

**REPORT TO THE TRUST BOARD
 - 26th February 2015**

Title	Safer Staffing – January 2015 Monthly Review
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Executive summary

The aim of this report is to provide assurance to the Trust Board on the Trusts response to the National Quality Board (NQB) safer staffing guidance, to confirm the Trust Board responsibilities and to provide a summary analysis of the January 2015 Safer Staffing data.

In November 2013, the NQB issued guidance to optimise nursing, midwifery and care staffing capability and capacity. The guidance specified expectations for the Trust Board to receive and publically publish reports describing the staffing capacity and capability on both a shift-by-shift basis.

In response to the NQB guidance, the Trust implemented a ‘Safer Staffing’ portal across all inpatient areas which provided a real time, co-ordinated approach for wards to record staffing levels, capability and ward acuity information for each shift from 1st April 2014.

January 2015 submission summary:

- 3357 (97.6%) out of 3441 forms were completed by ward staff;
- During January 2015, the inpatient environments were substantively staffed at 74.1%, with the remaining staff made up of 20.9% bank and 5.0% agency;
- 5 wards were able to meet their planned staffing levels on all occasions (100%), with a further 25 wards reporting achievement on 90% or more occasions.

The ‘Safer Staffing’ analysis uses data submitted from inpatient environments as at 11th February 2015.

Recommendation

The Trust Board is recommended to:

- receive this report as an accurate and clear reflection of the current Trust position in regards to the NQB Safe Staffing requirements;
- receive assurance that all efforts are being employed to ensure the highest level of data quality possible, with detailed internal oversight and scrutiny in place over both completion and performance;
- consider the content and format of the report and advise of required amendments prior to the production of February 2015 Monthly Review report

Related	Trust	Deliver safe, effective, patient-centered care in the top 20% of our
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objectives	peers
Risk and assurance	BAF: 116 If we are unable to recruit or retain our staff then skill mix may be inadequate for service delivery and the provision of quality care
Legal implications/ regulatory requirements	CQC Outcomes 12, 13 and 14 relating to staff
Evidence for the Quality Governance Framework	Paper evidences board awareness of potential risks to quality(1B); appropriate quality information is being analysed and challenged (4A); and gives assurance of the robustness of the quality information (4B)
Presenting Director	Adrian Childs – Chief Nurse/ Deputy Chief Executive
Author(s)	Laura Hughes – Integrated Information Manager
*Disclaimer: This report is submitted to the Trust Board for amendment or approval as appropriate. It should not be regarded or published as Trust Policy until it is formally agreed at the Board meeting, which the press and public are entitled to attend.	

Introduction/Background

1. In November 2013, the National Quality Board (NQB) issued guidance to optimise nursing, midwifery and care staffing capability and capacity. The guidance followed national research which demonstrated that staffing levels are linked to the safety of care; and a right for patients and the public to have access to easily accessible information to know how their hospitals and inpatient units are being run.
2. The guidance specified a number of expectations which trusts needed to commit to by the end of June 2014:
 - a) to present a report to Board every 6 months describing the staffing capacity and capability, provide an establishment review and use evidence based tools where possible;
 - b) to display ward level information about the nurses, midwives and care staff deployed for each shift compared to what has been planned;
 - c) to present a report to Board each month containing details of planned and actual staffing on a shift by-shift basis at ward level for the previous month;
 - d) to publish the monthly report on the Trust's website and link or upload the report to the relevant hospital(s) webpage on NHS Choices.
3. This paper responds to expectation c) *to present a report to Board each month containing details of planned and actual staffing on a shift by-shift basis at ward level for the previous month*

Aim

4. The aim of this report is to provide the Board with a summary analysis of January 2015 Safer Staffing data

Recommendations

5. It is recommended to the Trust Board to receive this report as an accurate and clear reflection of the current Trust position in regards to the NQB Safe Staffing requirements;
6. It is recommended to the Trust Board to receive assurance that all efforts are being employed to ensure the highest level of data quality possible, with detailed internal oversight and scrutiny in place over both completion and performance;
7. It is recommended to the Trust Board to consider the content and format of the report and advise of required amendments prior to the production of February 2015 Monthly Review report.

