



West Coast District Health Board

Te Poari Hauora a Rohe o Tai Poutini

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17 December 2019

9(2)(a)

RE Official Information Act request WCDHB 9356

I refer to your email dated 9 October 2019 requesting the following information under the Official Information Act from West Coast DHB. We note your request was subsequently clarified on 29 October 2019 as below:

As we advised you in our extension letter dated 22 November 2019, we considered declining your request under section 18(f) of the Official Information Act i.e. that collating the material would require a substantial amount of time and resource. However, after discussing your request internally we are able to provide you with a partial response.

1. The performance measure results of each department from September 2017 to September 2019 e.g. patient flow indicators.

We have interpreted this question to relate to the national Elective Services Performance Indicator (ESPI) measure results for patients waiting times in excess of 120 days from referral to first specialist assessment (ESPI 2) and for patients waiting more than 120 days for surgery after being given commitment to treatment (ESPI 5). Given that waiting times for outpatient appointments and for surgery are dynamic and literally change from day to day as services are conducted, we have listed below the snapshot results for ESPI 2 and ESPI 5 indicator results as they were for each department as at 30 September in 2017, 2018 and 2019. Accordingly, the results for these two ESPI performance measures were as follows:

Table one: Patients waiting longer than 120 days from referral for First Specialist Assessment (ESPI 2 Performance Measure)

Specialty Department	As At 30 September 2017		As At 30 September 2018		As At 30 September 2019	
	Number Waiting over 120 days	% of Total Patients Waiting	Number Waiting over 120 days	% of Total Patients Waiting	Number Waiting over 120 days	% of Total Patients Waiting
Dental Surgery	0	0%	0	0%	0	0%
General Surgery	0	0%	1	0.6%	0	0%
Gynaecology	0	0%	0	0%	1	0.6%
Ophthalmology	0	0%	0	0%	0	0%
Orthopaedic	47	26.7%	162	62.5%	1	1.5%
Paediatric Surgery	0	0%	0	0%	0	0%
Plastics	0	0%	15	23.4%	11	21.2%
Urology	0	0%	0	0%	0	0%

Otorhinolaryngology	0	0%	0	0%	0	0%
Cardiology	0	0%	0	0%	0	0%
Dermatology	0	0%	0	0%	0	0%
Gastroenterology	0	0%	0	0%	0	0%
General Medicine	0	0%	0	0%	0	0%
Haematology	0	0%	0	0%	0	0%
Neurology	0	0%	2	25.0%	8	33.3%
Oncology	0	0%	0	0%	0	0%
Paediatric Medicine	0	0%	0	0%	0	0%
Renal Medicine	0	0%	0	0%	0	0%
Respiratory	0	0%	1	3.1%	1	4.8%
Rheumatology	0	0%	0	0%	0	0%
TOTAL	47	5.5%	181	17.1%	22	2.4%

Table two: Patients given a commitment to treatment with wait times over 120 days for Specialist Elective Surgery (ESPI 5 Performance Measure)

Specialty Department	As At 30 September 2017		As At 30 September 2018		As At 30 September 2019	
	Number Waiting over 120 days	% of Total Patients Waiting	Number Waiting over 120 days	% of Total Patients Waiting	Number Waiting over 120 days	% of Total Patients Waiting
Dental Surgery	0	0%	0	0%	10	27.8%
General Surgery	0	0%	0	0%	2	2.0%
Gynaecology	0	0%	2	9.1%	0	0%
Ophthalmology	0	0%	0	0%	0	0%
Orthopaedic	0	0%	0	0%	24	29.3%
Paediatric Surgery	0	0%	0	0%	0	0%
Plastics	2	6.3%	7	26.0%	8	30.8%
Urology	0	0%	0	0%	0	0%
TOTAL	2	0.9%	9	3.5%	44	15.5%

2. The number of vacancies in specialist roles across each DHB department and length of each vacancy from September 2017 to September 2019?

Please refer to **Table three** (below) for the number of West Coast DHB staff vacancies from September 2017 to 31 August 2019 and also vacancies advertised before 1 September 2019 which are still current.

Table three:

Date Range	Vacancies
01/09//2017 to 31/08/2018	4
01/09/2018 to 31/08/2019	4
Advertised before 01/09/2019 and still in progress	0
TOTAL	8

Note: The second part of the question relates to the length of each vacancy. This information is not available. We can identify how long we advertised a position from the placement of advert to its conclusion of placing people. That does not relate to the length of a vacancy as there may be a delay from it coming available to the advert being placed meaning length of vacancy will be inaccurate.

3. The cost of paying and total number of staff (plus extra expenses including things such as food and accommodation) on temporary contracts covering for someone of the same profession (also known as locum/cattle workforce/agency/bureaus) in each department from September 2017 to September 2019?

Please refer to **Table four** (below) for the total locum (including disbursements) spend for the period 1 September 2017 to 30 September 2019. **Please note:** As a remote rural district the West Coast DHB has always relied on locum and temporary appointments to maintain its staffing requirements.

