

TRUST BOARD – 26 June 2018

SAFER STAFFING – MAY 2018 REVIEW

Introduction/Background

- 1 This report provides a response to the National Quality Board (NQB) requirement to publish a summary of staffing levels on all inpatient wards across the Trust. It presents a high level exception report in relation to the actual fill rate for registered nursing (RN) and health care support workers (HCSW) during the day and night and highlights where this falls below an 80% threshold.
- 2 Actual staff numbers compared to planned staff numbers are collated for each inpatient area in line with the requirements of the NHS Digital reporting process. A summary of the NHS Digital return and supporting information is available in Appendix 1.
- 3 'Care hours per patient day' (CHPPD) is included in this report since the April 2018 review. CHPPD is a descriptor of workforce deployment, which gives a single figure that represents both staffing levels and patient requirements. CHPPD reporting is shown as a trust total as well as a separate RN and HCSW total.
- 4 It should be noted that CHPPD excludes specific roles such as therapeutic activity workers, pharmacy technicians and associated practitioners, which the Trust would utilise in the ward skill mix. Therefore, the data presented does not account for a complete skill mix or CHPPD on our wards.
- 5 The data presented in this report identifies no significant risk issues. Lead Nurses continue to have local oversight and triangulate the Nurse Sensitive Indicators (NSI) in their area to ensure safer staffing is monitored and the associated risks are managed at ward level and through their operational management and governance arrangements.
- 6 The monthly safer staffing reports are publically available via the NHS Choices website and the Trust internet page.

Aim

- 7 The aim of this report is to provide the Trust Board with an analysis of May 2018 safer staffing data.

Recommendations

- 8 The Trust Board is recommended to:
 - receive assurance that processes are in place to monitor and ensure the inpatient safer staffing levels are maintained.

Discussion

Trust level summary

- 9 The overall trust wide summary of planned versus actual hours by ward for registered nurses (RN) and health care support workers (HCSW) in May 2018 is detailed below:

	DAY		NIGHT		Temp Workers%
	% of actual vs total planned shifts RN	% of actual vs total planned shifts care HCSW	% of actual vs total planned shifts RN	% of actual vs total planned shifts care HCSW	
Mar 18	98.8%	202.4%	105.0%	186.9%	33.2%
April 18	101.0%	198.0%	104.2%	183.3%	29.0%
May 18	100.8%	204.7%	107.6%	187.3%	29.6%

Table 1 - Trust level safer staffing

- 10 During May 2018, the total temporary worker rate was slightly increased from the previous month by 0.6%. Of these temporary staff, 26% were bank staff and 3.6% were agency staff.
- 11 Temporary staffing utilisation remains above 25% across 60% of the inpatient areas. This is reflective of the areas with higher numbers of vacancies. Utilisation of HCSWs remains high to support and cover vacancies, sickness and increased patient acuity. The table below provides an overarching summary of the Trust 'hot spots' with regard to maintaining planned safer staffing over the last three months.

Summary of safer staffing hotspots

Planned staffing across ward areas	Mar 2018	April 2018	May 2018
Hinckley and Bosworth - East Ward	X	X	X
SL Ward 1			
Coalville - Snibston Ward 1 (nights)	X	X	X
Short Breaks - The Gillivers (nights)	X	X	X
Short Breaks – Rubicon Close (nights)		X	X
Mill Lodge	X		X
Ashby (Bradgate)	X		
EC Welford (MHSOP)	X	X	X
EC Wakerley/ Coleman (MHSOP)	X	X	X
BC Kirby (MHSOP)	X	X	

Table 2 - Safer staffing hotspots

- 12 Planned staffing levels versus actual staffing levels by ward are presented in the tables below. These show additional NSIs that capture care or outcomes most affected by nursing care. This report indicates if there has been an increase or decrease in the indicator position against the previous month.

Adult Mental Health and Learning Disabilities Services (AMH/LD)

13 The use of temporary workforce remains high across the mental health wards. In April 2018, a bespoke training programme called '*What can you expect from us?, What can we expect from you?*' commenced with a focus on providing bank staff specific information regarding care, policy and practice at the Bradgate Unit, Herschel Prins, Psychiatric Intensive Care Unit (PICU) and Langley Ward). All bank staff are paid to attend the day.

