

Creating better value

Avoidable harm costs the NHS millions of pounds each year in additional treatment and in some cases compensation for patients. This is money that could be reinvested in frontline care and even more staff to work directly with patients. By committing to safe and reliable care, we can help to improve outcomes for patients and reduce unnecessary costs for the NHS and taxpayers.

achieve this ambition.

In 2014 the Secretary of State for Health set out a bold ambition to reduce avoidable harm by up to 50% and save around 6,000 lives over three years. This represents a shared commitment to make the NHS the safest healthcare system in the world. He invited every part and everyone working across the NHS to participate in a new movement to help



THE VALUE OF SAFE CARE



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THE VALUE OF SAFE CARE



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Hospital falls often result in increased suffering and complications for patients. A single hospital fall costs an average of £1,215 and around 3 extra bed days* for the patient. That's around £36 million in one year. Safer care could fund up to 690 day ward nurses – or more equipment in hospitals.

Reducing the cost of hospital falls

Catheter-induced urinary tract infections can cause patients pain and distress. Each costs the NHS an average of £2,523 and around 10 extra bed days* for the patient. That's around £67 million in one year. Safer care could fund up to 1,300 day ward nurses – helping to create a better workplace.

Reducing the cost of urinary tract infections

Grade 2-4 pressure ulcers cause patients discomfort and can lead to complications. They can also be costly and time-consuming to treat. Each costs the NHS an average of £2,549 and around 12 extra bed days* for the patient. That's around £49 million in one year. Safer care could fund up to 950 day ward nurses – or greater investment in training and development.

Reducing the cost of pressure ulcers

New venous thromboembolisms can be costly – both for the patient and for the NHS. Each new venous thromboembolism costs the NHS an average of £2,888 and around 8 extra bed days* for the patient. That's around £53 million in one year. Safer care could fund up to 1,030 day ward nurses – giving more time to care.

Reducing the cost of venous thromboembolism

SIGN UP TO SAFETY: LISTEN, LEARN, ACT

Every person working in the NHS has a duty to reduce risks which could harm patients. Staff, leaders and managers can work together to devote resources for continual learning and the improvement of patient care.

Join sign up to the campaign and set out the actions that you and your organisation will take.

The five pledges are:

1. PUT SAFETY FIRST
2. CONTINUALLY LEARN
3. HONESTY
4. COLLABORATE
5. SUPPORT

By working together we can potentially reduce the risk of avoidable harms by 50% and save 6,000 lives over the next three years.

To find out more, you can visit www.england.nhs.uk/signuptosafety or follow us on Twitter @SignuptoSafety and #SignuptoSafety



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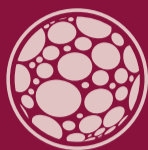


The figures used are estimates for illustrative purposes based on the prevalence of harm included in the NHS Safety Thermometer, England 2013-14. They are based on snapshot prevalence rather than the incidence of harm. Savings shown are gross estimates for the NHS in England and don't include the cost of prevention. Cost of harm: NHS reference costs 2012-13: Nurses' salary: Unit cost of health and social care 2013. *Hospital stays: Spyropoulos et al 2006; Raleigh et al 2008; Lagoe, Johnson & Murphy 2011; NHS Safety Thermometer 2013/14.

SAFER CARE FOR PATIENTS



Venous thromboembolisms



Every new **venous thromboembolism** increases a hospital stay by around 8 days*

£2,888
(average cost per patient)

1 year of savings could mean:

More time for you to care

Up to 1,030 more nurses



Pressure ulcers



Every new grade 2-4 **pressure ulcer** increases a hospital stay by around 12 days*

£2,549
(average cost per patient)

1 year of savings could mean:

More investment in training

Up to 950 more nurses



Urinary tract infections



Every catheter-induced **UTI** increases a hospital stay by around 10 days*

£2,523
(average cost per patient)

1 year of savings could mean:

A better workplace for you

Up to 1,300 more nurses



Hospital falls



Every **hospital fall** increases a hospital stay by around 3 days*

£1,215
(average cost per patient)

1 year of savings could mean:

More equipment on wards

Up to 690 more nurses



MORE TIME FOR YOU TO CARE

Sources: The figures used are estimates for illustrative purposes based on the prevalence of harm included in the NHS Safety Thermometer, England 2013-14 which provides patient harms across a wide range of care settings. They are based on snapshot prevalence rather than the incidence of harm. Cost of harm: NHS reference costs 2012-13. Nurses' salary: Unit cost of health and social care 2013.

*Hospital stays: Spyropoulos et al 2006; Raleigh et al 2008; Lagoe, Johnson & Murphy 2011; and NHS Safety Thermometer 2013/14.

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