

18 July 2019

[REDACTED]
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Re: OIA request – Copy of the Board’s written minutes regarding NCHIP and CHIL Hub

Thank you for your Official Information Act request received 21 June 2019 seeking the following of Auckland and Waitematā District Health Boards:

1. *The Board's written minutes in respect of the decision to bring NIR inhouse to the DHBs as part of establishing the NCHIP co-ordination hub*
2. *WDHB/ADHB written minutes of the decision regarding the consultation process for the establishment of the CHIL Hub. (We are a little confused by the change of terminology. Is this the same initiative, with a name change or two different initiatives?)*
3. *The latest progress reports for the implementation of NCHIP (have them up to 31 March 2019).*

In response, the Board of Auckland District Health Board considered both the CHIL-Hub consultation and the decision to repatriate the NIR to DHB management at the same meeting on 22 May 2019. The minutes of the decision are attached.

Waitematā DHB Board also considered both matters in tandem at the meeting of 29 May 2019. The minutes regarding the decision of that meeting are attached.

We recognise that terminology can be confusing. The CHIL-Hub (Child Health Information Link Hub) is the preliminary name given to the co-ordination service which will utilise, and administer, NCHIP (National Child Health Information Platform). The DHBs consulted on the CHIL-Hub name as well as the model of service and there may be more changes to come in the future as the service structure is established and evolves.

The NCHIP progress reports from April 2019 onwards are also attached as requested. It is not uncommon for the development of IT projects to ebb and flow, with some variation to plan often encountered. As such, you will observe that the attached progress reports demonstrate a significant improvement in the implementation status of this project between April and June 2019. I trust that this information meets your requirements.

Yours sincerely



Tim Wood
Deputy Director Funding
Auckland and Waitematā DHBs



Confidential Board Minute Extract

From the meeting held Wednesday, 22 May 2019

Resolution

9.4 Establishment of Child Health Information Platform – Coordination Hub

That the Board:

1. Note that the District Health Boards (DHBs) of Auckland, Waitematā and Northland approved implementation of a National Child Health Information Platform (NCHIP) and that successful delivery requires the establishment of a Coordination Hub to drive equity of child health services delivery across the 29 universal milestone events in New-born Hearing, Enrolment in Primary Care, Well Child Tamariki Ora, Oral Health, the B4 School Check and Immunisation.
2. Note that consultation on the Coordination Hub has now been undertaken including extended timelines, and an additional meeting with HealthWEST to gather any further feedback following preparation of the draft report.
3. Note that overall, feedback was strongly supportive of NCHIP, but more cautious about the effects of any change on immunisation only, particularly from HealthWEST. Most other provider groups were strongly positive about the potential of NCHIP and the Coordination Hub for improved delivery of other universal child health services.
4. Note that an independent internal audit was undertaken in April 2019 which concluded that: “the DHB processes relating to the proposed future delivery of the NIR service inclusive of NCHIP considerations, have been reasonable, unbiased and sufficiently comprehensive” and that there was no evidence of “predetermination”.
5. Approve the recommended option to progress the establishment of the Coordination Hub inclusive of the NIR and for the OIS service to remain with HealthWEST.
6. Confirm transition costs for the DHBs of \$235,000 (\$117,500 per DHB) as previously approved by the Board.
7. Approve the Funder extending the current contract for a period of 4 months to 31 October 2019, and issuing an exit notice for NIR.
8. Approve the Funder entering into contract negotiations with HealthWEST for providing the OIS service from 01 November 2019
9. Note further work will be undertaken with HealthWEST, via an agreed mediator, to understand the sustainability of the provider and developing options for further consideration by the Board.