Acute Inpatient Wards

Ward	Occupied beds	DAY	DAY	NIGHT	NIGHT	Temp Workers%	CHPPD	Medication errors	Falls	Complaints	FFT Promoter % (arrears)
		% of actual vs total planned shifts RN	% of actual vs total planned shifts care HCSW	% of actual vs total planned shifts RN	% of actual vs total planned shifts care HCSW		Care Hours Per Patient Day				
Ashby	20	81.1%	155.6%	98.4%	138.7%	29.3%	5.5	2↑	0	0	100%
Aston	19	90.3%	157.3%	103.2%	341.9%	42.3%	6.8	0	2↑	1↓	n/a
Beaumont	21	81.7%	209.7%	95.2%	412.9%	63.6%	6.6	1	0↓	0↓	n/a
Belvoir Unit	10	109.8%	343.9%	171.0%	342.6%	29.1%	20.0	1	0	1↑	n/a
Bosworth	20	88.2%	170.2%	90.3%	225.8%	27.5%	6.2	0	1↓	0	100%
Heather	18	93.5%	186.3%	101.6%	274.2%	47.2%	7.4	0↓	4↑	1↑	n/a
Thornton	21	94.0%	155.3%	101.6%	261.3%	23.0%	6.0	0	0	0	n/a
Watermead	19	90.3%	157.3%	101.6%	193.5%	39.1%	6.0	1↑	0	3↑	n/a
Griffin F PICU	4	185.5%	524.2%	196.8%	335.5%	57.9%	25.6	0↓	0	0	n/a
TOTALS								5↑	7↓	6↑	

Table 3 - Acute inpatient ward safer staffing

14 The Bradgate Unit had no hotspots in May 2018; however the unit overall has a high use of regular bank staff to support vacancy cover and patient acuity, which varies from ward to ward. Temporary worker utilisation has been above 40% across four wards, a reduction from six wards in April 2018. The increased utilisation is due to RN vacancies, sickness levels and increased levels of patient acuity requiring observation support.

15 Block booking of bank and agency RNs continues to manage the impact of the increase in RN vacancies across the acute inpatient wards. This enables safer staffing levels to be maintained or risk assessed within a safe parameter and improves consistency of patient care.

16 Reported medication errors reduced by one in May 2018 and reported falls decreased by three to seven in May 2018. This was due to individual patient factors.

17 Complaint numbers increased to six in May 2018.

18 There is no correlation identified between the number of reported incidents and complaints to safer staffing levels.

Learning Disabilities (LD) Services

Ward	Occupied beds	DAY	DAY	NIGHT	NIGHT	Temp Workers %	CHPPD	Medication errors	Falls	Complaints	FFT Promoter % (arrears)
		% of actual vs total planned shifts RN	% of actual vs total planned shifts care HCSW	% of actual vs total planned shifts RN	% of actual vs total planned shifts care HCSW		Care Hours Per Patient Day				
3 Rubicon Close	3	106.5%	204.8%	77.4%	229.0%	19.8%	18.6	0	1↑	0	n/a
Agnes Unit	7	137.5%	400.0%	103.3%	401.7%	37.2%	22.9	0↓	0	0	n/a
The Gillivers	3	101.6%	188.7%	54.8%	167.7%	15.3%	19.7	1↓	2↑	0	n/a
The Grange	3	-	196.8%	-	158.1%	25.0%	19.6	2↑	1↓	0	n/a
TOTALS								3↓	4↑	0	

Table 4 - Learning disabilities safer staffing

19 Short break homes use a high proportion of HCSWs who are trained to administer medication and carry out delegated health care tasks. This means the short break homes do not require a RN at all times. The Gillivers and The Grange support each other with RN day cover; and night cover is shared across the site as the homes are situated next to each other. The RN night cover at The Gillivers and Rubicon Close was not required for all shifts in May 2018, however additional HCSW support was provided to support the needs of some complex patients.

20 Reported numbers of falls increased from three in April 2018 to four in May 2018 and reported numbers of medication errors decreased by one.

21 There is no correlation identified between the number of reported incidents and complaints to safer staffing levels.

Low Secure Services – Herschel Prins

Ward	Occupied beds	DAY	DAY	NIGHT	NIGHT	Temp Workers %	CHPPD	Medication errors	Falls	Complaints	FFT Promoter % (arrears)
		% of actual vs total planned shifts RN	% of actual vs total planned shifts care HCSW	% of actual vs total planned shifts RN	% of actual vs total planned shifts care HCSW		Care Hours Per Patient Day				
HP Phoenix	10	103.2%	181.5%	103.2%	161.3%	26.8%	10.5	0	2	0	n/a

Table 5- Low secure safer staffing

22 Phoenix Ward achieved the thresholds for safer staffing. High levels of temporary workers continue to be utilised to cover vacancies, sickness and a high number of level one and two patient observations.

