

06 April 2022

Dear [REDACTED]

Re: OIA request – COVID-19 hospitalisations

Thank you for your Official Information Act request transferred to us by the Ministry of Health on 22 March seeking information from Waitematā District Health Board (DHB) about hospitalisations directly linked to COVID-19. You requested the following information:

Please provide data as follows:

1. COVID-19 hospitalisation directly related to COVID-19 and COVID-19 only.
2. COVID-19 hospitalisation where patient was admitted for another reason and COVID-19 was detected after arriving at the hospital.
3. ICU and HDU beds used for COVID-19 only infections.
4. ICU and HDU beds used for non-COVID-19 conditions where a COVID-19 test after arriving at the hospital showed infection.

This data should be provided on a weekly basis and should not show any details of any patient for confidentiality reasons. The data is available as part of the collection of information at the hospital and should be being collected for clear data in this pandemic. Do not claim there is a privacy issue as I am not requesting any patients' names, ages, sex or other pronoun, location or any other identifying information.

You subsequently clarified via TAS, the DHBs' shared Technical Advisory Service, that the timeframe for the request was for 1 March 2020 to 21 February 2022.

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 DHBs 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. COVID-19 hospitalisation directly related to COVID-19 and COVID-19 only.
2. COVID-19 hospitalisation where patient was admitted for another reason and COVID-19 was detected after arriving at the hospital.

It should be noted that multiple patients present with respiratory conditions or sepsis and a COVID-19 test is performed *after* arrival. Symptomatic patients are presumed to be COVID-19-positive and are isolated and streamed accordingly, awaiting test results.

Most of our patients, including within the wider hospital, have underlying health conditions. For this reason, it is not always clear if COVID-19 is the reason for their admission or if it is due to an underlying condition (e.g. congestive heart failure, lung disease or cellulitis), which is exacerbated by a new COVID-19 infection.

For this reason, caution is advised in interpreting the figures below.

We are withholding numbers fewer than four (4) under section 9(2)(a) of the Official Information Act to protect the privacy of individual patients.

We have considered whether the public interest in releasing the information outweighs the need to protect the privacy of individual patients and have determined that it does not. Disclosing the exact numbers on a week-by-week basis creates the risk that individuals will be identifiable.

The general expectation that medical records will be kept confidential means that any patients concerned are entitled to rely on the DHB not to create the risk that they will be identified.

Table 1: North Shore Hospital COVID-19 hospitalisations

Week commencing	COVID-19 hospitalisations where patient was admitted for another reason and COVID-19 was detected after arriving at the hospital	Hospitalisation directly related to COVID-19
2020		
02-Mar		<4
09-Mar		<4
16-Mar		<4
23-Mar		4
30-Mar		4
06-Apr		<4
13-Apr		11
20-Apr		<4
27-Apr		4
04-May		<4
10-Aug		<4
17-Aug		<4
24-Aug		<4
31-Aug		3
07-Sep		<4
2021		
01-Feb		<4
16-Aug		6
23-Aug		6
30-Aug		14
06-Sep		7
13-Sep		<4
20-Sep	<4	4
27-Sep		4
04-Oct		13
11-Oct		8
18-Oct		33
25-Oct		41
01-Nov		44

Week commencing	COVID-19 hospitalisations where patient was admitted for another reason and COVID-19 was detected after arriving at the hospital	Hospitalisation directly related to COVID-19
08-Nov		39
15-Nov		36
22-Nov		25
29-Nov		21
06-Dec		13
13-Dec		8
20-Dec		7
27-Dec		8
2022		
03-Jan		5
17-Jan	<4	4
24-Jan	<4	<4
31-Jan	<4	4
07-Feb	<4	20
14-Feb	<4	52
21-Feb		24
Total	11	491

3. ICU and HDU beds used for COVID-19-only infections.

There are no ICU/HDU beds used only for COVID-19 infections. All negative pressure ICU/HDU beds can be used for any patient and we flex bed numbers and staffing up or down, depending on demand. COVID-19 patients are streamed separately from other patients so there is no risk of cross-infection.

4. ICU and HDU beds used for non-COVID-19 conditions where a COVID-19 test after arriving at the hospital showed infection.

There were 28 COVID-19 patients that went to ICU during 1 March 2020 and 28 February 2022 with a total of 233 bed days in ICU. Due to the low patient numbers, we are unable to break these down further due to privacy reasons.

We are, therefore, refusing this aspect of your request under section 9(2)(a) of the Official Information Act 1982 to protect the privacy of individual patients.

We have considered whether the public interest in releasing the information outweighs the need to protect the privacy of individual patients and have determined that it does not. Disclosing the exact numbers on a week-by-week basis creates the risk that individuals will be identifiable.

We have considered whether the public interest in releasing this information outweighs the need for individual privacy and have concluded that it does not. The general expectation that medical records will be kept confidential means that any patients concerned are entitled to rely on the DHB not to create the risk that they will be identified.

You have the right to seek an investigation and review by the Ombudsman of the decisions taken in providing this response. Information about how to seek a review is available at www.ombudsman.parliament.nz or Freephone 0800 802 602.

I trust that the information we have been able to provide 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**