

# Safe staffing app – real-time monitoring of nurse staffing levels

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## Nottingham University Hospitals NHS Trust

### What was the problem?

Nurse leaders did not have accurate live information about the staffing position from ward and department to board. They relied on manual collation of nurse staffing levels at key points in the day. These data were unavailable to the whole trust, and failed to indicate support available elsewhere in the organisation.

### What was the solution?

An easy-to-use app for mobile devices covering all wards. Managers and staff can see an accurate, live staffing position from ward to board. The app is pre-programmed with details of planned staffing for each shift for every ward. At handover, the nurse in charge inputs actual staffing numbers and relevant information. The app reports fill rate and skill mix, and immediately flags issues such as high numbers of bank or agency staff or inappropriate skill mix. The nurse in charge uses professional judgement to assess whether the ward or department is safely staffed.

Staffing changes during the shift are updated to maintain an accurate live position. The app generates a report that can be viewed at trust, site, divisional, directorate and ward level, allowing rapid response to remedy problems. It is supported by a training package, a standard operating procedure and a red flag escalation process, which guide staff to take appropriate action.

### What were the results?

Benefits include:

- staff can be focused where patient need is greatest
- significant spending reductions – for example, the stroke directorate saved £60,000 over a three month period and cut the hourly cost of temporary staffing
- capturing in real time the professional judgement of nurses responsible for giving care
- staff can raise concerns about staffing levels using red flags
- internal staff deployment is the first response rather than booking bank or agency staff
- potential patient harm is closely monitored – falls reduced by 25% and medication incidents by 16% from August 2015 to September 2016.

## What were the learning points?

- Work collaboratively and engage widely to ensure the design is fit for purpose.
- Test the idea and work in phases before rolling out widely.
- Recognise that nurses will vary in how they assess safe staffing levels, due to the complexity and nature of different clinical specialties and environments.
- Develop an education and training package to support the tool's introduction.

### Find out more

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