

15 August 2022



Tēnā koe [redacted]

Your Official Information Act request, reference: HN22175 – Criteria for bariatric surgery

Thank you for your OIA request which was transferred from the Ministry of Health on 20 July seeking information from Te Whatu Ora-Health New Zealand Waitematā about the criteria for bariatric surgery.

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 health districts 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 more than 8,900 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:

I want all information that is held in regards to the DHB funded Bariatric surgery, particularly around all stats, assessment process from GP referral to hospital / bariatric unit and vice versa, how you are put on to the waitlist for surgery and in-depth reasoning and rationale as to why GP referrals are denied/pushed back/declined for 2022 intake.

The following tables provide data related to bariatric surgery:

Table 1: Number of GP referrals for bariatric surgery in the Waitematā district for past five years

Sum of # Referrals	Ethnicity			
Calendar Year	Maori	Other	Pacific Peoples	Total
2018	171	510	106	787
2019	160	451	104	715
2020	172	453	92	717
2021	180	468	106	754
2022 (YTD)	82	194	47	323

Table 2: Number of first specialist appointments (FSA) attended for bariatric surgery in the Waitematā district for past five years

# FSA attended	Ethnicity			Total
Calendar year	Maori	Other	Pacific Peoples	Total
2018	65	241	38	344
2019	83	226	49	358
2020	31	86	16	133
2021	52	108	16	176
2022 (YTD)	5	16	1	22

Table 3: Number of bariatric surgeries in the Waitematā district for past five years

Counts by Calendar Year	2018	2019	2020	2021	2022 YTD
Ethnicity					
Bariatric	118	149	112	79	24
other	98	117	79	52	11
Pacific Peoples	3	11	13	11	4
Maori	17	21	20	16	9
Total by Calendar Year	118	149	112	79	24*

**Low numbers due to the impacts of COVID-19 lockdown restrictions.*

Assessment process from GP referral to hospital / bariatric unit and vice versa:

Waitematā will consider patients for surgery if they:

- have a BMI of 40 or more
- have a BMI of 35 or higher and have other obesity-related severe diseases that could be improved, such as heart disease, type 2 diabetes or obstructive sleep apnoea
- have previously failed attempts to lose weight
- understand what the surgery involves, what to expect before and afterwards and are committed to a permanent lifestyle change (diet and exercise).

Process:

GPs refer patients to the hospital for bariatric surgery via an e-referral system.

The grading surgeon uses the information from the referring GP and prioritised the patient according to clinical need.

Generally, bariatric referrals are graded as priority three (P3 (i.e. non urgent). This information is received by the clerk who accepts or declines the referral according to the approved grading criteria.

The information about whether the patient has been accepted for further assessment is sent to the GP and the patient. If the patient is accepted into the service, there is a second more detailed grading process using the Ministry of Health criteria, which is available via the following link:

<https://www.health.govt.nz/system/files/documents/publications/clinical-guidelines-for-weight-management-in-new-zealand-adultsv2.pdf>

If the patient is accepted at this point, they are waitlisted for their First Specialist Appointment, which is a group seminar.

How patients are put on to the waitlist for surgery:

At the group seminar (FSA) the patient is given a goal weight for surgery. The patient is given instructions that when they meet their goal weight they need to see their own GP who will verify the weight and email the Bariatric Clinical Nurse Specialist. The patient is then given an appointment with the surgeon where surgery options are discussed. If the patient wishes to proceed to surgery they will be waitlisted at this point in time.

In-depth reasoning and rationale to why GP referrals are denied/pushed back/declined for 2022 intake:

We are currently unable to take new patients due to the impact that COVID-19 has had on hospital services and the need to defer non-urgent elective surgery to allow for capacity to treat patients with COVID-19. As a result, we are prioritising treatment to patients who are already on the waiting list for bariatric surgery unless there is an urgent requirement for them to be accepted. Once we have sufficient capacity to treat new patients we will be able to accept referrals again.

I trust that this information is helpful.

Waitematā 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.

Nāku iti noa nā



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