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RE Official Information Act request CDHB 10146

I refer to your email dated 9 July 2019 sent to the TAS which they subsequently transferred to us on 12 July 2019 requesting the following information under the Official Information Act from Canterbury DHB regarding KPI data. Specifically:

All data from July 2016 (monthly or, if not readily available, quarterly) to the latest available:

****This data should include any Inter District Flow activity delivered by the DHB for people who are domiciled in other DHBs.**

- 1. Elective surgery discharges (caseweights and actual number)****
- 2. Planned (funded) elective surgery discharges (caseweights)****

Please refer to **Appendix 1 Table one and two** (attached)

- 3. Elective medical discharges (caseweights and actual number)****
- 4. Planned (funded) elective medical discharges (caseweights)****

Please refer to **Appendix 1 Table three and four** (attached).

- 5. Acute caseweight discharges****
- 6. Acute caseweights planned (funded)****

Please refer to **Appendix 1 Table five and six** (attached)

As per your clarification with Ralph La Salle we have provided the data above (Questions 1-6) in combined tables in the attached Appendix.

7. Number and % of patients with a confirmed cancer diagnosis receive their first cancer treatment (or other management) within 31 days of a decision to treat

Please refer to **Appendix 1 Table seven** (attached) for the number and % of patients with a confirmed cancer diagnosis who received their first cancer treatment (or other management) within 31 days of a decision to treat.

8. Number and % of patients referred urgently with a high suspicion of cancer receive their first treatment (or other management) within 62 days of the referral being received by the hospital

Please refer to **Appendix 1 Table eight** (attached) for the number and % of patients referred urgently with a high suspicion of cancer who received their first treatment (or other management) within 62 days of the referral being received by the hospital.

9. Number and % of accepted referrals for CT scans receiving procedures within 42 days
10. Number and % of accepted referrals for MRI scans receiving procedures within 42 days

Please refer to **Appendix 1 Table nine and Fig1** (attached) for the number and % of accepted referrals for CT scans receiving procedures within 42 days and the number and % of accepted referrals for MRI scans receiving procedures within 42 days.

11. Number and % of ED patients discharged or treated within 6 hours.
12. Number of presentations to ED.

Please refer to **Appendix 1 Table ten** (attached) for the number of presentations to ED and % of ED patients discharged or treated within 6 hours.

I trust that this satisfies your interest in this matter.

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



Carolyn Gullery
Executive Director
Planning, Funding & Decision Support

10146 Appendix 1 Q1 - 6

Questions 1 & 2 - Tables one and two: Elective Initiative Discharges / Elective Initiative CWDs

Table one:

	Budget	Actual	Budget	Actual	Budget	Actual
	2016/17	2016/17	2017/18	2017/18	2018/19	2018/19
Table 1 - Elective Initiative Discharges						
IDF done in CDHB for other DHBs*	1,807	1,801	2,310	2,241	2,307	2,321
Additional Planned Electives**	6,098	6,702	6,204	6,206	6,246	5,930
Base Electives**	14,182	14,182	14,420	14,420	16,991	16,991

Table two:

	Budget	Actual	Budget	Actual	Budget	Actual
	2016/17	2016/17	2017/18	2017/18	2018/19	2018/19
Table 2 - Elective Initiative CWDs						
IDF done in CDHB for other DHBs*	3,758.0	3,944.9	4,964.8	4,982.6	5,118.8	5,459.8
Additional Planned Electives**	6,679.8	6,920.7	6,919.1	5,572.0	7,280.4	6,217.9
Base Electives**	18,142.4	18,142.4	18,343.9	18,343.9	20,607.8	20,607.8

*Source : CDHB Data Warehouse & Planned Volumes Spreadsheet

*Definition: All surgical services with elective/arranged admit type plus Medical Discharges with a Surgical DRG