Carried

Approved for release:

Corporate Business Manager:

Marlene Skelton

Date: Wednesday, 12 June 2019

At its meeting on 29 May 2019 (public excluded session), the Board resolved:

Establishment of Child Health Information Platform – Coordination Hub

Resolution (Moved Kylie Clegg/Seconded Edward Benson-Cooper)

That the Board:

- 1. Note that the District Health Boards (DHBs) of Auckland, Waitematā and Northland approved implementation of a National Child Health Information Platform (NCHIP) and that successful delivery requires the establishment of a Coordination Hub to drive equity of child health services delivery across the 29 universal milestone events in Newborn Hearing, Enrolment in Primary Care, Well Child Tamariki Ora, Oral Health, the B4 School Check and Immunisation.**
- 2. Note that consultation on the Coordination Hub has now been undertaken including extended timelines, and an additional meeting with HealthWEST to gather any further feedback following preparation of the draft report.**
- 3. Note that overall, feedback was strongly supportive of NCHIP, but more cautious about the effects of any change on immunisation only, particularly from HealthWEST. Most other provider groups were strongly positive about the potential of NCHIP and the Coordination Hub for improved delivery of other universal child health services.**
- 4. Note that an independent internal audit was undertaken in April 2019 which concluded that: “the DHB processes relating to the proposed future delivery of the NIR service inclusive of NCHIP considerations, have been reasonable, unbiased and sufficiently comprehensive” and that there was no evidence of “predetermination”.**
- 5. Approve the recommended option to progress the establishment of the Coordination Hub inclusive of the NIR and for the OIS service to remain with HealthWEST.**
- 6. Confirm transition costs for the DHBs of \$235,000 (\$117,500 per DHB) as previously approved by the Board.**
- 7. Approve the Funder extending the current contract for a period of 4 months to 31 October 2019 (with the ability to extend the contract for an additional 4 months based on the sustainability review being undertaken), and issuing an exit notice for NIR.**
- 8. Approve the Funder entering into contract negotiations with HealthWEST for providing the OIS service from 01 November 2019.**
- 9. Note further work will be undertaken, including a facilitated discussion on sustainability, with HealthWEST to understand the sustainability of the provider. If sustainability issues are identified options will be returned to the Board on how best to address these.**

Carried

SENIOR RESPONSIBLE OWNER (SRO) STATUS SUMMARY REPORT

Report reflects the most up-to-date and relevant information available on the:

WT-16-C-03-039

NCHIP Northern Regional NCHIP Implementation

30 April 2019

		Project stage	Project On Hold?	Health Outcomes	Patient Experience	Access, Safety & Effectiveness	Efficiency & Productivity	Future Proofing	Project aligned to different objectives
CAPEX or OPEX project <small>(is majority of funding CAPEX or OPEX?)</small>	CAPEX	Build & Go Live	No	40%	10%	40%	10%	0%	No
Senior Responsible Owner (SRO)	Tim Jelleyman	RPT rating <small>(as per Risk Profile Tool)</small>	RPT-2	Project description Collation of children milestone health data across the region to increase planned childhood interventions.					
Project Manager	John Cox	Delivery confidence rating <small>(only select if the project has been through a Quality Review)</small>	Possible	Approved budget <small>As per Business Case, incl. approved contingency & approved Change Requests (NZD '000)</small>	\$1,545	Approved budget - Oracle <small>Includes contingency (NZD '000)</small>	\$722	Programme	Regional project comprising funding from NDHB, WDHB and ADHB
Change Lead	Seema Kanwar	Project end date <small>(Build & Go-Live complete)</small>	30 June 2019	Spend to Date <small>Includes any contingency spend (NZD '000)</small>	\$987	Approved Financial Benefits	2030		
Division / Service <small>(deriving the most benefits from project)</small>	Child, Women & Family								
Facilities & Development Component <small>(does the project have an F&D component?)</small>	Yes								

