EXECUTIVE STEERING GROUP

Minutes

	Tuesda				
Time	10:30a	m to 1:30pm			
ocatio.	n NDH P 9(2)(g)	MO Boardroom - I (ii)	Dunedin		
nvitees	Evan D Dr Mar Dr Ton Dr Nick Dean F Ex offi Helen Hamish Heath Observ Pete H Warner Secret	vavies (Chair) garet Wilsher y Lanigan Baker Fraser cio Telford (SRO, Hea h Brown (Interim S NZ) vers odgson (Chair, Lo Peel (Analyst – H ariat	alth NZ) southern District Director, cal Advisory Group) fealth, The Treasury) pordinator, Health NZ)	Tony Lloyd (NDH P Bridget Dickson (Pr Health NZ) Sheila Barnett (Cha District, Health NZ) Neil O'Donnell (Dire Matt Allen (Director, Marcus Read (Direc Darryl Haines (War	ector, RLB) , RCP) – <i>Item 4</i> ctor, RCP) – <i>item 4</i> ren and Mahoney) – <i>item 4</i> /arren and Mahoney) – <i>item 4</i>
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Te Whatu Ora

			next meeting.		 A revised project team structure continues to be worked through with Helen Telford and Monique Fouwler
ESG	G-160222-03	iHNZ/HNZ Transition	John Hazeldine, Acting DDG Infrastructure, to invite the new HNZ leadership to a future ESG meeting to discuss future governance arrangements.	Monique F	 Open Monique advised Rob Campbell suggested he and members of the subcommittee could come to Dunedin to meet the team. Logistics to be investigated to align visit with an ESG meeting.
ESG	G-160222-05	Site Wide Mana Whenua Design	NDH Design Team to provide advice on how mana whenua requirements are being integrated into the design of the hospital (in conjunction with the ESD workshop to be scheduled with ESG).	Tony L	Open • Deferred until design reset complete.
ESG	G-130622-02	Digital Budget Comparison	The Chair of the ESG would like a report from RLB comparing the cost difference between the current budget for digital in the NDH project and proposed Digital Programme budget of the Detailed Digital Business Case.	Neil O'Donnell	 Open Still being worked through by Neil O'Donnell and Tony Lloyd Discussed that there would be benefit if the workstreams were connected as what is currently proposed for digital is not clear to Neil or the infrastructure workstream team.
ESC	G-080722-01	Health, Safety, and Environment	Robert Rust to provide a different HSE report template for the project team to complete and present	Robert Rust	 Feedback and examples were provided by Robert Rust to project team.
	INZ Transit • The • The	Gateway Action Pla	on and Gateway were discussed an tracker was taken as read, an		erview of Open Action Points. ed moving forward the Gateway update
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Programme Director Update

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Received an update from Tony Lloyd, key points to note include:

- The four major focuses since the last meeting were progressing the redesign of the Inpatient Building, closing
 out steel, finalising the reviews of façade offers, and continuation of piling at the Outpatient Building site.
- Discussions are on-going for façade procurement, with the tech review for the alternative company's submission expected by 12th August.
- There was a delay in the arrival of the repaired 14T hammer. The 12T has driven the piles to a certain depth, with the 14T hammer expected to arrive 10th August to be used to drive the piles the rest of the way in.

Inpatient Building Update:

- The RCP Inpatient Building status report was taken as read, key points from discussion:
 - **NOTED** that to reduce programme impact some design activities are occurring in parallel by utilising existing resources, rather than standing them down.
 - DISCUSSED recent changes in the market have enabled the ability to mitigate time impacts by designing and building in parallel. This is due to fees being more known and the increased likelihood of receiving fixed price lump sums. Noting, however, that there are still some unknowns.
 - **NOTED** modulisation is being investigated, which could increase cost savings and reduce clinical impacts.
 - NOTED RLB recently attended a CPB meeting where they talked with the contractors individually, allowing them to discuss their processes and understand where current confusion in issued instructions was occurring.
 9(2)
 - NOTED changes in sub-trade pricing. Plumbing and Data has reduced, while Mechanical is (i) over, and changes to Electrical are currently unknown due to lack of information.
 - NOTED Evan Davies and Tony Lloyd met with the consultant companies leads in Auckland last week.

Outpatient Building Update:

The RCP Outpatient Building status report was taken as read.

Health & Safety & Environment:

- The Health, Safety, and Environment update was taken as read, key points from discussion:
 - NOTED there were no Health, Safety, and Environment issues to report in current reporting period, possibly due to decrease in activity waiting for 14T hammer.
 - NOTED the sample report from the Christchurch project was provided in the paper pack as an example
 of possible alternative Health and Safety reporting for the project.
 - NOTED comments from Robert Rust, via Evan Davies, that he prefers the Christchurch project example and would like to see a version customised to the New Dunedin Hospital project.
 - DISCUSSED the need for reporting to be consistent across the Infrastructure and Investment Group's 107 projects, while also providing more detail about trends.
 - Tony Lloyd advised moving forward that both reports will be provided for ESG meetings.

DISCUSSED that even though Health and Safety legislation does not include mental wellbeing as a reporting requirement, there is interest in seeing reporting on the mental wellbeing of workers.

Marcus Read, Darryl Haines, Trevor Boustead, and Ron Hicks joined the meeting at 11:30

Value Management:

0

Received a presentation from Marcus Read, Darryl Haines, Trevor Boustead, and Ron Hicks which outlined in terms of the Value Management:

- The focus areas and work occurring since the July ESG meeting.
- An overview and comparison of the current value management options and the reduced structural design options.
 - Option 1: Current Design
 - o Option 3: Additional Clinical Optimisation
 - Option 4: Building Services Optimisation

- The current site plan vs the site plan for option 3 and option 4.
- Plans of each floor for option 4.
- A site cross section for options 3 and 4.

The Chair opened the floor for wider discussion. Key points to note include:

- NOTED to reduce space the heat pumps have been moved to the roof, and to reduce noise most are located on the Bow Lane side.
- **DISCUSSED** that there is a limited number of places for the generators to be located. The proposed location for the generators, in the northern corner, would be inexpensive as the cabling can be run under the road.
- **NOTED** that option 4 provides a possible cost saving of \$90-\$100m. The exact number is not yet known as there have been minor changes to the option 4 design since the last cost review, which requires the numbers to be run again, as well as some design decisions still needing agreement from the Southern District.
- DISCUSSED that even with a reduced pathology in option 4, a full pathology unit would still need to be located elsewhere, off site, and would likely not be funded by Te Whatu Ora.
- **NOTED** that discussions are on-going around whether a small area for mental health/dementia will be part of the design or if these services will solely be based out in the community.
- **NOTED** the concerns around potential risks relating to reduced services, beds, and workspace when compared to the previous accepted design.
- **NOTED** that if there is a definable reduction in services it should be clearly reported so that those who must make the final decision are fully informed. If the final option is not consistent with the design outlined in the Detailed Business Case, then the ESG cannot approve it and the decision will then need to be pushed up to Cabinet.
- **NOTED** to reduce the impact on the construction programme the review of the current value management options needed to happen quickly, with a detailed report presented to the ESG near the end of the process.
- **NOTED** Dr Nick Baker and Dr Margaret Wilsher should be involved in the review of the value management options to provide an external clinical view.
- **DISCUSSED** the need to work in parallel with mana whenua around the Māori models of care. Marcus Read advised he will discuss the value management options with Justine Camp.
- DISCUSSED who should lead the communication phase to liaise with the Southern District teams about the decisions and what the messaging should be. Helen Telford advised she would step into the role and facilitate meetings locally.

Next Steps:

- Facilitate review meetings with the Southern District teams as well as Dr Nick Baker and Dr Margaret Wilsher.
- Provide a detailed report back to ESG.

The Executive Steering Group members:

• NOTED the updates on progress.

Marcus Read, Darryl Haines, Trevor Boustead, and Ron Hicks left the meeting at 12:35

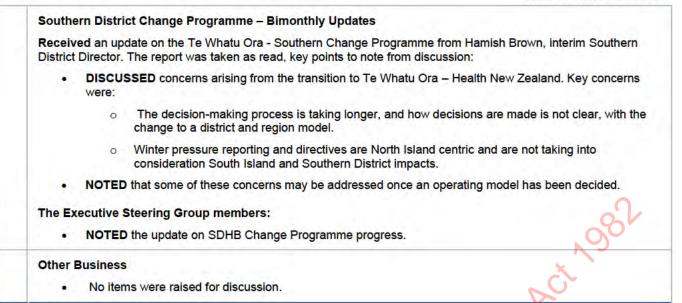
5 Financial Report

The report was taken as read, key points from discussion:

- Key focus for current reporting period was on scheduling, measuring, and pricing for subcontractor tenders, with the first trades for the Outpatient Building now out to market.
- S9(2)(b)(ii)
- RLB continue to monitor forecasts, with no significant change being seen this period. Concerns about the changes in exchange rates and difference in risk profile between current pricing and pricing next year remain.

The Executive Steering Group members:

• **NOTED** the financial report update.



The meeting closed at 01:23

Released under the Official Information



Closed Action Points

REF	ITEM	FIRST RAISED	STATUS	ACTION REQUIRED	RESPONSIBLE	ACTION BY	DUE BY	PRIORITY	UPDATE/STATUS	ACTION BY	
											CLOSED
ESG 080722 - 01	Health, Safety and Enviroment Report	8/07/2022	In progress	Robert Rust to provide a different HSE report template for the project team to complete and present alongside the current HSE report at the next meeting.	ESG	Robert Rust	9/08/2022	Normal	Feedback and examples were provided by Robert Rust to project team.		9/08/2022
Open /	Action Points	5						PC			

Open Action Points

REF	ІТЕМ	FIRST RAISED	STATUS	ACTION REQUIRED	RESPONSIBLE	ACTION BY	DUE BY	PRIORITY	UPDATE/STATUS	ACTION BY
ESG-100321-06	Delegation of Authority	10/03/2021	In progress	Revised arrangements for DoA are currently being worked through with the new SRO and will be reported back on to ESG.	мон	Monique F	8/07/2022 TBC	Normal	09/08/22 - Currently on hold pending the outcome/s of the operational model working group. - There is work being undertaken for governance of MHIP and RHRP that could influence NDH.	Monique F
ESG-060421-09	ESD Workshop	6/04/2021	In progress	Schedule a sustainability session to ensure the building is appropriate as possible and meeting government standards.	мон	Tony LL / Marcus Read (RCP)	11/06/2021 09/11/2021 TBC	Normal	Workshop deferred until design reset complete.	Tony LL / Marcus Read (RCP)
ESG-110521-06	Resourcing	11/05/2021	In progress	Requested to receive a project team resource structure for the next meeting.	мон	Tony LL	11/06/2021 10/09/2021 TBC	Normal	A revised project team structure continues to be worked through with Helen Telford and Monique Fouwler	Tony LL
ESG-160222-03	iHNZ/HNZ Transition	16/02/2022	In progress	John Hazeldine, Acting DDG Infrastructure, to invite the new HNZ leadership to a future ESG meeting to discuss future governance arrangements.	мон	Monique F	твс	Normal	09/08/22 - Monique advised Rob Campbell suggested he and members of the subcommittee could come to Dunedin to meet the team. - Logistics to be investigated to align visit with an ESG meeting.	Monique F
ESG-160222-05	Site Wide Mana Whenua Design	16/02/2022	In progress	NDH Design Team to provide advice on how mana whenua requirements are being integrated into the design of the hospital (in conjunction with the ESD workshop to be scheduled with ESG).	мон	Tony LL	20/04/2022 - TBC	Normal	Deferred until design reset complete.	Tony LL
ESG-130622-02	Digital Budget Comparison	13/06/2022	In progress	The Chair of the ESG would like a report from RLB comparing the cost difference between the current budget for digital in the NDH project and proposed Digital Programme budget of the Detailed Digital Business Case.	RLB	Neil O'Donnell	TBC	Normal	09/08/22 - Still being worked through by Neil O'Donnell and Tony Lloyd - Discussed that there would be benefit if the workstreams were connected as what is currently proposed for digital is not clear to Neil or the infrastructure workstream team.	Tony LL / Neil O'Donnell
		Rel	2050							

