%) favourable with key variances as follows:

- \$27.5M (5.7%) favourable Government and Crown sourced revenue reflecting \$35M unbudgeted Covid revenue realised, which is partially offset by an \$8M provision for adverse planned care wash-ups driven by reduced volumes which have been impacted by the Covid lockdowns.
- \$10.1M (5.1%) unfavourable IDFs, reflecting lower volumes delivered as a consequence of Covid lockdowns.

Expenditure

Expenditure is \$19.2M (2.7%) unfavourable to budget year to date with significant variances as follows:

- Personnel/Outsourced Personnel costs \$19.2M (6%) unfavourable mainly driven by unbudgeted Covid related costs \$17.3M.
- Clinical Supplies costs \$4.2M (4.6%) favourable mainly driven by the impact of Covid lockdowns on volumes delivered which resulted in a reduction in clinical supplies costs, we expect this favourable variance to be eroded in future months as we progress delivery of these procedures.
- Infrastructure & Non Clinical Supplies \$12.8M (23.8%) unfavourable, with the variance being entirely unbudgeted Covid-19 related expenditure of \$10.7M (e.g. vaccination clinic leases and urgent facilities work), offset by unbudgeted Covid19 revenue.
- Funder payments to NGO/IDF providers are \$10.5M (4.7%) favourable mainly due to net favourable funded initiatives variances and net favourable utilisation variances across NGO demand based services.
 Funded initiatives have equivalent and related offsetting revenue variances with a nil impact on core result.

FTE

Total FTE (including outsourced) for September 10,405 which is 125 FTEs higher than budget. There were 490 unbudgeted FTE for Covid-19, meaning underlying the BAU position is 368 FTEs favourable to budget, mainly driven by Nursing FTE vacancies.

2. Statement of Financial Position as at 30 September 2021

\$'000		30-Sep-21		31-Aug-21	Var	30-Jun-21	Var
·	Actual	Budget	Variance	Actual	Last Mth	Actual	Last Year
Public Equity	973,827	988,300	14,473U	970,821	3,006F	964,383	9,444F
	-	-	0F	-	0F	-	0F
Reserves							
Revaluation Reserve	643,988	643,988	0U	643,988	0F	643,988	0U
Accumulated Deficits from Prior Year's	(888,955)	(838,119)	50,835U	(888,955)	0F	(792,742)	96,213U
Current Surplus/(Deficit)	(13,659)	(60,688)	47,029F	(11,914)	1,744U	(96,229)	82,571F
	(258,626)	(254,819)	3,806U	(256,881)	1,744U	(244,983)	13,642U
Total Equity	715,201	733,481	18,279U	713,940	1,261F	719,400	4,198U
Non Current Assets							
Non Current Assets Fixed Assets							
Land	397,089	397,089	OF	397,089	OF	397,089	0F
Buildings	614,642	647,915	33,273U	617,564	2,921U	621,314	6,672U
Plant & Equipment	86,669	93,979	7,310U	86,547	122F	91,861	5,192U
Work in Progress	111,276	96,427	14,849F	109,137	2,140F	96,596	14,681F
Total Property, Plant & Equipment	1,209,677	1,235,410	25,734U	1,210,337	660U	1,206,860	2,817F
	1,200,077	1,233,410	23,7340	1,210,337	0000	1,200,000	2,0171
Investments							
- Health Alliance	78,787	79,676	889U	78,787	OF	79,676	889U
- Health Source	271	-	271F	271	0F	-	271F
- NZHPL	7,066	7,295	229U	7,142	76U	7,295	229U
- ADHB Term Deposits > 12 months	-	-	0F	-	0F	-	0F
- Other Investments	617	-	617F	617	0F	-	617F
	86,741	86,971	230U	86,818	76U	86,971	230U
Intangible Assets	2,513	5,428	2,915U	2,592	79U	2,751	238U
Trust Funds	17,520	17,577	57U	17,716	196U	17,577	57U
	106,774	109,976	3,202U	107,125	351U	107,299	525U
Total Non Current Assets	1,316,451	1,345,386	28,936U	1,317,462	1,011U	1,314,159	2,292F
Current Assets							
Cash & Short Term Deposits	296,419	198,142	98,277F	227,387	69,032F	202,469	93,950F
Trust Deposits > 3months	21,101	10,707	10,394F	6,707	14,394F	10,707	10,394F
ADHB Term Deposits > 3 months	, -	-	0F	-	0F	-	0F
Debtors	54,523	44,859	9,664F	31,339	23,184F	44,859	9,664F
Accrued Income	116,745	76,452	40,293F	106,715	10,030F	76,452	40,293F
Prepayments	11,802	5,744	6,058F	10,514	1,287F	5,920	5,882F
Inventory	17,269	16,275	994F	17,015	254F	16,275	994F
Total Current Assets	517,859	352,179	165,679F	399,678	118,181F	356,682	161,177F
Current Liabilities							
Current Liabilities	(2.040)	(2.020)	2011	(2.742)	105U	(2.020)	20U
Borrowing Trade & Other Creditors, Provisions	(2,848) (375,521)	(2,828) (222,902)	20U 152,619U	(2,743) (248,152)	1050 127,368U	(2,828) (222,902)	200 152,619U
Employee Entitlements	(632,034)	(626,986)	5,048U	(248,152) (644,157)	127,368U 12,124F	(616,986)	152,619U 15,048U
Funds Held in Trust	(1,410)	(1,410)	3,0480 0U	(1,410)	12,124F 0F	(1,410)	15,046U 0U
Total Current Liabilities	(1,410)	(854,126)	157,686U	(896,462)	115,349U	(844,126)	167,686U
Total Current Liabilities	(1,011,012)	(034,120)	137,0000	(030,402)	113,3430	(044,120)	107,0000
Working Capital	(493,954)	(501,947)	7,993F	(496,784)	2,832F	(487,444)	6,510U
Non Current Liabilities							
Borrowings	(14,027)	(16,618)	2,590F	(13,469)	558U	(13,949)	78U
Employee Entitlements	(93,268)	(93,341)	73F	(93,268)	0F	(93,366)	98F
Total Non Current Liabilities	(107,296)	(109,959)	2,663F	(106,737)	558U	(107,315)	19F
Net Assets	715,201	733,481	18,279U	713,940	1,261F	719,400	4,198U

