

Trust Board May 2016	
Safe Nurse Staffing Report for May 2016	Paper No
Submitted by: Juliette Greenwood Chief Nurse	
<p>Aims / summary This paper provides the required assurance that GOSH has safe nurse staffing levels across all in- patient ward areas and appropriate systems in place to manage the demand for nursing staff. In order to provide greater transparency the report also includes appropriate nurse quality measures and details of ward safe staffing reports. The paper includes a brief summary of nursing vacancies, nurse recruitment and this month contains specific information on nurse retention plans and initiatives.</p>	
<p>Action required from the meeting The Board is asked to note:</p> <ul style="list-style-type: none"> • 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. 	
<p>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.</p> <p><i>Compliance with <i>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</i> (NHS England, Nov 2013) and the <i>'Hard Truths Commitments Regarding the Publishing of Staffing Data'</i> issued by the Care Quality Commission in March 2014.</i></p>	
<p>Financial implications Already incorporated into 16/17 Division budgets</p>	
<p>Who needs to be told about any decision? Divisional Management Teams Finance Department</p>	
<p>Who is responsible for implementing the proposals / project and anticipated timescales? Chief Nurse; Assistant Chief Nurses, Head of Nursing</p>	
<p>Who is accountable for the implementation of the proposal / project? Chief Nurse; Divisional Management Teams</p>	

GOSH NURSE SAFE STAFFING REPORT

May 2016

1. Introduction

- 1.1 This report on GOSH Safe Nurse Staffing contains information from the month of May 2016. The report provides information on staff in post, safe staffing incidents, nurse vacancies and includes quality measures which are reported by exception.
- 1.2 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'.
- 1.3 Monthly nurse staffing updates are submitted to NHS England and the 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. GOSH Ward Nurse Staffing Information for Trust Board

2.1 Safe Staffing

2.1.1 The UNIFY Fill Rate Indicator for May is attached as Appendix 1. The spread sheet contains:

- Total monthly planned staff hours; the Divisional Assistant Chief Nurses and Head of Nursing provide this figure based on the agreed average safe staffing level for each of their wards. These figures are fixed i.e. do not alter month on month. Bed closure information is used to adjust the planned staffing levels. A short term change in acuity and dependency requiring more or fewer staff is not reflected in planned hours but in the actual hours.
- Total monthly actual staff hours worked; this information is taken from the electronic rostering system (RosterPro), and includes supervisory roles, staff working additional hours, CNS shifts, and extra staff booked to cope with changes in patient dependency and acuity from the Nurse Bank. Supernumerary shifts are excluded. In order to meet the fluctuations in acuity and dependency the number may exceed or be below 100%.
- Average fill rate of planned shifts. It must be noted that the presentation of data in this way is open to misinterpretation as the non-registered pool is small in comparison to the registered pool, therefore one HCA vacancy or extra shifts worked will have a disproportionate effect on the % level.

2.1.2 Commentary:

- Divisional Assistant Chief Nurses and IPP Head of Nursing are asked to comment on percentage scores of less than 90% or greater than 110%, and declare any unsafe staffing situations that have occurred during the month in question including actions taken at the time to rectify and make the situation safe.
- The overall Trust fill rate % for May (April) is:

RN Day	RN Night	HCA Day	HCA Night	Total Fill Rate
102.2% (106%)	91.0 (99%)	95.7% (107%)	86.0% (74%)	96.3% (95%)

Barrie – (MDTS/Neuro/Surgery) - No unsafe shifts reported in May

- Eagle – Acuity of complex transplant patients accounts for an increase above 10% tolerance for qualified staff. HCA below 10% tolerance due to long term sickness and a HCA on phased return from sickness.
- Kingfisher – Qualified nurses below 10% tolerance due to vacancies. 2WTE HCAs are on maternity leave. 1 vacancy now filled but is supernumerary whilst undertaking the care certificate course.
- Rainforest Gastro –HCAs below 10% tolerance due to one member of staff undertaking the Care Certificate course and one on unpaid leave.
- Rainforest Endo/Met – Qualified nurses below 10% due to sickness and staff vacancies, these posts have now been filled but the staff cannot do nights straight away as they are still required to complete their medication competency training. 1 HCA vacancy now filled but the member of staff is undertaking the care certificate course.
- 2 beds continue to be closed on Sky due to registered staff vacancies (see Appendix 2) and an increase in patient acuity.
- Staff were moved across the Division to maintain safe staffing levels and to maximise activity.

