


STANTON TERRITORIAL HEALTH AUTHORITY

Yellowknife, Northwest Territories

TITLE: Assessment of Competence	Revision Date: 28 February 2018	Issue Date: 28 February 2016
Document Number: QUA30300	Status: Approved	
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Approved by: S. Asmussen, Manager of Diagnostic Services	Signed by: 	

PURPOSE:

The purpose of this procedure is to outline processes designed to optimize employee performance towards delivery of consistent high-quality outcomes in the health service.

Training and competence assessment are separate and distinct personnel management activities. Competence assessment is the process of verifying that the information, knowledge, and skills gained from training are applied by the employee to the work performed.

Competence assessment is also distinguished from an organization's periodic performance evaluation process, which is conducted in conjunction with the Human Resources department.

In addition to periodic assessments of competence, whenever responsibilities change (ie, when a test, methodology, or instrument changes) or when retraining needs are identified (ie, repeated performance problems or unsuccessful performance on a competence assessment exercise), personnel competence assessment should be performed.

Unsuccessful competency assessments or failure to complete competency assessment activities may result in corrective actions being taken. Such actions may include prohibiting the employee from continuing to perform procedures for which he or she has not demonstrated competence. Criteria for reassessment need to be established, documented, and communicated to the employee before subsequent reassessment events.

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Competence assessment activities are documented on **QUA30310 Laboratory Competence Assessment Form** and are maintained in the employee's personnel file.

The following are a list of methods that can be used to verify competence. This list is not inclusive and other appropriate methods may also be used.

- Medtraining courses
- Direct observation of performance, including observation for compliance with approved procedures and safety practices
- Monitoring the recording and reporting of examination results
- Review of intermediate examination records, worksheets, QC, and preventative maintenance
- Direct observation of instrument maintenance function checks
- Assessment of performing examinations through external proficiency testing, testing of previously analyzed specimens, or internal blind samples

PROCEDURE INSTRUCTIONS:

Step	Action
Competence Assessment	
1	A competence assessment form is generated for each employee by a Technologist II responsible for the technical processes they perform. The Laboratory Supervisor will generate the forms for the Laboratory Assistants.
2	The person that generated the form will plan which activities will be added to the form as periodic assessments. For example, if an employee is assigned an external proficiency this activity is added to the form. When the Tech II reviews the QC or exception reports for the week, these activities can also be added to the form.
3	Every effort will be made to ensure that an even distribution of activities performed by

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	the employee is captured.
4	The Supervisor may add additional activities based on performance concerns or as follow up to occurrences.
5	Upon completion of 10 activities, these forms will be submitted to the Laboratory Supervisor so the form can be filed in the employee's personnel folder and the employee's successful performance can be documented for their next performance appraisal.
6	In the event that there is an activity for which the employee did not demonstrate successful performance, the event will be brought to the attention of the employee and a plan of action to resolve the issue will be made. This plan will be documented.
7	The employee will be reassessed as per the plan. The reassessment will be documented on the form and returned to the Laboratory Supervisor for filing and documentation for the next performance appraisal.

RELATED DOCUMENTS:

- QUA30310 Laboratory Competence Assessment Form

REFERENCES:

- Clinical and Laboratory Standards Institute. (2006). *The Key to Quality: The fundamentals for implementing a quality management system in the clinical laboratory*. Wayne, PA, USA: Clinical and Laboratory Standards Institute.
- Clinical and Laboratory Standards Institute. (2011). *Quality Management System: A Model for Laboratory Services; Approved Guideline* (Fourth Edition ed.). Wayne, PA, USA: Clinical and Laboratory Standards Institute.
- Clinical and Laboratory Standards Institute. (2012). *Training and Competence Assessment; Approved Guideline* (Third Edition ed.). Wayne, PA, USA: Clinical and Laboratory Standards Institute.
- Clinical and Laboratory Standards Institute. (2015). *Laboratory Personnel Management* (First Edition ed.). Wayne, PA, USA: Clinical and Laboratory

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Standards Institute.

REVISION HISTORY:

REVISION	DATE	Description of Change	REQUESTED BY
1.0	28 February 2016	Initial Release	C. Russell