

Safe Staffing Monthly Report (Aug 2025 data)

Meeting date: 28 October 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 August 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, 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.

At North Tees and Hartlepool, the next bi-annual nurse establishment update will be presented to Board in January 2026 – this will be a review paper and will continue to highlight the requirement for investment into several nursing workforce models as per the bi-annual review carried out in 2024/25. This update will then support the completion of the annual nurse establishment review that will be presented to Board in February 2026 using three cycles of the current SNCT data across adult, Paediatrics, ED and Community.

The workforce leads are currently working to align the cycles of bi-annual nurse establishment reviews, with a repeat review planned for early 2026 once CSUs are in place.

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 August 25 has decreased by 1% to 97%.

In August 2025, sickness absence among registered staff increased by 0.95%, while sickness among unregistered staff decreased by 0.23%. Despite this month-on-month fluctuation, there has been a notable reduction in sickness rates for both staff groups when compared to the same period last year.

Staff turnover increased during August for both registered and unregistered staff. However, overall turnover remains significantly lower than in August 2024, indicating a positive year-on-year trend in workforce retention.

The monthly Workforce Assurance Meetings have established a constructive forum for colleagues to review staffing spend in relation to safe staffing levels and patient quality indicators. This initiative is a key component of the ongoing workforce assurance business

cycle, supporting the calculation of required staffing levels to deliver safe and effective care while minimising reliance on temporary staffing.

To further support cost improvement plans, enhanced scrutiny of current workforce metrics has been introduced. Additionally, there is now broader engagement from specialist nurses and nurse practitioners across each collaborative, ensuring alignment with rostering best practices already established within ward settings.

At North Tees the overall planned nurse fills for August remains 99%, which continues to align with the current enhanced care requirements particular during the night so there remains a continued reliance on temporary staffing to safely staff in patient areas. Review of this service and its ability to deliver the required demand remains in place and is currently being supported by the anticipated data that has been taken during STEP week.

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 a robust tracking model has been devised to check progress of the over recruited newly qualified nurses. The process will be reviewed centrally through workforce assurance and aligned with all agreed posts as per vacancy control panel. This approach will ensure that all posts are tracked and recorded accurately for regional / national updates for the graduate nurse outcome project

The centralisation of care support worker recruitment has been agreed based on the outcome of the pilot and this will continue until a further review in April 2026.

North Tees and Hartlepool turnover for August 2025 has increase within the registered nursing workforce to 5.26% and a decrease in the HCSW line to 7.89%

At North Tees, the NQN's in the Sep25 cohort have been appointed into permanent and fixed term roles throughout Trust most have now commenced into post. RN's and NQN's (January 2026 cohort) continue to be appointed into forecasted vacancies and the 20wte planned over recruitment, as per the SLT agreement. It is anticipated that all NQNs for both the September 2025 and January 2026 cohorts have been fully accounted for when planning employment and preceptorship agreements.

The 60wte trainee healthcare support workers are commencing throughout October 2025 to support vacancies within the band 3 line and mitigate current gaps in safe staffing. 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.

To provide further assurance in relation to safer nurse staffing, North Tees have carried out STEP week (Safer staffing, Timely care, Enhanced Care, Planned discharge) from the 1st to the 5th September 2025. This week enabled senior nurses and AHP's to specifically review patient acuity and dependency data and provide further validation of SNCT data in addition to collecting and collating a number of other data sets/metrics that 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. Over 5500 data sets have now being collated and

correlated and an initial report of key finding/themes and proposed actions and recommendations is being drafted.

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 August 2025.



Nurse Monthly Safer Staffing Report

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 on a monthly basis. These meetings will now be known as monthly workforce assurance meetings and will take place on a monthly basis 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 August 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:

- Ward 33 - Haematology
- Zetland - Stroke Rehabilitation
- Neonatal Unit
- Ward 21 - Paediatrics
- Maternity Centre Friarage

Night Shifts:

- Ward 31 – Acute Assessment Unit

- CICU – Cardio Intensive Care Unit
- CHDU – Cardio High Dependency 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 and Night Shifts:

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

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 August 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.
- Critical Care had low RN fill rate due to reduced acuity during this reporting period.
- Low HCSW fill rate on EAU due to increased vacancy and short-term sickness.
- Low HCSW fill rate on SCBU due to long term sickness.
- Low HCSW fill rate on Elective care unit due to reduce activity.
- Low HCSW fill rate on Ward 28 due to increased short term sickness.
- Low HCSW fill rate on Ward 25 due to long term sickness.
- ACU, 24, 25, 26, 27, 32, 40, and 42 had an increase in HCSW fill up to 115-170% 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		August 2025
	RN/RMs (%) Average fill rate – DAYS	89.9%
	HCA (%) Average fill rate – DAYS	91.8%
	NA (%) Average fill rate – DAYS	100%
	SNA (%) Average fill rate – DAYS	100%
	RN/RMs (%) Average fill rate – NIGHTS	94.0%
	HCA (%) Average fill rate – NIGHTS	100.4%
	NA (%) Average fill rate – NIGHTS	100%
	SNA (%) Average fill rate – NIGHTS	100%
	Total % of Overall planned hours	97%



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

Overall Ward Fill Rate		August 2025
	RN/RMs (%) Average fill rate – DAYS	87%
	HCSW (%) Average fill rate – DAYS	93%
	NA (%) Average fill rate – DAYS	100%
	SNA (%) Average fill rate – DAYS	100%
	RN/RMs (%) Average fill rate – NIGHTS	94%
	HCSW (%) Average fill rate – NIGHTS	115%
	NA (%) Average fill rate – NIGHTS	100%
	SNA (%) Average fill rate – NIGHTS	100%
	Total % of Overall planned hours	99%

- **Nurse Sensitive Indicators**

At South Tees, staffing was not directly referenced in any concluded PSIRF reviews in August 2025.

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

During August 2025, a total of 9 staffing-related red flags were raised at South Tees. These included:

- 5 flagged as *Shortfall in Registered Nurse (RN) time*
- 2 flagged as *Missed intentional rounding*
- 2 flagged as *Less than two RNs on shift*

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 August 2025, a total of 2 staffing-related red flags were raised at North Tees and Hartlepool;

- 1 flagged by EAU as *Shortfall in Registered Nurse (RN) time*
(Due to short term sickness within the coordinator role, escalated and suitable RN re-deployment carried out).
- 1 flagged by Ward 40 as *Less than two RNs on shift*
(Due to short term sickness, escalated at safe staffing meeting and suitable RN re-deployment carried out).

- **Datix/In-Phase Submissions**

At South Tees during August 25, there were 102 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 3 and Redcar Community Nursing PCN. All shortages raised were managed through the Safe Care process throughout August 25.

At North Tees, in August 25 there was an increase in in-phase reports relating to nurse staffing. A total of 14 were submitted by the Care groups, which have been summarised below;

- Delivery Suite – 9 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 22- 1 linked to RM staffing levels due to short-term sickness, again internal escalation plans followed to provide safe staffing levels across maternity services.
- Ward 40- 2 linked to RN cover and skill mix, due to short term sickness, escalated within care group and suitable redeployment made from other areas to provide safe staffing levels.
- Surgical Decision Unit- 1 linked to increased acuity with admissions, escalated to site manager to support department
- Emergency Department- 1 linked to reduced RN cover due to short term sickness, internal escalation followed, matron supported workforce.

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 August 2025, vacancies show as –38.49 WTE (RN and RM combined). The vacancy position as per the financial ledger indicates a vacancy of 147.82 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 remains positive across the in-patient wards and departments. In August 2025 the vacancy level has increased -13.2 WTE, with forecasting to the end of October 2025 seeing this reduce to 0 WTE. All current and forecasted vacancies are now being appointed into using the NQN cohorts for Sep25 and Jan26 with some additional recruitment of RNs. The planned over recruitment of 20wte RN is underway and plans to fill unfilled shifts due to long term sickness and maternity leave. Thus, reducing the reliance on bank and agency over the coming months.

At North Tees, the HCSW vacancy position across all services in July 25 is -66.01wte. Following the introduction of the 60wte B2 trainee HCSW posts, the forecasted vacancy for these posts for in-patient services will reduce to approx. 6wte by November 2025 (start dates throughout October 2025).

- **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 August 2025 can be reviewed in Appendix 2.

Table 2 South Tees site:

	Required CHPPD (Average)	Actual CHPPD (Average)	Variance
June 2025	9.20	9.65	+0.45
July 2025	9.22	9.69	+0.47
August 2025	9.14	9.49	+0.35

During August 25, data indicates that 14 inpatient areas exceeded the required average for CHPPD. 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 was observed in Ward 9, Ward 31, and Ainderby.

