

# Competency Assessment: Making it “FUN” for everyone!

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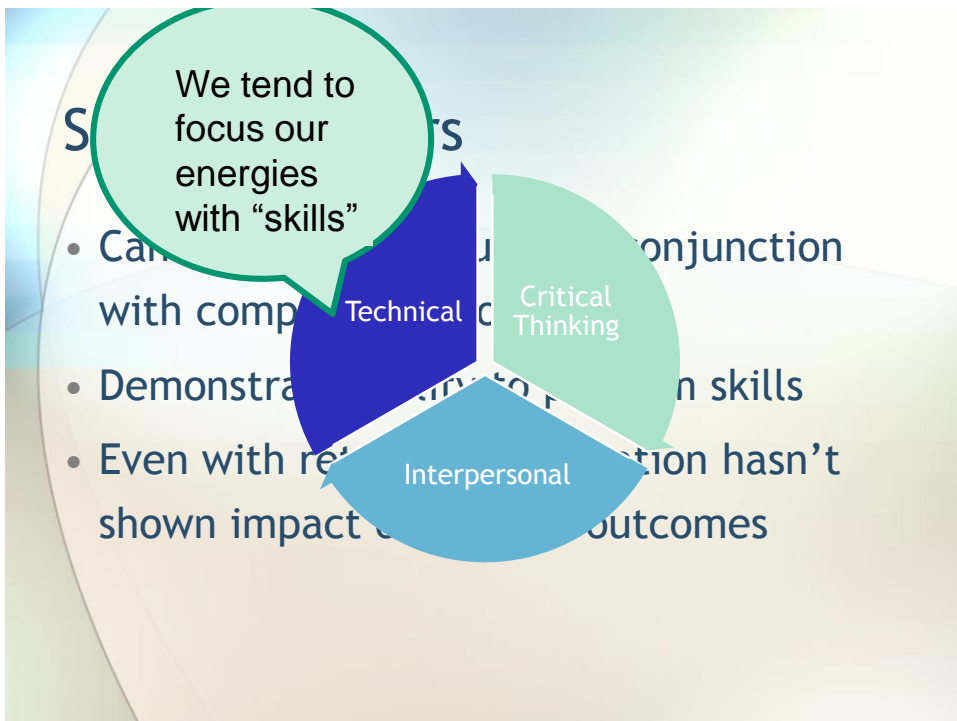
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## Objectives

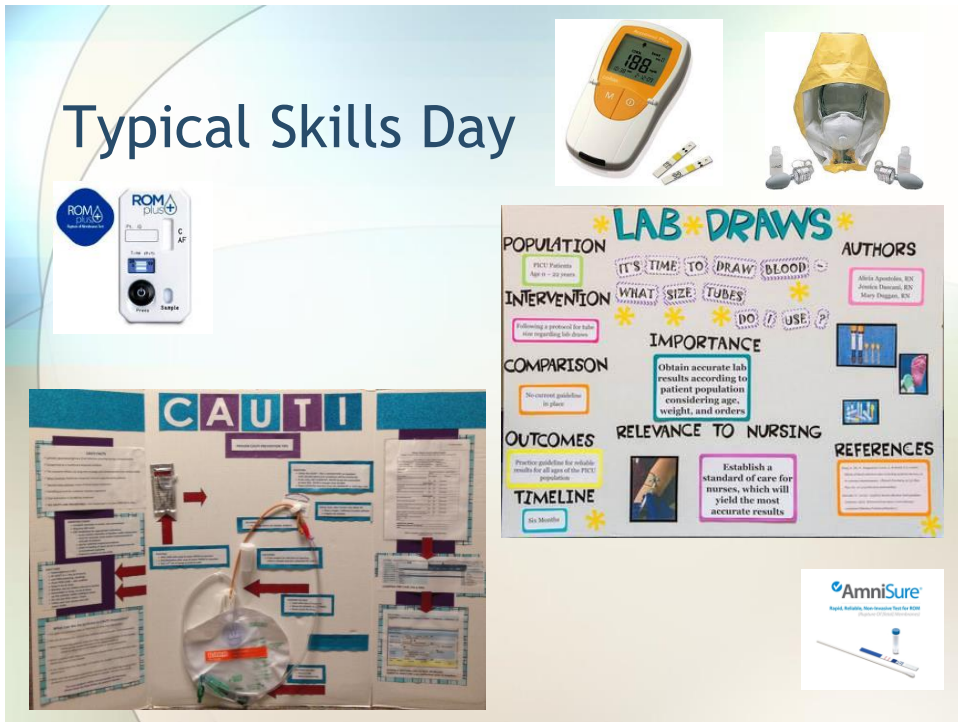
- Review the competency assessment model my healthcare system used.
- Acknowledge the various forms of verification methods
- Describe the partnership between leadership and HR around the competency assessment model.
- Discuss how to implement a new process

# Introduction

- Let's Discuss “**Skills Day**”
- Let's Chat about “**Education**”
- Let's Talk about “**Competency**”



# Typical Skills Day



## Education

- Education Programs (hospital based or external sources ie; Health Stream, Gnosis, Awhonn, March of Dimes, CE center)
- Webinars
- May or may not provide continuing education hours (informal/formal)
- May have reference materials
  - Checklist
  - Manuals
  - User guides (Bili Meters, Security System, EMR)

# Defining Competency

- As defined by The Joint Commission, competency is a “determination of an individual's skills, knowledge and capability to meet defined expectations”. (TJC, 2008)
- “A process whereby nurses apply their knowledge as they demonstrate the skills and abilities necessary to care for patients”. (Rusche, 2001)
- “the application of knowledge, skills and behaviors that are necessary to meet the requirements of the organization, department, and work setting requirements under the varied circumstances of the real world”. (Wright, 2005)