EXECUTIVE STEERING GROUP

Minutes

Date	Friday,	9 September 20	22						
Time	10:30a	m to 1:30pm							
Location	NDH P 9(2)(g)	MO Boardroom - (ii)	Dunedin						
Invitees	Member Evan D Dr Marg Dr Nick Robert Ex offic Helen T Hamish Heath N Observ Blake L Commis John H Manage Health) Pete Ho Warner	ers avies (Chair) garet Wilsher Baker Rust cio Felford (SRO, He Brown (Interim NZ) vers epper (Te Waiha ssion) azeldine (Chief A er - Health Infras odgson (Chair, L Peel (Analyst – ariat	ealth NZ) Southern District Director, anga, Infrastructure Advisor and Group tructure, Ministry of ocal Advisory Group) Health, The Treasury)	Attendees Monique Fouwler (Acting Director Delivery, IIG, Health NZ Tony Lloyd (NDH Programme Director, Health NZ) Bridget Dickson (Programme Director, Southern District, Health NZ) Sheila Barnett (Chair Clinical Leadership Group, Southern District, Health NZ) Neil O'Donnell (Director, RLB) Peter Bramley (Interim Regional Director - Te Wai Pounan Heath NZ) Matt Allen (Director, RCP) – <i>Item 4</i> Marcus Read (Director, RCP) – <i>Item 4</i> Kris Thomas (RCP) – <i>Item 4</i> Richard Wager (Beca) – <i>item 4</i> Joe Mihaljevic (HDR) – <i>item 4</i> Karen Curtis (HDR) – <i>item 4</i> Jenny Fisher (Holmes Consulting) – <i>item 4</i> Trevor Boustead (Warren and Mahoney) – <i>item 4</i> Bill Gregory (Warren and Mahoney) – <i>item 4</i> Paul Tonkin (Woods Harris) – <i>item 4</i>					
Ton Regi The Augu The ACC	y Lanigar ister of Ir Register ust 2022 Executiv EPTED t	Minutes e Steering Grou he 9 August 202	er were noted as apologies noted, and no new declarat up: 2 minutes as a true and ac Action Points from Tony Li	tions were required	d.				
	REF	ITEM	ACTION REQUI	RED RESPONSIE					
ESG-1	00321-06	Delegation of Authority	Revised arrangements for D currently being worked thro with the new SRO and will b reported back to ESG.	oA are Monique ugh					

Te Whatu Ora

Health New Zealand

ESG-060421-09	ESD Workshop	Schedule a sustainability session to ensure the building is appropriate as possible and meeting government standards.	Tony L / Marcus Read (RCP)	On Hold
ESG-110521-06	Resourcing	Requested to receive a project team resource structure for the next meeting.	Tony L	 Closed The revised project team resource structure has been identified and presented to the project team and main consultants on 31st August. The expectations, roles, and responsibilities were clearly articulated. The project structure has been split with Jim Coard as Project Director of Inpatien Building, Andrew Holmes as Project Director of Outpatient Building, and Kieran Reilly as Project Manager of the Dairy Building/Other. The roles of Design Director and Construction Director have been removed. Monique Fouwler noted that she is working with Tony Lloyd to make sure employees get pastural care. A copy of the project team resource structure will be circulated to the ESG.
ESG-160222-03	iHNZ/HNZ Transition	John Hazeldine, Acting DDG Infrastructure, to invite the new HNZ leadership to a future ESG meeting to discuss future governance arrangements.	Monique F	On Hold The Capital and Infrastructure Committee are awaiting the outcome of the Operating Model workstream.
ESG-160222-05	Site Wide Mana Whenua Design	NDH Design Team to provide advice on how mana whenua requirements are being integrated into the design of the hospital (in conjunction with the ESD workshop to be scheduled with ESG).	Tony L	 Closed Agreed to close action point and it will be addressed and presented as part of redesign. NOTED comments that the design team and Aukaha have been in communication during re-design in consultation with the Māori Models of Care. Evan Davies commented that when working with the Māori Models of Care that care is taken to ensure any parallel processes are progressing at the same time.
ESG-130622-02	Digital Budget Comparison	The Chair of the ESG would like a report from RLB comparing the cost difference between the current budget for digital in the NDH project and proposed Digital Programme budget of the Detailed Digital Business Case.	Tony Lloyd /Neil O'Donnell	 Open Continues to be a work in progress. Tony Lloyd will connect with Bridget Dickson and the Digital team. DISCUSSED the potential for future governance issues if the two projects an not aligned and the need for digital representation at the meetings.

HNZ Transition - Update

2

- NOTED work on the Operating Model remains in progress, key points include:
 - A report back to the Cabinet Priorities Committee will occur alongside the Capital Settings paper. 0
 - Stakeholder engagement is ongoing with feedback on what the model needs to consider, received 0 Thursday 8th September and further feedback on the domains due in the next two weeks.
 - The report is being written by Monique Fouwler, Aaron Matthews, and Ernst Young. 0
 - Expected to be completed and a roadmap produced by October. 0

Te Whatu Ora

 The Chair thanked Monique Fouwler for the update and noted that once construction of the Outpatient Building is in train there needs to be robust systems in place to allow for quick decision making and approvals. Monique Fouwler acknowledged these comments.

The Executive Steering Group members:

NOTED the updates on progress.

3 SRO Update

- Helen Telford advised strategies for internal and external project communication are being reviewed and feedback will be provided at the next meeting.
- The Chair noted that the Executive Steering Group can express a view but do not have a public role nor will make public comments. There needs to be a local spokesperson for the project.
- Pete Hodgson noted that the communication strategy is reviewed every two years but never acted on and that the project has lost the relationship with the media.
- Peter Bramley advised the project needs to be proactive with communications to provide assurance and clarity for the community.

The Executive Steering Group members:

• **NOTED** the discussion.

4 Programme Director Update

Outpatient Building Update:

- Construction Contract:
 - 9(2)(i)
 - o Critical path has been hit with the current proposed programme shifting 6-months to November 2025.

formation

- Façade procurement:
 - NOTED a paper was circulated to the Executive Steering Group prior to the meeting requesting endorsement for Southbase Construction to engage SRG Global as their Outpatient Building façade contractor.
 - o **DISCUSSED** the timeline of facade procurement leading to current discussions and endorsement.
 - DISCUSSED potential issues that could arise from unsuccessful tenderers once façade contract award is made public.
 - **NOTED** Health Legal and the Infrastructure and the Investment Group Commercial, Construction and Procurement team have reviewed and advised the façade RFP process was undertaken correctly.
 - The Executive Steering Group endorsed Southbase Construction to engage SRG Global as their façade contractor for the Outpatient Building.
- **NOTED** piling is currently behind programme but is not near critical path. The issue with the hammer has been resolved which has allowed piling work to increase over the previous weeks.
- **NOTED** the residual design issues have been resolved for Outpatient Detailed Design and the report will be ready to present to Executive Steering Group by the next meeting.
- **NOTED** the latest fast-track consents have been approved without objections.
- DISCUSSED how the project is currently tracking against the programme. The Chair commented that we are
 now at a point where stakes can be put in the ground for programme and expectations can be made. There is
 an expectation the Outpatient Building needs to be operating before December 25th, 2025.

Health & Safety & Environment:

- The Health, Safety, and Environment update was taken as read, key points from discussion:
 - **NOTED** there were three Health and Safety events in current reporting period. Two related to piling and one related to procedure.
 - DISCUSSED whether the Executive Steering Group should be concerned that there are unsafe practices occurring on site. Matt Allen advised that RCP and Andrew Holmes do not have concerns that this is happening. The Chair requested the piling incidents to be investigated fully and a report provided at the next Executive Steering Group.

 NOTED work is on-going to improve the Health and Safety reporting and to ensure the two reports do not conflict with each other. Benchmarking data is still being worked on.

Marcus Read, Kris Thomas, Darryl Haines, Trevor Boustead, Bill Gregory, Paul Tonkin, Richard Wager, Jenny Fisher, Joe Mihaljevic, and Karen Curtis joined the meeting at 11:35am

Inpatient Building Update:

- The RCP Inpatient Building status report was taken as read.
- The 'Value Management Report and Recommendation' paper was taken as read, key points from discussion:
 - Tony Lloyd thanked the Southern District team, Nick Baker, and Margaret Wilsher for their involvement in the value management process/review.
 - Tony Lloyd provided an overview of the changes in option 4.3, noting the removal of the Mental Health Services of Older People IPU has been removed and the redistribution of collaborative space due to the removal of the Pavilion.
 - **NOTED** the Executive Steering Group cannot approve a redesign, it can only make recommendations.
 - **NOTED** comments from the Te Whatu Ora Southern team:
 - Hamish Brown noted this is a difficult decision to make due to papers being provided 36 hours prior to the meeting and it appears the \$90m savings have been achieved by moving items to other budget lines. Due to the amount of risk to programme he is not in a position where he can recommend this option to the Capital and Infrastructure Committee.
 - Shelia Barnett acknowledged the design team have done the best job they can with the least amount of impact, but the clinical risks are too large and unacceptable.
 - Bridget Dickson added that the non-quantifiable risk is the stakeholders.
 - Pete Hodgson noted the bed reduction is unacceptable and that the option is silent on operational expenditure savings.
 - DISUCUSSED that reductions for the Mental Health Services of Older People IPU were offered up by Te Whatu Ora Southern but not the full deletion of the IPU from the building.
 - DISUCSSED the potential costs for Dairy Building to be fitted out. Current estimate from CPB is
 9(2)(i) for fit out as an office space. Further discussion occurred around moving the kitchen to the Dairy Building to free up space for a reduced Mental Health Services of Older People IPU.
 - **DISCUSSED** releasing contingency to retain some clinical services and beds.
 - DISCUSSED the risks involved with going back to concept design. Robert Rust commented that similar conversations are being had in Australia on multiple projects; it can be done but there is risk.
 - The Chair noted that given the task set by Joint Ministers a good outcome has been reached, it is not an acceptable outcome, but it meets the requirements of the task.
 - Monique Fouwler commented that the capital and operational expenditure risks need to be clearly outlined in the options put forward to Joint Ministers.
- A late paper by Pete Hodgson, outlining an alternative value management option, was circulated at the beginning of the meeting. Pete Hodgson spoke to this paper and provided an overview, key points to note:
 - There is a potential \$78m saving by:
 - Removing, cold shelling or staging components of the original design which would save \$35m
 - Outsourcing the Bow Lane building which would save \$43m in capital expenditure.
 - The gross and net savings would be the same resulting in no wastage due to redesign.
 - Clinical services could be appropriately staged but fundamentally preserved, resulting in the noted 'red' and most of the 'amber' clinical risks no longer arising.

The Chair opened the floor for wider discussion. Key points to note include:

- Hamish Brown, Bridget Dickson, and Shelia Barnett support this alternative option and would like it presented to Joint Ministers for consideration.
- **DISCUSSED** the alternative option is more palatable with more savings on elements known. However, further exploration needs to occur for third party funding viability.
- **DICUSSED** the need to review and consider both capital and operational expenditure costs and that the outcome from the design optimisation process will result in better value for money.



- NOTED the Executive Steering Group recommended option will be presented to the Te Whatu Ora Board for consideration before seeking approval of the Joint Ministers.
- NOTED the Executive Steering Group will recommend option 4.3, subject to the removed beds being added back in and a space for a reduced Mental Health Services of Older People IPU included in the design. A revised option 4.3, with these inclusions, is to be circulated to the Executive Steering Group members for formal endorsement.
- **NOTED** the final recommendation was required by 7 October for the Capital and Infrastructure Committee meeting on 13 October.
- Hamish Brown requested more information regarding the redundancy and resilience under option 4.3. Richard Wager provided an overview, key points to note include:
 - Reduction in heat pumps, but number of boilers remains the same.
 - Reduction in logistic lifts.
 - Water tank storage reduced from 48 hours to 24 hours.
- Hamish Brown noted these changes will raise the overall risk profile.
- Neil O'Donnell noted the changes to services generated a \$4-5m saving.
- **DISCUSSED** the proposed water storage changes still meet the New South Wales standards, but these standards have not been tested in a colder climate like Dunedin.

Next Steps:

- Provide a report back to Executive Steering Group regarding Piling H&S incident.
- A revised option 4.3 will be circulated to the Executive Steering Group.

The Executive Steering Group:

- NOTED the updates on progress.
- ENDORSED Southbase Construction to engage SRG Global as the façade contractor for the Outpatient Building.
- ENDORSED the 'Recommended Scheme' (Option 4.3), subject to the inpatient bed number being increased from 354 to 386 and the reinsertion of a space with beds for the Mental Health Services of Older People IPU (24 removed).
- RECOMMEND the release of contingency to fund the 32 inpatient medical surgical beds and for the re-insertion
 of a space and beds for the Mental Health Services of Older People IPU.
- NOTED the paper from Pete Hodgson outlining alternative cost saving options.

The Executive Steering Group Supporting Direction:

 The design team to investigate the appropriate space and number of beds to be re-inserted for the Mental Health Services of Older People IPU and report back.

Paul Tonkin left the meeting at 12:45pm

Marcus Read, Kris Thomas, Darryl Haines, Trevor Boustead, Bill Gregory, Richard Wager, Jenny Fisher, Joe Mihaljevic, and Karen Curtis left the meeting at 1:30pm

5 Financial Report

The report was taken as read, key points from discussion:

- There has been a 12% increase in general market, non-residential, costs since last year. Concerns about the changes in exchange rates, market pricing, and inflationary wage pressures remain.
- The September reports will be split into Outpatient Building and Inpatient Building, with any site wide costs being included in the Inpatient Building report.
- Robert Rust commented he would like to see a breakdown of the Outpatient Building trades/tenders, which Neil O'Donnell advised is currently being worked on.
- Work is ongoing with trades to reduce the amount of risk being priced into costs, as some can be passed onto the client. Matt Allen noted that RCP are needing to review tender costs submissions thoroughly to ensure risk is not being double-dipped.
- Due to historic variations and allocation of fees for the redesign there was an increase in contingency spend for the month.

The Executive Steering Group members:

NOTED the financial report update. .

Other Business 6

- NOTED potential dates for the 2023 meetings will be compiled offline. .
- DISCUSSED preference for meeting days. Monique Fouwler noted the Capital and Infrastructure Board Released under the Official Information Act 1982 meeting the second Thursday of each month, with papers due the Friday beforehand, so meetings should be planned around those timeframes.

