

Trust Board 24 <sup>th</sup> September 2014									
Safe Staffing Report	Paper No								
Submitted by: Liz Morgan Chief Nurse and Families Champion									
Aims / summary	rust had gofo nurse stoffing levels on our in								

This paper provides assurance that the Trust has safe nurse staffing levels on our inpatient wards and systems in place to manage the demand for nursing staff. In order to provide greater transparency the report also includes nurse quality measures, and details of ward safe staffing reports. The paper includes an overview of vacancies and nurse recruitment.

#### Action required from the meeting

The Board is asked to note:

- The content of the report and be assured that appropriate information is being provided to meet the national and local requirements.
- The information on safe staffing and the impact on quality of care.
- To note the key challenges around recruitment and the actions being taken.

Contribution to the delivery of NHS Foundation Trust strategies and plans Safe levels of nurse staffing are essential to the delivery of safe patient care and experience.

Compliance with How to ensure the right people, with the right skills, are in the right place at the right time – A guide to nursing, midwifery and care staffing and capability' (NHS England, Nov 2013) and the 'Hard Truths Commitments Regarding the Publishing of Staffing Data' issued by the Care Quality Commission in March 2014.

#### Financial implications

Already incorporated into 14/15 Division budgets

#### Who needs to be told about any decision?

**Division Management Teams** 

Finance Department

# Who is responsible for implementing the proposals / project and anticipated timescales?

Chief Nurse; Assistant Chief Nurse - Workforce; Heads of Nursing

#### Who is accountable for the implementation of the proposal / project?

Chief Nurse; Division Management Teams

#### **GOSH NURSE SAFE STAFFING REPORT**

#### July and August 2014

#### 1. Introduction

1.1 This report on GOSH Safe Nurse Staffing contains information from the months of July and August 2104. This is the third report submitted to the Board and follows the previous format providing information on staff in post, staffing incidents reported, nurse vacancies and quality measures reported by exception. The full list of quality measures was presented to the June Trust Board.

#### 2. Context and Background.

- 2.1 The expectation is the Board 'take full responsibility for the care provided to patients and, as a key determinant of quality, take full and collective responsibility for nursing care capacity and capability'.
- 2.2 Hard Truths states "Boards must, at any point in time be able to demonstrate to their patients, carers and families, commissioners, the care Quality Commission, the NHS Development Authority or Monitor that robust systems and process are in place to assure themselves that the nursing and midwifery capacity and capability in their organisation is sufficient to deliver safe and effective care". To achieve this, the Board should receive a report every six months on staffing capacity and capability (provided May 2014).
- 2.3 In addition monthly update reports are required to be submitted to NHS England and Trust Board with the following information:
  - 1. The number of staff on duty the previous month compared to planned staffing levels
  - 2. The reasons for any gaps, highlighting those wards where this is a consistent feature and impacts on the quality of care, to include actions being taken to address issues.
  - 3. The impact on key quality and safety measures.
- 2.4 The Monthly report to Trust Board should cover all three points and be available on the Trust website. Trusts are also required to submit a monthly safe staffing return to NHS England, the July and August Unify returns are attached as Appendix 1 and 1a, this data is published on NHS choices website

#### 3. GOSH Ward Nurse Staffing Information for Trust Board

#### 3.1 Safe Staffing

- 3.1.1 Copy of UNIFY submissions for July and August are attached as Appendix 1 and 1a. The spread sheets contain:
  - Total monthly planned staff hours derived from HoN submitting an agreed safe staffing level for each of their wards.
  - Total monthly actual staff hours are taken from ROSTERPRO, includes registered and non registered staff dedicated to the ward area, this includes supervisory roles, staff working additional hours, CNS shifts, extra staff booked to cope with changes in patient dependency and acuity from the Nurse Bank. This may exceed 100% to meet the demands of increased dependency and acuity. Heads of Nursing comments regarding staffing numbers in 3.1.2 below.
  - Bed closure information is used to adjust the planned staffing levels.

#### 3.1.2 Commentary:

Heads of Nursing are asked to comment on scores of less than 90% or greater than 110%.

