# SAFE STAFFING IN ACUTE NHS TRUSTS

A study of the Implementation of policy introduced in England after the Francis Inquiry University of Southampton

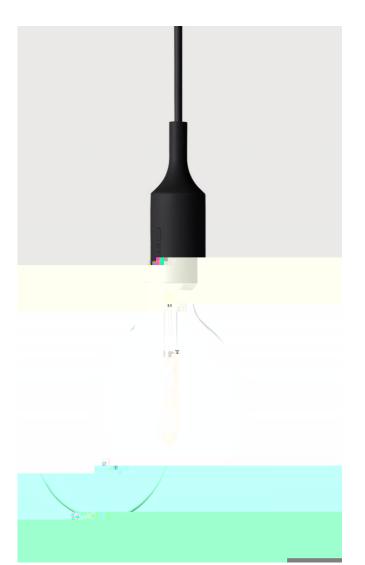
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#### Safe staffing - what do we mean?

Legally set staffing limits to provide care safely

Ø 1 childminder: X children (<8 yrs)

Ø 1 Nurses (RNs): Y patients



#### How many patients per RN is safe?



400-1,200 more deaths than expected; patient neglect Why?

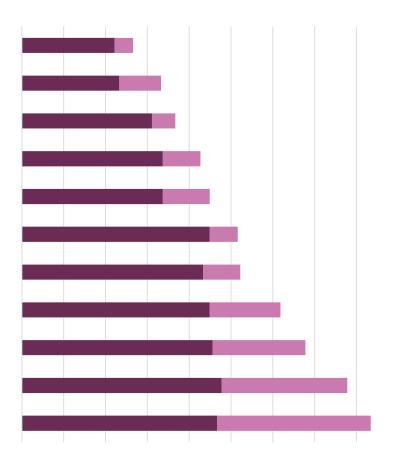
-> Independent Inquiry 2010-2013 (Sir Robert Francis QC)

So much of what goes wrong in our hospitals is likely, and indeed it was

## THE RESEARCH

#### Q1. How have safe staffing policies been implemented? Q2. W

Percentage that report policies as having been helpful/very helpful in achieving safe staffing





Patient numbers also increased; no net increase in RN staffing per patient

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1:8 is the nurse staffing level NICE clinical guideline (2014) identified as being associated with increase risk of harm to patients - which should prompt review

# Aspects of nurse staffing that Directors of Nursing report have (n=89)



We've got a virtual storm of financial pressures, increased demand, difficulties finding staffing, and pres**su**re on the service to continue delivering

## STUDY CONCLUSION

" Safe staffing policy led by the Department of Health was not ma

#### Policies need checks & balances

ÎMany inquiries have delivered valuable legislative and ]bgh]hi h]cbU`WUb[YÅ `]b`gca Y`WUgYg`h\Ym\Uj Y`\UX`U` dfcZci bX`YZZYWhcb`VY\Uj ]ci fg`UbX`Uhh]hi XYgÅ "`6i h` overall, the formal checks and procedures we have in place to ensure that public inquiries lead to change are inadequate"ï`

Norris and Shepheard (2017)

Study info page, full report & summary: <u>http://tinyurl.com/UoS-Safe</u>

Questions/discussion via Twitter: @JaneEBall