West Coast Health
Community Wellbeing Services

Clinical Programmes Overview

Last Review: Apr 2026

Table Of Contents

Clinical Programmes - Practice Information Sheets

Practice Information Sheets are posted on the WCH Clinician Dashboard Website

Practice Information Sheets contain the following info about every clinical programme:

- Programme Intention
- Eligibility
- Exclusion
- Funding
- FAQs
- Resources

If you have questions about any of the clinical programmes, please email qualityteam@westcoasthealth.nz

To access them, please click the 'Clinical Programmes' icon on the main dashboard page:

National Bowel Screening Programme

Practice Information

Last updated: Oct 2025

West Coast Health
Community Wellbeing Services

NBSP Practice Information

Eligibility Criteria:

- Enrolled the in the practice
- Positive FIT Results
- Patient has been notified and referred for colonoscopy within 10 working days of result

Programme Process:

- NBSP sends Faecal Immunochemical Test (FIT) Kit to patient's home.
- Patient completes kit and sends it to NBSP
- Result is sent to General Practice
- **Within 10 working days of positive result,** General Practice:
  - notifies patient of positive result,
  - provides info and support, and
  - refers patient for colonoscopy
- **Practice Claims for funding via Halcyon Portal**

Resources: www.timetoscreen.nz

Faecal Immunochemical Test (FIT) Kit

Distributed by National Bowel Screening Programme. – **not a PHO programme**

More Information: www.timetoscreen.nz

Eligibility Criteria:

- Aged 58-74yrs (changing to 56yrs after 30th Sept)
- Eligible for Publicly funded Health Care

Exclusion Criteria:

- •Have symptoms of bowel cancer
- •Have had a colonoscopy within the last five years
- •Are on a bowel cancer or polyp surveillance programme
- •Have had, or are being treated for, bowel cancer
- •Have had your large bowel removed
- •Have active ulcerative colitis or Crohn's disease
- •Are currently seeing the doctor about bowel problems

Cellulitis – Enhanced EPC

Practice Information

Last updated: October 2025

Cellulitis Practice Information

Eligibility Criteria

- Providers should follow the local 'Cellulitis in Adults' HealthPathway for entry criteria.
- Eligible for publicly funded NZ Health Services
- Proactive first follow-up within 72 hours
- Subsequent follow-ups within 7 days of Initial Consult

Exclusion Criteria

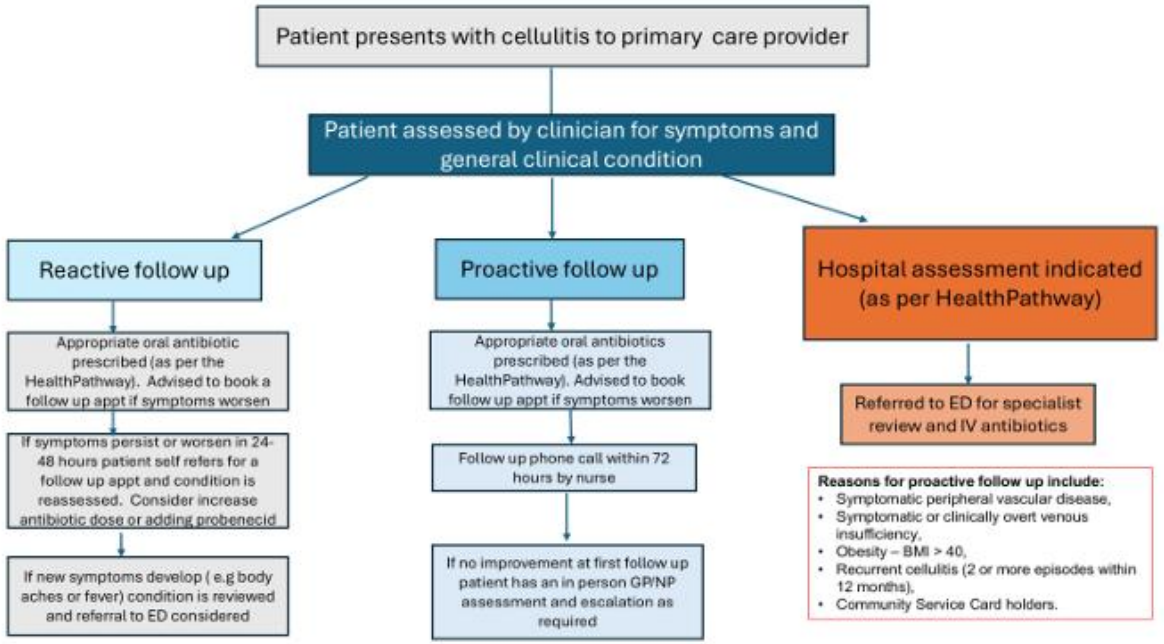
- ACC funded cellulitis claims, which should be claimed via ACC.
- IV antibiotic administration for cellulitis is not funded via this agreement.
- Follow-Up that occurs more than 7 days after initial consult date.
- Initial Consults for either pathway
- First Follow-Up for Reactive Pathway

There are two pathways for non-ACC Cellulitis: **Proactive Follow-Up** and **Reactive Follow-Up**. Follow Health Pathways guidelines for "Cellulitis in Adults"

Components of the funded cellulitis service include:

- **Subsequent follow-up of a Reactive follow-up process** (as defined by the below flowchart). This is not a first follow-up but a subsequent follow-up.
- **First follow-up for a proactive follow-up process** (as defined by the below flowchart).
- **Subsequent follow-up for a proactive follow-up process** (as defined by the below flowchart).

There may be unlimited follow-ups as long as they occur **within 7 days of the initial consult**.



Coast Quit

Practice Information

Last updated: 23 June 2025

West Coast Health
Community Wellbeing Services

Coast Quit Practice Information

Eligibility Criteria:

- All individuals aged 15 and older
- Enrolled with West Coast Health (WCH)
  - (enrolling in a GP practice on the coast, automatically enrolls patient in WCH)
- Currently smoke tobacco and are wanting support to stop.

