

21 March 2019

Dear [REDACTED]

**Official information request W19-319**

I refer to your official information request dated 28 February 2019.

**Request:**

1. For each of the past three years ending June 2016, June 2017 and June 2018 what was the DHBs Rural Adjuster funding component of the PBFF funding pool?
2. Does the DHB fund and provide rural hospital services?  
If Yes, continue to answer questions 2.1, 2.2 and 2.3. If no, go to question 3
  - 2.1 Provide the following information about the rural hospitals in your DHB.  
If there are none, please report this.
    - Name or location of hospital
    - List of services the hospital provides
    - The business structure of the hospital eg DHB owned and operated / NGO or Iwi owned and operated
    - Annual Budget
  - 2.2 How is the annual budget for each of the rural hospitals listed in the table in 2.1 set?
  - 2.3 How does the DHB apply the annual rural adjuster funding to the benefit of each of the rural hospitals listed in the table in question 2.1?
3. Does the DHB fund and provide rural community services?  
If yes, continue to answer questions 3.1, 3.2 and 3.3. If no, go to question 3
  - 3.1 Provide the following information about the rural community services in your DHB.  
If there are none, please report this.
    - Location of services
    - List of Community services in each location
    - The business structure of the service provider eg DHB owned and operated / NGO or Iwi owned and operated
    - Annual Budget.
  - 3.2 How is the annual budget for the community services listed in the table in 3.1 set?
  - 3.3 How does the DHB apply the annual rural adjuster funding to the benefit of each of the rural community listed in the table in question 3.1?
4. For each of the past three years, under each of the components of the Rural Adjuster, quantify the allocation of Rural Adjuster funding through the DHBs contracts with its contracted providers or Service Level Alliance Teams.

- Small hospital facilities
- Community services
- Offshore Islands
- Travel and Accommodation
- Inter hospital transfers
- Governance
- Rural GP/PHO payments

5. Does the DHB include reporting requirements specific to the use of rural adjuster funding in its contracts with service providers whose contract includes rural adjuster funding.

ii. If yes, provide a list of the reporting requirements included in the DHB contracts with these providers.

**Response:**

The information you have requested is below.

1. This question was transferred to the Ministry of Health on 11 March 2019.
2. Wairarapa DHB (WrDHB) does not provide rural hospital services.
3. WrDHB funds and provides community services across its geographical area as a whole, including rural and urban areas. Community services for rural areas are not funded separately from those provided in urban areas.
  - 3.1
    - services are provided on a visiting basis to homes through the whole Wairarapa region, rural and urban.
    - District nurses operate from bases in Masterton and Greytown, all other services operate from premises in Masterton. All the services are mobile.
    - Wairarapa is supported by DHB, NGO and Iwi providers. District nursing and allied health services are provided by the DHB. Home support services are provided by two NGOs and the DHB. Well child, whanau ora, smoking cessation and outreach immunisation services are provided by an Iwi provider.
    - WrDHB does not have a separate annual budget for rural services.
  - 3.2 The annual budgets for these services across Wairarapa DHB are developed by forecasting the demand for each type of community service and the costs of the resource inputs required to meet the forecast demand, and then considering this against available funding and the relative priority of these services versus other demands on DHB funding.
  - 3.3 The rural adjuster is not separated out as a specific line in the DHB's allocation of funds. The rural adjuster is one of several factors influencing the DHB's PBFF total annual funding allocation rather than a funding line. There is no dedicated funding for rural services in this model. The DHB's role is to allocate resources that provide the best possible outcomes for our population in accordance with our legislative role which is to improve, promote, and protect the health of our people and communities.
4. As stated in response to Q3.3, the rural adjuster is not a separate funding line. It is not separately identified in funding advice to DHBs.
5. Not applicable.

Please note that this response, or an edited version of this response, may be published on the Wairarapa District Health Board website no less than one week after the response has been provided to you. Any personal or identifying information will be redacted from any response published online. The DHB will endeavour to resolve any concerns you should raise but, subject to any legal grounds for withholding, ultimately reserves the right to publish any information.

If you wish to discuss this response with us, please feel free to contact:

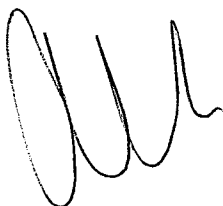
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Yours sincerely

A handwritten signature in black ink, appearing to read 'Adri Isbister', with a stylized, cursive script.

Adri Isbister

**Chief Executive**

