

CORPORATE OFFICE

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25 September 2018

[REDACTED]

[REDACTED]

[REDACTED]

RE Official information request CDHB 9924

We refer to your email dated 20 August 2018 requesting the following information under the Official Information Act from Canterbury DHB. We note that your request was clarified on 22 August 2018 as for information between 1 May 2018 and 20 August 2018:

Note: The Acute Services Building Project is a Ministry of Health led project.

1. Correspondence between the Canterbury District Health Board (CDHB) and the Christchurch Hospital Redevelopment Partnership Group (CHRP) about the completion of the acute services building, specifically a completion date or time frame.
2. Correspondence between the CDHB and the Ministry of Health about the completion of the acute services building?
3. Correspondence between the CDHB and the ministry about the impacts of delays to the acute services building?
4. Correspondence between the CDHB and the ministry about the size of the acute services building in context of CDHB's total population.

Please refer to **Appendix 1 (attached)** for correspondence between Canterbury DHB and the Ministry of Health (including HRP) between 1 May 2018 and 20 August 2018 as requested.

Please note, we have redacted information that is 'out of scope' of your request.

I trust that this satisfies your interest in this matter.

Please note that this response, or an edited version of this response, may be published on the Canterbury DHB website after your receipt of this response.

Yours sincerely

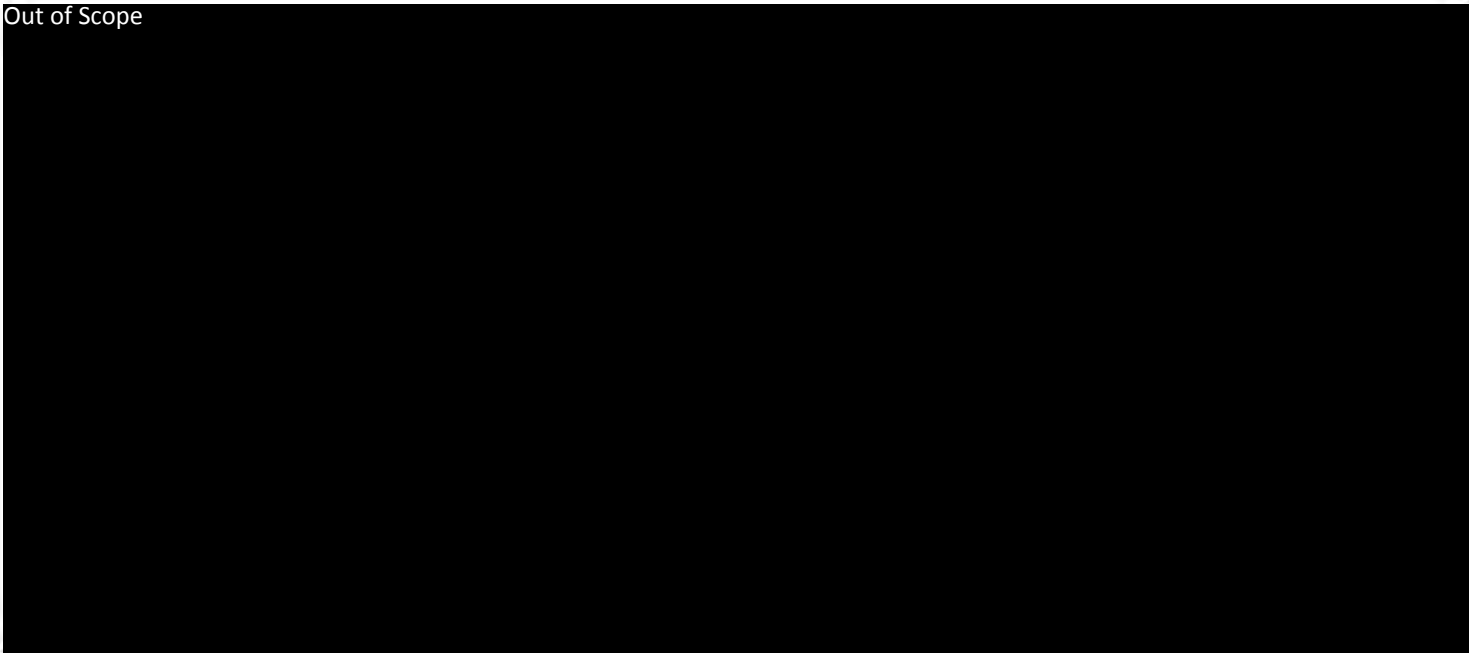


Carolyn Gullery
Executive Director
Planning, Funding & Decision Support

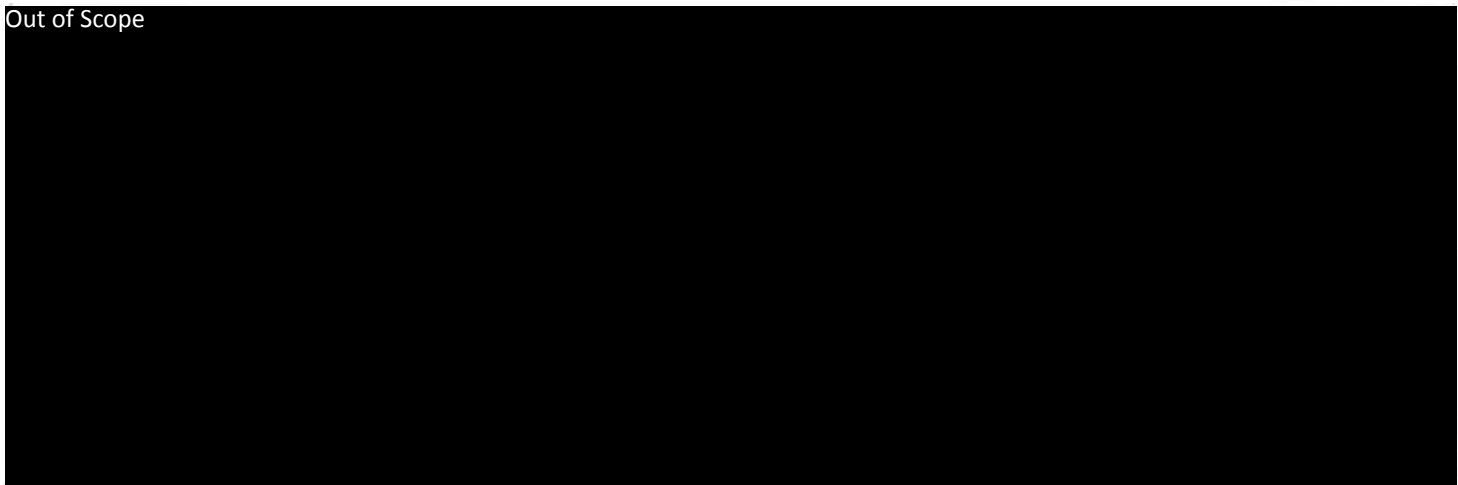
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Out of Scope



Out of Scope



-----Original Message-----

From: David Meates

Sent: Tuesday, 27 March 2018 3:54 PM

To: Michael_Hundleby@moh.govt.nz

Cc: Lionel Wood <blue-duck@xtra.co.nz>; Barry Bragg <barry@bclimited.co.nz>; Mark Solomon <ta.marksolomon@gmail.com>

Subject: CLG Letter to CEO re ASB March.pdf

Michael

Please see attached letter from the CDHB Clinical Leaders Group outlining their deep concerns regarding the persistence of errors and omissions being discovered in the ASB design documentation and the subsequent impacts of this on agreed design and scope.

As outlined in the letter, in the absence of remediation, it is likely that there will be a further consequential impact for the DHB when taking possession of the ASB with having to rectify errors at direct DHB cost, plus the likely impact on service functioning. In addition, users will need to be made aware of such issues once the building opens.

As highlighted by CLG, this letter doesn't deal with grave concerns around project completion dates as this is a matter of more than ASB, and CLG has yet to determine its approach to this.

