



Who, What, When & Why of Holy Cross Hospital Microbiology Laboratory Competency Assessment

Sheryl R. Stuckey, MLS (ASCP)^{CM}

January 2021



Competency versus Competency Assessment

- ▶ Competency is your ability to apply your skills, knowledge and experience to perform laboratory testing correctly
- ▶ Competency assessment is the process used to review, document and assure your ability to perform testing as required by hospital policy and by state, local federal, and/or accreditation agency regulatory standards.



Minimum Regulatory Requirements for Laboratory Personnel Competency Assessment

- ▶ Direct observations of routine patient test performance, including patient preparation, if applicable, specimen handling, processing and testing
- ▶ Monitoring the recording and reporting of test results
- ▶ Review of intermediate test results or worksheets, quality control records, proficiency testing results, and preventive maintenance records
- ▶ Direct observations of performance of instrument maintenance and function checks
- ▶ Assessment of test performance through testing previously analyzed specimens, internal blind testing samples or external proficiency testing samples
- ▶ Assessment of problem-solving skills

NOTE: *Policy and procedure review, and documentation of continuing education are HCH Microbiology laboratory requirements*



Laboratory Personnel Subject to Competency Assessment

- ▶ Clinical Consultant*
- ▶ Technical Consultant*
- ▶ Technical Supervisor*
- ▶ General Supervisor*
- ▶ Testing Personnel

*Competency Assessment must include laboratory testing procedures (if performed) and federal regulatory responsibilities



Laboratory Personnel Who Can Perform Competency Assessment

Moderate Complexity Testing:

Technical Consultant –

Minimum Personnel Requirement:

Bachelor's degree in a chemical, physical, biological or clinical laboratory science or medical technology with **at least 2 years** of experience in nonwaived testing in the designated specialty/subspecialty area

Moderate Complexity Testing:

Technical Supervisor –

Minimum Personnel Requirement:

Bachelor's degree in medical technology, clinical laboratory science, or chemical, physical or biological science and **4 years training and experience** in high-complexity testing in the respective specialty



Laboratory Personnel Who Can Perform Competency Assessment

Moderate Complexity Testing:

General Supervisor –

Minimum Personnel Requirement:

Bachelor's degree in clinical laboratory science, medical technology or chemical, physical or biological science and **2 years training and experience in the designated specialty/subspecialty area of service; OR**

Moderate Complexity Testing:

Peer Testing Personnel – (Limited to direct observation competency assessment only)

Minimum Personnel Requirement:

Bachelor's degree in clinical laboratory science, medical technology or chemical, physical or biological science and **2 years training and experience in the designated specialty/subspecialty area of service; OR**

Associate degree in laboratory science or medical technology AND 2 years laboratory training and experience, in the designated specialty/subspecialty area of service



Laboratory Personnel Who Can Perform Competency Assessment

High Complexity Testing:

Technical Supervisor –

Minimum Personnel Requirement:

Bachelor's degree in medical technology, clinical laboratory science, or chemical, physical or biological science and **4 years training and experience** in high-complexity testing in the respective specialty

High Complexity Testing:

General Supervisor –

Minimum Personnel Requirement:

Bachelor's degree in clinical laboratory science, medical technology or chemical, physical or biological science and **2 years training and experience in the designated specialty/subspecialty area of service; OR**

Associate degree in laboratory science or medical technology (or pulmonary function) or equivalent education and training (refer to 42CFR493.1489(b)(2)(ii) for details on required courses and training) **AND 2 years laboratory training or experience, or both, in the designated specialty/subspecialty area of service**



Microbiology Laboratory Nonwaived (Moderate Complexity) Tests

- Acid Fast Stains
- BioFire Diagnostics Torch PCR Assays
- Cepheid PCR Assays
- Cryptococcus Antigen LFA
- Fecal Lactoferrin
- Gram Stains – Urethral/Endocervical
- Group A Streptococcus Antigen
- Infectious Mononucleosis
- Legionella Urinary Antigen
- Presumptive Identification of *Neisseria gonorrhoeae* (Selective media, gram stain and Oxidase reagent)
- Rapid Plasmin Reagin Test
- Rotavirus EIA
- *Streptococcus pneumoniae* Urinary Antigen
- Shiga Toxin



Microbiology Laboratory Nonwaived (High Complexity) Tests

- ▶ Antibiotic susceptibility testing, interpretation and reporting
- ▶ Examination, interpretation and reporting of specimen cultures
- ▶ Gram Stains – Other than Urethral/Endocervical
- ▶ Organism identification from culture –conventional methods



Training and Competency Process

- ▶ Initial training is performed and the trainee's performance and understanding of the task is documented so that routine performance of patient testing can commence (under supervision and review)
- ▶ 6 months after training competency assessment is performed to verify continued competence in the performance of the testing
- ▶ 1 year after training competency assessment is performed to complete the semi-annual assessment requirement.
- ▶ Competency assessment is performed on an annual basis thereafter.

NOTE: *Competency must be reevaluated prior to reporting patient test results if a test method or instrumentation changes*

Basic Rules for Competency Documentation

- ▶ Write entries legibly in blue or black ink.
- ▶ Write your name, position and employee identification number on all forms.
- ▶ Do not highlight entries or place stickers on the form.
- ▶ Document procedure review by selecting the 'More' button at the top of the Policy Tech procedure and marking the procedure as read in the electronic system; record the date read on the competency form.

HC HOLY CROSS HOSPITAL
Medical Laboratory - Microbiology

MIC-100

HCH Main Laboratory: Microbiology - Specimen Collection, Transport, and Processing

Create New Version More ▾

Status: Publish

- Mark as Read (Optional)
- Send Message to Owner
- Archive
- Require to Read/Complete Again



Competency Worksheet Documentation Instructions

- **Direct Observation** - The observer initials and records the date the observation occurred (**NOTE:** Personnel years of subject area experience is specific to what you are observing/assessing. For example, you may have 20 years of Micro experience but only 1 year performing Sofia Flu testing according to our procedures).
- **Results Recording & Reporting** - You record the accession number of a test that you performed , resulted and reported
- **Quality Control** - You record the date you performed external and/or internal quality control testing
- **Proficiency Testing** - You record the sample ID of the proficiency test you performed (Examples: For RPR = CAP 2018 G-01)
- **Instrument Maintenance** - You record the date you performed instrument maintenance associated with the test
- (Example: RPR - Rotator Maintenance). Enter 'n/a' if no instrument is associated.
- **Examination** - Record the date you complete a quiz question(s) for the test.



Online Training and Competency Information

- ▶ Training materials may be presented via the MedTraining program or through e-mail.
- ▶ **The passing score for training quizzes is 80.** If you score below 80 you will be required to repeat the training and the quiz. If a low score is repeated, you may be assigned an alternate training module from different source.
- ▶ **The passing score for competency quizzes is 80.** Scores for competency quizzes **will not be reset**. You will be assigned a remedial quiz and the average of the quiz scores will be your final score.
- ▶ YOU SHOULD NOT PURSUE OTHER MEDTRAINING EDUCATION IF YOU HAVE OUTSTANDING TRAINING AND COMPETENCY ASSIGNMENTS. If you do so, failing scores will not be reset and other scores will be removed.