

18th February 2021



Dear 

Official Information Act Request for – Diabetic Retinopathy

I write in response to your Official Information Act request received by us 19th January 2021, you requested the following information:

- 1. For 2020, the number of screens for diabetic retinopathy purchased, the number of screens delivered, and the DNA rate.**
- 2. The estimated number of people living with diabetes within the DHB.**
- 3. How many diabetic retinopathy screening episodes were delivered during lockdown, and how long any disruption lasted (i.e when did screening return to 'normal').**
- 4. On January 1 2021, how many new referrals were on the wait list for their first screening visit, the average time spent on this wait list, and the longest individual time spent waiting.**
- 5. On January 1 2021, how many existing patients were overdue for their follow up screening appointment, the average overdue time, and the longest individual time overdue.**

Counties Manukau Health Response:

For context Counties Manukau Health (CM Health) employs over 8,500 staff and provides health and support services to people living in the Counties Manukau region (approx. 595,590 people). We see over 118,000 people in our Emergency Department each year, and over 2,000 visitors come through Middlemore Hospital daily.

Our services are delivered via hospital, outpatient, ambulatory and community-based models of care. We provide regional and supra-regional specialist services i.e. for orthopaedics, plastics, burns and spinal services. There are also several specialist services provided including tertiary surgical services, medical services, mental health and addiction services.

- 1. For 2020, the number of screens for diabetic retinopathy purchased, the number of screens delivered, and the DNA rate.**

The Diabetic Retinal Screening Service is provided by CM Health directly and is not outsourced to external screening providers.

The number of screening events delivered by CM Health for the calendar year 2020 was 11,873. With the limitations of service delivery during Covid-19 this volume is under the projected target of ~14,000 (1150-1200 per month).

Pre-Covid-19, the DNA rate was 10% and post Covid-19 lockdown, reduced to 3% (see Figure 1 below). We believe the sustained drop in DNA rate is due to a process change where all patients are now called by phone on the day of the appointment to check their health status and Covid-19 risks. This process also acts as a prompt/reminder of the patient's appointment. The spike in DNAs for April is the one off effect of Covid-19 lockdown as it reduced immediately once the national Covid-19 Alert Level reduced.

The causes are likely to include:

- Uncertainty over the spread of Covid-19 and reluctance to attend screening appointments to avoid catching Covid-19 and transmission within the whanau/family
- Patient uncertainty on whether screening clinics were operating
- Public messaging on the need to stay home except for essential activities

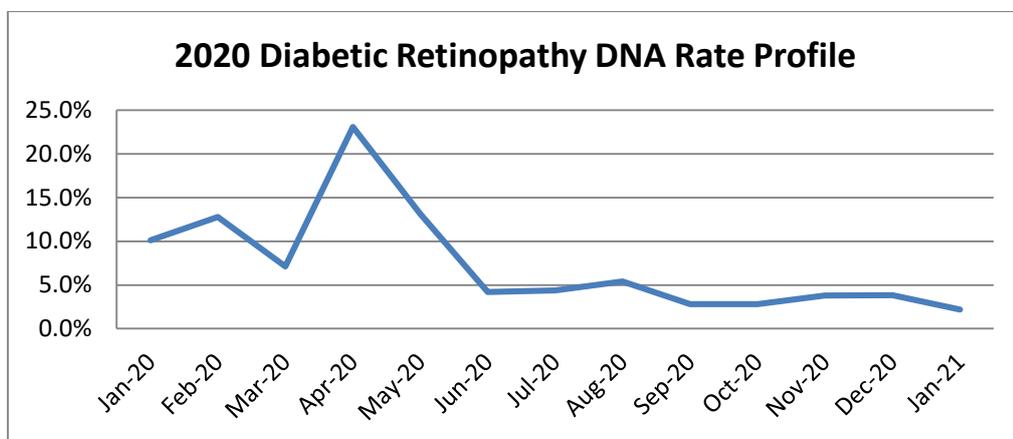


Figure 1: Sourced Retinal Screening Service

2. The estimated number of people living with diabetes within the DHB.

The 2019 MoH virtual diabetes register (VDR) indicates 45,266 people domiciled in Counties Manukau are living with diabetes.

However, based on actual diabetes lab results (from TestSafe), and using health service utilisation population as a denominator. There were 43,839 people living with diabetes in 2019 in Counties Manukau (deaths up to 2019 were excluded).

Routine diabetic retinal screening is recommended every two to three years. It is more frequent for people with changes to their eyes and for women pre-existing or newly diagnosed Type 1 and Type 2 diabetes during pregnancy.

3. How many diabetic retinopathy screening episodes were delivered during lockdown, and how long any disruption lasted (i.e when did screening return to 'normal').

