

Safe Staffing Monthly Report (Sep 2025 data)

Meeting date: 25 November 2025

Reporting to: Group People Committee

Agenda item No: 2.1

Report author: Lindsay Garcia, Group Director of Nursing, Emma Roberts, Associate Director of Nursing and Professional Workforce, Debi McKeown, Nurse Workforce Lead

Executive director sponsor: Emma Nunez, Chief Nursing Officer

Action required: Assurance

Delegation status: Jointly delegated item to Group Board

Previously presented to: N/A

UHT strategic objectives supported:

Putting patients first

Creating an outstanding experience for our people

Working with partner's

Reforming models of care

Developing excellence as a learning organisation

Using our resources well

CQC domain link:

Choose an item.

Board assurance / risk register this paper relates to:

Key discussion points and matters to be escalated from the meeting

This report details nursing staffing levels for September 2025 for inpatient wards. The report provides assurance that arrangements are in place to provide a workforce with the right skills in the right place to provide safe, sustainable and productive staffing. Daily Safe Care Staffing meetings provide assurance that inpatient areas have been assessed, staffing levels reviewed, and staff deployed where necessary to mitigate risk to the lowest level.

This assessment is based on skill mix, patient acuity and dependency, and occupancy levels. All actions are agreed by the Safe Care Chair and escalated to Senior Nurses as required.

ALERT: Alert to the matters that require the board's attention or action, e.g. non-compliance, safety or a threat to the Trust's strategy.

At South Tees during September 2025, sickness absence increased for both registered and unregistered staff month on month:

- Registered staff: 6.35% (+1.55%)
- Unregistered staff: 9.97% (+3.78%)

While these figures reflect a month-on-month increase, shift fill across South Tees sites remained stable, demonstrating continued resilience in staffing and effective management of workforce pressures.

The following departments had the highest variance between actual and required CHPPD at South Tees:

- Ward 9
- Ward 25
- Spinal Injuries
- Ainderby

These discrepancies suggest that staffing levels in these areas may not have adequately reflected patient acuity.

The financial ledger for South Tees reports a vacancy gap of 131.57 WTE for HCSW's.

Wards and departments at South Tees with the highest recorded DATIX relating to staff shortage and skill mix were:

- Ward 9
- Ward 2
- Ward 12

At North Tees and Hartlepool, during September 2025, sickness absence increased slightly for both registered and unregistered staff month on month:

- Registered staff: 5.61% (+0.17%)
- Unregistered staff: 9.25% (+0.18%)

In September 2025, NHSP fill rates have reduced slightly at North Tees sites;

- Registered staff: 78.50% (-5.00%)
- Unregistered staff: 86.80% (-0.80%)

Staff turnover increased at the North Tees sites during September 25 for both registered and unregistered staff.

- Registered staff: 4.76% (+1.24%)
- Unregistered staff: 8.04% (+2.96%)

In September the areas highlighting a higher variance level (>1) at North Tees, and thus, not delivering the required CHPPD were;

- Acute Cardiology Unit
- Ward 24
- Ward 25
- Ward 26
- Ward 27
- Ward 36
- Ward 40
- Ward 41

These areas have also been the focus of the most recent bi-annual nurse establishment review where the proposed nurse establishment models in line with the formal review process have been presented, indicating that establishments in these areas require investment.

ADVISE: Advise of areas of ongoing monitoring or development or where there is negative assurance. What risks were discussed and were any new risks identified.

The average percentage of shifts filled against the planned nurse staffing across South Tees for September 25 remained static at 97%.

Staff turnover at South Tees decreased during September 25 for both registered and unregistered staff.

- Registered staff: 4.54% (-0.56%)
- Unregistered staff: 8.27% (-0.34%)

Overall turnover remains significantly lower than in September 2024, indicating a positive year-on-year trend in workforce retention. **(Appendix 1)**

At South Tees, the bi-annual nurse establishment review will be presented to Board in January. This review paper is to determine any requirements to adjust the existing nursing

workforce model. The data is a triangulation of the SNCT findings, professional judgement and actual base establishments.

The monthly Workforce Assurance Meetings at South Tees continue to provide a constructive forum for reviewing staffing expenditure in relation to safe staffing levels and patient quality indicators. This initiative forms a key part of the wider workforce assurance cycle, helping to determine the staffing levels required to deliver safe, effective care while reducing reliance on temporary staffing.

To further support cost improvement plans at South Tees enhanced scrutiny of workforce metrics has been introduced. There is also broader engagement from specialist nurses and nurse practitioners across each collaborative, helping to align staffing decisions with established rostering best practices within ward settings.

At North Tees and Hartlepool, the next SNCT update will be presented to Board in March 2026. This update will then support the completion of the next annual nurse establishment review in 2026/27. The full nurse establishment planning cycle is currently being reviewed to align and move into a University Hospitals Tees cycle.

