

Clinical Competency: Evolution, Development, and Methods

M. Heather Paterson, MS, RN, CCRN, CPNP
Roxanne Baier, RN, BSN



"Pole Vaulting Over Mouse Turds"

Unraveling the Mysteries of
Competency Documentation



Class Objectives

- At the completion of this presentation the learner will be able to
 - Discuss education and competency-related terminology
 - Describe strategies for identifying and developing initial and ongoing competencies
 - Recall regulatory requirements
 - Describe methods for assessing and validating competency



Working Definitions

Competence/Competency- a determination of an individual's skills, knowledge, and capability to meet defined expectations. (CAMH Update 1, March 2006)

Initial Competency- focuses on the knowledge, skills and abilities required in the first six months to a year.

Ongoing Competency- builds on the already established knowledge, skills, and abilities; reflect the new, changing, high risk, and problematic aspects of the job as it evolves over time

Accountability- the quality or state of being accountable; especially: an obligation or willingness to accept responsibility or to account for one's actions (Webster, 2006)



Children's Definitions

Required Education- presentation of content that is primarily in the cognitive realm

- may be measured using a post-test

Skill Validation- focuses on performance of psychomotor skills

- commonly measured using direct observation or performance simulation

**Required Education + Skill Validation =
Competency**



More Children's Definitions

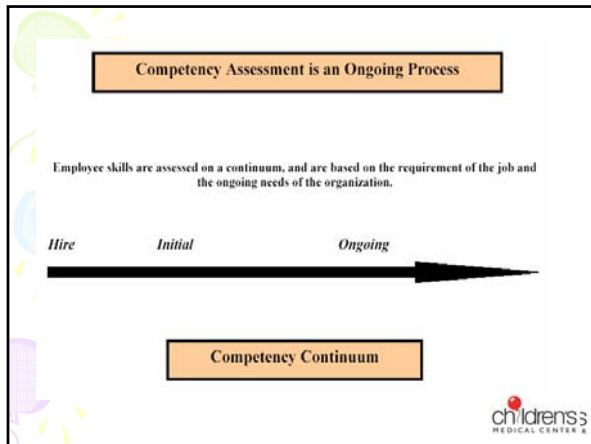
Expert- instructs others in competency

Competent- can perform consistently

Remediation- insufficient level of Competency/no opportunity to demo Skill/behavior; requires documented .Plan with timeline for completion

N/A- not applicable (reason to be explained). Should not be on initial competencies. e.g. N/A- does not perform in work area.





- Selected competencies are assessed when an individual is hired, during their orientation period to the job, and throughout employment as the requirements of the job and the needs of the organization change.
- Ongoing competency assessment is **NOT** annual re-assessment of the initial competencies for the job.
 - Ongoing competency assessment is a dynamic process that is based on the ever-changing needs required to carry out the organization's mission and goals.
 - Ongoing competencies will be different than the initial competencies identified for the job.
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- ### At the risk of sounding corny...
- ...competency assessment begins at the interview
 - For example, does the job require a specific certification or license? Prior experience? Particular abilities or characteristics?
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- ### Initial competency
- Organization-wide and unit-specific orientation
 - Performance with increasing independence under supervision of preceptor
 - Focus on knowledge and skills required for successful performance in first 6-12 months of employment
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- ### Initial House-wide RN Competencies
- Why we do it this way
 - Includes basic core stuff
 - Inpatient and Ambulatory
 - All new hires nurses
 - What about LVNs?
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- ### Think of the Four "Ws"
- Who
 - What
 - When
 - Where
-
-

Who

- Applies to the employee
 - GN
 - New hire with similar experience
 - New hire with different experience
 - Experienced nurse returning to the workplace after time off
- Applies to the patient
 - Pediatric population
 - Unit-based population



What

- ... knowledge/skill set does the new employee have?
- ...clinical needs does the patient have?
- ...medications are specific to the population/unit?
- ...equipment and related skills does the patient's diagnosis or treatment plan dictate?
- ... procedures are commonly or routinely done?



When

- How often does the individual need to perform these skills?
- Will the skills be performed in the first year of employment?
- Remember that performing the skill requires repetition to attain and maintain competency.