Table 1 below reflects the number of patients screened. The number of patients is limited by the national COVID Alert level where physical distancing of patients is enabled by increased time between patients. Auckland went to Level 4 in March 2020 so there is a corresponding reduction in the number of patients seen. It is also important to also note that prior to lockdown, patients were at times cancelling their appointments for various reasons.

During the March 2020 lockdown, screening was only provided to people identified as high clinical priority. As the National Alert Level reduced, the physical distancing requirements were gradually lessened to allow for more people to be screened.

CM Health offers screening from community locations; the majority of which closed during Lockdown Levels four and three.

The screening clinics de-camped from their community sites and re-located to the Outpatient Clinic at Manukau SuperClinic and an Accident & Medical Facility which would accept the service.

During lockdown Level four – the entire new referral waitlist, was re-prioritised. The prioritisation was based on clinical risk with the priority categories extending from two categories to four categories (P1-P4) to ensure that the most urgent patients were seen as soon as possible after lockdown. Figure 2 reflects the priority definitions for new patients to be screened as follows:

Priority 1 (P1)	Urgent
Priority 2 (P2)	Semi-urgent
Priority 3 (P3)	Routine
Priority 4 (P4)	Low priority

Figure 2: Retinal Screening Service

Diabetic Retinopathy Screening – During Alert Levels			
Dates	Alert Level	Activity	Number Screened
26 March - 28 April 2020	4	<ul style="list-style-type: none"> High Risk Antenatal Women 	21
29 April – 13 May 2020	3	<ul style="list-style-type: none"> High Risk Antenatal Women P1 – New Referrals Urgent Follow-Up ≤ 6 months 	124
14 May – 8 June 2020	2	<ul style="list-style-type: none"> High Risk Antenatal Women P1 – New Referrals P2 – New Referrals Urgent Follow-Ups ≤ 9 months 	649
9 June - 1 August 2020	1	Routine clinics with a continued focus on: <ul style="list-style-type: none"> P1 – New Referrals P2 – New Referrals Semi-urgent follow-ups ≤ 12 months. 	2729
12 – 30 August 2020	3	<ul style="list-style-type: none"> High Risk Antenatal Women P1 – New Referrals Urgent Follow-Up ≤ 6 months 	164
31 August – 7 October 2020	2	<ul style="list-style-type: none"> High Risk Antenatal Women P1 – New Referrals P2 – New Referrals Urgent Follow-Ups ≤ 9 months 	1359
8 October – 31 December 2020	1	Routine clinics with a continued focus on: <ul style="list-style-type: none"> P1 – New Referrals P2 – New Referrals Semi-urgent follow-ups ≤ 12 months. 	3479

Table 1 – Data Source: Retinal Screening Service 04/02/2021

4. On January 1 2021, how many new referrals were on the wait list for their first screening visit, the average time spent on this wait list, and the longest individual time spent waiting.

New referral data below is for the period to 01/01/2021

New Referral Priority	Total on Waitlist	Total with Future Appointments	Total Awaiting Appointment	Average time on List (Days)	Longest time on List
P1 – Urgent	7	7	0	10.6	24
P2 – Semi Urgent	338	232	106	47.2	241
P3 – Routine	717	429	288	81.5	296
P4 – Low Priority	446	133	313	95.5	258
Total Number	1508	801	707	77.6 Days	

Table 2 – Data Source: Retinal Screening Service 04/02/2021

For CM Health, the average time on the wait list can be skewed by the longest waiting people. For new patients, the DHB keeps the initial date of registration. Some patients may have had cancelled appointments but the first date remains. Despite multiple attempts using different methods, some people have not been contactable but DHB policy is to leave them on the register. The same policy applies to follow up patients in the following table who are non-contactable.

5. On January 1 2021, how many existing patients were overdue for their follow up screening appointment, the average overdue time, and the longest individual time overdue.

Follow-up Time Frame ¹	Number of Patients	Longest Waiting (Days)
3 Months	4	35
4 Months	1	35
6 Months	42	161
7 Months	1	132
9 Months	24	211
10 Months	3	49
11 Months	1	42
12 Months	862	243
18 Months	514	365
2 Years	1171	347
3 Years	236	236
Not Specified ²	114	153
Total Waiting	2973	

Table 3 – Data Source: Retinal Screening Service 04/02/2021

Note: ¹Recommended follow-up timeframe

²Transfers from other DHB's and/or data omitted

I trust this information answers your request. 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 may be published on the Counties Manukau Health website. If you consider there are good reasons why this response should not be made publicly available, we will be happy to consider this.

Yours sincerely

A handwritten signature in black ink, enclosed in a thin black rectangular border. The signature is stylized and appears to be the name 'Fepulea'i Margie Apa'.

Fepulea'i Margie Apa
Chief Executive Officer
Counties Manukau Health