#### ICI - No unsafe shifts reported in July and August

Beds closed across ICI wards periodically, due to acute staff sickness and a small number of vacancies. Positive recruitment with staff going through pre-employment checks.

Staff have been moved within the division to areas of greatest clinical need.

#### Surgery - No unsafe shifts reported in July and August

Trained staff were moved to Peter Pan from other wards as required, to manage increase in patient dependency.

Sky Ward: 4 Beds closed due to vacancies planned reopening end of September. The ward has had 2 patients consistently requiring 1:1 nursing for a sustained period.

### **CCCR - No unsafe Shifts reported in July and August**

Badger- higher than normal levels of dependency and acuity requiring 1:1 nursing, (see 5.6) 4 HCAs in the recruitment pipeline. Gaps in skill mix following move to a new ward.

Flamingo (CICU) – have flexed above 17 funded beds up to 20 on occasions, extra staff required to meet increased workload.

NICU – increased sickness has required extra temporary staff 2 HCAs recruited, the unit has gone above the 8 funded beds at times.

HCAs being recruited for NICU and PICU.

#### MDTS - No unsafe shifts reported in Jul y and August

Kingfisher: waiting list initiative requiring extra staff over and above planned hours.

Rainforest Endocrine/Metabolic: low patient census on occasions therefore reduction in trained staff on nights.

Rainforest Gastro: HCA sickness and vacancy shifts backfilled with Bank Nurses.

Trained staff worked across both sides of Rainforest to ensure safe care.

### Neurosciences - No unsafe shifts reported in July and August

Mildred Creek Unit – levels of staff adjusted due to fluctuations in the required level of supervision of patients. Several specials requiring 1:1 Nursing. Night support worker vacancy filled by Bank nurses.

#### IPP - No unsafe shifts reported in July and August

Bumblebee – Increased acuity and dependency of patients requiring extra staff e.g. 1:1 care of tracheostomy patients

Butterfly – staff redeployed for whole or part of shift to meet patient needs and shortfalls in staffing. Low patient census on occasions therefore reduction in trained staff on nights.

- 3.1.3 No wards reported unsafe staffing. Staff were moved within divisions to maintain safe staffing levels.
- 3.1.4 The Clinical Site Practitioners report 5 occasions in July and 1 in August where staff were moved for part or a whole shift to maintain safe care. Two occasions relate to NICU.

#### 3.2 General Staffing Information

- 3.2.1 GOSH staff attended both the July RCN Recruitment Fair in Manchester and the September event in London. We will also be recruiting in Northern Ireland in October. A new pathway approach to recruiting adult nurses will commence this autumn, adult nurses will be recruited both to a ward/department and to the paediatric nurse conversion course, staff will be required to work on a GOSH ward for a period pre and post the conversion course. The autumn intake will commence the conversion course in September 2015.
- 3.2.2 96 Newly Qualified Nurses were successful at the summer assessment centres, over 70 have accepted job offers, commencing employment in early October, including 21 nurses commencing the newly qualified rotation programme.
- 3.2.3 Appendix 2 and 2a provide a staffing overview for July and August, the tables provide information on staff in post, vacancies and staff in the recruitment pipeline and includes bed closure information. 15 out of 22 in patient wards closed beds at various points during July and August with an average of 20 beds closed. This includes four beds closed on IPP for work and repairs, other closures are due to pending recruitment, short notice nurse sickness, increased patient dependency and acuity and potential infection risks. All Intensive care beds were available in August apart from 1 bed on 1 occasion. The bed managers will work on more accurate collection of closure information for future reports.
- 3.3.3 Registered and Non Registered vacancies are reported as 117 Whole Time Equivalents (WTE) in July increasing to 133 WTE in August , temporary nurses mainly from GOSH Nurse Bank employed on wards totalled 104 WTE, the net vacancy rate was therefore 13 WTE for July and 30 WTE for August. The average bed closures did not increase as a result of increased vacancies.
- 3.2.4 The recruitment pipeline is very healthy with 93 registered nurses in the pre-employment check process and 18 non registered staff totalling 111 WTE.
- 3.2.5 Paediatric Acuity and Nurse Dependency Assessments (PANDA) are recorded for each in patient twice in a 24 hour period, excluding those in Intensive Care. There have been several fundamental changes to the PANDA recording criteria implemented on September 1<sup>st</sup>, the changes are being monitored for a 3 month period, once the data is validated it will be included in Board Reports from December onwards. The hospital has a significant proportion of highly dependent patients, and patients requiring acute interventions that place them in the Ward Intensive Care and High Dependency categories, historically this has accounted for over 50% of our patients.

