



20 January 2021

[REDACTED]

Dear [REDACTED]

**Official Information Act Request**

You have asked for information about hip and knee replacement surgery.

*1/ The number of patients who received a hip replacement for the period of 1/1/20 – 30/11/20.*

During the period noted, Northland DHB completed 233 hip replacement procedures. These volumes were materially impacted due to COVID-19 and the reduction in surgical activity at that time.

*2/ The number of patients who received a knee replacement for the period of 1/1/20 – 30/11/20.*

During the period noted, Northland DHB completed 169 knee replacement procedures. These volumes were materially impacted due to COVID-19 and the reduction in surgical activity at that time.

*3/ The number of patients who received a hip replacement who were referred by a private specialist.*

During the period noted, Northland DHB completed three hip replacement procedures for patients who were referred by a private specialist.

*4/ The number of patients who received a knee replacement who were referred by a private specialist.*

During the period noted, Northland DHB completed six knee replacement procedures for patients who were referred by a private specialist.

*5/ The number of patients who received a knee or hip replacement that were referred privately by a specialist who also contracts or works for your DHB.*

During the period noted, Northland DHB completed four hip and knee replacement procedures for patients who were referred by a private specialist, where that specialist is also employed by Northland DHB.

*6/ The number of privately referred patients who do not have to undertake a first specialist appointment.*

Northland DHB has followed the Medical Council guidance that all patients who have been assessed in private should not receive any benefit/detriment in access by virtue of that assessment. Accordingly, if the patient has been seen by a specialist in private who is not also a Northland DHB employee, then the specialist either needs to complete the full electronic referral as a GP would complete and we would then triage the referral the same as a GP referral is triaged, or the specialist asks the GP to complete a standard electronic referral which is more commonplace.

Alternatively, if the patient has seen a surgeon who is a Northland DHB employee, they refer using the same process of either electronically referring themselves, or having the GP complete this, but also including their assessment notes and advice. If they advise the patient would be appropriate for a virtual FSA then we book this appointment but using the same triage time guidelines. The patient need not attend that appointment but must still complete the Impact on Life (IoL) score and the surgeon then scores them and completes necessary paperwork at the virtual appointment.

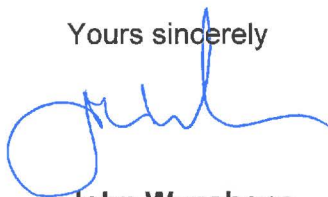
Northland DHB believes that these guidelines ensure there is no inequity arising from patients being seen in private 'queue-jumping'.

On that basis all nine patients referred via a private specialist received a first specialist appointment, whether face to face or virtual.

Northland DHB supports the open disclosure of information to assist public understanding of how we deliver our services. This includes proactive publication of anonymised Official Information Act responses on our website from 10 working days after they have been provided to you. Personal or identifying information will be redacted from any response published online. If you consider there are good reasons why this response should not be publicly available we will consider your views.

If you have any queries relating to Northland DHB's response to your information request please contact Northland DHB's Chief Executive in the first instance.

Yours sincerely



**John Wansbone**  
**Acting Chief Executive**