It would be fair to say that the clinical and organisational concerns regarding the above issues and ongoing uncertainty and slippage of dates is creating major risks regarding people and service delivery.

Regards

David Meates, MNZM

Chief Executive | Canterbury District Health Board and West Coast District Health Board

T: 03 364 4110 (ext 62110) | E: david.meates@cdhb.health.nz P O Box 1600, Christchurch 8140 www.cdhb.health.nz
| www.westcoastdhd.org.nz

Values – Ā Mātou Uara

Care and respect for others - Manaaki me te whakaute i te tangata | Integrity in all we do - Hāpai i ā mātou mahi
katoa i runga i te pono | Responsibility for outcomes - Te Takohanga i ngā hua

-----Original Message-----

From: Rob Ojala

Sent: Tuesday, 27 March 2018 1:22 p.m.

To: David Meates <David.Meates@cdhb.health.nz>

Cc: Susan Fitzmaurice <Susan.Fitzmaurice@cdhb.health.nz>; Mary Gordon <Mary.Gordon@cdhb.health.nz>; Angela Mills <Angela.Mills@cdhb.health.nz>; Richard French (Anaesthesia SMO) <Richard.French@cdhb.health.nz>

Subject: CLG Letter to CEO re ASB March.pdf

David,

Please find attached a letter from CLG regarding ASB project concerns.

Please note this doesn't deal with grave concerns around project completion dates as this is a matter of more than ASB, and CLG has yet to determine its approach to this.

Rob Ojala

Chair CLG

Canterbury

District Health Board

Te Poari Hauora o Waitaha

23rd March 2017

David Meates
Chief Executive
Canterbury DHB

Dear David,

The Clinical Leaders Group is deeply concerned regarding the persistence of errors and omissions being discovered in the Acute Services building (ASB) design documentation. Further, the construction project team (TTT) have appeared to have changed their stance on the correction of these errors given the project's current financial and time constraints. Ultimately this is manifestly impacting on the degree with which the facility reflects the agreed design and scope.

As you will be aware there have been long-standing documentation issues with the ASB design process. The DHB team has identified numerous errors and omissions - despite repeated assurances by the ASB project team that this was superfluous and would be captured by the design team. These have been well discussed and documented previously and have resulted in significant delay to the design process. An independent audit of design documentation was intended to address these concerns and we were advised that it had identified them all.

Despite these assurances, we now find ourselves in a situation, long after documentation would have normally been completed, where new errors are being raised almost weekly. The DHB is in an increasingly pressured position to accept these errors because, it is alleged it is not cost effective at this time to correct them. As recently as this week TTT advised that they had been directed by we assume the MOH not address some errors that were previously agreed to correct.

