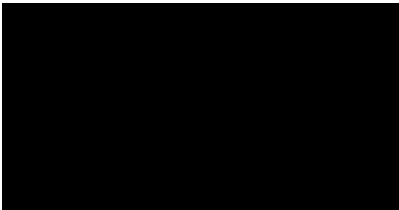




25 November 2019



Dear [REDACTED]

Re: OIA request – Staffing numbers

Thank you for your Official Information Act request received 9 October seeking information about the number of staffing numbers within each department from Waitematā District Health Board (DHB).

You initially requested the following:

With respect I request the following information under the terms of the Official Information Act 1982:

- *a list of every department that has staff shortages and the number of staff shortages within each department (from greatest shortage to least) from 2015 to September 2019*
- *the total number of staff in each department if it was at full capacity - the wait times/delays for patients in each department (including the number of admissions, the number of patients with delayed appointments and average waiting times for each patient) from 2015 to September 2019*
- *the cost of paying locum staff and the total number of locum staff members in each department (including wages and other expenses e.g. food, accommodation) from 2015 to September 2019*
- *the length of each locum staff members' employment with the DHB from 2015 to September 2019*

We contacted you by email on 17 October to advise that this was a large information request that needed clarifying before we were able to respond. You spoke to Technical Advisory Services (TAS) on 25 October to discuss how to narrow the scope of your request.

Subsequently, your amendments to the above query were received 29 October 2019, as below, which you acknowledged would require an amended response date of 25 November:

1. *The performance measure results of each department from September 2017 to September 2019 e.g. patient flow indicators.*
2. *The number of vacancies in specialist roles across each DHB department and the length of each vacancy from September 2017 to September 2019.*
3. *The total number of staff in each department if it was at its ideal target from September 2017 to September 2019.*

4. *What are the DHB's staffing arrangements when departments are not at full staff capacity?*
5. *The cost of paying and total number of staff (plus extra expenses including things such as food and accommodation) on temporary contracts covering for someone of the same profession (also known as locum/cattle workforce/agency/bureaus) in each department from September 2017 to September 2019.*
6. *The average length of each staff member's employment (staff members' contracts explained above) with the DHB from September 2017 to September 2019.*
7. *The average wait times for patients, as well as longest and shortest individual wait times for specialist appointments and elective surgeries from September 2017 to September 19? Please specify each specialist department e.g. neurologist, cardiologist etc. and if it was for appointments or elective surgeries.*

Later that day, you emailed the following further two amendments:

Modification to question 2 - the number of vacancies in specialist roles across each DHB department and the length of each vacancy from September 2017 to September 2019.

Modification to question 5 - the cost of paying and total number of staff (plus extra expenses including things such as food and accommodation) on temporary contracts covering for someone of the same profession (also known as locum/cattle workforce/agency/bureaus) in each department from September 2017 to September 2019.

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

Waitematā DHB serves a population of more than 630,000 across North Shore, Waitakere and Rodney areas, the largest and one of the most rapidly growing DHBs in the country. We are the largest employer in the district, employing around 7,500 people by headcount across more than 80 different locations.

In addition to providing services to our own population, we are also the metropolitan Auckland provider of forensic psychiatry, child disability services, child community dental services and community alcohol and drug services.

Our responses to your specific questions are as follows:

1. The performance measure results of each department from September 2017 to September 2019 e.g. patient flow indicators

Our DHB performance is reported to the Board on a monthly and quarterly basis through operational reports and scorecards, available on our website, along with our Annual Plans and Annual Reports:

- <http://www.waitematadhb.govt.nz/dhb-planning/organisation-wide-planning/annual-plan/>
- <http://www.waitematadhb.govt.nz/about-us/dhb-reporting/annual-reports/>

Reports on DHB performance, including specific reports on elective and acute services indicators, are publicly available on the Ministry of Health (MoH) website:

- <https://www.health.govt.nz/our-work/hospitals-and-specialist-care/elective-services/elective-services-and-how-dhbs-are-performing/about-elective-services-patient-flow-indicators>
- <https://www.health.govt.nz/nz-health-statistics/health-statistics-and-data-sets/district-health-board-data-and-stats/caseload-monitoring-reports>

2. The number of vacancies in specialist roles across each DHB department and the length of each vacancy from September 2017 to September 2019

The information provided includes sub-specialty positions where there may be challenges regarding recruitment due to national or international shortages. In these instances, locum cover becomes the only realistic option to ensure patients continue to have access to services and treatment. See **Appendix 1**, attached.