Discussion

Trust Board Responsibilities from June 2014

8. Each month the Chief Nurse will present to the Trust Board an analysis of the following reports:
 - a) No. of Safer Staffing Submissions
 - b) Use of Temporary Staff vs Substantive Staff
 - c) Planned vs actual number of staff
 - d) Skill mix of nursing staff

9. Every 6 months, the board will be presented with an 'Inpatient staffing establishment review' report which will provide an overview of the work being undertaken to ensure safer staffing standards are met across all our inpatient wards.

10. These reports are made publically available via the NHS Choices website and our Trust internet page

Initial Analysis of Safer Staffing Data for January 2015

11. It should be noted that the following analysis is based on data held in the Safer Staffing portal as at 11th February 2015. Planned staffing levels have been taken from eRoster where possible.

Submissions Analysis

12. In January 2015, a total of 3441 safer staffing submissions were expected to be completed. This accounts for there being 37 wards completing 3 submissions over 31 days:
 - a) 3357 (97.6%) out of 3441 forms were completed by ward staff;
 - b) 84 (2.4%) forms were not entered and action was taken to complete these centrally using information from eRoster where available. These submissions will require wards to enter the relevant patient acuity and bed occupancy information.

13. Updates are sent to ward matrons, lead nurses and key safer staffing leads to validate submissions.

14. The Chief Nurse has given responsibility to lead nurses for ensuring the accurate completion of the safer staffing information.

Temporary Staffing

15. During January 2015, the inpatient environments were substantively staffed at 74.1%, with the remaining staff made up of 20.9% bank and 5.0% agency.

	Substantive %	Bank %	Agency %
Qualified Staffing	87.7%	7.2%	5.0%
Unqualified Staffing	65.7%	29.3%	5.0%
Total Staffing	74.1%	20.9%	5.0%

16. The wards which are using more than 40% temporary staff are:

	Temporary Staffing %	Of which Bank %	Of which Agency %
Beaumont	42.5%	41.3%	1.2%
Belvoir Unit	46.6%	43.9%	2.7%
Heather	43.5%	40.5%	3.0%
Thornton	50.2%	48.0%	2.2%
HP Griffin	42.3%	41.7%	0.6%
SH Skye Wing	42.9%	42.9%	0.0%
EC Coleman	44.8%	34.5%	10.3%
Langley	43.8%	43.8%	0.0%

17. It should be noted that ML Buttercup, CV Ellistown 2 and CV Snibston 1 were substantively staffed at 90% or above.

Actual vs Planned Analysis

18. The Trust has identified 3 methodologies for measuring staffing level performance across our inpatient units.

Methodology	Measure	Measure Source
Fill Rate Analysis (National UNIFY Return)	Actual hours worked divided by Planned hours (split by Qualified/ HCSW)	NHS TDA (Trust Development Authority)
Skill Mix	1:8 qualified nurse to patient ratio plus a 60:40 skill mix ratio of qualified nurses to HCSWs	RCN (Royal College of Nursing) guidelines
Planned Staffing Levels Achieved by Shift	Actual headcount worked divided by Planned headcount	LPT QIP Board

Fill Rate Analysis (National UNIFY Return)

19. The Trust is required by NHS TDA to publish our inpatient staffing levels on the NHS Choices website via a national UNIFY return. This return requires us to identify the number of hours we *plan* to utilise with nursing staff and the number of hours *actually* worked during each month. This information allows us to calculate a 'fill rate' which can be benchmarked nationally against other trusts with inpatient provisions.
20. This methodology takes into account skill mix and bed occupancy which allow us to amend our 'Planned Staff Hours' based on the needs of the ward and is the most reflective measure of staffing on our inpatient wards.
21. 'Planned Staff Hours' are calculated using the RCN guidance of 1:8 qualified nursing to patient ratio. 1 qualified nurse is equal to 7.5 hours of planned work.
22. The 'fill rate' is calculated by dividing the 'planned staff hours' by the 'actual worked staff hours'.
23. The fill rate will show in excess of 100% where shifts have utilised more staff than planned or where patient acuity was high and necessitated additional staff.
24. A detailed summary of the January 2015 UNIFY submission will be published on NHS Choices at the end of February 2015 (*See annex 1 – UNIFY Fill Rate Submission*).
25. During January 2015, 9 inpatient environments had an average fill rate of less than 80%. Of these wards, 1 is a short break home and would not necessitate the same staffing levels as an inpatient ward.