Overall Status Update as at 30-Apr-2019

Please fill out the Go-To-Green Plan tab

April overall RAG status

R

March overall RAG status

R

SRO Commentary

The project is well into the development and delivery stage.
 Contractual: SoWs now in place for all development work that is underway. All SaaS agreements signed off. PMHN Services agreement reviewed and awaiting hA FPSC feedback (interim SoW in place).
 Technical: Development work on the MVP1 enhancements continues. NCHIP application is taking shape but there are some major deficiencies in the range of functionality provided. Orion has proposed delivery dates though until March 2020. Extract of registration and milestone data from NR DHBs systems underway. PMHN development work prioritised and underway.
 Users and Providers: Contact has been made with all data providers. No real engagement with NCHIP clinical users as yet.
 Service Delivery: Continuing to work through the long list of data share agreements. Progress is slow but steady. About 90% complete. Recruitment of the NCHIP Functional Administrator is underway, 9 application received. Awaiting outcome of consultation process prior to commencing this work ADHB/WDHB.
 Overall: Status of the project is Red in view current (and long term) deficiencies and accumulated delays in delivery of some other workstreams. Unable to accommodate proposed software delivery times within budget or timeframe. Steering Group considering options. A decision where or not to continue with the project will be made on 21st May, ahead of the ADHB Board meeting.

Project health indicator	April	March	Status update <small>(only for Amber or Red indicators)</small>
Cost	A	G	Extending duration of the project to accommodate delayed deliverables is not possible within current budget without further compromising scope.
Scope	R	R	Functionality associated with the Midlands version of NCHIP along with that included as MVP1enhancements not available in current project duration.
Schedule	R	R	Timeframes for delivery of a fir for purpose solution exceed the current project duration by at least six months.
Benefits	G	G	
Risks and Issues	A	A	See details below.
Resources	G	G	
Change & Stakeholder Mgt	G	G	
Governance	G	G	

Top 3 Issues

Issue type	Issue ID	Issue description	Current impact	Issue owner
Project	48	Delay in finalising component SoWs	High	John Cox
Project	49	Confidence in quality of Orion deliverables	High	John Cox
Project	51	NCHIP lacks key functionality	High	John Cox

Top 3 Risks

Risk category	Risk ID	Risk description	Risk rating	Risk owner
Information Systems	R009	Enhancements <- requirements	Critical	John Cox
Financial	R025	OH uncertainty -> increased costs	High	John Cox
Information Systems	R010	Fragmented go live->reduced quality	High	John Cox

WT-16-C-03-039

NCHIP Northern Regional NCHIP Implementation

30 April 2019

Senior Responsible Owner (SRO) Tim Jelleyman

Project stage Build & Go Live

Approved budget (NZD '000) \$1,545

Project Manager John Cox

Change Lead Seema Kanwar

RPT rating (as per Risk Profile Tool) RPT-2

Division / Service (deriving the most benefits from project) Child, Women & Family




Delivery confidence rating (only select if the project has been through a Quality Review) Possible

Project end date (Stage Gate 4 complete) 30 June 2019

RAG Status Details

April overall RAG status		March overall RAG status		Green RAG Target Date	31 May 2019	
R		R				
Project health indicator	April	March	Status update <small>(only for Amber or Red indicators)</small>	Go-to-Green Actions	Target Date <small>(all actions complete)</small>	Action Owner(s)
Cost	A	G	Extending duration of the project to accommodate delayed deliverables is not possible within current budget without further compromising scope.			
Scope	R	R	Functionality associated with the Midlands version of NCHIP along with that included as MVP1enhancements not available in current project duration.	<ul style="list-style-type: none"> - Functional stock take completed - major deficiencies identified. - Proposal obtained from Orion Health regarding delivery; timeframes unacceptable. - Alternative delivery options to be considered - Focus on delivery of end to end solution using available componets as a soft go live. 	31 May 2019	John Cox
Schedule	R	R	Timeframes for delivery of a fir for purpose solution exceed the current project duration by at least six months.	<ul style="list-style-type: none"> - Need to consider altenative delivery timeframes - Complete sanity check of solution to ensure fit for purpose will be delivered. - Negotiate Change Request with Orion Health 	31 May 2019	John Cox
Benefits	G	G	0			
Risks and Issues	A	A	See details below.			
Resources	G	G	0			
Change & Stakeholder Mgt	G	G	0			
Governance	G	G	0			