IPP – No unsafe shifts reported in May

- Bumblebee and Butterfly - continue to utilise HCAs to care for infants without resident parents and tracheostomy patients requiring 1:1 care. The variance with registered staff and bank staff is in a response to patient dependency.
- The increase in HCAs numbers is due to the provision of additional support for long term patients and recruitment of staff in preparation for the opening of the new Hedgehog ward.
- Work is also underway with the Trust Bank to recruit bank staff to undertake lines of work to support the opening of Hedgehog in August

West – (CCCR/ICI) - No unsafe shifts reported in May

- Higher fill rates were due to an increase in dependency of patients and increased patient activity across the division
- Fox and Robin - Lower fill rates were due to the wards being moved, staff sickness and staff being moved across the division to support patient activity.
- Robin – one bed closed for planned maintenance work.

2.1.3 The Clinical Site Practitioners (CSPs) report that no wards were declared unsafe during May; however 17 compared to 12 shifts in April are noted where wards reported being short of staff but safety was not compromised.

2.1 General Staffing Information

- 2.1 Appendix 2 – Ward Nurse Staffing overview for May. The table provides information on staff in post, vacancies and staff in the recruitment pipeline and includes bed closure information.
- 2.2 8 out of 23 inpatient wards closed beds at various points during May compared to 9 in April. An average of 3.4 beds were closed each day, this is a decrease from 6.7 bed closures in April. The main reasons for bed closures were due to vacancies on Sky and planned maintenance work on Robin.

- 2.3 For the inpatient wards, at 1st May 2016, the registered and non-registered vacancies totalled 115.4 96 WTE, an increase from 96 in April. This breaks down to: 97.4 (11.8%) registered nurse vacancies (72 in April); 18 (11.4% of total HCAs) HCA vacancies (23 in March). Temporary nurses, mainly from GOSH Nurse Bank, deployed on the wards totalled 102.7 WTE, the May position was therefore 12.8WTE net vacancies (-3.2 WTE in April and -10 WTE in March).

3 Vacancies and Recruitment

- 3.3 Staff attended recruitment fairs in Bedfordshire and Napier University (Edinburgh) this month, both were reviewed well by those attending. As with all the current and planned nurse recruitment events, the candidate's expressions of interest will be followed up, tracked and analysed against job applications received and their successful appointment.
- 3.4 Following the recruitment fair held in April, 176 Newly Qualified Nurses (NQNs) have been shortlisted and invited to attend assessments centre days in June and July. A total of 185 applicants were received, the majority of the 9 not invited to the assessment days were from overseas and will be reviewed separately.
- 3.5 10 Band 3's, have been successfully recruited at April's Assessment centre and pending pre-employment checks are due to start in June 2016.
- 3.6 27 either newly registered or experienced nurses are in the pipeline to start between June and July.
- 3.7 The 6 monthly nurse establishment reviews are planned to commence July 2016.
- 3.8 51% (50WTE) of RN vacancies in May are at band 6, this is an increase of 9 vacancies over the last month. This increase in leavers is currently being investigated.

4. Key Challenges

- Recruitment and retention of HCAs.
- Recruitment of Band 6 Nurses.
- Retention of Band 5 and 6 Nurses.
- Recruitment of staff to meet plans for growth in particular the opening of Hedgehog ward planned for August 2016.

5. Key Quality and Safety Measures and Information

- 5.1 Hard Truths Commitments Regarding the Publishing of Staffing Data (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 May 2016.
- 5.2 The following quality measures provide a base line report for the Board. A number are Key Performance Indicators (KPIs) that are regularly monitored, any poor results are reviewed, challenged and investigated through the Divisional Chief Nurses and their review processes.