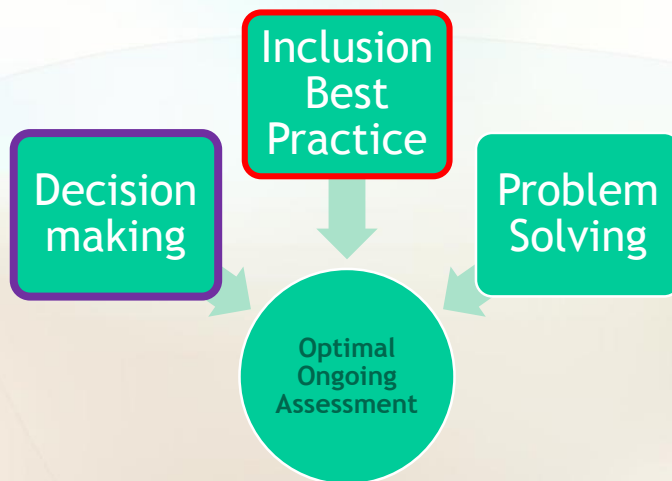
## What is your current process? Is it working??

- Does it evaluate individual and group performance?
- Does it meet standards set by Awhonn, Joint commission, State board of Nursing etc.
- Address units needs? Problematic issues? Organizational needs?

## What is your current process? Is it working?

- Do you have a process for providing on-going learning and competency development for nursing assistants, latch technicians, secretaries and surgical scrub techs?

## The Goal of Competency....



## Legal Considerations

- When facing litigation you **will** be questioned at both deposition and trial (Miller, 2017).
- RN's and Hospitals need to be able to describe educational background in EFM, high risk care, including independent study, course work, clinical meeting or online educational offerings (Miller, 2017).

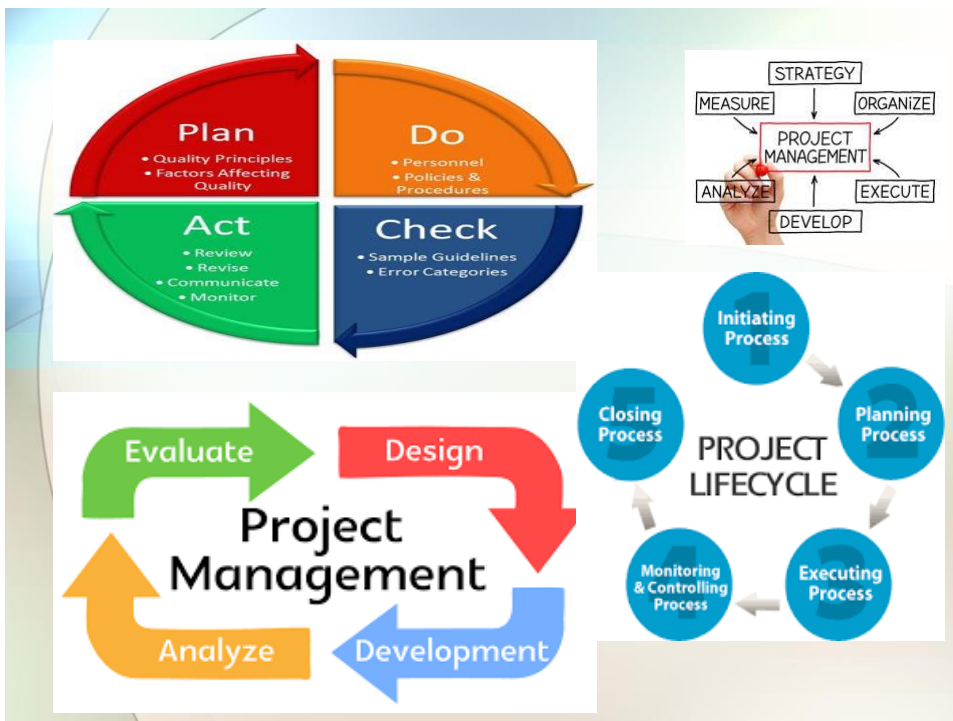
## Legal Benefit

- “ *The only proven way to avoid litigation is to avoid a poor outcome, and the best way to avoid a poor outcome is to have a well-prepared team. Is the opinion of this columnist that there is no such thing as too much when it comes to knowledge, more avenues there are for learning, the safer the care provided to women*”. (2017) Miller,L., Education, Competency,