Current issues that we are aware of include:

- Sanitisers drainage plumbed back to front (resulting in 100mm sewer outlets being narrowed to connect with 80mm pipes) significantly increasing the risk of sewage blockage: the project response was to seek CCC permission to excuse this error as permissible (also has equipment warranty implications)
- Omission of radiation shielding in one general X-ray room from the seismic plane upwards, which will impact on future functionality of this space when converted to a CT and will require DHB to install radiation shielding in this wall space.
- Medication fridges not fitting identified areas in medication rooms
- Walls where medication safes are to be hung have insufficient steel to support (unclear if this one is being addressed or not)
- TV mounts have been placed incorrectly in ceilings rather than back walls (despite clear and repeated documentation of this brief from 2015) – potential clash with hoists/curtains etc
- Room layouts in Interventional Radiology now have become very tight necessitating some further loss of space and potential compromise on room functionality
- Many doors not designed for the function intended – has required extensive DHB review of hundreds of doors, and only some have been corrected. Some rooms that are to be secure have had a hold-open added by the design team rendering them insecure (medication

rooms), some doors that were to be held open will not be able to and some doors have required moving to avoid the clash of open doors into trafficable corridors (unclear on resolution of the complete list, but will likely result in M&E having to do remedial works on occupation to many doors – removing or adding clips at a minimum if not more)

- Unclear resolution of some hoist mechanisms and locations (this may be resolved but unclear; we are advised to wait until occupation)
- Various change in plumbing locations requiring boxing out of space in toilets due to clash of services/infrastructure
- Missing brief regarding the nurse-call system feeding back to telephonist office for cardiac arrest calls in particular
- Omitting details that the Pneumatic Tube from ASB had to go all the way to Parkside and Labs

This list is not exhaustive. In addition it would seem given the current rate of error identification that more will follow – with an indeterminate response.

In the absence of remediation it is likely that there will be a further consequential impact for the DHB when taking possession of the ASB with having to rectify errors at direct DHB cost, plus the likely impact on service functioning. In addition, users will need to be made aware of such issues once the building opens.

Frankly CLG finds the situation completely unacceptable. There was an agreed approach, which involved considerable compromise on the part of the DHB, and now it seems the project for its part is failing to deliver on that agreement. We would assume that HRPG would hold the project management to that agreement, to date however this seems uncertain. We ask that you note these concerns, and that they are raised in appropriate forums so that impacts are clearly understood by relevant parties and decision-makers.

Yours sincerely,

The CDHB Clinical Leaders Group
Facilities Redevelopment



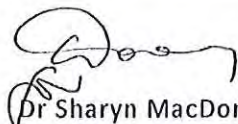
Dr Rob Ojala
Chair CLG
Clinical Lead
Facilities Redevelopment



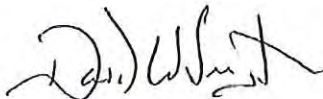
Dr Richard French
Vice Chair, CLG
CD Service Improvement



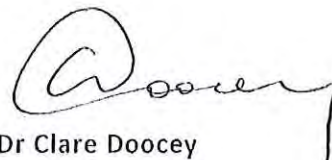
Nicky Topp
Nursing Director



Dr Sharyn MacDonald
Chief of Radiology



Dr David Smyth
Chief of Medicine



Dr Clare Doocey
Chief of Child Health



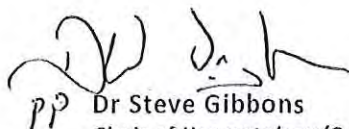
Dr Janet Whineray
Clinical Director, O&G



Dr Greg Robertson
Chief of Surgery



Heather Gray
DON, Christchurch Hospital Campus




Dr Steve Gibbons
Chair of Haematology/Oncology Cluster



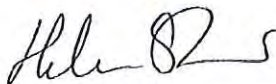
Sandy Clemett
~~Change-Champion~~ Allied Health
Director of



Diana Gunn
DON, Older Persons Health &
Burwood Hospital



Stu Bigwood
DON, Mental Health



Dr Helen Skinner
Chief of Older Persons Health
and rehabilitation



Dr Peri Renison
Chief of Psychiatry



Paul Tudor Kelly
Scientific/Technical Lead



Richard Scrase
DON, Older People, Population Health

1 Date

4th May 2018 - for period 26th March – 4th May 2018

2 Status Summary

Christchurch Hospital, Hagley (previously Christchurch ASB)

- Meeting with MOH and TTT in regards to remedying errors and omissions, working through the list in regards to what has been or will be rectified and which won't be and therefore for further discussion at HRPG. A number of these are likely to have operational and/or clinical impacts.
- Operational planning for the ASB continues with release of staffing proposals and active recruitment of some new staffing positions. Lack of move date concerning clinical teams and disrupting recruitment, operational preparedness/transition to new ways of working in the new building.
- Awaiting HRPG feedback regarding use of FFE contingency for surgical instruments
- Commissioning plans received and being reviewed

Christchurch Campus Health Facility Planning

- Inputs from CDHB for IBC all complete, awaiting feedback from HRPG.

