



MidCentral District Health Board | Te Pae Hauora o Ruahine o Taranua

1. Improved Access to Elective Surgery

MidCentral Health District Health Board reports against the Ministry of Health Elective Health Target and the Elective Initiative. This is the basis on which MCH receives elective funding.

Elective Health Target

The Elective Health Target reports on discharge targets only (this excludes Cost Weighted Discharges). The definition for inclusion in the Health target is:

- Elective and arranged discharges from a surgical purchase unit, elective and arranged discharges with a surgical diagnosis-related group (DRG) from a non-surgical purchase unit (excluding maternity) and skin lesions or intraocular injections where these are reported to the National Minimum Dataset.

This target excludes cardiology and dental services and estimates for Inter District Flows (IDFs) discharges.

The Health Target to be achieved for 2016/17 year is 7,877 discharges.

Electives Initiative

The Electives Initiative reports on CWDs and discharge targets for the month and year-to-date, showing the overall performance of MidCentral Health (MCH).

2. MCH Elective Services Patient Flow Indicators (ESPIs)

This section relates to ESPI 2 and 5 only.

2.1 ESPI 2 – Patients Waiting Greater than Four Months for a First Specialist Assessment (FSA)

The measurement criterion for ESPI 2 remains as:

ESPI 2	Green	- zero patients waiting greater than four months
	Yellow	- 0.39 per cent or less waiting greater than four months
	Red	- 0.40 per cent or more waiting greater than four months

Table 1: ESPI 2

Service	Total New Patients June 2017	New Patients waiting greater than 4 months June 2017	New Patients waiting greater than 3 months April 2017
Cardiology	81	0	1
Dermatology	178	0	32
Diabetes/Endocrinology	80	10	23
Endoscopy	148	2	2
Gastroenterology	174	0	1
General Medicine	141	0	1
Haematology	105	0	0
Infectious Diseases	19	0	0
Neurology	184	0	4
Medical Oncology	126	0	0
Paediatric Medicine	327	1	25
Renal Medicine	36	0	1
Respiratory	174	4	9
Rheumatology	77	0	14
ENT	436	0	15
General Surgery	643	0	27
Gynaecology	506	0	95
Ophthalmology	455	1	68
Oral Maxillo Facial	4	0	1
Dental	131	0	6
Orthopaedics	727	17	49
Urology	368	0	27
TOTAL	5,120	35	401

NB: For the purpose of the ESPI 2 Dental is excluded from the total waiting list calculation but is included in our reporting.

ESPI 5 – Patients Waiting Greater than Four Months with Certainty of Treatment

The measurement criterion for ESPI 5 remains as:

ESPI 5	Green	- zero patients waiting greater than four months
	Yellow	- 0.99 percent or less waiting greater than four months
	Red	- 1 percent or more waiting greater than four months

Table 1 ESPI 5

Service	Total Patients with certainty waiting June 2017	Patients with certainty waiting greater than 4 months June 2017	Patients with certainty waiting greater than 3 months June 2017
Cardiology	10	0	0
Dental	4	0	0
ENT	259	12	51
General Surgery	220	4	38
Gynaecology	158	3	28
Ophthalmology	310	2	54
Orthopaedic	185	0	13
OMF	48	3	5
Urology	94	3	13
Total	1,288	27	202

MidCentral Health continues to focus on reducing the number of patients waiting greater than four months and increasing the number of patients waiting greater than three months that have a date for their surgery.

As at 1 July 2017 MCH had 12 of the 27 patients waiting greater than four months waiting for a date for surgery and 130 of the 202 waiting greater than three months still to be allocated a date for surgery. June saw patients having their surgery deferred due to acute demand and consequent bed shortages. This is the first we have seen of patients being deferred due to bed availability for many months.

Non-ESPI Waiting Lists for Services

- Please note the non ESPI waiting time has been reduced to four months in line with the ESPI 2 wait times.
- New patients waiting greater than four months are a sub-set of Total New Patients.
- The figures in brackets are the numbers of patients waiting greater than four months in April 2017.

Table 2 Non-ESPI Waiting Lists for Services as at June 2017

Service	Total New Patients June 2017	New Patients waiting greater than 4 months June 2017	New Patients booked
Surgical Services			
Audiology	314	79(82)	58
Continenence	39	1(0)	18
Continenence Dannevirke	1	0(1)	1
Continenence Horowhenua	8	1(2)	7
Dietician Clinic	62	4(4)	48
Podiatry Dannevirke	3	3(4)	0
Eye Diabetic Photo Screening	10	0(5)	7
Eye Orthoptist	74	0(1)	37
Dietician Clinic Horowhenua	14	0(4)	13
Orthopaedic Muscular Skeletal Clinic	105	67(70)	49
Urodynamics	3	0(0)	1
Podiatry	81	40(21)	20
Medical Services			
Respiratory Dannevirke	6	0(0)	4
Respiratory Nurse Assessment	3	1(1)	0
Respiratory Laboratory Clinic	296	11(15)	180
Sleep Apnoea Service	18	14(14)	1
Sleep Apnoea Screening	65	2(2)	0
ECG (Electrocardiograph)	100	0(0)	99
EEG (Electro Encephalograph)	38	1(2)	27
ERCP (Endoscopic Retrograde Cholangio Pancreatography)	0	0 (0)	0
Neurology Tests	121	2(4)	61
Radiology Transoesophageal Echocardiography (TOE)	0	0 (0)	0
Holter Monitor	33	0(0)	14
Exercise Test	31	0(0)	15
Echo	122	6 (6)	91