23 Reported falls in May 2018 were two, which shows no change from the number reported in April 2018. Both falls related to individual patient factors.

Rehabilitation Services

Ward	Occupied beds	DAY	DAY	NIGHT	NIGHT	Temp Workers %	CHPPD	Medication errors	Falls	Complaints	FFT Promoter % (arrears)
		% of actual vs total planned shifts RN	% of actual vs total planned shifts care HCSW	% of actual vs total planned shifts RN	% of actual vs total planned shifts care HCSW		Care Hours Per Patient Day				
SH Skye Wing	26	123.4%	114.5%	200.0%	103.2%	30.8%	4.2	0	2↓	2↑	n/a
Willows Unit	26	150.2%	284.6%	121.8%	260.0%	27.2%	10.4	2↑	3↑	0	85.7%
ML Mill Lodge	12	68.5%	214.5%	53.2%	169.4%	47.9%	12.1	0	17↑	0	n/a
TOTALS								2↑	22↑	2↑	

Table 6 - Rehabilitation service safer staffing

- 24 Temporary worker utilisation remains above 20% across the rehabilitation services. Mill Lodge temporary staffing levels are influenced by sickness, vacancies and leave. The service adopts a staffing model based on a risk assessment of patient need and staff skills and competencies.
- 25 Stewart House and Mill Lodge share a RN when a second RN cannot be sourced for day or night shifts through bank or agency usage. In these cases, additional HCSWs are also used and this is reflected in higher figures for day and night cover for Stewart House.
- 26 There has been an increase in reported falls from 14 in April 2018 to 22 in May 2018 - of which 17 occurred on Mill Lodge. Analysis has demonstrated this is due to patient factors e.g. higher fall risk patients such as those who are transitioning to a different phase of mobility in their illness pathway and/ or those requiring support to mobilise. Work continues to resolve issues around supportive and safe sleep systems.
- 27 Reported medication error numbers were two in May 2018.

Community Health Services (CHS)

28 The directorate regularly reviews its recruitment plan and continues to look at a range of options to reduce the use of agency across the Trust and directorate. This includes implementation of recruitment and retention premiums for the hot spot sites/ wards. RN vacancies, maternity leave and sickness continue to impact on the availability of the substantive RN workforce across the directorate.

Community Hospitals

Ward	Occupied beds	DAY	DAY	NIGHT	NIGHT	Temp Workers %	CHPPD	Medication errors	Falls	Avoidable Pressure Ulcers	Complaints	FFT Promoter % (arrears)
		% of actual vs total planned shifts RN	% of actual vs total planned shifts care HCSW	% of actual vs total planned shifts RN	% of actual vs total planned shifts care HCSW		Care Hours Per Patient Day					
FP General	6	169.4%	109.6%	144.2%	-	27.0%	8.3	0	5↑	0	1↑	100%
MM Dalgleish	12	99.2%	124.2%	98.4%	119.4%	10.7%	6.3	0	4	0	1↑	94.7%
Rutland	12	107.8%	127.0%	105.1%	90.3%	8.9%	7.8	1↑	3↑	0	0	n/a
SL Ward 1	16	101.6%	193.5%	98.4%	96.8%	16.3%	8.1	0↓	3↓	0	0↓	100%
SL Ward 3	11	103.3%	99.2%	196.8%	100.0%	29.4%	7.4	0↓	5↓	0	0↓	33.3%
CV Ellistown 2	22	123.4%	160.5%	203.2%	103.2%	5.2%	5.4	0	4↓	0	0↓	95.8%
CV Snibston 1	22	95.7%	182.3%	67.7%	101.6%	7.5%	5.9	0	4↑	0	0↓	66.7%
HB East Ward	19	77.3%	177.4%	100.0%	132.3%	9.9%	6.6	1	8↓	0	0	n/a
HB North Ward	18	94.4%	168.5%	98.4%	96.8%	15.0%	7.5	0	10↑	0	0	n/a
Loughborough Swithland	22	100.0%	196.0%	100.0%	200.0%	7.5%	5.8	0↓	3↓	0	0	100%
CB Beechwood	22	94.2%	204.8%	100.0%	95.2%	31.0%	6.5	1↑	2↓	0	0	n/a
CB Clarendon	19	86.0%	200.8%	98.4%	103.2%	15.7%	6.9	1	7↓	0	0↓	n/a
TOTALS								4↓	58↓	0	2↓	

Table 7 - Community hospital safer staffing

29 In May 2018, Coalville (CV) Snibston Ward, met the planned RN level at night 66.7% of the time. The planned staffing level is set at three RNs at night, however due to sickness, vacancies and cover across wards, the ward has run with two RNs, which meets safer staffing parameters.

