



24 May 2021

Dear [REDACTED]

Re: OIA request – Mental health inpatient data; number of serious adverse events and mental health staff in Emergency Departments (EDs)

Thank you for your Official Information Act request received 29 April 2021 seeking information from Waitematā District Health Board (DHB) about our mental health inpatient units and adverse events.

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 around 8,600 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. The total capacity for mental health service inpatients (inclusive of Waiatarau, He Puna Waiora, and Kingsley Mortimer) at any one time

Two of our Mental Health Service inpatient units, He Puna Waiora (adult psychiatry unit on the North Shore Hospital campus) and Waiatarau (adult psychiatry unit on the Waitakere Hospital campus), provide psychiatric inpatient care for the adult population in our district.

The Kingsley Mortimer Unit at North Shore Hospital provides inpatient psychogeriatric care for older adults (65+ years).

The table below provides the total number of commissioned beds, by bed type, across all of the inpatient services detailed above.

Total number of beds in Mental Health Service inpatient units	
Bed type	Number of commissioned beds
Acute adult mental health	67
Acute older adult mental health	19
TOTAL	86

2. Whether or not this capacity was reached on any date in March or April this year (and which dates)

Waitematā DHB is the largest mental health service provider in New Zealand by volume of service-users seen.

Bed occupancy can be affected by a variety of factors, including extended lengths-of-stay of some patients. Funding has been approved for additional beds and for packages of care for people with extended or extreme lengths of stay in inpatient care. In addition, we will be undertaking long-term planning with our Planning, Funding and Outcomes team to address occupancy pressures.

While our inpatient units are sometimes at capacity, average monthly occupancies between May 2020 and April 2021 are as follows:

- Waiaatarau - between 93% and 103% (please note, Waiaatarau has the ability to temporarily increase bed capacity when required. This results in a higher average occupancy rate)
- He Puna Waiora - between 84% and 99%
- Kingsley Mortimer Unit - between 78% and 99%.

Four additional beds are currently being commissioned at He Puna Waiora. It is anticipated that these will be operational in July 2021.

In He Puna Waiora, capacity was reached on 33 days during this time period:

- | | |
|-----------------|-----------------|
| ▪ 1 March | ▪ 3 – 5 April |
| ▪ 6 – 9 March | ▪ 10 April |
| ▪ 16 – 18 March | ▪ 12 – 15 April |
| ▪ 21 – 24 March | ▪ 17 – 22 April |
| ▪ 27 – 29 March | ▪ 24 – 27 April |

In Waiaatarau, capacity was reached on 22 days during this time period*:

- | | |
|-----------------|-----------------|
| ▪ 1 March | ▪ 1 - 8 April |
| ▪ 11 March | ▪ 11 April |
| ▪ 13 -14 March | ▪ 20 April |
| ▪ 21 March | ▪ 24 - 26 April |
| ▪ 23 March | |
| ▪ 29 - 31 March | |

*No additional beds (flexi-beds) were used during this time.

In the Kingsley Mortimer Unit, capacity was reached on 38 days during this time period:

- | | |
|-----------------|-----------------|
| ▪ 1 - 9 March | ▪ 12 April |
| ▪ 11 - 27 March | ▪ 14 - 22 April |
| ▪ 13 - 14 March | |
| ▪ 30 - 31 March | |

3. Where are new inpatients directed when capacity at the Waiatarau, He Puna Waiora and Kingsley Mortimer wards is reached?

Demand for inpatient beds is managed on an acuity (severity-of-illness) and risk (to self or others) basis. Beds are prioritised for the people most in-need when there is demand in excess of the number of beds available.

Adult inpatient services also have the ability to “flex-up” their bed capacity and, on occasion, will bring in extra staff to place a person into an additional bed for a short period of time.

Alternatively, if a bed is urgently needed, then all people will have their care and treatment needs reviewed. Where appropriate, a person may be discharged to a step-down non-government organisation (NGO) operated respite facility or discharged home, with a follow-up plan in place which includes family/whānau and the community mental health team.

Other options include our acute alternative-to-admission service in the community (Piriipono) or a respite care provider.

Where there is a delay in making a bed available, service-users will either receive support from the Adult Community Mental Health Team at home or they will be admitted to one of our Emergency Departments (EDs) where treatment and monitoring is initiated until an inpatient bed becomes available.

When Kingsley Mortimer unit is at-capacity, older adults are either admitted to ED, the Assessment and Diagnostic Unit or a medical ward if required, depending on their needs.

Service-users will receive support from either the Liaison Psychiatry Service or adult community services whilst they are waiting for a bed within the unit.

4. How many SAC (Severity Assessment Code) 1 and SAC 2 events occurred involving mental health service patients in North Shore Hospital and Waitakere Hospital in March and April of this year?

Waitematā DHB makes use of the Severity Assessment Code (SAC) rating and triage tool for adverse event reporting which is in accord with the Health Quality and Safety Commission of New Zealand’s definitions of adverse events.

We have provided SAC 1 and 2 data for the designated mental health units at North Shore and Waitakere hospitals. The number of events during March and April 2021 are detailed in the table below:

Location	SAC 1 and SAC 2 events
Waiatarau	0
He Puna Waiora	0
Kingsley Mortimer Unit	0
Total	0

5. Whether or not trained mental health staff are employed in emergency departments at North Shore Hospital and Waitakere Hospital.

Trained mental health nurses and medical staff are either based in EDs or are readily accessible to our EDs, 24 hours per day, seven days per week.

The Waitakere Hospital ED has a team of 4.40 full-time equivalent (FTE) mental health nurses who are based within the department. There are also Liaison Psychiatry mental health nurses who also work outside the EDs and are able to provide assistance if required. On-call medical staff are also available to attend the EDs when required.

The North Shore Hospital ED is able to access trained mental health staff from the community mental health teams and the Liaison Psychiatry team. The Liaison Psychiatry team is located within the hospital and provides support to the ED and the wider hospital.

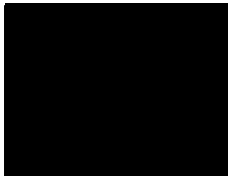
A mental health nurse is also located in North Shore Hospital's ED overnight (2300 – 0700 hours) to provide assessments and support. On-call medical staff are also available during this time and they are able to attend the ED when required.

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



**Director – Specialist Mental Health and Addiction Services
Waitematā District Health Board**