The meeting closed at 01:57pm



Closed Action Points

	ITEM	FIRST RAISED	STATUS	ACTION REQUIRED	RESPONSIBLE	ACTION BY	DUE BY	PRIORITY	UPDATE/STATUS	ACTION BY	DATE CLOSED
5G-110521-06	Resourcing	11/05/2021	In progress	Requested to receive a project team resource structure for the next meeting.	мон	Tony LL	11/06/2021 10/09/2021 TBC	Normal	 09/09/22 The revised project team resource structure has been identified and presented to the project team and main consultants on 31st August. The project structure has been split with Jim Coard as Project Director of Inpatient Building, Andrew Holmes as Project Director of Outpatient Building, and Kieran Reilly as Project Manager of the Dairy Building/Other. The roles of Design Director and Construction Director have been removed. Monique Fouwler noted that she is working with Tony Lloyd to make sure employees get pastural care. 	Tony LL	9/09/2022
5G-160222-05	Site Wide Mana Whenua Design	16/02/2022	In progress	NDH Design Team to provide advice on how mana whenua requirements are being integrated into the design of the hospital (in conjunction with the ESD workshop to be scheduled with ESG).	мон	Tony LL	20/04/2022 TBC	Normal	09/09/22 - Agreed to close action point and it will be addressed and presented as part of re-design.	Tony LL	9/09/2022

Open Action Points

REF	ITEM	FIRST RAISED	STATUS	ACTION REQUIRED	RESPONSIBLE	ACTION BY	DUE BY	PRIORITY	UPDATE/STATUS	ACTION BY
ESG-100321-06	Delegation of Authority	10/03/2021	In progress	Revised arrangements for DoA are currently being worked through with the new SRO and will be reported back on to ESG.	мон	Monique F	8/07/2022 TBC	Normal	09/09/22 - Currently on hold pending decision by the Te Whatu Ora Board regarding asking the Minister of Health for delegated authority for contractors Transitional issues around decision making and approval processes continue to be worked through with the various project teams.	Monique F
ESG-060421-09	ESD Workshop	6/04/2021	In progress	Schedule a sustainability session to ensure the building is appropriate as possible and meeting government standards.	МОН	Tony LL / Marcus Read (RCP)	11/06/2021 0 9/11/2021 TBC	Normal	09/09/22 Workshop remains deferred until design reset complete.	Tony LL / Marcus Read (RCP)
ESG-160222-03	iHNZ/HNZ Transition	16/02/2022	In progress	John Hazeldine, Acting DDG Infrastructure, to invite the new HNZ leadership to a future ESG meeting to discuss future governance arrangements.	мон	Monique F	ТВС	Normal	09/09/22 - The Capital and Infrastructure Committee are awaiting the outcome of the Operating Model workstream.	Monique F
ESG-130622-02	Digital Budget Comparison	13/06/2022	In progress	The Chair of the ESG would like a report from RLB comparing the cost difference between the current budget for digital in the NDH project and proposed Digital Programme budget of the Detailed Digital Business Case.	RLB	Neil O'Donnell	TBC	Normal	 09/09/22 Continues to be a work in progress. Tony Lloyd will connect with Bridget Dickson and the Digital team. Discussed the potential for a governance issue for the future if the two projects are not aligned and the need for digital representation at the meetings. 	

EXECUTIVE STEERING GROUP

Minutes

Date	Tuesda	ay, 11 October 20	22								
Time	10:30a	m to 1:30pm									
Location	NDH P 9(2)(g)	NDH PMO Boardroom - Dunedin 9(2)(g)(ii)									
	Members Evan Davies (Chair) Dr Margaret Wilsher Dr Tony Lanigan Dr Tony Lanigan Dr Nick Baker Robert Rust Dean Fraser Ex officio Helen Telford (SRO, Health NZ) Hamish Brown (Interim Southern District Director, Heath NZ) Observers Blake Lepper (Te Waihanga, Infrastructure Commission) Robyn Shearer (DCE – Sector Support and Infrastructure & DDG – DHB Performance and Support, Ministry of Health) Pete Hodgson (Chair, Local Advisory Group) Warner Peel (Analyst – Health, The Treasury)										
She Reg The Sep The ACC	ister of li Register • ^{9(2)(a} tember 2 Executiv EPTED t	nterests of Interests was r) 2022 Minutes ve Steering Grou the 9 September	, and John Hazeldine were noted, and the following de up: 2022 minutes as a true an Action Points from Tony Li	eclarations were made							
5	REF	ITEM	ACTION REQUI	RED RESPONSIBLE	UPDATE/STATUS - 11/10/22						
ESG-1	00321-06	Delegation of Authority	Revised arrangements for D currently being worked thro with the new SRO and will b reported back to ESG.	Monique F	 Open The Te Whatu Ora Board have requested delegated authority for contractors from the Minister of Health Further updates will be covered in agenda item 2. 						
1		-			On Hold						

Te Whatu Ora

Health New Zealand

ESG-169222-03 Minipute Amountain the antitude ESG meeting to a tuture ESG working the outcome of the operating Model workstream. ESG-130622-02 Digital Budget Comparison The Chair of the ESG would like a report from REG comparison of the Diperating Model workstream. Open • Continues to be a work in progress. 2 HNZ Transition - Update The Chair of the ESG would like a report from the ESG would like a report backs on governance for Te Whatu Ora and New Dunedin Hospital remain in progress. An hose been provided to the Minister of Health, as well as continued conversations occurring between the Minister. The Te Whatu Ora Board Chair, and the Ministry of Health. It is unknown what has been discuss date of further and/dvice is required. • NOTED work on the Operating Model remains in progress, key points include: • The report back on the Operating Model has been deferred to the Doeember cabinet meeting a required. 0 The report back on the Operating Model Reamains in progress, key points include: • The report back on the Operating Model Reamains in progress, key points include: 0 There report back on the Operating Model reamains in progress. • Souther reading on the Solt22022. Cristian Smith, current on for project like the New Dunedin Hosp to hoge the solt of the reading on the Solt22022. Cristian Smith, current on for project like the New Dunedin Hosp to hoge the solt of the reading on the Solt22022. Cristian Smith, current like Model reamains in progress. 3 SRO Update Th					Health New Zealand
ESG-130622.02 Digital Budget comparison report from RB comparing the current budget for digital in the NUT programe budget of the Detailed Digital Budget Tony Uord Neil O'Doneil • Continues to be a work in progress. 2 HXZ Transition - Update • NOTED report backs on governance for Te Whatu Ora and New Dunedin Hospital remain in progress. At shee provided to the Minister of Health, as well as continued conversations occurring between the Minister, the Te Whatu Ora Board Chair, and the Ministry of Health. It is unknown what has been discuss date or if further advice is required. • NOTED work on the Operating Model remains in progress. At project and drosp and the Ministry of Health. It is unknown what has been deformed to the December cabinet meeting • Future governance arrangements are currently unknown for projects like the New Dunedin Hesp project and Hospital Redevelopment Patnership Group. • Jerremy Holman has been announced as the Te Whatu Ora Chair Infrastructure and Investment Officer, starting on the 6/12/2022. Graham Smith, current interim Chief, will be returning to his position at TAS. • The Chair asked that once governance arrangements are identified there be a joint meeting between the Executive Steering Group members: • NOTED the updates on progress. 3 SRO Update Received an update from Helen Telford, Senior Responsible Owner, key points to note include: • There has been a full in the inpatient Building value management paper not going to Joint Minister November, meaning there will be delays in re-engaging with stakeholders until late November/early December. • Conc	ESG-160222-03		Infrastructure, to invite the new HNZ leadership to a future ESG meeting to discuss future governance	Monique F	• The Capital and Infrastructure Committee are awaiting the outcome of the
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	obse also	erver and advisor t has an observer r	o the Minister of Health. The Cha	ir commented	that the Capital Investment Committee
	The Executiv	ve Steering Grou	p members:		
NOTED the update from Helen Telford.		_			

Programme Director Update

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Health & Safety & Environment:

- The Health, Safety, and Environment update was taken as read, key points from discussion:
 - NOTED the Incident Report and Investigation paper for the September piling-casing incident.
 - DISCUSSED concerns raised by ESG members regarding the damage to the fences that occurred, the dangers involved with lifting, and the significant damage that could have occurred if a person had been hit.
 - o NOTED the ESG want assurance that the circumstances leading to the incident will not occur again.
 - **DISCUSSED** the response plan following the incident. Matt Allen advising there was immediate action by taken by CERES/March to inform the project team as well as sending out a notice and holding verbal discussions with staff who work on-site.
 - **NOTED** the written plan was adequate but onsite execution was lacking, with the piling case involved previously used for testing, had been cut with a new hole cut.
 - o **DISCUSSED** the two additional Health & Safety non-conformities mentioned in the report.
 - **DISCUSSED** Worksafe have a matrix available that outlines when incidents need to be reported to them and that this incident did not meet those conditions and was not reported.
- The Executive Steering Group requested a detailed report back at the next meeting regarding the piling-case incident and any other Health & Safety concerns.

Robyn Shearer joined the meeting at 11:00am

- Robyn Shearer provided an overview of changes at the Ministry of Health since the transition of functions to the new crown entities, key points to note include:
 - The new key focus areas and functions in particular strategy, policy, legislature, and system performance.
 - The Ministry of Health remains an advisor to the Minister of Health and will continue to work with agencies and the new crown entities to ensure they are supported.
 - The Ministry is keen to remain in a supportive role with the New Dunedin Hospital project and sees the role of observer assisting with that
- Discussion occurred regarding concerns around communication and unclear relationships between Te Whatu Ora, Te Aka Whai Ora, Ministry of Health, and Mana Whenua and how these can be fostered.

Robyn Shearer left the meeting at 11:38am

Outpatient Building Update:

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- The RCP Outpatient Building status report was taken as read.
- DISCUSSED the Outpatient Building Construction Contract:
 - o 45% of pricing has been confirmed.
 - The current Pre-Construction Services Contract has been extended until 31 October.

A paper requesting permission for the contract to be signed by Te Whatu Ora is going to the Capital and Infrastructure Committee on 13 October, then will be presented to Te Whatu Ora Board on 28 October for approval.

- DISCUSSED the current decision-making structure is not fit for purpose for the project and needs to be streamlined if possible. Monique Fouwler advised that the Te Whatu Ora Board have sought approval for contractors to have delegations which could alleviate some of the current issues.
- NOTED there are on-going discussions around what needs approval by the Te Whatu Ora Board and what could be delegated down.
- NOTED tendering is underway and that there have been small cost increases above RLB's forecast.
- NOTED piles are going deeper than expected, with some being driven down 22 metres.
- DISCUSSED difference between Practical Completion and Go Live, with the current Practical Completion date being 23/12/2025.

	Te Whatu Ora Health New Zealand
	 DISCUSSED delay in final detailed design report being presented to ESG and concerns around disparities in expectations between project team and designers. Tony Lloyd advised that disparities are being worked through and the expectations going forward have been made clear.
	Inpatient Building Update:
	The RCP Inpatient Building status report was taken as read.
	 DISCUSSED the current timeline for a decision on the value management paper. The paper is planned to be discussed at the Capital and Infrastructure Committee on 13 October, then pending approval, will be presented to Te Whatu Ora Board on 28 October before their recommendation is presented to Joint Ministers.
	 NOTED the clinical impact statement is attached as an appendix to the value management paper, and that pathology is the only concern not being addressed by the additional work outlined in the statement.
	 NOTED the Te Whatu Ora Board agreed to the Data and Digital revised stage 1 scope and funding request and is now with Joint Ministers for approval. Following this, four change requests from the Data and Digital team, relating to larger server room space and increased cell coverage have been approved by the project team.
	 NOTED the previously approved resource consents for the Inpatient Building require amendments, as per the council, which the project team are progressing.
	 NOTED comments from Tony Lloyd that the opportunity to incorporate modulisation into suites has been lost, so looking into modulisation of services instead.
	DISCUSSED the need to provide feedback to the Clinical Leadership Group, via Shelia Barnett, to encourage engagement.
	 NOTED the project team are satisfied with the current level of engagement with the Data and Digital workstream. Identifying that the two programmes were more closely aligned than previously thought.
	Next Steps:
	Provide a report back to ESG regarding Piling H&S incident.
	The Executive Steering Group:
	NOTED the updates on progress.
5	Southern District Change Programme – Bimonthly Updates
э	Received an update on the Te Whatu Ora - Southern Change Programme from Hamish Brown, interim Southern District Director. The report was taken as read, key points to note from discussion:
	An EPMO has been stood up, but it is unclear how this will fit in with Te Whatu Ora.
	 Sara Kidd, who stood up the EPMO, will be seconded to the New Dunedin Hospital PMO with a focus on capturing key strategic changes from the current hospital to the new hospital.
	 It is unclear how to invest at the local level and influence decisions, under Te Whatu Ora, due to the focus being at a regional level.
	 Due to capital budget constraints, stemming from transfer to Te Whatu Ora, the new Medical Assessment Unit has been moved from next to ED to the 6th floor.
	 Dr Nick Baker asked if more data and trend analysis can be provided in reporting to show the changes and improvements. Hamish Brown advised this can be provided.
	 Discussion occurred regarding the use of external assistance when transferring to the new building to minimise the programmes high levels of risk.
	The Executive Steering Group members:
	NOTED the update on Southern District Change Programme progress
	Other Business
	 DISCUSSED the current programmes are out of date and it is unknown when updated versions will be made available due to the current delay caused by the design programme and value management work.
	The meeting closed at 12:30pm

