Cataract surgery: Availability of public care

In 2003-04, 8063 cataract operations were carried out in publicly funded facilities, and increased funding recently made available will provide for an increase in operations for up to 12,000 people over the next three years. Thousands more people with cataracts are not eligible for publicly funded surgery (Christchurch Press, 4 May 2005). Each District Health Board has its own funding allocation and will decide which consumers qualify for publicly funded care.

How will consumers know if they qualify for publicly funded treatment, and how long will they have to wait? The current policy is intended to provide certainty to consumers that if they qualify for treatment, they will receive it within six months. Information about the policy is on the Ministry of Health website under Elective Services (http://www.moh.govt.nz/moh.nsf).

Consumers will be referred by their doctors to ophthalmologists, who have responsibility to appropriately assess them to establish priority for publicly funded surgery. This is done using a national standard assessment tool, the National Clinic Priority Assessment Criteria (CPAC) for Cataract Surgery, which scores sharpness of vision, severity of visual impairment and the impact of other clinical conditions, as well as the ability to work, give care, live independently and any other disability. Ophthalmologists should advise consumers of their priority score, which will dictate whether they are offered surgery in the public system.

Each District Health Board (DHB) will decide its capacity to offer treatment according to the funding it has available, within the timeframe of six months. In each case, the DHB will determine, based on the CPAC score, whether the consumer qualifies for surgery, and notify him or her accordingly. Some consumers may be classified for reassessment in six months' time; the remainder will be referred back to their general practitioner.

Consumers whose scores do not qualify them for surgery in the public system, and who have the financial means to do so, may wish to consider paying for cataract surgery through the private system, where they are likely to receive it within a few weeks.

Consumers who are seeking cataract surgery have a right to all the information that they might need to assist them with understanding how the system works, and any options they may have if they do not qualify for publicly funded surgery. It is the ophthalmologist's responsibility to give them the relevant information available, and answer their questions, including questions about how to get a second opinion, if they want it.

Information consumers should receive includes:

- information about CPAC Assessments and the points score
- an explanation of the way the points system dictates which consumers qualify for cataract surgery in the public system
• the way in which the Ministry policy is implemented in their DHB
• an explanation that consumers who do not qualify for publicly funded treatment may consider paying for treatment through the private system
• the likely delay and cost involved in surgery in a private hospital.

If a consumer is advised to proceed with cataract surgery, he or she is entitled to take time to consider the decision. Consumers must give written consent to the surgery and have a right to all the information they need in order to make the decision. Information about the surgery should include the expected benefits, risks and side effects. The ophthalmologist should provide written material for consumers to consider at home, especially if they have received eye drops that distort their vision, or are not wearing their glasses and cannot read the information.

Consumers' rights to receive all relevant information, including a written summary if requested, and the time to make an informed decision about treatment, are covered by Rights 6 and 7 of the Code of Health and Disability Services Consumers' Rights.