** Source: Canterbury DHB Electives Initiative Report (produced by MoH)

** Definition: All surgical services with elective/arranged admit type plus Dental and Cardiology

Questions 3 & 4 - Tables three and four: Elective Initiative Discharges/Medical CWD:

	Budget	Actual	Budget	Actual	Budget	Actual
	2016/17	2016/17	2017/18	2017/18	2018/19	2018/19
Table 3 - Medical Discharges						
All*	42,399	47,554	44,390	49,903	48,869	50,745
Table 4 - Medical CWD						
All*	35,727.6	38,092.1	36,998.6	40,122.1	39,531.5	41,470.4

*Source : CDHB Data Warehouse & Planned Volumes Spreadsheet

*Definition: Medical purchase units with Unit of Measure of CWD, all admit types

Questions 5 & 6 – Tables five and six: Acute Discharges/Acute CWD:

	Budget	Actual	Budget	Actual	Budget	Actual
	2016/17	2016/17	2017/18	2017/18	2018/19	2018/19
Table 5 - Acute Discharges						
All	55,651	61,008	56,336	63,463	60,542	63,555
Table 6 - Acute CWD						
All	54,793.3	57,150.3	56,805.7	58,999.4	53,946.8	58,715.6

*Source : CDHB Data Warehouse & Planned Volumes Spreadsheet

*Definition: Acute only (no arranged) Discharges, regardless of Specialty, with Unit of Measure of CWD

Appendix 1 Q7 - 8

Table seven Number and % of patients with a confirmed cancer diagnosis receive their first cancer treatment (or other management) within 31 days of a decision to treat. January 2016 – May 2019.

Month	Number seen	Number missed	% seen	Measure
Jan-16	127	38	70.1	85
Feb-16	114	17	87.7	85
Mar-16	130	23	84.5	85
Apr-16	144	23	83.0	85
May-16	163	27	83.4	85
Jun-16	174	30	82.8	85
Jul-16	125	15	88.0	85
Aug-16	174	24	86.2	85
Sep-16	143	17	88.1	85
Oct-16	155	22	85.8	85
Nov-16	156	26	83.3	85
Dec-16	126	4	96.8	85
Jan-17	150	28	81.3	85
Feb-17	138	16	88.4	85
Mar-17	148	22	85.1	85
Apr-17	135	12	91.1	85
May-17	160	15	90.6	85
Jun-17	133	15	88.7	85
Jul-17	162	19	88.3	85
Aug-17	171	22	87.1	85
Sep-17	155	17	89.0	85
Oct-17	167	26	84.4	85
Nov-17	171	25	85.4	85
Dec-17	162	11	93.2	85
Jan-18	131	20	84.7	85
Feb-18	127	19	85.0	85
Mar-18	165	11	93.3	85
Apr-18	128	19	85.2	85
May-18	144	14	90.3	85
Jun-18	160	16	90.0	85
Jul-18	152	13	91.4	85
Aug-18	174	16	90.8	85
Sep-18	167	17	89.8	85
Oct-18	140	23	83.6	85
Nov-18	148	17	88.5	85
Dec-18	184	12	93.5	85
Jan-19	154	23	85.1	85
Feb-19	117	12	89.7	85
Mar-19	140	8	94.3	85
Apr-19	114	7	93.9	85
May-19	136	21	84.6	85

Table eight Number and % of patients referred urgently with a high suspicion of cancer receive their first treatment (or other management) within 62 days of the referral being received by the hospital.