Site Name	Ward name	Day		Night	
		Average fill rate – registered nurses (%)	Average fill rate – care staff (%)	Average fill rate – registered nurses (%)	Average fill rate – care staff (%)
THE BRADGATE MENTAL HEALTH UNIT	Ashby	86.6%	142.7%	67.7%	267.7%
THE BRADGATE MENTAL HEALTH UNIT	Beaumont	84.9%	166.9%	53.2%	364.5%
THE BRADGATE MENTAL HEALTH UNIT	Bosworth	81.7%	125.8%	62.9%	203.2%
THE BRADGATE MENTAL HEALTH UNIT	Heather	82.8%	151.6%	64.5%	274.2%
THE BRADGATE MENTAL HEALTH UNIT	Thornton	75.3%	156.5%	61.3%	419.4%
THE BRADGATE MENTAL HEALTH UNIT	Watermead	72.0%	146.8%	66.1%	219.4%
H & B HOSPITAL WARDS	HB North Ward	103.2%	163.1%	190.3%	59.7%
Bennion Centre/Langley	Langley	147.6%	119.4%	67.7%	232.3%
THE GRANGE	The Grange*	48.4%	188.7%	0.0%	200.0%

*Short break home(s)

Skill Mix

26. A 'planned skill mix' calculation has been used to identify whether the appropriate registered nursing to health Care Support Worker (HCSW) ratio was in place on each shift.
27. We currently have 2 measures of 'planned skill mix' staffing:
- Budgeted establishment
and
 - RCN guidelines of 1:8 qualified nurse to patient ratio plus a 60:40 skill mix ratio of qualified nurses to HCSWs
28. For the 'planned skill mix' calculation we have chosen to use the measure which results in the lowest staffing levels on a shift by shift basis as this will best account both our budgeted establishment and where beds are not being used for patient care. Where bed occupancy was not recorded, we have used the budgeted establishment as our 'planned skill mix'.
29. It should be noted, these figures are **not** comparable to those shown in the 'Planned Staffing Levels Achieved by Shift' table
30. During January 2015, 11 of our wards met the minimum of 1:8 ratio or the planned staffing based on the budgeted establishment on less than 80% of occasions

Ward	Occasions Skill Mix Met
Ashby	50.54%
Aston	53.76%
Beaumont	33.33%
Bosworth	37.63%
Heather	40.86%
Thornton	21.51%
Watermead	20.43%
BC Welford	72.04%
HB North Ward	65.59%
Langley	62.37%
The Grange	31.52%

Planned Staffing Levels Achieved by Shift

31. 'Planned Staffing Levels by Shift' is based purely on the budgeted headcount and does not reflect the level of bed occupancy or changes in acuity in any of the in-patient environments. It also does not account for skill mix between qualified nurses and HCSWs.

32. The 'planned staffing levels achieved by shift' is calculated by dividing the total number of shifts (early, late, night) where the planned staffing level was achieved by the total number of shifts (early, late, night) worked. This methodology is comparable with the new QIPP report.
33. During January 2015, inpatient environment wards were each required to cover 93 shifts (based on 3 shifts per day over 31 days) with appropriate staffing and report the planned versus actual staffing for each of those shifts.
34. During this period, 5 wards were able to meet their planned staffing levels on all occasions (100%). These wards were Belvoir Unit, Willows Unit, EC Coleman, EC Gwendolen, Agnes Unit. A further 25 wards reported achievement on 90% or more occasions.
35. Initial analysis of the planned versus actual data suggests that 5 wards have achieved their planned staffing levels on less than 80% of shifts.
36. The wards that achieved the planned staffing levels on less than 80% of occasions are:

Ward	Planned Staffing Levels Achieved by Shift
EC Wakerley	67.7%
SL Ward 1 Stroke**	68.8%
3 Rubicon Close*	0.0%
The Gillivers*	0.0%
The Grange*	0.0%

* Rubicon, Gillivers and the Grange are short break homes and retain different staffing levels to those used for the Trust inpatient areas. As the NHS England requirement for reporting is that they are reported in the same way it is acknowledged that they will always be seen as an outlier.

** The stroke wards are staffed flexibly within their budgeted establishment to account for shifts where patient acuity is high.