Closed Action Points:

ion Act 1982

Open Action Points:

REF	ITEM	FIRST RAISED	STATUS	ACTION REQUIRED	RESPONSIBLE	ACTION BY	DUE BY	PRIORITY	UPDATE/STATUS	ACTION BY
ESG-100321-06	Delegation of Authority	10/03/2021	In progress	Revised arrangements for DoA are currently being worked through with the new SRO and will be reported back on to ESG.	мон	Monique F	8/07/2022 TBC	Normal	 11/10/22 Remains on hold. The Te Whatu Ora Board have requested delegated authority for contractors from the Minister of Health Transitional issues around decision making and approval processes continue to be worked through with the various project teams. 	Monique F
ESG-060421-09	ESD Workshop	6/04/2021	In progress	Schedule a sustainability session to ensure the building is appropriate as possible and meeting government standards.	МОН	Tony LL / Marcus Read (RCP)	11/06/2021 09/11/2021 TBC	Normal	11/10/22 Workshop remains deferred until design reset complete.	Tony LL / Marcus Read (RCP)
ESG-160222-03	iHNZ/HNZ Transition	16/02/2022	In progress	John Hazeldine, Acting DDG Infrastructure, to invite the new HNZ leadership to a future ESG meeting to discuss future governance arrangements.	МОН	Monique F	твс	Normal	11/10/22 - The Capital and Infrastructure Committee are awaiting the outcome of the Operating Model workstream.	Monique F
ESG-130622-02	Digital Budget Comparison	13/06/2022	In progress	The Chair of the ESG would like a report from RLB comparing the cost difference between the current budget for digital in the NDH project and proposed Digital Programme budget of the Detailed Digital Business Case.	RLB	Neil O'Donnell	твс	Normal	11/10/22 - Continues to be a work in progress.	Tony LL / Neil O'Donnell
		Rel	2258	Jun						

EXECUTIVE STEERING GROUP

Minutes

Statute 1	Friday, 11	November 20	22					
Time	10:30am to	o 1:30pm						
Location	NDH PMO 9(2)(g)(ii)	Boardroom -	Dunedin					
1 Sec	Members Evan Davie Dr Margare Dr Tony La Dr Nick Ba Robert Rus Dean Fras Ex officio Helen Telfe Observers Blake Lepp Commissio John Haze Manager - Health) Pete Hodg Warner Pe	et Wilsher anigan aker st ser ord (SRO, Hea ber (Te Waiha on) eldine (Chief A Health Infrast gson (Chair, Lo eel (Analyst – I ologies	alth NZ) nga, Infrastructure dvisor and Group ructure, Ministry of ocal Advisory Group) Health, The Treasury)	Tony Lloyd (NDH F Bridget Dickson (P Health NZ) Sheila Barnett (Ch District, Health NZ Neil O'Donnell (Dir Matt Allen (Directo Darryl Haines (Wa Ron Hicks (HDR) - Karen Curtis (HDR) Secretariat Caleb Barone (Pro Apologies Hamish Brown (Int	ector, RLB r, RCP) – Item 4 rren and Mahoney) – item 4 - item 4) – item 4 ject Coordinator, Health NZ) erim Southern District Director, Heath NZ			
The		nterests was r	noted, and no new declar	rations were required.				
The Octo The ACC	Register of In ober 2022 M Executive S EPTED the	nterests was r inutes Steering Grou 11 October 20	Let	d accurate record.				
The Octo The ACC NOT	Register of In ober 2022 M Executive S EPTED the	nterests was r inutes Steering Grou 11 October 20	p: 22 minutes as a true an	d accurate record. Lloyd, Programme Dir	ector.			
The Octo The ACC NOT	Register of In ober 2022 M Executive S EPTED the ED overview REF	nterests was r inutes Steering Grou 11 October 20 v of the Open	p: 22 minutes as a true an Action Points from Tony	d accurate record. Lloyd, Programme Dir UIRED RESPONSIBLE DoA are prough Monique F	ector.			
The Octo The ACC NOT	Register of In ober 2022 M Executive S EPTED the ED overview REF	nterests was r inutes Steering Grou 11 October 20 v of the Open ITEM	22 minutes as a true an Action Points from Tony ACTION REQ Revised arrangements for currently being worked th with the new SRO and wil	d accurate record. Lloyd, Programme Din UIRED RESPONSIBLE DoA are brough I be Monique F	Pector. UPDATE/STATUS – 11/11/22 Open • The outcome from the request to the Te Whatu Ora Board regarding delegations to contractors is unknown. Awaiting feedback from the meeting and/or the meeting minutes. • Further updates will be covered in agenda item 2. On Hold • Remains on hold			

	ESG-130622-02	Digital Budget Comparison	The Chair of the ESG would like a report from RLB comparing the cost difference between the current budget for digital in the NDH project and proposed Digital Programme budget of the Detailed Digital Business Case.	Tony Lloyd /Neil O'Donnell	 Closed Agreed to close action point noting the action could be reopened in the future. NOTED continues to be a work in progress between the project team and the Digital team.
2	HNZ Transiti	ion - Update			
		D the Operating Mo ed by the Cabinet o		e Whatu Ora	Chief Executive and will next be
	NOTEI group.	D the Chair and Ro	bert Rust have seen the draft op	erating model	due to being members of the working
	• DISCU	SSED the propose	ed changes to project governanc	e, under Te W	/hatu Ora, key points to note include:
	0	The NDH ESG v	vill remain in place with an altere	d reporting line	e directly to the Te Whatu Ora Board.
	0	The NDH ESG v and transformati		roject workstre	eams, these being infrastructure, digital,
	0		aised about where the accounta jet or a budget per workstream.	bility for the pr	roject would lie and whether there will be
	0	The Capital and projects.	Infrastructure Committee will ac	t as oversight f	for all major Te Whatu Ora infrastructure
	The Executiv	e Steering Group	members		
		ED the updates or			
	• 101				
3	SRO Update				
3		update from Helen	Telford, Senior Responsible O	ner, key point	s to note include:
3	Received an • The		rd Chair, Rob Campbell, attende	• • •	s to note include: nber NDH SRO meeting. Key points
3	Received an • The discu	Te Whatu Ora Boa Issed at the SRO n	rd Chair, Rob Campbell, attende neeting include: Building value management exer	d the 8 Noven	
3	Received an • The discu	Te Whatu Ora Boa Issed at the SRO n The Inpatient I Whatu Ora Bo	rd Chair, Rob Campbell, attende neeting include: Building value management exer	d the 8 Noven	nber NDH SRO meeting. Key points
3	Received and • The discu	Te Whatu Ora Boa Issed at the SRO n The Inpatient I Whatu Ora Bo The NDH MOU	rd Chair, Rob Campbell, attende neeting include: Building value management exer ard meeting.	d the 8 Noven	nber NDH SRO meeting. Key points
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Te Whatu Ora

implement exceeded the potential savings due to the current stage of the project.

- **NOTED** the design team have been asked to investigate the prefabrication of materials as a potential cost saving.
- NOTED Kris Thomas, RCP Inpatient Building lead for RCP, will be leaving the project in December.

Darryl Haines, Ron Hicks, and Karen Curtis joined the meeting at 11:05am

- Received a presentation from Darryl Haines, Ron Hicks, and Karen Curtis which outlined in terms of the Value Management:
 - o Summary responses to key items of the Southern clinical impact statement.
 - o A comparison between the Detailed Business Case and Option 4.5a
 - o The site floor plans and site cross section of Option 4.5a
 - o The matters to be resolved in the preliminary design phase.

The Chair opened the floor for wider discussion. Key points to note include:

- **DISCUSSED** possible alternative uses for the shelled PET-CT space.
- DISCUSSED the potential to include a large decontamination shower in the cold ambulance bay in case of industrial accident. The design team have noted and will take away for review.
- DISCUSSED the impact on cultural narrative due to the removal of the pavilion building and the façade changes. Dean Fraser requested to be involved in discussions with Aukaha regarding the cultural narrative and design. The Chair requested, when appropriate, the ESG be briefed on the cultural narrative changes.
- **DISCUSSED** deferring the planned clinical user engagement workshops until a decision from Joint Ministers is known. Noting February 2023 would be the earliest the user engagement workshops could be rescheduled.

Darryl Haines, Ron Hicks, and Karen Curtis left the meeting at 12:10pm

Health & Safety & Environment:

- The Health, Safety, and Environment update was taken as read, key points from discussion:
 - Tony Lloyd provided an overview of a health and safety incident that occurred 31 October involving a Stillson wrench and resulted in a worker requiring medical treatment.
 - o **NOTED** the 31 October incident was reported to WorkSafe who advised it was not notifiable.
 - DISCUSSED how do non-notifiable incidents currently get shared within the sector, what were the contractual obligations for reporting Health & Safety matters, and the benefits if there was a repository where these reports could be stored and shared. The Chair asked Tony Lloyd and Monique Fouwler to take this back to Te Whatu Ora for discussion.
 - **NOTED** Tim Barry has left the Infrastructure and Investment Group and a replacement Health and Safety Lead is being recruited.
 - **NOTED** Te Whatu Ora have developed a Lessons Learned framework.
 - DISCUSSED the need for informal Health & Safety audits and reports. Tony Lloyd advised Andrew Holmes does currently performs informal audits of the Outpatient Building site.

NOTED comments from Matt Allen advising he will investigate importing similar methodology used on other RCP projects, where other contractors report observations, into this project.

DISCUSSED implementing site inspection/walk-throughs an hour prior to each PCG meeting similar to those held on the Waipapa project.

Outpatient Building Update:

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- The RCP Outpatient Building status report was taken as read.
- DISCUSSED Outpatient Building piling:
 - o The 14T hammer is pushing piles deeper than anticipated
 - o Pile driving is expected to be completed by 18 November.
 - o All piles are expected to be inspected and approved by 30 November.
- DISCUSSED the submissions received from recent sub-trade tenders and the increase in pricing compared to the forecast, key notes to include:
 - o Submissions for electrical, mechanical, and plumbing produced the highest increases ranging from

				Te Whatu Ord Health New Zealand
		9(2)(b)(ii)	over forecast.	
	o	Pricing re forecast.	ceived for the special service trades (IT me	edical, gases etc) were relatively in line with
			ion, interest rate increase, wage increases, commence as possible causes for the incre	, exchange rate changes, and the long entry period ease in sub-trade pricing.
				for forecasted pricing of the Inpatient Building, and nt Ministers advising this as a potential future
			atu Ora Board and Capital and Infrastructu k than the Ministry of Health previously.	re Committee have made it clear they are willing
			from Robert Rust advising of cost escalations and the substantial backlog of projects across the rest	ons being experienced in New South Wales, egions.
	Sheila Barnett	t left the me	əting at 12:45pm	200
	Financial	Update:		×
	• The fin	ancial repor	t was taken as read.	P
1	The Executiv	e Steering	Group:	
	NOTE:	the update	es on progress.	attle
5 (Other Busine	ss	No. and all Assessed	inic
		ED the perm ble 5/12/202		and Investment Officer, Jeremy Holman, starts in
	• DISC	USSED alte	ernating between in-person and virtual mee	tings for 2023, with January being in-person.
	The meeting	closed at 0	1:00pm	and the state of the second

Released under the

Closed Action Points:

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REF	ITEM	FIRST RAISED	STATUS	ACTION REQUIRED	RESPONSIBLE	ACTION BY	DUE BY	PRIORITY	UPDATE/STATUS	ACTION BY	DATE CLOSED
ESG-130622-02	Digital Budget Comparison	13/06/2022	In progress	The Chair of the ESG would like a report from RLB comparing the cost difference between the current budget for digital in the NDH project and proposed Digital Programme budget of the Detailed Digital Business Case.	RLB	Neil O Donnell	ТВС	Normal	 11/11/22 Agreed to close action point noting the action could be reopened in the future. Continues to be a work in progress between the project team and the Digital team. 	Tony LL / Neil O Donnell	11/11/20
						ann	ation				
Open A	Action Points:										
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Open Action Points:

REF	ITEM	FIRST RAISED	STATUS	ACTION REQUIRED	RESPONSIBLE	ACTION BY	DUE BY	PRIORITY	UPDATE/STATUS	ACTION BY
ESG-100321-06	Delegation of Authority	10/03/2021	In progress	Revised arrangements for DoA are currently being worked through with the new SRO and will be reported back on to ESG.	Te Whatu Ora	Monique F	8/07/2022 TBC	Normal	11/11/22 - Remains on hold. The outcome from the request to the Te Whatu Ora Board regarding delegations to contractors is unknown. Awaiting feedback from the meeting and/or the meeting minutes.	Monique F
ESG-060421-09	ESD Workshop	6/04/2021	In progress	Schedule a sustainability session to ensure the building is appropriate as possible and meeting government standards.	Te Whatu Ora	Tony LL / Marcus Read (RCP)	11/06/2021 09/11/2021 TBC		11/11/22 Workshop remains deferred until design reset complete.	Tony LL / Marcus Read (RCP)
ESG-160222-03	iHNZ/HNZ Transition	16/02/2022	In progress	John Hazeldine, Acting DDG Infrastructure, to invite the new HNZ leadership to a future ESG meeting to discuss future governance arrangements.	Te Whatu Ora	Monique F	TBC	Normal	11/11/22 - Remains on hold. The Capital and Infrastructure Committee are awaiting the outcome of the Operating Model workstream.	Monique F
		Rel	20.50							

