

20 June 2019

[REDACTED]

E-mail: [REDACTED]

Dear [REDACTED]

Official Information Act (1982) Request

I write in response to your Official Information Act request, dated 27 May 2019. You requested the following information:

Some information around un-returned/ overdue medical equipment:

1. **How many items are in use in the community currently (end of May 2019)?**
 - **How much are they worth?**
2. **How many of those are overdue?**
 - **How much are those items worth?**
3. **What sort of items do they include?**
4. **What item is most commonly un-returned?**
5. **What is the most expensive piece of equipment, which is currently overdue?**
 - **How much is it worth?**
6. **How can someone return items they are no longer using?**
7. **Would people face a penalty when returning overdue items?**

We note that an initial response was provided to you on 22 May 2019, via the CM Health Communications Team (**attached**). You indicated that you were still interested in:

“Some of the figures I have asked for (particularly, how many items are overdue at the moment, and how much they are worth)?”

Noting the limitations we previously outlined, as to the diversity of loan equipment, multiple sources for supply of those items, and different tracking systems across multiple services and teams, we have compiled further information on this topic as below.

Providing short-term loan equipment and devices for rehabilitation and ongoing medical care in the community is an important contributor to enabling people to have a faster treatment and recovery, increase safety and independence, and to effectively manage long-term health conditions. This loan of equipment can help reduce demand for, and length of stays in our hospital services. In many cases, that will achieve better health outcomes for patients, closer to home and family.

The Ministry of Health (Equipment and Modification Services), ACC and a range of other government and NGO organisations also fund and supply 'permanent loan' or subsidised equipment and modifications to people with disabilities living in the community. All equipment is provided based on a clinical assessment, and loaned for varying periods of time. DHBs are responsible for equipment for short-term rehabilitation, and to manage health conditions.

Our rehabilitation equipment items are supplied via a contract with external providers, with a per-diem rental charge paid by CM Health. That payment includes a proportion of the value of these items, as well as delivery/ collection, cleaning/ maintenance and service fees per item. Due to the volume of equipment involved, a CM Health based Equipment Administration team coordinates tracking of loan rehabilitation equipment.

In addition to rehabilitation items, a range of specialist medical and diagnostic devices are loaned to patients living in the community, via multiple services across the CM Health system. These items are generally purchased by the DHB directly, and maintained/ checked by the DHB Clinical Engineering Service. The management of these medical items is via the specialist services involved in their use, for example the Medical outpatient, Kidz First and Surgical team involved.

1. How many items are in use in the community currently (end of May 2019)?

o How much are they worth?

Each month, there are approximately 4,200 pieces of loan rehabilitation equipment (wheelchairs, hoists, commodes etc.) arranged by CM Health in use by people in the Counties Manukau community. The majority of these items are to support recovery from illness or surgery, and are loaned on a short-term (6-8 weeks) basis. Approximately 2,100 items of rehabilitation equipment are ordered and dispatched by CM Health clinicians each month, and 1,700 items are scheduled to be collected. The total cost paid by CM Health rental rehabilitation equipment, on loan in May 2019 for use in the month was \$167,000. We do not own the equipment, and do not hold information on the capital value of each item on loan.

The demand for medical and diagnostic devices is more dynamic; however, we have around 8,744 units identified as currently in use by community patients, with an estimated value in excess of \$6.5 million.

2. How many of those are overdue?

o How much are those items worth?

Once rehabilitation equipment is no longer required by a patient, the Equipment team will arrange for the external provider to collect. In some cases, this will involve a discussion with an Allied Health professional, as to clinician considerations for continued loan of items. If a patient requires equipment longer than initially planned, the loan can be extended, or funding of permanent items via Ministry or ACC can be considered.

Once equipment is scheduled to be collected, the DHB is not further charged, and collection is arranged by the provider. On average, it takes 6 days for the company to collect rental equipment that is no longer required by a patient. Delivery of new items needed is the priority, and collection needs to be at a mutually suitable time.

There are no truly 'overdue' loan items as such. We accept that a small proportion of items are 'lost to follow-up', for a variety of reasons such as a change of address, but the items can still be needed/

and in use, and is retrieved eventually. These situations account for 0.8% of the total cost to the DHB. Equally, in some cases, patients may choose not to use recommended equipment.

For community equipment, a very small portion is completely lost to follow-up, and there is a standard process agreed with the provider for items to be 'written off' at the DHB's cost, with a payment made to end the loan. Again, we do not own the equipment, and do not hold information on the capital value of each item on loan. Indicative replacement costs of the main rehabilitation loan items range from \$50 – \$2,000.

