

25 August 2021

Auckland DHB Chief Executive's Office

Level 12 Building 1 Auckland City Hospital PO Box 92189 Victoria Street West Auckland 1142

Ph: (09) 630-9943 ext: 22342 Email: <u>ailsac@adhb.govt.nz</u>



Re: Official Information Act request – Neonatal and paediatric capacity in winter

I refer to your Official Information Act request dated 1 July 2021 requesting the following information:

I have done a story today about neonatal and paediatric capacity at Middlemore so am trying to find out the situation in the other major DHBs.

Can you please provide the following information?

- 1. How many babies have been in your NICU in the past four weeks and how does that compare to capacity? E.g., have you been at 98 percent full, 110 percent etc.
- 2. How many babies have been in your general neonatal ward in the same period and how does that compare to capacity? You further clarified that this question was not regarding babies on postnatal wards but those in a specialist or dedicated unit or ward for sick babies other than NICU (which is covered in question 1).
- 3. How many children have been in your paediatric ward in the past four weeks and how does that compare with capacity?
- 4. Do you have enough staff for these areas or are there currently vacancies? If so, please specify.
- 5. Can you please outline any challenges to delivering care that you may be facing in the neonatal or paediatric areas?

RESPONSE

1. How many babies have been in your NICU in the past four weeks and how does that compare to capacity? E.g., have you been at 98 percent full, 110 percent etc.

The Neonatal Intensive Care Unit (NICU) at Starship Children's Hospital provides care and services for the wider Auckland area (central, west and north). Unlike other NICUs, our facilities are also offered nationally when needed. Starship's NICU is the referral centre for babies from throughout New Zealand who also need the specialist care that Starship provides, for example cardiology and heart surgery, specialist paediatric and ENT surgery, or metabolic services.

We currently have 40 resourced beds in NICU. We are able to flex up and increase the number of resourced beds for short periods of time to manage increased demand.

The average number of babies in NICU in the past four weeks (14 June to 11 July 2021) was:

- 43, with 106% occupancy at midday; and
- 42 with 106% occupancy at midnight.
- 2. How many babies have been in your general neonatal ward in the same period and how does that compare to capacity?

Starship does not have a general neonatal ward. Babies who require hospital-level care at Starship, who are not in NICU, are cared for on a paediatric ward or in the Paediatric Intensive Care Unit (PICU). Data on our paediatric wards and PICU is provided in answer 3.

3. How many children have been in your paediatric ward in the past four weeks and how does that compare with capacity?

The average number of children in Starship's seven general paediatric and specialty wards (excluding our paediatric intensive care unit) in the past four weeks (14 June to 11 July 2021) was:

- 143, with 94% occupancy at midday; and
- 138, with 90% occupancy at midnight.

The average number of children in Starship's seven general paediatric and specialty wards and paediatric intensive care unit in the past four weeks (14 June to 11 July 2021) was:

- 163, with 95% occupancy at midday; and
- 158, with 92% occupancy at midnight.
- 4. Do you have enough staff for these areas or are there currently vacancies? If so, please specify.

Auckland DHB has a higher than usual number of Nursing and Healthcare Assistant vacancies. The DHB has also been impacted in recent months with staff 'winter' sickness. We currently have approximately 32 FTE vacancies across our general paediatric and specialty wards and 12 FTE vacancies in our NICU. This reflects health workforce shortages that exist across New Zealand.

We employ a range of measures to ensure safe staffing levels. This includes for example: redeploying staff, postponing planned care where safely possible and modifying patient flow. We have also introduced additional measures to recruit staff and develop our graduate workforce.

5. Can you please outline any challenges to delivering care that you may be facing in the neonatal or paediatric areas?

Starship saw high volumes of acute presentations of children to our emergency department in July, due to the unusually large spike in RSV cases and other winter illness. This led to extended wait times at our Emergency Department during surge periods.

A significant number of children were severely ill with RSV and required intensive care in PICU, over and above the baseline high occupancy. As with NICU, we have the ability to flex up the number of PICU beds for short periods of time to manage these situations.

Starship has seen also high demand for neonatal intensive care beds within the northern region resulting in sustained, very high occupancy within our Neonatal Intensive Care Unit (NICU). In response to the high demand, we are looking at long-term options for managing the forecast demand for NICU cots in the next 5-10 years.

More generally, high volumes of children requiring acute admission to Starship impacts on bed availability which means it is sometimes necessary to postpone admissions for elective surgery and appointments.

You are entitled to seek a review of the response by the Ombudsman under section 28(3) of the Official Information Act. Information about how to make a complaint is available at www.ombudsman.parliament.nz or freephone 0800 802 602.

Please note that this response, or an edited version of this response, may be published on the Auckland DHB website.

Yours faithfully

Ailsa Claire, OBE

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Chief Executive of Te Toka Tumai (Auckland District Health Board)