5.3 Infection control

Numbers of C diff's	0
Number of MRSA bacteraemias	0
Number of MSSA bacteraemias	4
Number of E.coli bacteraemias	3
Number of outbreaks and whether any beds closed	1(no beds closed)
Carbapenemase-producing Enterobacteriaceae	1(confirmed) 2 (possible)
Hospital acquired enteric virus infections	16
Hospital acquired viral respiratory infections	19

5.4 Pressure ulcers

Grade 3	0	
Grade 2	5	CICU x 3 (2 x ETT – avoidable, 1 x Occiput - avoidable) PICU x 1 (1 x Ear – avoidable) NICU x 1 (1 x ETT - avoidable)

The number of pressures sores occurring in May is the same as seen in April. The new root cause analysis process is being used at present to investigate and implement action plans for all the above pressure ulcers.

5.5 Deteriorating patient

There were 16 2222 calls in May 2016 (6 in April). There were 0 cardiac arrests. There were 3 respiratory arrests, 1 of which may have been preventable, following a difficult tracheostomy tube change, it is reported that this was a well-managed event .

In addition there were 10 unplanned admissions to the Intensive care units; 2 x Barrie Division (1 Sky & 1 Rainforest Endo/Met); 6 x West Division (4 Bear, 1 Fox & 1 Robin); 2 x IPP (1 Bumblebee & 1 Butterfly).

5.6 Numbers of safety incidents reported about inadequate nurse staffing levels

There was 1 incident reported by staff regarding shortages of nurses, this occurred on a day shift on Flamingo ward (CICU). It had been agreed that two PICU nurses could be relocate to CICU for the night shift to cover short staffing, this agreement was later cancelled as PICU activity had increased. CICU had already agreed to go ahead with a transplant based on having the additional

nurses; however the transplant case was cancelled due to the donor organ not being viable. The nurses were sent back to PICU.

5.7 Pals concerns raised by families regarding nurse staffing – 1

There was 1 referral to Pals where an operation was cancelled due to lack of post-op bed availability. The Trust continues to operate at maximum capacity with increased pressures from RTT. It is unclear from the referral whether nursing staff numbers contributed to the concerns reported or if there was no bed capacity.

5.8 Complaints received regarding nurse safe staffing – 0

The Trust did not receive any complaints in regards to nurse safe staffing during May 2016.

5.9 Friends and family test (FFT) data

Overall response rate for May 2016 has increased to 27.52% (data extracted 07/06/2016) compared to 23.58% in April 2016. The target response rate has increased to 60%.

- The overall percentage to recommend score is 98.3% (data extracted 07/06/2016).
- Families that were extremely likely to recommend GOSH to their friends and family equalled 89.6% (740) and 8.7% (72) responded as likely to recommend compared with 89% (628) and 9.6% (68) in April 2016.
- For information, the following negative comments or suggestions regarding staffing issues/staff behaviour have been received for the following wards.

Response	Ward/Area	Comment related to response
Extremely Unlikely	Rainforest Gastro	While in isolation all nurses put aprons on and gloves on before entering the room. Not one doctor or consultant did, one did after being told by a nurse. My child has a bug that would easily be passed to others. There is a sign on the door and he also has a MDRO Alert! on notes.

- The following positive comments regarding outstanding performance regarding staff behaviour have been received for the following wards:

Response	Ward/Area	Comment related to response
Extremely Likely	Koala	The nurses on Koala work extremely hard and are always willing to offer up their time to discuss any issues we have. Their expertise and care is second to none – they are invaluable. I want to add also a thank you to (staff name) who works extremely hard. She has taken time out to come and discuss (patient name) care with me when I was unsure of his ICP results. We were very grateful. (name and contact number of parents provided)
Extremely Likely	Respiratory Sleep Unit	Here with my 5yr old daughter, staff were just amazing, we were beautifully looked after by (names of 3 staff) and Dr (name of Dr). My daughter was reassured and treated beautifully. Day staff (I didn't catch names) were so kind and helpful, the service was amazing, thank you!
Extremely Likely	Squirrel	From the very moment we arrived by ambulance (from another hospital in Oxfordshire) we received the most outstanding care. I had been told that my daughter required emergency major surgery and that her condition was very serious. However thanks to the decisive actions of (name of staff), her team and the ENT team, my daughter avoided surgery and is now well enough to go home. I cannot thank

		GOSH enough for what they have done. It is a very special place staffed by exceptional people.
Extremely Likely	Sky	Everything went exceptionally smoothly from arrival to discharge. All staff, polite, efficient and courteous and made my daughter feel at ease. When staff said they would return, they did and we were never kept waiting. Last admission here was 3 years ago and if anything service has improved. Very happy.