ASSURE: Assure Inform the board where positive assurance has been achieved, share any practice, innovation or action that the committee considers to be outstanding.

At South Tees, staff sickness across wards and departments is being actively managed, with Health Improvement Plans in place to support recovery and resilience.

Areas falling below the required CHPPD levels were predominantly affected by elevated staff sickness rates and increased patient acuity at South Tees. To address these challenges, twice-daily Safe Care reviews continue to play a critical role in workforce planning and the targeted redeployment of staff to cover unfilled shifts.

To support HCSW vacancies at South Tees, the second cohort of the centralised Care Support Worker recruitment programme has been confirmed. Interviews are scheduled for October 2025, with successful candidates expected to commence in December 2025. This recruitment process remains ongoing and is scheduled for review in April 2026.

At South Tees, a comprehensive tracking model for newly qualified nurses continues to be actively monitored to assess progress against over-recruitment plans. The financial ledger indicates an over-establishment of 25.8 WTE. This process is reviewed centrally through the monthly Workforce Assurance meetings and is aligned with all approved posts via the vacancy control panel. This approach ensures accurate tracking and recording of all posts, supporting regional and national reporting requirements for the Graduate Nurse Outcome Project.

A South Tees Safer Staffing Workshop is scheduled for October aimed at all senior nursing staff. The purpose of the workshop is to empower managers to support safe and effective patient care, strengthen our teams, share best practices and lead with confidence and compassion. The agenda currently includes key topics such as staffing ratios, clarification of the SafeCare Chair role, and the SOP. Additional discussions will focus on redeployment strategies, NHSP booking behaviours, and escalation processes related to overtime and incentivised bank rates.

Whilst temporary staffing levels at South Tees remain variable due to changing service demands. A focused effort continues to be made to redeploy existing staff before utilising NHSP.

Weekly prospective reviews and monthly Workforce Assurance meetings with each CSU at the South Tees site enables effective triangulation of key workforce data, including sickness absence and staff turnover rates.

To further strengthen the existing controls surrounding the use and expenditure on temporary staffing at South Tees, a new process has been implemented to enhance oversight and accountability. Each Thursday morning, when the prospective weekly NHSP report is circulated, matrons and heads of nursing are now required to review the scheduled shifts and provide feedback to the Workforce Assurance Team. Specifically, they must identify any shifts that are no longer required and confirm their cancellation. This proactive measure not only helps reduce unnecessary spend on temporary staffing but also ensures that staffing decisions remain responsive to real-time service needs. The Workforce Assurance Team will support this process by conducting regular audits and trend analysis to identify recurring patterns in shift cancellations, which could inform future workforce planning and improve cost-efficiency.

The majority of DATIX submissions for South Tees during September 25, highlighted staff shortages on Ward 9, Ward 12, and Ward 2. All reported shortages were appropriately managed through the Safe Care system, ensuring safe staffing levels were maintained throughout the month.

At North Tees, the Trust wide B5 RN vacancy position (adults and Paediatrics) in September 2025, has increased slightly to 37.05wte, with forecasting to the end of November 2025 seeing this drop to zero, moving into an over recruited position. Current and forecasted vacancies are now being filled by the NQNs from the January 2026 cohort and those being recruited into the planned over recruitment of 20wte RN will support an element of backfill of long-term sickness and maternity leave. Following more recent recruitment it is anticipated that there will be a need to continue to over-recruit by an additional 12wte RN band 5 to fully recruit all Trust home NQNs in January 2026. This proposal and rationale will be presented to Board in January 2026.

At North Tees, the HCSW vacancy position continue to reduce across all in-patient services, in September 2025, to 41.84wte. Following the introduction of 55wte B2 trainee HCSW posts, the forecasted vacancy for these posts for in-patient services will reduce to approx. 6wte by end November 2025. This pipeline programme of education will support the new trainee HCSW's to gain the required clinical experience and academic requirements to move into a B3 position within a 12-month fixed term post.

Data analysis continues following the success of STEP week in September 2025, at North Tees and Hartlepool. Over 5500 data sets have been collated and correlated, and an initial report of key finding/themes and proposed actions and recommendations continues to be drafted. This work will support a variety of planned or on-going work streams including the re-design of the Enhanced Care service in line with the NHSE ETOC programme.

Recommendations:

Members of the Trust Board are asked to: Note the content of this report and to note the significant work to ensure safe staffing across the nursing and midwifery workforce throughout September 2025.



Nurse Monthly Safer Staffing Report: September 2025

This exception report provides the People Committee with the monthly University Hospitals Tees nursing safer staffing position across all in patient areas. The report provides the People Committee with the assurance that arrangements are in place to staff services with the right skills in the right place to provide safe, sustainable and productive staffing.

