

Review Period: Quarter 1 Monitoring Report: 1 July 2018 – 30 September 2018

Performance Measure	Target Set FY19	Historical Trend Line					Achieved FY 2018/19				
		FY14	FY15	FY16	FY17	FY18	Budget \$		Actual \$		
Provision of a safe and effective blood service for all New Zealanders through supply and delivery of: <ul style="list-style-type: none"> ▪ Fresh Blood Components ▪ Fractionated Blood Products ▪ Other Products and Related Services 	Revenue of \$127.40m Expenses of \$128.83m Deficit of -\$1.43m	\$104.0m	\$109.0m	\$115.6m	\$114.43m	\$121.62	Q1	\$161k	Q1	\$1,549k	+\$1,388k
		\$103.1m	\$104.3m	\$117.9m	\$114.50m	\$122.19	Q2	\$702k	Q2		
		\$0.9m	\$4.7m	(\$2.3m)	(\$0.07m)	(\$0.57m)	Q3	(\$252k)	Q3		
							Q4	(\$2,037k)	Q4		
							FY18	(\$1,426k)	FY18**	(\$1,375k)	

Quarter 1: Revenue for quarter 1 saw a solid start to the financial year with revenue of \$33.29m being 3.0% above budget and 7.7% up on last year's revenue level. The September quarter's operational earnings saw a surplus of \$1.79m compared with an operational budget of \$7k. The overall reported result was of a slightly smaller surplus of \$1.55m that figure impacted unfavourably by 'non-operating' expenditures of -\$237k – see side table for detail.

The quarter's performance represented a good operational performance with points of note influencing the result noted as;

- Gross margin at \$10.22m was favourable to budget by 5.0% (\$488k) achieved off higher than budget revenues (+3.0%) and a favourable product mix.
- Inventory adjustments were favourable in the quarter at \$157k which incorporated two toll fractionation manufacturing runs in July and September,
- Production recoveries at \$16.25m for the quarter were adverse to budget by -\$20k a reflection of the actual production mix as compared to budgeted mix assumptions,
- General expenditure in the quarter was well contained and totalled \$24.90m which was 4.3% favourable to budget (+\$1.11m) and was a strong contributor to the reported result.
- The foreign exchange position at quarter's end saw an unfavourable movement in the 'mark to market' position of forward currency contracts held of -\$97k which was \$390k unfavourable to budget.

**** Forecast Full Year Result:** The initial forecast for the 2018/19 financial year is for a deficit of -\$1.38m which compares to a budgeted deficit of -\$1.43m. This forecast is based on the expectation of NZBS operating at a similar level of activity to quarter 1 over the balance of the 2018/19 financial year. This outlook of a modest underlying demand growth (+1.66%) greatly assists NZBS in ensuring it can deliver within budget expectations and at the same time maintain the expected quality and service standards expected of NZBS by the sector.

Summary of June Quarter - Q1 - 2018/19 Financial Performance					Full Year
Heading	Actual	Budget	Variance		Forecast
(xx) = Unfavourable	\$000's	\$000's	\$000's	%	\$000's
Gross Revenues	33,290	32,323	966	3.0%	128,040
Product Margin	10,215	9,727	488	5.0%	39,425
Total Expenditure within P&L	(24,897)	(26,004)	1,107	4.3%	(101,928)
Inventory Adjustments	157	(60)	217	(362.2%)	84
Production Recoveries	16,254	16,274	(20)	(0.1%)	63,064
Product Expiry	(519)	(570)	51	9.0%	(2,078)
Other Income & Interest Earned	449	424	25	(5.9%)	740
Foreign Exchange - Realised	126	216	(90)	-	371
Operational Earnings	1,786	7	1,779	24936.3%	(322)
<i>Non Operating Costs</i>					
- Premises Rental Accrued	(140)	(140)	0	0.0%	(560)
- Redvelopment Expenses	-	-	-	-	(125)
- Unrealised Forex Movement	(97)	294	(390)	132.9%	(368)
Reported Surplus for Quarter	1,549	161	1,388	864.1%	(1,375)

