Competence Assessment for Testing Personnel

Purpose

This document describes the process of training, evaluation, and competence assessment of each person performing patient testing in compliance with Clinical Laboratory Improvement Act (CLIA), State and accrediting agency requirements.

Scope

This policy applies to all testing personnel who perform waived and non-waived testing.

Policy General

- It is the responsibility of all staff to maintain competency to perform the duties to which they are assigned and which are detailed in the *Task Authorization Grid*.
- Prior to starting patient testing and prior to reporting patient results, each individual must have training, and be evaluated for proper test performance.
- The process of competence assessment is delegated by the Laboratory Director to the Technical Consultant (Moderate Complexity) or Technical Supervisor (High Complexity) per *CLIA Personnel Duties, Responsibilities, and Requirements*.
- General Supervisor can fulfill the responsibility of evaluating and documenting
 the performance of testing personnel as delegated in writing by the Lab Director
 and/or Technical Supervisor, as long as the final overall assessment of
 competency is reviewed and signed by the Technical Supervisor. (Minimum
 requirement for General Supervisor: bachelor's degree in chemical, physical,
 biological, clinical laboratory science or medical technology plus 2 years
 training or experience in designated specialty /subspecialty).
- For new or revised test methodology or instrument, training is conducted and performance is reevaluated prior to reporting patient test results. Competence assessment for this change will be incorporated within the next scheduled assessment.
- If an employee fails to demonstrate satisfactory performance on the competence assessment, the laboratory shall have a plan of corrective action to retrain and reassess the employee's competency.
- Retraining and reassessment of employee competency must occur when
 problems are identified with employee performance. If, after re-education and
 training, the employee is unable to satisfactorily pass the assessment, then
 further action should be taken which may include, supervisory review of work,
 reassignment of duties, or other actions deemed appropriate by the laboratory
 director.
- Competency should be reassessed after an extended leave of absence at the discretion of the Laboratory Director or Technical Consultant/Supervisor.

Competence Assessment for Testing Personnel, Continued

Policy for Waived Testing

- Competence assessment must be performed at least annually (semiannual assessment is not required).
- The laboratory may select which elements to assess for each test system.

Policy for Non-Waived Testing

- Competency process for a new employee:
 - o Testing personnel's performance is evaluated after training.
 - The first semi-annual assessment is conducted within the first six months of employment for the tests systems to which the employee has completed training.
 - The second assessment is done within the following six months and encompasses all the test systems to which the employee has completed training.
 - o Assessments are performed yearly thereafter.
- Competence assessment must include all six elements described below for each individual on each test system during each assessment period, unless an element is not applicable to the test system. Elements of competence assessment include but are not limited to:
 - Direct observations of routine patient test performance, including, as applicable, patient identification and preparation; and specimen collection, handling, processing and testing.
 - o Monitoring the recording and reporting of test results, including, as applicable, reporting critical results.
 - Review of intermediate test results or worksheets, quality control records, proficiency testing results, and preventive maintenance records.
 - Direct observation of performance of instrument maintenance and function checks.
 - O Assessment of test performance through testing previously analyzed specimens, internal blind testing samples or external proficiency testing samples.
 - o Evaluation of problem-solving skills.

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Competence Assessment for Testing Personnel, Continued

Definitions

Annual	Every 12 calendar months			
Corrective Action	Action taken to eliminate the cause of a detected			
	nonconformity or other undesirable situation			
Non-waived	Tests categorized as either moderately complex (including			
	provider-performed microscopy) or highly complex by			
	the US Food and Drug Administration (FDA), according			
	to a scoring system used by the FDA			
Semiannual	Every 6 calendar months			
Testing Personnel	Individual responsible for performing laboratory assays			
	and reporting laboratory results			
Test System	The process that includes pre-analytic, analytic, and post-			
	analytic steps used to produce a test result or set of			
	results. A test system may be manual, automated, multi-			
	channel or single-use and can include reagents,			
	components, equipment or instruments required to			
	produce results. A test system may encompass multiple			
	identical analyzers or devices. Different test systems may			
	be used for the same analyte.			
Waived	A category of tests defined as "simple laboratory			
	examinations and procedures which have an insignificant			
	risk of an erroneous result." Laboratories performing			
	waived tests are subject to minimal regulatory			
	requirements.			

Non-Controlled Documents

The following non-controlled documents support this procedure.

• College of American Pathologist Laboratory General Checklist

Controlled Documents

The following controlled documents support this procedure.

	Reference
(CLIA Personnel Duties, Responsibilities and Requirements

	Form	
Task Authorization Grid		

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Kaiser Permanente Medical Care Program California Division – South SCPMG Laboratory Systems Quality Management Policy

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HISTORY PAGE

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Competence Assessment for TP

Initial Approval

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