- 1 Hinckley and Bosworth (HB) East Ward met the planned RN level 77.3% of the time. The reduced compliance was due to sickness and vacancies. Substantive staff are moved daily across wards as required to maintain safer staffing. Temporary worker ratios have reduced slightly in May 2018 on seven of the twelve wards, but remain above 20% on Beechwood, St. Luke's (SL) Ward 3 and Fielding Palmer (FP) General Ward.
- 2 Two RN night sisters have been recruited and have commenced in post, based at Melton Mowbray Dalgleish Ward and St Luke's (SL) Hospital to help maintain safer staffing and provide clinical support as part of a continuity plan.
- 3 Medication errors have decreased this month from five in April 2018 to four in May 2018. The number of reported falls incidents reported has decreased from 72 in April 2018 to 58 in May 2018.
- 4 The highest reporting wards for falls are Hinckley and Bosworth - North Ward. Analysis has shown the falls were associated with patient factors and preventive strategies were in

place including the use of a low bed and sensor mat. Analysis of falls at Hinckley and Bosworth - East Ward has shown the falls are associated with patient factors and prevention strategies were in place including cohort specialising.

- Reported complaints decreased from four in April 2018 to two in May 2018. The analysis has not identified any correlation with safer staffing levels.

Mental Health Services for Older People (MHSOP)

Ward	Occupied beds	DAY	DAY	NIGHT	NIGHT	Temp Workers %	CHPP D	Medication errors	Falls	Avoidable Pressure Ulcers	Complaints	FFT Promoter % (arrears)
		% of actual vs total planned shifts RN	% of actual vs total planned shifts care HCSW	% of actual vs total planned shifts RN	% of actual vs total planned shifts care HCSW		Care Hours Per Patient Day					
BC Kirby	22	81.7%	233.1%	101.6%	151.6%	26.8%	6.5	1↑	6↓	0	0	n/a
BC Welford	23	67.2%	212.9%	100.0%	112.9%	21.1%	5.7	0↓	11↑	0	1↑	100%
Coleman	19	64.0%	291.1%	103.2%	200.0%	39.8%	8.4	0↓	16↑	0	0	100%
Gwendolen	18	96.8%	382.3%	111.3%	332.3%	50.7%	10.7	1↑	17↑	0	0↓	n/a
TOTALS								2↓	50↑	0	1	

Table 8 - Mental Health Services for Older People (MHSOP) safer staffing

- Bennion Centre – Welford Ward and Evington Centre - Coleman Ward in Mental Health Services for Older People (MHSOP) were hotspots in May 2018 and did not achieve the planned RN levels on day shifts. MHSOP wards temporary staffing utilisation ranges from 21.1% to 50.7%. Long term sickness continues to impact on the need to ensure cover across all wards with the appropriate skill mix and expertise. Where the planned levels were not achieved, wards had a minimum of two RNs on each shift and were working within the parameters of safer staffing.
- In May 2018, reported medications errors decreased by three. Reported falls incidents have increased from 30 in April 2018 to 50 in May 2018. The increase at Evington Centre - Coleman Ward and Evington Centre - Gwendolen Ward are linked to patient factors. Appropriate risk assessment and care plans are in place and no harm has occurred.
- There is no correlation identified between the number of reported incidents and complaints to safer staffing levels.

Families, Young People and Children's Services (FYPC)

Ward	Occupied beds	DAY	DAY	NIGHT	NIGHT	Temp Workers %	CHPPD	Medication errors	Falls	Complaints	FFT Promoter % (arrear)
		% of actual vs total planned shifts RN	% of actual vs total planned shifts care HCSW	% of actual vs total planned shifts RN	% of actual vs total planned shifts care HCSW		Care Hours Per Patient Day				
Langley	11	148.4%	148.4%	112.9%	137.1%	36.9%	8.0	2↑	1↑	0	66.7%
CV Ward 3 - CAMHS	8	117.6%	187.4%	110.2%	172.9%	24.5%	13.3	0	0↓	0↓	n/a
TOTALS								2↑	1	0↓	

Table 9 - Families, children and young people's services safer staffing

- 9 There are currently no 'hot spot' areas for inpatient services within Families, Young People and Children's Services (FYPC).
- 10 Both wards continue to utilise an increased number of temporary workers to manage increases in patient acuity.
- 11 No specific themes have been identified during the monthly review and there is no correlation of complaints or incidents with safer staffing levels.