3. The total number of staff in each department if it was at its ideal target from September 2017 to September 2019

Each year the DHB approves a total number of full-time equivalents (FTEs) for each department as outlined below (the total number of people employed by the DHB is around 7,500):

Approved FTE current employ plus vacancies	Sep-17	Sep-18	Sep-19
Acute and Emergency Medical	1,116.6	1,123.2	1,194.7
Child Women & Family	899.6	901.3	934.5
Clinical Support	274.7	275.3	285.1
Corporate	398.6	393.9	424.5
Diagnostics	423.3	443.5	452.2
Director Hospital Services	154.7	166.6	167.1
Elective and Outpatient Services	89.0	93.0	90.7
Elective Surgery Centre	85.5	86.3	85.7
Facilities and Development	54.0	52.5	51.0
Governance and Funding	93.5	100.2	98.6
Mental Health & Addiction	1,252.0	1,288.2	1,309.2
Sub Specialty Medicine and HOPS*	808.6	801.6	839.5
Surgical and Ambulatory	882.4	907.4	938.7
WDHB Total	6,532.5	6,633.0	6,871.5

*Health of Older People Service

4. What are the DHB's staffing arrangements when departments are not at full staff capacity?

Staffing arrangements are continually monitored and managed across departments and services. Cover for vacancies or leave may take the form of internal or external temporary staff or secondments or additional shifts.

5. The cost of paying and total number of staff (plus extra expenses including things such as food and accommodation) on temporary contracts covering for someone of the same profession (also known as locum/cattle workforce/agency/bureaus) in each department from September 2017 to September 2019.

Temporary staff are required for a variety of planned and unexpected cover arrangements and may be employed internally or externally on an hourly or shift-by-shift basis by a service and others may have an agreed fixed period of employment. Costs vary according to time covered, skills and occupational group required.

The way that locums and bureau employees are contracted does not enable us to readily provide total numbers used. This information is spread across services and agencies and seeking to collate it would take a number of weeks and would also divert staff across a range of services from their core duties.

We have considered whether charging or extending the timeframe for responding would assist in managing this work and have concluded it would not. Therefore, we have determined we are unable to provide a full response to your request under Section 18(f) of the Official Information Act due to substantial collation or research.

You have the right to seek an independent review of any of the decisions taken in providing this response by contacting the Office of the Ombudsman via www.ombudsman.parliament.nz.

However, we can provide a summary of **total** outsourced costs for 2017/18 and 2018/19 - please see **Appendix 2** for this information. NOTE: This table should not be read as a direct value of the cost of paying temporary staff as the costs noted include additional components of service-delivery, such as patient procedures outsourced to external providers.

6. The average length of each staff member's employment (staff members' contracts explained above) with the DHB from September 2017 to September 2019

As we are not able to collate the full list of temporary contracts (as noted in our response to question 5), we do not have information about the average length of each contracted staff member's employment. Therefore, we are declining this element of your request under Section 18(e) of the Official Information Act, as the information requested does not exist.

You have the right to seek an independent review of this decision by contacting the Office of the Ombudsman via www.ombudsman.parliament.nz.

7. The average wait times for patients, as well as longest and shortest individual wait times for specialist appointments and elective surgeries from September 2017 to September 2019? Please specify each specialist department e.g. neurologist, cardiologist etc and if it was for appointments or elective surgeries

Waiting time considerations:

It should be noted that maximum waiting times can often be impacted by patient choice - for instance, if a patient is travelling overseas for a holiday, they may wish to defer their surgery for two or three months.

Similarly, maximum times can be related to a planned, or staged, clinical care pathway. As an example, a breast cancer patient will have their clinic commitments confirmed at the beginning of their treatment journey.

Therefore, the mastectomy, breast reconstruction, oncology, and radiology diagnostics are all on a structured timeline. So, an elective patient may be recorded as waiting over 800 days for the appointment or surgical procedure but that is because it was only ever planned (also known as staged) that far ahead in the first instance.

It would be misleading to interpret this as a patient 'having to wait' over 800 days for treatment. It is not possible to separate such instances, noting Waitemata DHB treats over 400,000 outpatients and inpatients per year. This is why maximum and minimum waiting time averages have been included.

Elective surgery:

The 'average number of days waiting' represents the average time period from the day the patient is accepted for elective surgery (normally at the outpatient appointment) to the day surgery occurs. The MoH stipulates that an acceptable, or compliant, maximum for this is four months (about 122 days). The average maximum and minimum days waiting are the highest or lowest weekly average in the period.