RED	AMBER	GREEN
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Overall RAG status	<p>There are significant risks or issues with the project and these are threatening the project's success. Senior management review of these is required and intervention may be necessary.</p> <p>1+ RED or 4+ AMBER health indicators</p> 	<p>There are moderate risks or issues present in the project which require senior management monitoring. The project's steering committee is currently managing these.</p> <p>1-3 AMBER health indicators</p> 	<p>There are minimal or nil risks or issues in the project. The project is currently on track to be a success.</p> <p>All health indicators are GREEN</p> 
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Cost	Project cost at completion is forecast to be more than 15% over the approved budget	Project cost at completion is forecast to be more than 5%, but less than 15%, over the approved budget.	Project cost at completion is forecast to be within 5% of the approved budget.
Scope	Significant changes (greater than 15%) to the project's scope are expected.	Moderate changes (more than 5% but less than 15%) to the project's scope are expected	The project's scope is expected to be delivered to within 5% of the original scope definition.
Schedule	One or more milestones are likely to be missed and this is expected to have a significant impact on the project.	One or more milestones are likely to be missed and this is expected to have a moderate impact on the project.	No milestones are expected to be missed, or any missed milestones are not expected to impact the project in any way.
Benefits	The project is expecting to deliver 70% or less of its stated benefits.	The project is expecting to deliver between 70% and 90% of its stated benefits.	The project is expecting to deliver 90% or more of its stated benefits.
Risks and Issues	Risks and/or issues are present which threaten a significant impact on the project	Risks and/or issues are present which threaten a moderate impact on the project	There are minimal risks and/or issues present and the impact of these is expected to be minimal.
Resources	There are resource management issues which are expected to have a significant impact on the project.	There are resource management issues which are expected to have a moderate impact on the project.	There are minimal or nil resource management issues and the impact of these is expected to be minimal.
Change & Stakeholder Management	There are stakeholder or change management issues which are expected to have a significant impact on the project.	There are stakeholder or change management issues which are expected to have a moderate impact on the project.	There are minimal or nil stakeholder or change management issues and the impact of these is expected to be minimal
Governance	There are governance issues which are expected to have a significant impact on the project.	There are governance issues which are expected to have a moderate impact on the project.	There are minimal or nil governance issues and the impact of these is expected to be minimal.

- Resources Health Indicator refers to the project's management of, and timely access to, personnel (internal or external), specialist expertise, approved funds, test environments and facilities.
- Stakeholder and change management refers to the presence and effective management of stakeholder engagement, change management, future-state planning, and go-live preparations.
- Governance of the project refers to the formation or operation of the steering committee; the ability of the SRO to operate effectively; the project's compliance with key governance TORs and governance processes (including business cases, status reporting, change requests, quality assurance reviews and health-checks)
- RAG statuses are to be determined by the Project Manager in agreement with the Senior Responsible Owner (SRO) and Programme Manager where applicable
- All dimensions will be measured against latest version of the approved Business Case (including all approved Change Requests)

• [The project Risk Profile Tool \(RPT\) can be found here in the PSO website](#)

- WDH B strategic objectives descriptions:

