

CORPORATE OFFICE

Level 1 32 Oxford Terrace Christchurch Central CHRISTCHURCH 8011

Telephone: 0064 3 364 4160 Fax: 0064 3 364 4165 Ralph.lasalle@cdhb.health.nz

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9(2)(a)

RE Official information Act request CDHB 10554

I refer to your email received 2 March 2021, and clarification received on 3 March 2021, requesting the following information under the Official Information Act from Canterbury DHB. Specifically:

For each cardiac procedure (stent, ecg, echo, open heart surgery etc), for the years 2018 and 2019 by year, the following information:

 Number of procedures done and average wait time for the procedure PERFORMED during the year (not escalated)

*Clarification: not escalated defined as low priority referrals.

Please refer to **Table One** overleaf, which shows the number of top 10 low-priority cardiology and cardiothoracic surgery procedures performed within Canterbury DHB, and the average wait time, for the past two calendar years. The data is for referrals categorised as low priority only and is broken down by each individual procedure.

Please note: Canterbury DHB is only able to provide data for the calendar years 2019 and 2020 (not 2018), as there was a change in data system midway through 2018 and consequently the 2018 data is incomplete.

Additionally, ECG and echo referral data has not been included, as ECG's are not waitlisted procedures and echo referrals are not able to be reported on at present due to a change in information system.

The COVID-19 lockdown period from March – May 2020 led to an increase in wait times in calendar year 2020. The lockdown also contributed to the reduced number of low-priority coronary angiogram procedures in the same year.

In regard to low-priority ablation procedures, the increase in wait times between 2019 and 2020 is due to both the COVID-19 lockdown period and the replacement of one of the Cath Laboratories, which created limited access for elective procedures for an 8-week period.

Table One: Number and wait times for the top 10 cardiology and cardiothoracic surgery procedures, for low priority referrals.

Top 10 Procedures under Cardiology and Cardiothoracic Surgery	2019		2020	
Types of Procedures (Low Priority)	Number	Average Wait Time (Days)	Number	Average Wait Time (Days)
Coronary angiography	416	23.0	389	55.0
Catheter ablation of arrhythmia circuit or focus, not elsewhere classified	89	46.5	152	181.5
Two-dimensional real time transoesophageal ultrasound of heart	69	28.7	60	43.8
Cardioversion	56	37.1	76	50.6
Percutaneous insertion of 1 transluminal stent into single coronary artery	53	25.2	47	58.8
M-mode and two-dimensional real time ultrasound of heart	46	19.9	19	38.2
Lobectomy of lung	31	15.0	37	22.9
Coronary artery bypass, using 1 LIMA graft	31	21.9	36	24.6
Insertion of cardiac pacemaker generator	29	36.4	41	55.4
Replacement of aortic valve with bio prosthesis	20	19.1	17	30.4

2. Number and average wait time for the procedure PERFORMED during the year (that was escalated) *Clarification: escalated defined as high priority referrals.

Please refer to **Table Two** below, which shows the number of top 10 high-priority cardiology and cardiothoracic surgery procedures performed within Canterbury DHB, and the average wait time, for the past two calendar years. This data is for referrals categorised as high priority only and is broken down by each individual procedure.

Please note: Canterbury DHB is only able to provide data for the calendar years 2019 and 2020 (not 2018), as there was a change in data system midway through 2018 and consequently the 2018 data is incomplete.

Additionally, ECG and echo referral data has not been included, as these are not waitlisted procedures. Please note that the COVID-19 lockdown period from March – May 2020 led to an increase in wait times in calendar year 2020.

Table Two: Number and wait times for the top 10 cardiology and cardiothoracic surgery procedures, for high priority referrals.

Top 10 Procedures under Cardiology and Cardiothoracic Surgery	2019		2020	
Types of Procedures (High Priority)	Number	Average Wait Time (Days)	Number	Average Wait Time (Days)
Coronary angiography	84	15.9	89	30.7
Replacement of cardiac pacemaker generator	57	26.0	64	28.3
Insertion of cardiac pacemaker generator	27	24.6	29	61.0
Replacement of cardiac defibrillator generator	23	21.3	20	22.9
Catheter ablation of arrhythmia circuit or focus, not elsewhere classified	22	18.9	19	43.9
Two-dimensional real time transoesophageal ultrasound of heart	16	13.8	13	26.5
Insertion of cardiac defibrillator generator	16	32.3	5	88.6
Lobectomy of lung	9	8.1	10	7.6
Cardioversion	11	30.6	1	36.0
Percutaneous insertion of 1 transluminal stent into single coronary artery	5	22.8	7	19.0

3. Number of people that died waiting for a procedure scheduled to be performed during the year (escalated and not escalated separately)

*Clarification: escalated defined as high priority referrals, and not escalated defined as low priority referrals.

Please refer to **Table Three** below, which shows the total number of deaths for individuals that were on a wait list for a cardiology or cardiothoracic surgery procedure for the past two calendar years. The data below is broken down into referrals categorised as high priority and low priority.

Table Three: Number of deaths for individuals on a wait list for a cardiology or cardiothoracic procedure for past two calendar years, broken down by priority categorisation.

Cardiology and Cardiothoracic Surgery Procedures	2019	2020	
High Priority	1	1	
Low Priority	4	0	

4. Number of people that required emergency (ED) treatment while waiting for a procedure scheduled to be performed during the year (escalated and not escalated separately)

Canterbury DHB is unable to provide a response regarding the number of people that required emergency (ED) treatment while waiting for a scheduled cardiology/cardiothoracic surgery procedure, as we are unable to determine from our data if any ED treatment received was related to the condition.

We are therefore declining a response to this part of the request pursuant to section 18(g) of the Official Information Act, i.e. "that the information requested is not held..."

I trust 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

Ralph La Salle

Acting Executive Director

Planning, Funding & Decision Support