

Service Area: Nursing Administration	YALE NEW HAVEN HEALTH POLICY & PROCEDURES	
Title: Nursing Competency Assessment		
Date Approved: 4/5/2019	Approved by: System Clinical Council	
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Distribution: MCN Ellucid	System Policy Type (I or II): Type I	
Supersedes: BH: Orientation and Ongoing Competence of Patient Care Operations Personnel GH: None L+M: None WH: None YNH: Nursing Staff Competency Assessment		

PURPOSE

To provide guidance for the competency assessment of clinical Registered Nurses, Licensed Practical Nurses, and nursing support staff involved in direct patient care.

APPLICABILITY

This policy applies to each licensed hospital affiliated with Yale New Haven Health System (YNHHS), including Bridgeport Hospital, Greenwich Hospital, Lawrence + Memorial Hospital, Westerly Hospital, Yale New Haven Hospital and any other hospital that may affiliate with YNHHS from time to time.

POLICY

Competency-Based Practice

- All clinical nursing staff at Yale New Haven Health are expected to demonstrate competence and deliver patient care as defined within their role specific job descriptions and scope of practice.
- Competencies are identified on an annual basis through a collaborative process at the unit level and assessed throughout the employment of the individual.

Nursing Competency Assessment

Responsibilities

- The Manager/Supervisor/Designee is responsible for monitoring and evaluating staff competency.
- The nursing clinical staff is responsible for completing competencies as indicated within the designated timeframe.
- Educators/Service Line Educator/Clinical Nurse Specialists/Nursing Professional Development Specialists support managers and the nursing clinical staff in their areas of responsibility in the competency assessment process
- All nursing staff are supported to report concerns regarding incompetent, unsafe, or unprofessional practice or conduct. These reports are conducted in accordance with YNHHS Non-Retaliation and Non-Retribution for Reporting policy.

Competency Completion

- Manager/Supervisor/Designee monitors staff progress periodically during the course of the competency cycle.
- Failure by a staff member to complete competency verification within the designated time period requires an action plan.
- If the employee is unable to demonstrate competency required for all staff within a given role, then progressive action up to and including termination occurs.
- Tracking of completion of competency assessments are maintained in the employee file.