1. Safer Staffing Governance

At University Hospitals Tees (UHT), Safer Staffing is maintained through twice daily safer staffing meetings (using Safe Care Live) to address any immediate safe staffing concerns (on the day) and to ensure that suitable safer staffing arrangements are in place in line with patient acuity and dependency levels. Staff redeployment is co-ordinated to ensure patient safety is prioritised and at the forefront of decision making in line with the agreed SOPs. All staffing plans are shared through OPEL meetings and Safe Care meetings.

Across the Group, all elements of safer staffing are reviewed at the site led workforce group meetings. Any unresolved concerns are escalated to the Tactical and Strategic Group and Site Leadership Team as required. Both sites undertake a look forward exercise to the week ahead, to ensure that a plan is in place to support any gaps in the nursing workforce. The monthly workforce assurance meetings at both sites have full participation from all appropriate senior nurses including Heads of Nursing, Clinical Matrons and Service Managers to ensure all decision making is appropriate.

Monthly workforce assurance and check and challenge meetings are now embedded in practice to ensure compliance with rostering and safer staffing key performance indicators. At North Tees, the current check and challenge meetings have recently been reviewed and refreshed to ensure that the required safe staffing and rostering KPIs are reviewed and required actions are agreed monthly. These meetings will now be known as monthly workforce assurance meetings and will take place monthly from September 2025, further supporting a future UHT approach.

Table 1a and Table 1b show overall planned versus actual fill across the group. Any areas showing less than 80% for registered nurses are highlighted and rationale provided as to why this has occurred.

During September 2025, several areas at South Tees reported fill rates below 80% for Registered Nurses, primarily due to **patient acuity levels** and **staff sickness**:

Day Shifts:

- Zetland - Stroke Rehabilitation
- Maternity Centre Friarage

Night Shifts:

- Ward 31 – Acute Assessment Unit
- Maternity Centre Friarage

In addition, the following areas reported fill rates below 80% due to a **reduced elective programme** during the reporting period:

Day Shifts:

- Ward 6 – Short Stay Elective
- Ward 27 – Elective Orthopaedics
- Ward 22 – Paediatric Surgery

There were no wards with an RN night shift fill rate below 80% during September due to a reduced elective programme.

These figures highlight the impact of clinical demand and service changes on staffing fill rates and support ongoing efforts to align workforce planning with patient care needs.

In September 2025, the following areas at North Tees and Hartlepool presented a fill rate of less than 80%

- Low RM and HCSW fill rate on delivery suite and ward 22 due to vacancies - filled by Sep25 NQM cohort, short term sickness and a higher level of maternity leave.
- Low HCSW fill rate on EAU Day and night due to increased vacancy and short-term sickness.
- Low HCSW fill rate on SCBU during the day due to long term sickness.
- Low HCSW fill rate on Elective care unit day and night due to reduce activity.
- Low HCSW fill rate on Ward 28 and SDU as redeployments have been made to support increased acuity within the care group.
- Low RN fill rate on Ward 26 during the day due to increased vacancy and maternity leave, which has now been backfilled.
- Low HCSW fill rate on Ward 41 during the night due to long term sickness.
- ACU, 25, 26, 27, 31, 32, 40, and 42 had an increase in HCSW fill up to 106- 158% due to the demands of enhanced care, particularly at night.

All safe staffing concerns were escalated to the daily safer staffing meetings, where appropriate redeployment was carried out based on patient acuity and dependency.

Table 1a Trust Planned versus Actual fill – South Tees:

Overall Ward Fill Rate		September 2025
	RN/RMs (%) Average fill rate – DAYS	90.5%
	HCA (%) Average fill rate – DAYS	91.2%
	NA (%) Average fill rate – DAYS	100%
	SNA (%) Average fill rate – DAYS	100%
	RN/RMs (%) Average fill rate – NIGHTS	93.6%
	HCA (%) Average fill rate – NIGHTS	104.2%
	NA (%) Average fill rate – NIGHTS	100%

	SNA (%) Average fill rate – NIGHTS	100%
	Total % of Overall planned hours	97.4%

Table 1b Trust Planned versus Actual fill – North Tees and Hartlepool:

Overall, Ward Fill Rate		September 2025
	RN/RMs (%) Average fill rate – DAYS	89%
	HCSW (%) Average fill rate – DAYS	83%
	NA (%) Average fill rate – DAYS	100%
	SNA (%) Average fill rate – DAYS	100%
	RN/RMs (%) Average fill rate – NIGHTS	97%
	HCSW (%) Average fill rate – NIGHTS	108%
	NA (%) Average fill rate – NIGHTS	100%
	SNA (%) Average fill rate – NIGHTS	100%
	Total % of Overall planned hours	97%

- **Nurse Sensitive Indicators**

At both South Tees and North Tees, staffing was not directly referenced in any concluded PSIRF reviews in September 2025.