EXECUTIVE STEERING GROUP

Minutes

Date	Tuesday, 13 December 2022	
Time	10:30am to 1:30pm	
Locat	tion NDH PMO Boardroom - Dunedin 9(2)(g)(ii)	
nvite(AverageMembersEvan Davies (Chair)Dr Margaret WilsherDr Nick BakerRobert RustDean FraserEx officioHelen Telford (SRO, Health NZ)ObserversJohn Hazeldine (Chief Advisor and GroupManager - Health Infrastructure, Ministry ofHealth)Pete Hodgson (Chair, Local Advisory Group)Warner Peel (Analyst – Health, The Treasury)	Attendees Monique Fouwler (Acting Director Delivery - HIU, Health NZ Tony Lloyd (NDH Programme Director, Health NZ) Bridget Dickson (Programme Director, Southern District, Health NZ) Neil O'Donnell (Director, RLB Jim Coard (IB Project Director, Health NZ) Andrew Holmes (OB Project Director, Health NZ) Matt Allen (Director, RCP) Secretariat Caleb Barone (Project Coordinator, Health NZ) Apologies Dr Tony Lanigan Hamish Brown (Interim Southern District Director, Heath NZ) Blake Lepper (Te Waihanga, Infrastructure Commission) Sheila Barnett (Chair Clinical Leadership Group, Southern District, Health NZ)
1 '	Welcome & Apologies	
		a Barnett were noted as apologies. Warner Peel joined the arations were required. g(2)(a)
	Tony Lanigan, Hamish Brown, Blake Lepper, and She meeting late. Register of Interests The Register of Interests was noted, and no new declar November 2022 Minutes The Executive Steering Group:	arations were required. g(2)(a)
	Tony Lanigan, Hamish Brown, Blake Lepper, and She meeting late. Register of Interests The Register of Interests was noted, and no new declar November 2022 Minutes The Executive Steering Group: ACCEPTED the 11 November 2022 minutes as a true NOTED overview of the Open Action Points from Tony Director Delivery:	arations were required. g(2)(a)
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	Te Whatu Ord Health New Zealand
2	HNZ Transition - Update
2	 DISCUSSED the proposed changes to project governance, under Te Whatu Ora, key points to note include:
	• A paper on broader governance within Te Whatu Ora is progressing through The Minister of Health.
	 The Chair noted that he has received a briefing on the proposed new structure and Terms of Reference for the Executive Steering Group and has been invited to remain as the Chair. The Chair is currently reviewing the proposal.
	 Pete Hodgson commented it would be beneficial for the project for the Chair to remain, as another major change to the project will be disruptive.
	• NOTED the report advising the outcome of the value management review and the current value management options was finalised and sent to Joint Ministers in early December. Joint Ministers have a meeting planned for Thursday 15 December to discuss the paper and expect to provide their decision by the end of the year.
	DISCUSSED the content of the report and the options presented, key points to note include:
	• NOTED three options were put forward to Joint Ministers for consideration, these were
	 Option A – Continue with current design
	 Option B – Design reset (Option 4.5A)
	 Option C – Current design with more shelled space with staged development
	 DISCUSSED if the ESG could be provided a copy of the report so that they can understand what was presented and the final options. Monique Fouwler noted she did not see the final paper, with the Ministry of Health and Treasury recommendations, before it went to Joint Ministers.
	 NOTED comments from Tony Lloyd that regardless of decision from Joint Ministers, the design and project team has been working on plans for all three options so once a decision is known, work can progress with minimal delay.
	• NOTED Jeremy Holman, Chief Infrastructure and Investment Officer, started on the 5/12/2022, coming to Te Whatu Ora from Crown Infrastructure Partners. Jeremy's key focus, at the moment, is implementing the operating model changes.
	 The Chair asked for Jeremy Holman to be invited to attend an ESG meeting early next year.
	The Executive Steering Group members:
	NOTED the updates on progress.
3	SRO Update
	Received an update from Helen Telford, Senior Responsible Owner, key points to note include:
	• NOTED the Southern value management user group meetings have been moved to the last week of January 2023, noting it is not expected these meetings will need to be moved again as the decision from Joint Ministers is expected by the end of the year.
	 NOTED the NDH MOU has been reviewed and the updated MOU should be signed by the end of the year.
	 NOTED the NDH Disputes Advisory Board (DAB) visited the office and Outpatient Building site for their November quarterly meeting. Nothing to note from the quarterly meeting.
	• NOTED an options workshop with Mana Whenua is being organised, with a time and date still to be decided.
	 NOTED the ILC remains ongoing as an independent project and that there has been a recent increase in communications and interest around the ILC Business Case.
	• NOTED the Local Advisory Group (LAG) are reviewing their structure.
	The Executive Steering Group members:
	NOTED the update from Helen Telford.
4	Programme Director Update
	Inpatient Building Update:
	The RCP Inpatient Building status report was taken as read.
	 NOTED Ceres will be putting up hoardings in early January then will start demo work for the Inpatient Building. This work can proceed as planned regardless of decision by Joint Ministers as the resource consent for demolition will not be affected.

 NOTED programme delay for the Inpatient Building is now 10 months due to delays in the report being provided to Joint Ministers.

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- **NOTED** the review of the delivery model is still underway. A proposal has been received from CPB but has not yet been reviewed. Will be reviewed and presented back in the new year.
- **NOTED** a detailed design coordination programme for consultants has been produced and is currently being reviewed before being supplied to Woods Harris.
- 9(2)(i)
- **NOTED** budget remains an ongoing and serious concern due to the pricing increases seen recently for Outpatient Building trades.
- DISCUSSED whether Joint Ministers will be provided an update on the ongoing challenges arising from the pricing for Outpatient Building trades. John Hazeldine noted that Joint Ministers have been advised in the report about current pricing challenges, but it was not quantified by numbers.
- DISCUSSED whether the risks noted in the RCP Inpatient Building status report were static, noting that they are not and were the top 5 identified at a recent risk workshop.
- DISCUSSED ongoing challenges with the Government procurement processes and restrictions of the procurement rules.
- **NOTED** it is difficult to obtain tender submissions from three suppliers and it would be useful to be able to discuss with suppliers directly. Monique Fouwler noted that procurement rule exceptions can be utilised but require supporting evidence. The Chair asked that any issues with procurements or the procurement rules should be brought to the ESG for discussion and support.

Health & Safety & Environment:

- The Health, Safety, and Environment update was taken as read, key points from discussion:
 - NOTED Ceres/March teams have incorporated feedback from ESG and there have been no incidents on site since the last meeting.
 - NOTED Piling for the Outpatient Building has been completed and all bearing tests have been passed. Ceres will finalise move onto the Inpatient Building site after the holiday period.
 - **NOTED** Southbase Construction are ready to take over the Outpatient Building site which will occur after the holiday break.

Outpatient Building Update:

- The RCP Outpatient Building status report was taken as read.
- NOTED there has been a tough start to next phase due to façade changes and the gravity and seismic restraint
 detail causing agitation while working through the shop drawing process.
- DISCUSSED if there is 2 months further delay because the report notes Southbase was meant to be occupying the Outpatient Building site by end of November. Tony Lloyd advised there is no delay to programme as the site handover is underway and whether fully occupying in December or early January the programme remains the same for Southbase.
- NOTED the Detailed Design report is almost finalised, current draft is being reviewed by project team.
- **DISCUSSED** how best to engage people in Health, Safety, and Wellbeing given a lot of people will eventually be mobilised across both building sites. Dean Fraser comments he was a part of workshops recently, on a different job, which utilised VR headsets to engage and encourage Health and Safety practices. Tony Lloyd expressed interest in this and asked to speak with Dean post meeting to discuss further. 9(2)(i)

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Financial Update:

- The financial report was taken as read.
- 9(2)(i)

NOTED cross building meetings for certain trades/services like lifts and nurse call have been occurring between

		Southba	se, CPB, and consultants.
	The	Executive	Steering Group:
	•	NOTED	the updates on progress.
_	Outp	atient Ma	in Contractor Construction – SP2
5	9(2)(
		. /	
	_		
	•		tendering occurred at the worst time, where the NZD was at its lowest in 10 years. Neil O'Donnell noted pricing being presented is what was received and the best that could be obtained during this period.
	•	agreed b	SED the alternative to not endorsing would be to retender and re-engage the market. However, it was by ESG members doing this would be unproductive as it is unlikely to produce a major difference in but would extend the programme.
	•		SED the possibility to question the poor exchange rate at time of tendering during negotiations with es if they are planning on procuring overseas. Neil O'Donnell advised this discussion is already g.
	•		the project team have done the best they can to battle cost escalation and are continuing to review ost savings can be made.
	The	Executive	Steering Group members:
	•	noting th	SED the award of Separable Portion 2 to the construction contract with Southbase Construction Ltd, nat the market conditions were such that the costs, while extraordinary, were well tested and that the Team had undertaken all endeavours to ensure they provided as much value for money as possible.
	•		NOT THE REAL PROPERTY OF THE R
	•		all SP2 trade recommendations will be resolved by the end of March 2023.
	•	9(2)(i)	
	•		a reassessment of all contingencies will be conducted once the Inpatients Design Reset / Optimisation is confirmed and completed.
~	Sout	hern Dist	rict Change Programme – Bimonthly Updates
6	Rece	eived an o	ral update on the Te Whatu Ora - Southern Change Programme from Bridget Dickson, Programme oints to note from discussion:
	•	Ora tear	the team have reflected on the feedback received from the ESG, internal teams, and wider Te Whatu ns regarding the reporting being produced and have decided to pause the use of the reporting system, e, to perform a review and refresh.
	•	NOTED	the next report produced will be in February.
	•		who can enter and moderate information via the Cascade system will be reviewed as part of the grefresh.
	•	Detailed	SED the PMO's concerns around the change reporting, which is linked to the benefits noted in the Business Case, and the Outpatient transition plan. Noting reporting responsibilities are currently on what sits with the regional and national Te Whatu Ora teams.
	•		the PMO will seek guidance from the ESG on what information they want to see reported and what possibly be missing, noting they are working to ensure the reporting produced aligns with the other



	workstreams, e.g., Digital.
	The Executive Steering Group members:
	NOTED the update on Southern District Change Programme progress
-	
	Other Business
	 DISCUSSED the 2023 meeting dates and confirmed the January meeting will be in-person.
	The Chair asked that once a decision from Joint Ministers is received that it be circulated to the ESG
	members.
	 THANKED ESG members, attendees and wider team for their contribution and support during a challenging year.
	year.
	The meeting closed at 12:25pm
	The meeting closed at 12:25pm
	$\sim 0^{\circ}$
	Released under the

Page 5 of 6

Closed Action Points:

REF	ITEM	FIRST RAISED	STATUS	ACTION REQUIRED	RESPONSIBLE	ACTION BY	DUE BY	PRIORITY		ACTION BY	DATE CLOSED
ESG-060421-09	ESD Workshop	6/04/2021	In progress	Schedule a sustainability session to ensure the building is appropriate as possible and meeting government standards.	Te Whatu Ora	Tony LL / Marcus Read (RCP)	11/06/2021 0 9/11/2021 TBC	Normal	13/12/22 - Agreed to close action point noting the action will be incorporated and presented as part of BAU for the design reset.	Tony LL / Marcus Read (RCP)	11/11/2023
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Onen	Action Po	ints:					n'				

Open Action Points:

REF	ITEM	FIRST RAISED	STATUS	ACTION REQUIRED	RESPONSIBLE	ACTION BY	DUE BY	PRIORITY	UPDATE/STATUS	ACTION BY
ESG-100321-06	Delegation of Authority	10/03/2021	In progress	Revised arrangements for DoA are currently being worked through with the new SRO and will be reported back on to ESG.	Te Whatu Ora	Monique F	8/07/2022 TBC	Normal	13/12/22 - Remains on hold. - The Minister has approved the request to delegate to authority contractors within Te Whatu Ora and the decision now sits with the Te Whatu Ora Board. - The Board has asked the Te Whatu Ora Executive Leadership to discuss and present why/who delegations should be provided for. - The new Chief Infrastructure and Investment Officer has been briefed on the delegations required for the Infrastructure and Investment Group and is attending the 13 December ELT meeting to discuss.	Monique F
ESG-160222-03	iHNZ/HNZ Transition	16/02/2022	In progress	John Hazeldine, Acting DDG Infrastructure, to invite the new HNZ leadership to a future ESG meeting to discuss future governance arrangements.	Te Whatu Ora	Monique F	твс	Normal	13/12/22 - Remains on hold. - The Chair has been briefed on the proposed new ESG structure and Terms of Reference - A paper on broader governance within Te Whatu Ora is progressing through parliament	Monique F