Out of Scope

General

- Out of Scope [REDACTED]
- Migration dates – still awaiting advice from MOH/HRPG for Practical Completion dates for both builds that will inform migration move planning. Risk that Migration Manager will step down awaiting dates and then not be available when required.
- Out of Scope [REDACTED]
- Weekly Construction Interface (CIM) meeting regarding construction works on the Christchurch Hospital site working well at coordinating and managing a very busy site and surrounds. CHCH site is currently at its maximum work fronts requiring mitigations on a daily basis to keep the site accessible
- Out of Scope [REDACTED]
- Procurement – the following procurement status is outlined
 - **Purchase Orders complete** – Surgical Lights, Parent Beds, Medication Safe, Pendants, Medical Services Panels, Sanitisers, Refuse Bag holders, Network clocks. Procedure and Examination Lights, Boot Cleaners, Sterrad Steriliser, Diathermy/ Stack- Endo, Cryostat, Ice Machines, Commercial Dishwasher, Imaging Equipment (fixed equipment), Hi Lo Chairs, Linen Skips, CT Cone Beam, Bed Pan Racks OPD, Whiteboards/ Pin Boards OPD, AV Brackets ASB, Blade Flasks OPD, Modem Pack Prepaid ASB, Dental Chairs/ Shifters OPD, Group 2

Canterbury DHB Facilities Development Report

- Appliances ASB, Formalin Tank ASB, Shower Trolley ASB, Pendant Pressure Hoods ASB, Rimu Carvings, Drug Safe Modification, Phlebotomy Chair, Wall Sphygmomanometer, BMI Height Weight Scales, Sterile Services
- **Recommendation in sign off** – Physiological Monitors (Vital Signs)
- **RFP in signoff** – none
- **In Negotiation** – Hybrid, Physiological Monitors (Acute), Scopes and Towers, Hospital Storage and Compactus, Haemodynamic Monitoring
- **Trials being undertaken** – Beds trials begin April, Exam Couches 17th May
- **RFP/Evaluation in progress** – Medication Fridges, Patient Beds, Central Dosing, Drug Fridges, Dental Equipment, Exam Couches, Over-bed Tables and Lockers, Trolleys
- **Specifications being developed as part of an RFP** – Warmers, Reclining Chairs, Anaesthetic Machines, Ventilators, Dental Equipment, Diathermy Equipment, Operating Tables, Kiosks, IV Equipment, Lead Gowns, CPAP/ BIPAP Ventilators, Video Intubating Scopes
- **Existing contracts** – diagnostic sets, flowmeters, Ultrasounds,
- **Contract in signoff** – Office Furniture, Suction

- Successful Maia fundraising campaign for helipad reached above target amount

- **Out of Scope**

3 Current Requests for Change

Christchurch and Outpatients:

- Endorsements by CLG – Nil this period

4 Key Issues and Risks

Christchurch Hospital, Hagley:

- Concern about unresolved or new design errors/omissions, now advised that these will no longer be corrected due to time and financial status of project, working through with MOH to report to HRP.
- Note advice from experts to MOH that Energy centre programme will not affect commissioning of ASB
- Confirming migration dates based on practical completion and impact on DHB financial and operational aspects

Out of Scope

Christchurch Campus Health Planning:

- Scope of master planning process to inform whole campus needs ie. Labs and Oncology
- Anticipated delivery timeframes and impact on bed and theatre demand
- Impact of earthquakes on existing buildings and infrastructure and health planning options requiring extended use of these facilities
- A range of risk mitigation strategies for existing buildings have been undertaken in response to delays in other facility decisions

Out of Scope

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1 Date

11th June 2018 - for period 4th May – 11th June 2018

2 Status Summary

Christchurch Hospital, Hagley (previously Christchurch ASB)

- Request for corrections to some doors submitted in May 2017, declined in June 2018. CDHB currently reviewing impact of this and may bring for discussion at HRPG.
- Operational planning for Hagley has slowed due to delayed opening dates anticipated and has required revising the recruitment schedule that was well underway for a November 2018 completion.
- Temporary docks relocated and commencement of link construction to begin. Trenching for Hagley services in progress. Site is at capacity in terms of managing construction work fronts whilst maintaining access to the hospital.
- Awaiting HRPG feedback regarding use of FFE contingency for surgical instruments
- Commissioning – HV connections soon to be livened up, fortnightly visits to view plant and infrastructure install and identify issues (if any), currently reviewing plant room escape and equipment routes

Christchurch Campus Health Facility Planning

- CDHB responding to queries regarding the CHCH Campus IBC.

Out of Scope

General

Out of Scope

- Weekly Construction Interface (CIM) meeting regarding construction works on the Christchurch Hospital site working well at coordinating and managing a very busy site and surrounds. CHCH site is currently at its maximum work fronts requiring mitigations on a daily basis to keep the site accessible
- Out of Scope
- Procurement – the following procurement status is outlined
 - **Purchase Orders complete (or underway i.e. contract and procurement complete)** – Surgical Lights, Parent Beds, Medication Safe, Pendants, Medical Services Panels, Sanitisers, Refuse Bag holders, Network clocks.