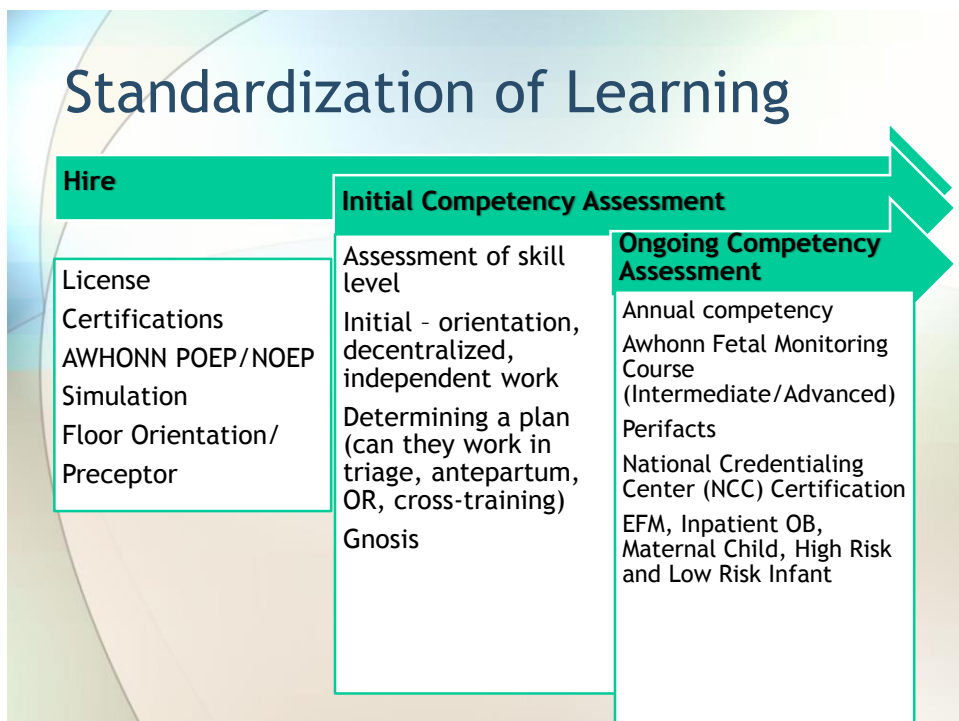
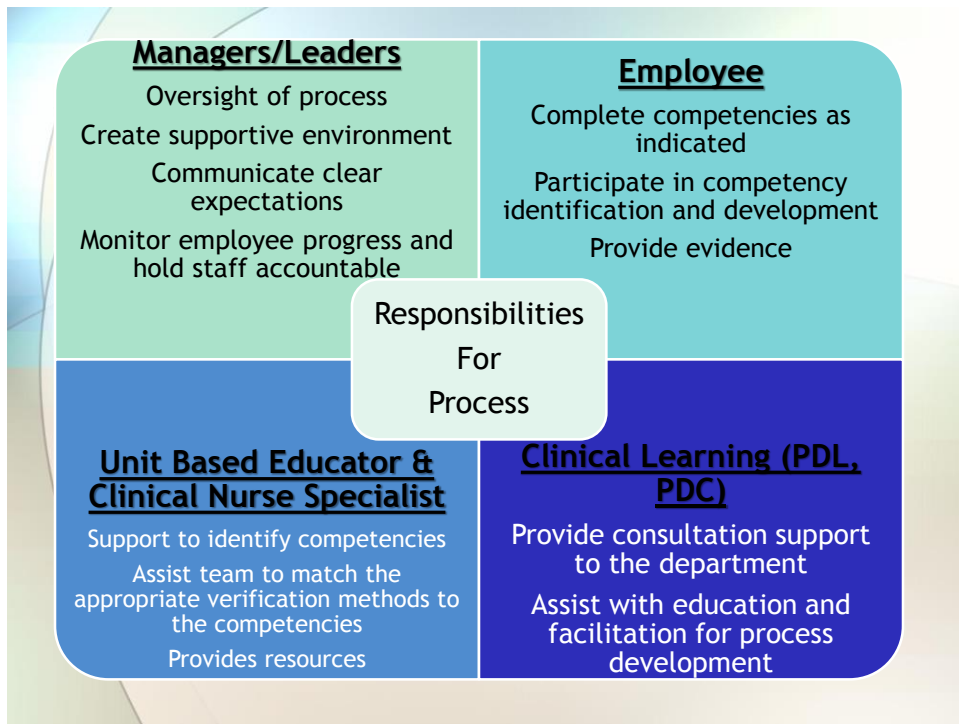
Certification, Credentialing; JPNN

# On the Road to Ongoing Competency Assessment

- Define competency for your organization
- Develop a policy that guides your competency assessment process.
  - Definition of competency in your organization
  - Explanation of process for assessment
  - Clarification of responsibilities of managers, leaders, educators and staff
  - Clarification of the resources available









## Wright's Competency Assessment Model Elements of Success

### Competencies Collaboratively identified

- Reflective of the dynamic nature of work

### Employee-centered verification

- Verification method choices are identified and appropriately match the competency categories

### Leaders create a culture of success

- Focused on the organizational mission
- Also focused on supporting the employee

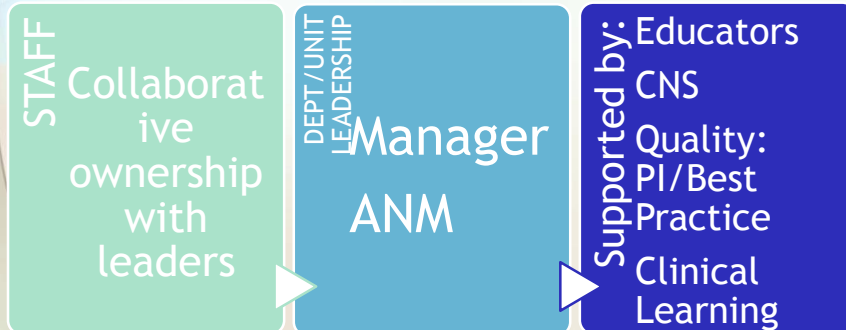
## Assemble Your Team and Get Motivated!!



- Set expectations - ( ie; first year system competencies, or pilot service line, amount of competencies, specific validation methods)
- Determine timelines
- Provide everyone with the **WHY's**



## Who identifies competencies?



## What is needed?

- Job description
- Regulatory requirements (TJC, AWHONN, AAP, State Board)
- Data (organization, facility, unit)
  - PI/QI
  - Patient satisfaction indicators
  - NDNQI
  - EMR audits
- Scope of Practice

# Create Your Worksheet!!



## 1. What's **NEW**?

Competency Needs	Priority (Hi-Med-Low) Time Sensitive?	Applicability: Standard Competency ALL service line Unit Specific
What are NEW procedures, policies, equipment, inservices, etc. that affect this job?		

# Create Your Worksheet!!



## 2. What's **CHANGED**?

Competency Needs	Priority (Hi-Med-Low) Time Sensitive?	Applicability: Standard Competency ALL service line Unit Specific
What are the CHANGES procedures, policies, equipment, inservices, etc. that affect this job?		