EXECUTIVE STEERING GROUP

Minutes

Date	Tuesday, 2	4 January 2023						
Time	10:30am to	o 1:30pm						
Locatio	on NDH PMO 9(2)(g)(ii)	NDH PMO Boardroom - Dunedin 9(2)(g)(ii)						
Invitee	Evan Davie Dr Margare Dr Nick Ba Robert Rus Dean Frase Ex officio Helen Telfo Observers Blake Lepp Commissio John Haze Manager - Health)	et Wilsher ker st er ord (SRO, Health NZ) s oer (Te Waihanga, Infrastructure	Attendees Monique Fouwler (Acting Director Delivery - IIG, Health NZ) Tony Lloyd (NDH Programme Director, Health NZ) Bridget Dickson (Programme Director, Southern District, Health NZ) Neil O'Donnell (Director, RLB) Matt Allen (Director, RCP) Secretariat Caleb Barone (Project Coordinator, Health NZ) Apologies Dr Tony Lanigan Hamish Brown (Interim Lead Hospital & Specialist, Southern District, Health NZ) Warner Peel (Analyst – Health, The Treasury) Sheila Barnett (Chair Clinical Leadership Group, Southern District, Health NZ)					
	The Chair welcor	ned all in attendance to a new year.						
F R T N T A	Fouwler joined th Register of Inter The Register of In November 2022 The Executive S ACCEPTED the NOTED overview Director Delivery	e meeting late. ests nterests was noted, and no new decla Minutes teering Group: 13 December 2022 minutes as a true of the Open Action Points from Tony 0321-06 (Delegation of Authority):	and accurate record. Lloyd, Programme Director and Monique Fouwler, Acting nt. Monique Fouwler noted the new Chief Infrastructure and					
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without visibility on final decisions being fed back to the Executive Steering Group. The Chair and Monique Fouwler agreed to discuss this further offline. DISCUSSED the need for a solid communication strategy going forward to ensure positive and proactive communications are being released. Monique Fouwler noted the communications team has been nationalised and an Infrastructure and Investment Group communication strategy is being developed which will include a New Dunedin Hospital communications plan. The Chair reiterated that the role of the Executive Steering Group is not to have a public face or to provide commentary. NOTED there is still confusion for some external stakeholders and staff, not involved in the user groups, which has led to an increase in 'one-liners' in the media and people still referring to outdated information. NOTED the Infrastructure and Investment Group is working with the Ministers office to proactively release briefings. DISCUSSED that the increase in budget should have been seen as a positive story, but due to the current negative media there is a risk that stakeholders and staff will not want to be involved in the project. The Executive Steering Group members: NOTED the discussion and updates on progress. **Programme Director Update Continued** 4b Health & Safety & Environment: The Health, Safety, and Environment update was taken as read, key points from discussion: **DISCUSSED** the Worksafe inspection completed on December 13, 2022. Noting in the morning the site was compliant but when the inspector arrived in the afternoon one of the fences had been removed leaving a trench open. A sustained compliance letter was issued by Worksafe, and Ceres have removed the individual responsible from the site. NOTED Ceres will have a replacement project manager in place by the end of January 2023. NOTED daily HS&E checks by RCP will be increased to ensure standards are increased and 0 maintained. The Chair noted, due to the previous issues that have been reported, that an increased focus on 0 Health, Safety, and Environment is required and the Executive Steering Group need to continue to be kept informed going forward. Outpatient Building Update: The RCP Outpatient Building status report was taken as read. NOTED Southbase Construction are now established on the Outpatient Building site. NOTED Separable Portion 2 (SP2) was approved and issued to Southbase on time, noting SP2 was over budget but work to reduce costs continues. NOTED Separable Portion 3 (SP3) needs to go to the Te Whatu Ora Board for approval. 9(2)(i) DISCUSSED SRG's performance, noting they have incorporated the programme and are interacting with management and the design teams well. 9(2)(i) **NOTED** comments from Pete Hodgson that he negotiated a agreement with Quinn Henderson, Southbase Construction CE, last year to work with Work Force Central (WFC) who will provide workers, toolbox talks, and increase the team diversity. DISCUSSED possible delays or issues in approval for SP3, noting savings are still being investigated. NOTED comments from Monique Fouwler that Board approval could possibly be granted in advance of the final number being known, which should reduce any potential delays. The Chair asked Tony Lloyd to provide an overview of how both sites will look in the next 6-9 months. Key points to note include: For the Inpatient Building, demolition work will be the main area of progress. 0 For the Outpatient Building, the ground beams will be installed and by the end of the year some frames 0 and double columns will be in place. DISCUSSED the potential cost issue related to the passive fire certification and the additional tests required to



meet new standards. It was noted the Christchurch Hospital project experienced the same issue. Financial Update: The financial report was taken as read. The Executive Steering Group: NOTED the updates on progress. Other Business The Chair noted that Tony Lloyd will be reviewing the current timing of meetings to ensure the start and entities suit all members and attendees. The meeting closed at 12:10 Chair Control of the control of the current timing of meetings to ensure the start and entities suit all members and attendees. The meeting closed at 12:10 Chair Control of the current timing of meetings to ensure the start and entities suit all members and attendees. The meeting closed at 12:10 Chair Control of the current timing of meetings to ensure the start and entities suit all members and attendees. The meeting closed at 12:10 Chair Control of the current timing of meetings to ensure the start and entities of the current timing of meetings to ensure the start and entities of the current timing of meetings to ensure the start and entities of the current timing of meetings to ensure the start and entities of the current timing of meetings to ensure the start and entities of the current timing of meetings to ensure the start and entities of the current timing of meetings to ensure the start and entities of the current timing of meetings to ensure the start and entities of the current timing of t		Health New Zealand
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Open Action Points:

Closed Action Points:

REF	ITEM	FIRST RAISED	STATUS	ACTION REQUIRED	RESPONSIBLE	ACTION BY	DUE BY	PRIORITY	UPDATE/STATUS	ACTION BY
ESG-100321-06	Delegation of Authority	10/03/2021	In progress	Revised arrangements for DoA are currently being worked through with the new SRO and will be reported back on to ESG.	Te Whatu Ora	Monique F	8/07/2022 TBC	Normal	24/01/23 - Remains on hold, with no update provide in the January meeting	Monique F
ESG-160222-03	iHNZ/HNZ Transition	16/02/2022	In progress	John Hazeldine, Acting DDG Infrastructure, to invite the new HNZ leadership to a future ESG meeting to discuss future governance arrangements.	Te Whatu Ora	Monique F	TBC	Normal	24/01/23 - Remains on hold. - John Hazeldine noted a paper is being drafted regarding governance changes and is expected to go to the Ministers office for review by end of January then to Cabinet in February. - Changes to goverance expected to be in place by March meeting	Monique F
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EXECUTIVE STEERING GROUP

Minutes

Time	Tuesday, 21 February 2023						
	10:30am to 1:30pm						
Location	NDH PMO Boardroom - Dunedin 9(2)(g)(ii)						
nvitees	MembersDr Margaret Wilsher (Chair)Dr Nick BakerRobert RustDean FraserEx officioHelen Telford (SRO, Health NZ)Hamish Brown (Interim Southern District Director, Heath NZ)ObserversJohn Hazeldine (Chief Advisor and Group Manager - Health Infrastructure, Ministry of Health) 	Attendees Monique Fouwler (Acting Director Delivery - IIG, Health NZ) Tony Lloyd (NDH Programme Director, Health NZ) Bridget Dickson (Programme Director, Southern District, Health NZ) Sheila Barnett (Chair Clinical Transformation Group, Southern District, Health NZ) Matt Allen (Director, RCP) Secretariat Caleb Barone (Project Coordinator, Health NZ) Apologies Evan Davies Dr Tony Lanigan Neil O'Donnell (Director, RLB) Blake Lepper (GM Infrastructure Delivery, Te Waihanga - Infrastructure Commission)					
	Icome & Apologies rgaret Wilsher is acting as Chair for the meeting. e Chair opened the meeting with karakia. an Davies, Tony Lanigan, Neil O'Donnell, and Blake Lepper were noted as apologies. Warner Peel joined the eting late. gister of Interests e Register of Interests was noted, and no new declarations were required. wember 2022 Minutes						
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 whenua requirements and interests. NOTED progressing the paper regarding governance changes has been delayed due to the char in Minister of Health. The paper is now expected to go to the Ministers office by end of February. HNZ Transition – Update This agenda item was covered under the Action Point <i>ESG-160222-03</i> discussion. However, additional pot to note include: NOTED Jeremy Holman, Chief Infrastructure and Investment Officer, is currently working on developing and implementing the Infrastructure and Investment Group Operating Model, with an expected consultation period of 6 to 12 weeks.		Hedini New Zedidid
a IMIX Transition – Update a IMIX Transition – Update a IMIX Transition – Update a INIX agenda item was covered under the Action Point ESG-160222-03 discussion. However, additional pc to note include: a NOTED Jeremy Holman, Chief Infrastructure and Investment Officer, is currently working on developing and implementing the Infrastructure and Investment Officer, is currently working on developing and implementing the Infrastructure and Investment Officer, is currently working on expected consultation period of 6 to 12 weeks. b NOTED Jeremy Holman will be attending the March ESG meeting, via Zoom. c NOTED Integraphic Secretariat to send out the Te Whatu Ora Operating Model to ESG members: c NOTED the update from Monique Fouwler. 3 SRO Update Received an update from Helen Telford, Senior Responsible Owner, key points to note include: • NOTED the schinet shuffle has resulted in a new Minister of Health, Minister Verrall, who has a clinical background and high level of interes in the NDH project. • NOTED the SRO working group is committed to moving forward with the option chosen by Joint Ministers would like commitment from the project there will be no further value management in the future. • NOTED the signing of the updated NDH MOU has been postponed to an undecided date, due to the Te Whatu Ora CE being unavailable. • NOTED the LC confluence to move ahead with the team having their first gateway planning meeting. The		placeholder in the PSG ToR for mana whenua representation as each PSG will have differing mana whenua requirements and interests.
 This agenda item was covered under the Action Point <i>ESG-160222-03</i> discussion. However, additional pot to note include: NOTED Jeremy Holman, Chief Infrastructure and Investment Officer, is currently working on developing and implementing the Infrastructure and Investment Group Operating Model, with an expected consultation period of 6 to 12 weeks. NOTED Jeremy Holman will be attending the March ESG meeting, via Zoom. ACTION POINT: ESG secretaria to send out the Te Whatu Ora Operating Model to ESG members: NOTED the update from Monique Fouwler. SROUpdate Received an update from Helen Telford, Senior Responsible Owner, key points to note include: NOTED the update from Helen Telford, Senior Responsible Owner, key points to note include: NOTED the cabinet shuffle has resulted in a new Minister of Health, Minister Verrall, who has a clinical background and high level of interest in the NDH project. NOTED the SRO working group is committed to moving forward with the option chosen by Joint Ministers would like commitment from the project three will be no further value management in the future. NOTED the signing of the updated NDH MOU has been postponed to an undecided date, due to the Te Whatu Ora CE being unavailable. NOTED the ILC continues to move ahead with the team having their first gateway planning meeting. The gateway review is currently planned for May 2023. The Chair opened the floor for wider discussion. Key points to note include: Monigue Fouwler noted the cabinet paper regarding governance is not anoling paper only. There is a template for the new PSGs goog governance in ADH will be values as who we also at with this request. Monigue Fouwler noted the		 NOTED progressing the paper regarding governance changes has been delayed due to the change in Minister of Health. The paper is now expected to go to the Ministers office by end of February.
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developing and implementing the Infrastructure and Investment Group Operating Model, with an expected consultation period of 6 to 12 weeks. o NOTED Jeremy Holman will be attending the March ESG meeting, via Zoom. ACTION POINT: ESG secretariat to send out the Te Whatu Ora Operating Model to ESG members: The Executive Steering Group members: • NOTED the update from Monique Fouwler. 3 SRO Update Received an update from Helen Telford, Senior Responsible Owner, key points to note include: • NOTED the cabinet shuffle has resulted in a new Minister of Health, Minister Verfall, who has a clinical background and high level of interest in the NDH project. • NOTED the SRO working group is committed to moving forward with the option chosen by Joint Ministers would like commitment from the project there will be no further value management in the future. • NOTED the Signing of the updated NDH MOU has been postponed to an undecided date, due to the Te Whatu Ora CE being unavailable. • NOTED the LC continues to move ahead with the team having their first gateway planning meeting. The gateway review is currently planned for May 2023. The Chair opened the floor for wider discussion. Key points to note include: • • Morigue Fouwler noted the cabinet paper regarding governance is not a noting paper only. There is a template for the new PSGs going forwing her Dunedh visit and the Minister Meeting this sequast. • Morigue F	-	• This agenda item was covered under the Action Point <i>ESG-160222-03</i> discussion. However, additional points to note include:
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The RCP Inpatient Building status report was taken as read.		

- Received an update from Tony Lloyd, key points to note include:
 - Design continues. However, there are concerns about the programme and how it is currently split, which will be discussed at a meeting with the design team set for Wednesday 22 February.
 - The user group process has recommenced and appears to be going well. Bridget Dickson agreed and noted some users were concerned and anxious due to comments seen in the public and media but were pleased the changes were not as bad as publicised. However, user groups have identified some areas that need focus which will be addressed with the design team.
 - o A meeting is being set-up with CPB to discuss their current and future contracting for the NDH project.
- DISCUSSED how mana whenua is currently being incorporated into the design, as the original renders
 contained a lot of mana whenua design.
- Tony Lloyd noted Aukaha are engaged to incorporate mana whenua into design, and he would like to discuss
 offline with Dean Fraser how he sees mana whenua engagement should be working.
- The Chair noted she has been given contact details for Joseph Tyro, Te Aka Whai Ora Infrastructure Lead Te Wai Pounamu, to pass onto Tony Lloyd.
- ACTION POINT: The Chair requested a standing agenda item to review/discuss mana whenua engagement be added for future meetings.
- **NOTED** work is underway reviewing piling design for the Inpatient Building and whether piling material can be procured locally or elsewhere, as well as the lead time for procurement.