6. Conclusion

- 6.1 This paper seeks to provide the Board of Directors with the required overview and assurance that all wards were safely staffed against the Trust's determined safe staffing levels during May, and appropriate actions were taken when concerns were raised. All Trusts are required to ensure the validity of data by triangulating information from different sources prior to providing assurance reports to their Board of Directors, this has been key to compiling the report. Work is currently underway on a 5 year Recruitment and Retention strategy.

7. Recommendations - The Board of Directors are asked to note:

- 7.1 The content of the report and be assured that appropriate information is being provided to meet the national and local requirements.
- 7.2 The information on safe staffing and the impact on quality of care.
- 7.4 The on-going challenges in retaining and recruiting nurses and HCA's.

Appendix 1: UNIFY Safe Staffing Submission – May 2016

Only complete sites your organisation is accountable for				Day				Night				Day		Night		
Hospital Site Details		Ward name	Main 2 Specialities on each ward		Registered midwives/nurses		Care Staff		Registered midwives/nurses		Care Staff		Average fill rate - registered nurses/midwives (%)	Average fill rate - care staff (%)	Average fill rate - registered nurses/midwives (%)	Average fill rate - care staff (%)
Site code *The Site code is automatically populated when a Site name is selected	Hospital Site name		Speciality 1	Speciality 2	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	Total monthly planned staff hours	Total monthly actual staff hours				
RP401	GREAT ORMOND STREET HOSPITAL CENTRE	Badger Ward	340 - RESPIRATORY MEDICINE		2331	2625.85	347	287.5	2084	2053.6	347	226.8	112.6%	82.9%	98.5%	65.4%
RP401	GREAT ORMOND STREET HOSPITAL CENTRE	Bear Ward	170 - CARDIOTHORACIC SURGERY	321 - PAEDIATRIC CARDIOLOGY	2768	3218.3	591	414	2768	3010.3	346	314.6	116.3%	70.1%	108.8%	90.9%
RP401	GREAT ORMOND STREET HOSPITAL CENTRE	Flamingo Ward	192 - CRITICAL CARE MEDICINE		7026	7927.75	356	184	6624	6953.3	207	118.8	112.8%	51.7%	105.0%	57.4%
RP401	GREAT ORMOND STREET HOSPITAL CENTRE	Miffy Ward (TCU)	340 - RESPIRATORY MEDICINE		713	786.25	1069	871.5	713	572.8	713	680.8	110.3%	81.5%	80.3%	95.5%
RP401	GREAT ORMOND STREET HOSPITAL CENTRE	Neonatal Intensive Care Unit	192 - CRITICAL CARE MEDICINE		3208	3364.9	356	0	3208	3017.55	0	0	104.9%	0.0%	94.1%	-
RP401	GREAT ORMOND STREET HOSPITAL CENTRE	Paediatric Intensive Care Unit	192 - CRITICAL CARE MEDICINE		6060	6456.72	356	207	6060	5353.9	356	183.6	106.5%	58.1%	88.3%	51.6%
RP401	GREAT ORMOND STREET HOSPITAL CENTRE	Elephant Ward	370 - MEDICAL ONCOLOGY	823 - HAEMATOLOGY	1679	1734	356	350	1426	1341.7	356	303.1	103.3%	98.3%	94.1%	85.1%
