



1 November 2021

[REDACTED]
[REDACTED]
[REDACTED]

Dear [REDACTED]

Re: OIA request – ICU nurses and utilisation of beds

Thank you for your Official Information Act request received 24 September seeking information from Waitematā District Health Board (DHB) about ICU Nurses and bed utilisation.

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.

You requested the following information:

I request all original communications including briefings, reports, memos, aide's memoirs, cabinet papers and texts regarding the following information:

- **How many ICU nurses (head count) were on payroll at 13 May 2020, 1 April 2021 and 16 August 2021?**
- **How many ICU nurses (head count) left and joined the DHB between May 5 and Aug 16 2021?**
- **How many ICU nurses (head count), ICU beds and ICU patients, ventilated and coronavirus positive were there when the request was made for more ICU nurses at or around Sept 1st?**
- **What was the utilization rate of ICU beds from Aug 16 2021 to Aug 24 2021 inclusive listed by day?**
- **What was the ICU/HDU nurse ratio of nurses to patients daily from 1 August 2021 to 15 Sept 2021 listed by day?**
- **Copies of any communications to and from the DHB with government officials or other DHBs with concerns or requests around ICU nurses**
- **How many negative pressure isolation rooms were there at 13 May 2020, 1 April 2021 and 16 August 2021?**
- **What was the utilization rate of negative pressure isolation rooms from August 16 2021 to the 15 Sept 2021 listed by day?**

- **Copies of any communications to and from the DHB with government officials or other DHBs with concerns or requests around negative pressure isolation rooms including the addition of any further rooms during the recent outbreak**
- **Copies of patient visitor policies from Aug 15 to Sept 15 2021, specifically and changes to policy during the recent outbreak**

On 29 and 30 September, Auckland DHB sought clarification on behalf of the metro Auckland DHBs as to whether you were only requesting briefings, reports, reports, memos, aide’s memoirs, cabinet papers and texts or the data in the bullet points. They followed up with you again on 4 October. That same day, you advised the following:

“Briefings and reports usually contain and or summarise data and should be taken as synonymous however for clarity may I please have the data associated with this request.”

On 6 October, we contacted you directly as follows:

“To make the request manageable for the service, we are seeking further clarification. We have numbered the questions, below, to make it clear which questions we are referring to.

We will provide data only for questions 1 to 5, 7 & 8 (highlighted below).

For the remaining questions, we are seeking clarification on the timeframes as follows:

6. Copies of any communications to and from the DHB with government officials or other DHBs with concerns or requests around ICU nurses. *[We suggested the timeframe from 1 May 2020 to current (date request received)].*
9. Copies of any communications to and from the DHB with government officials or other DHBs with concerns or requests around negative pressure isolation rooms including the addition of any further rooms during the recent outbreak. *[We suggested the timeframe above.]*
10. Copies of patient visitor policies from Aug 15 to Sept 15 2021, specifically and changes to policy during the recent outbreak. *[No clarification needed.]*”

As we did not receive your confirmation, we contacted you again on 12 October to advise that we would provide a response to your request in line with our clarification above. That same day, you acknowledged our email.

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

- 1. How many ICU (intensive care unit) nurses (head count) were on payroll at 13 May 2020, 1 April 2021 and 16 August 2021?**

Our staffing levels ensure that we maintain one-to-one nursing care for all ICU-designated patients and one-to-two nursing care for all HDU-designated patients within the ICU/HDU complex, in line with the Intensive Care Society and Critical Care Nursing Section (CCNS) Minimum Guidelines for Intensive Care Staffing in New Zealand standards.

North Shore Hospital nurses employed in ICU in 2020 and 2021				
ICU nurses on payroll (excluding casuals and staff on long-term leave)	13 May 2020	1 April 2021	16 August 2021	Current
	57	56	52	64 with more due to start shortly

- 2. How many ICU nurses (head count) left and joined the DHB between May 5 and Aug 16 2021?**

Three ICU nurses left Waitematā DHB and two nurses started between 5 May and 16 August 2021. Since September, we have recruited a further 8.6 FTE, with interviews and recruitment ongoing.

3. How many ICU nurses (head count), ICU beds and ICU patients, ventilated and coronavirus-positive, were there when the request was made for more ICU nurses at or around September 1?