#### 4 Key Challenges

- 4.1.1 Induction and orientation of a large number of new starters in October.
- 4.1.2 More accurate reporting of Bed Closures and reasons.
- 4.1.3 Changes to PANDA recording criteria.

#### **Key Quality and Safety Measures and Information**

- 5.1 Hard Truths (Care Quality Commission, March 2014) states 'data alone cannot assure anyone that safe care is being delivered. However research demonstrates that staffing levels are linked to the safety of care and that fewer staff increases the risks of patient safety incidents occurring.' In order to assure the Board of safe staffing on wards the following nursing quality and patient experience information has been collated to demonstrate that the wards were safe during July and August 2014.
- 5.2 The following quality measures provide a base line report for Trust Board. A number are Key Performance Indicators (KPIs) which are regularly monitored, poor results are challenged and investigated through the Nursing quarterly performance reviews led by the Chief Nurse and Families Champion with each Divisional Nursing team.

#### 5.3 Infection control

	July 2014	August 2014
C Difficile	3	1
MRSA Bacteraemias	0	0
MSSA Bacteraemias	3	2
E Coli Bacteraemia	1	3
D & V	1 outbreak	1 (PICU/NICU Staff)
Carbopenamase resistance	1	1

5.3.1 All incidents are investigated via a route cause analysis and additional support put in place by the Infection Prevention and Control team. In addition those areas that experienced small outbreaks of infection are subject to comprehensive chlorine cleans.

#### 5.4 Pressure ulcers

	July 2014	August 2014
Grade 3	0	0
Grade 2	5	3

#### 5.5 **Deteriorating patient**

	July 2014	August 2014
Patient Emergency Calls	17	16

5.5.1 Although an increase in Emergency Calls compared with previous months, 9 patients in both July and August remained on the wards. No cardiac arrests were reported in July, 3 cardiac arrests were reported in August, 2 whilst undergoing procedures the 3<sup>rd</sup> on a ward.

#### 5.6 Numbers of safety incidents reported about inadequate nurse staffing levels

In July 2 Datix forms were received regarding staffing levels on Badger Ward, this ward
is experiencing high acuity and dependency levels. One report was received in August
for the same ward, these incidents are reported to the Heads of Nursing for investigation and resolution.

#### 5.7 Pals concerns raised by families

- 2 concerns in July raised about lack of beds on Puffin and Kingfisher Wards. No concerns raised in August.
- 5.7.1 PALS ensure that distressed families are supported and liase with clinical teams to ensure that issues raised are addressed and that those families who have been cancelled are provided with a new date for their admission.

#### 5.8 Complaints re safe staffing

No Complaints were received in July and August.

#### 5.9 Friends and family test (FFT) data

- Overall response rate for July was 23.61% rising to 26.56% for August. (Target is 15% progressing to 25% by end of March 2015)
- The FFT scored 63 in July rising to 75 in August (80 in June), in July the heat in older wards raised concerns.
- Families that were extremely likely to recommend their friends and family scored 66.4% in July rising to 74.9%, 30% and 24.7% respectively were likely to recommend the hospital.
- One respondent (0.4%) responded that they were unlikely to recommend the hospital to family and friends.

#### 6. Conclusion

6.1 This paper has provided Trust Board with a general overview and assurance that all wards were safely staffed during July and August, appropriate actions were taken when concerns were raised. We are required to ensure the validity of data by triangulating information from different sources, this has been key to compiling this report.