Canterbury DHB Facilities Development Report

Procedure and Examination Lights, Boot Cleaners, Sterrad Steriliser, Diathermy/Stack- Endo, Cryostat, Ice Machines, Commercial Dishwasher, Imaging Equipment (fixed equipment), Hi Lo Chairs, Linen Skips, CT Cone Beam, Bed Pan Racks OPD, Whiteboards/ Pin Boards OPD, AV Brackets ASB, Blade Flasks OPD, Modem Pack Prepaid ASB, Dental Chairs/Shifters OPD, Group 2 Appliances ASB, Formalin Tank ASB, Shower Trolley ASB, Pendant Pressure Hoods ASB, Rimu Carvings, Drug Safe Modification, Phlebotomy Chair, Wall Sphygmomanometer, BMI Height Weight Scales, Sterile Services, Office Furniture, Suction

- **Recommendation in sign off** – Hybrid, Scopes and Towers
- **RFP in signoff** – Kiosks, Relocation Services
- **In Negotiation** – Physiological Monitors (Acute), Hospital Storage and Compactus, Haemodynamic Monitoring, Exam Couches
- **Trials being undertaken** – Beds being shortlisted further post Design Lab demonstrations, Central Dosing, Pumps and Syringe Drivers
- **RFP/Evaluation in progress** – Medication Fridges, Patient Beds, Drug Fridges, Dental Equipment, Over-bed Tables and Lockers, Trolleys
- **Specifications being developed as part of an RFP** – Warmers, Reclining Chairs, Anaesthetic Machines, Ventilators, Dental Equipment, Diathermy Equipment, Operating Tables, IV Equipment, Lead Gowns, CPAP/BIPAP Ventilators, Video Intubating Scopes, PACS Workstations
- **Existing contracts** – Diagnostic sets, flowmeters, Ultrasounds, Pumps and Syringe Drivers (if current trial is successful and approved)
- **Contract in signoff** – Physiological Monitors (Vital Signs)
- Successful Maia helipad campaign with \$1,090,263 raised in 6 weeks, another approximately \$300k had previously been raised for the helipad. Fundraising for Child Health going well with \$3.2m pledged or received.
- **Out of Scope**

3 Current Requests for Change

Christchurch and Outpatients:

- Endorsements by CLG – Nil this period

4 Key Issues and Risks

Christchurch Hospital, Hagley:

- Potential unresolved or new design errors/omissions
- Note advice from experts to MOH that Energy centre programme will not affect commissioning of ASB
- Confirming migration dates based on practical completion and impact on DHB financial and operational aspects

Out of Scope

Christchurch Campus Health Planning:

- Scope of master planning process to inform whole campus needs ie. Labs and Oncology
- Anticipated delivery timeframes and impact on bed and theatre demand
- Impact of earthquakes on existing buildings and infrastructure and health planning options requiring extended use of these facilities
- A range of risk mitigation strategies for existing buildings have been undertaken in response to delays in other facility decisions

Out of Scope

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1 Date

13th July 2018 - for period 11th June – 13th July 2018

2 Status Summary

Christchurch Hospital, Hagley (previously Christchurch ASB)

- Link construction commenced, asbestos discovered and some ongoing review of piling foundation design
- Major pieces of plant and equipment are now in place with only firefighting water storage yet to be installed. Commissioning of pipe and cable pressure testing underway along with labelling of new plant for asset registration. Prep work for steam main and Lamson tube connections within the Parkside basement underway.
- Operational planning for Hagley on hold due to uncertain dates, and focus on strike contingency planning. However business cases are on track for end of this year.
- Awaiting HRPB feedback regarding use of FFE contingency for surgical instruments

Christchurch Campus Health Facility Planning

- Awaiting feedback from CIC on IBC.

Out of Scope

General

- Out of Scope
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- Weekly Construction Interface (CIM) meeting regarding construction works on the Christchurch Hospital site working well at coordinating and managing a very busy site and surrounds. CHCH site is currently remains at maximum work fronts
- Out of Scope
- Procurement – the following procurement status is outlined
 - **Purchase Orders complete (or underway i.e. contract and procurement complete)** – Surgical Lights, Parent Beds, Medication Safe, Pendants, Medical Services Panels, Sanitisers, Refuse Bag holders, Network clocks. Procedure and Examination Lights, Boot Cleaners, Sterrad Steriliser, Diathermy/Stack- Endo, Cryostat, Ice Machines, Commercial Dishwasher, Imaging Equipment (fixed equipment), Hi Lo Chairs, Linen Skips, CT Cone Beam, Bed Pan Racks OPD, Whiteboards/ Pin Boards OPD, AV Brackets ASB, Blade Flasks OPD, Modem Pack Prepaid ASB, Dental Chairs/Shifters OPD, Group 2 Appliances ASB, Formalin Tank ASB, Shower Trolley ASB, Pendant Pressure Hoods ASB, Rimu Carvings, Drug Safe Modification, Phlebotomy Chair, Wall Sphygmomanometer, BMI Height Weight Scales, Sterile Services, Office Furniture, Suction, CPAP/ BiPAP Ventilators,
 - **Recommendation in sign off** – Hybrid,
 - **RFP in signoff** – Operating Tables