- **Ward 9** currently holds 3.3 WTE HCSW vacancies. While staff sickness decreased to 11% (a 3% improvement month-on-month), it remains considerably above the trust average.
- **Ward 31** experienced an increase in staff sickness, rising to 10.5%.
- **Ainderby** also saw a notable increase in staff sickness, up by 4.7% compared to July.

These vacancies have recently been recruited into via the central HCSW recruitment process, with anticipated start dates in September 25. Following completion of supernumerary periods, an improvement in CHPPD is expected.



Staff sickness across these areas is being actively managed, with Health Improvement Plans in place to support recovery and resilience.

In August 2025, the average sickness rate across Registered Nurses (RNs), Registered Midwives (RMs), and Healthcare Support Workers (HCSWs) was **5.50%**, reflecting a reduction in staff sickness over the past 12 months. This positive trend is expected to contribute to a decreased reliance on temporary staffing.

Temporary staffing levels remain variable due to changing service demands. However, a focused effort continues to be made to redeploy existing staff before utilising NHSP.

Weekly prospective reviews and monthly Workforce Assurance meetings with each collaborative enable effective triangulation of key workforce data, including sickness absence and staff turnover rates.

Analysis of NHSP spend indicates that the wards and departments with the highest usage correspond to areas identified in the biannual SNCT establishment reviews as requiring adjustments to staffing levels.

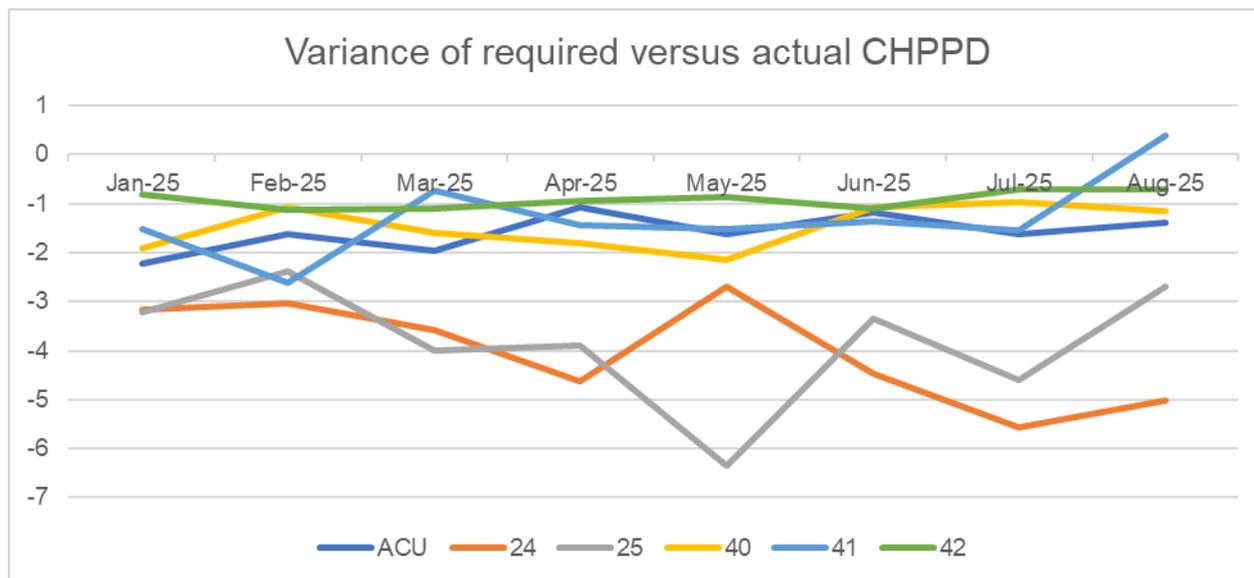
Table 3 North Tees site:

	Required CHPPD (Average)	Actual CHPPD (Average)	Variance
June 2025	9.25	10.06	+0.81
July 25	9.28	11.48	+2.20
August 2025	9.00	10.19	+1.19

In August 2025 the areas highlighting a higher variance level (>1) at North Tees, and thus, not delivering the required CHPPD were Cardiology, Respiratory, Gastroenterology and Elderly Care. This is reflective of the increased acuity in Respiratory (SNCT level 2 patients) and of increased HCSW vacancy in the other departments. 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.



Chart 1 presents the variance of the required and actual CHPPD for these areas since January 2025.