## Create Your Worksheet!!



### 3. What are the **HIGH RISK** aspects of this job?

Competency Needs	Priority (Hi-Med-Low) Time Sensitive?	Applicability: Standard Competency ALL service line Unit Specific
High risk is anything that would cause harm, death, or legal action to an individual or the organization		

## Create Your Worksheet!!



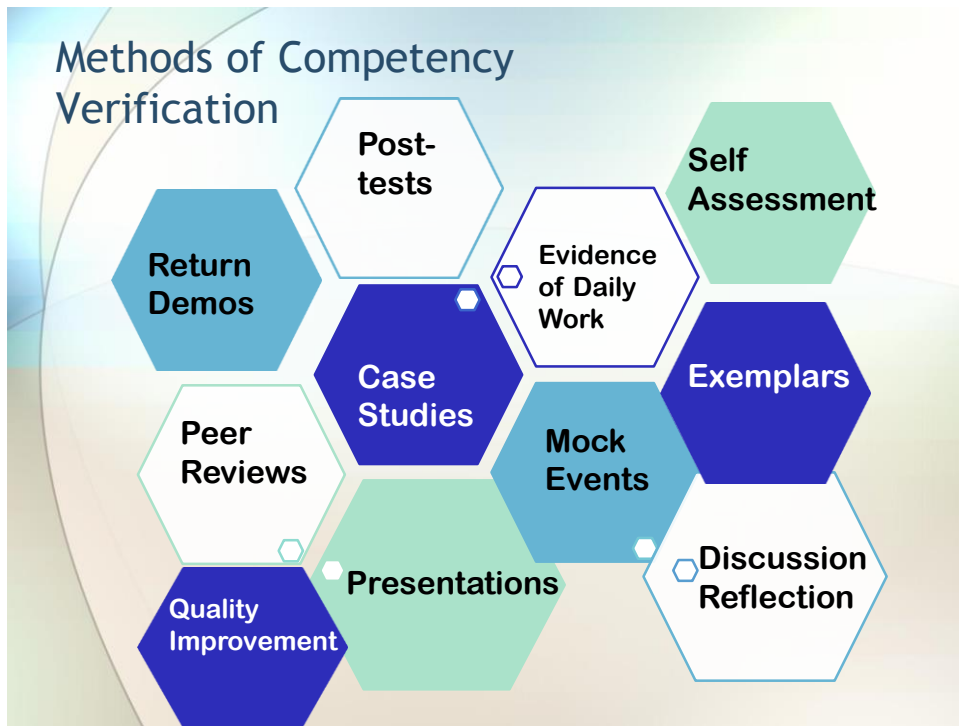
### 4. What are the **PROBLEMATIC** aspects of this job?

Competency Needs	Priority (Hi-Med-Low) Time Sensitive?	Applicability: Standard Competency ALL service line Unit Specific
These can be identified through quality management data, incident reports, patient surveys, staff surveys, and any other form of formal or informal evaluation.		



## Finalize the Competency List

- Let's Get To Work!! 
  - Select Validation Methods (**KEEP IT SIMPLE** in the beginning)
- Develop time lines for your institution and work CLOSELY with leadership and HR to identify your plan.

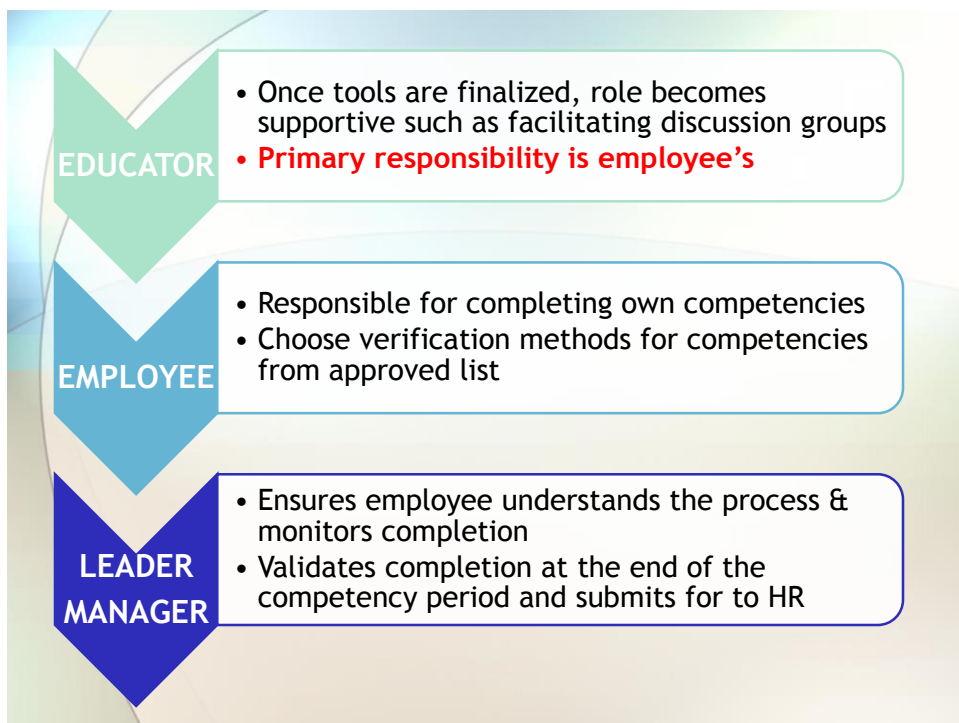


## Verification Methods

- How do you match methods?
  - Not one verification method that assess all 3 domains
  - Some are better selected to measure competencies over others
    - Test - knowledge, but not application
    - Checklist - technical skills not critical thinking
    - Case studies- clinical reasoning not technical

# Verification Methods

- What do we want them to do/show?
  - Critical thinking, interpersonal, technical?
- How would I know they have demonstrated competency?
- What method most clearly helps display competency based on what I want them to do/show?