#### 7. Recommendations

- 7.1 Trust Board to note:
- 7.2 The content of the report and be assured that appropriate information is being provided to meet the national and local requirements.
- 7.3 The information on safe staffing and the impact on quality of care.
- 7.4 To note the key challenges around recruitment and the actions being taken.
- 7.5 The Board to receive a safe staffing report on a monthly basis.
- 7.6 The November Board report will include the 6 monthly review of Nurse establishments on In Patient wards.

#### Appendix 1: UNIFY Safe Staffing Submission July 2014

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Eagle Ward

Rainforest Ward

(Endo/Met)

Mildred Creak

Koala Ward

Sky Ward

361 - NEPHROLOGY

420 - PAEDIATRICS

711- CHILD and

DOLESCENT

110 - TRALIMA &

ORTHOPAEDICS

171 - PAEDIATRIC

PSYCHIATRY

GASTROENTEROLOGY

302 - ENDOCRINOLOGY

150 - NEUROSURGERY

421 - PAEDIATRIC

171 - PAFDIATRIC

101 - UROLOGY

NEUROLOGY

SURGERY

#### Fill rate indicator return Staffing: Nursing, midwifery and care staff RP4 Great Ormond Street Hospital For Children NHS Foundation Trust July\_2014-15 Please provide the URL to the page on your trust website where your staffing information is available http://www.gosh.nhs.uk/about-us/our-corporate-information/publications-and-reports/safe-nurse-staffing-report Day Night Registered Registered midwives/nurses Hospital Site Details Main 2 Specialties on each ward Care Staff Care Staff Site code \*The Si Ward name rate - care registered code is Total Total Total Total Total staff (%) staff (%) automatically onthly monthly monthly monthly Hospital Site name Specialty 1 es (%) es (%) pulated when actual stat nned st ctual sta anned sta actual sta Validation alerts (see Site name is hours hours control panel) 149.4% 57.7% 122.1% 7.2% Badger Ward 1795 299 172.5 1496 1826.9 21.6 Great Ormond Street Hospital Central Lond MEDICINE 70 - CARDIOTHORACIC 321 - PAEDIATRIC RP401 Bear Ward 2818 3134.75 613 557.15 2818 2593.45 352 524 111.2% 90.9% 92.0% 148.9% URGERY ARDIOLOGY 192 - CRITICAL CARE RP401 356 Flamingo Ward 299 89.5% MEDICINE 340 - RESPIRATORY 341 443.75 623.7 103.4% 130.1% 91.5% 108.0% MEDICINE Neonatal Intensive Care RP401 2821 3682.25 0 0 3075.1 0 130.5% #DIV/0! 124.6% #DIV/0! MEDICINE eat Ormond Street Hospital Central Lor 92 - CRITICAL CARE Paediatric Intensive Care 447.8 352 352 107.4% RP401 6444.2 5999 5160.1 205.2 127.2% 86.0% 58.3% Unit MEDICINE ireat Ormond Street Hospital Central Lo 70 - MEDICAL RP401 823 - HAEMATOLOGY 2442 2272.95 315 356.5 2208 1581 315 314.35 93.1% 113.2% 71.6% 99.8% Flenhant Ward ONCOLOGY Freat Ormond Street Hospital Central Lond 313 - CLINICAL 303 - CLINICAL RP401 Fox Ward IMMUNOLOGY and 1664 1663 289 264.5 1626 1415.35 289 151.9 99.9% 91.5% 87.0% 52.6% HAEMATOLOGY ALLERGY 370 - MEDICAL 303 - CLINICAL Lion Ward 2052 1913.1 304 333.5 1522 1356 304 210.8 93.2% 109.7% 89.1% 69.3% ireat Ormond Street Hospital Central Lon ONCOLOGY HAEMATOLOGY RP401 Great Ormond Street Hospital Central Londo Penguin Ward 330 - DERMATOLOGY 410 - RHEUMATOLOGY 1242 1301.75 356 570.58 713 659.2 356 309.75 104.8% 160.3% 92.5% 87.0% 313 - CLINICAL 350 - INFECTIOUS RP401 Robin Ward MMUNOLOGY and 1455 1459.35 306 423.25 1415 1205.42 306 322.3 100.3% 138.3% 85.2% 105.3% DISEASES Great Ormond Street Hospital Central Lond ALLERGY 71 - PAEDIATRIC RP401 420 - PAFDIATRICS 339 598 407.3 110.7% 176.4% 108.4% 60.0% Bumblebee Ward 2376 2630.15 2037 2208.4 679 ireat Ormond Street Hospital Central Lone RP401 420 - PAEDIATRICS 2403 2847 713 506.5 2139 1645.9 356 239.7 118.5% 71.0% 76.9% 67.3% Butterfly Ward eat Ormond Street Hospital Central Lon

