

		Establishment										Weekday Staffing Levels Day Shift				Weekday Staffing Levels Night Shift				Weekend Alteration			
Directorate	Ward	Number of Beds	Current Funded RN WTE	Current Funded HCA WTE	Recommended RN WTE	Recommended HCA WTE	In Post RN WTE	In post HCA WTE	Planned Supervisory Ward Manager WTE	Recommended RN V Funded RN WTE	Recommended HCA V Funded HCA WTE	RN	HCA	RN to Patient Ratio	Skill Mix RN:HCA	RN	HCA	RN to Patient Ratio	Skill Mix RN:HCA	RN Day	HCA Day	RN Night	HCA Night
Medicine	ARCU	12										6		1:2		6		1:2					
	Respiratory Unit	36	56.79	30.5	57.1	30.8	48.15	27.43	0.4	+0.3	+0.3	5	6	1:7.2	45:55	5	6	1:7.2	45:55				
	Comments	Respiratory Unit comprises of 12 bed Acute respiratory care Unit (level 2 care, where RN to patient ratio is required as 1:2), Westcliff: 20 bed respiratory ward (no level 2) and 12 respiratory beds on Rochford ward. Professional Judgement Review no change recommended																					
	Blenheim	27	18.64	17.79	19.75	24.13	14.41	15.31	0.4	+1.2	+6.3	4	4	1:4	50:50	3	3	1:9	50:50				
	Comments	2 escalation bed were open on Blenheim ward throughout the data collection period. Increased acuity due to bed pressures as patients with lower acuity transferred to outlying wards. Recommend 1 Band 4 9-5 Mon-Fri																					
	Stroke Unit	40	36.57	40.67	37.11	45.38	26.73	35.05	0.4	+4.1	+4.71	7	9	1:5.7	44:56	7	7	1:5.7	50:50				
	Comments	up to 7 escalation beds were open on Paglesham Ward and 4 Beds on Benfleet Ward during the data collection period. Review in April / May as increased establishment required if additional beds remain open																					
	Eleanor Hobbs	35	23.51	22.87	26.14	26.14	14.23	19.75	0.4	+2.63	+3.27	5	5	1:7	50:50	4	4	01:08.7	50:50				
	Comments	Increased acuity due to bed pressures as patients with lower acuity transferred to outlying wards. Recommend 1 additional RN 9-5 Mon-Fri to enable co-ordinator role																					
	Princess Anne	29	18.59	25.22	19.26	29.5	15.32	22.2	0.4	+0.67	+4.28	4	6	1:7.25	40:60	3	4	01:09.6	40:60				
	Comments	1 escalation bed during assessment period. No change recommended, daily Acuity & Dependency Reviews in place - additional HCA requested ad hoc as required.																					
	Windsor	30	18.89	25.42	18.59	27.59	14.41	22.91	0.4	-0.3	+2.17	4	6	1:7.5	40:60	3	4	01:10	40:60				
	Comments	Increased acuity due to bed pressures as patients with lower acuity transferred to outlying wards. No change recommended, daily Acuity & Dependency Reviews in place - additional HCA requested ad hoc as required.																					
	CCU/Hopkins	29	36.4	20.33	31.4	16.91	27.4	18.52	0.4	-5	-3.42	7	4	1:7.25	65:35	7	4	01:04	65:35				
	Comments	RN funding in place to allow for level 2 patients in CCU if required. Daily acuity & dependency reviews in place. Staff deployed to other areas if safe and appropriate when low number of level 2 patients																					
Estuary	14	13.5	11.17	20.37	13.89	11.84	9.44	0.4	+6.87	+2.72	3	2	1:4.6	60:40	2	2	01:07						
Comments	10 escalation beds in use during SNCT data collection period as part of Winter planning. Recommend review in April / May																						