Summary Analysis

		Fill Rate Analysis (National UNIFY Return)				Skill Mix Met	Budgeted Staffing Levels Met	% Temporary Staffing
		Day (Early & Late Shift)		Night				
Ward Group	Ward name	Actual Hours Worked divided by Planned Hours				(based on 1:8 plus 60:40 split)	Planned headcount vs actual headcount worked	
		Average % fill rate registered nurses	Average % fill rate care staff	Average % fill rate registered nurses	Average % fill rate care staff			
Threshold		>= 80%	>= 80%	>= 80%	>= 80%	>= 80%	>= 80%	<20%
Bradgate MHU	Ashby	86.6%	142.7%	67.7%	267.7%	50.54%	96.8%	37.4%
Bradgate MHU	Aston	82.2%	169.4%	87.1%	348.4%	53.76%	98.9%	33.8%
Bradgate MHU	Beaumont	84.9%	166.9%	53.2%	364.5%	33.33%	96.8%	42.5%
Belvoir ICU	Belvoir Unit	233.9%	583.9%	106.5%	645.2%	100.00%	100.0%	46.6%
Bradgate MHU	Bosworth	81.7%	125.8%	62.9%	203.2%	37.63%	94.6%	26.8%
Bradgate MHU	Heather	82.8%	151.6%	64.5%	274.2%	40.86%	94.6%	43.5%
Bradgate MHU	Thornton	75.3%	156.5%	61.3%	419.4%	21.51%	95.7%	50.2%
Bradgate MHU	Watermead	72.0%	146.8%	66.1%	219.4%	20.43%	95.7%	28.2%
Herschel Prins	HP Griffin	195.2%	354.8%	100.0%	371.0%	98.92%	94.6%	42.3%
Herschel Prins	HP Phoenix	126.6%	162.9%	96.8%	108.1%	89.25%	97.8%	26.1%
Mill Lodge	ML Bluebell	153.2%	247.6%	112.9%	206.5%	97.85%	91.4%	15.1%
Mill Lodge	ML Buttercup	116.1%	136.0%	100.0%	96.8%	86.02%	93.5%	7.6%
Stewart House	SH Skye Wing	127.4%	143.0%	103.2%	156.5%	94.62%	97.8%	42.9%
The Willows	Willows Unit	143.1%	198.8%	167.7%	202.4%	98.92%	100.0%	17.0%
Bennion Centre/ Langley	BC Kirby	97.4%	201.6%	100.0%	122.6%	81.72%	96.8%	11.2%
Bennion Centre/ Langley	BC Welford	87.1%	225.0%	100.0%	116.1%	72.04%	97.8%	21.9%
Evington Centre	CB Beechwood	109.7%	197.6%	93.4%	91.8%	92.47%	92.5%	19.2%
Evington Centre	CB Clarendon	95.4%	207.3%	100.0%	121.0%	90.32%	91.4%	22.0%
Evington Centre	EC Coleman	104.0%	294.4%	98.4%	245.2%	96.77%	100.0%	44.8%
Evington Centre	EC Gwendolen	97.6%	222.6%	91.9%	190.3%	88.17%	100.0%	34.8%
Evington Centre	EC Wakerley	104.8%	196.0%	101.6%	116.1%	90.32%	67.7%	22.2%
Fielding Palmer Hospital	FP General	100.0%	112.9%	100.0%	-	97.85%	98.9%	17.2%

Melton Mowbray Hospital	MM Dalglish	99.2%	125.0%	100.0%	103.2%	98.92%	98.9%	11.6%
Rutland Hospital	Rutland	100.0%	160.8%	103.3%	100.0%	95.70%	91.4%	17.4%
St Lukes	SL Ward 1 Stroke	97.4%	204.8%	95.2%	95.2%	82.80%	68.8%	16.0%
St Lukes	SL Ward 3	95.2%	109.7%	103.2%	103.2%	93.55%	97.8%	11.3%
Coalville Hospital	CV Ellistown 2	109.7%	193.2%	100.0%	100.0%	95.70%	98.9%	7.6%
	CV Snibston 1	108.1%	237.9%	96.8%	98.4%	97.85%	80.6%	3.3%
Hinckley & Bosworth Hospital	HB East Ward	91.9%	212.1%	103.2%	119.4%	82.80%	93.5%	18.7%
Hinckley & Bosworth Hospital	HB North Ward	103.2%	163.1%	190.3%	59.7%	65.59%	94.6%	14.7%
Loughborough Hospital	Lough Swithland	105.6%	196.0%	90.3%	180.6%	96.77%	96.8%	14.4%
Bennion Centre/ Langley	Langley	147.6%	119.4%	67.7%	232.3%	62.37%	88.2%	43.8%
Adolescent Psychiatric Unit	Oakham	131.9%	155.5%	106.6%	126.2%	91.40%	93.5%	37.2%
3 Rubicon Close	3 Rubicon Close	119.4%	172.6%	100.0%	125.8%	96.77%	0.0%	13.1%
Agnes Unit	Agnes Unit	162.1%	429.0%	95.2%	396.8%	96.77%	100.0%	23.9%
Gillivers	Gillivers	101.6%	121.0%	87.1%	112.9%	91.40%	0.0%	12.5%
The Grange	The Grange	48.4%	188.7%	0.0%	200.0%	31.52%	0.0%	18.8%