- **Red Flags Raised through Safe Care Live**

During September 2025, a total of **35** staffing-related red flags were raised at South Tees. These included:

- **26** flagged as *Shortfall in Registered Nurse (RN) time*
- **4** flagged as *Vital signs not assessed or recorded*
- **3** flagged as *Missed intentional rounding*
- **1** flagged as *Less than two RNs on shift*
- **1** flagged as *Unplanned omission in providing medications*

Documented resolutions are available via the SafeCare log, providing assurance that appropriate action was taken following escalation.

To support timely resolution and oversight, weekly reminders are issued by the Workforce Assurance Team to Clinical Matrons, prompting review and closure of any resolved red flags.

During September 2025, a total of 11 staffing-related red flags were raised at North Tees and Hartlepool. All raised for a *Shortfall in Registered Nurse time*

- **8** flagged by Critical Care
(*Due to increased acuity and occupancy, internal escalation plans followed*).
- **2** flagged by Ward 24 and 25

(Due to increased acuity of SNCT level 2 patient, escalated at safe staffing and matrons working clinically to support).

- **1 flagged by EAU**
(Due to a shortfall in HCSW to support enhanced care, escalated at safe staffing meetings)
- **Datix/In-Phase Submissions**

At South Tees during September 25, there were 106 Datix submissions relating to staffing. Staff are encouraged to Datix any staffing related issues which are reviewed and discussed as part of workforce assurance and governance meetings. The majority of Datix submissions, highlight a reduction in staffing on Ward 9, Ward 12, Ward 2. All shortages raised were managed through the Safe Care process throughout September 25.

At North Tees, in Sept 25 there was a decrease of in-phase reports relating to nurse staffing. A total of 11 were submitted by the Care groups, which have been summarised below;

- Delivery Suite - 7 linked to RM staffing levels, short term sickness and increased acuity, internal escalation plans followed to provide safe staffing levels and non-urgent care postponed.
- Ward 40- 1 linked to RN cover and skill mix, due to short term sickness, escalated within care group, no additional staff were available to redeploy, and the ward managed the gap within their actual skill mix with oversight from the Senior Clinical Matron.
- Ward 4- 1 linked to unsafe skill mix and redeployment of staff across to North Tees, however DCP and ANP utilised within Hartlepool Hospital and safe staffing maintained.
- Ward 41 - 1 linked to reduced RN cover due to short term sickness, suitable redeployments made to safely staff department and matron supported clinically.

All staffing risks were appropriately escalated through Senior Clinical Matrons (CSMs) or Clinical Site Managers (CSM) at the time of the events and all In-Phase reports were discussed in the safer staffing meetings to ensure mitigation of any risk was put in place.

The Nursing Workforce team continues to work closely with the People Team and the temporary staffing providers (NHSP) to improve fill rates and maintain safe staffing.

- **Vacancy & Turnover**

Across the group, the vacancy position continues to be positive. Both sites submitted a joint paper to the Full Executive Team meeting and agreement was secured to over recruit NQNs from the September cohort. This has now been completed and applicants working through the in the recruitment process

As per the South Tees financial ledger for September 2025, vacancies show as –25.8 WTE (RN and RM combined). The vacancy position as per the financial ledger indicates a vacancy of 131.57 WTE for HCSW's. Centralised recruitment of HCSW's took place in July 25 to mitigate against the vacancy / establishment gap increasing in the future. 44 WTE HCSW's were successfully recruited. Interviews for the second cohort are scheduled for October 25.

At North Tees, the B5 RN vacancy position in September 2025, has increased slightly to 20.31wte, with forecasting to the end of November 2025 seeing this drop to zero, moving into an over recruited position. Current and forecasted vacancies are now being filled by the NQNs from the January 2026 cohort and those being recruited into the planned over recruitment of 20wte RN will support an element of backfill of long-term sickness and maternity leave. Following more recent recruitment it is anticipated that there will be a need to continue to over-recruit by an additional 12wte RN band 5 to fully recruit all Trust home NQNs in January 2026. This proposal and rationale will be presented to Board in January 2026.

At North Tees, the HCSW vacancy position continue to reduce across all in-patient services, in September 2025, to 42.22wte. Following the introduction of 55wte B2 trainee HCSW posts, the forecasted vacancy for these posts for in-patient services will reduce to approx. 6wte by end November 2025. This pipeline programme of education will support the new trainee HCSW's to gain the required clinical experience and academic requirements to move into a B3 position within a 12-month fixed term post.

- **Care Hours Per Patient Day (CHPPD)**

CHPPD is rolling data updated monthly, to show staffing levels in relation to patient numbers on an inpatient ward. This relates to the associated variance between the required care hours to safely care for patients and the actual care hours delivered by individual ward nursing workforce models. Table 2 and Table 3 show the overall average CHPPD for the group. Most recent breakdown by ward for September 2025 can be reviewed in Appendix 2.