Canterbury DHB Facilities Development Report

- **In Negotiation** – Physiological Monitors (Acute), Hospital Storage and Compactus, Haemodynamic Monitoring, Drug Fridges, Rapid Infusers
- **Trials being undertaken** – Beds being shortlisted further post Design Lab demonstrations, Central Dosing, Pumps and Syringe Drivers,
- **RFP/Evaluation in progress** – Medication Fridges, Patient Beds, Dental Equipment, Over-bed Tables and Lockers, Trolleys, Relocation Services, Dental Equipment, Patient Kiosks, Theatre Music
- **Specifications being developed as part of an RFP** – Warmers, Reclining Chairs, Anaesthetic Machines, Ventilators, Diathermy Equipment, IV Equipment, Lead Gowns, Video Intubating Scopes, PACS Workstations
- **Existing contracts** – Diagnostic sets, flowmeters, Ultrasounds, Pumps and Syringe Drivers (if current trial is successful and approved)
- **Contract in signoff** – Physiological Monitors (Vital Signs), Exam Couches, Scopes & Towers
- **Specifications being developed as part of an RFP** – Warmers, Reclining Chairs, Anaesthetic Machines, Ventilators, Dental Equipment, Diathermy Equipment, Operating Tables, IV Equipment, Lead Gowns, CPAP/BIPAP Ventilators, Video Intubating Scopes, PACS Workstations
- **Existing contracts** – Diagnostic sets, flowmeters, Ultrasounds, Pumps and Syringe Drivers (if current trial is successful and approved)
- **Out of Scope**

3 Current Requests for Change

Christchurch and Outpatients:

- Endorsements by CLG – Nil this period

4 Key Issues and Risks

Christchurch Hospital, Hagley:

- Potential unresolved or new design errors/omissions
- Confirming migration dates based on practical completion and impact on DHB financial and operational aspects

Out of Scope

Christchurch Campus Health Planning:

- Scope of master planning process to inform whole campus needs ie. Labs and Oncology
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- A range of risk mitigation strategies for existing buildings have been undertaken in response to delays in other facility decisions

Out of Scope

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Out of Scope



-----Original Message-----

From: David Meates

Sent: Monday, 23 July 2018 8:35 AM

To: Ashley_Bloomfield@moh.govt.nz

Subject: FW: Emailing: CLG letter to Minister of Health re sustaining services WRT facilities 20-7-18

Ashley

Please find attached a letter fyi from our Clinical Leaders group that was sent to the Minister and cc'd to both John and I.

Regards

David Meates, MNZM

Chief Executive | Canterbury District Health Board and West Coast District Health Board

T: 03 364 4110 (ext 62110) | E: david.meates@cdhb.health.nz P O Box 1600, Christchurch 8140 www.cdhb.health.nz
| www.westcoastdhd.org.nz

Values – Ā Mātou Uara

Care and respect for others - Manaaki me te whakaute i te tangata | Integrity in all we do - Hāpai i ā mātou mahi katoa i runga i te pono | Responsibility for outcomes - Te Takohanga i ngā hua

-----Original Message-----

From: Rob Ojala

Sent: Saturday, 21 July 2018 2:18 p.m.

To: blue-duck@xtra.co.nz; David Meates <David.Meates@cdhb.health.nz>; Sue Nightingale <Sue.Nightingale@cdhb.health.nz>; Mary Gordon <Mary.Gordon@cdhb.health.nz>; Carolyn Gullery <Carolyn.Gullery@cdhb.health.nz>; Stella Ward <Stella.Ward@cdhb.health.nz>

Cc: Richard French (Anaesthesia SMO) <Richard.French@cdhb.health.nz>; Angela Mills <Angela.Mills@cdhb.health.nz>

Subject: FW: Emailing: CLG letter to Minister of Health re sustaining services WRT facilities 20-7-18

FYI

-----Original Message-----

From: Rob Ojala

Sent: Saturday, 21 July 2018 2:16 p.m.

To: 'david.clark@parliament.govt.nz'

Subject: Emailing: CLG letter to Minister of Health re sustaining services WRT facilities 20-7-18

Dear Minister

Please find appended an electronic version of a letter from the Clinical Leadership Group at CDHB - sent this way in the interests of urgency – with the original to follow by Mail.

Rob Ojala
Chair,
Clinical Leaders Group
CDHB

Canterbury

District Health Board

Te Poari Hauora o Waitaha

20th July 2018

The Honourable Dr David Clark
Minister of Health
Parliament Buildings
Wellington

Dear Minister,

We write to express our grave concern about the very real risk of service failure for the CDHB. This issue principally arises from an absence of clarity in MoH-led facility planning at Christchurch Hospital Campus and the consequential impacts on service planning.

As you will know, the campus houses NZ's second-largest tertiary hospital and still contains eight significantly damaged and earthquake-prone structures. Major earthquake-related repairs on site are largely on hold more than seven years after the quakes. They are still awaiting a MoH-led determination.

Clinical teams have gone to extraordinary lengths to ensure that health services have continued despite broken, increasingly non-compliant infrastructure, multiple moves of services and a highly disrupted physical environment. Close engagement of clinicians, management and the CDHB Board has been a very important contributor to successfully managing these immense challenges. However, Canterbury's ability to-date to sustain these services risks creating the impression that we can continue to deliver care as before. This is, unfortunately, highly unlikely.

The new Acute Services building (ASB) is well underway as a response to campus issues explicitly pre-dating the quakes. Originally targeted for 2016, delays have pushed this now to late 2019. Somewhat counter-intuitively this delayed completion, coupled with the residual campus damage and unprecedented population growth, means the ASB will provide almost no relief to both bed and theatre pressures.

A MoH-controlled Campus Masterplan to address these still-outstanding wider campus issues began in 2016. Notably this work explicitly excluded rapidly expanding oncology and laboratory services from any planning.

