



11 July 2022

Dear [REDACTED]

Re: OIA request – Winter plans and occupancy

Thank you for your Official Information Act request received 13 June seeking information from Waitematā District Health Board (DHB) about winter plans and occupancy.

Before responding to your specific questions, it may be useful to provide some context about our services.

Waitematā is the largest and one of the most rapidly growing health districts in the country, serving a population of around 650,000 across the North Shore, Waitakere and Rodney areas. We are the largest employer in the district, employing more than 8,900 people across more than 80 locations.

In addition to providing care to our own resident population, we are the Northern Region provider of forensic mental health services and child rehabilitation services, plus the metro Auckland provider of child community dental services and community alcohol and drug services.

In response to your request, we are able to provide the following information:

1. What is the average occupancy rate of overall hospital beds for the last month?

Please find below the average occupancy rates for North Shore Hospital and Waitakere Hospital for May 2022:

North Shore Hospital	- 93%
Waitakere Hospital	- 84%
Average across both hospitals	- 90%

2. What specific plans are in place to prepare for winter illnesses - are any extra staff brought in, or extra beds added? What are the "systems" to manage surges?

Our escalation response during the winter period includes daily operational reviews of hospital occupancy through a "Whole-of-Hospital Huddle" each weekday morning.

This identifies our status at the start of the day and is attended by all hospital services. If beds are fully occupied, with limited or slow movement to ward beds and we look to be facing significant challenges by 11.00am, a contingency meeting with senior staff is set-up for early afternoon to plan and mitigate any potential risks going into the evening.

These standard operating responses ensure that our hospitals remain safe for patients and all aspects of patient care and hospital operations are routinely monitored and responded to.

Waitematā DHB has a Demand Response Framework for the organisation that ensures each service is responsible for managing increases in demand and that a clear escalation pathway is followed to ensure early response during periods of fluctuating occupancy.

Specific winter strategies we have in place currently are:

- a number of flex beds* at both North Shore and Waitakere hospitals are in place for winter.
- flex bed options in our COVID-19 wards allow us to meet demand as required
- a contingency overflow option for North Shore Hospital's maternity service
- recruitment of an additional Duty Nurse Manager for North Shore Hospital is in progress
- additional pre-analytical support (i.e. phlebotomists and specimen service technicians) for processing increased work, aiding the prompt testing and reporting of all laboratory tests including respiratory PCR, influenza and COVID-19 tests
- winter funding for pharmacy - additional funding for full-time equivalent (FTE) pharmacists to provide clinical input to the flexed winter beds. This will be used to fund casual staff if/when they are available
- potential to reallocate beds within services to accommodate increased winter demand
- we are increasing orderly resource to assist with patient movement from emergency departments/assessment and diagnostic unit (ED/ADU) to wards and diagnostic appointments
- Home Warding Model of Care for speciality medicine. Patients are sent to a dedicated ward for their care instead of being spread across general medicine wards at North Shore Hospital; includes a process that identifies barriers to discharge
- in times of high demand for ED/ADU/surgical assessment and short stay unit (SASSU) – transfer to wards will occur, where clinically appropriate, with safe discharges flagged for the day the patient is moved
- we have implemented a new model of care in SASSU to support rapid decision-making and access to acute theatre
- nursing and allied health study days and meetings over the winter period will be available for staff to maintain clinical safety and essential skills but other non-essential study/meetings will be deferred in order to maintain optimal staffing in all clinical areas
- ongoing development of Hospital in the Home (HiTH)** to assessment and monitoring services for patients who would otherwise be treated in a hospital bed.

*Flex beds give us the ability to flex the number of beds that are staffed up or down, depending on capacity needs.

**HiTH is Hospital in the Home is an alternative acute care pathway to inpatient admission, enabling patients to receive hospital-level care at home, reducing demand for inpatient beds.

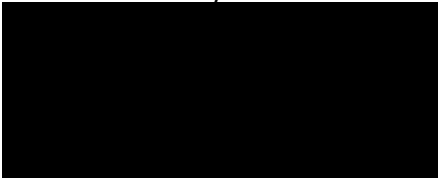
I trust that this information is helpful.

Waitematā DHB supports the open disclosure of information to assist community understanding of how we are delivering publicly funded healthcare.

This includes the proactive publication of anonymised Official Information Act responses on our website from 10 working days after they have been released.

If you consider there are good reasons why this response should not be made publicly available, we will be happy to consider your views.

Yours sincerely



**Executive Director Hospital Services
Waitematā District Health Board**