Table 2 South Tees site:

	Required CHPPD (Average)	Actual CHPPD (Average)	Variance
July 2025	9.22	9.69	+0.47
August 2025	9.14	9.49	+0.35
September 2025	9.26	9.39	+0.13

During September 25, data indicates that 11 inpatient areas exceeded the required average for CHPPD (>1). Areas falling below the required CHPPD levels were primarily impacted by elevated staff sickness rates and increased patient acuity. To mitigate these challenges, twice-daily Safe Care reviews continue to support the planning and redeployment of staff into unfilled shifts.

The greatest variance between required and actual CHPPD (<3) was observed in Ward 9, Ward 25, Spinal Injuries and Ainderby.



- **Ward 9** reported 2.98 WTE HCSW vacancies throughout September. Through the centralised recruitment process, 2.39 WTE have been allocated, with anticipated start dates ranging from September to October 2025. Following completion of supernumerary periods, an improvement in CHPPD is expected. While staff sickness rates decreased among unregistered staff, there was an increase among registered staff, rising to 11%, a 2% month on month increase.
- **Ward 25** experienced an increase in sickness absence among both registered and unregistered staff. Sickness rates for registered staff rose by 1.5%, reaching 9.5%, while unregistered staff saw a more significant increase of 4%, bringing the total to 17%.
- **Spinal Injuries** reported a reduction in sickness absence among unregistered staff, decreasing by 2.3% to 11.7%. Sickness absence for registered staff remained unchanged month-on-month at 12%. Additional beds were opened throughout September, and NHSP shifts were required for falls watch which may have contributed to a temporary impact on CHPPD.
- **Ainderby** experienced a significant increase in sickness absence among unregistered staff, rising from 10% to 18.5%. In contrast, there was no recorded sickness absence among registered staff, reflecting a 5% month on month reduction. Variance in CHPPD was also influenced by patient acuity, with a high number of CG47 Level 3 shifts requested throughout September.

The reasons for NHSP bookings were consistent with the staffing challenges outlined above (**Appendix 3**)

Table 3 North Tees site:

	Required CHPPD (Average)	Actual CHPPD (Average)	Variance
July 25	9.28	11.48	+2.20
August 2025	9.00	10.19	+1.19
September 2025	9.09	9.57	+0.48

In September the areas highlighting a higher variance level (>1) at North Tees, and thus, not delivering the required CHPPD were;

- Acute Cardiology Unit
- Ward 24 - Respiratory
- Ward 25 - Respiratory
- Ward 26 - Gastroenterology
- Ward 27 - Gastroenterology
- Ward 36 - Endocrinology
- Ward 40 – Older People
- Ward 41 - Stroke



These areas have also been the focus of the most recent bi-annual nurse establishment review where the proposed nurse establishment models in line with the formal review process have been presented, indicating that establishments in these areas require investment.

All unfilled duties within rosters have been managed via the twice daily safer staffing meetings and suitable re-deployment to the areas made. The use of temporary nurse staffing continues at North Tees due to sickness levels that continues to exceed 4% (allocated within headroom) and maternity leave that has previously not been backfilled consistently.

The presentation of monthly workforce rostering KPI's and metrics now allows for more detailed correlation between various metrics and planned and actual CHPPD. These monthly reports are used in the monthly workforce assurance meetings (WAMs) to provide a clear identification of areas with low or no compliance and associated planned actions to improve positions.

Nurse Recruitment and Retention

At both sites the monitoring of all nurses appointed into 'over recruited' positions continue to be an area of focus. The consistent review to move them from over recruited 12m fixed term posts into permanent established posts by way of natural turnover is well embedded at both sites. Regular check in sessions are taking place to ensure that they are feeling supported in their new roles in addition to the standard preceptorship programme. Unfortunately, North Tees and Hartlepool no longer benefit from the role of the legacy mentor as the roles were disestablished following the removal of funding from NHSE.

Across the Group, the monthly nursing workforce assurance meetings / Professional Workforce Assurance Council (PWAC) provide a platform to fully explore all recruitment and retention issues as well as highlighting best practice for safe and effective rostering.

- **Temporary Staffing**

At South Tees, demand for nursing and midwifery bank and agency staffing in September 2025 decreased by **21%** compared to September 2024. Additionally, bank filled hours declined by **22%** over the same period. These reductions reflect improved workforce stability may indicate a positive impact from ongoing efforts optimise staff deployment.

Nursing agency use continues to be minimal at South Tees. In September 2025, a total of **161** nursing agency hours were booked; the use has remained static hours month on month. 141 nursing agency hours in September 25 were utilised within Friarage Theatres and 20 hours in Orthopaedic Theatres.

ODP agency usage remains present within the Trust. In September 2025, a total of 494 hours were utilised across the following areas:

- **Friarage Theatres:** 237 hours
- **Cardio Theatres:** 124 hours
- **Orthopaedic Theatres:** 133 hours

While this represents a marginal month on month increase, it is a reduction of 261 hours compared to the same period last year.

