



APPROVED: Staffing Effectiveness Requirements for Hospitals and Long Term Care Organizations

Due to comments received from the field, The Joint Commission has revised and is now releasing the final approved interim staffing effectiveness requirements **applicable to the hospital and long term care programs**. These requirements are **effective July 1, 2010**, and serve as the interim replacements for PI.04.01.01 (the suspended staffing

effectiveness standard). These interim requirements will be in effect while more extensive research is done to improve the staffing effectiveness requirements. More information on the status of the staffing effectiveness requirements will be available in 2010. The approved staffing effectiveness requirements appear below in underlined text. 

**Official Publication of New and Revised EPs**

Revised Staffing Effectiveness Requirements for Hospitals and Long Term Care


APPLICABLE TO HOSPITALS AND LONG TERM CARE

Effective July 1, 2010

Standard PI.02.01.01

The **(HAP: hospital) (LTC: organization)** compiles and analyzes data.


Elements of Performance


A 12. When the **(HAP: hospital) (LTC: organization)** identifies undesirable patterns, trends, or variations in its performance related to the safety or quality of care (for example, as identified in the analysis of data or a single undesirable event), it includes the adequacy of staffing, including nurse staffing, in its analysis of possible causes. 

Note 1: *Adequacy of staffing includes the number, skill mix, and competency of all staff. In their analysis, **(HAP: hospitals) (LTC: organizations)** may also wish to examine issues such as processes related to work flow; competency assessment; credentialing; supervision of staff; and orientation, training, and education.*

Note 2: ***(HAP: Hospitals) (LTC: Organizations)** may find value in using the staffing effectiveness indicators (which include National Quality Forum Nursing Sensitive Measures) to help identify potential staffing issues. (See the "Staffing Effectiveness Indicators" (SEI) chapter.)*

A 13. When analysis reveals a problem with the adequacy of staffing, the leaders responsible for the organization-wide **(HAP: patient) (LTC: resident)** safety program (as addressed at LD.04.04.05, EP 1) are informed, in a manner determined by the safety program, of the

results of this analysis and actions taken to resolve the identified problem(s). (See also LD.03.05.01, EP 7, and LD.04.04.05, EP 13) 

A 14. © At least once a year, the leaders responsible for the **(HAP: hospital-wide patient) (LTC: organization-wide resident)** safety program review a written report on the results of any analyses related to the adequacy of staffing and any actions taken to resolve identified problems. 

Standard LD.04.04.05

The **(HAP: hospital) (LTC: organization)** has an organization-wide, integrated **(HAP: patient) (LTC: resident)** safety program **(HAP: within its performance improvement activities)**.

Elements of Performance

A 13. © At least once a year, the **(HAP: hospital) (LTC: organization)** provides governance with written reports on the following:

- All system or process failures
- The number and type of sentinel events
- Whether the **(HAP: patients) (LTC: residents)** and the families were informed of the event
- All actions taken to improve safety, both proactively and in response to actual occurrences
- **HAP only: For hospitals that use Joint Commission accreditation for deemed status purposes:** The determined number of distinct improvement projects to be conducted annually
- All results of the analyses related to the adequacy of staffing (See also PI.02.01.01, EP14)