Quarter 2:

Quarter 3:

Quarter 4:

Externally focussed Service Performance Measures relating to achievement of NZBS's two externally focussed strategic goals						
Performance Measures	2014/15	2015/16	2016/17	2017/18	2018/19	2018/19
	Actual	Actual	Actual	Actual	Target	Achieved YTD
1. External output measures related to Key Products and Services which contribute to achievement of NZBS Enduring Outcome and Strategic Goal 1						
1.1 Product and Service availability						
Key products and services are available at all times (24 x 7). Measure is instances when this is not achieved and which could potentially have a negative consequence for patients.	0	0	0	0	0	Q1: Achieved Q2: Q3: Q4:
2. External output measures related to Demand Management and the relationship with DHBs which contribute to achievement of Strategic Goal 4						
2.1 Planning and Communication with District Health Boards (DHBs)						
NZBS will demonstrate a productive and supportive relationship with the DHBs, including proactively engaging with them through the Lead DHB CEO to agree pricing for the next financial year, ensuring that this information is provided in sufficient time to inform preparation of DHB Annual Plans. <u>NOTE:</u> Exact measure has changed over recent years.	ACHIEVED Feedback received from the Lead DHB CEO stated: "I can confirm from a DHB point of view NZBS has fully met the requirements of its "Planning and Communications with DHBs" performance measure in the 2014/15 financial year".	ACHIEVED Lead DHB CEO confirmed an open communication process with DHBs over price setting and utilisation patterns to inform the new financial year. To quote: "I believe you have developed an open partnership with me which will hopefully see a greater strategic partnership developed".	ACHIEVED NZBS assesses its communication obligations to the DHBs and relationship management were met over the course of the 2016/17 financial year However the Lead CEO changed twice during the year with an extended period of no Lead CEO. In these circumstances formal feedback could not realistically be expected.	ACHIEVED NZBS has received the following feedback from the Lead DHB CEO on meeting this target. NZBS has engaged in a positive and proactive relationship with the DHBs throughout the year, via the nominated lead DHB CEO. NZBS via its CEO has remained accessible, available and attentive to the challenges faced by both NZBS and the DHBs. The pricing discussion was well researched and informed leading to a mutually acceptable outcome for both parties.	TARGET NZBS to receive favourable feedback from the Lead DHB CEO on maintaining a greater strategic partnership and the timely and relevant provision of information, including any issue resolution over the course of the 2018/19 financial year.	FULL YEAR MEASURE

Performance Measures	2014/15	2015/16	2016/17	2017/18	2018/19	2018/19
	Actual	Actual	Actual	Actual	Target	Achieved YTD
2.2 NZBS Reports for DHBs						
Monthly demand management reports outlining purchase volumes by key product line are provided to DHBs to assist them to manage local usage and costs.	ACHIEVED All reports provided to each DHB within an average 4 working days over 2014/15.	ACHIEVED All reports provided to each DHB within an average 4 working days over 2015/16.	ACHIEVED All reports provided to each DHB within an average the stated timeframe over 2016/17.	SUBSTANTIALLY ACHIEVED * Monthly reports detailing product use & expiry information were provided with 1 exception, within set timeframes to all 20 DHBs throughout 2017/18	TARGET Reports are provided to each DHB by the 10th working day of the following month.	Q1: Achieved Q2: Q3: Q4:
* The September 2017 reports were delayed due to problems with extracting data following the implementation of eTraceline the new national blood banking management system. Over the 2017/18 financial year the average despatch time was 5 working days.						
2.3 Clinical Oversight Programme						
All Blood Banks located in main DHB hospitals (other than the 6 DHBs where NZBS is responsible for Blood Bank provision) will receive at least 1 NZBS Clinical Oversight visit (and audit report) per year in order to enable them to meet the requirements of ISO15189 for IANZ Accreditation.	ACHIEVED 100%	ACHIEVED 100%	ACHIEVED 100%	ACHIEVED 100%	TARGET - 100% To achieve a minimum one clinical oversight visit and report per year to all non NZBS managed blood banks located in main DHB hospitals.	FULL YEAR MEASURE
2.4 Haemovigilance Reporting (measured in calendar years)	2013	2014	2015	2016	2017 TARGET	2017
2.4.1 To promote risk awareness and best practice in transfusion, NZBS will publish an annual Haemovigilance report for each calendar year and will share this information with all DHBs to assist them to reduce the incidence of adverse transfusion related events.	ACHIEVED 2013 Annual Haemovigilance Report distributed to all DHBs in December 2014 and available on the NZBS web-site.	ACHIEVED 2014 Annual Haemovigilance Report distributed to all DHBs in October 2015 and available on the NZBS web-site.	ACHIEVED 2015 Annual Haemovigilance Report distributed to all DHBs in October 2016 and available on the NZBS web-site.	ACHIEVED 2016 Annual Haemovigilance Report distributed to all DHBs in October 2017 and available on the NZBS web-site.	TARGET 2017 Annual Haemovigilance Report published and distributed to all DHBs by Quarter 2 of 2018.	FULL YEAR MEASURE
Haemovigilance - Patient safety (measured in calendar years)	2013	2014	2015	2016	2017 TARGET	2017
2.4.2 Number of transfusion related adverse events occurring as a result of an NZBS "system failure" reported to the National Haemovigilance Programme, with a severity score greater than 1 and imputability score classified as likely/probable or certain.	ACHIEVED 0	ACHIEVED 0	ACHIEVED 0	ACHIEVED 0	0	FULL YEAR MEASURE

