

Equity Prioritisation

Cardiovascular Directorate

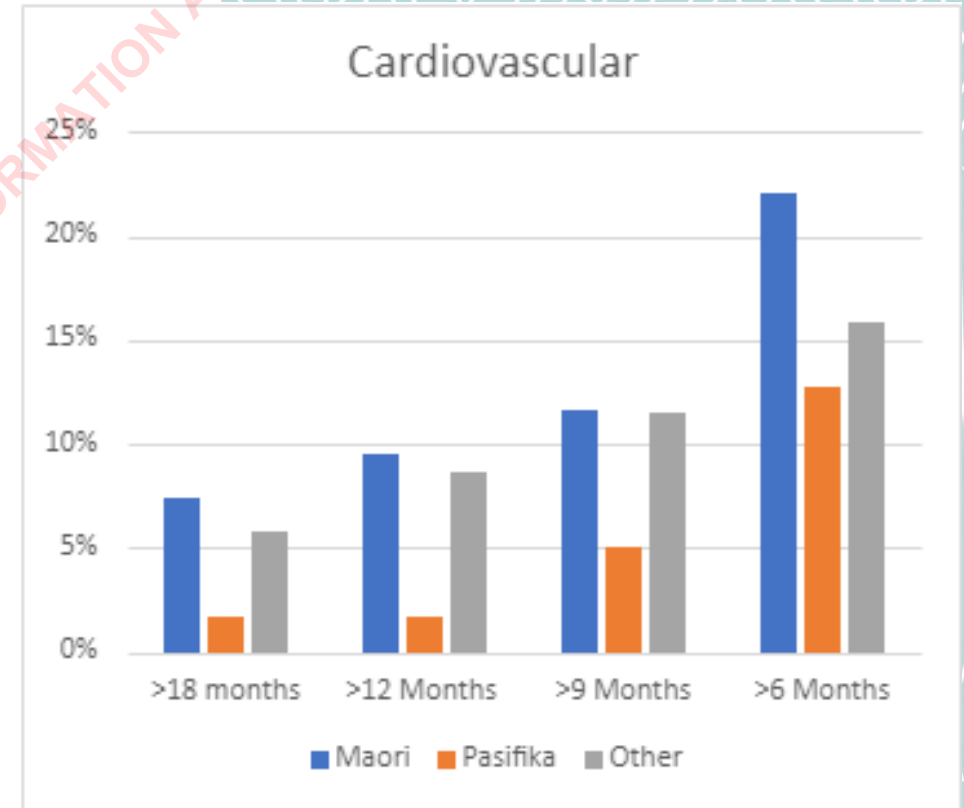
September 2022

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Why??

- Inequitable health outcomes/waiting times for our patients
- Te Toka Tumai have trialled different approaches to adjust the relative priority for Māori in prioritisation of planned care
- Aim to provide equitable services across ethnicities



Evidence-based

Ethnicity

- Māori - higher prevalence of surgical disease¹
- More likely to have unfavourable postoperative outcomes and lower access to surgical services¹
- Most young adults (85%) in New Zealand with severe Rheumatic Heart disease requiring surgery are of Māori or Pasifika ethnicity²
- Māori and Pacific people were less likely to receive bariatric surgery³

Deprivation areas for housing (NZDEP2018)

- Postoperative complications is more common in more deprived locations⁴
- The likelihood of receiving bariatric surgery varied inversely with increasing socioeconomic deprivation and rurality³

Remote location (rural)

- Geographic Classification for Health reports an increase in mortality by 21% in rural locations in Aotearoa⁵

¹Rahiri, J. L., Alexander, Z., Harwood, M., Koea, J., & Hill, A. G. (2018). Systematic review of disparities in surgical care for Māori in New Zealand. *ANZ Journal of Surgery*, 88(7-8), 683-689.

²Singh, N., Haydock, D. A., & Goh, S. S. (2022). Medium-term outcomes from mitral valve surgery for rheumatic heart disease in young adults in Aotearoa New Zealand: a cohort study. *ANZ Journal of Surgery*, 92(5), 1060-1065.

³Bennett, E. K., Poppe, K., Rahiri, J. L., MacCormick, A. D., Tenbenschel, T., & Selak, V. (2021). Variation in publicly funded bariatric surgery in New Zealand by ethnicity: cohort study of 328,739 patients. *Surgery for Obesity and Related Diseases*, 17(7), 1286-1293.

⁴Beliaev, A. M., & Bergin, C. J. (2021). Impact of socioeconomic deprivation on incidence and outcomes of acute type A aortic dissection repair in New Zealand. *Journal of Cardiac Surgery*, 36(6), 2035-2043.

