

**UNDER THE HEALTH AND DISABILITY  
SERVICES ACT 1993**

**IN THE MATTER OF THE MINISTERIAL  
INQUIRY INTO THE UNDER-REPORTING  
OF CERVICAL SMEAR ABNORMALITIES**

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**AFFADAVIT OF JULIA MARY PETERS**

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**HEALTH FUNDING AUTHORITY**

I, Julia Mary Peters swear as follows:

10. I have been asked by the Inquiry to provide additional information which I now do in this affidavit.
11. The first request was to ascertain whether the Health Funding Authority (HFA) had received a finalised version of the marked up letter which the HFA received from the Ministry of Health regarding the transfer of the National Cervical Screening Programme (NCSP) national office, and National Cervical Screening Register (NCSR) to the HFA. This was originally produced as exhibit JMP/HFA/006. I have not been able to find a final version of the letter on our files. I have also discussed the letter with my predecessor Dr Bernadette Mullin but this has not produced any result.
12. The second request was for confirmation of the budget received from the Ministry of Health for the national activities within the NCSP and for information regarding the budget available for the national activities/office since the transfer to the HFA.
13. I have confirmed with my predecessor Dr Bernadette Mullin the budget that was transferred from the Ministry of Health. This was for approximately \$545,000 and related to operational activities within the Programme, in particular the salaries and operating expenses associated with the staff who transferred, the operating expenses for the NCSR and the capital value of the NCSR. The budget transfer is outlined in paragraphs 45 and 46 of my initial brief of evidence and in exhibit JMP/HFA/006. I have had prepared a summary of the budget available for the NCSP at a national level within the HFA for the years 1998/99,1999/00 and 2000/01. I produce this as exhibit **JMP/HFA/0052**. This information includes the costs associated with

managing the NCSR despite the NCSR staff not being within the Public Health Change Management Team until March 2000. The service budget for each year is the sum available to the national team (i.e. the Public Health Change Management Team) to carry out the national activities required within the Programme and to enable the establishment of on-going independent monitoring processes. The budget information provided excludes the operational and service budgets available to me for the National Breast Screening Programme. Nor does the information provided include the costs associated with provision of Programme services to women which are estimated at approximately \$30 million per annum.

14. The third request was for a copy of my job description which I now produce as exhibit **JMP/HFA/0053**. This is a generic job description for a senior project manager written when the HFA was formed and is not a full reflection of the role I have assumed. A revised job description is currently being developed.
  
15. I was also asked for list of my team members and their qualifications including contractors/consultants and this I attach as exhibit **JMP/HFA/0054**. The Public Health Change Management Team (also known as the National Screening Team) is responsible for the national aspects of the breast screening and cervical screening programmes. Currently my team has a permanent staff allocation of 7.5 full-time equivalent staff, 4 full-time fixed-term contractors and approximately 6.5 full-time equivalent consultants. I have recently received approval from my general manager to appoint a Finance Manager, and an Information Technology Manager to the team. These would be permanent appointments, replacing the current consultant staff. I have also received approval to appoint an additional staff member for the NCSR, however prior to recruitment, there is a need to scope the exact

requirements of that position. I have advised my manager that a significant number of additional staff with clinical, epidemiological, public health, contracting, and quality assurance and monitoring skills are also required in the team and he is progressing these issues. An enlarged team or unit would need to be restructured into teams reflecting different areas of responsibility e.g. information management, finance and contracting, Maori health, policy and strategy, monitoring and quality assurance.

16. A further request was that I provide all reports that the Public Health Change Management Team has provided to the Ministry of Health as part of the HFA's accountability arrangements documented in the annual Funding Agreement between the HFA and the Minister of Health.
  
17. For the periods 1 July 1998 – 30 June 1999 and 1 July 1999 – 30 June 2000 there were no specific performance measures for the NCSP. In the 1998/99 and 1999/00 years the HFA was required to provide sector information to the Ministry of Health no later than 6 weeks after the quarter to which the information applied. These reports are attached as exhibit **JMP/HFA/0055**. In addition, as part of the 1999/00 and July – December 2000 Funding Agreements the HFA is required to report monthly to the Ministry of Health on risks arising within the sector. The monthly risk reports relating to the NCSP are provided as exhibit **JMP/HFA/0056**. The initial risk reports refer to a lack of quality standards and on-going monitoring processes within the NCSP. When these risk reports were written I was not aware of the laboratory standards which had been developed for the NCSP in the 1990's. The performance measures for the NCSP for the July-December 2000 Funding Agreement have already been provided as Exhibit JMP/HFA/0039.

18. The Inquiry requested that I locate any reports of evaluations carried out by the Ministry of Health and held at the HFA office. In addition to the “Straton Report” which has already been produced as JMG/MOH/004, and the “Norton Laboratory Review” also produced as JMG/MOH/0025, I have located the following reports prepared or commissioned by the Ministry of Health:

10. Norton V and Barnett P, From Policy to Practice, A review of the Canterbury Cervical Screening Programme, 1992

11. Norton V, Canterbury Cervical Screening Programme Community Initiatives 1992-93, 1993

12. Norton V, Canterbury Cervical Screening Programme’s Consumer Review, 1993

13. Adam J Evaluation of the National Cervical Screening Programme: the early years 1992

14. McFarlane J A review of cervical screening monitoring and research and evaluation reports, 1994

15. McFarlane J, Dominick C, Sawicka T Evaluation of cervical screening health education materials, 1994.

10. All these reports could be described as evaluations of aspects of the NCSP and as such they do provide valuable information for those working in the NCSP. However, they are not the type of monitoring and evaluation reports that I would require for the purpose of detecting potential failures within the screening programme. The latter are

necessary to enable potential failures to be explored and corrected and as part of a process of continuous quality improvement within the Programme.

11. I can also up-date the Inquiry on some details of the proposed quantitative monitoring process. A multi-disciplinary group will meet on the 28 July 2000 to commence the process of finalising the indicator set. It is envisaged that the group will need to meet twice to complete this process. Discussions concerning the appointment of an independent monitoring group for the NCSP are proceeding with Dr Brian Cox at the University of Otago.

Sworn at Auckand

This \_\_\_\_\_ day of July 2000 \_\_\_\_\_  
Julia Mary Peters

Before me:

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A Solicitor of The High Court of New Zealand

## SUPPLEMENTARY EXHIBITS PRODUCED BY JULIA MARY PETERS

| Exhibit No.         | Document Description  | Document Location |
|---------------------|---|-------------------|
| <b>JMP/HFA/0052</b> | National Cervical Screening Programme (NCSP) National Spend over the last three years | Tab 52            |
| <b>JMP/HFA/0053</b> | Senior Project Manager, Public Health Job Description                                 | Tab 53            |
| <b>JMP/HFA/0054</b> | NCSP HFA Unit Human Resource Profiles Relevant to Screening Programmes                | Tab 54            |
| <b>JMP/HFA/0055</b> | Sector Information Reporting to MOH – Public Health First Quarter Report              | Tab 55            |
|                     | - Letter dated 16 November 1998   | A                 |
|                     | - Letter dated 15 February 1999   | B                 |
|                     | - Letter dated 8 June 1999  | C                 |
|                     | - Letter dated 12 July 1999   | D                 |
|                     | - Letter dated 12 November 1999   | E                 |
|                     | - Letter dated 14 February 2000   | F                 |
|                     | - Letter dated 12 May 2000  | G                 |
| <b>JMP/HFA/0056</b> | Monthly Risks Report Relating to NCSP   | Tab 56            |