Facility	Unit	Manager	Competency Statement	Verification method
Utopia Medical Center	Birthing Center	Melissa Manager	<p>1. The registered nurse will apply perquisite knowledge to respond to Maternal Code in the pregnant patient</p> <p>2. Administers newborn medications safely:            &gt;Accurately calculates and draws up medications            &gt;Checks placements and patency of intravenous site</p>	<p>1. Computer Based Learning <b>AND</b></p> <p>a. EDW <b>or</b>            b. Simulation Event <b>or</b>            c. Case Presentation</p> <p>2. Computer Based Learning <b>REQUIRED and</b></p> <p>a. Test/Exam <b>or</b>            b. Case Study <b>or</b>            c. Return <b>or</b> Demonstration with approved validator</p>

## Example of Competency Validation Tool for Chest Tubes

Competency	Method of Verification (Choose One)	Verification Documents (All forms on the Intranet)
Sahara dry suction chest tube	<p>Return Demonstration: Skills Fair (dates/times)</p> <p>Presentation (topic must be approved by the educator)</p> <p>Teleflex online learning(<a href="http://www.teleflex.com">http://www.teleflex.com</a>)</p>	<p>Chest tube skills checklist</p> <p>Presentation Form</p> <p>Print certificate</p>
Schanne, L., Hand, C., Kirk, G., LaPorta, P.(2016) From Chaos to Competency;JCEN;47(3)	Peer Review: set up, change, or maintain chest tube	Chest tube skills checklist

# Example: Competency Plan

## Competency Assessment Registered Nurses

Competency	Validation Method	Completion Date
1) Team Building	1) Create & implement a team building exercise 2) Exemplar 3) Present 3 sources of evidence of excellent teamwork (from co-workers or leaders)	All: 1/31/18 (same as L&D)
2) IV Administration of Magnesium Sulfate	1) CBL & TEST (plus one of the following) 2) Mock event 3) Journal Club (Discussion/reflection) 4) Chart review 5) Attend planned peer review	1) MANDATORY 2) Schedule TBA 3) Schedule TBA (March) 4) 5/30/18 5) Schedule TBA
3) VTE Assessment	1) Peer review 2) Case study	1) 12/31/17 2) 1/31/18
4) Postpartum Hemorrhage and Measuring EBL	1) Mock event 2) Peer review 3) Exemplar	1) Schedule TBA 2) 3/31/18 3) 5/30/18
5) IUFD: Roles and Responsibilities	1) Case Study 2) Exemplar 3) Test/Exam	1) 1/31/18 2) 3/31/18 3) 5/30/18
6) Customer Service	1) Present 5 sources of recognition for excellent customer service (from patients, co-workers, or leaders) 2) Implement 1 customer service initiative 3) Exemplar	1) 5/30/18 2) 5/30/18 3) 1/31/18
7) Plan Baby Missing/Emergencies: What is My Role?	1) Mock event 2) Peer review 3) Exemplar	1) 1/31/18 2) 3/31/18 3) 5/30/18

# Example Competency Plan

<b>Job Title:</b>	<b>Date:</b>
<small>Instructions: Using the Nursing Annual Professional Practice Competency Assessment Process Worksheet, list the competencies in this column, including the appropriate population specific needs. Please ensure you identify at least one competency from each of the domains (Clinical/Technical Skills, Critical Thinking Skills and Interpersonal Skills) and the time frame for completion.</small>	<small>Appropriate verification methods will be specified for each competency with criteria for successful completion. Verification methods may include: Tests/exams, return demonstrations, evidence of daily work, case studies, exemplars, peer review, self assessment, discussion/reflection groups, presentations, mock events/surveys, and quality improvement modules. ***Where appropriate, the population serviced will be noted.</small>
<b>COMPETENCY STATEMENT</b>	<b>VERIFICATION METHODS</b> Complete prerequisite education as indicated. Select <b>one</b> of the listed verification methods for each competency statement.
Assists mothers with breastfeeding: • Understands advantages of breastfeeding • Successfully able to initiate breastfeeding/pumping • Educates and supports breastfeeding mothers	<b>Mandatory</b> <input type="checkbox"/> Test/Exam <input type="checkbox"/> Return Demonstration
Responds appropriately to adult codes: • Identifies adults in need of resuscitation • Correctly performs chest compressions and ventilations • Works as a team to revive the adult	<input type="checkbox"/> Mock Event <input type="checkbox"/> Evidence of Daily Work
Responds appropriately to infant codes: • Identifies infants in need of resuscitation • Correctly performs chest compressions and ventilations • Works as a team to revive the infant	<input type="checkbox"/> Mock Event <input type="checkbox"/> Evidence of Daily Work
Demonstrate the medication reconciliation process: • Reconcile home medications on admission • Reconcile home medications on discharge • Verify medications patient is taking from home	<b>Pre-requisite:</b> CBL with completion certificate <input type="checkbox"/> Test/Exam <input type="checkbox"/> Peer Review (Chart) <input type="checkbox"/> Evidence of Daily Work
Administers newborn medications safely: • Accurately calculates and draws up medications • Checks placements and patency of intravenous site	<b>Pre-requisite:</b> CBL with completion certificate <input type="checkbox"/> Test/Exam <input type="checkbox"/> Case Study <input type="checkbox"/> Return Demonstration with Approved Validator
<b>System Required Competency:</b> Staff will demonstrate proper use of SBAR communication to WellStar providers.	<input type="checkbox"/> Submit <b>one SBAR Communication Competency</b> using provided form (staff may choose to complete the competency by either Return Demonstration or Peer Review validation methods)
<input type="checkbox"/> Competency demonstrated <input type="checkbox"/> Not yet deemed competent, performance improvement plan required <b>Performance Improvement Plan:</b>	
<b>Validator signature:</b>	<b>Date:</b>

