

Staff turnover and complaints in mental health trusts could be suicide warning signs

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Researchers from The University of Manchester's National Confidential Inquiry into Suicide and Homicide by People with Mental Illness investigated whether suicides were related to the way mental health services were organised based on staff and patient surveys, national databases and other records. Their report "Healthy Services and Safer Patients" is based on 13,960 patient suicides from 2004-12.

They found that [mental health services](#) which had higher levels of non-medical staff turnover (e.g. nursing staff) and more complaints by patients were also more likely to have higher patient [suicide](#) rates.

Professor Louis Appleby, Director of the Inquiry, also leads the National Suicide Prevention Strategy for England. He said: "High staff turnover could compromise safety in that frequent changes of staff are likely to disrupt the continuity of care of vulnerable patients. However, the effect may not be causal: staff turnover could be a marker for something else affecting safety, such as poor leadership."

"What the data show is that high staff turnover may be a warning sign for [patient safety](#) and services should monitor it closely."

The Francis [report](#) into the Mid Staffordshire NHS Foundation Trust and the Berwick review into patient safety highlighted how patient safety may be affected by features of an organisation providing care, such as staffing and the handling of complaints. This study is thought to be the first to show this effect in mental health.

The report also linked suicides to the number of safety incidents overall. Professor Nav Kapur is Head of Suicide Research at the Inquiry and one of the authors of the report. He said: "There may be a tendency to link the number of complaints and safety incidents to a culture of openness and transparency. This may be the case but they may also be an indication that there are real safety concerns that need to be addressed."

Provided by University of Manchester

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