Exclusion Criteria:

- People who do not smoke tobacco
- Patients who are not enrolled in West Coast Health

Enrolment Rules:

- Up to two enrolments per patient within a 12-month period.
- Minimum of 12 weeks between enrolments.

Two Pathways to choose from:

- ERMS Referral to a provider outside of the practice.
  - Stop Smoking Practitioner Programme
  - Oranga Hā
- GP Managed Cessation Plan
  - Nicotine Replacement Therapy given in practice.

Community Probation Service

Practice Information

Last updated: Sept 2024

West Coast Health
Community Wellbeing Services

Community Probation Service Practice Information

Programme Intentions:

- To provide funded access for Community Probation Service (CPS) clients to GP consults and prescriptions

Eligibility:

- Enrolled or Casual
- Valid CPS Voucher Number

Contact CPS for additional patient Vouchers

Programme Process:

- CPS issues a voucher number and emails practice
- Patient visits practice
- Practice prints the Voucher form sent by CPS and gives it to the patient to collect their prescriptions without a charge.
- Practice Claims via Halcyon

Each Voucher Funds:

- Up to 4 visits on one voucher number (Initial , 3 follow up)
  - Full review – 30minutes
  - Normal consult:
    - Can include screenings and preventative assessments (can claim on those screenings, if eligible)
- Prescriptions

Cardiovascular Risk Assessment

Practice Information

Last updated: Nov 2025

West Coast Health
Community Wellbeing Services

CVD Risk Assessment Practice Information

Objective:

- Health target: **"More Heart and Diabetes Checks"**
- To screen all eligible people for cardiovascular risk & diabetes over a 5 year cycle
  - Key Performance Indicator: 90% target
- Identify & follow-up those with risk >15% and/or pre-diabetic

All treatment decisions should be based on an individual's **5-year combined risk** (the likelihood of a cardiovascular event over 5 years considering multiple factors)

Eligibility:

- **Men 45yrs – 74ys**
- **Women 55yrs – 74 yrs**
- **15 years earlier for Māori, Pacific, Asian peoples or known cardiovascular risk factors (30yrs/40yrs – 74yrs)**
- **People with serious mental illness: 25 – 74yrs**

Exclusions:

Patients with CVD or Diabetes:

- CVRA is included in Diabetes Annual Review form for all patients with Diabetes
- Patients who have cardiovascular disease do not need a risk assessed. They are high risk (>15%).

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Community Wellbeing Services

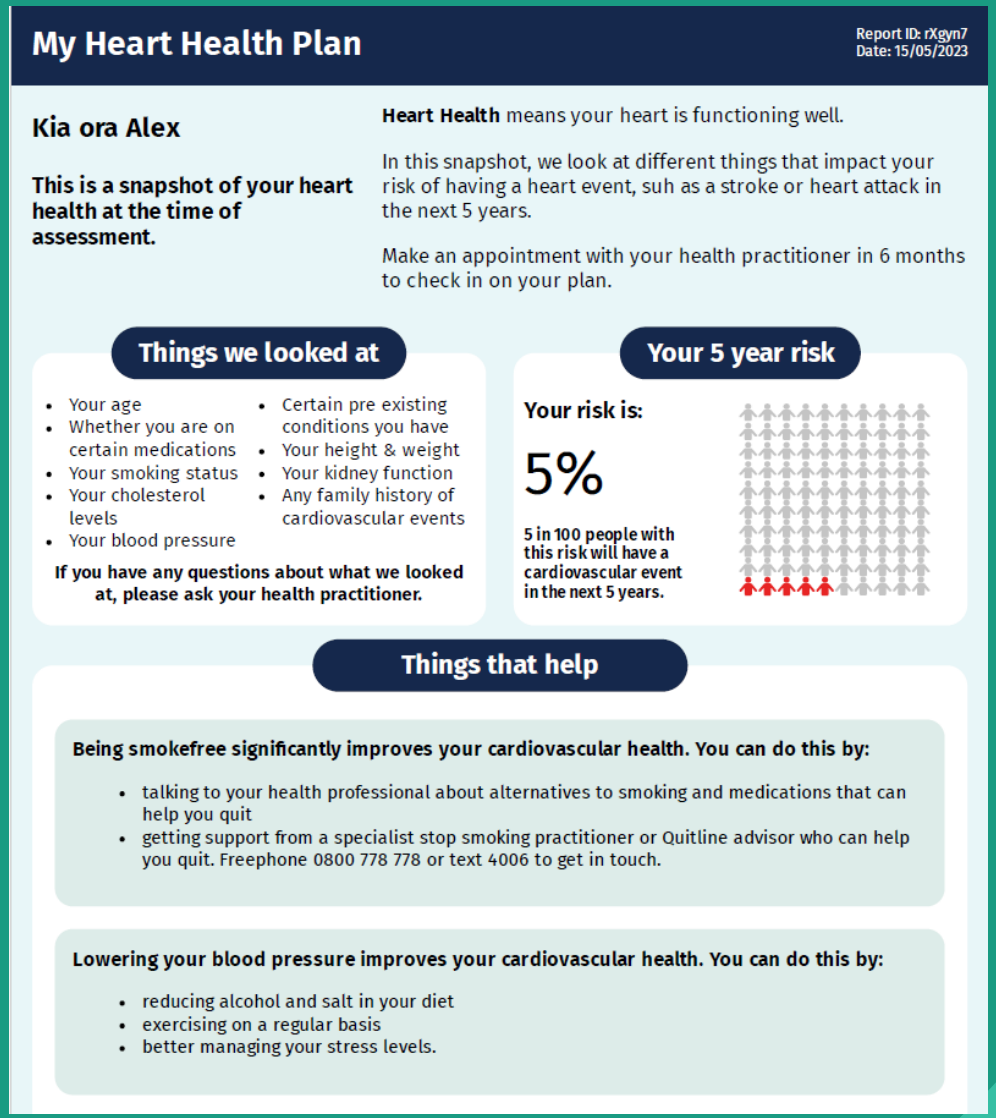
Link to My Heart Health Plan Example

My Heart Health Plan

An optional tab within the CVD Risk Assessment Form.