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91.1%

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## Appendix 1a: UNIFY Safe Staffing Submission August 2014

	Great Ormond Streetst_2014-15	et Hospital For Children NHS Founda	ation Trust	Staffing:	Fill rate ir Nursing, m				e staf	f							
			Please provide the URL to	the page on your trust we	bsite where your staffing i	information is	available					=					
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	Но	ospital Site Details		Main 2 Special	ties on each ward		istered /es/nurses	Care	Care Staff		stered s/nurses	Care	Staff	Average fill		Average fill	
Validation alerts (see	Site code *The Site code is automatically populated when a Site name is selected	Hospital Site name	Ward name	Specialty 1	Specialty 2	Total monthly planned staf hours	Total monthly ff actual staff hours	Total monthly planned staff hours	Total monthly actual staff hours	Total monthly planned staff hours	Total monthly actual staff hours	Total monthly planned staff hours	Total monthly actual staff hours	rate - registered nurses/midwiv es (%)	Average fill rate - care staff (%)	rate - registered nurses/midwiv es (%)	Average fill rate - care staff (%)
control panel)	RP401	Great Ormond Street Hospital Central Londo	Badger Ward	340 - RESPIRATORY MEDICINE		1744	2318.8	290	207	1453	2025.6	290	99.3	133.0%	71.4%	139.4%	34.2%
	RP401	Great Ormond Street Hospital Central Londo	Bear Ward	170 - CARDIOTHORACIC SURGERY	321 - PAEDIATRIC CARDIOLOGY	2852	2963.78	598	614.1	2852	2738.75	356	328.9	103.9%	102.7%	96.0%	92.4%
	RP401		Flamingo Ward	192 - CRITICAL CARE MEDICINE	CARDIOLOGI	5589	7289.1	356	299	5347	7045.88	184	151.2	130.4%	84.0%	131.8%	82.2%
	RP401	Great Ormond Street Hospital Central Londo	Miffy Ward (TCU)	340 - RESPIRATORY		705	719.75	352	381.5	705	590.6	352	344.6	102.1%	108.4%	83.8%	97.9%
	RP401	Great Ormond Street Hospital Central Londo	Neonatal Intensive Care	MEDICINE 192 - CRITICAL CARE		2834	3473.97			2479	3282.3			122.6%		132.4%	
	RP401	Great Ormond Street Hospital Central Londo	Unit Paediatric Intensive Care	MEDICINE 192 - CRITICAL CARE		6060	6179.5	356	276	6060	5288.35	356	151.2	102.0%	77.5%	87.3%	42.5%
		Great Ormond Street Hospital Central Londo	Unit	MEDICINE 370 - MEDICAL		+											
	RP401	Great Ormond Street Hospital Central Londo	Elephant Ward	ONCOLOGY	823 - HAEMATOLOGY 313 - CLINICAL	2463	2259.95	320	384.05	2245	1581.4	320	412.2	91.8%	120.0%	70.4%	128.8%
