

DHB Board Office

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22 March 2022



Dear

Re: OIA request - Staff absences due to COVID-19

Thank you for your Official Information Act request received 28 February 2022 seeking information from Waitematā District Health Board (DHB) about the following:

- 1. How many staff are currently off for COVID-19-related reasons e.g. have COVID-19 or are isolating because of COVID-19 contacts?
- 2. And what is the policy for frontline staff to return to work if they have or have had COVID-19?

On 1 March, you advised the following clarifications in relation to the above questions:

- I'm particularly keen on the number of staff not at work because of COVID-19 across
 the DHB but should have asked yesterday if you could please break that down into
 clinical and non-clinical.
- 2. And also about the policy for them to return to work are you at the point yet where COVID-19 positive but asymptomatic frontline staff can return to work?

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. How many staff are currently off for COVID-19-related reasons – e.g. have COVID-19 or are isolating because of COVID-19 contacts? I'm particularly keen on the number of staff not at work because of COVID-19 across the DHB - could please break that down into clinical and non-clinical?

As COVID-19 began to surge in the community, it was to be expected that DHB staff would also be affected, either through contracting the virus or caring for a dependent with COVID-19.

The number of staff absent from work due to a positive COVID-19 result is changing daily as some staff end their isolation period and return to work and new cases are reported.

The following figures are taken from our payroll system on 4 March 2022. Since that time, the number of community cases in Auckland has peaked and are now showing signs of easing, which should also be expected to influence staff absence numbers.

Due to shift work and rotating rosters, the 4 March data we are providing represents staff who were scheduled to work that day but were absent due to COVID-19-related reasons.

There are limitations in providing real-time data as the payroll system does not update daily and is reliant on staff and managers entering accurate coding. Updates typically occur at the end of each pay cycle.

It should be noted that each division within our hospital services has a clear picture of staff absences and roles that must be covered each day and these are managed on a service-by-service basis, based on the clinical of needs of patients in our care.

Numbers for resident medical officers (RMOs) and senior medical officers (SMOs) are provided in a separate table. Due to the complex nature of rotations, rosters and separate payroll systems for each of these groups, this information is updated to our whole-of-staff payroll system periodically and does not provide the same level of detail as that available for other staff.

The total figures provided below show that 265 employees were absent from work for COVID-19-related reasons out of a total workforce of more than 8,900. Of these, 78 were able to work from home (WFH). This category may include staff who were either caring for a household contact who had tested positive or, if COVID-19-positive themselves, had experienced only mild illness and were able to work from home or have a permanent arrangement with their manager to WFH throughout the pandemic, so were not 'off sick'. The 187 employees who were unable to work for COVID-19-related reasons represents 2.1% of our workforce.

Table 1: Waitematā DHB staff, excluding RMOs and SMOs, who have tested positive to COVID-19 or are caring for a dependent with COVID-19 as at 4 March 2022

Category	COVID-19-positive - symptomatic	In isolation*	Working from home**
Nursing	81	32	14
Allied Health	31	10	22
Support	4	7	2
Admin/management	12	6	40

^{*}Asymptomatic staff who have tested positive or are experiencing mild illness; may include staff who are caring for household contacts who have tested positive.

^{**}May include staff who have a permanent arrangement to WFH due to the pandemic.

Table 2: RMOs and SMOs who have tested positive to COVID-19 or are caring for a dependent with COVID-19 as at 25 February 2022

Category	Number of employees
COVID-19-positive	2
Dependent(s) with COVID-19	2

2. And what is the policy for frontline staff to return to work if they have or have had COVID-19? And also about the policy for them to return to work - are you at the point yet where COVID-19 positive but asymptomatic frontline staff can return to work?

Waitematā DHB closely follows national protocols set down by the Ministry of Health, including those governing staff returning to work after a COVID-19 infection. Any staff who were COVID-19-positive but asymptomatic would only be able to return to work in compliance with the requirements set out by the Ministry of Health.

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 Finance, People and Planning

Waitematā District Health Board