3. What sort of items do they include?

There are 350 different items of rehabilitation loan equipment that can be ordered for use within the community. The range includes items such as commodes, bathroom aids; rehab chairs pressure relieving devices/ specialist mattresses, wheelchairs, and temporary ramping.

Medical devices include items such as Enuresis Alarms, Apnoea Monitors and Continuous Positive Airway Pressure (CPAP) Units, Humidifiers, Infusion and Syringe Pumps, Pulse Oximeters, Oxygen Concentrators, Pulse Monitors, Breast Pumps, Electrocardiography units, and Ventilators. The most common medical device is Continuous Positive Airway Pressure Units. These items can range in cost from \$100-\$10,000 each.

4. What item is most commonly un-returned?

This varies across the 350 items, and circumstances of cases, but the most frequently issued low-cost items are more frequently involved (bathing aids and mobility aids). There will be items that are lost to follow-up by us, but are still in use.

In most cases, the people with medical devices are under closer regular clinical care by outpatient/ ambulatory services staff, and equipment is retrieved when it is no longer needed. The CM Health Clinical Engineering Team try to complete annual performance verification testing (aka WoF testing) checks on all these items, both in use in the hospital and loan items. A number of these devices are overdue for these checks, while in use in the community. There are a number of factors that contribute to equipment not being returned for timely testing, but these items are mainly returned when no longer required.

5. What is the most expensive piece of equipment, which is currently overdue?

○ How much is it worth?

There are currently no rehabilitation equipment items deemed overdue for retrieval – however, the most recent items that were deemed lost and written-off, cost CM Health \$54, \$65 and \$280 to recompense the provider, and end the loan.

6. How can someone return items they are no longer using?

Information is provided at the time of issuing equipment, and patients/ family can contact the Equipment Team within CM Health directly, or they can contact the external provider (details are on the items). Occasionally, patients/ family will return equipment back to the hospital main reception or outpatient clinics, or ask community clinical staff to remove items, and retrieval is managed with the Equipment team. We encourage our patients and community to return any Counties Manukau property and we more than happy collect any Counties Manukau equipment without any questions asked.

7. Would people face a penalty when returning overdue items?

Patients can request collection of items at any time, if they are no longer using items. There is no penalty for returning any item, irrespective of the length of time elapsed since it was supplied. As a district health board, we appreciate patient/ family goodwill and honesty to support this return of items. Together with our clinician relationships and contact with clients, this enables retrieved items to be provided to those in immediate need.

I trust this information satisfactorily answers your query. If you are not satisfied with this response you are entitled to seek a review of the response by the Ombudsman under section 28(3) of the Official Information Act.

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

Yours sincerely,



Fepulea'i Margie Apa
Chief Executive Officer
Counties Manukau Health

Appendix – Media Statement 22 May 2019

Statement: 22 May 2019

There are a significant number of medical and rehabilitation equipment items out 'on loan' at any one time, to help people with health and disability needs in the community.

These come from a range of sources and locations, including hospital, community services, NGOs and clinics. These items will range from loan rehabilitation equipment (wheelchairs, crutches) and specialist care items (hospital beds, hoists, mattress, personal care equipment), to medical devices, (such as ventilators, CPAP and dialysis machines, and medication pumps), as well as diagnostic devices like cardiac holter and glucose meters.

As a district health board, we rely on goodwill and honesty, as well as clinician relationships and contact with clients to retrieve items that are no longer required. Services will attempt to follow up longer loans of equipment to review use. Most items will be labelled (including a phone number), and people who are uncertain about the return of medical items, can contact the service or the hospital customer service number to check.

While it is difficult to 'value' all medical equipment in use - as they can be rented from suppliers, or funded by ACC or Ministry of Health, individual item values can range from \$20 to more than \$10,000. The MoH and ACC will also fund specialist items for the assessed permanent support needs of disabled people.

Returning unused loan items promptly enables them to be re-issued to others who need them, and reduces the need for the DHB to buy replacement items. Medical devices that have electronics should be checked or serviced annually by clinical engineers, so people can contact their DHB clinician/ service if an item has been on long loan.

Using equipment and devices appropriately in the community is an important contributor to enabling faster recovery and for managing long-term health conditions and needs, reducing demand for and stays in the hospital services, and to achieve better health outcomes, closer to home and family.