⁵Jesse Whitehead, Gabrielle Davie, Brandon de Graaf et al. Defining Rural In Aotearoa New Zealand: A Novel Geographic Classification For Health Purposes, 20 August 2021, (Version 1) available at Research Square [https://doi.org/10.21203/rs.3.rs-817117/v1]

Māori significantly more likely to die after surgery than non-Māori - report

3:23 pm on 17 September 2021

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 **Jamie Tahana**, Journalist
@JamieTahana | jamie.tahana@rnz.co.nz

Māori are significantly more likely to die within 30 days of surgery than non-Māori, a disparity a surgeon has described as damning.

Healthcare failures: Mum going blind delays getting help due to lack of petrol money, car and childcare



By **Emma Russell**

27 Jan, 2022 07:26 PM © 5 mins to read

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Support groups from different parts of the health sector gave their feedback on the Pae Ora (Healthy Futures) Bill. Photo / File

Friday, 5 August 2022

Redefining 'rural' can help tackle health disparities: study

By **Mike Houlahan**

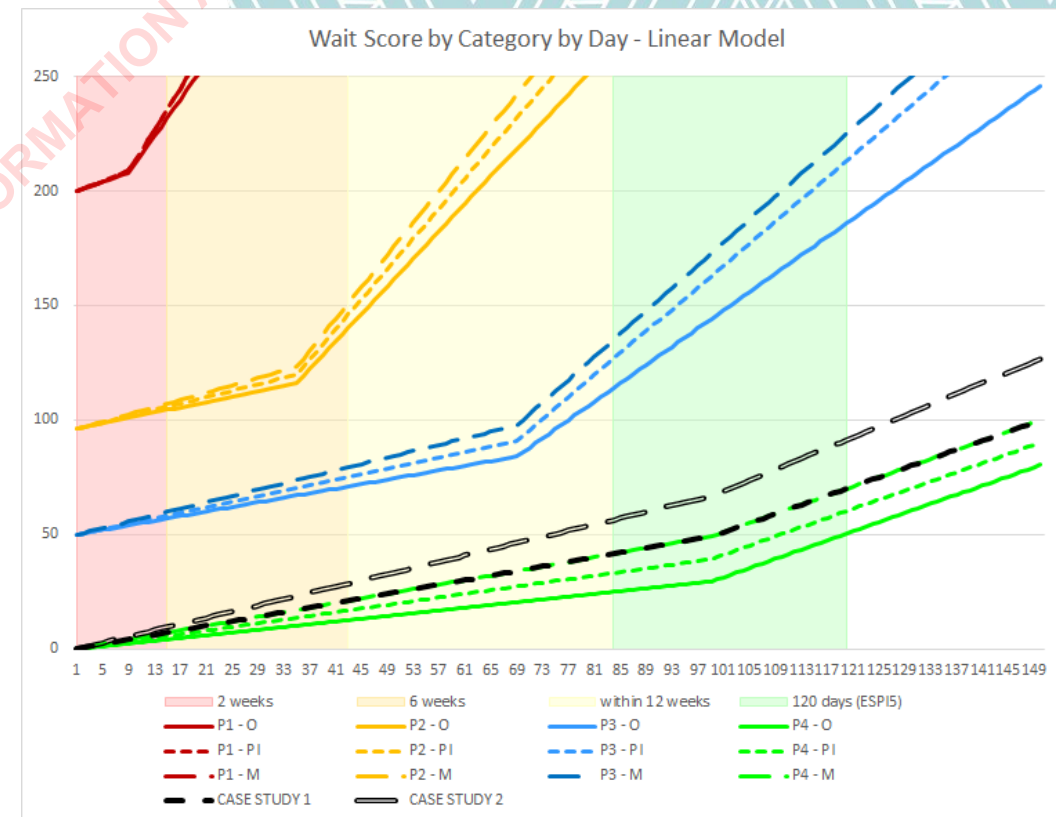
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Regions

Rural people have a higher mortality rate than city-dwellers and the New Zealand health system should redefine what "rural" means to ensure people who live in those areas have fair access to healthcare, new research suggests.

How?

- Prioritisation occurs across 6 factors
 - Clinical priority
 - Ethnicity
 - Te Tiriti o Waitangi obligations
 - Deprivation Index – a measure of socioeconomic status
 - Remote locations – acknowledging the challenge for patients to access services when they need to travel further
 - Days waiting
- This is a prioritisation tool only. Won't impact lists if barriers to healthcare aren't addressed/booking bias.