# Example: Competency Plan Nursing Assistants

Competency Assessment  
Nursing Assistants

Competency	Validation Method	Completion Date
1) Team Building	1) Create & Implement a team building exercise 2) Exemplar 3) Present 3 sources of evidence of excellent teamwork (from co-workers or leaders)	All: 1/31/12 (same as L&D)
2) The Magnesium Sulfate Patient: What is My Role?	1) Mock Event 2) Journal Club (Discussion/reflection) 3) Exemplar	1) Schedule TBA 2) Schedule TBA (March) 3) 5/30/18
3) The Patient with Postpartum Hemorrhage: What is My Role?	1) Mock Event 2) Exemplar 3) Case Study	1) Schedule TBA 2) 3/31/18 3) 5/30/18
4) Hourly Rounding	1) Peer review (by designated "secret shopper") 2) Presentation	1) 11/30/17 2) 3/31/18
5) Abnormal Vital Signs	1) Test/Exam (plus one of the following) 2) Case study 3) Presentation	1) MANDATORY 2) 3/31/18 3) 5/30/18
6) Time management	1) Case study 2) Journal club (Discussion/reflection) 3) Exemplar	1) 1/31/18 2) Schedule TBA (Feb.) 3) 5/30/18
7) Customer Service	1) Present 5 sources of recognition for excellent customer service (from patients, co-workers, or leaders) 2) Implement 1 customer service initiative 3) Exemplar	1) 5/30/18 2) 5/30/18 3) 1/31/18
8) Plan /Emergencies: What is My Role?	1) Mock event 2) Peer review 3) Exemplar	1) 1/31/18 2) 3/31/18 3) 5/30/18

# Example: Competency Plan Secretaries

2011-2012 Competency Assessment  
Secretaries

Competency	Validation Method	Completion Date
1) Team Building	1) Create & Implement a team building exercise 2) Exemplar 3) Present 3 sources of evidence of excellent teamwork (from co-workers or leaders)	All: 1/31/18 (same as L&D)
2) The Magnesium Sulfate Patient: What is My Role?	1) Mock Event 2) Journal club (discussion/reflection) 3) Exemplar	1) Schedule TBA 2) Schedule TBA (March) 3) 5/30/18
3) The Patient with Postpartum Hemorrhage: What is My Role?	1) Mock event 2) Exemplar 3) Case study	1) Schedule TBA 2) 3/31/18 3) 5/30/18
4) Visitation/Security	1) Peer review 2) Evidence of daily work 3) Exemplar 4) Case study	1) 1/31/18 2) 1/31/18 3) 3/31/18 4) 5/30/18
5) Plan Stork/Emergencies: What is My Role?	1) Mock event 2) Peer review 3) Exemplar	1) 1/31/18 2) 3/31/18 3) 5/30/18
6) Customer Service	1) Present 5 sources of recognition for excellent customer service (from patients, co-workers, or leaders) 2) Implement 1 customer service initiative 3) Exemplar	1) 5/30/18 2) 5/30/18 3) 1/31/18

## Example: Presentation

<p>Presentations can be used to assess competencies that deal with knowledge and understanding. Developing and presenting is a valid way to measure competency of a presenter's knowledge and understanding of a subject.</p>	
<p><b>Examples of presentations:</b></p> <ul style="list-style-type: none"> <li>Formal or Informal live presentation using slides, handouts, equipment, or other visual aids</li> <li>Presentation of pre-drafted content may be utilized for competency validation (with prior approval)</li> </ul>	
<p><b>Content Development</b></p> <p>Presentation content must be validated <u>prior to presentation</u> &amp; include the following:</p> <ol style="list-style-type: none"> <li>Evidence based</li> <li>Reference materials cited</li> <li>Adhere to all policies/procedures</li> <li>Listed objectives (which should be measurable)</li> <li>Participants must be given an opportunity to validate their competency using one of the following methods (appropriate for the competency)                             <ol style="list-style-type: none"> <li>Test/quiz</li> <li>Discussion/Reflection Group</li> <li>Case Study (Q&amp;A or SBAR)</li> </ol> </li> </ol> <p><b>Note:</b> Must be validated by a content expert: Manager, educator, CNS or a peer/colleague with advanced knowledge/experience in the competency</p>	<p><b>Performed</b></p> <p><input type="checkbox"/> Content Validated</p> <p>(validator signature)</p>
<p><b>Presenters</b></p> <p>Presenters must submit the following information in order to validate their individual mastery of the information while introducing the information to other individuals:</p> <ol style="list-style-type: none"> <li>Sign-in rosters must be used for all sessions and submitted with competency packet to manager</li> <li>Presenter is to distribute and collect evaluations from all participants and submit a summary of the feedback</li> </ol>	<p><b>Performed</b></p> <p><input type="checkbox"/> Criteria Submitted</p> <p>(validator signature)</p>
<p><input type="checkbox"/> Competency demonstrated    <input type="checkbox"/> Not yet deemed competent, performance improvement plan required</p> <p><b>Performance Improvement Plan:</b></p>	
<p>Validator signature: _____ Date: _____</p>	

## Example: Self Assessment

<p>This form may be used to verify your competency related to "bereavement." It is a skill that we all need in the delivery of "world class healthcare." Take some time to reflect on the skills you need to effectively assist grieving patients.</p>	NEVER	RARELY	SOMETIMES	FREQUENTLY	ALWAYS
1. I take care of patients or families dealing with infant loss.	1	2	3	4	5
2. I feel comfortable helping families who have experienced infant loss.	1	2	3	4	5
3. I know who my resources are when caring for families with infant loss.	1	2	3	4	5
4. I sit down and talk to patients experiencing fetal loss, allowing them to grieve.	1	2	3	4	5
5. I avoid assumptions and allow patients to express feelings without putting judgment on them.	1	2	3	4	5
6. I determine the unique needs of the patient and family and spend time making sure those needs are met.	1	2	3	4	5
7. I take my time with these patients, never letting them see I am hurried or rushed.	1	2	3	4	5
8. I know it is acceptable to let patients see that I am also emotional over the loss of their infant.	1	2	3	4	5
<p><b>Total up the numbers you circled for each statement. Enter Here</b> _____</p>					
<p>If your total is <u>between 26-40</u>, you are doing great...keep up the good work!</p>					
<p>If your total is <u>between 16-25</u>, you have made a great start...keep it up and continue to focus on improvement!</p>					
<p>If your total is <u>between 8-15</u>, we appreciate your honesty and encourage you to develop a plan with your unit manager or educator to enhance your skills in this particular competency standard.</p>					

