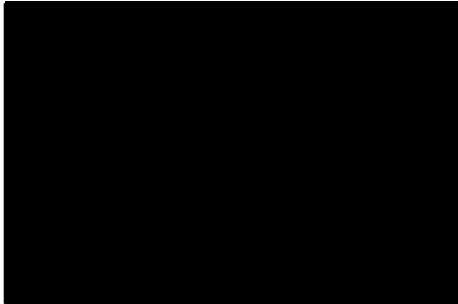


29 October 2019



Re: Official Information Act request – Lymphoedema Services

I refer to your Official Information Act request dated 3 October 2019 requesting the following information.

1. Does your DHB currently have a specified lymphoedema services?

Yes Auckland DHB has a specified lymphoedema service.

2. What services are provided for patients with lymphoedema in your DHB?

The service provides both assessment and treatment for those patients with primary and/or secondary Lymphoedema. Treatments may include education about Lymphoedema, how to manage this, massage therapy, decompression and compression.

3. How much funding is allocated for lymphoedema services within your DHB annually? Also, please include % of total budget. Please provide information for the last 3-5 years.

We are unable to provide a specific answer to this question as lymphoedema do not have a separate budget.

The budget for lymphoedema services is part of a wider community services budget.

Approximate budget for FY19/20 is \$205K the provider services budget for the same period is \$1,454,000

4. How many FTEs are allocated in your DHB for lymphoedema therapists?

1.0 FTE

5. How many lymphoedema therapist position vacancies have you had over the past year?

We have had a 0.8 FTE vacancy from March 2019. A new staff member starts November 2019 to make us fully recruited.

6. Does this service provide publicly funded lymphoedema services for cancer patients/survivors?

Yes

7. What is the eligibility criteria to access lymphoedema service for cancer patients/survivors in your DHB?

Eligibility for the service is diagnosis of unilateral/ bilateral lower or upper limb oedema.

8. Please list lymphoedema services / procedures available/ offered for cancer patients/survivors in your DHB (including education and early signs detection).

As above the service provides both assessment and treatment for those patients with primary and/or secondary Lymphoedema. Treatments may include education about Lymphoedema, how to manage this, massage therapy, decompression and compression. Cancer patients are referred by their specialist.

9. Is there a funded provision for compression garments in your DHB? If so, please specify what provision is funded (how many sets of compression garments per year).

If compression garments are required, these are funded and provided. Patients who are wearing these are therefore required to be seen regularly (6 monthly to 12 monthly) for reviews to ensure the garment is still appropriate and fitting well. The number of garments may vary but usually patients are issued with between one and two garments per year.

10. How can cancer patients/survivors access lymphoedema services in your DHB? Do they need a referral and who can provide the referral?

Patients need a referral to access the service and are referred either by their Primary Health Care provider or secondary healthcare provider (Specialist).

11. What is the average waiting time for cancer patients/ survivors to access lymphoedema services within your DHB?

At present the maximum wait time for patients is 29 days.

12. If you currently provide a lymphoedema service, what is the current waiting list status in your DHB? How many people are currently awaiting appointments? How many days is the waiting list currently at?

As on 22 October 2019 six clients were still waiting for appointments; five with scheduled appointments and one still on the waitlist to be scheduled. The current average waiting time of those patients waiting for an appointment is 29 days.

13. Is there a protocol on pre and post-surgery lymphoedema surveillance in your DHB and if so could you please provide it?

Currently there is no protocol regarding pre and post-surgery Lymphoedema surveillance

I trust this information answers your questions.

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 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

