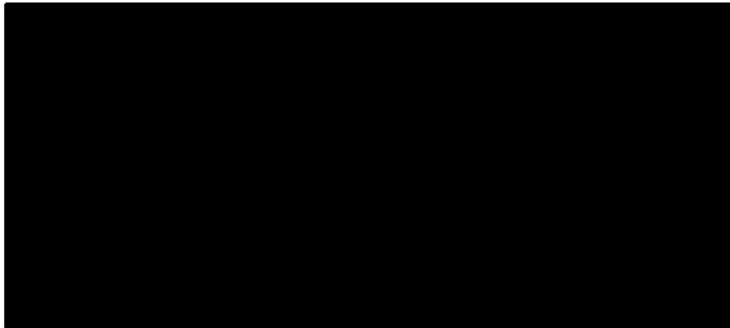


30 July 2019



**Re Official Information Request – Clinical priority assessment criteria**

I refer to your official information request dated 2 July 2019 requesting the following information:

The Clinical Priority Assessment Criteria threshold level (in order to be eligible for publicly funded electives) at the Auckland DHB for the following elective procedures:

**Cardiothoracic - ADHB/WDHB** – There is no definitive CPAC score to be accepted/eligible for cardiac surgery, the decision is made clinically re acceptance onto the waitlist. The CPAC score is used to determine urgency of the surgery once accepted.

**Ear, Nose and Throat** – There is a minimum threshold of 30 applied across the ORL service. The CPAC score is used to determine urgency of the surgery once accepted.

**General Surgery** – There is no definitive CPAC score to be accepted/eligible for general surgery, the decision is made clinically re acceptance onto the waitlist, with guidance being that this should be a CPAC score of 20 or above. The CPAC score is used to determine urgency of the surgery once accepted.

**Gynaecology** – At ADHB we review all Gynae referrals by a specialist and most are accepted for FSA. The CPAC score is used for priority for surgery after a clinical judgement is made with the patient. It is generally accepted that a CPAC under 30 is indicative of surgery that is not required and these referrals are usually sent back to the GP for review if anything changes. This is not always the case and clinical judgement is imperative.

**Neurosurgery – ADHB/WDHB** - Neurosurgery does not use CPAC scores to determine eligibility for the waitlist; the decision is based on clinical presentation.

**Ophthalmology –ADHB/WDHB** - The service only uses CPAC scoring as a threshold for cataract surgery. For ADHB domicile patients, the threshold is 45 and for WDHB domicile patients the threshold is 48.

**Orthopaedics** – We have a threshold of 50 across all subspecialties but use clinician override as required, for example tumour, impending failure of implant etc.

**Paediatric Surgical ADHB/WDHB** – There is no definitive CPAC score to be accepted /eligible for Paediatric Surgery, the decision is made clinically regarding acceptance onto the waitlist. The CPAC score is used to determine the urgency of the surgery once accepted.

**Plastic and burns – Counties Manukau to provide response**

**Urology** – We have a threshold of 70 across all subspecialties however a clinician can make the decision to override this when a when they consider it required when other clinical or social factors are taken into consideration.

The CPAC score is used to determine clinical priority once added to the waiting list.

**Vascular Surgery – ADHB/WDHB** - Vascular surgery does not use CPAC scores to determine eligibility for the waitlist; the decision is based on clinical presentation.

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](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