

**WASHINGTON ADVENTIST HOSPITAL
HOSPITAL POLICY MANUAL
COMPETENCY ASSESSMENT & DEVELOPMENT**

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SCOPE

The Competencies portion of this policy applies to all employees, volunteers, contract personnel, students and clinical Instructors working at WAH. The Performance Dialogue Process (PDP) portion of this policy applies only to employees.

PURPOSE

To define the process and plan for competency assessment and skills development.

DEFINITIONS

1. **Competency** – “Competency is an integration of the knowledge, attitudes, and skills necessary to function in a specific role and work setting.” (*From Staff Nurse to Preceptor, 2nd Edition, page 2*). Competency also means the ability to perform skills in a safe manner to prevent patient harm, qualifications, and licensure /certification requirements. This includes a self assessment at the time of orientation, and continues post hire.
2. **Orientation** – Orientation is the means by which new staff is introduced to the philosophy, goals, policies, procedures, position expectations, physical facilities, and services of a particular work setting.” (*From Staff Nurse to Preceptor, 2nd Edition, page 2*).
3. **Preceptor** – A preceptor is an experienced and competent staff who has received formal training to function in this capacity and who serves as a role model and a resource person to new staff.
4. **Preceptee** – A Preceptee is a newly hired staff who participates in a preceptorship program for orientation to an assigned unit
5. **Preceptorship** – Preceptorship is an organized instructional program in which preceptors facilitate the integration of newly hired employed nursing staff into their role responsibilities in the work setting.
6. **Performance Dialogue** - The performance dialogue process provides an opportunity for an ongoing exchange of views between a supervisor and the support staff regarding job results and performance planning. This process is designed to offer communication between supervisors and staff, improve job understanding and performance, and staff development, and provide a basis for salary improvement decisions.

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POLICY

Competency Assessment at Washington Adventist Hospital will be in accordance with the process and plan delineated in the Adventist Healthcare HR Competency Assessment Policy (#2.25).

Additional guidelines, as provided in this policy, address that which is unique to the Hospital.

The Corporate policy is to be used in conjunction with the Hospital policy.

The Clinical Education Advisory Committee at Washington Adventist Hospital provides oversight to competency activities at the Hospital. Committee members participate in competency development and planning at the corporate level.

1. **Calendar Year:**
WAH Calendar Year - January 1 through December 31.
2. **Age Specific Categories:** The hospital has designated criteria for age specific patient population as identified in the Plan for Delivery of Care.
3. **Introductory Period:** 90 days following the date of hire for full-time employees, and 120 days for part-time and limited part-time employees.

A. Orientation

1. All employees, volunteers, school clinical Instructor, students and contractual personnel are required to complete required orientation. Orientation for all new staff, volunteers, travelers (contractual clinical personnel), non-group students and new school clinical Instructor include General Hospital Orientation or equivalent orientation with documentation. Clinical Instructors are responsible for orientation of their students. Nursing clinical Instructors are required to attend nursing orientation unless they have been an instructor at WAH in the past six months.
2. Any practicum Student completing practicum hours with an assigned and approved preceptor who is an employee of this hospital is required to complete the required hospital orientation unless they have had a clinical rotation at WAH in the past six months.
3. The director/manager is responsible for arranging the provision of unit based competency orientation for each position.
 - a. Unit based – orientation checklist will be completed by an assigned preceptor. Unit or department director/manager will review the checklist and file in employee's file.
4. The director/manager and/or designee determine which competencies require validation of performance and appropriate learning activities in collaboration with clinical specialist for the unit and the Education Department.
5. Orientation includes completion of the Learning Suite Computer-Based Training assigned modules within the first thirty (30) days of employment, annually, and as needed thereafter.
6. In the event that an employee's role changes or an employee transfers to a new position, it is required that the employee completes all required orientations and unit based training for the new position as specified. The new director/manager is responsible for arranging the provision of unit based competency orientation for the transferred employee.

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7. The Education Department is responsible for providing RN (including interns and nurse-in-training), PCT USC, and Monitor Tech orientations prior to assuming the role on the Nursing unit or in Department. Participants must complete each job specific orientation in its entirety before starting patient care.
8. Care Excellence training is required for clinical areas. Days of training are determined by responsibilities and clinical area.
9. Learning Suite module assignment is position-specific and determined by the Education Council.
10. Performance is appraised during and/or at completion of the introductory period.

B. Hospital Based In-services and Education

1. Employees are required to attend all mandatory in-services and education for department or unit in meeting the educational requirements for their role.
2. An employee who misses a mandatory inservice or education on the unit or in department will be required to follow up with the departmental director/manager and or designee for completion of the required education.

C. Competency Development

1. Hospital based competencies can be developed at the unit/department level, must be evidence-based and referenced. Competencies will be reviewed by the Clinical Education Advisory Committee (CEAC) in conjunction with the Professional Development Council and or departmental leadership.
2. For Unit based competencies, depending on the type and scope of the competency, development and approval may occur at the department level or may be broader based with approval from the Professional Development Council.
3. The standard for a particular competency is recognized as residing in the department(s) in which the activity exists as well as in the Education Department.

D. Competency Plans

1. Organizational leadership in conjunction with the Clinical Education Advisory Committee (CEAC), Professional Development Council and the AHC Education Council Team develop the competency plan on an annual basis and maintain it current throughout the year, revising the plan as necessary to reflect organizational, professional, or regulatory changes.
2. The competency plan delineates expected competencies for each position.

E. Ongoing Annual Required Training

1. Learning Suite assigned modules are to be completed no later than the end of the calendar year, or earlier if specified by organizational leadership in conjunction with the Education Department. Volunteers are not required to complete learning suite assignments.