	RP401	Great Ormond Street Hospital Central Londo	Fox Ward	303 - CLINICAL HAEMATOLOGY	IMMUNOLOGY and ALLERGY	1720	1610	303	157	1671	1123.9	303	86.4	93.6%	51.8%	67.3%	28.5%
	RP401	Great Ormond Street Hospital Central Londo	Lion Ward	370 - MEDICAL ONCOLOGY	303 - CLINICAL HAEMATOLOGY	2074	1791.5	310	289.5	1553	1249.4	310	143.2	86.4%	93.4%	80.5%	46.2%
	RP401	Great Ormond Street Hospital Central Londo  Great Ormond Street Hospital Central Londo	Penguin Ward Robin Ward	330 - DERMATOLOGY 350 - INFECTIOUS DISEASES	410 - RHEUMATOLOGY 313 - CLINICAL IMMUNOLOGY and ALLERGY	1196 1592	1121.7 1506.5	356 340	469.5 414.5	713 1537	659.2 1117	356 340	149.5 198.6	93.8%	131.9%	92.5%	42.0% 58.4%
	RP401	Great Ormond Street Hospital Central Londo	Bumblebee Ward	171 - PAEDIATRIC SURGERY	420 - PAEDIATRICS	2364	2478.5	337	563.5	2026	2059.45	675	390.2	104.8%	167.2%	101.7%	57.8%
	RP401	·	Butterfly Ward	370 - MEDICAL	420 - PAEDIATRICS	2043	2429	611	535.55	1835	1483.9	305	152.6	118.9%	87.7%	80.9%	50.0%
	RP401	Great Ormond Street Hospital Central Londo Great Ormond Street Hospital Central Londo	Eagle Ward	ONCOLOGY 361 - NEPHROLOGY		2265	2113.15	713	621	1426	1375.8	356	297.2	93.3%	87.1%	96.5%	83.5%
	RP401	Great Ormond Street Hospital Central Londo	Kingfisher Ward	420 - PAEDIATRICS		1495	1488.85	897	552	294	327.45			99.6%	61.5%	111.4%	
	RP401	Great Ormond Street Hospital Central Londo	Rainforest Ward (Gastro) Rainforest Ward	GASTROENTEROLOGY		699	978.88	699	272	699	650.15	699	169.95	140.0%	38.9%	93.0%	24.3%
	RP401	Great Ormond Street Hospital Central Londo	(Endo/Met)	302 - ENDOCRINOLOGY 711- CHILD and		1056	1078.6	704	329.25	1056	786.7	352	345.3	102.1%	46.8%	74.5%	98.1%
	RP401	Great Ormond Street Hospital Central Londo	Mildred Creak	ADOLESCENT PSYCHIATRY		839	1236.8	713	396	356	398.95	540	508.7	147.4%	55.5%	112.1%	94.2%
	RP401	Great Ormond Street Hospital Central Londo	Koala Ward	150 - NEUROSURGERY	421 - PAEDIATRIC NEUROLOGY	2624	2674.75	314	416	2989	2481.7		11.25	101.9%	132.5%	83.0%	
	RP401	Great Ormond Street Hospital Central Londo	Peter Pan Ward	120 - ENT	160 - PLASTIC SURGERY	1523	1348.5	586	425.92	1410	1189.8		11.5	88.5%	72.7%	84.4%	
	RP401	Great Ormond Street Hospital Central Londo	Sky Ward	110 - TRAUMA & ORTHOPAEDICS	171 - PAEDIATRIC SURGERY	1562	1934	550	767.5	1518	1584.15		11.5	123.8%	139.5%	104.4%	
	RP401	Great Ormond Street Hospital Central Londo	Squirrel Ward	171 - PAEDIATRIC SURGERY	101 - UROLOGY	2761	2632.17	661	736.5	2484	2334.2		11.5	95.3%	111.4%	94.0%	

