

## FACILITY NAME

### Competency Assessment Program

**DATE:** October 2, 2017

**POLICY:** Employees and contractors in all departments will participate in an ongoing program to assess and demonstrate knowledge, skills and judgements required to perform job duties.

**PURPOSE:** Assure that all staff providing care and services is competent to do so.

#### PROCEDURE:

- a) The comprehensive, facility-wide competency assessment program will include the following elements:
  - 1) Pre-employment screening\*
  - 2) Self-assessment upon hire
  - 3) Orientation/onboarding\*\*
  - 4) In-service education\*\*\*
  - 5) On-going assessment of competence
- b) The Facility Assessment, performance appraisals, Department of Health survey findings and resident/family complaints will be utilized by the interdisciplinary management team to determine aspects of care for competency assessment in the coming year. Plans will be developed each year in December for implementation the following January.
  - 1) Planned activities should utilize a variety of assessment methods, including, but not limited to:
    - i. Return demonstration
    - ii. Observation in the work-setting, real-time or post completion (such as with a clinical record review), as appropriate
    - iii. Post-test/quiz
    - iv. Completion of a self-learning module
    - v. Courses which validate competence before awarding certificates of completion

\* See Human Resource Policy Manual

\*\* See Orientation Manual

\*\*\* See In-service Calendar

- c) Ongoing assessment of competence will be the responsibility of each department manager or designee.
- d) Results of competency assessment exercises will be documented for each employee. Staff are expected to demonstrate B-level performance to be retained in the position for which competence is assessed.
  - 1) Staff must demonstrate competence on new equipment before using it to provide resident care.
- e) Aggregate results of competency assessment exercises will be reported by each department manager on a quarterly basis and annually to the Quality Assessment and Assurance Committee. The Committee is tasked with recommending needed adjustments to elements of the program as indicated by aggregate results.

\* See Human Resource Policy Manual

\*\* See Orientation Manual

\*\*\* See In-service Calendar

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