Recruitment

- 12 The current Trust wide position for inpatient wards as reported real time by the lead nurses is detailed below. As requested from May 2018, the data below includes potential leavers.

Area	Vacant Posts		Potential Leavers		Starters/Pipeline	
	RN	HCSW	RN	HCSW	RN	HCSW
FYPC	2	6	1	0	0	0
CHS(Community Hospitals)	39.1	14.4	10.2	0.2	4.5	14.4
MHSOP	11.7	7.8	3	0	2	2.2
AMH/LD	82	31.5	4	0	17	3
Trust Total May 2018	134.8	59.7	18.2	0.2	23.5	19.6
Trust Total April 2018	125	67	n/a	n/a	16	29

Table 10 - Recruitment summary

- 13 Longer term plans to eradicate the risks and address staffing issues remain in place. These include:
 - rolling recruitment and retention plans, including implementation of Trust incentivised schemes for hard to recruit areas;
 - increased work experience placements, recruitment of clinical apprentices;
 - accessing recruitment fairs at local universities, schools and colleges;
 - robust sickness and absence management;
 - continuous review of workforce including new roles to enhance skill mix and increase patient facing time.

Conclusion

- 14 The Trust continues to demonstrate compliance with the National Quality Board (NQB) expectations to publish safer staffing information each month. The safer staffing data is being regularly monitored and scrutinised for completeness and performance by the Chief Nurse and reported to NHS England (NHSE) via mandatory national returns on a site-by-site basis. Learning from participation in a number of NHS Improvement (NHSI) development programmes is ongoing. CHPPD reporting will be analysed and benchmarked following three months of national submissions; and any findings will be articulated in the six monthly safer staffing review in July 2018.
- 15 Each directorate has a standard operating procedure for the escalation of safer staffing risks and any significant issues are notified to the Chief Nurse on a weekly basis. Directorate lead nurses have oversight of the plans in place to mitigate risks for each ward to ensure safe care standards are maintained.

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*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.

Annexes/ Appendices

Annex 1 – Definition of Safer Staffing Measures
Appendix 1 - Safer staffing supporting information

Annex 1 – Definition of Safer Staffing Measures

Temporary Workers

These workers are non-substantive and hold either a bank contract with the Trust or are resourced via a 3rd party recruitment agency.

Safer Staffing Levels

The Trust has uses the methodology below for measuring safer staffing level performance across our inpatient units. This is in line with the national NHS England (NHSE) reporting

Methodology	Measure	Measure Source
Fill Rate Analysis (National NHS Digital Return)	Actual hours worked divided by Planned hours (split by RN/ HCSW)	NHS England

Fill Rate Analysis (NHS England Return)

The Trust is required by NHSI to publish our inpatient staffing levels on the NHS Choices website via a national NHSE 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.

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.

'Planned Staff Hours' are calculated using the RCN guidance of 1:8 RN to patient ratio. 1 RN is equal to 7.5 hours of planned work.

The 'Fill Rate' is calculated by dividing the 'Planned Staff Hours' by the 'Actual Worked Staff Hours'. 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.

Care Hours Per Patient Day (CHPPD) metric

CHPPD is collected as an additional item on the existing and continuing safe staffing monthly return.

- CHPPD gives a single figure that represents both staffing levels and patient requirements, unlike actual hours alone.
- CHPPD allows for comparisons between wards/units. As CHPPD has been divided by the number of patients, the value doesn't increase due to the size of the unit – allowing comparisons between different units of different sizes.
- CHPPD reports split out registered mental health and registered nurses from care staff (health care support workers/ assistants) to ensure skill mix and care need is reflected.

