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9(2)(a)



RE Official Information Act request CDHB 10618

I refer to your email dated 31 May 2021 requesting the following information under the Official Information Act from Canterbury DHB. Specifically:

****Please apply these questions below to the calendar year of 2020 AND 2017:**

1. How many people were referred by the GP to the DHB for a joint replacement that year?
2. Of those, how many did not receive a first specialist appointment with a specialist orthopaedic surgeon?
3. Of those who had their first appointment with the specialist orthopaedic surgeon, how many were then referred/sent back to their GP?
4. Of those patients that were referred by GP for joint replacement surgery, how many went ahead to have surgery by the DHB?
5. Of those who were referred by GP and had a first specialist appointment with an orthopaedic surgeon, how many actually had their surgery with the DHB?
6. How many patients were deemed clinically necessary to go on a waiting list for joint replacement that year?
7. How many referrals from the GP and specialist for joint replacements were turned down that year?
8. How many were turned down because of 'lack of capacity'?

We are not able to provide the information requested in questions 1 to 8 as patients are not directly referred by a GP for a "joint replacement".

GPs refer patients due to joint pain or other associated symptoms and a cohort of these patients will be assessed as requiring joint replacement surgery.

To provide the specific data related to questions 1 to 8, frontline clinical staff would need to review individual patient files for the hundreds of patients referred for joint pain or associated symptoms in 2017 and 2020 to identify those who went on to be assessed as requiring joint replacement surgery.

We are therefore declining these aspects of your request under section 18(f) of the official Information Act 1982 due to substantial collation or research.

Regardless of the above comments we can provide you with the number of patients added to the treatment waitlist for joint pain and who received surgery (**Table one** below) from 2019.

Canterbury DHB changed its data management system in October 2018 and prior to this we did not have the categorisation of body structure to enable us to provide the information requested for 2017. We are providing you with information for 2019 and 2020 calendar years.

Table one:

Joint Type	Number Added to waitlist for joint pain and Treated by Calendar Year	
	2019	2020
Body Structure - Ankle	42	50
Body Structure - Arm	15	17
Body Structure - Back	-	2
Body Structure - Elbow	17	14
Body Structure - Feet	20	13
Body Structure - Fingers	32	31
Body Structure - Foot	129	157
Body Structure - Hand	126	58
Body Structure - Hands	31	9
Body Structure - Hip	616	705
Body Structure - Knee	639	631
Body Structure - Leg	98	76
Body Structure - Shoulder	120	72
Body Structure - Spine	74	93
Body Structure - Toe	19	17
Body Structure - Tumour	7	14
Body Structure - Wrist	47	59
Grand Total	2022	1994

9. Can you specify your DHBs criteria for joint surgery?

Following a first specialist assessment (FSA) that determines surgery is the most appropriate management, the Orthopaedic surgeons access criteria for assessment to determine appropriate orthopaedic management.

Orthopaedic specialists use the National Clinical Priority System for assessing access to public funded hip and knee joint replacement surgery. A copy of this guideline and assessment scoring tool is publicly available at the following website address:

https://nzoa.org.nz/sites/default/files/CPAC_Prioritisation_Guidelines.pdf

Clinical assessment, radiological findings and relevant medical history are also factors that influence the criteria.

10. How many points do patients need to get onto the waiting list for joint replacement in your DHB?

Once a patient has been seen at an FSA, and if surgery is determined to be the most appropriate management plan, all patients are scored as per the CPAC prioritisation score. The current score (CPAC score) to access joint replacement for Canterbury DHB is 50.

11. How many 'semi urgent' referrals from the GP to DHB for ENT (ears, nose throat) were actually seen by a specialist?

As mentioned previously Canterbury DHB moved to a new patient management system in late 2018 and the data prior to that is less reliable and would not provide an accurate basis for any comparison. Therefore, please find below the results for 2019 and 2020.

In the 2019 calendar year, a total of 5,011 people were seen for their first specialist appointment at Canterbury DHB speciality ENT outpatient clinics. Of these, 1,617 had been referred in as semi-urgent. 1,525 of those semi-urgent referrals came from general practice.

In the 2020 calendar year, a total of 5,284 people were seen for their first specialist appointment at Canterbury DHB speciality ENT outpatient clinics. Of these, 1,575 had been referred in as semi-urgent. 1,538 of those semi-urgent referrals came from general practice.

I trust that this satisfies your interest in this matter.

You may, under section 28(3) of the Official Information Act, seek a review of our decision to withhold information by the Ombudsman. Information about how to make a complaint is available at www.ombudsman.parliament.nz; or Freephone 0800 802 602.

Please note that this response, or an edited version of this response, may be published on the Canterbury DHB website after your receipt of this response.

Yours sincerely



Tracey Maisey
Executive Director
Planning, Funding & Decision Support