Title	Description
Health Outcomes	<p>The extent to which the project contributes to improving wider health outcomes, for the long term.</p> <p>Includes: prevention; early intervention; being proactive to needs; ensuring the best health outcomes; promoting wellness; focusing on communities with the greatest health challenges to reduce inequalities.</p> <p>Excludes: treatment and recovery this is covered in 'Access, safety and effectiveness'</p>
Patient Experience	<p>The extent to which the project contributes to maintaining or enhancing the patient experience, once the patient has accessed Waitemata DHB.</p> <p>Includes: whole patient and whānau experience; improving the patient journey; supporting patient engagement; patient-centred care. This only considers the patient experience after access (patient experience of access is considered under 'Access, safety and effectiveness'). Response to patient/community feedback, consideration of impact/risk on reputation in community.</p> <p>Excludes: patient safety</p>
Access, Safety and Effectiveness	<p>The extent to which the project contributes to improving access to care, or increasing effectiveness of patient care and safety of all people accessing WDH B. The extent to which the community has been engaged in designing solutions and understanding what matters to them.</p> <p>Includes: ensuring the best, correct treatment; not negatively impacting patients; reducing recovery times; reducing health inequalities (ethnicity, cultural, social, economic, gender) by enabling access to priority populations.</p>
Efficiency and productivity	<p>The extent to which the project contributes to Waitemata DHB being a well-run, efficient and productive business.</p> <p>Includes: reducing cost; improving process; managing demand; creating economies of scale; making best use of existing assets and resources.</p>
Future proofing	<p>The extent to which the project contributes to having Waitemata DHB set up to be sustainable for the long-term future (5 years and beyond).</p> <p>Includes: attracting and retaining the right people; staff satisfaction; providing the right assets at the right time in the right place; supporting staff learning and capability development; ensuring flexibility to meet changing future needs; setting Waitemata DHB up for future growth; modernisation.</p>

SENIOR RESPONSIBLE OWNER (SRO) STATUS SUMMARY REPORT

Report reflects the most up-to-date and relevant information available on the:

WT-16-C-03-039

NCHIP Northern Regional NCHIP Implementation

31 May 2019

		Project On Hold?	Health Outcomes	Patient Experience	Access, Safety & Effectiveness	Efficiency & Productivity	Future Proofing	Project aligned to different objectives	
CAPEX or OPEX project <small>(is majority of funding CAPEX or OPEX?)</small>	CAPEX	Build & Go Live	No	40%	10%	40%	10%	0%	No
Senior Responsible Owner (SRO)	Tim Jelleyman	RPT rating <small>(as per Risk Profile Tool)</small>	RPT-2	Project description Collation of children milestone health data across the region to increase planned childhood interventions.					
Project Manager	John Cox	Change Lead	Seema Kanwar	Approved budget <small>As per Business Case, incl. approved contingency & approved Change Requests (NZD '000)</small>	\$1,545	Approved budget - Oracle <small>Includes contingency (NZD '000)</small>	\$722	Programme	Regional project comprising funding from NDHB, WDHB and ADHB
Division / Service <small>(deriving the most benefits from project)</small>	Child, Women & Family	Delivery confidence rating <small>(only select if the project has been through a Quality Review)</small>	Likely	Spend to Date <small>Includes any contingency spend (NZD '000)</small>	\$1,078	Approved Financial Benefits	2030	Projects within this programme	N/A
Facilities & Development Component <small>(does the project have an F&D component?)</small>	Yes	Project end date <small>(Build & Go-Live complete)</small>	30 June 2019	Forecast At Completion <small>As per Approved Budget, incl. any projected contingency spend (NZD '000)</small>	\$1,545	<small>As per Business Case, including any approved Change Requests (NZD '000)</small>			

