**FOI Ref: 6069**

**Category(ies): Clinical – Service Activity**

**Subject: Chemo Units Staffing**

**Date Received: 22/10/21**

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| **Your request:** | **Our response:** |
| 1. Does your trust host one or more day patient chemotherapy unit (s)?   *Yes / No* *(delete as appropriate)*  If *No*, please return the questionnaire at this stage – no further questions need to be answered.  If *Yes*, how many day patient chemotherapy units does your trust host, and on how many sites?   1. Number of day patient chemotherapy units = *(insert here)* 2. Number of different hospital sites within the trust that provide day patient chemotherapy = *(insert here)* | Yes  1  1  Urology deliver chemotherapy on the urology ward but they do not have a day unit they use a treatment room/rooms. |
| For each separate chemotherapy unit (service), please answer the following questions about the CURRENT situation at your Trust *(please copy the template in order to respond for each unit separately):* | |
| 1. For each chemotherapy unit please indicate the following:  |  |  | | --- | --- | | **Question** | **Response *(Insert Unit Name Here*)\_\_\_\_\_\_\_\_A6 day unit\_\_\_\_\_\_\_\_\_\_** | | 1. Is it a static or mobile unit? *(delete as appropriate)* | *~~Mobile~~ / Static* | | 1. How many treatment chairs are there in the unit? *(insert number)* | \_\_2 beds\_\_&\_\_\_12\_\_chairs | | 1. What are the opening hours of the unit for patients *(insert NA if not applicable)*? | |  |  |  | | --- | --- | --- | | *Day of week* | *Opening time* | *Closing time* | | *Mon* | 09:00 | 18:00 | | *Tue* | 09:00 | 18:00 | | *Wed* | 09:00 | 18:00 | | *Thur* | 09:00 | 18:00 | | *Fri* | 09:00 | 18:00 | | *Sat* | NA | NA | | *Sun* | NA | NA | | *Comments about variabilities (e.g. bank holidays)* | Currently close on bank holidays | | | | 1. How many registered nurses are rostered to be on duty each day? *(insert target number of staff per shift- fill in as appropriate for unit’s shift pattern)* | |  |  |  |  | | --- | --- | --- | --- | | *Day of week* | *AM* | *PM* | *Other shift\_\_\_\_\_* | | *Mon* | 6 | 6 |  | | *Tue* | 6 | 6 |  | | *Wed* | 6 | 6 |  | | *Thur* | 6 | 6 |  | | *Fri* | 6 | 6 |  | | *Sat* | na | na |  | | *sun* | na | na |  | | *Comments about variabilities (e.g. bank holidays)  or shifts* |  | | | | | 1. How many Clinical Support Workers are rostered to be on duty each day? *(insert target number of staff- fill in as appropriate for unit’s shift pattern)* | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | | |  |  |  |  | | --- | --- | --- | --- | | *Day of week* | *AM* | *PM* | *Other shift\_\_\_\_* | | *Mon* | 3 | 3 |  | | *Tue* | 3 | 3 |  | | *Wed* | 3 | 3 |  | | *Thur* | 3 | 3 |  | | *Fri* | 3 | 3 |  | | *Sat* | na | na |  | | *Mon* | na | na |  | | *Comments about variabilities (e.g. bank holidays) or shifts* |  | | | | | | 1. How many **patients** have received SACT (chemotherapy and biological therapy) in the 12 month period to 31st August 2021? | 1971 total SACT patients  1797 –chemotherapy and biological therapy.  \_\_\_\_\_\_\_ | |  |  | | |
| 1. For each chemotherapy unit, how many Whole Time Equivalent (WTE) members of staff are currently employed SPECIFICALLY in the chemotherapy unit in the following roles *(please exclude any vacant positions from the number of WTE but include the number in vacancies column)*?  |  |  |  |  | | --- | --- | --- | --- | | **Staff type** | **Band** | **Number of WTE** *(insert number below)* | **Vacancies**  *(insert number below)* | | Registered nursing | 5 | 5.4 | 0.8 | | 6 | 1 |  | | 7 | 1 |  | | 8a – 8d |  |  | | Nurse consultant |  |  | | Other  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  |  | | Registered nursing associate | 4 | 0 | 0 | | Clinical support staff | 2 | 1 | 1 | | 3 | 1 |  | | 4 |  |  | | Other  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  |  | | |
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