Facilitates:

- patient understanding of their CVD risk,
- goals to work towards to improve health
- relationship between the practice and patient



My Heart Health Plan

Report ID: rXgyn7
Date: 15/05/2023

Kia ora Alex

This is a snapshot of your heart health at the time of assessment.

Heart Health means your heart is functioning well.

In this snapshot, we look at different things that impact your risk of having a heart event, suh as a stroke or heart attack in the next 5 years.

Make an appointment with your health practitioner in 6 months to check in on your plan.

Things we looked at

- Your age
- Whether you are on certain medications
- Your smoking status
- Your cholesterol levels
- Your blood pressure
- Certain pre existing conditions you have
- Your height & weight
- Your kidney function
- Any family history of cardiovascular events

If you have any questions about what we looked at, please ask your health practitioner.

Your 5 year risk

Your risk is:

5%

5 in 100 people with this risk will have a cardiovascular event in the next 5 years.

Things that help

Being smokefree significantly improves your cardiovascular health. You can do this by:

- talking to your health professional about alternatives to smoking and medications that can help you quit
- getting support from a specialist stop smoking practitioner or Quitline advisor who can help you quit. Freephone 0800 778 778 or text 4006 to get in touch.

Lowering your blood pressure improves your cardiovascular health. You can do this by:

- reducing alcohol and salt in your diet
- exercising on a regular basis
- better managing your stress levels.

Diabetes Annual Review

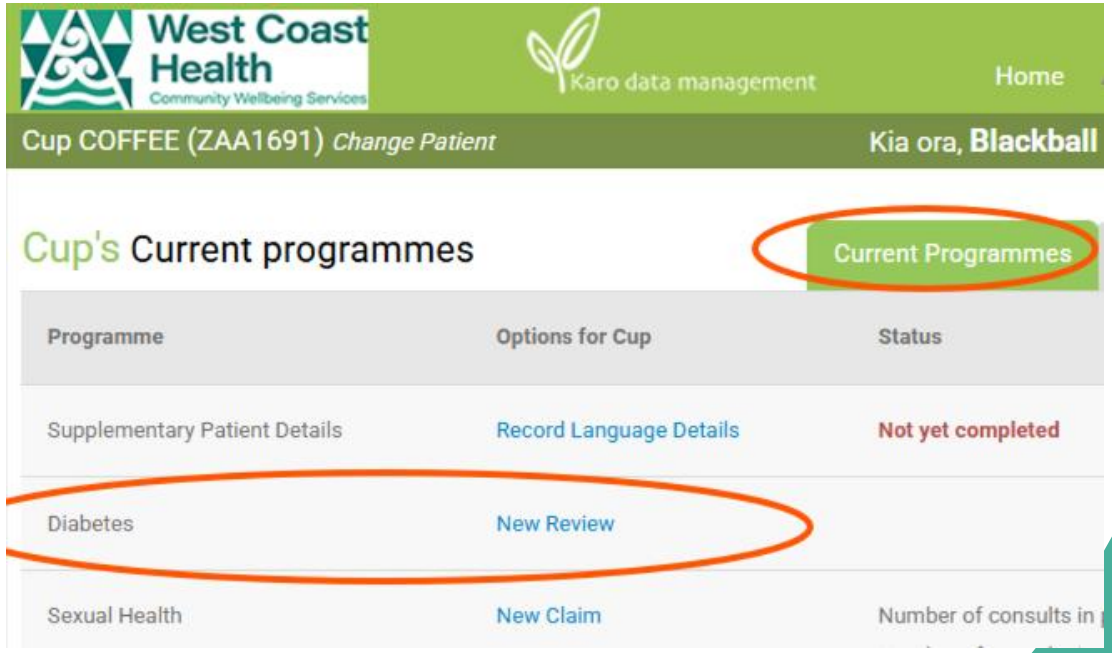
Practice Information

Last updated: May 2026

West Coast Health
Community Wellbeing Services

DAR Practice Information

- Halcyon Web-portal
- DAR review form: National form
  - Type 1 & 2 Diabetes only
- Key Performance Indicators: 90% target
  - Everyone with Type 1 & Type 2 Diabetes needs to have a Diabetes Review Yearly



For individuals with Diabetes **who need additional funds to manage their long-term condition and are eligible, you can still enrol them under the Long-Term Conditions Programme** (LTC – Diabetes)

Extended Primary Care

Practice Information

Last updated: Oct 2025

West Coast Health
Community Wellbeing Services

EPC Practice Information

- **Objectives**
  - Supporting general practice to manage acutely unwell patients;
  - To reduce inequities of access for priority populations;

Eligibility

- Patients with an ***acute condition***, who without EPC funding support would *otherwise be referred acutely to hospital*
- For rural practices providing ***prolonged clinical care*** and observation for patients waiting on a hospital transfer (rural stabilisation).
- For **any person eligible for New Zealand healthcare** funding regardless of PHO enrolment status, for the packages of care as above.

Following criteria must also be met:

- Clinically well enough to be discharged home (except for rural stabilisation).
- Are likely to need no more than 5 days of community-based care
- providers can apply to the PHO for an extension if deemed appropriate.

What is not covered

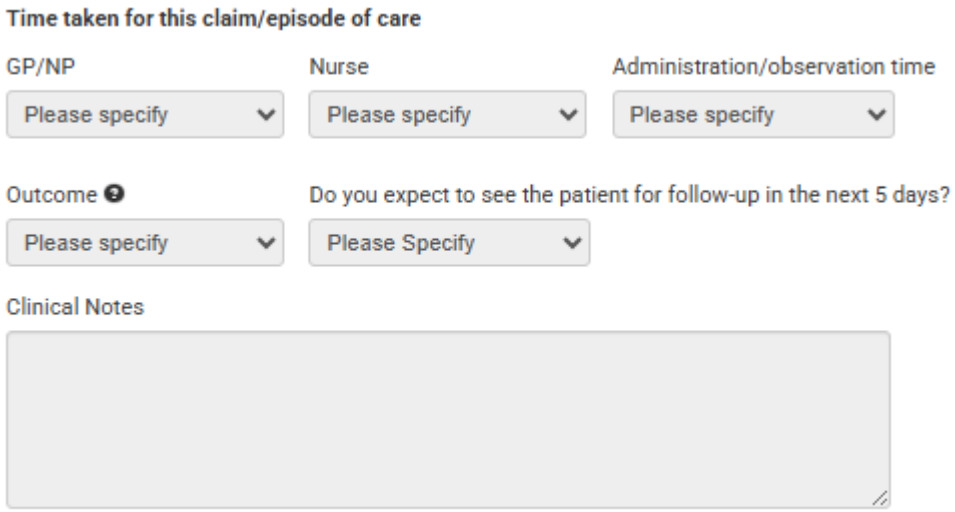
- Unstable patients (except for rural stabilisation)
- Services already contracted for (e.g. maternity services, PRIME)
- Where the patient requires non-urgent investigations