At or around 1 September, we had eight registered nurses and one senior nurse coordinator on-duty. We had 10 ICU/HDU (high dependency unit) beds open and six patients, four of which were assessed at ICU-level and two at HDU-level. We had one HDU COVID-19-positive patient and no COVID-ventilated patients.

4. What was the utilisation rate of ICU beds from August 16 2021 to August 24 2021 inclusive listed by day?

5. What was the ICU/HDU nurse ratio of nurses to patients daily from 1 August 2021 to 15 September 2021 listed by day?

We are providing a combined answer for questions 4 and 5.

Bed utilisation and ratio of nurses to patients from 1 August 2021 to 15 September 2021, is provided in **Attachment 1**.

This table shows a slight decline in bed occupancy over the course of the week commencing 16 August. This was due to a move to national Alert Level 4 on 17 August. Elective surgery procedures were deferred and planning was underway for the potential hospitalisation of Delta-positive patients.

The ICU/HDU complex at North Shore Hospital currently has 14 physical bed spaces. There are no designated ICU/HDU beds at Waitakere Hospital. We are funded and staffed to utilise 10 beds. Recognising the Intensive Care Society and New Zealand Nursing Organisation (NZNO) standards, we use our nursing team flexibly to open as many beds as possible. Therefore, our current staffing of eight RNs on a shift with a senior nurse coordinating, would dictate, at best, six ICU-level patients with a further four HDU-level patients.

As noted above, we follow the Intensive Care Society and Critical Care Nursing Sections minimum standards of one-to-one nursing care for all ICU-designated patients and one-to-two nursing care for all HDU-designated patients. We always maintain appropriate staffing for the patients within the ICU/HDU complex.

Occupancy of near, or more than, 100% is more likely during the winter months. However, these temporary peaks can be covered by managing staffing levels. Occupancy rates can also appear to rise where a bed is used by two patients on a shift; i.e. a patient is transferred to a ward and the bed is filled straight away. The ICU database will count this as two patients being in that bed on that shift.

Other reasons for occasional higher occupancy rates include:

- additional beds being used when an emergency patient is admitted while we await transfer of another patient to a ward bed or to another service or hospital
- if someone passes away, we may admit a patient into another physical bed space in the unit while arrangements are made with the family of the deceased.

6. Copies of any communications to and from the DHB with government officials or other DHBs with concerns or requests around ICU nurses from 1 May 2020 to 24 September 2021.

Please note that most of the attachments provided reflect a certain point-in-time when planning was in its early stages. Staffing and training issues have been addressed and, since the first Alert Level 4

lockdown, there has been significant work carried out by Waitematā DHB in our hospitals in preparation for a possible influx of patients.

Correspondence with government officials regarding North Shore Hospital’s ICU nursing workforce has been directly with the Ministry of Health as follows:

- **Attachment 2** – Email: FW ICU workforce capacity, 5 May 2020
- **Attachment 3 & 3a** – Email and attachment: Write-up from meeting on ICU capacity, 12 May 2020
- **Attachments 4, 4a & 4b** – Email and attachments: ICU Funding, 28 July 2020
- **Attachments 5 & 5a** – Email and attachment: Summary of key themes from DHB discussions on surging the ICU workforce, 7 August 2020
- **Attachment 6** – Email: FW: ICU capacity and capability, 18 August 2020
- **Attachments 7, 7a & 7b** – Email and attachments: ICU Funding – Amendment, 13 November 2020.

Regarding your request for copies of any communications to and from the DHB with other DHBs with concerns or requests around ICU nurses, we are refusing this aspect of your request under section 18(f) of the Official Information Act due to substantial collation and research. As part of our ongoing management of the COVID-19 pandemic, dozens of our staff in clinical and management roles are in contact with the other metro Auckland DHBs (Auckland and Counties Manukau) multiple times-a-day to monitor ICU capacity and nursing levels.

To provide the information you are seeking would take frontline staff away from their work and prejudice our ability to provide core services at a time when staff are concentrated on measures to manage the current COVID-19 Delta outbreak in the region.

We have considered whether charging, employing a contractor or extending the timeframe for responding to this aspect of your request would assist us in managing this work and have concluded it would not. We have, therefore, determined to refuse this element of your request under Section 18(f) of the Official Information Act due to substantial collation and research.

