MEDICAL CENTER HUMAN RESOURCES POLICY NO. 210

A. SUBJECT: Competency Assessment

B. EFFECTIVE DATE: September 1, 2019 (R)

C. POLICY:

Competency assessments of University of Virginia Medical Center employees shall be conducted and documented on an ongoing basis. The scope of the competency assessment shall be based on assigned duties and performance areas that Medical Center Management identify and prioritize. Prioritization of assessment criteria shall be developed based on reviews of quality improvement data, state law and regulatory requirements, program evaluations, risk management issues, performance appraisals, and new performance improvement initiatives.

D. PROCEDURE:

1. All employees shall receive competency assessments at the following times:
   a. Pre-employment, if applicable.
   b. During orientation.
   c. Upon acquisition of new skills including, but not limited to, those involving changes in practice, equipment and/or supplies.
   d. Upon promotion, transfer or demotion.
   e. On an annual basis.

   The competency year extends from July 1 through June 30.

2. Organization-Wide Mandatory Training:

   All employees are assigned organization-wide mandatory training modules to complete on an annual basis. All assigned modules must be completed by June 30th. Employees who are on an approved leave of absence on June 30th will have fifteen (15) calendar days from their return to work date to complete the organization-wide training modules. However, no extension of the deadline will be provided for employees who are on formal Performance Warning.

   Employees, including Medical Center Pool, Unit-Based Pool and Temporary employees, who are noncompliant as of July 1st, or sixteen (16) days following return to work from an approved leave of absence, will be suspended, without pay, pending successful completion of the modules. Employees who do not successfully complete the modules by the end of the fifth (5th) day of
(SUBJECT: Competency Assessment)

suspension shall be terminated in accordance with applicable policies. (See Medical Center Human Resources Policy No. 701 “Employee Standards of Performance and Conduct”)

3. The Department Director/Area Manager is responsible for:
   a. Establishing area specific competency requirements for job performance based on expectations detailed in the Job Description and competency documents.
   b. Defining those specific skills and behaviors to be demonstrated during orientation including patient population specific needs. Employees must be able to demonstrate competency and safety with respect to all equipment, supplies and associated practices. These skills shall be documented on the OCAE Form or New Hire Competency Form.
   c. Identifying new skills to be assessed and documented on the Annual Competency Record.
   d. Identifying, on an annual basis, previously assessed skills for reassessment. These skills shall be listed on the Annual Competency Record, and the employee’s competency in these skills must be validated before the end of the competency year.
   e. Documenting and maintaining competency files for each employee. Completed competency documents maintained by the manager include:
      - Orientation Competency Assessment and Evaluation (OCAE) form
      - New Hire Competency Form
      - Annual Competency Record
      - Documentation of certification required for the unit/position that is not specified as a requirement in the job description.
   f. Taking appropriate action to ensure compliance with competency requirements.

4. UVA Human Resources is responsible for:
   a. Collaborating with Departments/Committees to solicit content for Medical Center organization-wide mandatory training that will address identified institutional training priorities on an annual basis.
   b. Designing the delivery of centralized orientation and training.
   c. Consulting in selection and design of department training.

5. Record Keeping:
   a. UVA Human Resources shall maintain documentation of primary source verification of current licensure or certification listed as a requirement on the job description for the position.
   b. The Department director/area manager, or designee, shall maintain a competency file that contains employee competency information for each employee in the department/work area where the employee is currently assigned.
(SUBJECT: Competency Assessment)

c. Should an employee terminate Medical Center employment, the manager of the employee shall retain the employee’s competency file for five years.

Medical Center Human Resources Policy No. 210 (R)
Approved April 2005
Reviewed June 2016
Approved by Chief Executive Officer