Case study 1 – P4, M, DI = 1

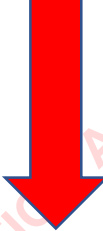
Case study 2 – P4, M, DI = 10

Process

- Algorithm will be built into WT16 – in testing stage now
- Bookers to follow 'adjusted priority score' when booking
- Starting points/inclinations to be reviewed with Production planning team/Business Managers to ensure clinical priorities are at the top
- Dashboards will be developed to look at impact on wait list order and booking order
- Monthly review of settings as part of POP meetings

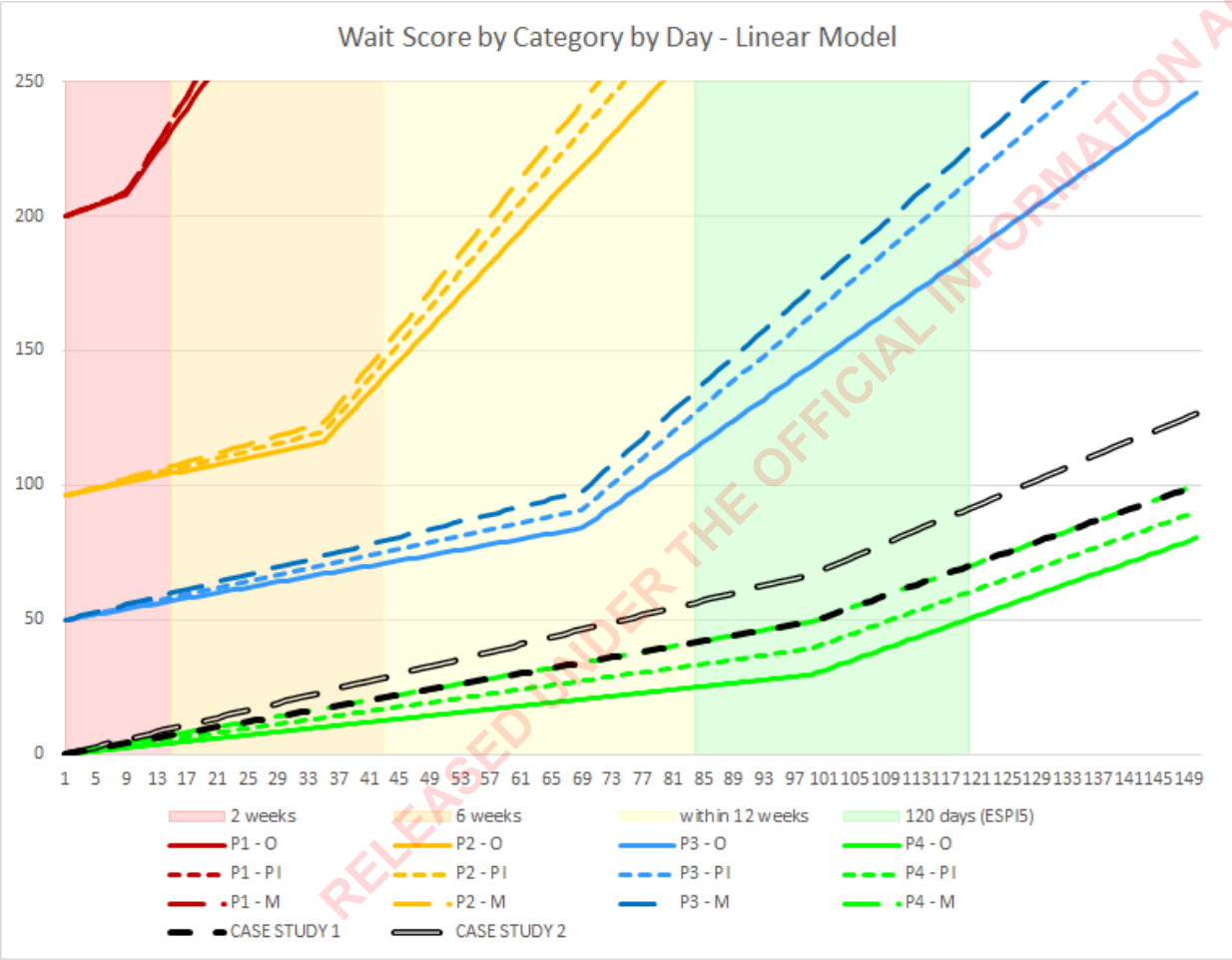
Booking Process

- Book via Equity Adjustor Score
- The EAS ranks patients according to:
 - Clinical priority
 - Days waiting
 - Ethnicity
 - Te Tiriti o Waitangi
 - Deprivation Index
 - Remote location
- Continue to add reasons if unable to book a patient
- Refer to Kaiārahi Nāhi/Pacific Care Navigators if unable to contact Māori/Pasifika patients



Specialty Desc	Equity Adjustor Score	Equity Adjusted Priority	Ethnicity Prioritised Group	Ethnicity Prioritised Desc	Short Notice Flag	Days Waiting
General Surgery	1936	Non-urgent	Maori	Maori	Y	519
General Surgery	1524	Sem-urgent	Other	New Zealand European	N	390

Thoughts?



Case study 1 – P4, M, DI = 1
 Case study 2 – P4, M, DI = 10

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