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7 March 2022

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RE Official Information Act request CDHB 10812 and WCDHB 9663

I refer to your email dated 3 February 2022 requesting the following information under the Official Information Act from Canterbury DHB and West Coast DHB regarding palliative care. Specifically:

1. Does your DHB have a palliative care service?
 - a. If yes, what is its annual budget?

The following information relates to **Specialist palliative care services in the CDHB and the WCDHB**. The distinction between specialist and primary palliative care is important given that a large proportion of day to day palliative care is provided by non-specialist providers. These primary palliative care providers includes GP teams, district nurses, aged residential care staff, community allied health staff and staff working in public hospitals including ward based nurses/doctors/allied health and staff working in specialist services such as oncology, surgery, older persons health and general medicine.

As far as specialist palliative care, there is an **integrated service** across both Canterbury DHB and West Coast DHB.

1. Nurse Maude Hospice palliative care service is contracted by the Canterbury DHB. They have a fixed annual budget of \$5 Million. 2.4 FTE Palliative Medicine Specialists and 1.0 FTE Resident Medical Officer (RMO) are also employed within the Christchurch Hospital Palliative Care Service and deployed to work out of the Nurse Maude Hospice.
2. Christchurch Hospital Palliative Care Service is a consult liaison service operating out of the Canterbury Regional Oncology and Haematology Service. There are 1.2 FTE Palliative Medicine Senior Medical Officer (SMO), 1FTE RMO, 0.9 FTE Nurse Practitioner, 0.6 FTE Clinical Nurse Specialist (CNS), 0.8 Registered Nurse (RN) and additional RN cover for annual leave.
3. Ashburton Hospital provides a hospital and community service with 0.8 FTE palliative care CNS, supported by a visiting SMO from Christchurch.
4. The total budget for salaries for Palliative Care for Christchurch and Ashburton Hospitals is \$1.49m.
5. The West Coast DHB service covers hospital, community and ARC with 1.6 FTE palliative care CNS (2 nurses) based in Greymouth and 0.6 FTE (2 nurses) in Westport. These nurses are supported by regular visits by the NP from the hospital palliative care team in Christchurch and one of the SMOs based at the Nurse Maude Hospice. Annual budgets for direct palliative care provision by the West Coast DHB is circa \$559,600.

Figures provided exclude any consideration of costs associated with services provided for people admitted to our hospital facilities, as well as excluding costs of the community support care provided to palliative care and end of life care by DHB district nurses as part of their wider duties, and of other such services provided by DHB allied health professionals and other staff. It is not possible to estimate the input costs of these additional services provided to people receiving palliative and end of life care.

As noted above, a considerable proportion of the workload of district nurses in Canterbury and the West Coast is palliative care.

2. How many palliative care specialists do you employ?

5 SMOs (3.6 FTE)
2 RMO training positions (2 FTE)

3. How many DHB FTEs are dedicated to palliative care and what are their job titles (eg CNS, nurse practitioner, allied health)?

CDHB (Christchurch Hospital and Ashburton)

1 Nurse Practitioner (0.9 FTE)
3 Clinical Nurse Specialists (CNS) (2.4 FTE) – one of these is employed by Ashburton Hospital
1 Registered Nurse (0.8 FTE)
No allied health

WCDHB

2 CNSs (1.6 FTE) in Greymouth and 2 CNSs (0.6 FTE) in Westport

Nurse Maude

Full range of staff employed as part of the contract with the DHB - nursing, allied health, family support and cultural/spiritual care to cover inpatient unit and community (including aged residential care).

4. Do all palliative patients have access to telephone 24/7 specialist palliative care advice and support?

Yes

5. Do all palliative care patients have access to visits from district nurses and General Practitioners 24/7, wherever they are located - home, care home, rural and urban?

Yes, to district nursing (**note** – district nurses DO NOT go into ARC, nursing care is provided by ARC nurses with specialist nursing available for advice if needed)

General Practice availability is highly variable, and often patients do not have GP care available after hours.

6. Do all palliative patients (no matter where located) have access to assessment and care from multidisciplinary specialist palliative care teams?

Yes

7. Do all patients admitted to hospital have access to multidisciplinary specialist palliative care teams?

Christchurch, Burwood and Women's Hospitals - Yes (this is medical and nursing only – allied health and spiritual/cultural support is provided by the ward-based staff)

Ashburton and Grey Hospitals – Yes but only nursing (specialist medical via telephone advice or during scheduled visits)

8. How many FTEs do you have dedicated to implementation of end of life care pathways and advanced care planning?

Nurse Maude Hospice Palliative Care Service has 0.8FTE Te ara Whakapiri Facilitator who provides support and facilitation to all Aged Residential Care facilities (ARCF) across Canterbury. Advance Care Planning does not have dedicated FTE but it is integral in the roles of all the Nurse Maude specialist team in the community and those who support Aged Residential Care (ARC).

9. When are people referred to palliative care, by whom and how close to death?

Patients can be referred at any time in their palliative trajectory. Palliative care is needs based, not diagnosis or prognosis based.

- In hospital all referrals are made by the ward team, via medical staff.
- Community referrals are usually made by the GP, practice nurse or district nurse.
- Palliative care nurses are part of the wider ARC teams in individual facilities so formal referral is not required.

10. How much annual funding do you provide for local hospice services?

See Question 1 above

Please note: there is also an extensive amount of information which is publicly available provided on the HealthInfo website. www.HealthInfo.org.nz;

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 Canterbury DHB and West Coast DHB websites after your receipt of this response.

Yours sincerely



Ralph La Salle
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Canterbury DHB & West Coast DHB