This service is not claimable through ACC, with a few exceptions (please see eligibility criteria on form and practice information sheet.

Extended Primary Care (EPC)

Halcyon Form:

- **Two claiming pathways (pick one)**
  1. **Acute Care**
     - Kept in community
     - Can claim follow-up visits
  2. **Rural Stabilisation**
     - Sent to ED/hospital
     - Must have interventions more than assessing patient and transferring to ED
- **Copy/paste or import your note**



- **Claiming based on time-based funding**
  - Initial appointment can be charged at usual rates.
- **Consumables**
  - Consumables costs are covered as part of the funding provided.
  - Two exceptions can be claimed for separately as follows: Catheter bags at $90 and IVF's at $20

Gender Affirming Primary Care

Practice Information

Last updated: Apr 2026

West Coast Health
Community Wellbeing Services

Gender Affirming Primary Care Practice Information

Programme Intentions:

- Improve access to healthcare for gender diverse and transgender individuals
- Improve clinician support for these services in Te Tai o Poutini / West Coast
- Reduce the financial barrier to accessing these services for individuals seeking them.

Programme Includes:

- Funded GP/NP Visits
- Funded Readiness Assessments
- Local Experts (ERMS Referral)
  - Dr. Jonathan Penno – Te Nikau

Eligibility:

- Aged 14 years and over
- Seeking Gender Affirming Primary Care
- Enrolled in West Coast Health (PHO)

Special Notes:

- For Gender Affirming Primary Care Only
  - Not for routine physicals or screenings that are funded elsewhere
- One-off Registration: Valid for two years
- Consult (Claiming form): Up to 10 time slots
- No Co-pay for the patient
- Funding Follows the Patient
- **Referrals**
  - Be sure to still make the referrals in ERMS

HPV Primary Screening

HPV/Cervical Screening Practice Information

Clinician Dashboard / Clinical Programmes / Sexual Health: HPV / Cervical Screening

National Cervical Screening Programme

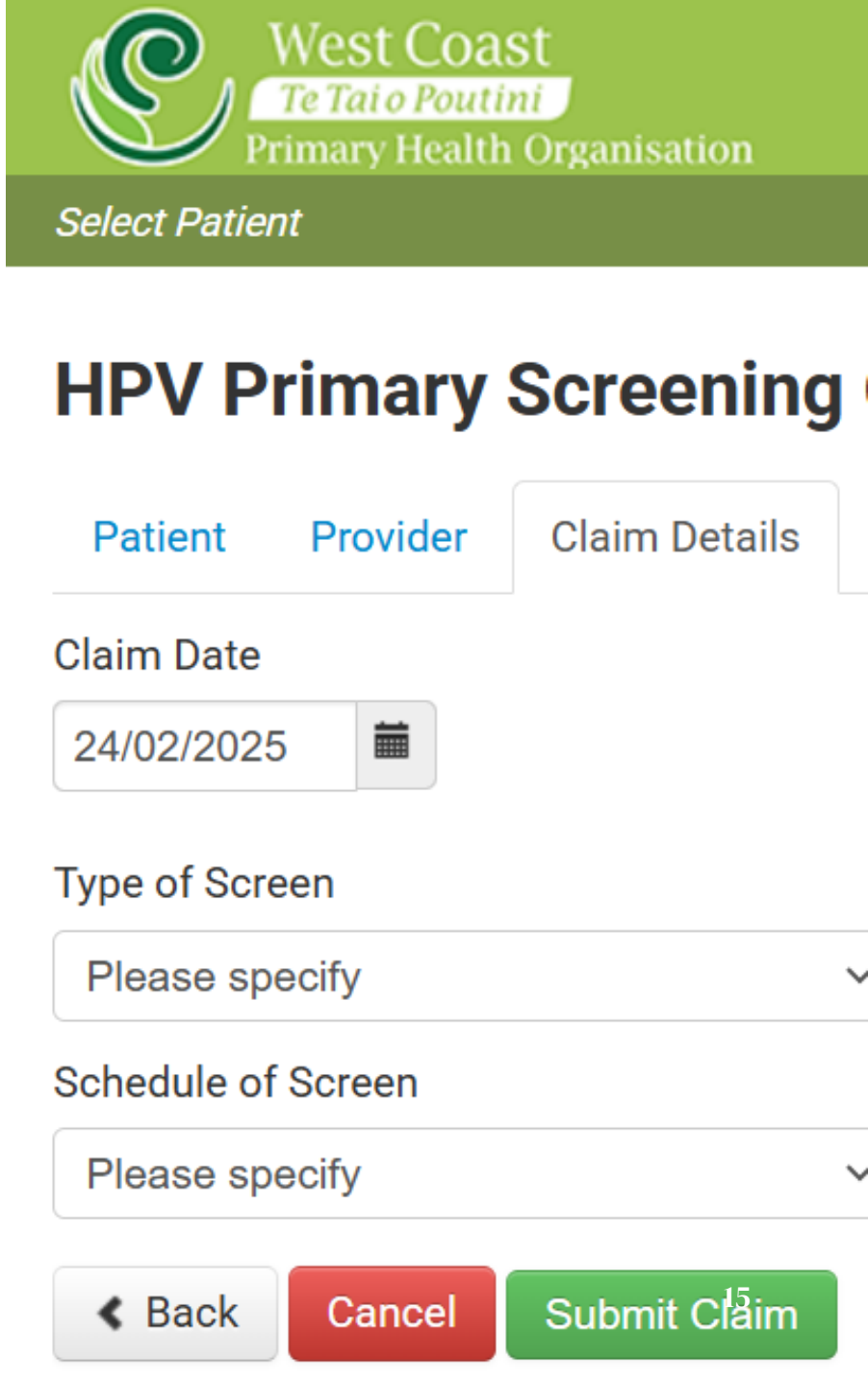
Screening eligibility and funding – Health New Zealand | Te Whatu Ora