Overall Status Update as at 31-May-2019

Please fill out the Go-To-Green Plan tab

May overall RAG status

R

April overall RAG status

R

SRO Commentary

The project is well into the development and delivery stage.
 Contractual: SoWs now in place for all development work that is underway. All SaaS agreements signed off. PMHN Services agreement reviewed and awaiting hA FPSC feedback (interim SoW in place).
 Technical: Development work on the MVP1 enhancements continues. NCHIP application has been demonstrated. A plan is in place to address the major deficiencies previously identified which will extend the duration of the project out to the end of the year. PMHN development work prioritised and underway.
 Users and Providers: Contact has been made with all data providers. No real engagement with NCHIP clinical users as yet.
 Service Delivery: Continuing to work through the long list of data share agreements. Progress is slow but steady. About 90% complete. Recruitment of the NCHIP Functional Administrator has been completed with a offer being sent to the preferred candidate. Awaiting outcome of consultation process prior to commencing this work ADHB/WDHB.
 Overall: Following a demonstration of the application and further discussions with Orion Health regarding the missing functionality, it was agreed to continue the project in its current form. The commercial agreement with Orion will be modified as outlined in the Change Request. The Status of the project is currently Red, but with approval of the change documentation being tabled at the meeting the status should revert to Amber.

Project health indicator	May	April	Status update <small>(only for Amber or Red indicators)</small>
Cost	A	A	Following discussions with Orion Health an approach to funding of the project has been agreed. Green status once change documentation is approved
Scope	A	R	Missing functionality has been identified and a delivery plan agreed. Green status once change documentation is approved.
Schedule	A	R	Revised delivery schedule has been prepared. Green status once change documentation is approved.
Benefits	G	G	
Risks and Issues	A	A	See details below.
Resources	G	G	
Change & Stakeholder Mgt	G	G	
Governance	G	G	

Top 3 Issues

Issue type	Issue ID	Issue description	Current impact	Issue owner
Project	48	Delay in finalising component SoWs	High	John Cox
Project	49	Confidence in quality of Orion deliverables	Medium	John Cox

Top 3 Risks

Risk category	Risk ID	Risk description	Risk rating	Risk owner
Information Systems	R001	Costs exceeded due to delays	Critical	John Cox
Financial	R025	OH uncertainty -> increased costs	Critical	John Cox
Information Systems	R010	Fragmented go live->reduced quality	High	John Cox

GO-TO-GREEN PLAN

Report reflects the most up-to-date and relevant information available on the:

WT-16-C-03-039

NCHIP Northern Regional NCHIP Implementation

31 May 2019

Senior Responsible Owner (SRO) Tim Jelleyman

Project stage Build & Go Live

Approved budget
(NZD '000) \$1,545

Project Manager John Cox

Change Lead Seema Kanwar

RPT rating
(as per Risk Profile Tool) RPT-2




Division / Service
(deriving the most benefits from project) Child, Women & Family

Delivery confidence rating
(only select if the project has been through a Quality Review) Likely

Project end date
(Stage Gate 4 complete) 30 June 2019

RAG Status Details

May overall RAG status		April overall RAG status		Green RAG Target Date	31 May 2019	
R		R				
Project health indicator	May	April	Status update <small>(only for Amber or Red indicators)</small>	Go-to-Green Actions	Target Date <small>(all actions complete)</small>	Action Owner(s)
Cost	A	A	Following discussions with Orion Health an approach to funding of the project has been agreed. Green status once change documentation is approved	- (Complete) Revised budget prepared based on agreement with Orion Health - Prepare change documentation	31 May 2019	John Cox
Scope	A	R	Missing functionality has been identified and a delivery plan agreed. Green status once change documentation is approved.	- (Complete) Functional stock take completed - major deficiencies identified. - (Complete) Revised proposal obtained from Orion Health regarding delivery; timeframes now acceptable. - Prepare change documentation	31 May 2019	John Cox
Schedule	A	R	Revised delivery schedule has been prepared. Green status once change documentation is approved.	- (Complete) Alternative delivery timeframes reviewed and agreed. - (Complete) Demonstration of solution to ensure that it is fit for purpose. - (Complete) Negotiated Change Request with Orion Health - Prepare change documentation	31 May 2019	John Cox
Benefits	G	G	0			
Risks and Issues	A	A	See details below.			
Resources	G	G	0			
Change & Stakeholder Mgt	G	G	0			
Governance	G	G	0			

