



6 September 2021



Dear 

Re: OIA request – Outpatient day stay beds for chemotherapy treatment

Thank you for your Official Information Act request received 10 August 2021 seeking information from Waitematā District Health Board (DHB) about utilisation of outpatient day stay beds for chemotherapy, average wait times for chemotherapy, nursing and oncologist FTE and patients treated with chemotherapy in our day stay areas.

You requested the following information:

I request all original communications including briefings, reports, memos, aides memoirs, cabinet papers and texts regarding the following information:

- 1. The utilisation rate for, outpatient or day stay attendance for IV chemotherapy, expressed as**
 - a. patients per chair per day (plus definition of a chair day)**
 - b. occupancy expressed as percentage of time on average that a chemo chair is occupied, annually for the past five years**
- 2. Average waiting time for first treatment of, outpatient or day stay attendance for day stay IV chemotherapy, expressed in days per year for the past 5 years**
- 3. Number of, outpatient or day stay attendance for IV chemotherapy, nursing staff expressed as FTEs annually for the past 5 years in absolute numbers and then per capita**
- 4. Number of oncologists managing, outpatient or day stay attendance for IV chemotherapy, expressed as FTEs annually for the past 5 years in absolute numbers and then per capita**
- 5. Number of people who have had, outpatient or day stay attendance IV chemotherapy, expressed as total, Māori (absolute and as a percentage of the total) and non- Māori (absolute numbers and as a percentage of the total), annually for the past 5 years**

Before responding to your specific questions, it may be useful to provide some context about our services.

Waitematā is the largest and one of the most rapidly growing DHBs in the country, serving a population of around 650,000 across the North Shore, Waitakere and Rodney areas. We are the largest employer in the district, employing around 8,600 people across more than 80 locations.

In addition to providing care to our own resident population, we are the Northern Region provider of forensic mental health services and child rehabilitation services, plus the metro Auckland provider of child community dental services and community alcohol and drug services.

In response to your request, we are able to provide the following information:

In regards to your request for all original communications, we are refusing this aspect of your request under section 18(g) of the Official Information Act as we do not hold “briefings, reports, memos, aides memoirs, cabinet papers or texts” about the information you are seeking.

You have the right to seek an investigation and review of this decision by the Ombudsman. Information about how to seek a review is available at www.ombudsman.parliament.nz or Freephone 0800 802 602.

However, we are able to provide data for each of your questions as follows:

1. The utilisation rate for, outpatient or day stay attendance for IV chemotherapy, expressed as a. patients per chair per day (plus definition of a chair day)

As mentioned earlier, Waitematā DHB is the largest and one of the most rapidly growing DHBs in New Zealand. We advise caution in comparing information provided by the various DHBs as differences in population size and demographics have a direct impact on the results reported.

Waitematā DHB does not provide day-stay care for oncology patients as this is currently managed by Auckland DHB for patients in our district. Waitematā DHB does provide some chemotherapy to haematology patients in our haematology day stay.

However, it should also be noted that not all haematology patients residing in our catchment are managed by Waitematā DHB, with a number of patients referred to Auckland DHB for ongoing management. Additionally, other non-chemotherapy treatments are also provided in this day stay area which makes interpretation of the utilisation of these chairs difficult and/or potentially misleading.

Haematology day stay has 10 dedicated bed spaces and one isolation room. These 11 spaces are available and staffed for five days a week from 0830 (8.30am) to 1730 (5.30pm). Waitematā DHB does not have a standard definition for a ‘chair day’.

We have calculated chemotherapy patients per chair per day as the total number of patients divided by the number of chairs available against the number of working days per annum.

It should be noted that chairs are not used exclusively for chemotherapy, with other therapies also provided.

North Shore Hospital haematology day stay attendances from 2016-2021			
Financial year from 1 Jul to 30 Jun	Chemotherapy attendances (haematology patients)	Working days	Chemotherapy Patients/chair/working day
2017	2869	250	1.04
2018	3780	249	1.38
2019	4013	248	1.47
2020	3993	252	1.44
2021	3726	250	1.35

This table shows a decrease in attendances in 2020 and 2021 financial years. While it is difficult to pinpoint a specific cause for this reduction, it is likely that multiple factors contribute to this reduction including; decreased rates of patients being referred or able to attend hospital appointments during the lockdown periods (urgent cases were still seen); increased use of oral chemotherapy regimens which do not require patients to receive care in our outpatient areas; and increased use of chemotherapy regimens that are less-intensive in terms of visits but equally effective.