Appendix 2: Staffing Overview - July 2014

			Regist	ered Nursing	gstaff	N	on Registere	d					Recruitment Pipeline					
Division	Ward	Established Bed Numbers	Proposed Funded Establishment	Staff in Post	Vacancies	Proposed Funded establishment	Staff in Post	Vacancies	Total Estabslishment	Total Vacancies	Bank Used	Net Vacant	Registered Starters	Non- registered Starters	Number of unsafe shifts	Average Bed Closures		
	Badger	13	32.5	33.6	-1.1	8.6	2.0	6.6	41.1	5.5	4.2	1.3	3.0	2	0	2.1		
	Bear	22	47.8	45.0	2.8	9.0	7.0	2.0	56.8	4.8	6.3	-1.5	5.0	2	0	0.3		
CCCR	Flamingo	17	119.0	111.0	8.0	13.1	3.0	10.1	132.1	18.1	16.8	1.3			0	0.0		
8	Miffy (TCU)	5	14.0	10.7	3.3	7.8	5.0	2.8	21.8	6.1	4.6	1.5	2.0		0	0.2		
	NICU	8	51.5	46.4	5.1	5.2	2.0	3.2	56.7	8.3	10.3	-2.0	2.0		0	0.1		
	PICU	13	86.0	91.3	-5.3	8.9	4.0	4.9	94.9	-0.4	7.5	-7.9			0	0.1		
	Elephant	17	35.0	30.2	4.8	5.0	5.1	-0.1	40.0	4.7	1.6	3.1			0	2.0		
Σ	Fox	10	32.2	25.8	6.4	4.0	4.0	0.0	36.2	6.4	2.8	3.6			0	1.9		
ICI-LM	Lion	14	31.0	28.2	2.8	4.0	5.0	-1.0	35.0	1.8	3.2	-1.4			0	2.0		
	Penguin	9	15.4	13.4	2.0	4.0	2.0	2.0	19.4	4.0	6.0	-2.0			0	0.0		
	Robin	10	27.0	24.3	2.7	4.0	3.4	0.6	31.0	3.3	1.7	1.6			0	1.4		
	Bumblebee	24	25.0	20.0	4.4	7.0	0.0	0.2	42.0	2.0	0.6	F 7			0	1.0		
lbb	Butterfly	21	35.0	30.9	4.1	7.8	8.0	-0.2	42.8	3.9	9.6	-5.7			0	1.0		
	butterny	18	37.3	28.9	8.4	9.3	9.0	0.3	46.6	8.7	5.3	3.4			0	0.0		
	Eagle	14	39.5	33.6	5.9	10.5	10.0	0.5	50.0	6.4	1.8	4.7	2.0		0	0.0		
MDTS	Kingfisher	16	18.2	13.9	4.3	6.3	6.0	0.3	24.5	4.6	0.9	3.7			0	0.0		
M	Rainforest Gastro	8	13.8	14.0	-0.2	5.2	4.0	1.2	19.0	1.0	3.3	-2.3			0	0.5		
	Rainforest Endo/Met	8	15.7	15.0	0.7	5.2	4.0	1.2	20.9	1.9	2.7	-0.8	1.0		0	0.0		
Neuro- scienc es	Mildred Creak	10	11.8	11.2	0.6	7.8	5.5	2.3	19.6	2.9	2.3	0.6			0	0.0		
Ne sci	Koala	24	45.9	43.5	2.4	5.2	5.2	0.0	51.1	2.4	5.1	-2.7			0	2.1		
>	Peter Pan	16	24.5	19.5	5.0	5.0	4.0	1.0	29.5	6.0	1.3	4.7	2.0		0	1.6		
Surgery	Sky	18	31.0	24.6	6.4	5.2	5.0	0.2	36.2	6.6	1.8	4.8			0	3.6		
Sul	Squirrel	22	43.6	35.4	8.2	7.0	5.0	2.0	50.6	10.2	5.1	5.1			0	1.9		
	TRUST TOTAL:	313	807.7	730.4	77.3	148.1	108.2	39.9	955.8	117.2	104.0	13.3	17.0	4.0	0.0	20.8		