Month	Total	Missed	% seen	Target
Jan-16	37	16	56.8	85.0
Feb-16	22	8	63.6	85.0
Mar-16	33	7	78.8	85.0
Apr-16	40	4	90.0	85.0
May-16	33	10	69.7	85.0
Jun-16	52	13	75.0	85.0
Jul-16	33	8	75.8	85.0
Aug-16	43	10	76.7	85.0
Sep-16	29	5	82.8	85.0
Oct-16	50	3	94.0	85.0
Nov-16	55	6	89.1	85.0
Dec-16	42	7	83.3	85.0
Jan-17	62	9	85.5	85.0
Feb-17	56	11	80.4	85.0
Mar-17	59	6	89.8	85.0
Apr-17	46	6	87.0	85.0
May-17	60	9	85.0	85.0
Jun-17	46	8	82.6	85.0
Jul-17	54	3	94.4	90.0
Aug-17	57	1	98.2	90.0
Sep-17	45	1	97.8	90.0
Oct-17	50	4	92.0	90.0
Nov-17	49	1	98.0	90.0
Dec-17	54	6	88.9	90.0
Jan-18	36	5	86.1	90.0
Feb-18	48	1	97.9	90.0
Mar-18	63	2	96.8	90.0
Apr-18	57	3	94.7	90.0
May-18	47	4	91.5	90.0
Jun-18	60	3	95.0	90.0
Jul-18	52	5	90.4	90.0
Aug-18	64	2	96.9	90.0
Sep-18	57	1	98.2	90.0
Oct-18	60	3	95.0	90.0
Nov-18	45	2	95.6	90.0
Dec-18	60	2	96.7	90.0
Jan-19	43	1	97.7	90.0
Feb-19	41	2	95.1	90.0
Mar-19	60	2	96.7	90.0
Apr-19	36	0	100.0	90.0
May-19	36	1	97.2	90.0

Notes for clarification:

- This data is based on our FCT returns to the Ministry, therefore it only includes patients eligible for FCT. Paediatric patients, for example, are not included and neither are patients with metastatic or recurrent disease if they have already been reported with the same primary.
- The 62 days target refers to the time from when a referral is received to when the patient has their 1st treatment. From 1st July 2017 the MoH changed the 62 days compliance target from 85% to 90% and at the same time altered the compliance calculation: when calculating our performance against the 62 days

target the Ministry now excludes patients who missed the 62 days target through choice (e.g. a pre-arranged holiday) or clinical considerations (e.g. delays due to significant comorbidities). In this spreadsheet we have therefore excluded patients from July '17 whose treatment was delayed for clinical considerations or through patient choice to ensure that it is consistent with MoH calculations of compliance. We have also shaded the table to help identify when the change occurred.

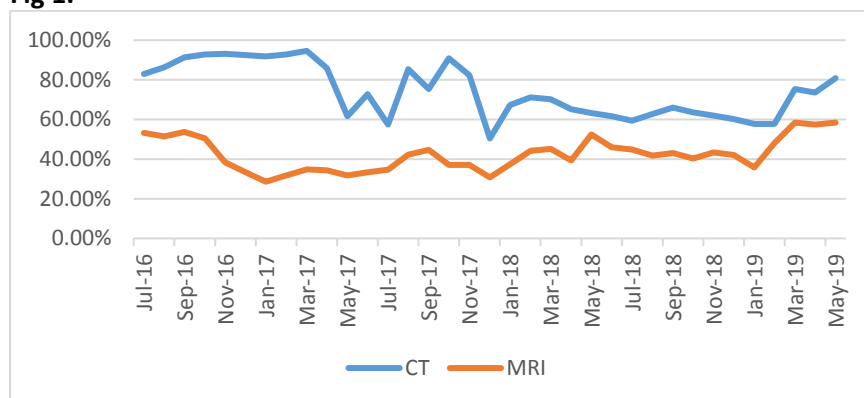
- The 31 days measure (which refers to the time from when a Decision to Treat is agreed to the 1st treatment taking place) has not changed so still includes patients whose treatment was delayed through patient choice or for clinical reasons.
- Whether a person qualifies or not for the 62 days cohort depends on the triaging decision once the referral is received, not what the referring clinician indicated on the referral request.
- FCT is based on the DHB of domicile of each patient. Therefore, for example, CDHB does not include patients referred in who live in Picton as they will be reported by NMDHB.
- There is a delay in reporting some of the data to the MoH because some patients will not be coded in time. Therefore although the 31 days performance for May 18 is slightly below the 85% target this is likely to change when the report is next run and previous months are updated.

