

**NEVER 8
MORE THAN 8**

**SAFE
STAFFING
ALLIANCE**

Numbers Matter

"So much of **what goes wrong in our hospitals** is likely, and indeed it was in many regards the case in Stafford, due to there being **inadequate numbers of staff**, either in terms of numbers or skills

However, evidence has been put forward to me since from the Safe Staffing Alliance to suggest **there is a level below which it should be regarded a service is not safe**, not that that's the adequate level of staffing, but the level below which you cannot be safe.

It does seem to me that it's evidence that's worth consideration and therefore ought to be considered somewhere with regard to whether there is some sort of **benchmark which at least is a bit like mortality rates, an alarm bell which should require at least questions to be asked** about whether it is possible for a service to be safe given whatever the staffing situation"

Robert Francis QC, submission to CQC Board, July 2013

"Ambition 6:

Nurse staffing levels and skill mix will appropriately reflect the caseload and the severity of illness of the patients they are caring for and be transparently reported by trust boards."

"Contrary to the pre-visit data, when the review teams visited the hospitals, they found frequent examples of inadequate numbers of nursing staff in some ward areas. The reported data did not provide a true picture of the numbers of staff actually working on the wards"

[p11. 'Review into the quality of care and treatment provided by 14 hospital trusts in England: overview report'.

Professor Sir Bruce Keogh KBE, July 2013.]

"Recent work suggests that operating a general medical-surgical hospital ward with fewer than one registered nurse per eight patients, plus the nurse in charge, may increase safety risks substantially. This ratio is by no means to be interpreted as an ideal or sufficient standard; indeed, higher acuity doubtless requires more generous staffing. We cite this as only one example of scientifically grounded evidence on staffing that leaders have a duty to understand and consider when they take actions adapted to their local context"

"Healthcare organisations should ensure that staff are present in appropriate numbers to provide safe care at all times and are well supported."

[p23. 'Improving the Safety of Patients in England'. Report chaired by Professor Don Berwick, Aug 2013.]

Never more than 8 patients per registered nurse

Given the compelling evidence of a link between registered nurse (RN) levels and the quality and outcomes of care, the Safe Staffing Alliance believes that endeavours to ensure compassionate care must be underpinned by adequate nurse staffing levels if they are to succeed.

To achieve this the Safe Staffing Alliance recommend that:

- 1) Planning for nurse staffing on wards is undertaken in every ward in every trust, supported by evidence based tools/methodologies to set core establishments sufficient to maintain safe nurse to patient ratios.
- 2) Ward sisters (or equivalent) are empowered to make day to day decisions on staffing and resource levels with the authority to act on those decisions.
- 3) Ward sisters and nurse managers are supported by the Director of Nursing and the Trust Board; the Trust Board must be accountable for staffing levels being maintained at the calibrated safe and appropriate levels.
- 4) Under no circumstances is it safe to care for patients in need of hospital treatment with a ratio of more than 8 patients per registered nurse during the day time on general acute wards including those specialising in care for older people.
- 5) If there are more than 8 patients per registered nurse (excluding the nurse in charge) it should be reported and recorded; there is evidence that risk of harm to patients is substantially increased at these staffing levels.
- 6) Trusts are required to report the frequency of such incidents publicly and to take immediate action to remedy the breach. If breaches occur regularly this must be escalated through the Trust's Risk Management systems.
- 7) Registered nurses must at all times be supported by a sufficient number of health care assistants and a senior registered nurse in charge of the ward.

A ratio of more than 8 patients per RN significantly increases the risk of harm and constitutes a breach in patient safety which should be escalated for investigation.

This is the level at which care is considered to be unsafe and putting patients at risk; **it is not a recommended minimum.**

For nurses to provide compassionate care which treats patients with dignity and respect, higher levels will be needed and these need to be determined by every healthcare provider.

To find out more about The Safe Staffing Alliance
or for a detailed copy of the evidence on safe staffing see:

www.safestaffing.org.uk

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