The continued use of agency staffing reflects a strategic approach to addressing service demands in priority areas, while maintaining a commitment to reducing reliance on external staffing solutions.

All agency usage is subject to appropriate governance and has been approved through the vacancy control panel.

An exit strategy is in place, aligned with the training matrix and competency progression of NQN's and ODP's.

The current directive from the vacancy control panel is to review agency staffing requirements for the FHN site in January 2026 and the JCUH site in March 2026.

In September 2025, bank staffing spend decreased by £182,589 (**-13%**) compared to September 2024. Similarly, agency staffing spend saw a notable year-on-year reduction of £13,013 (**-32%**).

The overall fill rate for bank and agency staffing in September 2025 was **81.7%**, consistent with the same period last year. While the fill rate remains static year on year, the reduction in demand provides a more accurate reflection of ward requirements, resulting in a more reliable and representative fill rate.

At North Tees and Hartlepool, all temporary staffing spends (NMAHP, Medical and Dental, Health Care Scientist and Admin and Clerical) is discussed monthly via the Temporary Staffing Focus Group (TSFG) with escalations and updates to Joint QUAD monthly.

- Agency spend YTD is £1,162k lower than previous year
Agency spend is still lower than in any month last year and has reduced compared to prior months
Cell Path insourcing still makes up more than 50% of the remaining agency spend
- Bank spend YTD is £242k higher than previous year
Bank spend in M6 was only £4k higher than the same month last year. Most reason codes have reduced from Aug-25.
Enhanced care in M6 is now only £6k higher than the average of 24/25 and £10k lower than Aug-25.
- Locum spend YTD is £136k lower than previous year
M6 spend is £34k lower than YTD average, largely due to Anaesthetics, though this is expected to increase again
- Overtime spend YTD is £212k lower than previous year
M6 spend is down £20k vs Aug-25 and £14k vs average of this year

If the current month spend is projected for the rest of the year, on a straight-line basis (no seasonality) there would be a forecasted saving of £2.9m compared to 2024/25, and an achievement of the target reduction by £192k.

Key Priorities

At North Tees the current key priorities are as follows:

- Continued monitoring of temporary staffing, over time use, sickness/absence & turnover
- Bi-annual nurse establishment update report to Board in Jan/Feb 2026
- Adult in-patient SNCT, ED SNCT, Paeds SNCT and Community CNSST data collection across November 2025
- Presentation of STEP data and overall recommendations
- Continued recruitment of NQNs and proposed further over-establishment to accommodate.
- Focus on nursing workforce development with multiple new career pathways – Launch of the CORE pathway across NQNs in November 2025 and February 2026.
- Impact of Legacy Mentorship – conclusion and presentation of research
- Alignment of safer staffing processes across University Hospitals Tees.

At South Tees the current key priorities are as follows:

- Revision of the redeployment charter with a to a handbook, this draft has had contributions from all levels of staff and the operational site team to ensure its relevance
- SNCT data collection completed and validated
- Professional Nurse Advocate (PNA) update has been commenced to look at variation across clinical areas and to explore what demand is for future training places across Group