Q 9 & 10:

Table nine Number and % of accepted referrals for CT and MRI scans receiving procedures within 42 days since July 2016. (June 2019 is not available yet).

Month	CT	MRI
Jul-16	82.90%	53.20%
Aug-16	86.40%	51.50%
Sep-16	91.40%	53.70%
Oct-16	92.80%	50.40%
Nov-16	93.10%	38.40%
Dec-16	92.50%	33.40%
Jan-17	91.80%	28.60%
Feb-17	92.80%	31.70%
Mar-17	94.60%	34.80%
Apr-17	85.80%	34.30%
May-17	61.60%	31.70%
Jun-17	72.70%	33.40%
Jul-17	57.40%	34.60%
Aug-17	85.40%	42.20%
Sep-17	75.40%	44.70%
Oct-17	90.90%	37.10%
Nov-17	82.30%	37.00%
Dec-17	50.40%	30.70%
Jan-18	67.20%	37.40%
Feb-18	71.10%	44.20%
Mar-18	70.10%	45.10%
Apr-18	65.10%	39.30%
May-18	63.30%	52.40%
Jun-18	61.60%	46.00%
Jul-18	59.40%	44.90%
Aug-18	62.70%	41.70%
Sep-18	66.00%	43.00%
Oct-18	63.60%	40.30%
Nov-18	61.90%	43.40%
Dec-18	60.10%	42.00%
Jan-19	57.80%	35.70%
Feb-19	57.80%	48.10%
Mar-19	75.40%	58.40%
Apr-19	73.50%	57.50%
May-19	80.90%	58.40%

Fig 1.



Appendix 1 Q 11 – 12

Table ten:

Financial Year	Date / Quarter	Events	% of Events In ED Under 6 Hours
2016/17	1 - Jul	8,802	92.82%
	2 - Aug	8,815	92.97%
	3 - Sep	8,507	93.99%
	4 - Oct	8,590	95.44%
	5 - Nov	8,535	94.54%
	6 - Dec	8,989	94.73%
	7 - Jan	8,566	94.27%
	8 - Feb	7,935	94.59%
	9 - Mar	8,613	94.74%
	10 - Apr	8,258	94.94%
	11 - May	8,606	95.38%
	12 - Jun	8,551	93.95%
2017/18	1 - Jul	9,155	94.31%
	2 - Aug	9,569	93.97%
	3 - Sep	8,917	94.47%
	4 - Oct	9,123	94.65%
	5 - Nov	9,005	95.96%
	6 - Dec	9,478	94.33%
	7 - Jan	9,386	95.02%
	8 - Feb	8,780	94.51%
	9 - Mar	9,564	94.97%
	10 - Apr	8,706	94.52%
	11 - May	9,090	95.02%
	12 - Jun	8,762	94.28%
2018/19	1 - Jul	9,315	92.91%
	2 - Aug	9,564	93.08%
	3 - Sep	9,206	93.25%
	4 - Oct	9,211	88.76%
	5 - Nov	9,026	90.83%
	6 - Dec	9,449	89.27%
	7 - Jan	9,402	90.06%
	8 - Feb	8,768	89.11%
	9 - Mar	9,176	90.58%
	10 - Apr	8,781	91.38%
	11 - May	9,487	89.23%
	12 - Jun	9,241	88.56%
Grand Total		322,928	93.17%

Note:

Canterbury DHB has implemented a new patient management system (SIPICS) over the last 12 months including the introduction of ED at a Glance (EdaaG) in October 2018.

The establishment of new systems required developing new reporting systems which have produced data that does not represent the underlying clinical and patient flow processes. There have been some issues with the impact of incorrect time stamps from October 2018 and we have data showing the real figure is approximately 92% from October 2018 to June 2019. Correct capture of data continues to be a focus for the DHB.