Health & Safety & Environment:

- The Health, Safety, and Environment update was taken as read, key points from discussion:
 - o NOTED Southbase Construction have taken control of the Outpatient Building site.
 - NOTED daily site visits continue to be conducted by Andrew Holmes and RCP. Site appears well run and clean.
 - **NOTED** concerns from Tony Lloyd regarding 'O-Week' and that students may attempt to jump the fences. These concerns have been passed onto the teams managing each site.
 - NOTED Work Force Central are opening their new site office, with both main contractors represented.

Outpatient Building Update:

The RCP Outpatient Building status report was taken as read.

Financial Update:

- The financial report was taken as read.
- **DISCUSSED** the true cost of the project will not be known until 2029, current estimated completion.
- **NOTED** RLB have incorporated the \$90m savings into the financial report and are using information available within the wider RLB group to forecast runoff.
- DISCUSSED the permanent and temporary cost savings under Option 4.5a, key points to note include:
 - Pete Hodgson noted there is a public focus on the temporary cost savings, including the cold shells and PET scanner. He noted the project needs to be weary of any cuts to collaborative workspace or FF&E.
 - Tony Lloyd noted there is a lot of items that have been keep or put back in, as part of Option 4.5a, and the proposed changes remaining were those offered up by the Southern District team.
 - Sheila Barnett noted that the proposed 6% loss in collaborative workspace, as a cost saving, is not viable and all proposed collaborative workspace in the original design is still required.
 - DISCUSSED that nothing critical has been locked out of design and that some shelled spaces can be brought forward for use, except for those intended as theatres or MHSOP beds as they are occupied.
 - Dean Fraser noted that he, like Pete Hodgson, continues to be contacted about the design changes and would appreciate a quick-reference list of comments that can be used to counter misinformation.
- ACTION POINT: The Chair requested a paper be provided to the ESG outlining how the various communication teams for the project (Te Whatu Ora, mana whenua, and LAG) will be joined together and work collaboratively.
- DISCUSSED the communication strategy for the NDH project. Noting comments from Monique Fouwler that the NDH communication strategy has been developed, is in use, and agreed that congruence is required between the different communication teams/channels.



The Executive Steering Group:
NOTED the updates on progress.
Southern District Change Programme – Bimonthly Updates
Received an oral update on the Te Whatu Ora - Southern Change Programme from Hamish Brown, Interim Lead Hospital & Specialist - Southern. Key points to note from discussion:
NOTED the Outpatient Building Transition Plan is on-going.
 NOTED updated Models of Care reporting is on-going with a draft being prepared for the April meeting. The team is keen to understand who will be remaining on and joining the PSG.
DISCUSSED the new general medical ward opened on Level 6 of current hospital and that the first health hub i under construction.
DISCUSSED the difficulties experienced in current operating environment due to bed restrictions, access to medical staff, lack of D6 availability within the Southern district, as well as two recent code reds and 9 helicopte transfers.
NOTED funding was secured to stop Waitaki Oamaru Hospital from going into receivership:
 NOTED an update from Pete Hodgson regarding the ILC project, regarding the current timeline and land issues He asked John Hazeldine for assistance with progressing the Detailed Business Case before the election.
DISCUSSED comments from Pete Hodgson asking that the updates for Digital and Workforce/Organisational Change are displayed more prominently in the agenda.
ACTION POINT: Digital and Workforce & Organisational Change to be added as standing agenda items.
The Executive Steering Group members:
NOTED the update on Southern District Change Programme progress
Other Business
 NOTED the start time for the March ESG meeting is being moved to 11am, from 10:30am, due to flight availability.
The meeting closed at 11:50

Released under the

Closed Action Points:

DUE BY PRIORITY UPDATE/STATUS

Open Action Points:

REF	ITEM	FIRST RAISED	STATUS	ACTION REQUIRED	RESPONSIBLE	ACTION BY	DUE BY	PRIORITY	UPDATE/STATUS	ACTION BY
ESG-100321-06	Delegation of Authority	10/03/2021	In progress	Revised arrangements for DoA are currently being worked through with the new SRO and will be reported back on to ESG.	Te Whatu Ora	Monique F	8/07/2022 TBC	Normal	21/02/23 - Remains on hold, with no update provide in the February meeting	Monique F
ESG-160222-03	iHNZ/HNZ Transition	16/02/2022	In progress	John Hazeldine, Acting DDG Infrastructure, to invite the new HNZ leadership to a future ESG meeting to discuss future governance arrangements.	Te Whatu Ora	Monique F	твс	Normal	21/02/23 - Remains on hold. - Monique Fouwler noted the contract for the PSG Independent Chain has been sent. - Changes to goverance are still expected to be in place by March meeting - John Hazeldine noted the paper regarding governance changes has been delayed due to change in Minister of Health, and is now expected to go to the Ministers office for review by end of February.	Monique F
ESG-210223-01	Te Whatu Ora Operating Model	21/02/2023	In progress	ESG secretariat to send out the Te Whatu Ora Operating Model to ESG members.	Te Whatu Ora	Caleb Barone	28/03/2023	Normal		
ESG-210223-02	Mana Whenua Design Engagment	21/02/2023	In progress	The Chair requested a standing agenda item to review/discuss mana whenua engagement be added for future meetings.	Te Whatu Ora	Tony Lloyd	28/03/2023	Normal		
ESG-210223-03	Project Communication Alignment	21/02/2023	In progress	The Chair requested a paper be provided to the ESG outlining how the various communication teams for the project (Te Whatu Ora, mana whenua, and LAG) will be joined together and work collaboratively.	Te Whatu Ora	Monique F/ Tony Lloyd	28/03/2023	Normal		
ESG-210223-04	Digital and Workforce & Organisational Change	21/02/2023	In progress	Digital and Workforce & Organisational Change to be added as standing agenda items.	Te Whatu Ora	Tony Lloyd	28/03/2023	Normal		
		8	3103							

EXECUTIVE STEERING GROUP

Minutes

Dr Margaret WilsherTony Lloyd (NDH Programme Director, Health NZ)Dr Tony LaniganBridget Dickson (Programme Director, Southern District, Health NZ)Dr Nick BakerHealth NZ)Robert RustMatt Allen (Director, RCP)Ex officioJeremy Holman (Chief Infrastructure and Investment Off Health NZ) - Item 2Marcus Read (Director, RCP) - Item 4Darryl Haines (Principal, Warren and Mahoney) - Item 4	Date	Tuesday, 28 March 2023					
Invitees Members Evan Davies (Chair) Dr Margaret Wilsher Dr Tony Lanigan Dr Nick Baker Attendees Monique Fouwler (Acting Director Delivery - IIG, Health NZ) Dr Tony Lanigan Dr Nick Baker Tony Loyd (NDH Programme Director, Health NZ) Bick Baker Bick Lepper (GM Infrastructure Delivery, Te Wainanga - Infrastructure Commission) John Hazeidine (Chief Advisor and Group Manager - Health Infrastructure, Ministry of Health) Marcus Read (Director, RCP) - Item 4 Darryl Haines (Principal, Warren and Mahoney) - Item 5 Lance Elder (Director Digital Transformation, Southern District, Health NZ) - Item 5 Secretariat Caleb Barone (Project Coordinator, Health NZ) Warner Peel (Analyst - Health, The Treasury) 1 Welcome & Apologies Margaret Wilsher opened the meeting with karakia. Dean Fraser, Neil O'Donnell, and Sheila Barnett were noted as apologies. Jeremy Holman joined late. Register of Interests The Register of Interests was noted, and no new declarations were required. However, it was discussed and agree remove the following interests from the register: • Christohurch Hospital Redevelopment Partnership Group for Evan Davies, Margaret Wilsher, and Tony Lanigan.	Time	tion NDH PMO Boardroom - Dunedin					
Evan Davies (Chair) Monique Fouwler (Acting Director Delivery - IIG, Health NZ) Dr Margaret Wilsher Tony Lanigan Dr Tony Lanigan Dr Tony Lanigan Dr Nick Baker Baker Robert Rust Bridget Dickson (Programme Director, Southern District, Health NZ) Biake Lepper (GM Infrastructure Delivery, Te Waihanga - Infrastructure Commission) Marcus Read (Director, RCP) - Item 4 John Hazeldine (Chief Advisor and Group Manager - Health Infrastructure, Ministry of Health) Peter Hodgson (Chair, Local Advisory Group) Warner Peel (Analyst – Health, The Treasury) Secretariat Caleb Barone (Project Coordinator, Health NZ) Neila Barnett (Chair Clinical Transformation Group, Southern District, Health NZ) Margaret Wilsher opened the meeting with karakia. Dean Fraser Dean Fraser, Neil O'Donnell, and Sheila Barnett were noted as apologies. Jeremy Holman joined late. Register of Interests The Register of Interests was noted, and no new declarations were required. However, it was discussed and agree remove the following interests from the register: • Christchurch Hospital Redevelopment Partnership Group for Evan Davies, Margaret Wilsher, and Tony Lanigan. • Cepital Investment Committee for Evan Davies and Margaret Wilsher.	Location						
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 February 2023 Minutes The Executive Steering Group: ACCEPTED the 21 February 2023 minutes as a true and accurate record. NOTED overview of the Open Action Points from Tony Lloyd, Programme Director and Monique Fouwler, Acting Director Delivery: <u>ESG-100321-06 (Delegation of Authority):</u> NOTED framework for project delegations is being developed. NOTED giving delegations to contractors will be raised with the Capital and Infrastructure 	Marg Dea Reg The remo Febu The ACC NOT	 garet Wilsher opened the meeting with karakia. n Fraser, Neil O'Donnell, and Sheila Barnett were not ister of Interests Register of Interests Register of Interests was noted, and no new declarate ove the following interests from the register: Christchurch Hospital Redevelopment Partnersh Lanigan. Capital Investment Committee for Evan Davies a Ministry of Health National Asset Management F ruary 2023 Minutes Executive Steering Group: CEPTED the 21 February 2023 minutes as a true and TED overview of the Open Action Points from Tony Lie ctor Delivery: <u>ESG-100321-06 (Delegation of Authority):</u> NOTED framework for project delegation 	ions were required. However, it was discussed and agreed t ip Group for Evan Davies, Margaret Wilsher, and Tony and Margaret Wilsher. Plan (NAMP) Reference Group for Tony Lanigan. accurate record. byd, Programme Director and Monique Fouwler, Acting				

Te Whatu Ora

			near new zear
		0	DISCUSSED concerns about the number of delegation and approval points above the ESG, which are adding layers of decision making and time for decisions to be executed efficiently.
		0	NOTED there is now a general delegation policy between the Te Whatu Ora Board and the Chief Executive, which will make it easier to bring decision making to the Infrastructure and Investment Group level.
		0	DISCUSSED the Outpatient Building paper for Separable Portion 3 needing to go to the Te Whatu Ora Board and how that could cause a delay in pricing acceptance. Tony Lloyd noted there is a requirement to report to the Board for Separable Portion 3, because originally there was only 2 tranches.
		0	NOTED a comment from John Hazeldine that there is a workshop on 4 April between Te Whatu Ora and Manatu Hauora on how to work more in parallel.
	•	<u>ESG-21</u>	0223-0 (Delegation of Authority):
		0	NOTED a paper has not been prepared for this meeting, however there is a greater level of comms alignment from last month, with a more collaborative approach being undertaken.
		0	The Chair asked if a note could be produced advising how comms is being aligned.
		0	NOTED comments from Monique Fouwler that she has requested the Head of the Te Whatu Ora communications team to advise who are the key people dealing with what and when for the NDH project.
		0	NOTED Monique Fouwler and Dan Pallister-Coward are the Te Whatu Ora spokespeople for the NDH project. Pete Hodgson is the Chair and spokesperson for the Local Advisory Group (LAG)
	•	<u>ESG-16</u>	0222-03 (iHNZ/HNZ Transition):
		0	It was agreed this Action Point could be closed and any updates would be covered under the standing agenda item.
	•	<u>ESG-21</u>	0223-01 (Te Whatu Ora Operating Model):
		0	The Te Whatu Ora Operating Model document was distributed to the ESG members, it was agreed this Action Point could be closed.
	•	ESG-21	0223-02 (Mana Whenua Design Engagement):
		0	'Mana Whenua Design Engagement' has been added as a standing agenda item, it was agreed this Action Point could be closed.
	•	ESG-21	0223-04 (Digital and Workforce & Organisational Change):
		0	'Data & Digital' and 'Workforce & Organisational Change' have been added as standing agenda items, it was agreed this Action Point could be closed.
2	Te Wha	tu Ora –	Health NZ Transition Update
2	•		the Te Whatu Ora Operating Model document distributed to the ESG members was the model ed by the Infrastructure Future State Operating Model Working Group.
	•	model fo	Jeremy Holman, Chief Infrastructure and Investment Officer, is currently developing an operating or the Infrastructure and Investment Group. A draft structure was presented to staff at the recent Te Dra all staff hui.
	•		consultation on the Infrastructure and Investment Group Operating Model is expected to begin late bugh until June, with implementation of the final version most likely in August.
	•		there will be four regional infrastructure and investment leads to oversee and deliver smaller projects their regions.
	•	Fouwler	SED whether there will be local/district leads and how the projects will be linked together. Monique noted the current IIG operating model draft does not go down to that level.
	•		SED maintenance of assets will sit at a regional level, with support from local leads.
	•	-	the Te Whatu Ora Board is the PCBU for Te Whatu Ora.
	•	underwa	developing project governance for Tranche 1 of the Regional Hospital Redevelopment Programme is ay, with both SROs identified.
	•	DISCUS	SED progress on new project governance for the New Dunedin Hospital project, key points to note