A key element of the planning project was the urgent development of a parallel IBC. The IBC was to address the best means of providing a solution to both quake remediation and projected growth in demand. This work was to be completed within five months.

However, over 2 years later, and despite agreed urgency, the IBC process continues without a clear endpoint. Multiple peer reviews from structural and clinical experts have told us little we have not already anticipated - and a further review has been mooted. Still we remain unable to progress all but critical remediation of existing facilities with the CDHB now catering for population demand not projected until 2022.

The timeframe for delivery of any new facilities associated with an IBC is over 6 years. Even with an accelerated process, facilities will now not be available until after 2024. Further, a piecemeal approach would force uneconomic and clinically inappropriate solutions on existing facilities.

This delay places considerable obstacles to sustaining clinical care, while the lack of certainty makes it almost impossible for clinical teams to improve health services and plan for future growth. Staff recruitment and retention are being compromised, and markers of staff wellbeing including mental health have shown considerable recent deterioration.

We believe it is important that you as Minister of Health understand that any further delay and continued lack of urgency from MoH will lead to significant service failure. It should be a considerable cause for concern that a nationally and internationally recognised DHB, leading in models of care that commit to reducing hospital attendance, is anticipating such service failure at its flagship campus. Further, our population growth and quake-related constraints mean that we are not just running to stand still, we are beginning to go backwards.

Service failure at the Christchurch campus will be felt on a national level:

- We are the largest provider of acute surgical operations nationally.
- We are the largest centre for trauma care in New Zealand.
- We are one of two centres for critical spinal surgery.
- We are a key provider of national oncological services, including providing child haematology and oncology and gynaecological oncology for all regions south of Taupo.
- The Christchurch campus is a major receiving facility for inter-regional flows including the West Coast and Chatham Islands and lower half North Island and South Island.
- There is little capacity left for additional outsourcing.

We therefore request your urgent intervention to progress the completion of the MoH-led master-planning and consequent IBC of Christchurch Hospital campus.

Yours faithfully,

CDHB Clinical Leaders Group.



Dr Rob Ojala
Chair CLG
Clinical Lead
Facilities Redevelopment



Dr Richard French
Vice Chair, CLG, Clinical Lead &
CD Service Improvement



Dr Helen Skinner
Chief of Older Persons Health
and rehabilitation



Dr Sharyn MacDonald
Chief of Radiology



Dr David Smyth
Chief of Medicine



Dr Clare Doocey
Chief of Child Health



Dr Greg Robertson
Chief of Surgery



Dr David Gibbs
Chair of Haematology/Oncology
Cluster




Heather Gray
DON, Christchurch Hospital
Campus



Stu Bigwood
DON, Mental Health



Sandy Clemett
Director of Allied Health Mental
Health



Diana Gunn
DON, Older Persons Health &
Burwood Hospital



Dr Peter Renison
Chief of Psychiatry



Nicky Topp
Nursing Director



Paul Tudor Kelly
Scientific/Technical Lead



Richard Scrase
DON, Older People, Population
Health



Angela Mills
Programme Manager
CDHB Facilities

1 Date

3rd August 2018 - for period 13th July – 3rd August 2018

2 Status Summary

Christchurch Hospital, Hagley (previously Christchurch ASB)

- Link construction commenced foundation design issues resolved. ED retaining wall works due to commence 13th August. CDHB feedback on Riccarton Road changes.
- Outstanding external wayfinding items being worked through.
- Pressure testing of cabling and pipework continues, an additional live electrical feed has been installed to the plant rooms to start up the fans and pump motors. Currently working through the functional description and interfaces for the mechanical and electrical systems and Building Management System (BMS). Emphasis at the moment is still on installation although the contractor now moving to engaging resources for commissioning. Working through some difficulties with future plant and equipment access for maintenance purposes
- Awaiting HRPG feedback regarding use of FFE contingency for surgical instruments

Christchurch Campus Health Facility Planning

- Awaiting feedback from CIC on IBC.

Out of Scope

General

- Migration – Planning for Hagley (ASB) on hold due to delayed dates, OPD in progress
- Out of Scope
- Weekly Construction Interface (CIM) meeting regarding construction works on the Christchurch Hospital site working well at coordinating and managing a very busy site and surrounds. CHCH site is currently remains at maximum work fronts
- ICT planning - ASB wireless design close to resolution in current form, the Contractor has created a design which addresses immediate concerns and which we believe will be acceptable. This is likely to require further adjustment as result of post installation testing. Wireless Access Points have been ordered. OPD Floor plan mark ups complete gaps identified on PCs and phones. AV for meeting room

Canterbury DHB Facilities Development Report

requirements reviewed, and updated to eliminate post completion modification for power and data. Wireless testing in progress. Looking good so far, but some further adjustment is likely. Balance of network switches (43) now ordered.