Conclusion

37. All wards across the community hospitals and mental health services for older people have contingency plans to manage risk when staffing numbers fall below the budgeted levels. In community hospitals, when this occurs contact is made with Talent agency to procure staff for shifts. Substantive staff are asked to work additional shifts or to swap shifts to cover the shortfall. The acuity of patients is assessed at all sites and dependent upon the emerging risks patients or staff may be moved between wards. The supernumerary band 7 ward managers also backfill clinical shifts and the senior matrons base themselves at sites which may be vulnerable.
38. Actions are scheduled to ensure the Trust is compliant against the NQB expectations and associated deadlines; however ongoing support is essential from clinical divisions to ensure the Safer Staffing forms are submitted in a timely and accurate manner and that supporting narrative is supplied.
39. The data is also being regularly monitored and scrutinised for completeness and performance by the Chief Nurse and reported to NHS England via mandatory UNIFY national returns on a site-by-site basis.

Annex 1 – UNIFY Fill Rate Submission

The 'fill rate' is calculated by dividing the 'planned staff hours' by the 'actual worked staff hours'

Site Name	Ward name	Day		Night	
		Average fill rate - registered nurses (%)	Average fill rate - care staff (%)	Average fill rate - registered nurses (%)	Average fill rate - care staff (%)
Bradgate Unit	Ashby	86.6%	142.7%	67.7%	267.7%
	Aston	82.2%	169.4%	87.1%	348.4%
	Beaumont	84.9%	166.9%	53.2%	364.5%
	Belvoir Unit	233.9%	583.9%	106.5%	645.2%
	Bosworth	81.7%	125.8%	62.9%	203.2%
	Heather	82.8%	151.6%	64.5%	274.2%
	Thornton	75.3%	156.5%	61.3%	419.4%
	Watermead	72.0%	146.8%	66.1%	219.4%
Herschel Prins	HP Griffin	195.2%	354.8%	100.0%	371.0%
	HP Phoenix	126.6%	162.9%	96.8%	108.1%
Mill Lodge	ML Bluebell	153.2%	247.6%	112.9%	206.5%
	ML Buttercup	116.1%	136.0%	100.0%	96.8%
Stewart House	SH Skye Wing	127.4%	143.0%	103.2%	156.5%
The Willows	Willows Unit	143.1%	198.8%	167.7%	202.4%
Bennion Centre	BC Kirby	97.4%	201.6%	100.0%	122.6%
	BC Welford	87.1%	225.0%	100.0%	116.1%
Evington Centre	CB Beechwood	109.7%	197.6%	93.4%	91.8%
	CB Clarendon	95.4%	207.3%	100.0%	121.0%
	EC Coleman	104.0%	294.4%	98.4%	245.2%
	EC Gwendolen	97.6%	222.6%	91.9%	190.3%
	EC Wakerley	104.8%	196.0%	101.6%	116.1%
Fielding Palmer Hospital	FP General	100.0%	112.9%	100.0%	-
Melton Mowbray Hospital	MM Dalglish	99.2%	125.0%	100.0%	103.2%
Rutland Hospital	Rutland	100.0%	160.8%	103.3%	100.0%
St Lukes	SL Ward 1 Stroke	97.4%	204.8%	95.2%	95.2%
	SL Ward 3	95.2%	109.7%	103.2%	103.2%
Coalville Hospital	CV Ellistown 2	109.7%	193.2%	100.0%	100.0%
	CV Snibston 1	108.1%	237.9%	96.8%	98.4%
Hinckley & Bosworth Hospital	HB East Ward	91.9%	212.1%	103.2%	119.4%
	HB North Ward	103.2%	163.1%	190.3%	59.7%
Loughborough Hospital	Lough Swithland	105.6%	196.0%	90.3%	180.6%
Langley	Langley	147.6%	119.4%	67.7%	232.3%
Adolescent Psychiatric Unit	Oakham	131.9%	155.5%	106.6%	126.2%
3 Rubicon Close	3 Rubicon Close	119.4%	172.6%	100.0%	125.8%
Agnes Unit	Agnes Unit	162.1%	429.0%	95.2%	396.8%
The Gillivers	The Gillivers	101.6%	121.0%	87.1%	112.9%
The Grange	The Grange	48.4%	188.7%	0.0%	200.0%

Annex 2 – Planned Staffing Levels

The table below shows the planned staffing levels (headcount) by skill mix and shift type.