General Information:

- Only registered/trained Smear Takers or clinicians trained in HPV Swab distribution are allowed to perform this screening and claim.
- Key Performance Indicator: 80% target

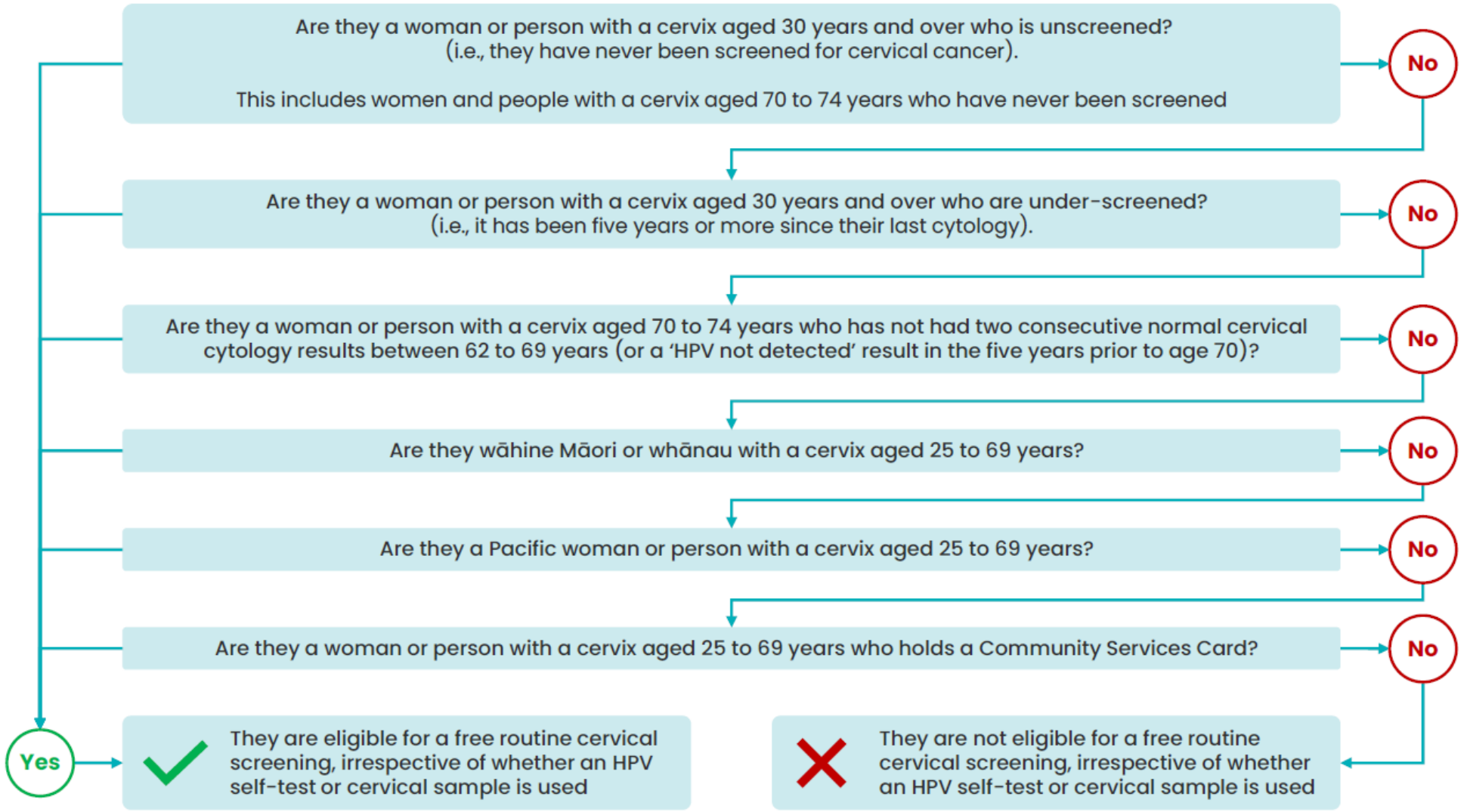
Eligibility:

- Based on Type of Screen and Schedule of Screen



Who is Eligible for Free Cervical Screening

Te Whatu Ora
Health New Zealand



GP Referred MRI

Practice Information

Last updated: Sept 2025

West Coast Health
Community Wellbeing Services

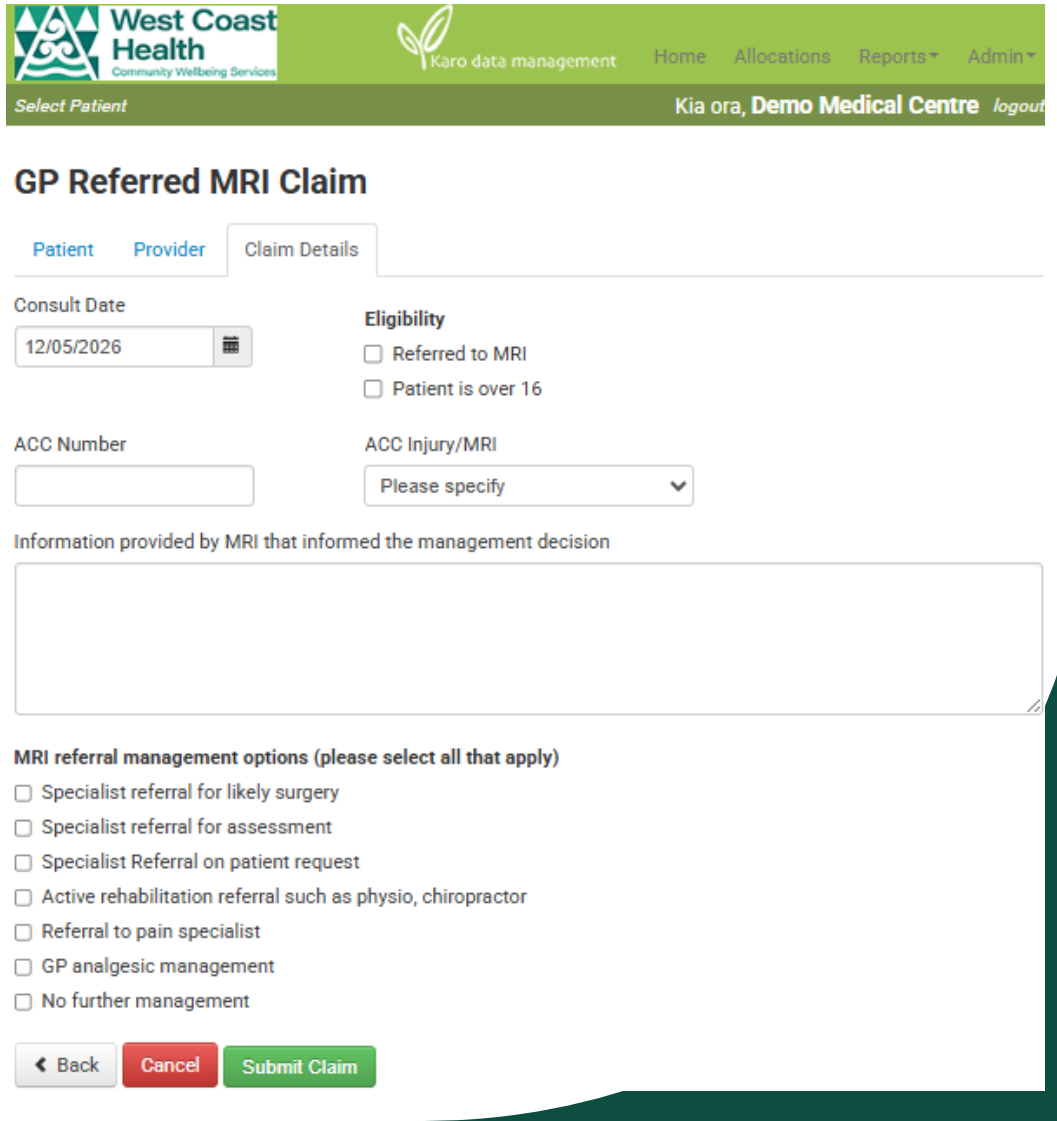
GP Referred MRI Practice Information

Programme Intentions:

- Allows practices to claim for referrals made to Radiology through the ACC MRI referral scheme

Process:

- **MRI Programme Trained GP or NP** completes knee, cervical or lumber assessment;
- Referral via ERMS: ACC GP MRI referral
- Provide package of care (*follow up and referrals*)
- Claim via Halcyon: GP MRI claim



Long Term Conditions Programme

Practice Information

Last updated: Sept 2025

West Coast Health
Community Wellbeing Services

LTC Programme Practice Information

Programme Intentions:

- Improve the health and quality of life of patients with CVD, COPD, Gout, Asthma, and Diabetes through a flexible funding model for individualised care.
- Reduce financial barriers to access care and certain treatments
- Enable whanaungatanga/relationship building
- Allow for funded time for comprehensive reviews, follow-up and patient education.

Eligibility

- Must have at least 1 Condition **and** at least 1 Qualifier
  - **Conditions:** Diabetes, CVD, COPD, Gout, Asthma
  - **Qualifiers:** Māori, Pacific, CSC, Quintile 5, New Diagnosis

Anyone who does not satisfy both of these requisites needs to be ***approved*** by WCH Quality Team via email.

General Info:

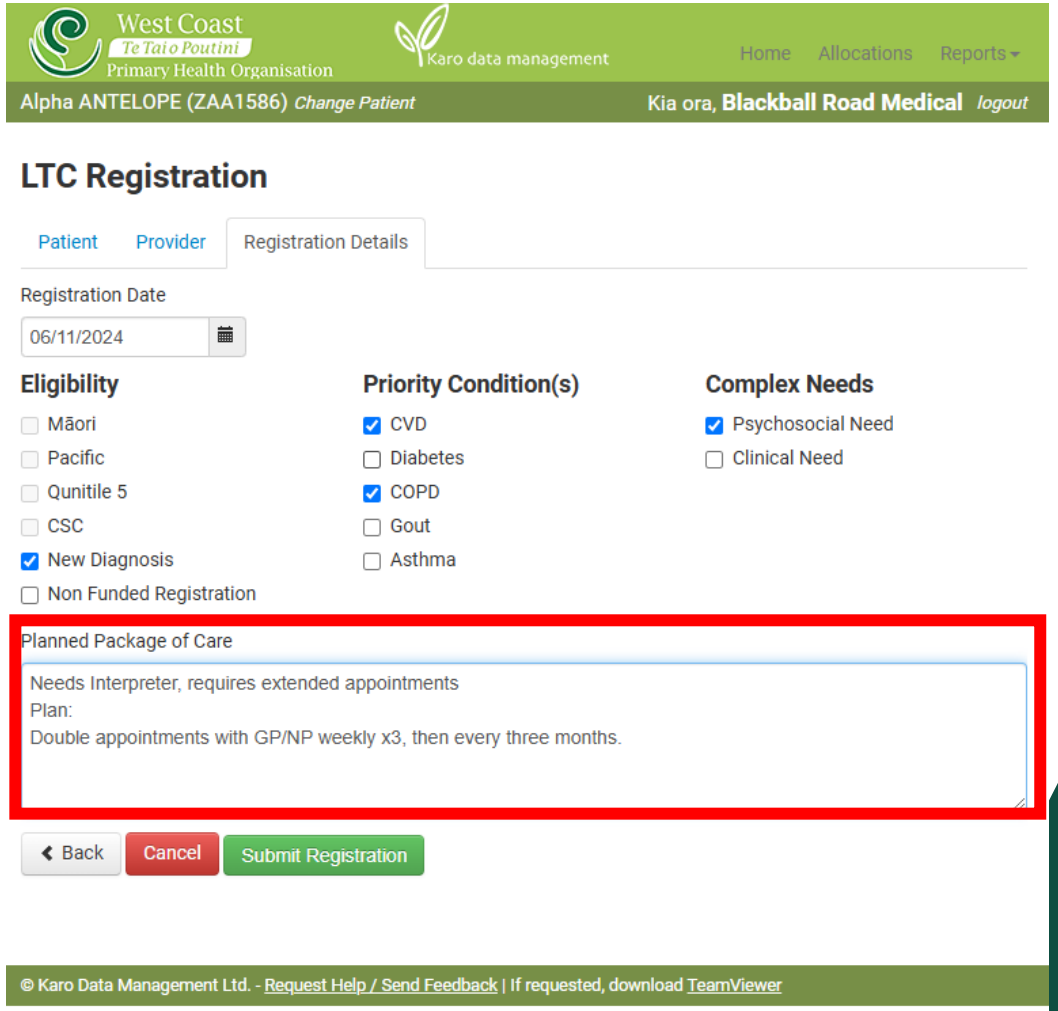
- Lump Sum, front funding ($300), annual enrolment
  - For Diabetes, must complete DAR to receive full $300.
- Capped number of registrations per practice
  - Discuss with your clinical team the process for enrolment