Appendix 1 – Safer staffing supporting information

May 2018

				Fill Rate Analysis (National NHS Digital Return)				Skill Mix Met (based on 1:8 & 60:40 split)	% Temporary Workers	CHPPD
				Actual Hours Worked divided by Planned Hours						
				Day (Early & Late Shift)		Night				
Ward Group	Ward Name	Average no. of Beds on Ward	Average no. of Occupied Beds	Average % fill rate registered nurses	Average % fill rate care staff	Average % fill rate registered nurses	Average % fill rate care staff	>= 80%	<20%	
AMH Bradgate	Ashby	21	20	81.1%	155.6%	98.4%	138.7%	59.1%	29.3%	5.5
	Aston	19	19	90.3%	157.3%	103.2%	341.9%	68.8%	42.3%	6.8
	Beaumont	22	22	81.7%	209.7%	95.2%	412.9%	61.3%	63.6%	6.6
	Belvoir Unit	10	10	109.8%	343.9%	171.0%	342.6%	96.8%	29.1%	20.0
	Bosworth	20	20	88.2%	170.2%	90.3%	225.8%	67.7%	27.5%	6.2
	Heather	18	18	93.5%	186.3%	101.6%	274.2%	86.0%	47.2%	7.4
	Thornton	21	20	94.0%	155.3%	101.6%	261.3%	83.9%	23.0%	6.0
	Watermead	20	20	90.3%	157.3%	101.6%	193.5%	79.6%	39.1%	6.0
	Griffin Female PICU	6	6	185.5%	524.2%	196.8%	335.5%	100.0%	57.9%	25.6
AMH Other	HP Phoenix	12	11	103.2%	181.5%	103.2%	161.3%	94.6%	26.8%	10.5
	SH Skye Wing	30	27	123.4%	114.5%	200.0%	103.2%	93.5%	30.8%	4.2
	Willows Unit	38	35	150.2%	284.6%	121.8%	260.0%	98.9%	27.2%	10.4
	ML Mill Lodge (New Site)	14	10	68.5%	214.5%	53.2%	169.4%	26.9%	47.9%	12.1
CHS City	BC Kirby	24	22	81.7%	233.1%	101.6%	151.6%	54.8%	26.8%	6.5
	BC Welford	24	22	67.2%	212.9%	100.0%	112.9%	34.4%	21.1%	5.7
	CB Beechwood	22	20	94.2%	204.8%	100.0%	95.2%	77.4%	31.0%	6.5
	CB Clarendon	20	17	86.0%	200.8%	98.4%	103.2%	73.1%	15.7%	6.9
	EC Coleman	21	20	64.0%	291.1%	103.2%	200.0%	38.7%	39.8%	8.4
	EC Gwendolen	20	20	96.8%	382.3%	111.3%	332.3%	92.5%	50.7%	10.7
CHS East	FP General	10	8	169.4%	109.6%	144.2%	-	84.9%	27.0%	8.3
	MM Dalgleish	17	15	99.2%	124.2%	98.4%	119.4%	95.7%	10.7%	6.3
	Rutland	16	11	107.8%	127.0%	105.1%	90.3%	94.6%	8.9%	7.8
	SL Ward 1 Stroke	18	15	101.6%	193.5%	98.4%	96.8%	89.2%	16.3%	8.1
	SL Ward 3	14	11	103.3%	99.2%	196.8%	100.0%	95.7%	29.4%	7.4
CHS West	CV Ellistown 2	24	21	123.4%	160.5%	203.2%	103.2%	96.8%	5.2%	5.4
	CV Snibston 1	24	22	95.7%	182.3%	67.7%	101.6%	44.1%	7.5%	5.9
	HB East Ward	20	18	77.3%	177.4%	100.0%	132.3%	61.3%	9.9%	6.6
	HB North Ward	16	14	94.4%	168.5%	98.4%	96.8%	90.3%	15.0%	7.5
	Lough Swithland	23	21	100.0%	196.0%	100.0%	200.0%	100.0%	7.5%	5.8
FYPC	Langley	15	15	148.4%	148.4%	112.9%	137.1%	88.2%	36.9%	8.0
	CV Ward 3	10	10	117.6%	187.4%	110.2%	172.9%	96.8%	24.5%	13.3
LD	3 Rubicon Close	4	4	106.5%	204.8%	77.4%	229.0%	88.2%	19.8%	18.6
	Agnes Unit	12	10	137.5%	400.0%	103.3%	401.7%	100.0%	37.2%	22.9
	The Gillivers	5	3	101.6%	188.7%	54.8%	167.7%	81.7%	15.3%	19.7
	The Grange	5	3	-	196.8%	-	158.1%	98.9%	25.0%	19.6
Trust Total				100.8%	204.7%	107.6%	187.3%	79.8%	29.6%	