	RED	AMBER	GREEN
Overall RAG status	<p>There are significant risks or issues with the project and these are threatening the project's success. Senior management review of these is required and intervention may be necessary.</p> <p>1+ RED or 4+ AMBER health indicators</p> 	<p>There are moderate risks or issues present in the project which require senior management monitoring. The project's steering committee is currently managing these.</p> <p>1-3 AMBER health indicators</p> 	<p>There are minimal or nil risks or issues in the project. The project is currently on track to be a success.</p> <p>All health indicators are GREEN</p> 

Cost	Project cost at completion is forecast to be more than 15% over the approved budget	Project cost at completion is forecast to be more than 5%, but less than 15%, over the approved budget.	Project cost at completion is forecast to be within 5% of the approved budget.
Scope	Significant changes (greater than 15%) to the project's scope are expected.	Moderate changes (more than 5% but less than 15%) to the project's scope are expected	The project's scope is expected to be delivered to within 5% of the original scope definition.
Schedule	One or more milestones are likely to be missed and this is expected to have a significant impact on the project.	One or more milestones are likely to be missed and this is expected to have a moderate impact on the project.	No milestones are expected to be missed, or any missed milestones are not expected to impact the project in any way.
Benefits	The project is expecting to deliver 70% or less of its stated benefits.	The project is expecting to deliver between 70% and 90% of its stated benefits.	The project is expecting to deliver 90% or more of its stated benefits.
Risks and Issues	Risks and/or issues are present which threaten a significant impact on the project	Risks and/or issues are present which threaten a moderate impact on the project	There are minimal risks and/or issues present and the impact of these is expected to be minimal.
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- RAG statuses are to be determined by the Project Manager in agreement with the Senior Responsible Owner (SRO) and Programme Manager where applicable
- All dimensions will be measured against latest version of the approved Business Case (including all approved Change Requests)
- [The project Risk Profile Tool \(RPT\) can be found here in the PSO website](#)
- WDHB strategic objectives descriptions:

Title	Description
Health Outcomes	The extent to which the project contributes to improving wider health outcomes, for the long term. Includes: prevention; early intervention; being proactive to needs; ensuring the best health outcomes; promoting wellness; focusing on communities with the greatest health challenges to reduce inequalities. Excludes: treatment and recovery this is covered in 'Access, safety and effectiveness'
Patient Experience	The extent to which the project contributes to maintaining or enhancing the patient experience, once the patient has accessed Waitemata DHB. Includes: whole patient and whānau experience; improving the patient journey; supporting patient engagement; patient-centred care. This only considers the patient experience after access (patient experience of access is considered under 'Access, safety and effectiveness'). Response to patient/community feedback, consideration of impact/risk on reputation in community. Excludes: patient safety
Access, Safety and Effectiveness	The extent to which the project contributes to improving access to care, or increasing effectiveness of patient care and safety of all people accessing WDHB. The extent to which the community has been engaged in designing solutions and understanding what matters to them. Includes: ensuring the best, correct treatment; not negatively impacting patients; reducing recovery times; reducing health inequalities (ethnicity, cultural, social, economic, gender) by enabling access to priority populations.
Efficiency and productivity	The extent to which the project contributes to Waitemata DHB being a well-run, efficient and productive business. Includes: reducing cost; improving process; managing demand; creating economies of scale; making best use of existing assets and resources.
Future proofing	The extent to which the project contributes to having Waitemata DHB set up to be sustainable for the long-term future (5 years and beyond). Includes: attracting and retaining the right people; staff satisfaction; providing the right assets at the right time in the right place; supporting staff learning and capability development; ensuring flexibility to meet changing future needs; setting Waitemata DHB up for future growth; modernisation.