7. How many negative pressure isolation rooms were there at 13 May 2020, 1 April 2021 and 16 August 2021?

- 13 May 2020 – 17 rooms: 12 North Shore Hospital, five Waitakere Hospital
- 1 April 2021 – as above
- 16 August 2021 – as above
- an additional two negative pressure rooms will be added to ICU/HDU by the end of November
- across North Shore and Waitakere Hospitals, we have up to 37 negative pressure beds available, with the ability to flex-up.

8. What was the utilisation rate of negative pressure isolation rooms from August 16 2021 to the 15 Sept 2021 listed by day?

Waitematā DHB negative pressure isolation rooms daily utilisation rate from August 16 2021 to the 15 Sept 2021							
16/08/2021	29%	24/08/2021	41%	01/09/2021	47%	09/09/2021	53%
17/08/2021	35%	25/08/2021	35%	02/09/2021	41%	10/09/2021	53%
18/08/2021	41%	26/08/2021	41%	03/09/2021	41%	11/09/2021	53%
19/08/2021	47%	27/08/2021	47%	04/09/2021	47%	12/09/2021	47%
20/08/2021	53%	28/08/2021	59%	05/09/2021	47%	13/09/2021	47%
21/08/2021	29%	29/08/2021	47%	06/09/2021	53%	14/09/2021	41%

22/08/2021	47%	30/08/2021	59%	07/09/2021	53%	15/09/2021	41%
23/08/2021	47%	31/08/2021	59%	08/09/2021	53%		

9. Copies of any communications to and from the DHB with government officials or other DHBs with concerns or requests around negative pressure isolation rooms including the addition of any further rooms during the recent outbreak from 1 May 2020 to 24 September.

Waitemata DHB's business case for our Tōtara Haumarū project (formerly known as the Elective Capacity and Inpatient Beds (ECIB) project) was approved by the government's Capital Investment Committee (CIC) in March 2019.

Since then, the only notable change in the single-stage business case (SSBC) is COVID-19, which has emphasised the need to build adaptable facilities to support epidemic resilience. This has led to some design changes to the facility to allow for an increase in the number of negative pressure rooms in the wards, from five (in the original design) to 10 (eight of which will be fitted out as part of the initial build).

In relation to this, we attach two emails to the Ministry of Health, as follows:

Attachment 8 – Email: Draft Agenda for Ministry of Health Waitematā DHB meeting, 24 June 2021

- parts of the email which are outside of the scope of your request have been redacted
- names of administrative staff have been redacted under section 9(2)(a) of the Official Information Act, to protect their privacy.

Regarding your request for copies of any communications to and from the DHB with other DHBs with concerns or requests around negative pressure isolation rooms, we are refusing this aspect of your request under section 18(f) of the Official Information Act due to substantial collation and research. As part of our ongoing management of the COVID-19 pandemic, dozens of our staff in clinical and management roles are in contact with the other metro Auckland DHBs (Auckland and Counties Manukau) multiple times a day to monitor ICU capacity and nursing levels.

To provide the information you are seeking would take frontline staff away from their work and prejudice our ability to provide core services, at a time when staff are concentrated on managing the current COVID-19 Delta outbreak in the region.

We have considered whether charging, employing a contractor or extending the timeframe for responding to this aspect of your request would assist us in managing this work and have concluded it would not. We have, therefore, determined to refuse this element of your request under Section 18(f) of the Official Information Act due to substantial collation and research.

10. Copies of patient visitor policies from August 15 to September 15 2021, specifically and changes to policy during the recent outbreak

We have provided the most-recent versions of our patient visitor policies, as follows:

Attachment 9 - COVID-19 - Visitor Guidance - Level 1 or Zero

Attachment 10 - COVID-19 - Visitor Guidance - Level 2 – reviewed, no changes made.

Attachment 11 - COVID-19 - Visitor Guidance - Level 3

Attachment 12 - COVID-19 - Visitor Guidance - Level 4

Please note that these policies are living documents, regularly reviewed and subject to ongoing updates as required. During the current Delta outbreak, changes to policies have been made relating to COVID-19 screening in-line with national Ministry of Health guidelines and advice and the metro

Auckland DHBs' (Auckland, Counties Manukau and Waitematā) Clinical Technical Advisory Group (CTAG) recommendations.

Changes to the Level 4 policy included slight amendments to the Maternity unit visiting requirements.

You have the right to seek an investigation and review by the Ombudsman of the decisions made 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 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

A large black rectangular redaction box covering the signature of the Executive Director.


Executive Director Hospital Services
Waitematā District Health Board