While treatment numbers have decreased over this time period, patients experiencing delays to treatment do not appear to be increasing and we have, in fact, maintained our excellent performance in this area – see below for further details.

b. occupancy expressed as percentage of time on average that a chemo chair is occupied, annually for the past five years

Currently, appointments (and the allocated time for these) are made using a Microsoft Outlook calendar. To provide the information you are seeking, we would need to identify each appointment for chemotherapy treatment, collate the appointment data and then calculate the average utilisation rate. This would take frontline staff away from their regular duties and prejudice our ability to provide core services.

We have considered whether charging or extending the timeframe for responding to this aspect of your request would assist us in managing this work and have concluded it would not. We have, therefore, determined to refuse this element of your request under Section 18(f) of the Official Information Act due to substantial collation and research.

You have the right to seek an investigation and review by the Ombudsman of this decision. Information about how to seek a review is available at www.ombudsman.parliament.nz or Freephone 0800 802 602.

2. Average waiting time for first treatment of outpatient or day stay attendance for day stay IV chemotherapy, expressed in days per year for the past five years

The data below shows our performance against the Ministry of Health’s (MoH) Faster Cancer Treatment Targets to receive treatment within 31 days of a confirmed diagnosis of cancer. However, it should be noted that this data is not specific to chemotherapy and may include targeted therapies, palliative care or other treatment options.

Ministry of Health’s Faster Cancer Treatment Targets - Waitematā DHB results			
Calendar year	31-day indicator	Patients tracked	Compliant*
2016	97.9%	193	189
2017	98.9%	190	188
2018	98.9%	186	184
2019	98.8%	169	167
2020	98.8%	176	174
2021 – Jan to 19 Aug	100%	96	96

*Non-compliance with the 31-day treatment target occurs with a small number of patients due to reasons such as patient choice and clinical considerations (e.g., the patient is not medically stable for treatment). Across the past five years, only one breach of the 31-day target has been due to a lack of capacity.

3. Number of outpatient or day stay attendance for IV chemotherapy nursing staff expressed as full-time equivalents (FTEs) annually for the past 5 years in absolute numbers and then per capita

We have interpreted your question as being ‘the number of nurses employed to work in our haematology day stay area’. The number of employed FTE nursing staff varies throughout the year due to vacancies and subsequent new appointments within the service. We are, therefore, not able to provide ‘absolute numbers’ as requested, but have provided the average number of nursing staff each calendar year.

As outlined above, the number of staff employed in this area provide services other than IV chemotherapy.

Average number of FTE nursing staff in haematology day stay at North Shore Hospital each calendar year for the past five years	
Calendar year	Average haematology day stay nurses (FTEs)
2017	4.74
2018	4.83
2019	5.67
2020	6.43
2021 [‡]	6.35

‡ Jan – Jun 2021 data

4. Number of oncologists managing outpatient or day stay attendance for IV chemotherapy, expressed as FTEs annually for the past five years in absolute numbers and then per capita.

Waitematā DHB does not employ oncologists as oncology care is provided by Auckland DHB.

5. Number of people who have had outpatient or day stay attendance IV chemotherapy, expressed as total, Māori (absolute and as a percentage of the total) and non-Māori (absolute numbers and as a percentage of the total), annually for the past five years.

As previously outlined, the numbers provided include other non-chemotherapy treatments which are also provided in this day stay area. This makes interpretation of the utilisation of these chairs difficult and/or potentially misleading.

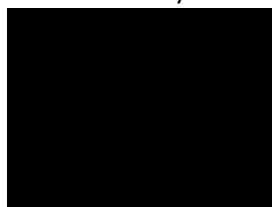
Number of Māori and non-Māori patients					
Financial year	Patients				
	Total	Māori	Māori (%)	Non-Māori	Non-Māori (%)
2017	260	15	5.77%	245	94.23%
2018	382	16	4.19%	366	95.81%
2019	398	13	3.27%	385	96.73%
2020	504	18	3.57%	486	96.43%
2021	505	23	4.55%	482	95.45%

I trust that this information is helpful.

Waitematā DHB supports the open disclosure of information to assist community understanding of how we are delivering publicly funded healthcare. This includes the proactive publication of anonymised Official Information Act responses on our website from 10 working days after they have been released.

If you consider there are good reasons why this response should not be made publicly available, we will be happy to consider your views.

Yours sincerely



**Executive Director Hospital Services
Waitematā District Health Board**