PURPOSE: To assure that all patient care providers are competent to perform responsibilities in their specific areas of clinical practice.

SCOPE: RN, LPN, Nursing Technician, Unit Secretary, Monitor Technician

DEFINITIONS:

Competency: The demonstrated knowledge, key elements, skills and attitudes required to perform the duties of an assigned role.

Competency Assessment: Competency Assessment is a fluid, ongoing process. It is dynamic and responsive to the changing environment using a systematic evaluation of an individual’s capacity to perform defined expectations.

Competency Assessment Checklist: A form that details the step by step process necessary to successfully perform the behavior/skill. (Attachment D)

Competency Learning Contract: A form that details the specific competency that requires remediation. The contract includes: objectives; strategies; time frame; evidence completion; and evaluation. (Attachment C)

Competency Selection Worksheet: A form that details the needs of the organization/unit that will be focused on in the upcoming fiscal year. (Attachment B)

Competency Summary Sheet: A form that delineates successful completion of a particular competency/skill and the mode in which it was accomplished. (Attachment A)

Evaluator: A person designated by position and/or clinical experience who has received education in the competency validation process.
Exemplar: An illustration written by the nurse that exemplifies their clinical practice related to the selected skill(s)/behavior(s).

Initial Competency: Focus is on the knowledge, skills and abilities required to perform during the provisional period of hire.

Ongoing Competency: A dynamic process that is selected by nursing leadership based on the changing needs required to meet the goals of the organization.

Population Related Competency: (formerly known as unit-based). Dependent on the patient groups served by that particular unit/area/division, i.e. pediatrics, geriatrics, pregnant women, patients with cultural or language differences, patients with sensory impairments, specific pain management needs, palliative care, bariatrics and surgical care.

POLICY:

1.0 Upon Hire

1.1 Initial competency assessment begins when the Human Resources Department establishes the educational background, licensure/certification, and previous experience/references of the job candidate.

1.1.1 Some nursing units may require RNs to possess specialized certifications or credentials (i.e. ACLS, PALS, NRP, BLS, etc.) as a condition of employment.

2.0 Initial Competency

2.1 Successful completion of new employee orientation (NEO).

2.2 Successful completion of all components of Department of Nursing Orientation and unit-based orientation.

2.3 Prior to the end of the orientation period, competency for independent nursing practice will be assessed by documented completion of 85 percent of the general and unit-specific Orientation Skills Checklists. A joint decision will be made between the unit Nurse Manager / Immediate Supervisor, Clinical Specialist / Educator (as appropriate), Preceptor and employee that the employee is ready for release from orientation.

2.3.1 Staff shall not perform any skill independently until competence is evaluated and documented.
3.0 Ongoing Competency

3.1 Competencies for the Department of Nursing will be selected on a fiscal year basis by the Nurse Executive Committee.

3.1.1 These competency categories may include, but are not limited to:

- 3.1.1.1 Clinical
- 3.1.1.2 Equipment
- 3.1.1.3 Interpersonal

3.1.2 The selected competencies will be communicated to the Education Council by the Director of Professional Nursing Practice/Magnet.

3.2 Population Related competencies will be reviewed and selected by the Unit-Based Shared Leadership/Nurse Manager/Immediate Supervisor/Clinical Specialist/Educator on a fiscal year basis. These competencies will be listed on the Competency Selection Worksheet (Attachment B).

3.2.1 These competency categories may include, but are not limited to:

- 3.2.1.1 Clinical
- 3.2.1.2 Equipment
- 3.2.1.3 Interpersonal

3.2.2 The selected competencies will be communicated to the Education Council by that unit/area/division’s Clinical Specialist/Educator or designee for scheduling/planning of competency assessment and education.

3.3 All selected ongoing competencies must be 100 percent completed by the end of the designated year.

3.3.1 It is the primary responsibility of each employee to have all competencies completed within this time frame.

3.3.2 It is the joint responsibility of the Nurse Manager/Immediate Supervisor and unit-based Clinical Specialist/Educator to monitor the progress and completion of the selected competencies by the employee.
4.0 Competency Assessment Checklists

4.1 The Competency Assessment Checklist (see Attachment D for sample) details the step by step process necessary to successfully perform the behavior/skill. The Competency Assessment Checklists are located on the Intranet under “Nursing.” These forms are to be used by the evaluator to measure successful demonstration of the selected skill or behavior.

4.2 All Performance Criteria (100 percent) on the Competency Assessment Checklist must be completed in order to successfully demonstrate competency.

4.3 Successful completion of a competency will be documented on the Competency Summary Sheet (Attachment A).

4.4 If 100 percent of the competency steps are not demonstrated, an action plan will be developed by the Nurse Manager/Immediate Supervisor.

5.0 Documentation of Competency Completion

5.1 The Competency Summary Sheet (Attachment A) will be customized for each nursing unit/area/division to contain on-going competencies and population-related competencies.

5.2 The Competency Summary Sheet is the only required evidence of documentation of skill / behavior.

5.3 Competency Summary Sheets will be available prior to the start of the new fiscal year.

5.4 The Competency Summary Sheet will be maintained at the unit-level in the employee’s education file.

5.5 Each individual staff member is responsible for assuring completion of their individual Competency Summary Sheet. This form must be submitted to the employee’s Nurse Manager/Immediate Supervisor 30 days prior to the employee’s scheduled annual performance review.

6.0 Demonstration of Competencies

6.1 Each competency may have more than one designated method of demonstration. Staff may utilize any of these methods to demonstrate competency.

6.2 Possible methods to demonstrate competency.

6.2.1 Demonstrating the skill in daily practice (preferred method).

6.2.2 Simulation or Case Study.
6.2.3 Written Test

6.2.4 Exemplar

6.2.5 Some competencies may be best evaluated in a group scenario/classroom model. This option would be at the discretion of the Clinical Specialist / Educator.

6.3 The competency should be documented on the Competency Summary Sheet (Attachment A) in a timely manner after performance.

6.4 Staff members who fail to adequately complete any competency successfully are not to perform that skill until they have successfully passed retesting.

6.5 The employee, with the assistance of the competency evaluator, will complete a Competency Learning Contract (Attachment C) defining the timeframe and how they will remediate the skill. A copy of the contract will be forwarded to the employee’s Nurse Manager / Immediate Supervisor.

6.6 Remediation and retesting will be provided by the Clinical Specialist/Educator, Nurse Manager / Immediate Supervisor, Clinical Nurse Coordinator, or Education Council Member.

6.7 Staff members who are unable to successfully complete competency after remediation and retesting will be referred to the Nurse Manager / Immediate Supervisor for an action plan.

6.8 All employees will complete the annual HealthStream Mandatory Education session offered by Organizational and Workforce Development.

References:

NURSING POLICY:
DEPARTMENT OF NURSING COMPETENCY ASSESSMENT

Submitted by: Shared Leadership Global Council 12/11/12.

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