3. Statement of Cash flows as at 30 September 2021

\$000's	Month (Sep-2021)		Year to Date 2021-22			
	Actual	Budget	Variance	Actual	Budget	Variance
Operations						
Revenue Received	325,768	236,844	88,924F	786,655	710,663	75,992F
Payments						
Personnel	(122,874)	(100,089)	22,785U	(313,451)	(294,404)	19,047U
Suppliers	(55,801)	(53,822)	1,979U	(164,361)	(160,808)	3,554U
Capital Charge	0	(2,713)	2,713F	-	(8,138)	8,138F
Payments to other DHBs and Providers	(76,035)	(73,779)	2,256U	(210,880)	(221,338)	10,458F
GST	15,281	0	15,281F	15,735	0	15,735F
	(239,429)	(230,403)	9,026U	(672,957)	(684,687)	11,730F
Net Operating Cash flows	86,339	6,441	79,898F	113,698	25,976	87,722F
Investing						
Interest Income	212	219	7 U	603	657	54U
Sale of Assets	(4)	0	4U	21	0	21F
Purchase Fixed Assets	(6,939)	(25,414)	18,475F	(19,506)	(57,219)	37,713F
Investments and restricted trust funds	(14,410)	0	14,410U	(10,409)	0	10,409U
Net Investing Cash flows	(21,141)	(25,195)	4,054F	(29,291)	(56,562)	27,271F
Financing						
Interest paid	(35)	(100)	65F	(196)	(300)	104F
New loans raised	(137)	1,986	2,123U	- 678	3,212	3,890U
Loans repaid	1,000	(198)	1,198F	976	(568)	1,544F
Other Equity Movement	3,006	10,224	7,218U	9,443	23,917	14,474U
Net Financing Cash flows	3,834	11,912	8,078U	9,544	26,260	16,716U
Total Net Cash flows	69,032	(6,842)	75,874F	93,951	(4,326)	98,277F
Opening Cash	227,387	204,984	22,403F	202,468	202,468	OF
Total Net Cash flows	69,032	(6,842)	75,874F	93,951	(4,326)	98,277F
Closing Cash	296,419	198,142	98,277F	296,419	198,142	98,277F

ADHB Cash
A+ Trust Cash
A+ Trust & Restricted Deposits < 3 months
Closing Cash
ADHB Short Term Investments 3 > 12 months
A+ Trust Short Term Investments 3 > 12 months
ADHB Long Term Investments
A+ Trust Long Term Investment Portfolio
Total Cash & Deposits

335,040	226,426	108,614F
17,520	17,577	57U
0	0	OF
21,101	10,707	10,394F
0	0	OF
296,419	198,142	98,277F
338	1,751	1,412U
3,148	11,765	8,617U
292,933	184,626	108,307F

Resolution to exclude the public from the meeting

Recommendation

That in accordance with the provisions of Clauses 32 and 33, Schedule 3, of the New Zealand Public Health and Disability Act 2000 the public now be excluded from the meeting for consideration of the following items, for the reasons and grounds set out below:

General subject of item to be considered	Reason for passing this resolution in relation to the item	Grounds under Clause 32 for the passing of this resolution
3.0 Confirmation of Confidential Minutes 29 September 2021	Commercial Activities Information contained in this report is related to commercial activities and Auckland DHB would be prejudiced or disadvantaged if that information was made public.	That the public conduct of the whole or the relevant part of the meeting would be likely to result in the disclosure of information which good reason for withholding would exist under any of sections 6, 7, or 9 (except section 9(2)(g)(i)) of the Official Information Act 1982 [NZPH&D Act 2000]
4.0 Action Points	N/A	That the public conduct of the whole or the relevant part of the meeting would be likely to result in the disclosure of information which good reason for withholding would exist under any of sections 6, 7, or 9 (except section 9(2)(g)(i)) of the Official Information Act 1982 [NZPH&D Act 2000]
4.1 MentalHealth and Well being within the Community – verbal briefing	Commercial Activities Information contained in this report is related to commercial activities and Auckland DHB would be prejudiced or disadvantaged if that information was made public [Official Information Act 1982 s9(2)(i)] Prevent Improper Gain Information contained in this report could be used for improper gain or advantage if it is made public at this time [Official Information Act 1982S9(2)(k)]	That the public conduct of the whole or the relevant part of the meeting would be likely to result in the disclosure of information which good reason for withholding would exist under any of sections 6, 7, or 9 (except section 9(2)(g)(i)) of the Official Information Act 1982 [NZPH&D Act 2000]
5.0 Risk Report - Nil	N/A	That the public conduct of the whole or the relevant part of the meeting would be likely to result in the disclosure of information which good reason for withholding would exist under any of sections 6, 7, or 9 (except section 9(2)(g)(i)) of the Official Information Act 1982 [NZPH&D Act 2000]

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6.1 Chief Executives Confidential verbal report	Information contained in this report is related to commercial activities and Auckland DHB would be prejudiced or disadvantaged if that information was made public [Official Information Act 1982 s9(2)(i)] Negotiations Information relating to commercial and/or industrial negotiations in progress is incorporated in this report and would prejudice or disadvantage if made public at this time [Official Information Act 1982 s9(2)(j)] Prevent Improper Gain Information contained in this report could be used for improper gain or advantage if it is made public at this time [Official Information Act 1982 s9(2)(k)]	That the public conduct of the whole or the relevant part of the meeting would be likely to result in the disclosure of information which good reason for withholding would exist under any of sections 6, 7, or 9 (except section 9(2)(g)(i)) of the Official Information Act 1982 [NZPH&D Act 2000]
7.1 Human Resources Report	Commercial Activities Information contained in this report is related to commercial activities and Auckland DHB would be prejudiced or disadvantaged if that information was made public [Official Information Act 1982 s9(2)(i)] Negotiations Information relating to commercial and/or industrial negotiations in progress is incorporated in this report and would prejudice or disadvantage if made public at this time [Official Information Act 1982 s9(2)(j)]	That the public conduct of the whole or the relevant part of the meeting would be likely to result in the disclosure of information which good reason for withholding would exist under any of sections 6, 7, or 9 (except section 9(2)(g)(i)) of the Official Information Act 1982 [NZPH&D Act 2000]
8.1 Finance, Risk and Assurance Report	Commercial Activities Information contained in this report is related to commercial activities and Auckland DHB would be prejudiced or disadvantaged if that information was made public.	That the public conduct of the whole or the relevant part of the meeting would be likely to result in the disclosure of information which good reason for withholding would exist under any of sections 6, 7, or 9 (except section 9(2)(g)(i)) of the Official Information Act 1982 [NZPH&D Act 2000]
9.0 Decision Items – Nil	N/A	That the public conduct of the whole or the relevant part of the meeting would be likely to result in the disclosure of information which good reason for withholding would exist under any of sections 6, 7, or 9 (except section 9(2)(g)(i)) of the Official Information Act 1982 [NZPH&D Act 2000]

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10.0 Discussion Reports – Nil	N/A	That the public conduct of the whole or the relevant part of the meeting would be likely to result in the disclosure of information which good reason for withholding would exist under any of sections 6, 7, or 9 (except section 9(2)(g)(i)) of the Official Information Act 1982 [NZPH&D Act 2000]
11.1 Digital Workspace	Commercial Activities Information contained in this report is related to commercial activities and Auckland DHB would be prejudiced or disadvantaged if that information was made public [Official Information Act 1982 s9(2)(i)]	That the public conduct of the whole or the relevant part of the meeting would be likely to result in the disclosure of information which good reason for withholding would exist under any of sections 6, 7, or 9 (except section 9(2)(g)(i)) of the Official Information Act 1982 [NZPH&D Act 2000]
12.0 General Business	N/A	That the public conduct of the whole or the relevant part of the meeting would be likely to result in the disclosure of information which good reason for withholding would exist under any of sections 6, 7, or 9 (except section 9(2)(g)(i)) of the Official Information Act 1982 [NZPH&D Act 2000]