Staffing levels and skill mix

Policy | CLN-POL-001

Document type	Policy
Title	Staffing levels and skill mix
Document ID	{{facility.code}}-CLN-POL-001
Version and status	1.0 | Issued for use. Pending ASF Expert Committee ratification
Prepared by	{{roles.quality_lead.name}}, Quality lead
Reviewed by	{{roles.clinical_director.name}}, Clinical director Date: _____
Approver and signature	{{roles.clinical_director.name}}, Clinical director Signature: _____ Date: _____
Effective date	{{document.effective_date}}
Next review	{{document.review_date}} (12 months, or sooner after any incident or change)
Replaces	None (new document)
Standards and criteria supported	Standard 1 (Assessment, Care Planning and Safety), criterion 1.1
Evidence basis	E-006, E-009
Status of this document	Recommended best-practice model. A hospital may adopt, adapt or replace it with an equivalent that meets the same criteria.

At a glance: what to do

1. Staffing is calculated from patient volume and acuity, not from a fixed roster.
2. Skill mix is set for each shift, with a named senior clinician in charge.
3. The calculation is reviewed each month and after any change in demand.
4. Gaps are recorded and escalated the same shift.

Stop and get help straight away if: a shift runs below the calculated safe level with no escalation recorded.

1. Purpose

To make sure there are enough staff with the right skills for the patients in the care area (1.1).

2. Scope

Applies to	Clinical and support staff in the hospital
Locations	All wards, clinics and departments of {{facility.legal_name}}
When	Whenever the activity described is carried out
Does not apply to	Activities covered by another document listed in section 15

3. Definitions and abbreviations

Term	Meaning in this SOP
Clinical lead	The doctor or nurse in charge of the area at the time

4. Background and rationale

To make sure there are enough staff with the right skills for the patients in the care area (1.1).

5. Responsibilities

Role	Duties in this SOP	Competence needed
Chief nurse or clinical director	Owns the calculation and approves the skill mix	Management
Duty manager	Checks each shift against the calculation	Senior clinician

6. Equipment, materials and resources

Item	Specification or standard	Check before use
Records and forms named in this document	Current version	Checked before use

7. Safety and infection prevention

- Stop and call for help if a patient is at immediate risk. Do not delay urgent care to complete paperwork.

8. Before you start

- Confirm the forms and equipment named in this document are available and current.

9. Procedure

Follow the steps in order. Where a step says "If", take the action for the case that applies. Do not skip a step. If a step cannot be done, use section 11 and section 12.

Step	Action	How to do it	Key point
1	Calculate.	• Use the patient numbers and acuity for the last 4 weeks to calculate the staff needed for each shift (CLN-FRM-001).	Calculated from real demand.
2	Check each shift.	• Compare the rota with the calculation before each shift. • Escalate any gap to the duty manager.	Gap found before the shift, not during.
3	Review.	• Review the calculation each month and after any change in case mix.	The calculation follows the patients.

Decision points

- No decision points in this procedure.

10. Special situations

Situation	What to do
Out of hours	Follow the same steps. Use the on-call contact on the wall of the area.

11. Problems and escalation

- Any serious problem goes to the duty clinical lead at once and to the clinical director the same day.

12. Monitoring and compliance

What is checked	Target	How often	Who	If the target is missed
Shifts at or above the calculated level	At least 90%	Monthly	Chief nurse	Escalate to chief executive
Gaps with escalation recorded	100%	Monthly	Duty manager	Escalate to chief executive

13. Records

Record	Where it is kept	Kept for
Record named in this document	Patient record or the area file	{{facility.records_retention_years}} years

14. Training and competence

- Staff are trained in this document at induction and refreshed each year, with a recorded competency check.

15. Related documents

ID	Title	Relationship
CLN-FRM-001	Staffing calculation record	Calculation

16. Evidence

ID	Source and status
E-009	ASF Expert Committee consensus.
E-006	ASF Policy Framework v1.2. Adapted.
E-009	ASF Expert Committee consensus.

EC = ASF Expert Committee consensus. Items marked EC are reviewed by the Committee each year.

17. Change history

Version	Date	What changed	Approver and signature
1.0	{{document.effective_date}}	First version	Pending Expert Committee approval