LTC Registration: Planned Package of Care

There is a free-text section for the "Planned Package of Care" in the registration form.

In this section, please provide:

- **The plan for how the $300 will be used for this patient over the next year.**
  - ii. Discuss with and inform the patient.



<u>Please Note:</u> Patients with Diabetes, the DAR is part of the $300 of funding.

Example: For someone with diabetes and a CSC holder

1. CSC DAR: $40
2. CSC LTC Diabetes: $260

Total funding: $300

LTC: Planned Package of Care Examples

Patient A:
“Patient has worsening DM II, now requiring insulin
-Free Initial weekly GP/RN consults for Insulin titration
-Free quarterly GP visits once stabilised
-cover pharmacy fees co-pay (the $5 per prescription)”

Patient B - enrolled in CVD LTC for hx of MI
"Learning and communication difficulties
- Free extended appointments quarterly and PRN with GP"

Patient C:
“Needing medication titration for better control of BP
-Free quarterly and PRN visits with GP
-Free nurse visits monthly
-free additional care as it may come up ie pharmacy courier fees with med changes”

Unique Ideas:

- Funding Vaccines (ex: Pneumococcal and Shingrix)
- Wiping debt to encourage patient to seek care
- Funding Pharmacist Visits

Long Term Conditions – Mental Health

Practice Information

Last updated: Jun 2022

West Coast Health
Community Wellbeing Services

LTC Mental Health Practice Information

Also known as: LTC-MH

Programme Intentions:

- To support the **physical health needs** of people with severe and enduring mental health condition.

General Info:

- Sits separately from other LTC programmes
- Funded yearly appointment and 3 follow-ups.
- Well-funded to include time for referrals and communication between services.

Eligibility:

- Long-term mental health condition
  - ie: Schizophrenia, Bipolar Disorder, etc.
- Enrolled in:
  - Buller Health
  - Kawatiri Health
  - Reefton Medical
  - South Westland
  - Te Nīkau IFHC
  - Westland Medical

Mental Health Extended Consult

Practice Information

Last updated: Sept 2024

West Coast Health
Community Wellbeing Services

Mental Health Extended Consult Practice Information

Programme Intention:

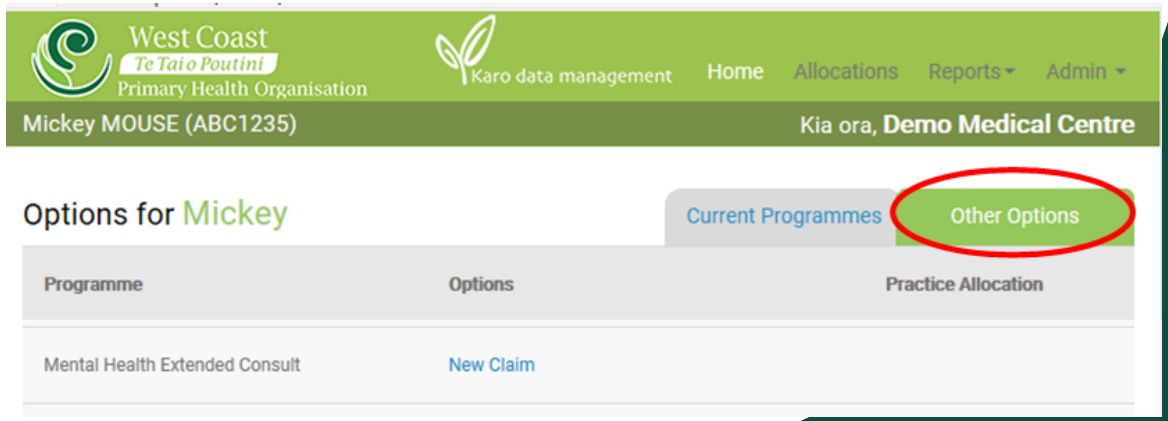
- To support General Practice to improve health outcomes and decrease inequalities for the enrolled population with mild to moderate mental health needs.
- To reimburse General Practices for time used by unexpected extended consultations.

Eligibility:

- Enrolled in West Coast Health (PHO)
- 12yrs and older
- Length of appointment is minimum double appointment.

General Info:

- Funded visits for unexpected mental health extended consults
- Claim cap of 8 claims per 1000 registered patients per year.
  - If practice needs more consults, contact qualityteam@westcoasthealth.nz
- Co-payment allowed



Palliative Care

Practice Information

Last updated: May 2026

West Coast Health
Community Wellbeing Services

Palliative Care Practice Information

New Programme Name: End of Life Care

Programme Intention: To support people in the last six months of life.