Internally focussed Service Performance Measures relating to achievement of NZBS's five internally focussed strategic goals						
These are considered "proxy output measures" in the context of NZBS activities and are key contributors to NZBS's success in achieving its enduring outcome and the external output measures identified in the Strategic Goals Section (Section 4) of the Statement of Intent						
Performance Measures	2014/15	2015/16	2016/17	2017/18	2018/19	2018/19
	Actual	Actual	Actual	Actual	Target	Achieved YTD
3. Internal measures related to Products and Service Quality which contribute to achievement of Strategic Goal 2						
3.1 Donation Testing						
Each donation will be tested prior to use in accordance with the NZBS Manufacturing Standards (as approved by Medsafe). <ul style="list-style-type: none"> No product is released for issue to a patient until it has passed all safety tests and associated records are maintained. 	ACHIEVED 100% tested	ACHIEVED 100% tested	ACHIEVED 100% tested	ACHIEVED 100% tested	100% tested	Q1: 100% tested Q2: Q3: Q4:
3.2 Regulatory Compliance - Medsafe						
NZBS will ensure it maintains Medsafe licences for its 6 hub sites 100% of the time, to provide an assurance of GMP compliance.	ACHIEVED 100% GMP Licensing compliance maintained	ACHIEVED 100% GMP Licensing compliance maintained	ACHIEVED 100% GMP Licensing compliance maintained	ACHIEVED 100% GMP Licensing compliance maintained	To maintain 100% GMP Licensing Compliance	Q1: Maintained Q2: Q3: Q4:
3.3 Regulatory Compliance – IANZ (International Accreditation New Zealand)						
NZBS will ensure it maintains IANZ accreditation 100% of the time at all of its diagnostic laboratories.	ACHIEVED 100% IANZ accreditation maintained	ACHIEVED 100% IANZ accreditation maintained	ACHIEVED 100% IANZ accreditation maintained	ACHIEVED 100% IANZ accreditation maintained	100% IANZ accredited	Q1: Maintained Q2: Q3: Q4:
3.4 Regulatory Compliance – ASHI (American Society of Histocompatibility and Immunogenetics)						
NZBS will maintain ASHI accreditation 100% of the time at the national Tissue Typing laboratory.	MAINTAINED 100% ASHI accreditation maintained	MAINTAINED 100% ASHI accredited maintained via biennial on-site audit for Tissue Typing laboratory	MAINTAINED 100% ASHI accreditation maintained	MAINTAINED 100% ASHI accredited Biennial on-site audit completed	100% ASHI accredited	Q1: Maintained Q2: Q3: Q4:

Performance Measures	2014/15	2015/16	2016/17	2017/18	2018/19	2018/19
	Actual	Actual	Actual	Actual	Target	Achieved YTD
4. Internal measures related to Donors which contribute to achievement of Strategic Goal 3						
4.1 Donor Population						
NZBS maintains a donor population capable of meeting the on-going demand for blood and blood products.	These reported donor numbers represent the donor population required to meet demand noting that within any given financial year there is constant flexing to ensure demand alignment that in turn minimises expiry.					Q1: 107,495
<ul style="list-style-type: none"> Active whole blood & apheresis donor panels. 	109,518	110,746	109,781	107,210	106,000	Q3: Q4:
Comment: The donor population, split between Whole Blood, Plasmapheresis and Plateletpheresis donor panels are managed to meet the forecast demand profile and forecast fractionated product source plasma requirements.						
4.2 Donor Satisfaction (Old Measure)						
Measure of Overall Satisfaction with the Quality of Service using the Common Measurement Tool questionnaire.						
<ul style="list-style-type: none"> Greater than 90% of donors surveyed state that they are either "Satisfied" or "Very Satisfied" with the overall quality of service. 	NOT ACHIEVED 88.4%	NOT ACHIEVED 87.9%	DISCONTINUED MEASURE (See new Measure below)			
4.2 Donor Satisfaction (new measure)						
Measure of overall satisfaction with the quality of service	NEW MEASURE IN 2016/17 FINANCIAL YEAR		ACHIEVED 91.35%	ACHIEVED 92.78%	Target	Achieved YTD
<ul style="list-style-type: none"> 90% of donors give an 8 or higher score out of 10 of their experience/satisfaction with the service. 					Greater than 90% satisfaction with the service	FULL YEAR MEASURE
Note: This is a new measure developed by NZBS that is better suited to blood donation and related activities. The reported results are ascertained by internal donor surveys conducted 6 monthly over the financial year. The first survey using this new measure was conducted in June 2017. The survey results will be benchmarked for comparative purposes against the Australian Red Cross Blood Service who have developed and use a similar performance monitoring approach.						

Performance Measures	2014/15	2015/16	2016/17	2017/18	2018/19	2018/19
	Actual	Actual	Actual	Actual	Target	Achieved YTD
4.3 Targeted donor recruitment strategies (old measure)						
4.3.1 Increase percentage of Māori donors on the active donor panel from the level achieved in the prior year.	ACHIEVED 9.3%	ACHIEVED 9.8%	NOT ACHIEVED 9.55%	DISCONTINUED MEASURE		
4.3.2 Increase the percentage of youth donors between the ages of 19 – 25 years on the active donor panel from the 2012/13 level of 18.4% of all donors. ²	NOT ACHIEVED 18.8%	NOT ACHIEVED 18.8%	NOT ACHIEVED 17.54%	DISCONTINUED MEASURE		
² Attraction of youth donors assists in future proofing the service – encouraging new donors to replace those who are retiring.						
Comment: Donor population movement impacts these key performance indicators and for that reason new measures will apply in 2017/18 that set real targets for performance not a shifting % of the donor panel always dependent on demand profile.						
4.3 Targeted donor recruitment strategies (New Measure)	Actual	Actual	Actual	Actual	Target	Achieved YTD
4.3.1 Recruit 2,900 new and reinstated Maori donors to the active donor panel (each year measure)	NEW MEASURE IN 2017/18 FINANCIAL YEAR			NOT ACHIEVED 2,731 (94%)	2,900	FULL YEAR MEASURE
4.3.2 Recruit 11,000 new and reinstated youth donors between the ages of 16 – 25 on the active donor panel – attracting youth donors assists in future proofing the service by encouraging new donors to replace those retiring.	NEW MEASURE IN 2017/18 FINANCIAL YEAR			NOT ACHIEVED 10,211 (93%)	11,000	FULL YEAR MEASURE
NOTE: For clarity, the definition of a new donor is a donor who has made a valid donation for the very first time in New Zealand. The definition of a reinstated donor is a person who has made at least two donations of which one blood donation was made within the last 12 months and the interval between that donation and the prior donation is more than 24 months excluding autologous and therapeutic donations. The first year reporting of these new KPIs fell just short of target. For the Maori donor target there was no discernible reason other than acknowledging the need to maintain in future a specific campaign focus throughout the year acknowledging the main focus in 2017/18 had been on plasma collection to secure the required quantities of source plasma for fractionation. For the youth target there were fewer actual collections days than had been planned due to pressure on the availability of rooms at the universities. Similarly a number of schools rescheduled their originally planned days to later in the financial year adversely impacting the original planned collection timetable.						

