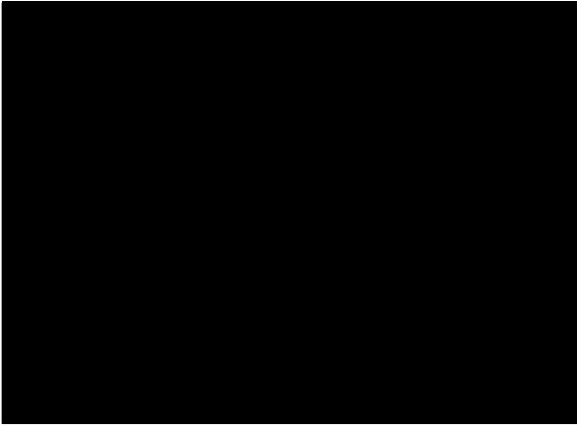


5 February 2020



**Re: Official Information Act request – Chronic pain services funding**

I refer to your official information request dated 26 November 2019 where you requested information in relation to chronic pain services for adults. This response was provided to you on 20 December 2019 for adult services. You had a follow up request to Emma Maddren on 20 December 2019 for the same information for paediatric services. We have combined the two responses together for ease of reference.

**Could you please provide the following information regarding chronic pain services for the population of your district health board (DHB):**

**Are chronic pain services separately funded by the DHB?**

**Adult and Paediatric chronic pain services funding**

Some of the chronic pain services are separately funded by Auckland DHB. The Auckland Regional Pain Service (TARPS) provides a secondary and tertiary pain management service to the Auckland population and beyond. TARPS provide outpatient services including clinical assessment and management of acute and chronic pain utilising a multidisciplinary approach.

The TARPS team is made up of Anaesthetists, Clinical Nurse Specialist, Occupational Therapist, Psychiatrist, Physiotherapists, Psychologists, and Pain Fellow.

If so, please provide data on:

**Budgeted and actual expenditure in 2017/18 and 2018/19**

Financial year	Budgeted operational expenditure (excluding overhead)	Actual expenditure
<b>Adults</b>		
2017/2018	\$1,757,840	\$1,667,049
2018/2019	\$1,833,876	\$1,816,136
<b>Paediatrics</b>		
2017/2018	\$392,055	\$444,718
2018/2019	\$442,440	\$473,934

**Number of pain specialists/consultants employed by the DHB**

**Adult:**

In the Adult service we have 8 pain specialists that contribute to the service within the above FTE.

**Paediatric:**

0.7 FTE Pain Senior Medical Specialists, although this FTE is not specifically funded for pain.

**Number of patients (both non-ACC and ACC patients) who received services in 2017/18 and 2018/19**

Financial year	Total number of patients referred to the service (both non-ACC and ACC patients)	Received services	Declined or forwarded (clinical reasons or duplicate referrals)
<b>Adults</b>			
2017/2018	1411	1098	313
2018/2019	1595	1185	410
<b>Paediatric</b>			
2017/2018	unknown	247*	unknown
2018/2019	unknown	207*	unknown

\*Please note that this is the number of unique patients seen by the multidisciplinary team, not the total contacts

**Average waiting times for an appointment following referral from a GP, or other health practitioner**

**Adults**

The current average (mean) waiting time for patients from referral as at the end of November 2019 is 67 days. 90% of patients are seen within 112 days.

## Paediatrics

Financial year	Average days between referral received and appointment	Median days between referral received and appointment
2017/2018	39	31
2018/2019	51	46

## Makeup and dedicated FTE of the budgeted multidisciplinary team workforce

### Adult:

Role Name	FTE budget 2019/2020
Service Lead Clinician	1.00
Pain Specialist	3.22
Pain Fellow	0.50
Nurse Specialist	1.40
Occupational Therapist	1.00
Clinical Psychologist	0.50
Health Psychologist	2.70
Intern Psychologist	0.80

### Paediatric:

Role Name	FTE budget 2019/2020
Pain Senior Medical Specialists	0.7
Psychiatrists	0.2
Psychologists	0.8
Nurse Specialist	0.4
Physio	0.6
Occupational Therapist	0.6
Administration support, including clinic scheduling	0.3

## What steps is the DHB taking to improve chronic pain services?

### Adult

We have no current plans for significant model of care or operational model change. However, we are focusing on small service improvements such as improving the wait time and process for spinal cord stimulator implants.

### Paediatric

In 2015/16 funding was secured for an extended multidisciplinary team with additional nurse specialist and psychology FTE, and new FTE for Physiotherapy, Occupational Therapy and administration support.

In 2016 Starship and ACC engaged in the commissioning of a Paediatric Complex Pain service. A model of care was developed, together with a costing model, the final version of this was submitted to ACC in mid-2018 and has not yet progressed.

Various clinical initiatives have been trialled in recent years including group work for children, group and educational sessions for parents, inpatient rehabilitation programme and educational material for patients and families. These have been variably sustained due to resource limitations within the pain team.

In 2020 Starship is reviewing both the acute and chronic pain services to identify areas for improvement and innovation.

You are entitled to seek a review of the response by the Ombudsman under section 28(3) of the Official Information Act. Information about how to make a complaint is available at [www.ombudsman.parliament.nz](http://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 Auckland DHB website.

Yours faithfully



Ailsa Claire, OBE  
Chief Executive