## Example: Evidence of Daily Work

<b>Prerequisite(s): Completion of AWHONN Education on PPH</b>		
<b>Validation Criteria:</b>		
<ul style="list-style-type: none"> <li>Applies prerequisite knowledge to correctly complete the Maternal Obstetrical Hemorrhage Risk Assessment Tool at the correct intervals and to accurately quantify blood loss. Screen shots from your selected patient should be attached to this sheet for the validator to sign off on competency.</li> </ul>		<b>Performed</b>
1. Correctly completes the MOH Risk Assessment tool upon admission and every shift.	<input type="checkbox"/> Yes <input type="checkbox"/> No	
2. Completes reassessment of MOH Risk Assessment tool pre-birth, post-birth and at any other indicated occurrence.	<input type="checkbox"/> Yes <input type="checkbox"/> No	
3. Confirms appropriate flagging of risk in the banner bar.	<input type="checkbox"/> Yes <input type="checkbox"/> No	
4. Completes all orders associated with the maternal risk category and documents notification of provider.	<input type="checkbox"/> Yes <input type="checkbox"/> No	
5. Records all blood loss in the Intake and Output computer flowsheet.	<input type="checkbox"/> Yes <input type="checkbox"/> No	
6. Return demonstration of quantification of blood loss.	<input type="checkbox"/> Yes <input type="checkbox"/> No	

## Example: Peer Review Tool

**PEER REVIEW**

Nurse Reviewed: \_\_\_\_\_

Use these questions to complete the peer review.	Completed (Yes/No or time)	Comments (e.g. "not documented, RN notified")
1. Delivery Preferences flow sheet completed for the CURRENT admission, including Maternal Feeding Choice on Admission and Benefits and Risks of breastfeeding/ formula?		
2. What was birth time?		
3. What time was skin-to-skin initiated?		
4. What time was skin-to-skin stopped?		
5. If skin-to-skin was delayed or disrupted, did the RN document a maternal or newborn indication?		
6. Was skin-to-skin uninterrupted for at least 1 hour or until after the first breastfeeding?		
7. In the newborn chart, what time was the weight recorded?		

CSN# \_\_\_\_\_

Initials of RN reviewing chart \_\_\_\_\_

Initials of RN being reviewed \_\_\_\_\_

# Example: Tests/Exams

## QBL/MOH Post Test

1. Quantification of blood loss should begin:
  - a. When the patient is obviously bleeding more than expected
  - b. When the patient's estimated blood loss is at 500ml or greater
  - c. Immediately at birth
  - d. When the physician requests
2. Quantification of blood loss can be stopped when:
  - a. Bleeding has stabilized – usually 2 to 3 hours after delivery if there is a hemorrhage or sooner if no hemorrhage occurred
  - b. When the physician requests
  - c. When vital signs are stable
  - d. Upon discharge from the hospital
3. Visually estimating blood loss has been demonstrated to be underestimated by approximately: (33-50%)
  - a. 10-20 %
  - b. 20-35%
  - c. 33-50%
  - d. 50-60%
4. One gram of weight is equal to how much volume?
  - a. 1ml
  - b. 2ml
  - c. 10ml
  - d. 15ml
5. Which of the following is helpful to gain a more accurate calculation of blood loss at a vaginal birth?
  - a. Use a graduated under the buttocks drape and note the volume as the baby's shoulder is delivering
  - b. Use a graduated under the buttocks drape and subtract 500ml from it to allow for amniotic fluid
  - c. Use a graduated under the buttocks drape and ask the provider to estimate how much of it is amniotic fluid
  - d. Change the under the buttocks drape immediately before delivery
6. The responsibility for quantifying blood loss associated with a delivery or hemorrhage belongs to:
  - a. The nurse
  - b. The physician
  - c. Both A&B
  - d. Neither

# Example: Case Study

## CASE STUDY SCENARIO:

You are caring for Baby Boy Hamman who was born vaginally about two hours ago. He was 39 weeks gestation and weighed 7 lbs 8 oz. His mother was GBS positive and was not treated with antibiotics. L&D collected a CBC and Blood Culture. Please answer the following questions related to the care of this infant.

### Question 1: Question #1

The CBC results are as follows:

WBC	36
Bands	24
Metamyelocytes	5
Segs	74

What is the IT ratio? What should you do with this result?

### Question #2

If the physician prescribes Ampicillin 100 mg/kg IV, what is the dose (mg) for this infant? How much would you administer IV (mL)?

### Question #3

Before administering the medication, what steps should you follow?

## Example: Mock Events

<b>Employee Name:</b>		<b>Employee Number:</b>	
<b>Department Number:</b>		<b>Department:</b>	
<b>Job Title:</b>		<b>Date(s) of event:</b>	
<b>Validation Criteria:</b> (Must be signed by educator/advanced practice nurse at mock event OR by charge nurse on duty during code)			
<b>Responds appropriately to adult codes:</b>		<b>Performed</b>	
1. Identifies adults in need of resuscitation		<input type="checkbox"/> Yes	<input type="checkbox"/> No
2. Correctly performs chest compressions and ventilations		<input type="checkbox"/> Yes	<input type="checkbox"/> No
3. Works as a team to revive the adult		<input type="checkbox"/> Yes	<input type="checkbox"/> No