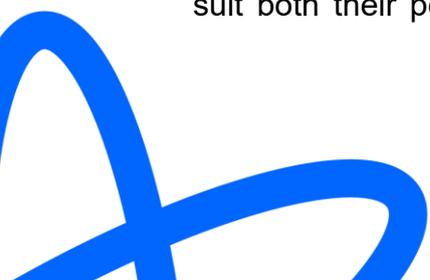


All unfilled duties within rosters have been managed via the twice daily safer staffing meetings and suitable re-deployment to the areas made. The use of temporary nurse staffing continues at North Tees due to sickness levels that continues to exceed 4% (allocated within headroom) and maternity leave 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

- South Tees has introduced a streamlined tracking system for newly qualified nurses recruited above establishment:
- Progress Monitoring: Tracks the development of over-recruited newly qualified nurses and cross referenced with temporary staffing requests
- Central Oversight: Reviewed through workforce assurance to maintain consistency.
- Post Alignment: Linked to all approved roles via the vacancy panel.
- Accurate Reporting: Ensures all posts are recorded correctly for regional and national Graduate Nurse Outcome updates.
- Legacy mentors continue to play a vital role in supporting staff throughout their career journeys. They proactively source relevant information, act as a liaison between staff and management, and foster a culture of development and support. By working closely with HR colleagues, they help deliver tailored one-to-one outcomes that recognise individual needs. This approach enhances workforce flexibility, enabling staff to work in ways that suit both their personal circumstances and the needs of patients. Additionally, legacy



mentors contribute to the ongoing improvement of organisational culture and leadership across NHS settings.

Similar processes in place at North Tees and Hartlepool in relation to the monitoring of all nurses appointed into 'over recruited' positions. Monthly plans to move them from over recruited 12m fixed term posts into permanent established posts by way of natural turnover. Monthly check in sessions have been planned to ensure that they are feeling supported in their new roles in addition to 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 August 2025 decreased by **13%** compared to August 2024. Additionally, bank filled hours declined by **15%** over the same period. These reductions reflect improved workforce stability and may indicate a positive impact from ongoing efforts to reduce sickness absence and optimise staff deployment.

Nursing agency use continues to be minimal at South Tees. In August 2025, a total of **164** nursing agency hours were booked; this is a reduction of 190 hours month on month. All nursing agency hours in August were utilised within Friarage Theatres.

ODP agency usage remains present within the Trust. In August 2025, a total of 387 hours were utilised across the following areas:

- **Friarage Theatres:** 236 hours
- **Cardio Theatres:** 139 hours
- **Orthopaedic Theatres:** 12 hours

While this represents a marginal month on month increase, it is a reduction of 927 hours compared to the same period last year.

The continued use of agency staffing reflects a strategic approach to meeting service demands in the areas of greatest need whilst maintaining efforts to limit reliance on external staffing solutions.

In August 2025, bank staffing spend decreased by £75,793.71 (-6%) compared to August 2024. Similarly, agency staffing spend saw a significant reduction of £29,682.77 (-56%) year on year. These reductions reflect improved workforce planning and reduced reliance on temporary staffing solutions.

The overall fill rate for bank and agency staffing in August 2025 was 82.2%, 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 spend (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 on a monthly basis.

- Agency spend YTD is £1,127k lower than previous year
- Agency spend is still lower than in any month last year and is consistent with prior months
- Bank spend YTD is £238k higher than previous year
- Bank increase still lower than agency reduction overall
- Enhanced care in M5 £16k higher than the average of 24/25 and £35k lower than Jul-25. Drivers of in month increase are vacancy and sickness (by NHSP coding)
- Locum spend YTD is £102k lower than previous year
- M5 spend is £30k lower than YTD average, partly linked to Theatres shut down in August
- Overtime spend YTD is £179k lower than previous year
- M5 spend has increased c. £8k from Jul-25

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 review paper (update).
- Adult in-patient SNCT, ED SNCT, Paeds SNCT and Community CNSST data collection planned for Oct/Nov 2025
- Supporting the introduction of Trainee HCSW (60wte B2) from Oct 25 – initial education and KIT days planned
- Presentation of STEP data and overall recommendations to Group CNO
- Recruitment centre planned for the recruitment of the remaining Jan26 NQN cohort
- Focus on nursing workforce development with multiple new career pathways including aspirant leader
- Impact of Legacy Mentorship – conclusion and presentation of research

At South Tees the current key priorities are as follows:

- Continue to explore staff feedback regarding Work-Life Balance approaching winter, this includes a review of the redeployment SOP with staff input and the plan for utilisation of non-ward-based nurses to support at times of critical need
- Finalisation of the temporary staffing equitable rates of pay proposal across both sites. This will continue to link with all CIP initiatives
- Continuous development of clear career pathways for new to care staff with a focus on the pathway to be a registered nurse

- Maintain safe staffing ratios by embedding the actual, stretch and extremis model within wards and departments with a clear escalation process.

