

20 September 2018



Dear 

Re: Official Information Act request – Mobile Health Clinics

Thank you for your Official Information Act request, received 5 September 2018, seeking information from Waitemata District Health Board (DHB) on:

- 1. What changes were seen in patient engagement outcomes? E.g. difference in check-up rates between mobile health clinics and traditional clinics*
- 2. What are some of the barriers to introducing such services, especially in relation to regulations*

Waitemata DHB has provided a range of services from mobile health clinics across the catchment area for many years. These include:

- Ear nursing services to children in high-need communities
- Oral health and dental services to preschool and school-aged children
- Community health promotion
- Nurse-led health services to schools and other community settings
- BreastScreen Waitemata Northland is a well women's service delivering the BreastScreen Aotearoa (BSA) Programme to eligible women aged 45 – 69 years across the Waitemata and Northland region.

The Child Health and Oral Health services do not collect data on the difference in check-up rates between mobile health clinics and traditional clinics. However, the mobile clinics are primarily used to provide services to harder-to-reach populations to address health inequities, in particular within the Maori, Pacific and rural communities. Although we do not specifically collect data, we suspect that some of these communities would find it more difficult to access health services if mobile health clinics were not available.

The Breast Screening service screens over 40,000 women each year. From 1 July 2017 to 30 June 2018, the BSWN service screened 43,618 women. Approximately 20% - 25% (between 8,723 and 10,904) women choose to screen in the mobile units each year.

The BSA programme is an opt-on programme. The ethos underpinning services is to educate and support women to make informed choices to participate in the programme. Mobile clinics provide an effective strategy to break down barriers for women and support them to participate in the BSA Programme by providing services locally.

There are very few barriers to introducing mobile health services. The location and access to the van must comply with the Health and Safety at Work Act (2015). Staff receive training to drive and operate the vans. Furthermore, in order to deliver some services (e.g. dental care), the vans require access to an external power source. Consequently, the DHB has installed, and maintains, plugs in a number of schools across the Waitemata district.

I trust that this information meets your requirements. Waitemata DHB, like other agencies across the state sector, supports the open disclosure of information to assist the public's 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 feel that there are good reasons why your response should not be made publicly available, we will be happy to consider this.

Yours sincerely

A handwritten signature in black ink, appearing to read 'Cath Cronin', followed by a period.

Cath Cronin
Director of Hospital Services
Waitemata District Health Board