Appendix 2a: Staffing Overview - August 2014

			Regist	ered Nursing	staff	No	on Registere	d					Recruitme	nt Pipeline		
Division	Ward	Established Bed Numbers	Proposed Funded Establishment	Staff in Post	Vacancies	Proposed Funded establishment	Staff in Post	Vacancies	Total Estabslishment	Total Vacancies	Bank Used	Net Vacant	Registered Starters	Non- registered Starters	Number of unsafe shifts	Average Bed Closures
	Badger	13	32.5	32.0	0.5	8.6	2.0	6.6	41.1	7.1	3.8	3.3	4.0	4	0	2.4
	Bear	22	47.8	41.1	6.7	9.0	6.0	3.0	56.8	9.7	7.3	2.4	6.0	1	0	0.0
CCCR	Flamingo	17	119.0	107.0	12.0	13.1	3.0	10.1	132.1	22.1	13.7	8.4	9.0		0	0.0
8	Miffy (TCU)	5	14.0	10.7	3.3	7.8	5.0	2.8	21.8	6.1	4.6	1.5	3.0		0	0.1
	NICU	8	51.5	45.4	6.1	5.2	0.0	5.2	56.7	11.3	12.8	-1.5	10.0	2	0	0.1
	PICU	13	86.0	90.4	-4.4	8.9	4.0	4.9	94.9	0.5	8.1	-7.6	6.0	3	0	0.0
	Elephant	17	35.0	32.2	2.8	5.0	5.1	-0.1	40.0	2.7	4.3	-1.6	9.0		0	1.7
Σ	Fox	10	32.2	26.6	5.6	4.0	4.0	0.0	36.2	5.6	2.6	3.0	4.0		0	1.5
ICI-LM	Lion	14	31.0	26.6	4.4	4.0	4.0	0.0	35.0	4.4	3.3	1.1	4.0		0	1.8
_	Penguin	9	15.4	11.5	3.9	4.0	1.0	3.0	19.4	6.9	4.8	2.1	3.0	2	0	0.0
	Robin	10	27.0	22.3	4.7	4.0	3.4	0.6	31.0	5.3	1.6	3.7	3.0		0	0.5
IPP	Bumblebee	21	35.0	29.9	5.1	7.8	9.0	-1.2	42.8	3.9	11.1	-7.2	6.0	1	0	1.1
_	Butterfly	18	37.3	30.0	7.3	9.3	7.3	2.0	46.6	9.3	4.2	5.1	4.0	1	0	2.6
	Eagle		20.5	22.6	F 0	40.5	400	0.5	50.0	6.4	2.4	4.2	2.0		0	2.2
S	Kingfisher	14	39.5	33.6	5.9	10.5	10.0	0.5	50.0	6.4	2.1	4.3	2.0		0	0.0
MDTS	Rainforest Gastro	16	18.2	13.9	4.3	6.3	6.0	0.3	24.5	4.6	1.3	3.3	1.0		0	0.0
	Rainforest Endo/Met	8	13.8	13.6	0.2	5.2	4.0	1.2	19.0	1.4	1.5	-0.1	1.0		0	0.2
	mainiorest Lituo, iviet	8	15.7	15.0	0.7	5.2	4.0	1.2	20.9	1.9	3.5	-1.6	1.0		0	0.1
4 S	Mildred Creak	10	11.8	12.5	-0.7	7.8	6.0	1.8	19.6	1.1	2.2	-1.1		1	0	0.0
Neuro- scienc es		24	45.9	43.8	2.1	5.2	5.0	0.2	51.1	2.3	3.1	-0.8	5.0	<del>-</del> -	0	2.8
				.5.5		J	5.0	Ŭ. <u>.</u>	51.1	2.0	5.1		5.5			
>_	Peter Pan	16	24.5	20.5	4.0	5.0	4.0	1.0	29.5	5.0	2.0	3.0	4.0		0	0.3
Surgery	Sky	18	31.0	24.0	7.0	5.2	4.0	1.2	36.2	8.2	1.9	6.3	6.0	1	0	4.1
Su	Squirrel	22	43.6	39.6	4.0	7.0	3.0	4.0	50.6	8.0	3.7	4.3	3.0	2	0	1.6
	TRUST TOTAL:	313	807.7	722.2	85.5	148.1	99.8	48.3	955.8	133.8	103.5	30.3	93.0	18.0	0.0	20.7