	AMU	24	28.88	23.91	N/A	N/A	21.13	22.39	0.4	N/A	N/A	6	5	1:4	60:40	6	4	01:05					
	Ambulatory Emergency Care	10	15.42	13.89	N/A	N/A			0.4			2	2	1:5	50:50								
No change recommended at this time																							
Direcorate		Establishment										Weekday Staffing Levels Day Shift				Weekday Staffing Levels Night Shift				Weekend Alteration			
	Ward	Number of Beds	Current Funded RN WTE	Current Funded HCA WTE	Recommended RN WTE	Recommended HCA WTE	In Post RN WTE	In post HCA WTE	Planned Supervisory Ward Manager WTE	Recommended RN V Funded RN WTE	Recommended HCA V Funded HCA WTE	RN	HCA	RN to Patient Ratio	Skill Mix RN:HCA	RN	HCA	RN to Patient Ratio	Skill Mix RN:HCA	RN Day	HCA Day	RN Night	HCA Night
D&T	Elizabeth Loury	22	18.64	15.25	18.64	18.64	15.92	13.71	0.4	equal	+3.39	4	4	1:5.5	50:50	3	2	1:7.3	60:40				
	Comments	RN funding and skill mix to support complex drug regimen. No change recommended, daily Acuity & Dependency Reviews in place - additional HCA requested ad hoc as required.																					
	Bedwell	20	21.02	13.89	11.62	17.43	15.64	13.6	0.4	-9.4	+3.54	3	4	1:6.6	40:60	3	1	1:6.6	75:25				
	Comments	Bedwell RN fte funded staffing includes staffing for the haematology oncology infusion suite which is not included in the SNCT acuity & dependency figures. No change as funded establishment includes delivery of separate infusion service																					
Directorate		Establishment										Weekday Staffing Levels Day Shift				Weekday Staffing Levels Night Shift				Weekend Alteration			
	Ward	Number of Beds	Current Funded RN WTE	Current Funded HCA WTE	Recommended RN WTE	Recommended HCA WTE	In Post RN WTE	In post HCA WTE	Planned Supervisory Ward Manager WTE	Recommended RN V Funded RN WTE	Recommended HCA V Funded HCA WTE	RN	HCA	RN to Patient Ratio	Skill Mix RN:HCA	RN	HCA	RN to Patient Ratio	Skill Mix RN:HCA	RN Day	HCA Day	RN Night	HCA Night
Surgery	Balmoral	16	12.79	14.52	13.44	20.17	12.38	15.67	0.4	+0.65	+5.65	2	3	01:08	40:60	2	2	1:8	50:50				
	Comments	Balmoral ward transferred to medical ward for majority of SNCT assessment period leading to increased acuity. Bed base and case mix changed over winter, recommend review in April / May																					
	Hockley	25	15.32	12.71	19.1	19.1	17.38	10.39	0.4	+3.78	+6.39	3	3	1:8.3	50:50	3	2	1:8.3	60:40				
	Comments	1 escalation bed during SNCT assessment period. Routine and non urgent surgery cancelled during data collection period, increased acuity with medical patients admitted as outliers. Review in April / May																					
	Southbourne	30	18.64	12.46	24.99	16.66	13	11.07	0.4	+6.35	+4.2	4	3	1:7.5	60:40	3	2	1:10	60:40	*3	3	3	2
	Comments	Unable to close 6 beds at weekend as agreed in winter plan, during SNCT assessment period. Routine and non urgent surgery cancelled during data collection period, change in case mix with medical patients admitted as outliers. Bed base and case mix changed over winter, recommend review in April / May																					

Stambridge	19	18.64	12.46					13	11.07	0.4			3	2	1:6.3								
	1A beds	5			26.12	11.19				+7.48	-1.27		2		1:2.5	70:30							
	Comments	Stambridge includes 1A beds which have increased ratio of 1:2.5. Medical patients admitted as outliers resulting in changed acuity and dependency. No change recommended at present review in April / May																					
	Surgical Assessment	14	24.86	11.99	N/A	N/A	20.48	14.68	0.4	N/A	N/A		4	2	1:3.5	60:40	4	2	1:3.5				
Comments	Surgical Assessment staffing assessed using professional judgment model. No change recommended at this time																						
	Establishment										Weekday Staffing Levels Day Shift				Weekday Staffing Levels Night Shift				Weekend Alteration				
Ward	Number of Beds	Current Funded RN WTE	Current Funded HCA WTE	Recommended RN WTE	Recommended HCA WTE	In Post RN WTE	In post HCA WTE	Planned Supervisory Ward Manager WTE	Recommended RN V Funded RN WTE	Recommended HCA V Funded HCA WTE	RN	HCA	RN to Patient Ratio	Skill Mix RN:HCA	RN	HCA	RN to Patient Ratio	Skill Mix RN:HCA	RN Day	HCA Day	RN Night	HCA Night	
MSK	Castle Point	32	19.2	20.33	23.78	29.07	14.31	26.41	0.4	+4.58	+8.74	4	5	1:8	45:55	4	3	1:8	48:58				
Comments	Increased acuity due to outlying medical patients. No change recommended at present																						
	Shopland	32	18.64	19.79	23.65	23.65	14.63	14.77	0.4	+5.01	+3.86	4	4	1:8	50:50	3	3	1:8	50:50				
Comments	Increased acuity due to outlying medical patients and MSK trauma patients. Routine and non urgent surgery cancelled during data collection period & 1 additional bed. No change recommended at present																						
Paediatrics	Neptune	21	34.74	11.52	N/A	N/A	29.25	8.47	0.4	N/A	N/A	6	2	1:3.5	75:25	6	2		75:25				
	Comments	A paediatric emergency pathway review is taking place. Recommend review of nurse staffing requirements once new model agreed																					
	Neonatal	16	32.52	N/A	N/A		31.44	N/A	0.4	N/A	N/A	5	2	1:3.2	70:30	5	2		70:30				
Comments	No change recommended as required to follow BAPN																						
Gynae	Eastwood	17	13.52	10.17	16.38	10.9	13.29	9.56	0.4	+2.86	+0.73	3	2	1:5.6	60:40	3	1	1:5.6	75:25				
	Comments	Change in case mix over winter period, routine surgery cancelled and large proportion of patients were medical admissions, changing expected acuity & dependency for this speciality. No change recommended at this time																					

Directorate	Department	Establishment						
		Current Funded RN WTE	Current Funded HCA WTE	Recommended RN WTE	Recommended HCA WTE	In Post RN WTE	In post HCA WTE	Recommended RN V Funded RN WTE
Emergency Dept	ED	80.3	25.99			64.92	18.65	
		No change recommended at this time.						
	Paediatric ED							
		Under review to provide 24 hour service and review of paediatric emergency pathway						

Staffing Levels				
Days				
RN	HCA	Skill Mix RN:HCA	HCA	Skill Mix RN:HCA
11	5		4	
2				