Group	Ward	Ward Specialty (based on UNIFY categories)	Ave. no. of Available Beds*	Qualified			Unqualified		
				Early	Late	Night	Early	Late	Night
AMH Bradgate	Ashby	ADULT MENTAL ILLNESS	19	3	3	2	2	2	1
	Aston	ADULT MENTAL ILLNESS	20	3	3	2	2	2	1
	Beaumont	ADULT MENTAL ILLNESS	22	3	3	2	2	2	1
	Belvoir Unit	PICU	9	2	2	1	3	3	3
	Bosworth	ADULT MENTAL ILLNESS	16	3	3	2	2	2	1
	Heather	ADULT MENTAL ILLNESS	17	3	3	2	2	2	1
	Thornton	ADULT MENTAL ILLNESS	24	3	3	2	2	2	1
	Watermead	ADULT MENTAL ILLNESS	20	3	3	2	2	2	1
AMH Other	HP Griffin	FORENSIC PSYCHIATRY	6	2	1	1	3	3	2
	HP Phoenix	FORENSIC PSYCHIATRY	12	2	2	1	3	3	2
	ML Bluebell	ADULT MENTAL ILLNESS	9	1	1	1	3	3	2
	ML Buttercup	ADULT MENTAL ILLNESS	9	1	1	1	2	2	1
	SH Skye Wing	REHABILITATION	29	2	2	1	4	4	2
	Willows Unit	ADULT MENTAL ILLNESS	38	5	3	3	5	6	6
CHS City	BC Kirby	OLD AGE PSYCHIATRY	24**	3	2	2	3	3	2
	BC Welford	OLD AGE PSYCHIATRY	24**	3	2	2	3	3	2
	CB Beechwood	COMMUNITY CARE	24**	3	2	2	4	3	2
	CB Clarendon	COMMUNITY CARE	23**	3	2	2	4	3	2
	EC Coleman	OLD AGE PSYCHIATRY	19**	2	2	2	3	3	2
	EC Gwendolen	OLD AGE PSYCHIATRY	19**	2	2	2	3	3	2
	EC Wakerley	OLD AGE PSYCHIATRY	18**	2	2	2	5	4	2
CHS East	FP General	REHABILITATION	13**	2	2	2	2	1	0
	MM Dagleish	REHABILITATION	17**	2	2	2	3	2	1
	Rutland	REHABILITATION	22**	2	2	2	4	3	1
	SL Ward 1 Stroke	REHABILITATION	20**	3	2	2	5	4	2
	SL Ward 3	REHABILITATION	14**	2	2	1	2	2	1
CHS West	CV Ellistown 2	REHABILITATION	25**	2	2	1	5	2	2
	CV Snibston 1	REHABILITATION	24**	2	2	2	6	4	2
	HB East Ward	REHABILITATION	23**	3	3	2	4	3	2
	HB North Ward	REHABILITATION	19**	2	2	1	4	2	2
	Lough Swithland	REHABILITATION	24**	2	2	2	4	2	1
FYPC	Langley	CHILD & ADOLESCENT PSYCHIATRY	16	3	3	2	2	2	1
	Oakham	CHILD & ADOLESCENT PSYCHIATRY	8 (plus 2 cost per case) **	2	2	2	3	3	2
LD	3 Rubicon Close	LEARNING DISABILITY	5	3	3	2	2	2	2
	Agnes Unit	LEARNING DISABILITY	16	4	4	4	2	2	4
	The Gillivers	LEARNING DISABILITY	5	3	3	2	2	2	2
	The Grange	LEARNING DISABILITY	5	3	3	2	2	2	2

*The number of available beds can fluctuate dependant on the ward situation and is shown as an average in the month

**These bed numbers are actual (not average) and have been confirmed by the service as at December 2014