Performance Measures	2014/15	2015/16	2016/17	2017/18	2018/19	2018/19
	Actual	Actual	Actual	Actual	Forecast	Achieved YTD
4.4 Raw Material (Collections) Inputs						
4.4.1 Total Whole Blood donations.	120,099	119,967	111,146	111,588	109,300 Q1: 28,553 Q2: 27,140 Q3: 26,394 Q4: 27,213	Q1: 28,175 Q2: Q3: Q4:
4.4.2 Total Plateletpheresis donations.	3,436	3,145	2,852	2,637	2,700 Q1: 704 Q2: 670 Q3: 650 Q4: 776	Q1: 663 Q2: Q3: Q4:
4.4.3 Total Plasmapheresis donations.	41,438	52,026	53,081	58,441	61,100 Q1: 15,961 Q2: 15,162 Q3: 14,774 Q4: 15,203	Q1: 13,664 Q2: Q3: Q4:
4.4.4 Total donations.	164,973	175,138	167,079	172,666	173,100 Q1: 45,218 Q2: 42,972 Q3: 41,818 Q4: 43,092	Q1: 42,502 Q2: Q3: Q4:

Comment: The level of donations reflect the demand profile noting the ongoing decline in red cell demand (sourced from whole blood) and the continuing focus on plasmapheresis collection to meet source plasma requirements for fractionated product manufacturing.

5. Internal measures related to People which contribute to achievement of Strategic Goal 5

Performance Measures	2014/15	2015/16	2016/17	2017/18	2018/19	2018/19
	Actual	Actual	Actual	Actual	Target	Achieved YTD
5.1 Annual Employee turnover - Moving annual total basis for reporting.	8.1%	9.9%	10.6%	12.5%	12.0%	Q1: 12.94% Q2: Q3: Q4:
5.2 Employee Engagement Index Score undertaken as part of the broader Culture and Engagement survey.	No survey Note: the referenced survey results were released in June 2014	No survey	ACHIEVED 71.4% The survey was conducted in October 2016	No survey	Better than the last survey	FULL YEAR MEASURE

6. Internal measure related to Development which contributes to achievement of Strategic Goal 6

6.1 Auckland Facility Project – 71 Great South Road Auckland Successful completion of key project milestones in accordance with Board approved project plan.	New measure in 2015/16	DEFERRED Project deferred to enable certain work to be completed such work having the potential to materially impact on the nature and scope of the planned project	No measure as the project was deferred in the 2015/16 financial year pending further redevelopment planning work.	ACHIEVED A comprehensive Redevelopment Scoping paper was presented to the May 2018 Board meeting. The Board approved the redevelopment subject to Ministry of Health sanction.	Key Milestones achieved by 30 June 2019 in accordance with the approved redevelopment Plan for 71 Great South Road.	FULL YEAR MEASURE
------------------------------------------------------------------------------------------------------------------------------------------------------------------------	-------------------------------	-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	-------------------------------------------------------------------------------------------------------------------	------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	---------------------------------------------------------------------------------------------------------------------	--------------------------