RP401	GREAT ORMOND STREET HOSPITAL CENTRE	Fox Ward	303 - CLINICAL HAEMATOLOGY	313 - CLINICAL IMMUNOLOGY and ALLERGY	2123	1801.5	353	230.5	1975	1555.6	353	240.47	84.9%	65.3%	78.8%	68.1%
RP401	GREAT ORMOND STREET HOSPITAL CENTRE	Giraffe Ward	313 - CLINICAL IMMUNOLOGY and ALLERGY	350 - INFECTIOUS DISEASES	1069	1354.7	356	218.5	1069	873.1	356	164.8	126.7%	61.4%	81.7%	46.3%
RP401	GREAT ORMOND STREET HOSPITAL CENTRE	Lion Ward	370 - MEDICAL ONCOLOGY	303 - CLINICAL HAEMATOLOGY	1679	1621.45	356	379.5	1426	1069.6	356	393.4	96.6%	106.6%	75.0%	110.5%
RP401	GREAT ORMOND STREET HOSPITAL CENTRE	Penguin Ward	330 - DERMATOLOGY	410 - RHEUMATOLOGY	966	1187.78	356	642.18	713	646.15	356	207.3	123.0%	180.4%	90.6%	58.2%
RP401	GREAT ORMOND STREET HOSPITAL CENTRE	Robin Ward	350 - INFECTIOUS DISEASES	313 - CLINICAL IMMUNOLOGY and ALLERGY	2035	1503.8	356	563.5	1782	1115.9	356	577.7	73.9%	158.3%	62.6%	162.3%
RP401	GREAT ORMOND STREET HOSPITAL CENTRE	Bumblebee Ward	171 - PAEDIATRIC SURGERY	420 - PAEDIATRICS	2427	2460.1	346	954.5	2080	2241.35	693	875.3	101.4%	275.9%	107.8%	126.3%
RP401	GREAT ORMOND STREET HOSPITAL CENTRE	Butterfly Ward	370 - MEDICAL ONCOLOGY	420 - PAEDIATRICS	2848	2323.25	356	1070.5	2136	1658.2	356	472.8	81.6%	300.7%	77.6%	132.8%
RP401	GREAT ORMOND STREET HOSPITAL CENTRE	Eagle Ward	361 - NEPHROLOGY		2288	2837.32	713	725.5	1426	1270.6	356	277.7	124.0%	101.8%	89.1%	78.0%
RP401	GREAT ORMOND STREET HOSPITAL CENTRE	Kingfisher Ward	420 - PAEDIATRICS		1776	1479.64	914	484.05	331	348.4	0	66.2	83.3%	53.0%	105.3%	-
RP401	GREAT ORMOND STREET HOSPITAL CENTRE	Rainforest Ward (Gastro)	301 - GASTROENTEROLOGY		943	1100.1	696	333.5	696	725	696	222.3	116.7%	47.9%	104.2%	31.9%
RP401	GREAT ORMOND STREET HOSPITAL CENTRE	Rainforest Ward (Endo/Met)	302 - ENDOCRINOLOGY		1069	1088.5	713	253	1069	877.3	356	274.2	101.8%	35.5%	82.1%	77.0%
RP401	GREAT ORMOND STREET HOSPITAL CENTRE	Mildred Creak	711- CHILD and ADOLESCENT PSYCHIATRY		1116	1056.55	612	555.5	509	390.2	460	351.2	94.7%	90.8%	76.7%	76.3%
RP401	GREAT ORMOND STREET HOSPITAL CENTRE	Koala Ward	150 - NEUROSURGERY	421 - PAEDIATRIC NEUROLOGY	3318	3192.32	352	598.5	3227	2630.6	352	205.9	96.2%	170.0%	81.5%	58.5%
RP401	GREAT ORMOND STREET HOSPITAL CENTRE	Peter Pan Ward	120 - ENT	160 - PLASTIC SURGERY	1439	1211.25	556	460	1355	966.1	0	21.6	84.2%	82.7%	71.3%	-
RP401	GREAT ORMOND STREET HOSPITAL CENTRE	Sky Ward	110 - TRAUMA & ORTHOPAEDICS	171 - PAEDIATRIC SURGERY	1852	1721.8	648	824	1810	1547.3	0	11.5	93.0%	127.2%	85.5%	-
RP401	GREAT ORMOND STREET HOSPITAL CENTRE	Squirrel Ward	171 - PAEDIATRIC SURGERY	101 - UROLOGY	2796	2860.97	664	667	2518	2553.85	0	152.6	102.3%	100.5%	101.4%	-

