



# *West Coast District Health Board*

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## *Te Poari Hauora a Rohe o Tai Poutini*

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9(2)(a)

### **RE Official Information Act request WCDHB 9349**

I refer to your email dated 13 September 2019 requesting the following information under the Official Information Act from West Coast DHB following a Stuff article stating that Wellington Regional Hospital is too small for population: Specifically:

#### **1. How many beds does the current Greymouth Hospital have?**

Excluding the acute mental health beds in Manaakitanga ward and the age residential care beds at Kahurangi at Grey Base Hospital – which are remaining where they are and not part of the upcoming move into the new Te Nikau Grey Base Hospital facility – the current bed configuration of remaining beds usually resourced for use is made up as follows:

- surgical beds – 17
- medical beds – 17
- critical care unit – 4
- paediatrics - 4
- maternity – 5
- emergency (not used for formal admissions) - 6

These numbers above exclude chairs used in areas such as post-surgical recovery, infusion and chemotherapy services, and the like.

#### **2. How many does the new one have?**

The new facility will be operating in a different, more flexible model of care than is able to be provided within the confines of the physical ward space configuration of the current hospital facility – so is not directly comparable in terms of current bed utilisation now and the way the use of beds will be operated going forward. This is outlined in more detail in our answer to question 4 below. These factors noted - and again excluding the Manaakitanga acute mental health and Kahurangi age residential care beds which are not changing as part of the upcoming move - the bed configuration to be deployed in the new Te Nikau Grey Base Hospital facilities is made up as follows:

- 32 beds in the General Ward
- 4 beds in Critical Care Unit

- 2 paediatric beds ( - noting that paediatrics gain additional beds by utilising the acute medical assessment beds which are collocated adjacent to paediatrics to allow capacity to increase in response to increased demand).
- 6 maternity (- excluding 2 birthing rooms with birthing pools)
- 8 emergency department beds
- 4 acute medical observation beds.

There will also be four beds in the transitional care units on site, supporting part of the new way future care will be delivered. Additionally, urgent care services will be provided after hours for primary care presentations that previously would have been seen in the emergency department thus reducing the after hours demand on emergency department beds and also providing an avenue for people requiring out of hours primary care visit to be seen in the right place at the right time.

As in question 1 above, this list above does not include patient chairs that will be used in day service treatment areas, such as the likes of the infusion and chemotherapy service.

**3. On its busiest night over winter, how many beds were occupied?**

The busiest night overall during winter months saw 72 people in Grey Base hospital, including 24 within the mental health and age residential care service beds. Use of the medical and surgical beds was flexed in this period to help cover acute demand on this night, with some temporary overflow into other wards where this was clinically safe and appropriate.

**4. Is the new hospital large enough?**

The new 8500 square metre facility includes a mix of inpatient beds (as above), three operating theatres, radiology, laboratory services and a new health centre to provide primary care and outpatient services. Clinical services include urgent care, a 24/7 Emergency Department, critical care unit, paediatric and maternity services as well as planned and acute medical and surgical services and older persons' health.

The design enables delivery of the agreed West Coast health system model of care which the West Coast DHB has been progressing. It also means more flexible ways of working to deliver integrated health services in an efficient and sustainable way. The move to our new facility is more than simply providing health care in a new location; it is a chance to redefine our entire patient experience with all that a new facility can offer.

Staff are also anticipating maximising the opportunities the new facility will offer including the ability to deliver clinical services utilising new work spaces, new equipment and information technology. For example, a new general X-ray machine, sterilising machines, theatre equipment, examination lights as well as a new phone system, security system, nurse call system and Wi-Fi should all act to improve quality and efficiency for both the staff and enhance the patient experience.

I trust that this satisfies your interest in this matter.

Please note that this response, or an edited version of this response, may be published on the West Coast DHB website after your receipt of this response.

Yours sincerely



Carolyn Gullery  
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Planning, Funding & Decision Support