7. Internal measures related to Financial Sustainability which contribute to achievement of Strategic Goal 7

					Target	Achieved YTD
7.1 Financial Management Assure cost efficiency and value for money management through maintenance of financial sustainability in an environment which is demand driven (i.e. changes in product demand - mix and volume by the DHBs, impacts on the NZBS financial result).	ACHIEVED Actual surplus of \$4.7m on revenues of \$109.0m.. Price rebate of \$3.55m paid to DHBs.	NOT ACHIEVED Actual Deficit of (\$2.34m) on revenues of \$115.6m. No DHB price rebate paid to DHBs.	ACHIEVED Actual Deficit of (\$73K) on revenues of \$114.4m. No DHB price rebate paid to DHBs.	ACHIEVED Actual Deficit of (\$567K) on revenue of \$121.62m. No DHB price rebate paid to DHBs.	Achievement of Budget set as a Deficit of (\$1.426m) on revenues of \$127.4m. No price rebate planned to DHBs.	Q1: \$1.55m Q2: YTD Q3: YTD Q4: FY

Specific Commentary Relating to the Quarter under Review

Headline Achievements / Activities in September 2018 Quarter:

- NZBS successfully concluded its 2017/18 audit with Audit NZ issuing an unmodified opinion combined with NZBS maintaining the top rating of 'very good' across all 3 control assessment categories namely; (1) Management control environment, (2) Financial information systems and controls and (3) Service performance information and associated systems and controls.
- Over the weekend of 4/5 August 2018 NZBS held its annual TRACE sponsor-supported conference in Auckland with some 230 staff attending. TRACE provides the platform to showcase some of the work undertaken by NZBS and provides staff with the opportunity to hear from some top class speakers headlined this year by Nigel Latta along with a number of recipients who provided heart-warming stories about their lives and how NZBS products had improved or saved their lives. The conference also afforded the opportunity for attendees to meet and share ideas and work experiences with colleagues from around New Zealand.
- NZBS celebrated its 20th anniversary on 1 July 2018 with the occasion marked around the country with a series of events involving staff, donors, volunteers and Board members. The Minister of Health also hosted an event at Parliament on 31 July which was well attended and enjoyed by all.
- The Redevelopment Steering Group continued with the detailed planning for the redevelopment of the major Auckland hub site located at 71 Great South Road, The focus over the September quarter was on Stage 1 – National Office fit out and relocation, in order to be tender ready in quarter 2 noting the current National Office lease expires 31 March 2019. Stage 1A being the atrium and new cafeteria for the whole site is also being progressed in part because with the increased staff numbers post National Office relocation the current cafeteria is inadequate raising a number of health and safety issues that can only be addressed by a new site appropriate cafeteria.
- Other major projects progressing to plan in the quarter were the extension and refurbishment of the Auckland City Hospital blood bank and the rolling implementation of the RATA project being an electronic time and attendance system (Humanforce software) that eliminates manual timesheets and provides automation capability for roster management.

Overall Commentary on Quarter 1 Performance and Full Year Outlook:

NZBS has recorded a solid start to the new financial year and in the expectation of current levels of activity being maintained over the balance of the financial year forecasts an outlook indicating a likely better than budget performance. NZBS continues to make good progress on the range of planned initiatives in the current financial year and considers it is on track to meet its targets as set out in the 2018/19 Annual Statement of Performance.

FINANCIAL PERFORMANCE WORKSHEETS with FTE Numbers – Quarter 1 - 3 Months to 30 September 2018