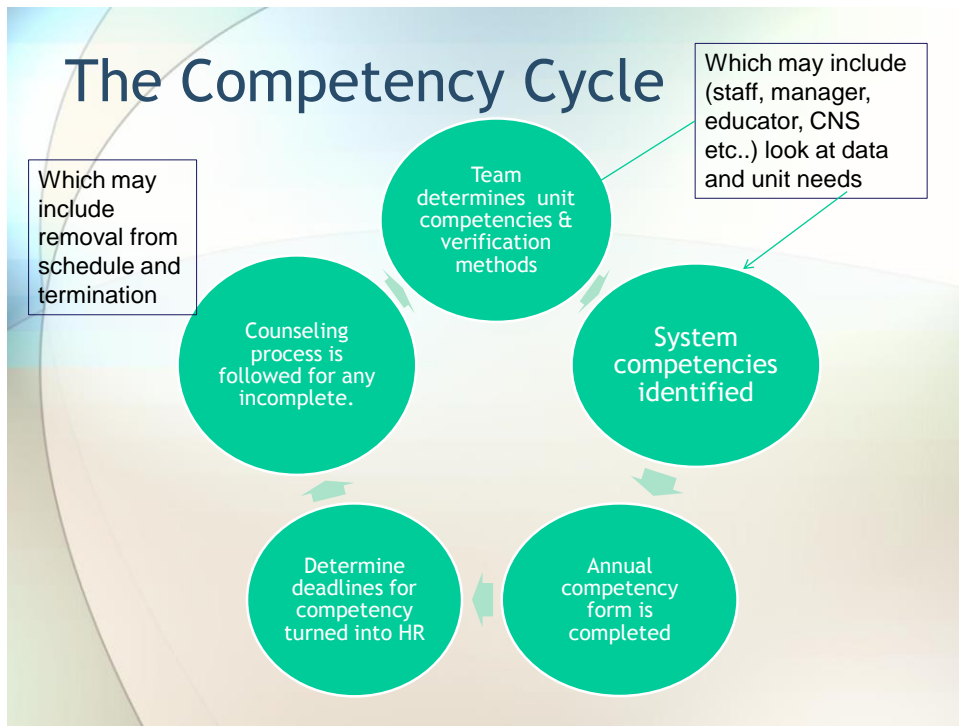
## Accountability and Expectations

<b>Instructions:</b> Using the Nursing Annual Professional Practice Competency Assessment Process Worksheet, list the competencies in this column, including the appropriate population specific needs. (Please ensure you identify at least one competency from each of the domains (Clinical/Technical Skills, Critical Thinking Skills and Interpersonal Skills) and the time frame for completion.		<b>Date:</b> _____
<b>COMPETENCY STATEMENT</b>		<b>VERIFICATION METHOD(S)</b> Appropriate verification methods will be specified for each competency with criteria for successful completion. Verification methods may include: Test/review, return demonstration, evidence of daily work, case studies, exemplars, peer review, self assessment, discussion/reflection groups, presentations, mock events/surveys, and quality improvement monitors. ***Where appropriate, the population serviced will be noted. Complete prerequisite education as indicated Submit one of the listed verification methods for each
Validator signature: _____		Date: _____

“Both employees and leadership are accountable in the competency assessment “

*Donna Wright, 2005, The Ultimate Guide to Competency Assessment in Healthcare*

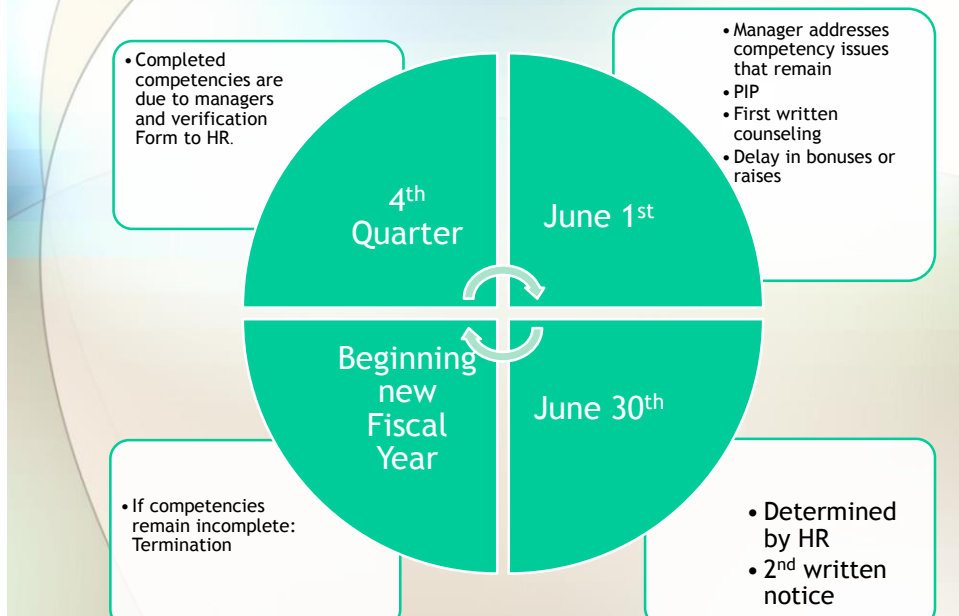




## Not Yet Deemed Competent

- Leave of Absence
- Completing some, but not all competencies expected
- Neglected to participate in process
- Failed to successfully complete/unable to demonstrate

# Corrective Action Process



Portfolio Sections  
Required Documents  
Competency Verification  
Professional Development

## COMPETENCY PORTFOLIO



## Portfolio Sections

**Mandatory Documents**

**Competency Verification  
Forms**

**Professional Development**

**Additional Education**

## Mandatory Documents

- Documents that all employees are required to have in order to work
  - Licensures
  - Mandatory certifications
  - Employee Health forms
  - Any other system or department required documents

## Professional Development

- Professional resume or Curriculum Vitae
- Education Completed
  - Formal education such as school
  - Conferences
  - Classes
  - CEU credits obtained within last year
- Evidence of unit projects and education
- Professional presentations and publications



## Celebrate Your WINS!!!

- Post data improvements, improved outcomes
- Acknowledge staff and thank nurse champions that assisted with check-offs, simulations, peer review etc.
- Debrief for the following year!
- Make a poster presentation