- **RECOMMENDATIONS**

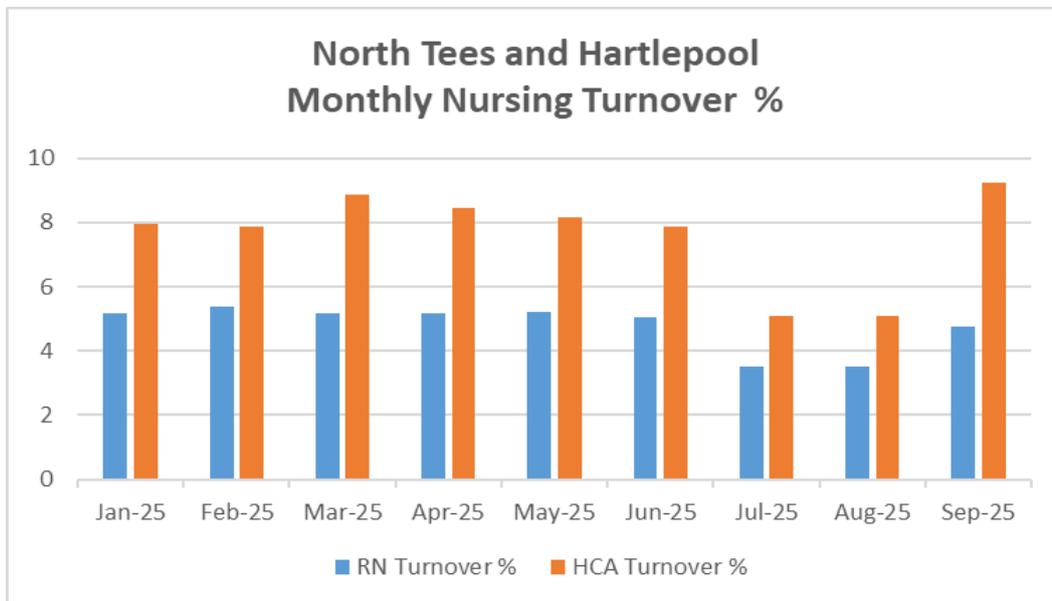
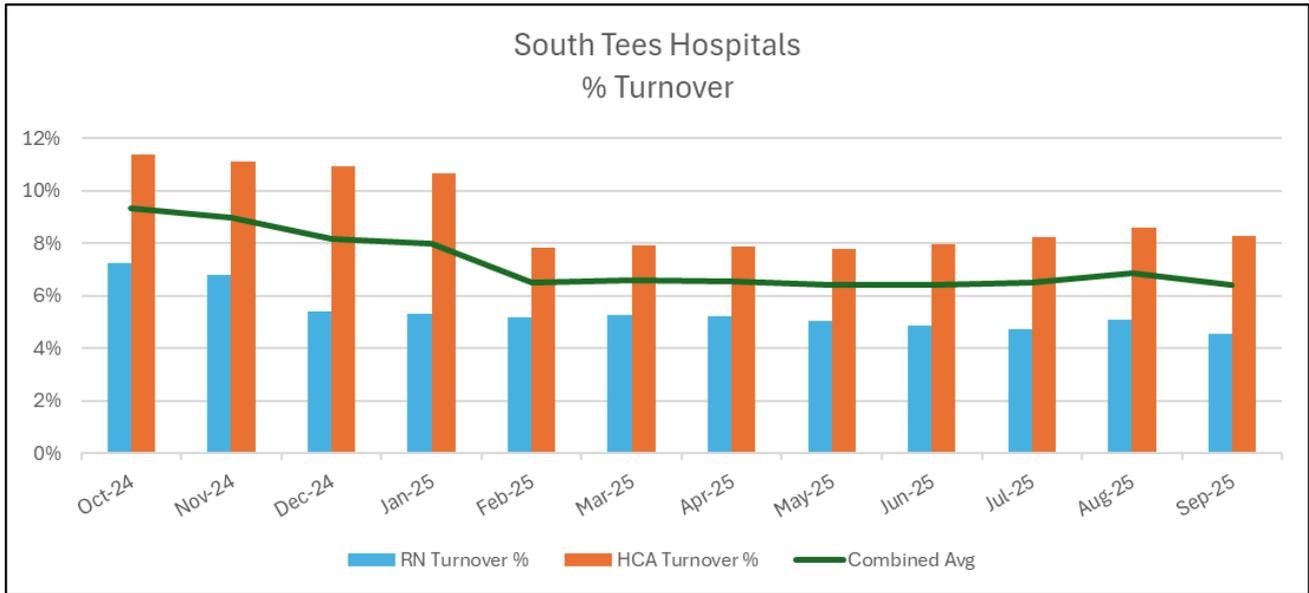
The Board is asked to read the content of this report and to note the progress made across both sites in relation to developing and retaining the nursing workforce.

The Board are asked to note the assurance presented that arrangements are in place to monitor, support and mitigate any impact of reduced staffing levels or skill mix in relation to patient safety.

The Board are asked to acknowledge the development of this report in the coming months to ensure that the two current reporting methods across both site teams continue to align. This will provide the continued assurance that arrangements are in place to staff services with the right skills in in the right place to provide safe, sustainable and productive staffing.

Appendix 1

Nursing Turnover September 2025



Appendix 2

South Tees Average CHPPD Breakdown by Ward (September 2025):



Ward	Average of Required CHPPD	Average of Actual CHPPD	Variance
Ward 1	9.30	8.72	-0.59
Ward 31	9.14	6.42	-2.72
Ward 2	6.51	4.95	-1.57
Ward 3	7.59	4.86	-2.73
Ward 4	8.70	6.38	-2.33
Ward 5	5.14	4.91	-0.22
Ward 6	5.24	4.45	-0.79
Ward 7	5.15	4.57	-0.58
Ward 8	5.42	4.71	-0.70
Ward 9	8.69	4.23	-4.46
Ward 11	8.52	6.45	-2.07
Ward 12	8.88	5.90	-2.98
Ward 14	6.79	5.57	-1.22
Ward 24	8.95	9.52	0.57
Ward 25	9.94	6.77	-3.17
Ward 26	8.42	6.71	-1.71
Ward 27	7.86	14.53	6.67
Ward 28	8.29	5.81	-2.48
Ward 29	5.03	4.88	-0.15
Cardio MB	7.34	9.10	1.76
Ward 32	6.84	6.20	-0.63
Ward 33	8.32	6.50	-1.82
Ward 34	8.48	6.43	-2.04
Ward 35	7.90	7.38	-0.52
Ward 36	6.84	5.44	-1.41
Ward 37 - AMU	11.17	8.25	-2.92
Spinal Injuries	10.55	7.30	-3.24
CCU	14.34	11.81	-2.53
Critical Care	18.58	25.87	7.29