- **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.

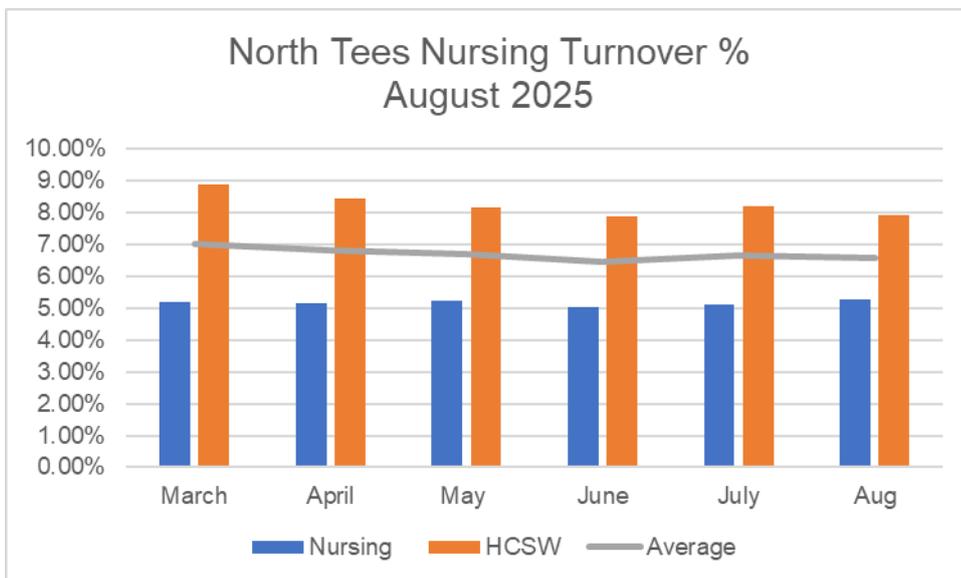
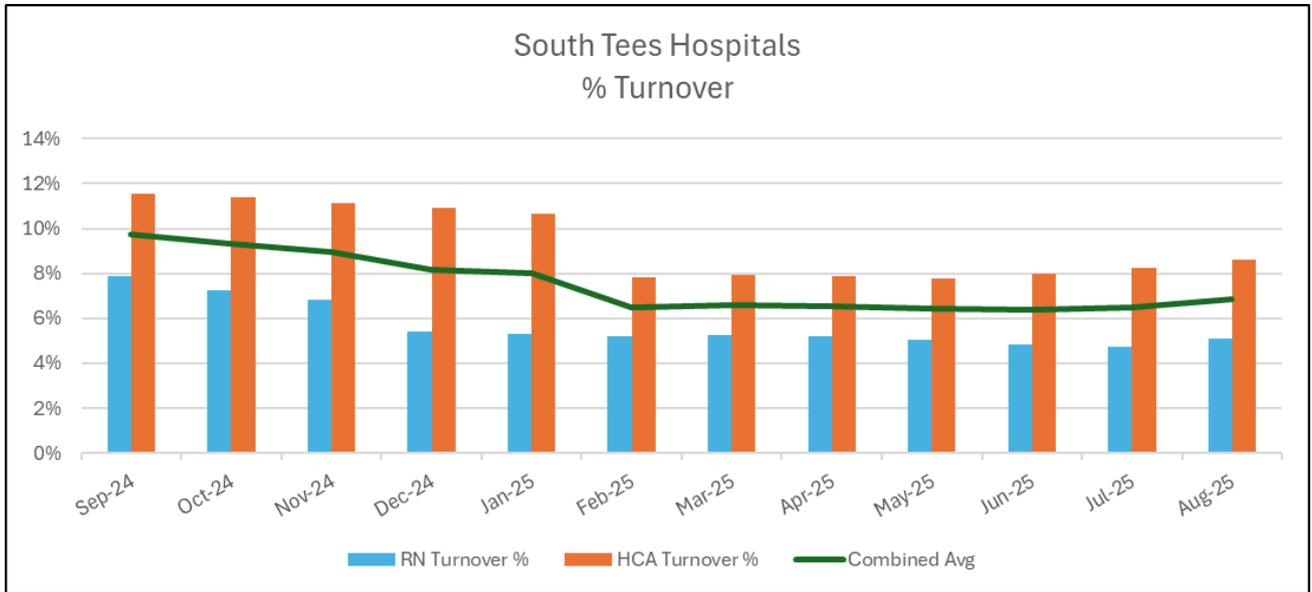
The Board are asked to note the assurance presented that arrangements are in place to monitor, support and mitigate any impact of reduced staffing levels or skill mix in relation to patient safety.