Average elective surgery waiting time for the period Sept 2017 to Sept 2019)	Minimum average days waiting	Maximum average days waiting	Average days waiting
General Surgery	22	67	52
Gynaecology	49	123	77
Orthopaedic	29	130	87
Otorhinolaryngology	47	102	79
Urology	31	116	78

Outpatients:

The average number of days waiting represents the time period from the day the patient's referral is accepted for a First Specialist Appointment (FSA) to the day the clinic appointment occurs. The MoH stipulates that an acceptable, or compliant, guideline for this is four months (about 122 days). The average maximum and minimum days waiting are the highest or lowest monthly average in the period.

Average outpatient surgery waiting time by service for the period Sept 2017 to Sept 2019	Minimum average days waiting	Maximum average days waiting	Average days waiting
General Surgery	59	85	71
Gynaecology	62	80	74
Orthopaedic	63	81	75
Otorhinolaryngology	86	102	109
Urology	53	73	62

I trust that this information is helpful.

Waitemata DHB supports the open disclosure of information to assist community understanding of how we are delivering publicly funded health care. 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



Fiona McCarthy
Director Human Resources
Waitemata District Health Board

APPENDIX 2

Summary of total outsourced costs (value in dollars)

NOTE: This table should not be read as a direct value of the cost of paying temporary staff as the costs noted include additional components of service-delivery, such as patient procedures outsourced to external providers.

Divison	Sep-17	Oct-17	Nov-17	Dec-17	Jan-18	Feb-18	Mar-18	Apr-18	May-18	Jun-18	Jul-18	Aug-18	Sep-18	Oct-18	Nov-18	Dec-18	Jan-19	Feb-19	Mar-19	Apr-19	May-19	Jun-19	Jul-19	Aug-19	Sep-19
Corporate Services	164,312	166,983	124,596	178,602	128,075	45,458	167,693	241,036	156,711	361,378	138,326	172,503	223,424	146,344	248,108	93,799	193,214	147,549	251,191	469,638	227,588	249,720	212,212	142,033	184,587
Acute and Emergency Medical Divison	62,356	95,225	93,244	83,880	67,217	99,707	119,652	108,616	133,628	90,621	93,449	101,061	111,141	121,515	176,713	150,515	174,378	115,864	96,522	137,032	117,529	166,839	171,791	181,996	179,349
Diagnostic Services											4,000	4,083	5,365	4,000	3,832	4,166	4,166	4,166	4,166	52,101	2,240	4,166	4,166	4,166	4,166
Director Hospital Services	26,462	47,036	43,338	40,846	23,864	20,482	19,384	28,571	42,468	44,565	32,644	33,344	42,301	30,256	28,868	25,131	35,697	12,734	25,919	8,610	21,813	42,828	27,111	38,089	25,322
Elective and Outpatient Services	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Clinical Support Services											16,967	13,322	9,951	7,967	22,417	16,161	28,011	17,220	12,546	41,901	27,787	19,559	15,307	23,308	32,643
Hospital Operations	11,304	14,079	16,368	10,638	17,354	16,559	1,920	21,038	29,621	60,597															
Sub Specialty Med and HOPS	29,858	55,546	60,929	43,489	89,479	43,867	56,896	91,404	71,913	75,555	49,962	96,853	101,783	62,626	75,972	91,041	54,311	87,810	126,438	123,228	31,348	61,180	52,311	67,232	83,450
Mental Hlth & Addiction Services	209,466	213,890	305,838	153,964	107,446	72,642	161,845	266,949	260,391	372,458	291,675	225,836	235,663	202,219	261,104	252,928	276,215	326,036	295,014	420,865	306,037	272,184	244,266	239,084	300,429
Provider Management	-	-	18,928	41,915	6,225	633,085	11,694	10,734	400,387	102,968	-	-	-	-	-	-	-	-	-	-	-	-	-	48,900	34,900
Surgical and Ambulatory	163,348	162,532	145,670	235,741	164,412	82,042	260,022	193,611	315,217	245,669	252,896	138,455	260,629	217,073	202,861	149,965	38,336	169,943	157,410	117,645	213,860	191,980	173,843	139,041	110,544
Child Women & Family	104,220	98,906	103,964	218,988	119,569	55,481	151,417	152,384	215,110	186,536	127,186	177,359	127,525	187,483	144,984	206,832	119,498	116,191	113,778	105,784	212,147	324,015	184,354	143,509	174,703
Total	444,630	529,134	583,678	452,750	382,367	360,932	403,252	705,652	194,237	1,049,009	501,312	685,906	596,525	545,336	759,137	690,608	847,153	657,627	768,164	1,241,515	728,148	948,511	737,674	749,276	909,005