S1 File: Qualitative Interview Topic Guide

Staff Perceptions of Risk and Safety Qualitative Study

Protocol

1. Brief the participant on the purpose of the project and interview.
2. Describe the nature of the interview (i.e. that it is recorded) and discuss confidentiality.
3. Describe the format of the questions. The interview consists of one decision making scenario, with a series of prompts for exploring decision-making.
4. Explain the process for completing the personality questionnaire [either after this interview or at another time [email will be sent with details of how to complete it].

Staffing Scenario

Prompts [show the participant the intensive care unit scenario, including the staffing table and ask:]

- Please can you allocate the staffing to patients for this shift?
- What additional information would you want to know?

In this type of scenario:

- How many nurses/therapists/admin/medics do you think are required to run this shift safely?
- What are your three key priorities for the shift?
- With the current staffing, do you have any safety concerns?
  - If yes, what are they?
  - If no, why not?
- What are the barriers in providing safe patient care?
- What are you thinking about?
- What makes you feel comfortable or challenged?
- Is there anything that this has made you think about, that we haven’t covered?
Intensive Care Unit Scenario

You have started a shift on a 12 bedded intensive care unit with four side rooms, occupied by 12 patients. There are seven Level 3 patients and five Level 2 patients.

**Intensive Care Unit Scenario**

Bed 1:
- Neurological patient. High ICPs.
- MRI to clear their neck. Paralysed and sedated otherwise stable.

Beds 2-4:
- Ventilated, C. difficile.
- Two day post-op. WHIPPLES. Waiting on ward.
- Intubated, ventilated, community-acquired pneumonia. Weaning.
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- Community-acquired pneumonia. Weaning.

Bed 5:
- Level 3 patient to become Level 2.
- Agitated, restless, confused.

Bed 6:

**Handover notes**

_Booked admissions:_
- 2 x electives
- 1 x ventilated patient, intubated on ward

_Discharges:_
- 1 x predicted
- 1 x confirmed (patient with epidural)

**Band** | **Nursing** | **Therapists** | **Admin** | **Grade** | **Medical**
--- | --- | --- | --- | --- | ---
7 | 1 | 1 (off sick) | Cons | 1 |  
6 | 3 (1st day/1 agency) | 1 | Reg | 1 |  
5 | 6 (1 junior supervised by Band 6) | 2 (both supervised) | F2/ST | 2 |  
3 | 1 | 1 (ward clerk sick) |  

SIDEROOM 1

SIDEROOM 2

SIDEROOM 3

SIDEROOM 4

SIDEROOM 5

SIDEROOM 6

SIDEROOM 7

SIDEROOM 8
Staffing Issues

- Can you recall shifts where a staffing problem significantly affected the quality of patient care?
- What was the staffing problem?
- How was patient care affected?
- What were the implications of the situation for you, your colleagues and the unit?

Perception of Risk

- What do you feel is a high risk staffing situation on the unit? Why?
- Is that situation viewed as high risk by your colleagues? By your team leader/manager?
- What staffing situations do you consider as too high risk?

Perceptions of Safety

- Tell me about a time when you were concerned about safety in your area?
- Did you discuss this with your team leader/manager?
- How did the conversation go?
- Did you team leader/manager act on the safety issue you described?
- Has the safety issue been addressed?
- What could be done in the department to improve patient and safety experience?
- Which factors prevent admitting patients/admissions?