- Procurement – the following procurement status for ASB, OPD and Grey is outlined
 - **Purchase Orders complete (or underway i.e. contract and procurement complete)** – Surgical Lights, Parent Beds, Medication Safe, Pendants, Medical Services Panels, Sanitisers, Refuse Bag holders, Network clocks. Procedure and Examination Lights, Boot Cleaners, Sterrad Steriliser, Diathermy/Stack- Endo, Cryostat, Ice Machines, Commercial Dishwasher, Imaging Equipment (fixed equipment), Hi Lo Chairs, Linen Skips, CT Cone Beam, Bed Pan Racks OPD, Whiteboards/ Pin Boards OPD, AV Brackets ASB, Blade Flasks OPD, Modem Pack Prepaid ASB, Dental Chairs/Shifters OPD, Group 2 Appliances ASB, Formalin Tank ASB, Shower Trolley ASB, Pendant Pressure Hoods ASB, Rimu Carvings, Drug Safe Modification, Phlebotomy Chair, Wall Sphygmomanometer, BMI Height Weight Scales, Sterile Services, Office Furniture, Suction, CPAP/ BiPAP Ventilators, Low Acuity Physiological Monitors, OPD Dental Equipment, OPD Tanzanite tilt table;
 - **Recommendation in sign off** – Hybrid, Pharmacy Grade Refrigerators/ Freezers, Shelving, OPD Trolleys (exemption)
 - **RFP in signoff** – Operating Tables
 - **In Negotiation** – Physiological Monitors (Acute), Hospital Storage and Compactus, Rapid Infusers, Central Dosing
 - **Trials being undertaken** – Beds being shortlisted further post Design Lab demonstrations, Pumps and Syringe Drivers, ASB Trolleys
 - **RFP/Evaluation in progress** – Medication Fridges, Patient Beds, Over-bed Tables and Lockers, Relocation Services, Patient Kiosks, Theatre Music, Lead Gowns, Dental Accessories (RFP now RFQ),
 - **Specifications being developed as part of an RFP** – Warmers, Reclining Chairs, Anaesthetic Machines, Ventilators, Diathermy Equipment, IV Equipment, PACS Workstations, Surgical Instruments,
 - **Existing contracts** – Diagnostic sets, flowmeters, Ultrasounds, Pumps and Syringe Drivers (if current trial is successful and approved), Video Intubating Scopes
 - **Contract in signoff** – Physiological Monitors (Vital Signs), Exam Couches (already ordered for OPD), Scopes & Towers, Haemodynamic Monitoring (direct source),
 - **On Hold**- Microscopes
- Out of Scope

3 Current Requests for Change

Christchurch and Outpatients:

- Endorsements by CLG – Nil this period

4 Key Issues and Risks

Christchurch Hospital, Hagley:

- Potential unresolved or new design errors/omissions
- Confirming migration dates based on practical completion and impact on DHB financial and operational aspects

Out of Scope

Christchurch Campus Health Planning:


- Scope of master planning process to inform whole campus needs ie. Labs and Oncology
- Anticipated delivery timeframes and impact on bed and theatre demand
- Impact of earthquakes on existing buildings and infrastructure and health planning options requiring extended use of these facilities
- A range of risk mitigation strategies for existing buildings have been undertaken in response to delays in other facility decisions


Out of Scope

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Out of Scope



From: Catherine Graham <Catherine.Graham@parliament.govt.nz>
Date: 16 August 2018 at 5:11:05 PM NZST
To: "Rob.Ojala@cdhb.health.nz" <Rob.Ojala@cdhb.health.nz>
Cc:  "david.meates@cdhb.govt.nz" <david.meates@cdhb.govt.nz>
Subject: Letter from Hon Dr David Clark (C1801970)

Kia ora

Please find attached a letter to you from Hon Dr David Clark, Minister of Health.

Ngā mihi,

Catherine Graham
Private Secretary- Correspondence
Office of Hon Dr David Clark Minister of Health, Associate Minister of Finance
Parliament Buildings
Wellington

Hon Dr David Clark

MP for Dunedin North

Minister of Health

Associate Minister of Finance



16 AUG 2018

Clinical Leaders Group
Canterbury District Health Board
c/o rob.ojala@cdhb.health.nz

Ref. C1801970

Dear Canterbury DHB Clinical Leaders

In response to your letter of 20 July 2018 about service delivery challenges at Canterbury DHB, I would firstly like to acknowledge the effort you and your clinical teams have invested in ensuring continuity in the delivery of health services to Canterbury residents. Your great work in continuing to provide high quality services under challenging and complex circumstances is greatly appreciated.

There have been several meetings in the past few months between the Ministry of Health and Canterbury DHB to discuss working together to address future challenges facing the health and wellbeing of the population of Canterbury - and how to meet them. I understand that at the most recent meeting, progress with planning for the Christchurch campus was discussed.

As a result of recent engagements I have improved confidence in the relationship between the Ministry of Health and Canterbury DHB, and the ability for both organisations to work together in finding solutions to operational issues facing Canterbury DHB. As part of this, I understand that every effort is being made to work together on the way forward for the Christchurch campus. I agree that Canterbury DHB requires certainty in order to properly prepare for future demands.

It is my expectation that Ministry of Health clinical and other staff are available to support Canterbury DHB to assist with service provision challenges. The Chief Medical Officer, Dr Andrew Simpson, is your point of contact regarding specific clinical issues. He can be reached by email (andrew_simpson@moh.govt.nz).

I note the seriousness of your concerns and your call for urgency. I can assure you I will be following this matter closely.

Yours sincerely

Hon Dr David Clark
Minister of Health

cc Dr John Wood
Chairperson, Canterbury District Health Board

David Meates
Chief Executive, Canterbury District Health Board