

Clinical ; Medicine
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Reporter - Investigations
NZ Herald

E-mail:

Act (1982) Request

I write in response to your Official Information Act request, dated 23 August 2018. You requested the following information:

- **The number of patients who waited/ are waiting longer than the clinically assessed timeframe for a Colonoscopy, from January 1 2018 to July 31 2018; and what proportion this represents.**
 - *Please break this information into different priorities (such as “urgent”, “non-urgent” and “surveillance”).*
 - *Please also provide the average and longest delays, broken down into the different priorities.*

Details of patients who waited for Colonoscopy - 1 January 2018 to 31 July 2018 (number and days) are provided in **Table 1**. In short, 27 Priority 1 patients waited longer than clinically assessed timeframes, 1,059 Priority 2 patients waited longer, and 292 people waited longer for surveillance colonoscopies.

All referrals are triaged on receipt to the appropriate clinical priority category, and managed accordingly.

Waitlists are not static, clinical grading will indicate allocation to a ‘banding’ of wait-times according to agreed guidelines. Those who wait longer are considered to have relatively lower clinical risk. Individuals may discuss with their General Practitioner, a review of this triage allocation if circumstances change.

We manage Colonoscopy procedures alongside other Gastroenterology Specialist procedures, which are delivered by the same clinical staff and resources. We aim to balance service provision so that all clinical and capacity demands are matched, including emergency and elective referrals. The colonoscopy service delivery volumes at CM Health have increased by 17% in the last twelve months.

As a consequence of these factors, caution should be applied in any comparison of this raw data and our performance with that of other DHBs, who may serve smaller populations, or have other inter- DHB specialist and diagnostic referral agreements.

Priority	P1	P2	Surveillance
Seen within the clinically assessed timeframe	336	1,033	222
Longer than the clinically assessed* timeframes	27	1,059	292
Total seen during timeframe (full 7 months)	363	2,092	514
% of waiting longer than clinically assessed timeframe	7%	51%	57%

Priority	P1	P2	Surveillance
Average waiting time (days)	11	42	86
Longest waiting time (days)	46	156	147

Table 1:

*Longer than the clinically assessed timeframes are:

- Priority 1: more than 14 days,
- Priority 2: more than 42 days,
- Surveillance: more than 84 days

For further information, please see (Table 2) - the CMDHB performance against the Ministry of Health Target for Access to Diagnostic Services for the last six months as follows, noting that we report this information in publicly available Reports to the Hospital Advisory sub-Committee of the CMDHB Board.

Colonoscopy Ministry of Health Targets	Jan	Feb	Mar	April	May	Jun
P1 – % within 14 days (target 85%)	98%	99%	100%	98%	95%	92%
P1 – % within 30 days (target 100%)	100%	100%	100%	100%	100%	100%
P2 – % within 42 days (target 70%)	65%	64%	68%	65%	65%	70%
P2 – % within 90 days (target 100%)	100%	100%	100%	100%	97%	100%
Surveillance – % within 84 days (target 70%)	71%	68%	78%	77%	74%	65%
Surveillance – % within 120 days (target 100%)	100%	99%	100%	100%	100%	91%
CT Colonography – % within 42 days (target 65%)	100%	100%	100%	100%	100%	100%

Table 2.

Note: the percentage reported to MoH is a 'point in time', and so can differ from other reports which are pulled retrospectively. The percentage reported for MoH differs for surveillance due to pathways utilised to gain this data.

We are happy to further discuss interpretation of the data provided, if you have any questions. Please contact us if the intended use for this information changes, and we will liaise with the Health Intelligence and Informatics service to revise the data. We advise that information and data provided here has been specifically prepared in response to the questions asked, to be used only for its intended purpose, and is covered by the Privacy Act and CM Health policy.

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,



Margie Apa
Chief Executive