Programme Covers:

- Practice Consults
- Home Care Visits
- Post-death Home Visits

Eligibility:

- Enrolled in West Coast Health (PHO)
- In the last 6 months of life

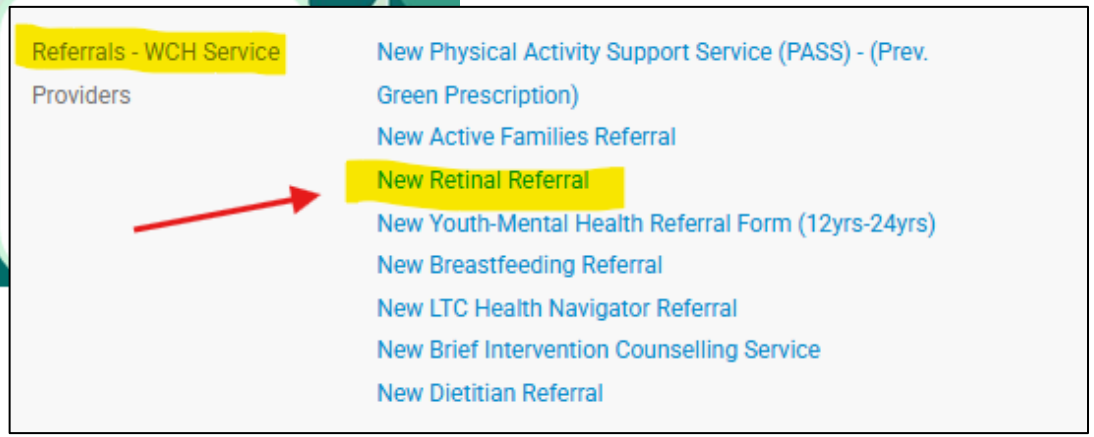
Extensions:

- Once-off 3-month extension
- Email: Danielle Dawson Danielle.Dawson@westcoasthealth.nz

Retinal Screening

Practice Information

Last updated: Jan 2020



Retinal Screening Practice Information

West Coast Health employs an optometrist from Matthews Eyewear to provide free Retinal screening to patients with Diabetes.

Clinics are held 4-5 times per year at arranged venues on the coast.

Eligibility:

- Patient has Diabetes Diagnosis
- Patients enrolled in West Coast Health (PHO)

Exclusions:

- Patients with prediabetes, or
- Pregnant patients with diabetes/gestational diabetes, or
- unable or unlikely to benefit from treatment if diabetic retinopathy is detected, e.g. already blind, terminally ill.

Process:

1. Practice submits Retinal Screening Referral via ***Halcyon***
2. WCH receives referral and books patient in for the next retinal screening in their area.
3. Patient gets screened.
4. Results sent back to practice via mail to be scanned into PMS record.

Please note: Retinal Screening Referrals do not automatically generate when you submit a Diabetes Annual Review. ***You must submit a Retinal Screening Referral via the form in Halcyon.***

Please refer to Health Pathways – Diabetes Retinal Screening Requests

Contraception and Sexual Health

Practice Information

Last updated: May 2026

West Coast Health
Community Wellbeing Services

Sexual Health Practice Information

Age < 25

Eligibility:

- Anyone under 25 years of age
  - Irrespective of eligibility for NZ healthcare and enrolment status

Programme Covers:

- Contraception Consults
- STI Consults
- Repeat prescriptions and follow-up
- Long Acting Reversible Contraception (LARC) – subdermal or IUD insertion procedure or removal with/without reinsertion

Prescriptions must have “WCPHO Contraception Programme” stamped on them or added into instruction line for pharmacy to dispense for free.

Contraception and Sexual Health

Practice Information

Last updated: May 2026

West Coast Health
Community Wellbeing Services

Age ≥ 25

Eligibility for 25 years and older:

- People Living on Low Incomes- Q5 area *or* hold a community services card, **or**
- Māori & Pacific peoples, **or**
- Experiencing adversity and living on low incomes including those who fit eligibility criteria (see practice information)

Programme Covers:

Contraceptive consult (**STI not funded**)

LARC – subdermal or IUD insertion procedure or removal with/without reinsertion

Co-pay:

-Maximum $5 for Contraception Consult

-No co-pay allowed for LARC procedure

Prescriptions must have "WCPHO Contraception Programme" stamped on them or added into instruction line for pharmacy to dispense for free.

Skin Cancer Management

Practice Information

Last updated: May 2026

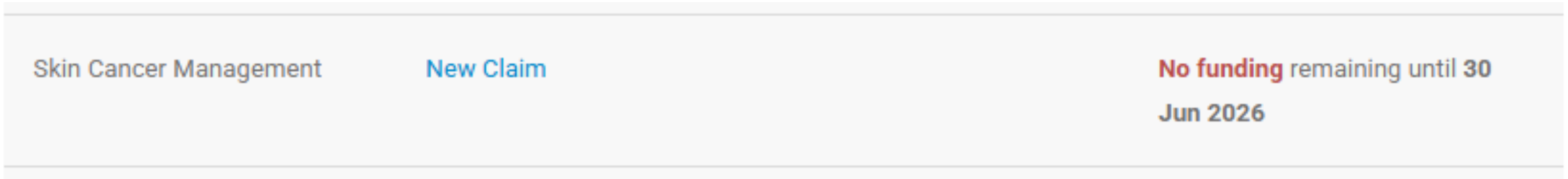
West Coast Health
Community Wellbeing Services

Skin Cancer Management Practice Information

- **Skin excision subsidy based on time for procedure**
- **Funding allocated quarterly to clinics**
- **Contact Quality Team if queries about funding, need, or eligibility**

Eligibility:

- Suspected or confirmed Skin Cancers,
- ***and*** one of the below:
  - Patients holding a Community Services Card or
  - Māori and Pacific peoples, or
  - Patients whose circumstances mirror deprivation as determined by the individual clinician.
    - Example: would likely be eligible for a CSC but does not have one.



Questions? Feedback? Claim Mistake?

Contact us!

qualityteam@westcoasthealth.nz

03 768 6182