1. **PURPOSE AND SCOPE**

The purpose of this policy is to establish guidelines for the continuing education requirement of the hematology laboratory. The continuing education requirement is designed so that:

1. Technologists can enhance and maintain their skill levels.
2. Technologists can keep up with changes and advances in their field.
3. Technologists can pursue personal career growth.
4. **POLICY**
5. **Continuing Education Requirement**

To meet expectations, all bench technologists, as well as supervisors, are required to complete at least two continuing education activities each year. Completed continuing education activities are checked by the laboratory manager prior to each employee’s yearly review. Employees are required to place, the original or a copy of, the continuing education certificate in the continuing education binder at least one month before their performance review. In the binder, employees are also required to fill out the continuing education form(Appendix A).

1. **Definition of Continuing Education**

Continuing education includes (but is not limited to):

-In/Out of house conferences, seminars and workshops

-CE “Lunch and learn” lectures- sponsored by the Department of Lab Medicine

-Appropriate courses at an accredited university

-Any online program that is P.A.C.E certified by the ASCLS

-Any continuing education program that is approved by the ASCP Board of Certification

-Any program on the MTS (medtraining.org) lab training library, that is

P.A.C.E certified, and is not expected to be used as a basis for competency

1. **Attendance**
   1. There must be enough coverage in each area of the laboratory in order for individuals to attend continuing education programs. Adequate coverage is at the discretion of the Manager, Assistant Chief Technologist or Supervisor.
   2. If two individuals working in the same area request to go to a continuing education event, the person who has not attended most recently will have the first choice.
   3. If neither person in b. has attended recently, a lottery system will be used.
   4. Technologists working in the Special Hematology or Special Coagulation areas will negotiate with their immediate supervisors on an individual basis, as time and workload allow.
2. **Financial Guidelines**

The laboratory will have a set amount of funds allocated for continuing education. It is the responsibility of the laboratory manager to see that the funds are distributed fairly.

Time off during scheduled work shifts will be allowed for continuing education programs sponsored by the Department of Laboratory Medicine or YNHH Medical Center, if job-related.

When a tech is not scheduled to work, attendance at continuing education programs will not count as time worked (unless the individual is specifically requested to attend by the department). Techs are not paid to attend; they will just not have to use PTO if they attend during scheduled work time. Overtime will not be paid to cover the workload.

1. **HISTORY**

H-1 This procedure was written by A. Link on 6/25/2013

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| Yale-New Haven Hospital | | |  |  |  |  | H-07-022 | | | |
| Clinical Hematology | |  |  |  |  |  | Appendix A | | | |
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|  |  | **Continuing Education Log** | | | | |  | |  | |
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