CICU JCUH	23.04	26.72	3.68
Cardio HDU	10.30	13.84	3.54
Ward 24 HDU	11.34	20.27	8.92
CDU FHN	8.14	7.48	-0.66
Ainderby FHN	11.38	7.90	-3.49
Romanby FHN	7.62	6.93	-0.69
Gara FHN	6.66	12.01	5.35
Rutson FHN	8.10	7.07	-1.02
Friary	8.18	7.97	-0.21
Zetland Ward	9.49	7.03	-2.46
Tocketts Ward	7.88	6.17	-1.71
Ward 21	9.25	14.14	4.89
Ward 22	13.47	14.08	0.61
Neonatal Unit (NNU)	12.81	14.21	1.40
Paediatric Critical Care (PCCU)	15.74	32.65	16.90
Grand Total (Average)	9.26	9.39	+0.13

North Tees Site - CHPPD by ward for September 2025

Row Labels	Average of Required CHPPD	Average of Actual CHPPD	Variance
Acute Cardiology Unit	7.09	5.67	-1.41
Critical Care North Tees	22.47	23.31	0.84
Elective Care Unit	6.18	19.57	13.39
Emergency AMB	7.50	8.38	0.88
Neonatal Unit	10.86	18.78	7.93
Paediatrics	10.09	15.80	5.71
SDU	8.83	10.81	1.98
Ward 24 (Respiratory)	9.03	6.37	-2.66
Ward 24 RSU	12.80	9.93	-2.87
Ward 25 (Respiratory)	9.03	6.59	-2.43
Ward 25 RSU	11.95	10.55	-1.40
Ward 26	7.50	5.71	-1.79
Ward 27 (Gastroenterology)	7.69	6.53	-1.16
Ward 28 (Surgery)	6.23	5.80	-0.43

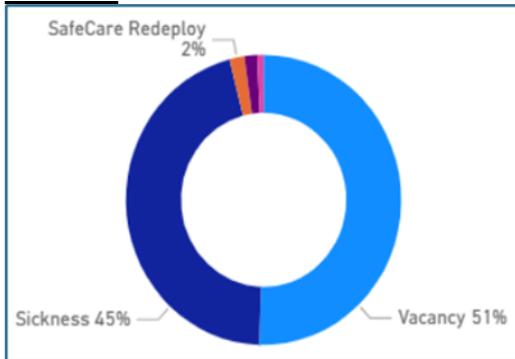
Ward 31 (Surgical Observation Unit)	7.99	9.03	1.04
Ward 32 (Fragility Fracture)	8.07	7.77	-0.30
Ward 33 (Orthopaedic & Spinal)	6.36	6.02	-0.34
Ward 36	8.62	6.91	-1.71
Ward 38	6.37	5.52	-0.85
Ward 40 (Acute Elderly)	8.36	6.93	-1.43
Ward 41 (Stroke Unit)	7.58	5.59	-2.00
Ward 42 (Elderly Rehabilitation)	9.39	9.06	-0.33
Grand Total	9.09	9.57	0.48



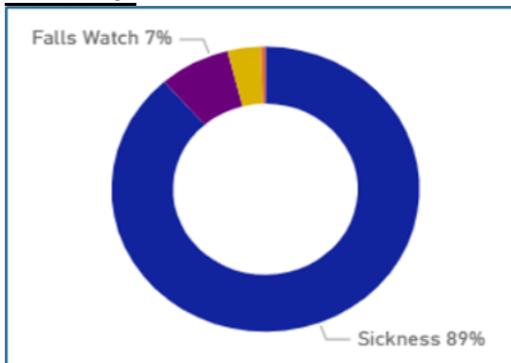
Appendix 3

South Tees NHSP booking reasons for areas with highest CHPPD variance.

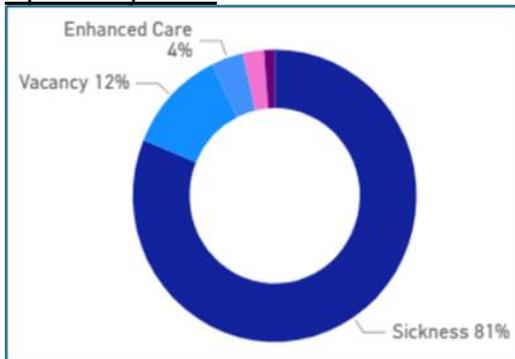
Ward 9:



Ward 25:



Spinal Injuries:



Ainderby:

