

# Safe Staffing Monthly Report (July 2025 data)

**Meeting date:** 23<sup>rd</sup> September 2025

**Reporting to:** Group People Committee

**Agenda item No:**

**Report author:**

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**Executive director sponsor:** Emma Nunez, Group Chief Nurse

**Action required:** Assurance

**Delegation status:** Jointly delegated item to Group Board

**Previously presented to:**

## 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 July 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.

Across the group, the next bi-annual nurse establishment review will be presented to Board in Oct25 – this will be a review paper to determine any requirements to adjust the existing nursing workforce model in preparation for the annual establishment review.

At North Tees and Hartlepool, the next bi-annual nurse establishment review will be presented to Board in November 2025 – 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.

**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 July 25 has increased by 1% to 98%.

Sickness for both registered and unregistered staff reduced during July 25. Notably, the registered staff sickness rate fell below the Trusts target to 3.8%

Turnover during July 25 decreased for registered staff but increased for unregistered.

The commitment to the monthly workforce assurance meetings has created a safe space for colleagues to be able to explore spend against safe staffing and patient quality indicators. This work is central to the ongoing workforce assurance business cycle in calculating the number of staff required to deliver safe and effective care whilst reducing the need for temporary staffing

At North Tees the overall planned nurse fills for July 2025 is 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, registered nurse and midwives (all bands) turnover for July 25 has decreased to 4.75% and although HCSW turnover increased to 8.26%, it is lower when compared to the same period last year (10.85%)

A year-on-year presentation was included within the collaborative workforce assurance meetings. All collaboratives showed an improvement across the domains reviewed monthly. This will be shared with staff to highlight the impact of the check and challenge process

North Tees and Hartlepool turnover for July 2025 has increased across all bands with registered nursing increasing to 5.12% and HCSW to 8.17%.

At North Tees, the NQN's in the Sep25 cohort have been appointed into permanent and fixed term roles throughout Trust. There has been approval to also appoint into forecasted vacancies to ensure that NQNs feel assured of their employment and reduces the risk of them moving to other Organisations for permanent posts. Recruitment is currently underway to support the plans to over recruit by 20wte RN on the NT site to further support safe staffing.

Due to continued difficulties with B3 HCSW recruitment at North Tees and Hartlepool, the current vacancy position sits at approx. 70wte. The introduction of the trainee health care support worker role has been approved to mitigate gaps in workforce and to support a 'grow your own' initiative. Trust wide recruitment centres were held in August 2025 and over 200 candidates were interviewed and 65wte were appointed. This 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. The on-boarding of this cohort of staff is underway with a planned day of induction and education scheduled for the 30 September 2025 with planned start dates from the 1<sup>st</sup> October 2025.

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 1<sup>st</sup> to the 5<sup>th</sup> September 2025. This week has 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 are now being collated and correlated with a view to producing an initial report of key finding/themes and proposed actions and recommendations over the next 6 weeks.

## 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 July 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.

The following areas at South Tees, during July 2025 showed a fill rate of less than 80% due to **patient acuity levels** and **staff sickness**:

#### Days

- Ward 11 – Older Persons Medicine
- Zetland - Stroke Rehabilitation
- Neonatal Unit
- Maternity Centre Friarage

#### Nights

- Ward 31 – Acute Assessment Unit
- Ainderby – Medical Ward
- Romanby – Medical Ward
- Maternity Centre – Friarage

The following areas had less than 80% fill due to a **reduced elective programme** during the period of reporting:

#### Days

- Ward 10 – Short Stay Elective
- Ward 22 – Paediatric Surgical Ward
- Ward 27 Elective Orthopaedic

In July 2025, the following areas at North Tees and Hartlepool showed a fill rate of less than 80%;

- Low RM and HCSW fill rate continued on delivery suite and ward 22 due to current vacancies - filled by Sep25 student cohort, short term sickness and a higher than normal number of WTE on maternity leave.
- Critical Care had low RN fill rate due to reduced acuity during this reporting period.
- Low HCSW fill rate on neonatal unit due to reduced activity.
- Low HCSW fill rate on SDU due to current adjustments to department templates in this line, this will be adjusted as end of Aug25.
- Low HCSW fill rate on Ward 28 due to increased short term sickness.
- Low HCSW fill rate on Ward 32 due to increased short term sickness and increased number of vacancies, which have been appointed into.
- Wards ACU, 24, 25, 26, 27, 28, 32, 33, 36, 40, and 42 had an increase in HCSW fill up to 105- 169% due to the increasing 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.

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

<b>Overall Ward Fill Rate</b>		<b>July 25</b>
	RN/RMs (%) Average fill rate – DAYS	91.3%
	HCA (%) Average fill rate – DAYS	94.5%
	NA (%) Average fill rate – DAYS	100%
	SNA (%) Average fill rate – DAYS	100%
	RN/RMs (%) Average fill rate – NIGHTS	94.5%
	HCA (%) Average fill rate – NIGHTS	104.7%
	NA (%) Average fill rate – NIGHTS	100%
	SNA (%) Average fill rate – NIGHTS	100%
	<b>Total % of Overall planned hours</b>	<b>98%</b>

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

<b>Overall Ward Fill Rate</b>		<b>June 2025</b>
	RN/RMs (%) Average fill rate – DAYS	90%
	HCSW (%) Average fill rate – DAYS	92%
	NA (%) Average fill rate – DAYS	100%
	SNA (%) Average fill rate – DAYS	100%
	RN/RMs (%) Average fill rate – NIGHTS	96%
	HCSW (%) Average fill rate – NIGHTS	117%
	NA (%) Average fill rate – NIGHTS	100%
	SNA (%) Average fill rate – NIGHTS	100%
	<b>Total % of Overall planned hours</b>	<b>99%</b>

- **Nurse Sensitive Indicators**

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

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

At South Tees, during July 2025, there were a total of 17 red flags raised relating to staffing. Twelve of the red flags were logged as “Shortfall in RN time” 3 logged as “Missed ‘intentional rounding’” and 2 logged as ‘Vital signs not assessed or recorded’. There were no red flags raised indicating less than 2 RNs on shift, however, the Safe Care log would provide a documented resolution in these instances.

Reminders are sent weekly via the E-Rostering team to Clinical Matrons to review and close any resolved Red Flags.

At North Tees, there was only one red flag raised in July 25, same as the month prior. The red flag was raised by ward 32 for 'shortfall in RN time' due to short term sickness and increased acuity on department due to enhanced care requirements. This was discussed during the daily safe staffing meeting with suitable redeployments being actioned and red flags closed down.

- **Datix/In-Phase Submissions**

At South Tees during July 25, there were 113 Datix submissions relating to staffing. Staff are encouraged to Datix any staffing related issues are reviewed and discussed as part of workforce assurance and governance meetings. The majority of Datix submissions, highlights a reduction in staffing on Ward 3, Ward 2, Neuro HDU and Ainderby. All shortages raised were managed through the Safe Care process throughout July.

At North Tees, in July 25 there was a decrease of in-phase reports relating to nurse staffing. A total of 7 were submitted by the Care groups, which have been summarised below;

- Delivery Suite - 3 due to delayed care linked to RM staffing levels and increased acuity, internal escalation plans followed to provide safe staffing levels and non-urgent care postponed.
- Ward 22- 2 linked to RM staffing levels due to increased acuity and short-term sickness, again internal escalation plans followed to provide safe staffing levels across maternity services.
- Community Midwifery- 1 linked to RM staffing levels and acuity of workload due to short term sickness, escalation plans followed by supporting from neighbouring community teams and all non-urgent care postponed.
- Ward 26- 1 due to lack of enhanced care worker for the number of enhanced care patients, however risk mitigated by auctioning suitable redeployment within the department.

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 July 2025, vacancies show as –41.06 WTE (RN and RM combined). The vacancy position as per the financial ledger indicates a vacancy of 137.11 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. A second recruitment drive is on planning

At North Tees, the B5 RN vacancy position remains positive across the in-patient wards and departments. In July 25 the vacancy level has increased 24.6 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 with the next NQN cohort for Sep25 following SLT approval in July 2025. An additional ‘over recruitment’ of 20wte RN is also forecasted to fill unfilled shifts due to long term sickness and maternity leave. Thus, reducing the reliance on bank and agency over the coming months (and as we move into the winter months).

At North Tees, the HCSW vacancy position across all services in July 25 with 63.32WTE with a forecasted vacancy exceeding 70wte by end of Sept 25. There is a planned improvement to this position following the approval to flip 65 WTE B3 vacancies into B2 trainee HCSW posts. These posts are now appointed into and will commence employment from 1<sup>st</sup> 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 July 2025 can be reviewed in Appendix 2.

**Table 2 South Tees site:**

	<b>Required CHPPD (Average)</b>	<b>Actual CHPPD (Average)</b>	<b>Variance</b>
May 2025	9.09	9.33	+0.24
June 2025	9.20	9.65	+0.45
July 2025	9.22	9.69	+0.47

July 25 shows that 18 inpatient areas are above the required average of CHPPD provision. Those that are below the required CHPPD are reflective of the current sickness and increased patient acuity. Twice daily safe care reviews plan and implement redeployment into unfilled shifts.

Wards 12 and 9 had the lowest CHPPD again in July 25 due to Ward 12 carrying 1x HCSW vacancy and staff sickness increasing from 8.3% to 12.7% month on month.



Ward 9 carries 4x HCSW vacancies and had 14.0% of staff off sick in July 25. This was +1.7% compared to June 25.

The vacancies for HCSW's have just been recruited into via the central HCSW process with the aim of start dates in September 25. Once recruited and on completion of supernumerary periods, we should see the negative CHPPD improve. The staff sickness is managed appropriately with Health Improvement Plans in place.

July 25 had an average sickness rate of 5.14% (RN's, RM's and HCSW's combined) showing the number of staff off sick is decreasing and will aid in reducing the reliance on temporary staffing. Due to the changing demands, temporary staffing is variable, with a concerted effort made to redeploy before exploring NHSP.

A weekly look forward review and monthly Workforce Assurance meetings with each collaborative allows triangulation of data including sickness and turnover rates. The wards and departments with the largest NHSP spend relate to those areas that have been highlighted as requiring an adjustment in establishment in the biannual SNCT establishment reviews.

**Table 3 North Tees site:**

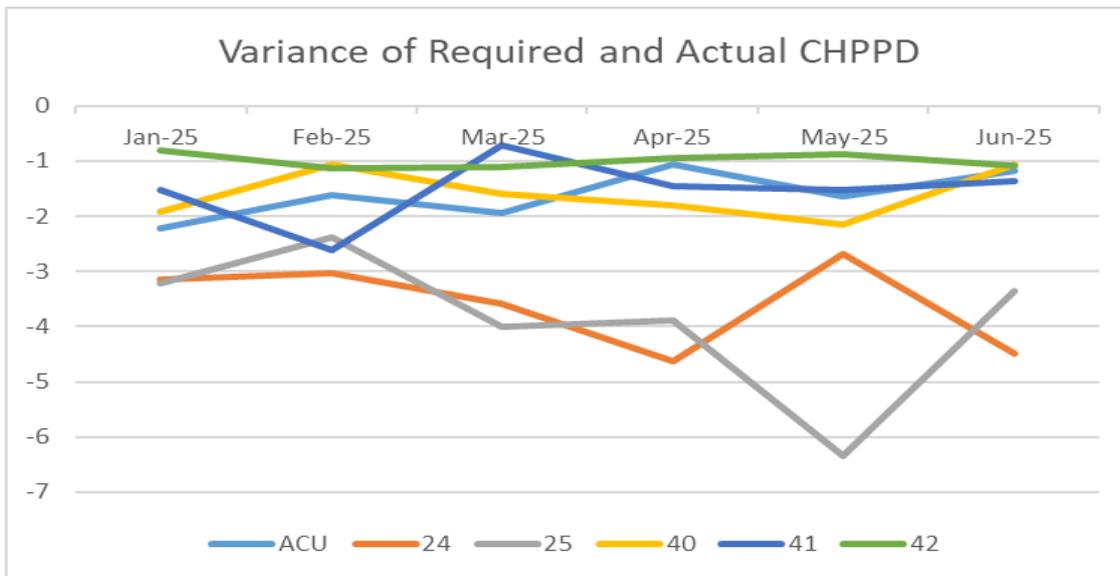
	<b>Required CHPPD (Average)</b>	<b>Actual CHPPD (Average)</b>	<b>Variance</b>
May 2025	9.55	10.49	+0.95
June 2025	9.25	10.06	+0.81
July 25	9.28	11.48	+2.20

In July 2025 the areas highlighting a higher variance level (>1) at North Tees, and thus, not delivering the required CHPPD were Cardiology, Respiratory, Gastroenterology, Endocrine and Elderly Care. This is reflective of the increased acuity in Respiratory and Endocrine (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 across the previous 6 month.

**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.

To provide further assurance in relation to safer nurse staffing, North Tees will carry out STEP week (Safer staffing, Timely care, Enhanced Care, Planned discharge), this is scheduled in Sep25 and will 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. Testing of the data collection tools is scheduled for the 8<sup>th</sup> Aug25.

Work continues with the Business Intelligence team to develop a nursing and midwifery workforce matrix to support the monthly triangulation of workforce metrics, patient quality and safety outcomes and professional judgement. Due to the move to Power BI, this work has been paused by BI so a manual version of this is currently being drafted as an interim measure to enable an element of testing.

- **Nurse Recruitment and Retention**

On the 5<sup>th</sup> August 2025, a Group 'over recruitment' proposal was approved at Group Management Team meeting, with an agreement to over recruit a total on 90wte B5 NQNs (70wte at South Tees and 20wte at North Tees). This will enable both sites to fill unfilled shifts linked to maternity leave and long-term absence, thus reducing the reliance on NHSP/agency.

All Sep25 NQNs have been allocated positions based on current and forecasted vacancies. Recruitment centres continue on a monthly basis, alternating the recruitment of HCSW and RN posts.

Safer Staffing workforce initiatives continue to be implemented. At both sites 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, nursing and midwifery bank and agency demand for July 25 has decreased by 25% compared to July 24. Bank filled hours have also decreased by 19% when compared to July 24.

Nursing agency use continues to be minimal at South Tees. July 25 showed that there was a total of 95 hours of nursing agency booked:

- Friarage Theatres (76 hours)
- Orthopaedic Theatres (19 hours)

A total of 354 ODP agency hours were utilised in July 25:

- Theatres FHN (206 hours)
- Cardio Theatres (129 hours)
- Orthopaedic Theatres (19 hours)

Although this demonstrates an increase month on month, it is 480 hours less compared to the same period last year.

Bank spend decreased by £152,971 (-11%) when compared to July 24. Agency spend decreased by 48% when compared to July 24.

The overall fill rate for bank and agency in July 25 was 84.2%. This has increased by 5.4% compared to the same period last year. The reduction in demand year on year provides a more reliable reflection of the requirements of the wards and therefore a more accurate 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 £947k lower than the previous year

- Agency spend is still lower than in any month last year and is £6k down on Jun-25 driven by Finance (YTD catch up in M3).
- Cell Path insourcing still makes up more than 50% of the remaining agency spend.

Bank spend YTD is £229k higher than previous year

- Bank increase is still significantly lower than agency reduction overall.
- Enhanced care in M4 £52k higher than the average of 24/25 and £6k higher than Jun-25. Biggest driver of in month increase is sickness

Locum spend YTD is £148k lower than previous year

- M4 spend is in line with 24/25 and YTD averages (suggesting higher spend in the first months of 24/25 – making target harder to achieve as year goes on, unless spend reduces)

Overtime spend YTD is 182k lower than previous year

- M4 spend has increased c. £17k from Jun-25
- New action for the TSFG is to move the authorisation for overtime to a break glass escalation. This is currently being drafted with a Trust wide communications strategy.

- **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) to Board in Nov25.
- Adult in-patient SNCT, ED SNCT and Community CNSST data collection planned for Oct/Nov 2025
- New Paeds SNCT launch planned for Autumn 2025, 1<sup>st</sup> cycle of data collection to follow
- Introduction of Trainee HCSW (65wte B2) from Oct25 – induction, initial education and KIT days planned.
- Collation and correlation of STEP data throughout September 2025.
- Recruitment centre planned for the over recruitment of 20wte RN - September 2025
- Focus on nursing workforce development with multiple new career pathways including aspirant leader.

At South Tees the current key priorities are as follows:

- Scoping exercise to identify job descriptions and titles to support National Job profiling project
- Ongoing of capacity and demand for specialist nurses relating to competencies
- HCSW appointed from generic process to undertake training and care certificate in line with start
- Future Nursing pipelines and expected outputs under review to forecast need for nurse apprenticeships

- **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.

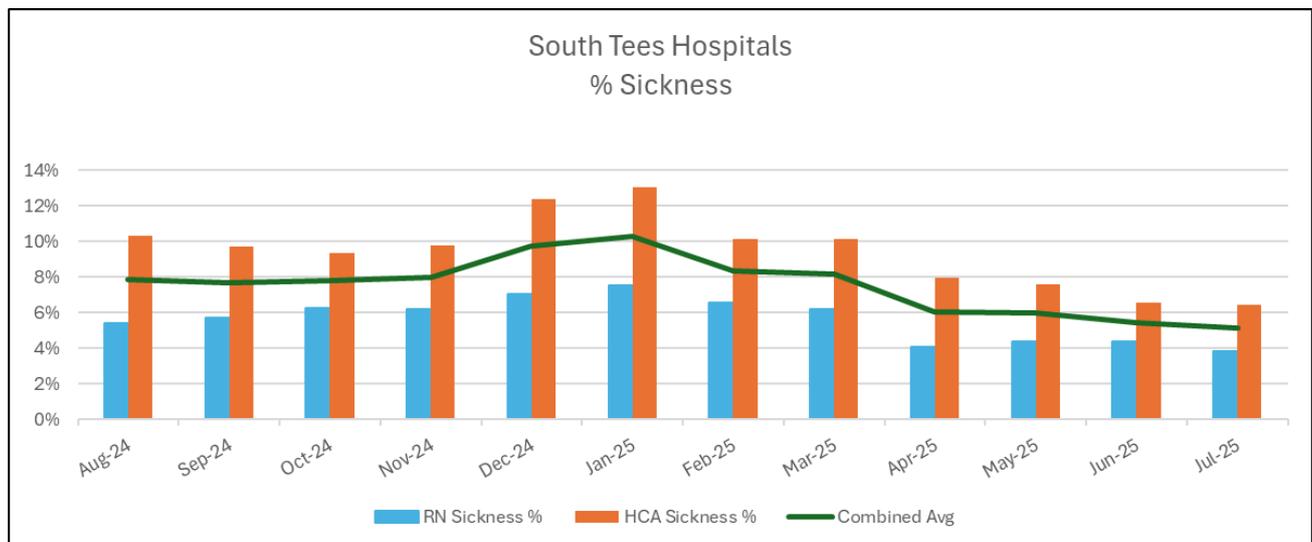
The Board are asked to note the assurance presented that arrangements are in place to monitor, support and mitigate any impact of reduced staffing levels or skill mix in relation to patient safety.

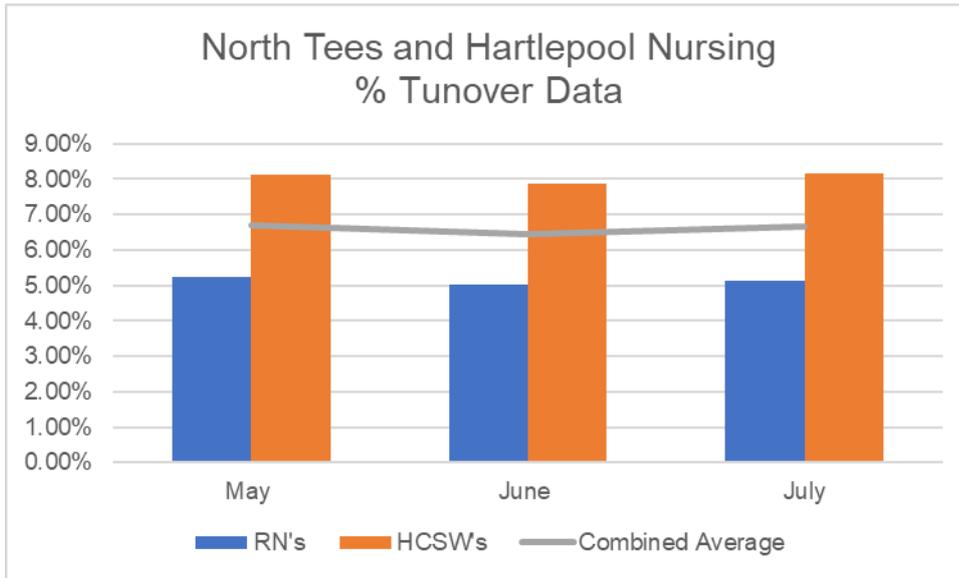


The Board are asked to acknowledge the development of this report in the coming months to ensure that the two current reporting methods across both site teams continue to align. This will provide the continued assurance that arrangements are in place to staff services with the right skills in in the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

## Appendix 1

### Nursing Turnover July 2025



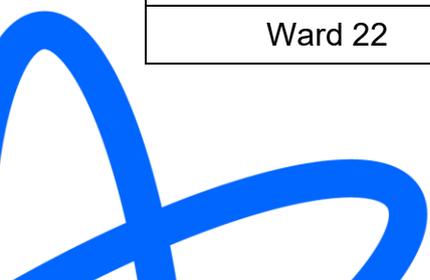


## Appendix 2

### South Tees Average CHPPD Breakdown by Ward (July 2025):

Ward	Average of Required CHPPD	Average of Actual CHPPD	Variance
Ward 1	9.09	9.22	0.13
Ward 31	9.35	6.52	-2.83
Ward 2	6.39	5.51	-0.88
Ward 3	8.31	5.69	-2.62
Ward 4	8.54	6.55	-1.99
Ward 5	5.75	4.89	-0.86
Ward 6	6.01	6.02	0.01
Ward 7	5.16	4.62	-0.54
Ward 8	5.91	5.52	-0.39
Ward 9	8.50	4.79	-3.71

Ward 11	8.67	6.51	-2.16
Ward 12	10.24	6.89	-3.35
Ward 14	6.04	5.57	-0.47
Ward 24	7.94	8.11	0.17
Ward 25	9.79	8.72	-1.07
Ward 26	8.85	6.57	-2.28
Ward 27	8.67	11.69	3.02
Ward 28	8.37	6.52	-1.85
Ward 29	5.18	5.64	0.46
Cardio MB	7.13	9.16	2.03
Ward 32	7.25	6.69	-0.56
Ward 33	7.87	6.87	-1.00
Ward 34	7.83	5.99	-1.84
Ward 35	7.74	8.17	0.43
Ward 36	6.16	5.62	-0.55
Ward 37 - AMU	11.05	8.73	-2.32
Spinal Injuries	9.58	8.42	-1.16
CCU	14.61	11.31	-3.31
Critical Care	19.04	26.31	7.28
CICU JCUH	23.03	26.77	3.74
Cardio HDU	10.11	12.77	2.66
Ward 24 HDU	11.00	24.92	13.93
CDU FHN	8.07	7.32	-0.75
Ainderby FHN	10.67	7.80	-2.87
Romanby FHN	7.09	6.68	-0.41
Gara FHN	6.30	12.60	6.30
Rutson FHN	7.91	7.92	0.01
Friary	8.12	8.16	0.04
Zetland Ward	9.64	6.97	-2.66
Tocketts Ward	7.71	6.20	-1.50
Ward 21	9.17	12.83	3.67
Ward 22	13.04	16.61	3.58



Neonatal Unit (NNU)	12.92	14.38	1.46
Paediatric Critical Care (PCCU)	16.00	31.70	15.70
<b>Grand Total (Average)</b>	<b>9.22</b>	<b>9.69</b>	<b>0.47</b>

## North Tees Site - CHPPD by ward for July 2025

Row Labels	Average of Required CHPPD	Average of Actual CHPPD	Variance
Acute Cardiology Unit	7.71	6.10	-1.61
Critical Care North Tees	20.21	28.52	8.31
Elective Care Unit	6.67	26.99	20.31
Emergency AMB	7.68	10.49	2.80
Neonatal Unit	11.12	36.10	24.98
Paediatrics	10.23	22.58	12.34
SDU	11.11	11.56	0.44
Ward 24 (Respiratory)	8.32	5.96	-2.36
Ward 24 RSU	13.77	10.58	-3.20
Ward 25 (Respiratory)	8.78	6.46	-2.33
Ward 25 RSU	12.74	10.47	-2.27
Ward 26	8.08	6.10	-1.98
Ward 27 (Gastroenterology)	8.61	6.83	-1.78
Ward 28 (Surgery)	6.01	5.77	-0.24
Ward 31 (Surgical Observation Unit)	8.67	9.04	0.37
Ward 32 (Fragility Fracture)	8.55	8.60	0.05
Ward 33 (Orthopaedic & Spinal)	6.10	6.25	0.15
Ward 36	9.14	7.27	-1.87
Ward 38	6.37	5.74	-0.64
Ward 40 (Acutev Elderly)	8.86	7.89	-0.96
Ward 41 (Stroke Unit)	7.85	6.30	-1.55
Ward 42 (Elderly Rehabilitation)	7.67	6.97	-0.70
<b>Grand Total</b>	<b>9.28</b>	<b>11.48</b>	<b>2.20</b>