Table four:

Speciality	Amount
Anaesthetics	\$1,611,133
General Medicine	\$1,952,640
General Surgery	\$2,590,700
Mental Health Specialists	\$1,408,669
Obstetrician & Gynaecologist Specialists	\$749,139
Rural Medical Health Specialists	\$1,512,069
General Practice – DHB wide	\$4,063,505
Registered Medical Officers – DHB wide	\$584,787
Total	\$14,472,642

Note: This data does not include costs paid to engage visiting Specialists who travel to the West Coast under contract to deliver regular contracted inpatient and outpatient services. The nature of such contractual arrangements are service rather than FTE based, and as such, do not allow for a calculation of associated staffing-related costs. Such costs are built in to service prices as an input cost to service contract by the respective employers or agencies of such personnel.

4. The total number of staff in each department if it was at its ideal target from September 2017 to September 2019?

There is no “ideal target” as such. Each ward and department is staffed according to agreed rosters and clinical support requirements. These are initially based on an assumption of standard cover requirements. However these can change on a day by day or even hour by hour basis according to the occupancy and acuity or complexity of patients. For this reason we maintain a system of sharing and moving staff to meet demand.

5. What are the DHB’s staffing arrangements when departments are not at full staff capacity?

Please see above.

6. The average length of each staff member’s employment (staff members contracts explained above) with the DHB from September 2017 to September 2019?

There were 1,058 West Coast DHB employees as at the end of September 2019 (including permanent, casual, and fixed-term contracts). Please refer to **Table five** (below) for the Average Length of Service between September 2017 and September 2019 (all figures given in years).

Table five:

WCDHB Average Length of Service (years)	Sept. 2017	Sept. 2018	Sept. 2019
West Coast District Health Board	8.4	8.5	8.4

7. The average wait times for patients, as well as longest and shortest individual wait times for specialist appointments and elective surgeries from September 2017 to September 2019? Please specify each specialist department? i.e. neurologist, cardiologist etc and if it was for appointments or elective surgeries.

The average wait times, longest and shortest individual patient wait times for first specialist outpatient appointments and for accepted elective surgeries by specialist department for those patients on public waiting lists seen between 1 September 2017 and 30 September 2019 are outlined in the two tables below. The tables include individual patients who waited longer than the 120-day targets that had previously been offered appointments,

but not subsequently turned up on the day; the reasons for which may be quite variable depending on the individual patient and their particular circumstances. **They have been left on our waiting lists for re-booking to offer an additional alternative appointment dates to be seen or treated by a Specialist, rather than being simply removed and their referral returned to their primary care referrer.** With this noted, the results for the period requested are as follows. Please refer to **Tables six and seven** (below):

Table six: Wait times for Specialist Outpatient Wait Times from Referral to First Specialist Assessment (FSA)

Specialty Department	Number of Patients	Minimum Days Wait	Average Days Wait	Longest Days Wait
Anaesthesiology	1100	0	35.30	323
Cardiology	131	0	62.20	140
Dental Surgery	16	8	41.56	112
Dermatology	12	10	34.83	71
Diabetology	88	2	47.19	342
Echocardiograph	563	0	53.06	251
General Medicine	1052	0	47.68	158
General Surgery	2708	0	52.26	211
Gynaecology	1066	0	57.44	348
Haematology	31	3	49.45	220
Neurology	106	6	108.90	330
Oncology	83	0	11.73	74
Ophthalmology	1248	0	65.70	188
Orthopaedic	611	0	188.67	597
Otorhinolaryngology	680	0	44.17	141
Paediatric Medicine	602	0	46.57	203
Paediatric Surgery	112	0	53.07	255
Plastics	340	1	107.12	346
Renal Medicine	24	6	72.21	161
Respiratory	130	1	115.16	216
Rheumatology	197	3	62.32	126
Urology	546	0	86.63	243
Vascular Surgery	78	1	26.51	200

Table seven: Wait Times for Specialist Elective Surgery for Accepted Public Waiting List Patients

Specialty Department	Number of Patients	Minimum Days Wait	Average Days Wait	Longest Days Wait
Anaesthesiology	9	2	10.66	20
Dental Surgery	164	9	92.89	281
General Surgery	1697	1	39.14	279
Gynaecology	305	1	49.38	173
Ophthalmology	585	0	54.95	282
Orthopaedic	374	1	57.25	442
Paediatric Surgery	32	5	72.19	412
Plastics	163	2	93.57	360
Urology	151	6	59.67	191

I trust that this satisfies your interest in this matter.

You may, under section 28(3) of the Official Information Act, seek a review of our decision to withhold information by the Ombudsman. Information about how to make a complaint is available at www.ombudsman.parliament.nz; or Freephone 0800 802 602.

Please note that this response, or an edited version of this response, may be published on the West Coast DHB website after your receipt of this response.

Yours sincerely

A handwritten signature in black ink, appearing to read 'Gullery', with a long, sweeping horizontal line extending to the right.

Carolyn Gullery
Executive Director
Planning, Funding & Decision Support