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	include:
	• NOTED this is the last meeting for the current Executive Steering Group.
	 DISCUSSED the roles and expertise of the new Project Steering Group (PSG).
	 NOTED Dan Pallister-Coward, Te Whatu Ora HSS Regional Director – Te Wai Pounamu, will be the Hospital Specialist Services (HSS) representative on the PSG and accountable for Models of Care, supported by Bridget Dickson.
	• NOTED the appointment letters and invites for PSG members are being drafted.
	 DISCUSSED having a workshop/induction prior to the first PSG meeting to bring all members up to date with the project.
	 DISCUSSED concerns that the changes to project governance affects the independent oversight the current ESG provides, due to the new PSG having more Te Whatu Ora employees as members.
	• NOTED the new structure is the preferred structure for major projects moving forward.
	• DISCUSSED concerns that how detailed into transformation/transition the PSG will need to be is unknown and whether oversight only applies up until the building/s is complete or beyond. Monique Fouwler commented it is only until the building/s is completed and it is not the intention for the PSG to be responsible for transformation beyond the build.
	Jeremy Holman joined the meeting at 11:49am
	The Executive Steering Group members:
	NOTED the update from Monique Fouwler.
3	Programme Director Update
	Inpatient Building Update:
	The RCP Inpatient Building status report was taken as read.
	 Received an update from Tony Lloyd, key points to note include:
	 Ceres have established themselves on site and are operating well.
	 Currently 6 weeks ahead of schedule for height consent.
	 DISCUSSED pathology, key points to note include:
	 The project team and Te Whatu Ora Southern are working together to bring in a third party to review the pathology area.
	 The current pathology contract holder, Southern Community Labs, has been involved in meetings around acute services and tests.
	 The Te Whatu Ora Southern team recently went to Queensland and saw the new equipment being used and are now discussing options with the FFE team. Margaret Wilsher commented most multifunctional machines are leased, so would be added Opex costs.
	An independent review is underway on the use of the smaller bedside machines for test, rather than a lab. The report is expected within a month.
	DISCUSSED it is not possible to make the machines earthquake resilient, to the same standard as the building.
	Round 2 of user groups has started and is going well, with good feedback being received. Bridget Dickson agreed and noted pathology is the main concern that is being brought up by users.
	 Revised fee proposals have been received from main consultants and are being worked through by RCP and RLB.
	 Discussions are continuing with CPB about current and future contracting, with another meeting scheduled for 1 April.
	• Work is underway for the Dairy Building with a proposal sent to CPB for consideration.
	 DISCUSSED all of the Dairy Building is planned to be used, first by CPB as office space during the build then converted to collaborative space etc for Te Whatu Ora Southern.
	Health & Safety & Environment:

• The Health, Safety, and Environment update was taken as read.

Te Whatu Ora

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<u> </u>	tpatient Building Update:
•	The RCP Outpatient Building status report was taken as read.
•	9(2)(i)
•	DISCUSSED project delegation and whether the team have authority to deal with the EOT claim promptly. Tony Lloyd advised the EOT claim is being actioned as per the process set in the contract, which is sending it to the ETC first then once a decision is made it will be brought to ESG for agreement.
•	Monique Fouwler noted the project team can sign off on the claim if non-financial, but anything financial needs to go to herself or Jeremy Holman for sign off.
<u>Fi</u>	ancial Update:
•	The financial report was taken as read.
•	DISCUSSED the Outpatient Building cost is higher than expected and a paper detailing scale of the cost is being written then will be presented to the PSG for endorsement. The Chair noted the paper could be distributed via email for endorsement, earlier than the next meeting, if needed.
•	Robert Rust noted the current presentation of the risk register is confusing and cannot understand why some significant items for the Inpatient Building have been excluded. Tony Lloyd advised he will discuss with RLB and have the register updated and better presented at the next meeting.
The	Executive Steering Group:
•	NOTED the updates on progress.
Man	Whenua Design Engagement
Marc	us Read and Darryl Haines joined the meeting at 12:22pm
•	First meeting next week with Aukaha (representing local mana whenua). Meeting will be about what can be put back in to incorporate the cultural narrative.
	ived an oral update on the Mana Whenua Design Engagement from Marcus Read (RCP) and Darryl Haines ren and Mahoney). Key points to note from discussion:
•	Outpatient Building:
	 NOTED nearing the final stages for the facades. The patterns for the western louvres and SS panels are being sampled and layout of the white ceramic textured tiles is being explored.
	 NOTED Aukaha, RCP, and Warren and Mahoney meet last week to work through the next steps for design input into the fitout, including ceiling patterns, carved column, and feature timber wall.
•	Inpatient Building:
	 NOTED following the optimisation instruction at the end of 2022, a codesign collaboration has been agreed with Aukaha for the year ahead.
	 NOTED meetings were previously held with Aukaha on 10 August and 29 September 2022 to discuss optimisation and mana whenua expressed desire to be located on the ground floor, adjacent the North entry.
	NOTED the façade is being co-designed with the Outpatient Building and will have two interlinking panels.
	 NOTED mana whenua remain comfortable with the Whakatuputupu narrative despite the pavilion building being deleted.
The	Chair opened the floor for wider discussion. Key points to note include:
•	NOTED comments from Marcus Read that 70% of what was previously designed incorporating mana whenua remains and mana whenua have agreed that the cultural narrative did not need to be rewritten.
•	DISCUSSED how mana whenua is being engaged by the Southern PMO. Bridget Dickson noted the chairs of the local rūnaka have been involved in the development of the Outpatient Building transition plan, and over the last year members of Aukaha have attended meetings and are working with the team to ensure treaty obligations are met.
Jere	ny Holman left the meeting at 12:25pm

Marcus Read and Darryl Haines left the meeting at 12:33pm

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	The Executive Steering Group members:
	NOTED the update on design engagement with Mana Whenua.
5	Data and Digital Update
	Patrick Ng and Lance Elder joined the meeting at 12:35pm
	Received an oral update on Data & Digital from Patrick & Lance. Key points to note from discussion:
	NOTED the Minister of Health has received and read a paper that requests of funding for stage 1 of the digital programme, which has been aligned to the completion of the Outpatient Building.
	 NOTED the Minister raised questions concerning Te Whatu Ora's commitment to investing in the future transforming digital solutions, which were answered by members of the national Data and Digital team.
	 NOTED following a Request for Proposal for a digital infrastructure delivery partner (DIDP), shortlisting and the submission of a finalised offer, a preferred DIDP has been selected and contract negotiations are underway.
	 NOTED What is currently being used and how it could be scaled for NDH is being reviewed. The team have received guidance from members of the national Data and Digital team to identify what core clinical solutions should be invested in for the Inpatient Building.
	• NOTED that there is currently a gap as nobody currently has or uses a contemporary electronic medical record (EMR). How this is invested in nationally will be a key focus.
	The Chair opened the floor for wider discussion. Key points to note include:
	 DISCUSSED the gradient of change for the Southern team, noting current guidance and funding received was to adapt the existing technology to suit the Outpatient Building and the Inpatient Building will be part of the national work on core clinical solutions for new hospital buildings.
	 DISCUSSED if new systems are installed, they need to be checked prior with current FFE equipment for compatibility issues.
	 NOTED WPS, Peter Ganter, and Lance Elder are working collaboratively on hospital build programme as current design development work is underway.
	 DISCUSSED that storage of paper medical records is not part of the new build. The Southern team have been scanning new paperwork, using the same system previously implemented in 2017 at Te Whatu Ora Te Tauihu (Nelson Marlborough), and look to be fully digital by mid-year.
	 DISCUSSED a set of base documents for each workstream under the new PSG needs to be part of induction for all members.
	Patrick Ng and Lance Elder left the meeting at 12:50pm
	The Executive Steering Group members:
	NOTED the update on Data and Digital.
6	Workforce & Organisational Change Update
	Received an oral update on workforce and organisational change from Hamish Brown, Interim Lead Hospital & Specialist - Southern. Key points to note from discussion:
	 NOTED development of the Outpatient Building Transition programme is on-going.
	• NOTED the Business Case being drafted in preparation to go to the Te Whatu Ora Board, with what additional workforce will be required for a 'minimal', 'good', or 'full' opening.
	 NOTED an area of risk for workforce is lack of MRT and anaesthetist techs, which now require lengthier courses to become accredited. The Southern team have engaged the Te Whatu Ora Workforce Lead, Ailsa Claire, about this.
	• NOTED acute services are currently being transitioned to extend day operating hours.
	• NOTED rural areas are at risk if after hour clinics are made optional as it flows onto the hospitals.
	• NOTED the design of the Interprofessional Learning Centre (ILC) continues and the land lease has been sorted.
	The Executive Steering Group members:
	NOTED the update on Workforce and Organisational Change.
7	Other Business

Te Whatu Ora

- DISCUSSED the upcoming April and May meeting dates. It was decided to cancel the April meeting and . reschedule the May meeting, noting this would be the first meeting for the new governance group.
- DISCUSSED Helen Telford's contract ended in February and going forward there will be three SROs, one per workstream, who will sit on the new Project Steering Group.
- The Chair advised he thanked Helen Telford, on behalf of the ESG, for her contribution which the NDH project . has benefited from and wished her well on his next steps.

The meeting closed at 13:09

Released under the Official Information Act, 1982

Closed Action Points:

REF	ITEM	FIRST RAISED	STATUS	ACTION REQUIRED	RESPONSIBLE	ACTION BY	DUE BY	PRIORITY		ACTION BY DATE CLOSEE
ESG-160222-03	iHNZ/HNZ Transition	16/02/2022	In progress	John Hazeldine, Acting DDG Infrastructure, to invite the new HNZ leadership to a future ESG meeting to discuss future governance arrangements.	Te Whatu Ora	Monique F	TBC	Normal	28/03/23 - It was agreed this Action Point could be closed and any updates would be covered under the standing agenda item.	28/03,
ESG-210223-01	Te Whatu Ora Operating Model	21/02/2023	In progress	ESG secretariat to send out the Te Whatu Ora Operating Model to ESG members.	Te Whatu Ora	Caleb Barone	28/03/2023	Normal	28/03/23 - The Te Whatu Ora Operating Model document was distributed to the ESG members, it was agreed this Action Point could be closed.	28/03,
ESG-210223-02	Mana Whenua Design Engagment	21/02/2023	In progress	The Chair requested a standing agenda item to review/discuss mana whenua engagement be added for future meetings.	Te Whatu Ora	Tony Lloyd	28/03/2023	Normal	28/03/23 Mana Whenua Design Engagement has been added as a standing agenda item, it was agreed this Action Point could be closed.	28/03,
ESG-210223-04	Digital and Workforce & Organisational Change	21/02/2023	In progress	Digital and Workforce & Organisational Change to be added as standing agenda items.	Te Whatu Ora	Tony Lloyd	28/03/2023	Normal	28/03/23 - Data & Digital and Workforce & Organisational Change have been added as standing agenda items, it was agreed this Action Point could be closed.	28/03
Open /	Action Points	5:					210			
REF	ITEM	FIRST RAIS	ED STATU	S ACTION REQUIRED	RESPONS	IBLE ACTION	BY D	UE BY PF	RIORITY UPDATE/STATUS	ACTIO

Open Action Points:

REF	ITEM	FIRST RAISED	STATUS	ACTION REQUIRED	RESPONSIBLE	ACTION BY	DUE BY	PRIORITY	UPDATE/STATUS	ACTION BY
ESG-100321-06	Delegation of Authority	10/03/2021	In progress	Revised arrangements for DoA are currently being worked through with the new SRO and will be reported back on to ESG.	Te Whatu Ora	Monique F	8/07/2022 TBC	Normal	28/03/23 - NOTED framework for project delegations is being developed. - NOTED giving delegations to contractors will be raised with the Capital and Infrastructure Committee, noting there are some Te Whatu Ora Board members who are uncomfortable with giving contractors delegations.	Monique F
ESG-210223-03	Project Communication Alignment	21/02/2023	In progress	The Chair requested a paper be provided to the ESG outlining how the various communication teams for the project (Te Whatu Ora, mana whenua, and LAG) will be joined together and work collaboratively.	Te Whatu Ora	Monique F/ Tony Lloyd	28/03/2023 TBC	Normal	28/03/23 - NOTED a paper has not been prepared for this meeting, however there is a greater level of comms alignment from last month, with a more collaborative approach being undertaken. - The Chair asked if a note could be produced advising how comms is being aligned.	Monique F
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