SENIOR RESPONSIBLE OWNER (SRO) STATUS SUMMARY REPORT

Report reflects the most up-to-date and relevant information available on the:

WT-16-C-03-039

NCHIP Northern Regional NCHIP Implementation

30 June 2019

CAPEX or OPEX project <small>(is majority of funding CAPEX or OPEX?)</small>	CAPEX		Project stage	Build & Go Live	Project On Hold?	No
Senior Responsible Owner (SRO)	Tim Jelleyman		RPT rating <small>(as per Risk Profile Tool)</small>	RPT-2		
Project Manager	John Cox	Change Lead	Seema Kanwar		Delivery confidence rating <small>(only select if the project has been through a Quality Review)</small>	Likely
Division / Service <small>(deriving the most benefits from project)</small>	Child, Women & Family					
Facilities & Development Component <small>(does the project have an F&D component?)</small>	Yes					
			Project end date <small>(Build & Go-Live complete)</small>	30 June 2019		

	Health Outcomes	Patient Experience	Access, Safety & Effectiveness	Efficiency & Productivity	Future Proofing	Project aligned to different objectives
Alignment to DHB strategic objectives <small>(must equal 100%)</small>	40%	10%	40%	10%	0%	No
Project description	Collation of children milestone health data across the region to increase planned childhood interventions.					
Approved budget <small>As per Business Case, incl. approved contingency & approved Change Requests (NZD '000)</small>	\$1,545	Approved budget - Oracle <small>Includes contingency (NZD '000)</small>	\$722	Programme	Regional project comprising funding from NDHB, WDHB and ADHB	
Spend to Date <small>Includes any contingency spend (NZD '000)</small>	\$1,043	Approved Financial Benefits	2030			
Forecast At Completion <small>As per Approved Budget, incl. any projected contingency spend (NZD '000)</small>	\$1,545	<small>As per Business Case, including any approved Change Requests (NZD '000)</small>				
				Projects within this programme	N/A	

Overall Status Update as at 30-Jun-2019

June overall RAG status **A**

May overall RAG status **R**

SRO Commentary

Contractual: SoWs now in place for all development work that is underway. SaaS agreements signed. Change request pending for residual scope of MVP1 enhancements, due this week.

Technical: Development work on the MVP1 enhancements continues. Initial focus is on the '1C' build that will potentially lead to an early adopter go live. Orion reports that delivery of the NCHIP application on track for September and December. Issues are being worked through with regards to transfer of MoH files, dealing with minor and triggering of data 'response' files. Resolving these issues is proving time consuming. Show and tell sessions now have substance and discussions with end users more meaningful.

Users and Providers: No real engagement with NCHIP clinical users as yet, however crystallisation of MVP2 deliverables will help to guide which stakeholders should be involved.

Service Delivery: Continuing to work through the long list of data share agreements. NCHIP Functional Administrator commences work on the 29th July. Orientation sessions have been organised.

Overall: Orion have tabled a potential deployment and go live plan, with an option for an early go live on 10th October followed by upgrades to functionality in November and December. The project remains in a risky position with regards to time, cost and scope but at the moment all are clearly defined. Status is therefore a shade less than burnt Orange.

Project health indicator	June	May	Status update <small>(only for Amber or Red indicators)</small>
Cost	G	A	
Scope	G	A	
Schedule	A	A	Delivery timeframes remain very tight. It is likely that one or more milestones will be missed in the lead up to go live.
Benefits	G	G	
Risks and Issues	A	A	See details below.
Resources	G	G	
Change & Stakeholder Mgt	G	G	
Governance	G	G	

Top 3 Issues

Issue type	Issue ID	Issue description	Current impact	Issue owner
Project	49	Confidence in quality of Orion deliverables	Medium	John Cox
Project	50	Resolution of data file management issues	Medium	John Cox/Kevin Rumble

Top 3 Risks

Risk category	Risk ID	Risk description	Risk rating	Risk owner
Information Systems	R001	Costs exceeded due to delays	High	John Cox
Financial	R025	OH uncertainty -> increased costs	High	John Cox
Information Systems	R010	Fragmented go live->reduced quality	High	John Cox