Where

- Is the skill going to be performed on the unit?
- Off the unit but on your patient population?
- If off the unit, will the unit-based nurse be involved?



Think ...

- ...about the whole picture
- ...is it relevant, clinical, observable, measurable
- ...if in doubt about a particular skill or activity
 - Is the individual allowed to do it?
 - Was the individual taught how to do it (or will she be)?
 - Does the individual know how to do it?
 - Does she actually do it?



Time frames

- Begin upon hire
- One year to complete
- Planned completion of modules and other required education
- Minimum acceptable completion at "end" of orientation



So you have a lot of widgets in your department

- Who
 - What nurse will use the widget
 - What patient needs a widget
- What
 - We already know what --- it's a widget
 - Goes with a widget? A thingamabob? A doomaflochie?
 - Well you need to include the thingamabob and the doomaflochie on the checklist too.



- When
 - Will it be used --- everyday? Every week? Once in awhile?

- Where
 - Do you bring it to the patient?
 - Take the patient to the widget department?
 - Does your nurse perform or assist with widget use in the widget department?



Important note about "N/A"

- If items are routinely N/A, take 'em off
- Be as sparing as possible with our ol' friend N/A
- Have a mechanism for describing N/A



Ongoing comps

- Ongoing vs. annual
- Builds on or re-evaluates basic skills
- New, changing, high risk, problematic
- Population-based



New

- Skills, equipment, procedures introduced recently
- Initial training on the new thingy, often provided by the thingy company rep
- Ongoing competency evaluation of the thingy



Changing

- Change in standards
- Change in population
- Change in procedure



High Risk/Time Sensitive

- Scary, dangerous, life-or-death, don't have time to read the procedure manual when you need to do it
- Do it a lot? (IV management)
- Don't do it often? (Defibrillator)



Problematic

- What is the PI data?
- What problems have you noticed anecdotally?
- Incident reports



How does Children's identify ongoing competencies?

- Annual "look at" meeting!



Population

- Children's has a specific approach to this for ongoing competency documentation
- Select two age groups
- Incorporate into the clinical competency
 - Use of widgets on infants
 - Use of thingies on adolescents



Development

- Involve staff
- Consult managers
- Don't forget the required education piece
- "Mandatory"
- Don't include every pet or orphan project



Regulatory Requirements

- The Joint Commission
- Texas Department of Health (TDH)
- BNE
- CLIA
- CMS
- City of Dallas

It's not because the Joint Commission says we have to...it's because it's the right thing to do.

Heather Paterson MS RN CCRN CPNP



Organization-Wide Needs

- Hospital PI data (i.e. BSI)
- Recommendations related to poor outcomes
- Identification of new regulatory standards (NPSG)
- Communication of organizational values and standards
- Magnet status requirements



Children's methods

- Observation
 - Gold standard
 - Direct assessment in clinical practice
 - Use this method as much as possible
- Simulation
 - Very acceptable and desirable method
 - Skills lab and non-clinical setting



Children's methods

- Testing
 - Adjunct method
 - Measures knowledge and/or learning
 - Minimize use of this method
- Verbalization
 - Discussion demonstrates adequate knowledge of pertinent content
 - Appropriate for steps of discussion of "indications"
 - Micro-minimize use of this method



Children's methods

- Direct observation
- Skills fairs
- "Teaching" vs. competency demonstration
- Train the trainer



Some words

- Yes!
 - Demonstrate
 - Define
 - Describe
 - Identify
 - Differentiate
 - Interpret
- Be careful!
 - Knows
 - Understands
 - Accepts
 - Acts
 - Is aware
 - Is able
 - Has the ability



Competency document

- Competency statement or category
- Descriptive criteria
- Level of performance
- Method of assessment
- Date and initials of assessor
- Identification of initials





References

Comprehensive Accreditation manual for Hospitals (2006). Illinois: Joint Commission Resources

Webster's encyclopedic unabridged dictionary of the English language (2006). New York: Portland House.

Wright, D. (2005). *The ultimate guide to competency assessment in healthcare* (3rd ed.). Minneapolis, MN: Creative Healthcare Management

