

# Understanding the Training & Competency Assessment Program

**A Microbiology Laboratory Review  
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# Training & Competency Assessment: **What's the difference?**

*Training is designed to help you gain specific cognitive and technical skills.*

- Who can perform a task
- What is needed to perform a task
- When to perform a task
- Where or under what conditions to perform a task
- How to perform a task

*It is through training that you attain the ability to perform the task and the competency to perform it well.*

*Competency assessment is a system for measuring and documenting that you have the cognitive and technical ability to perform the task well.*

- Can you assess whether the test should be done?
- Can you assess the potential for quality control issues with the test?
- Can you perform the test accurately?
- Can you record and report test results?
- Can you perform problem solving for the test – Preanalytic/Analytic/Post analytic?

# Competency Assessment Is A Regulatory Requirement

## GEN.55450 Personnel Training

There are records that all laboratory personnel have satisfactorily completed training on all tasks performed, as well as instruments/methods applicable to their designated job.

Phase II

## GEN.55500 Competency Assessment Elements - Nonwaived Testing

The competency of personnel performing nonwaived testing is assessed using all six elements (as applicable) on each test system.

Phase II

## GEN.55505 Competency Assessment Frequency - Nonwaived Testing

The competency of personnel performing nonwaived testing is assessed at the required frequency at the laboratory (CAP/CLIA number) where testing is performed.

Phase II

College of American Pathologists (CAP) or the Joint Commission for Hospital Accreditation (TJC) –

**NOTE:** Laboratory Accreditation Status Can Impact Hospital Accreditation Status

**NOTE:** Competency assessment evaluates an individual's ongoing ability to apply knowledge and skills to achieve intended results.

**Competency must be assessed at the following frequency:**

- At least semiannually (first assessment within seven months from the start of testing and second assessment no later than 12 months from the start of testing during the first year an individual tests patient specimens (new employees))
- At least annually after an individual has performed assigned duties for one year\*
- When problems are identified with an individual's performance.



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# Competency Assessment Elements: Nonwaived Testing

- Competency assessment must be performed for each test system
- A **TEST SYSTEM** is 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.
- A **TEST SYSTEM** includes everything required (reagents, instructions, equipment, etc.,) to produce the test result.

## Examples of Test Systems:

- Legionella Urinary Antigen Test
- Streptococcus pneumoniae Urinary Antigen Test
- Xpert C. difficile
- BioFire BCID2
- BioFire Respiratory 2.1
- API 20C
- MicroScan MicroStrep panel
- MicroScan Negative Urine Combo 103 panel

# 6 Required Elements of Competency Assessment

- ***Direct observations of routine patient test performance, including, as applicable, patient identification and preparation; and specimen collection, handling, processing and testing.***
- ***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.***
- ***Assessment of test performance through testing previously analyzed specimens, internal blind testing specimens (eg, de-identified patient specimens) or external proficiency testing specimens.***
- ***Evaluation of problem-solving skills (May be assessed using written, oral or practicum examinations.).***

# HCH Microbiology Laboratory Training & Competency Program

## Basics

# Initial Training Elements

- The trainer reviews the procedure for the test system with the trainee (The trainee documents the review and is responsible for reading the procedure in its entirety.).
- The trainer or training system (i.e., online module, video, etc.,) demonstrates the steps for the performance of the test system.
- The trainee performs the task or uses the test system.
- The trainer assesses whether the trainee has attained the ability to use the test system correctly.
- If satisfactory, the trainee is approved to perform patient testing.
- Initial training documentation is completed and forwarded to the manager for review.

# Competency Assessment Elements

- Upon the completion of initial training and within the first year of performing patient testing, competency assessment is performed semiannually and annually.
- Competency assessment is performed at least annually after the first year.
- Remedial training will occur if the colleague fails competency assessment or if performance issues arise with patient testing.



# Who can perform training and competency assessment?

- You must meet regulatory personnel requirements for the test complexity.
- You must successfully complete and document training and competency assessment for the test system.
- You must be approved by the manager to perform training and competency assessment for the test system.

# HCH Microbiology Laboratory Training & Competency Program

## Documentation

# Training Checklist Documentation

- The trainer is responsible for documenting the completion of test system/task training and/or performance assessment on the trainee's checklist when performed.
- The trainee is responsible for ensuring that the trainer documents all tasks and assessments on his/her checklist when completed.

# Competency Checklist Documentation

- The assigned competency assessor is responsible for documenting the direct observation competency assessment.
- The colleague being assessed is responsible for:
  - ✓ Ensuring that the competency assessor completes the direct observation documentation
  - ✓ Documentation of all other checklist elements.
- The failure to document assessments will result in remedial training and a performance evaluation deficiency for the colleague being assessed.

# HCH Microbiology Laboratory Training & Competency Program

## Document Examples

# Document Example: Training Checklist

Holy Cross Hospital Microbiology Laboratory  
 Training Checklist: Serology & Rapid Tests

Name/ID#: \_\_\_\_\_  
 Position: \_\_\_\_\_

Record information on each page  
 Before you start.

ITEM	Procedure Review Completed (Date/Initials)	Training Method	Trainer (Date/Initials)	Trainee Performance Of Task/Test (Date/Initials)	Performance Assessment Method	Performance Assessed by (Date/Initials)	Assessment
<b>Cepheid GeneXpert Systems</b>							
Chlamydia trachomatis/Neisseria gonorrhoeae (CT/NG)							
Clostridium difficile Toxin B Gene							
Group B Streptococcus Antigen - Direct							
Group B Streptococcus Antigen – Lim Broth							
MRSA/SA Blood Culture							
Respiratory Virus Panels							

# Document Example: Competency Assessment Checklist

Record information on each page before you start.

Name:		Position:		Employee #:		<input checked="" type="checkbox"/> 6 Months <input type="checkbox"/> Annual	
Test System	Procedure Review Date	Direct Observation Date/Initials of Observer	Results Recording & Reporting Accession # of Test Performed	Quality Control Date Performed	Proficiency Testing Sample ID/Date	Instrument Maintenance Date Performed or N/A	Examination Performed Date/Method
Trichomonas Antigen	2/15/23	2/15/23zztop	1120477788	2/15/23	TV-09 2/15/23	N/A	8/1/23
Urinary Antigen Test: Legionella						N/A	
Urinary Antigen Test: Pneumococcus						N/A	
Xpert Chlamydia/GC PCR						N/A	