Appendix 2: Overview of Ward Nurse Staffing – May 2016

Speciality	Ward	Registered Nursing staff				Non Registered				Recruitment Pipeline						
		Established Bed Numbers	Proposed Funded Establishment	Staff in Post	Vacancies	Proposed Funded establishment	Staff in Post	Vacancies	Total Establishment	Total Vacancies	Bank Used	Net Vacant	Registered Starters	Non-registered Starters	Number of unsafe shifts	Average Bed Closures
CardioRespiratory	Badger	15	39.5	38.0	1.5	7.5	8.0	-0.5	47.0	1.0	1.8	-0.8	2.0	1	0	0.0
	Bear	24	53.5	51.4	2.1	9.0	8.4	0.6	62.5	2.7	5.5	-2.8	4.0	0	0	0.0
	Miffy (TCU)	5	14.1	10.5	3.6	10.4	9.5	0.9	24.5	4.5	6.6	-2.1	0.0	1	0	0.0
Critical Care	Flamingo	17	121.0	101.0	20.0	10.8	5.0	5.8	131.8	25.8	20.2	5.7	8.0	0	0	0.0
	NICU	8	51.5	45.0	6.5	5.2	2.0	3.2	56.7	9.7	7.6	2.1			0	0.0
	PICU	13	83.1	84.0	-0.9	8.9	3.0	5.9	92.0	5.0	5.6	-0.6			0	0.1
Haematology/Oncology/Dermatology/Rheumatology	Elephant	13	25.0	19.0	6.0	5.0	5.0	0.0	30.0	6.0	2.8	3.2			0	0.0
	Fox	10	31.0	25.8	5.2	5.0	4.0	1.0	36.0	6.2	2.9	3.3			0	0.0
	Giraffe	7	19.0	16.4	2.6	3.1	2.0	1.1	22.1	3.7	0.8	2.9	1.0	0	0	0.0
	Lion	11	22.0	18.8	3.2	4.0	4.0	0.0	26.0	3.2	4.1	-0.9	2.0	0	0	0.0
	Penguin	9	15.5	13.8	1.7	5.8	6.6	-0.8	21.3	0.9	0.5	0.4			0	0.0
	Robin	10	27.2	21.7	5.5	4.5	4.4	0.1	31.7	5.6	4.2	1.4			0	0.7
IPP	Bumblebee	21	38.3	26.1	12.2	9.7	12.0	-2.3	48.0	9.9	10.3	-0.4	1.0		0	0.0
	Butterfly	18	37.2	25.6	11.6	10.5	9.9	0.6	47.7	12.2	7.1	5.1	2.0		0	0.0
MDTS	Eagle	21	39.5	38.0	1.5	10.5	10.0	0.5	50.0	2.0	3.0	-1.0	1.0	0	0	0.1
	Kingfisher	16	17.1	13.2	3.9	6.2	3.9	2.3	23.3	6.2	1.7	4.5			0	0.0
	Rainforest Gastro	8	17.0	15.9	1.1	4.0	3.5	0.5	21.0	1.6	0.9	0.8			0	0.0
	Rainforest Endo/Met	8	15.6	10.8	4.8	5.2	5.5	-0.3	20.8	4.5	2.4	2.1	2.0	2	0	0.4
Neurosciences	Mildred Creak	10	11.8	16.2	-4.4	7.8	8.4	-0.6	19.6	-5.0	0.8	-5.8			0	0.0
	Koala	24	48.2	44.0	4.2	7.8	8.0	-0.2	56.0	4.0	5.0	-1.0			0	0.1
Surgery	Peter Pan	16	24.5	23.1	1.4	5.0	5.0	0.0	29.5	1.4	1.0	0.4	1.0		0	0.2
	Sky	18	31.0	25.0	6.0	5.2	5.0	0.2	36.2	6.2	4.1	2.1	4.0		0	1.9
	Squirrel	22	43.6	45.5	-1.9	7.0	7.0	0.0	50.6	-1.9	4.0	-5.9	2.0		0	0.1
TRUST TOTAL:		324	826.2	728.8	97.4	158.1	140.1	18.0	984.3	115.4	102.7	12.8	30.0	4.0	0.0	3.4

