

21 November 2022

9(2)(a)

Dear 9(2)(a)

**Official Information Act 1982 – OIA2022102101**

I refer to your request under the Official Information Act 1982 (the Act) regarding bariatric surgery, which was received by Capital, Coast and Hutt Valley District (CCHV) on 21 October 2022.

- 1. How many people in the Capital and Coast District have received bariatric surgery? Of those that have, how many are Māori and how many are Pasifika?*
- 2. Secondly, In light of the changes made by the Auckland DHB and/or its successor, why does the Capital and Coast DHB and/or its successor still continue to apply seemingly racist and limiting criteria to bariatric surgery that has since been abolished in Auckland?*
- 3. Third, are there efforts being made to make the conditions for bariatric surgery consistent across the country in-line with what has occurred in Auckland particularly since the abolition of the DHBs? If not, could you please detail the reasons?*

District Health Boards were disestablished as legal entities on 1 July 2022 and Te Whatu Ora – Health New Zealand was established as a legal entity under the Pae Ora (Healthy Futures) Act 2022. Capital & Coast and Hutt Valley District Health Boards are now one district known as Capital, Coast and Hutt Valley District. Both locations share information, staff, many services and a single Interim District Director. You will receive a response reflective of your request for either data sets from both locations or specifically one location.

**Our response to your request is outlined below.**

- 1. How many people in the Capital and Coast District have received bariatric surgery? Of those that have, how many are Māori and how many are Pasifika?*

Table 1 below for Capital and Coast (Agency) summarises by prioritised ethnicity the number of publicly funded discharges by calendar year where the patient received Bariatric Surgery (Laparoscopic sleeve gastrectomy) since 2015.

**Table 1. Bariatric Discharges by Calendar Year and Prioritised Ethnicity**

<b>Ethnicity</b>	<b>2015</b>	<b>2016</b>	<b>2017</b>	<b>2018</b>	<b>2019</b>	<b>2020</b>	<b>2021</b>	<b>2022</b>
<b>Maori</b>	8	6	7	16	7	6	6	4
<b>Pasifika</b>	1	3	2	3	1	5	2	3
<b>Other</b>	20	15	18	23	13	15	15	8
<b>Total</b>	<b>29</b>	<b>24</b>	<b>27</b>	<b>42</b>	<b>21</b>	<b>26</b>	<b>23</b>	<b>15</b>

Please note calendar year 2022 represents the nine month period (January 2022 to September 2022).

- Secondly, In light of the changes made by the Auckland DHB and/or its successor, why does the Capital and Coast DHB and/or its successor still continue to apply seemingly racist and limiting criteria to bariatric surgery that has since been abolished in Auckland?*

The Central Region Metabolic and Bariatric Service is based at CCHV and patients from the District are referred for treatment. For a patient to receive a first specialist assessment (FSA) a number of criteria need to be met. These include a BMI of greater than 35 and less than 55. If the patient has medical co-morbidities we need to see appropriate test results that provide evidence of their current status. Patients also need strong social supports in place and not have an addiction to a substance (this includes alcohol and nicotine). A willingness to accept surveillance is also a requirement.

If those criteria are met patients are accepted on to the bariatric programme. The programme includes dietician, psychologist and surgical assessment and attendance at a seminar

Following completion of the programme patients can then be assessed for consideration of surgery at CCHV using the National Surgical Prioritisation tool (Bariatric). The criteria for surgery are the same throughout the country and include assessment on impact of life, likelihood of achieving maximum benefit with respect to control diabetes, duration of benefit and surgical risk.

These criteria are in place to ensure compliance, which includes optimisation of surgery and long term sustainability of health outcomes.

- Third, are there efforts being made to make the conditions for bariatric surgery consistent across the country in-line with what has occurred in Auckland particularly since the abolition of the DHBs? If not, could you please detail the reasons?*

Please refer to the letter from Kieran Houser, Group Manager Hospitals and Specialist Services, who responded to you directly on 14 November 2022.

I trust this information fulfils your request.

As this information may be of interest to other members of the public, Health NZ has decided to proactively release a copy of this response on Health NZ's website. All requestor data, including your name and contact details will be removed prior to release. The released response will be made available at <https://www.ccdhb.org.nz/news-publications/information-releases-oia/>.

You have the right, under section 28 of the Act, to seek an investigation and review by the Ombudsman of this decision. Information about how to make a complaint is available at [www.ombudsman.parliament.nz](http://www.ombudsman.parliament.nz) or you can free phone 0800 802 602.

Nāku ite noa, nā

A handwritten signature in black ink, appearing to read 'John Tait', written in a cursive style.

**John Tait** MB BS, FRANZCOG, FRCOG  
Interim District Director

Ūpoko ki te uru Hauora | Capital-Coast, and Hutt Valley **M:** 021 429 331 #6914 | **DDI:** +64 4 806 2265 | **Ext:** 82265 or 82259 | **E:** [John.Tait@ccdhb.org.nz](mailto:John.Tait@ccdhb.org.nz)  
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