

# CORPORATE OFFICE

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8 May 2018



### **RE Official Information Act request CDHB 9825**

I refer to your email dated 4 April 2018 requesting the following information under the Official Information Act from Canterbury DHB.

• What is the DHB's total annual funding allocation for breast reconstruction?

The Departments of General Surgery and Plastic Surgery are funded to provide a complete service, there is no separate allocation for any specific surgical procedures.

 What advice does the DHB give to patients about the choice between delayed or immediate breast reconstruction/s?

There is extensive information provided on the Canterbury HealthInfo website under 'breast reconstruction' <a href="https://www.healthinfo.org.nz/index.htm?About-HealthInfo.htm">https://www.healthinfo.org.nz/index.htm?About-HealthInfo.htm</a>; this is information written by clinical advisers and is publically available.

There is a range of options available, and these are discussed individually with each patient based on specific patient related factors i.e. comorbidities, or tumour related factors, i.e. do they require additional treatment prior to reconstruction.

Each patient is treated individually and offered the best surgical option for them.

There is also information provided on the Canterbury HealthPathways website which is written for, and can be accessed by, General Practitioners and medical professionals.

<u>Please note</u> Canterbury DHB provides breast reconstruction for West Coast DHB patients, therefore our responses to the following questions will cover both Canterbury DHB and West Coast DHB.

 Are patients required to use these services within a certain timeframe? Is so, when does this timeframe lapse?

For both General and Plastic Surgery there is no time limit to access reconstruction surgery and patients can be referred in at any time.

 Are patients required to be of a certain age to access these services? If so, what is the age limit for breast reconstruction?

There is no age limit for surgery in General and Plastic Surgery. A decision to offer surgery is based on the risks and benefits for the individual patient.

## I'm also looking for figures on the following:

 What was the average wait time for patients getting a reconstruction surgery through the DHB services, each year, between 2014 - 2018?

The average patient who is both clinically and personally ready for reconstructive surgery and where there is capacity to provide the surgery waits around a month, from the date that the hospital sent a letter or provided the patient with advice that they would receive surgery, to the date of admission.

Where appropriate breast conserving surgery is offered to prevent the need for reconstruction. Some immediate reconstruction is provided by General and Plastic Surgery, again dependent on the specific tumour and patient related factors.

Table one: Average Certainty to admit (days) for reconstruction surgery

Year of surgery	Average Certainty to admit days
2014	65
2015	31
2016	27
2017	24
2018	38

**Please note:** Data provided does not include staged and planned surgical patients who had clinical or personal reasons why they required a longer wait time. Certainty date is the date that the hospital sent a letter or provided the patient with advice that they would receive publically funded treatment and the timeframe in which they would receive that treatment

 In total, how many patients received reconstruction surgery through the DHB, each year, between 2014 -2018?

This is a complex question as there are a variety of different procedures. Please refer to **Table two** (below) for the number of patients who received reconstruction surgery through Canterbury DHB, each year, between 2014 and 2017.

Table two: Number of patients receiving breast reconstruction surgery

Admit Calendar Year	Distinct Events in each year	Distinct Patients in each year
2014	71	67
2015	82	77
2016	71	70
2017	66	62

#### Please note:

- The total number of distinct patients 2014 2017 was 225 and of that number 191 (85%) also had coding related to mastectomy and/or malignant neoplasm of the breast. (**Note:** a distinct patient may appear in multiple years).
- Data includes patients receiving surgery for block codes 1756 Reconstruction procedures on the breast and
   1757 Reconstruction procedures on the nipple and areola

# • In total, how many patients were declined reconstruction surgery through the DHB, each year, between 2014 - 2018?

We do not collect this data as we do not have exclusion criteria. Patients may choose to decline reconstruction or they may not be offered surgery due to the factors mentioned above. We are therefore declining a response to this question under section 18(g) of the Official Information Act.

• In total, how many patients were on a waiting list for a reconstruction through DHB services, each year, between 2014 - 2018?

Regardless of whether the patient is ready for surgery or not these people are/were on the waitlist allocated specifically for a reconstruction (**Table three** below).

#### Table three:

Calendar year	Number
2014	116
2015	102
2016	109
2017	98
2018	21

Note: these are total numbers within each calendar year and do not imply that they were waiting all year.

I trust that this satisfies your interest in this matter.

If you disagree with our decision to withhold information you may, under section 28(3) of the Official Information Act, seek an investigation and review of our decision from the Ombudsman.

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

Yours sincerely

Carolyn Gullery

General Manager

**Planning, Funding & Decision Support**