Ministry of Health Template - Financial Performance Information							Current Full Year Forecast		
Heading	September 2018 Quarter			Actual 2018/19 YTD Result			Current Forecast	Full Year Budget	Var. to Budget
	Actual	Budget	Var.	Actual	Budget	Var.			
Revenue									
Blood Products	26,553	26,014	539	26,553	26,014	539	102,766	103,121	(355)
Services	6,288	5,885	402	6,288	5,885	402	24,263	23,110	1,153
Other Income	381	347	34	381	347	34	740	858	(118)
Interest Income	68	77	(9)	68	77	(9)	271	308	(37)
Total revenue	33,290	32,323	966	33,290	32,323	966	128,040	127,397	643
Expenditure									
Cost of Goods Sold	22,626	22,173	453	22,626	22,173	453	87,603	87,900	(297)
Production & Service Costs	12,384	12,755	(371)	12,384	12,755	(371)	50,007	49,702	305
Inventory Adjustments	(157)	60	(217)	(157)	60	(217)	(84)	(1,437)	1,353
Production Recoveries	(16,254)	(16,274)	20	(16,254)	(16,274)	20	(63,064)	(62,698)	(366)
Expiry & Obsolescence	519	570	(51)	519	570	(51)	2,078	2,262	(184)
Indirect Overheads	10,840	11,515	(675)	10,840	11,515	(675)	45,182	46,087	(905)
Depreciation	946	1,014	(69)	946	1,014	(69)	3,971	4,244	(273)
Interest & Capital Charge	726	719	7	726	719	7	3,039	2,908	131
Forex Fluctuations - Realised	(126)	(216)	90	(126)	(216)	90	(371)	(774)	403
Forex Fluctuations - Unrealised	97	(294)	390	97	(294)	390	368	(56)	424
Premises Accrued Rent	140	140	(0)	140	140	(0)	560	560	-
Redevelopment Expenses	-	-	-	-	-	-	125	125	-
Price Rebate to DHBs	-	-	-	-	-	-	-	-	-
Total Net Expenditure	31,741	32,163	(422)	31,741	32,163	(422)	129,415	128,823	592
Quarterly Surplus / (Deficit)	1,549	161	1,388	1,549	161	1,388	(1,375)	(1,426)	51
FTE Levels	525.69	556.38	(30.69)	525.69	556.38	(30.69)	534.14	533.89	0.25
Ministry of Health Template									
Heading	September 2018 Quarter			Actual 2018/19 YTD Result			Current Forecast	Full Yr Budget	Var. to Budget
	Actual	Budget	Var.	Actual	Budget	Var.			
Revenue	33,290	32,323	966	33,290	32,323	966	128,040	127,397	643
Expenditure	31,741	32,162	(422)	31,741	32,162	(422)	129,415	128,823	592
Surplus / Deficit	1,549	161	1,388	1,549	161	1,388	(1,375)	(1,426)	(51)
Expenditure Analysis									
Cost of Goods sold	22,626	22,173	453	22,626	22,173	453	87,603	87,900	(297)
Expenditures	25,290	26,358	(1,069)	25,290	26,358	(1,069)	103,906	104,429	(523)
Production Recoveries	(16,254)	(16,274)	20	(16,254)	(16,274)	20	(63,064)	(62,698)	(366)
Inventory Adjustments	(157)	60	(217)	(157)	60	(217)	(84)	(1,437)	1,353
Non Operating Items	237	(154)	390	237	(154)	390	1,053	629	424
Rebate of Surplus to DHBs	-	-	-	-	-	-	-	-	-
Total Expenditure per Above	31,741	32,163	(422)	31,741	32,163	(422)	129,415	128,823	592
Heading	2017/18 BUDGET (\$000's)					Closing Equity Position			
	QTR 1	QTR 2	QTR 3	QTR 4	Total	Actual - 30/06/2018	\$000's		
Revenue	32,323	31,773	31,394	31,907	127,397	Closing Equity	38,832		
Expenditure	32,162	31,071	31,646	33,944	128,823				
Surplus / Deficit	161	702	(252)	(2,037)	(1,426)	Forecast - 30/06/2019	\$000's		
		863	611	(1,426)		Closing Equity	37,457		
Expenditure Analysis						FTE Position at Quarter's end			
Cost of Goods sold	22,172	22,104	21,572	22,052	87,900	Period	Actual FTE Level		
Expenditure	26,326	26,237	25,246	26,620	104,429	Quarter 1	525.69		
Production Recoveries	(16,274)	(15,558)	(15,114)	(15,752)	(62,698)	Quarter 2			
Inventory Adjustments	60	(1,756)	(326)	585	(1,437)	Quarter 3			
Non Operating Items	(122)	44	268	439	629	Quarter 4			
Total Expenditure per Above	32,162	31,071	31,646	33,944	128,823				
Quarter End Cumulative Total		63,233	94,879	128,823					