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 August 2025



Appendix 2

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

Ward	Average of Required CHPPD	Average of Actual CHPPD	Variance
Ward 1	8.55	7.78	-0.77
Ward 31	9.69	6.48	-3.21
Ward 2	6.43	4.90	-1.53
Ward 3	7.82	5.25	-2.57
Ward 4	8.65	6.66	-1.98
Ward 5	5.54	4.75	-0.79
Ward 6	4.83	4.49	-0.34
Ward 7	5.33	4.68	-0.65
Ward 8	5.55	4.98	-0.57
Ward 9	8.70	4.26	-4.44
Ward 11	8.21	6.81	-1.40
Ward 12	9.04	6.58	-2.46
Ward 14	6.60	5.76	-0.84
Ward 24	9.40	10.21	0.80
Ward 25	9.94	7.05	-2.89
Ward 26	8.57	6.93	-1.64
Ward 27	7.81	11.97	4.16
Ward 28	8.48	7.08	-1.41
Ward 29	4.87	5.11	0.24
Cardio MB	5.94	7.98	2.04
Ward 32	7.14	6.49	-0.65
Ward 33	7.92	6.50	-1.42
Ward 34	7.48	5.78	-1.70
Ward 35	7.60	7.27	-0.34
Ward 36	6.58	5.32	-1.26
Ward 37 - AMU	10.62	8.29	-2.33
Spinal Injuries	9.83	7.08	-2.75

CCU	15.55	14.31	-1.24
Critical Care	16.89	23.47	6.58
CICU JCUH	22.39	26.73	4.35
Cardio HDU	10.34	14.24	3.91
Ward 24 HDU	11.21	22.29	11.09
CDU FHN	7.97	7.22	-0.75
Ainderby FHN	11.69	7.37	-4.32
Romanby FHN	7.39	6.96	-0.43
Gara FHN	6.46	11.60	5.13
Rutson FHN	7.98	7.53	-0.45
Friary	8.24	8.51	0.27
Zetland Ward	8.82	6.67	-2.16
Tocketts Ward	7.87	5.73	-2.14
Ward 21	9.25	14.99	5.74
Ward 22	13.69	17.52	3.82
Neonatal Unit (NNU)	12.48	13.37	0.89
Paediatric Critical Care (PCCU)	16.86	32.58	15.71
Grand Total (Average)	9.14	9.49	0.35

North Tees Site - CHPPD by ward for August 2025

Row Labels	Average of Required CHPPD	Average of Actual CHPPD	Variance
Acute Cardiology Unit	7.43	6.04	-1.39
Critical Care North Tees	20.24	29.19	8.95
Elective Care Unit	6.79	18.65	11.86
Emergency AMB	7.17	10.26	3.09
Neonatal Unit	10.89	18.94	8.05
Paediatrics	9.96	20.22	10.26
SDU	10.30	11.27	0.96
Ward 24 (Respiratory)	8.55	6.94	-1.61
Ward 24 RSU	13.10	9.69	-3.41
Ward 25 (Respiratory)	8.80	6.60	-2.21
Ward 25 RSU	11.34	10.86	-0.48
Ward 26	6.89	5.43	-1.46

Ward 27 (Gastroenterology)	7.96	6.71	-1.25
Ward 28 (Surgery)	6.23	6.01	-0.22
Ward 31 (Surgical Observation Unit)	8.06	8.28	0.22
Ward 32 (Fragility Fracture)	8.46	8.08	-0.38
Ward 33 (Orthopaedic & Spinal)	6.33	5.88	-0.46
Ward 36	8.10	5.85	-2.25
Ward 38	6.24	5.66	-0.58
Ward 40 (Acutev Elderly)	8.09	6.94	-1.14
Ward 41 (Stroke Unit)	7.89	8.23	0.34
Ward 42 (Elderly Rehabilitation)	9.13	8.41	-0.71
Grand Total	9.00	10.19	1.19