Service	Total New Patients June 2017	New Patients waiting greater than 4 months June 2017	New Patients booked
Pace Maker	0	0 (0)	0
Diabetes Nurse Clinic	28	0(0)	6
Women's Health			
Colposcopy	144	20(45)	55
Fertility	22	0(1)	1
Gynaecology Urodynamics	26	1(1)	12
Colposcopy Horowhenua	0	0 (0)	0
ElderHealth			
ElderHealth Clinic Horowhenua	23	1(2)	7
Elderly Psychogeriatric Horowhenua	15	15(11)	0
Radiology Services *			
Ultrasound	1539	329 (599)	257
Computed Tomography (CT)	300	0 (0)	215
Gastrointestinal	68	4(5)	4
Mammogram	127	1(4)	114
Angioplasty (non cardiac)	9	0(0)	2
Cardiac Rest/Stress test	88	9(8)	11
Bone Scans	33	1 (1)	32

These services are now being reported against the same criteria as the ESPI 2 with the goal to have no patients waiting greater than four months.

Overall the number of patients waiting greater than four months for a non-ministry reported assessment or diagnostic has reduced by 31 over the last two month since the end of April 2017. As at the end of June, 826 of the 1,805 (45 percent) new patients waiting had a date to be seen (excluding the Medical Imaging statistics).

The Women's Health Colposcopy guideline states that, unless patients are high risk, they must be seen within six months. All high risk patients are seen within six weeks and those in the table indicated as waiting greater than four months are not high risk. All patients are seen within the guideline parameter of six months.

Diagnostic Service Waiting Times

Medical Imaging

Recruitment to Sonographer vacancies continues. Utilisation of casual staff also continues.

The initiatives are having a positive impact on the overall number waiting. With the assistance of casual staff the number waiting greater than 4 months has decreased by 270.

The Computed Tomography (CT) waiting time indicator improved this month to 89.7 percent. The extension of hours in CT which commences on 3 July 2017 is expected to have a positive impact on the wait time indicator.

First Specialist Assessment (FSA) - Declines

Definition of “decline” for the purpose of this table is decline due to reasons of service capacity and ability to see the patient within four months.

Table 3 First Specialist Assessment (FSA) – Referral Declines

Services	Referral Declines March 2017	Referral Declines April 2017	Referral Declines May 2017	Referral Declines June 2017
Medical				
Cardiology	80	74	63	88
Dermatology	11	11	12	8
Diabetes/Endocrinology	3	0	1	0
Endoscopy	0	0	0	0
Gastroenterology	17	1	8	4
General Medicine	17	23	10	1
Haematology	0	0	1	2
Infectious Diseases	0	1	0	0
Neurology	26	19	33	31
Oncology	0	0	0	0
Paediatric Medicine	1	2	2	0
Renal Medicine	7	10	10	8
Respiratory	4	4	0	0
Rheumatology	6	4	15	0
ENT	54	27	24	9
General Surgery	105	77	73	37

Services	Referral Declines March 2017	Referral Declines April 2017	Referral Declines May 2017	Referral Declines June 2017
Gynaecology	0	1	0	4
Ophthalmology	24	22	29	27
Oral Maxillo Facial	1	0	0	0
Dental	9	8	18	7
Orthopaedics	16	27	3	1
Urology	71	39	36	19
TOTAL	452	350	338	246

Over the last four months 12,489 referrals have been received into the organisation. Of these 10,797 referrals were accepted with a total of 1,386 being declined and returned to their GP for ongoing management as they did not meet the access threshold at the time. The decline rate for referrals over the last four months has increased from 6.8 percent in the last reporting period to 10.9 percent for the period March – June 2017. All patients accepted are required to be seen within four months.

On top of the 1,302 referrals that have been declined over the last four months due to not meeting the threshold for assessment, another 323 referrals were removed from the waiting list for reasons such as correspondence returned to the GP, moved out of the region, or appointment no longer required. The number of referrals being declined or having virtual assessments completed is increasing as services manage their capacity and demand, with the focus being on treating new patients within four months whilst also ensuring that follow up patients are being seen within the timeframes required.

The data for March, April and May has been updated. The data for June is a snap shot as at the end of June 2017 and is subject to change for both referrals received and referrals declined.