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2. Requirements for BLS/CPR, ACLS, NRP, PALS, PEAT and other life support training requirements are determined by job position. **Requirements for BLS/CPR, ACLS, NRP, PALS or other certification must be completed as defined in the job description.**
3. There will be no grace period for Life Support certification requirements; **employees and contract staff must have a current card at all times.** Life Support Certification Card expires at the end of the month that is written on the card. **Any employee or contract staff with an expired card will be suspended without pay (cannot use PTO) during this period until a new card has been obtained within 5 days maximum.** Human Resources must be notified upon the implementation of suspension status. If non-compliance continues after 5-days of suspension, the employee will be terminated.
4. Life Support Classes are offered through AHC Life Support Training Center and classes are free of charge to AHC employees per position requirement. If employee fails to cancel an enrolled course within 48 hours or shows up to class late and/or unprepared and sent home, he/she will be required to pay out of pocket for the next course.
5. The requirement for ACLS and other Life Support Training courses will be determined by job position. Life Support Classes are offered through AHC Life Support Training Center and classes are free of charge to AHC employees per position requirement. If employee fails to cancel an enrolled course within 48 hours or shows up to class late and/or unprepared and sent home, he/she will be required to pay out of pocket for the next course.

All direct patient care and appropriate non-direct patient care staff will be required to complete Skills Day annually on the calendar year. Required skills are identified and approved by the unit manager/director and facilitated with the assistance of the Education Department.

Note the following:

- a. **Newly hired employees will be required to complete Skills Day in the calendar year following their hire year and annually thereafter.**
- b. **Graduate Nurse Interns will be required to complete Skills Day during the calendar year following their internship program and annually thereafter.**

F. Competency Records

1. Registration and rosters of attendance will be maintained in Learning Suite and available on the staff's transcript.
2. Staff may submit documentation of External Educational Activities to the Education Department for inclusion on their Learning Suite Transcript.

G. Performance Dialogue Process

1. Annual Electronic Performance Dialogue Plans (ePDPs) must be completed on an annual basis as determined by Human Resources Leadership.
2. Introductory ePDPs must be completed by the end of the month in which the employee completes either the 90 or 120 day introductory period. Where that date falls in the last week of a month, the due date will be extended to the end of the following month.
3. Introductory PDPs will still be required upon transferring to a different job title or when the transfer, with the same job title, represents a significant change in job duties.

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H. Failure to Complete Mandatory Organizational Competencies:

1. **For Online Learning Suite Modules:** failure to complete by the established communicated deadline may result in loss of eligibility for annual merit increase, suspension, and eventually termination.
2. **For Assigned Skills Day:** failure to complete assigned Skills Day stations in Learning Suite by the last scheduled Skills Day for the department or hospital wide for that year will result in termination with the exception of pre-approval absence by departmental director or manager.
3. Required Department competencies and mandatory In-services and education: failure to complete by end of calendar year or date defined by leadership will result in suspension up to 5-days during which time the competency must be satisfied to maintain employment.
Human Resources must be notified upon the implementation of suspension status.
If non-compliance continues after 5-days of suspension, the employee will be terminated.

I. Contract Personnel

1. All agencies / companies are screened, through an interview process, for their ability to provide personnel that are competent in the role they are expected to fill, and satisfy any regulatory and accreditation requirements.
2. Staff will be required, prior to working, to submit / provide evidence of any required licensure or certification(s), skills assessment, and competencies specific to the position that have not already been received.
3. The Education Department will work with the contracting department and HR to determine orientation needs related to job role.
4. Contract personnel will complete Learning Suite modules prior to the start of their assignment.
5. Contract personnel will be provided an orientation appropriate to the position they have been contracted to fill.
6. Orientation may include:
 - Hospital philosophy
 - General safety information
 - Emergency Codes
 - Policies and procedures deemed essential
 - Unit specific information and procedures
 - Confidentiality and Medical Records
 - Rights and Responsibilities of Patients
 - Reporting Patient Abuse
 - Interdisciplinary Patient Care Planning (clinical staff only)
 - Philosophy of Department
7. The contracting department will maintain current any continuing requirements for the personnel contracted.

J. Leadership Competencies

1. Leadership competencies are determined by Senior Management. These may include continuing education activities that are undertaken to meet the performance expectations of the position or to develop a more expansive knowledge or specific expertise.

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K. Affiliation School Instructor

1. Affiliating Institution Clinical Instructor will be required to submit / provide evidence of any required licensure or certification(s), skills assessment, and competencies specific to the role to the Education Department prior to supervising students.
2. Nursing Clinical Instructor from the colleges/schools must attend General, Nursing Orientation and Unit Orientation if they have not had a clinical rotation at WAH within the last six months. Additionally, nursing instructors must attend Care Excellence training to utilize the electronic medical record. Days of training will vary with clinical location. Schools are to contact the Education Department for specific guidelines and orientation materials.
3. Non Nursing Clinical Instructor from the colleges/schools must attend General and Unit Orientation if they have not had a clinical rotation at WAH within the last six months. Additionally, clinical Instructor must attend Care Excellence training to utilize the electronic medical record. Days of training will vary with clinical location. Schools are to contact the Education Department for specific guidelines and orientation materials.
4. The Education Department will maintain current any continuing requirements for the School Instructor.
5. The School's Instructor will be responsible for orienting the students to the assigned unit with each clinical rotation.
6. Students will complete all required role Learning Suite Assignments before clinical rotation.
7. The Students will practice under the supervision of their School Instructor or assigned licensed preceptor.
8. **The School Instructor will also be held to the policies and procedures outlined in Contracts and Affiliations Educational Policy # WAH. 2014 and the Adventist Healthcare Affiliation Agreement.**