

ASSESSING COMPETENCY IN CLINICAL SKILLS POLICY

Version:	5
Date issued:	April 2018
Review date:	April 2021
Applies to:	Clinical skills leads, Line managers and all clinical staff who undertake training in clinical skills.

This document is available in other formats, including easy read summary versions and other languages upon request. Should you require this please contact the Document Author

DOCUMENT CONTROL

Reference NV/Oct13/ACCPP	Version 5	Status Final	Author Senior Nurse for Clinical Practice
Amendments Review and streamlining of policy to include assessment by Healthcare Support Workers, and assessment of relatives and carers			
Document objectives: To ensure that all staff throughout Somerset Partnership NHS Foundation Trust are competent in the clinical skills necessary to provide high quality care for all patients.			
Approving body	Clinical Governance Group	Date: March 2018	
Equality Impact Assessment	Impact Part 1	Date: April 2018	
Ratification Body	Senior Management Team	Date: April 2018	
Date of issue	April 2018		
Review date	April 2021		
Contact for review	Senior Nurse for Clinical Practice		
Lead Director	Director of Care (Community)		

CONSULTATION LIST Key individuals involved in developing the document

Professional Lead for Community Nurses
Clinical Practice Team
Inpatient Ward Managers (Mental Health and Community Health)
Community Hospital Matrons
Head of Mental Health Nursing
Deputy Head of Division, Mental Health
Clinical Director Community Services
L&D Business Partner
Head of Allied Health and Psychological Professions
Deputy Head of Division, Community Services, East
Clinical Skills trainer, Learning and Development
Professional Lead for Dental Nursing

CONTENTS		
Section	Summary of Section	Page
Doc	Document Control	2
Cont	Contents	3
1	Introduction	4
2	Purpose & Rationale	4
3	Policy Statement	4
4	Definitions	4
5	Duties And Responsibilities	4
6	Policy	6
	6.1 Competency assessments	6
	6.2 Who Can Assess?	6
	6.3 The Assessment Process	6
	6.4 Maintaining Competence and Reassessment of Competence	7
	6.5 New staff from other Healthcare Organisations	7
	6.6 Agency Staff	7
	6.7 Assessing Competency of Patients/Relatives/ Carers	7
7	Monitoring Compliance and Effectiveness	8
8	Training and Assessment of Competence	9
9	References, Acknowledgements and Associated Documents	9
10	Appendices	9
Appendix A	Responsibilities of the Person Being Assessed and the Assessor	10

1. INTRODUCTION

- 1.1 Ensuring staff have the appropriate skills, knowledge and competencies is fundamental to providing safe, effective care for patients. Competence is one of the 6 Cs, which outlines the values that underpin care. It is essential that staff have the right clinical and technical knowledge to deliver effective care and treatments based on research and evidence.
- 1.2 The boundaries of care are changing, and provision of care by other agencies and families/carers is increasing. In specific circumstances, staff can enable this by training and assessing the competence of others to ensure safe, effective care for patients wherever they are being cared for.

2. PURPOSE & RATIONALE

- 2.1 The purpose of this policy is to
- Outline the governance processes required for assessing competence in clinical skills, for existing staff, newly recruited staff and families/carers
 - Support the professional development of staff and ensure that staff have the right competencies for the right role
 - Support staff to assess the competence of relatives and carers so they can provide safe, effective care for patients in their homes
 - This policy **does not** cover the assessment of students (either pre-registration or post-registration)

3. POLICY STATEMENT

Somerset Partnership is committed to ensuring staff have the right training and are assessed as competent, to be able to deliver safe and effective care and treatments for patients.

4. DEFINITIONS

- 4.1 **Clinical Skill** – for the purposes of this policy, a clinical skill relates to any patient-care related activity. Each directorate/service should have a list of the clinical skills that this policy covers.
- 4.2 **Competency Assessment** – an assessment that is both undertaken by the assessee and completed by the assessor. The competency assessment once completed only ensures that the person is competent at the time of assessment.
- 4.3 **Assessor** – a person who has the necessary attributes to assess competence.

5. DUTIES AND RESPONSIBILITIES

- 5.1 The **Chief Executive** has overall responsibility for ensuring that the Trust meets its statutory and non-statutory obligations, with overview that staff are competent to undertake clinical skills delivery
- 5.2 **Director of Care (Community)** is responsible for ensuring that staff uphold the principles of delivering safe care to patients, take personal accountability for care

provision and omissions; that appropriate procedures are developed, implemented and maintained.

- 5.3 The **Learning and Development Department** in collaboration with the Clinical Practice Team, and specialist leads, is responsible for:
- Providing and administrating a comprehensive clinical skills training programme
 - Ensuring there is a process for assessment of competence for each clinical skill and
 - Ensuring there is a process for central storage of completed competency assessments
- 5.4 **Directorate/Divisional Management Teams** are responsible for:
- Ensuring that the requirements of this policy and related policies and procedures, are effectively managed within their Directorates/Divisions, and that clinical staff are aware of, and apply, those requirements.
 - Developing and maintaining a list of the clinical skills that are covered by this policy
- 5.5 **Line managers** are responsible for:
- Ensuring staff have the skills and knowledge to perform their role safely and effectively, and to meet the needs of the service.
 - Ensuring staff maintain their clinical skills.
 - Ensuring there are local assessors of competence for each essential clinical skill, within their team or service, and that those staff have the skills and knowledge to do this effectively.
- 5.6 **Assessors of Practice** are responsible for:
- Assessing an individual practitioner's knowledge and competencies in designated skills.
 - Ensuring they are trained, competent and current in performing the skill they are assessing
 - Ensuring they have sound knowledge of the relevant policies and procedures relating to the skill they are assessing,
 - Completing an approved assessors course if required for their role
- 5.7 **Staff undertaking a new clinical skill** are responsible for:
- Practicing the skill according to the relevant policies and procedures
 - Knowing their own limitations and to know when to seek advice or escalate to the appropriate
 - Seeking further training and assessment of competence after periods of extended absence or where lack of clinical opportunities has compromised potential competence
 - On completion of the competency assessment, the assessed staff member should upload the competency assessment to their Learning Zone account

6. THE POLICY

6.1 Competency assessments

- 6.1.1 Each clinical skill must have its own set of identified competencies, outlined in the relevant policy or Standard Operating Procedure (SOP). The responsibility for this sits with the appropriate specialist lead for that skill. **The template for clinical competencies can be found on the Clinical Practice intranet page.**
- 6.1.2 If there is no competency assessment available for a specific clinical skill, a generic assessment form may be used and adapted for the skill being assessed. See the Clinical Practice page on the intranet for the Competency Assessment Template.
- 6.1.3 All competency assessments for clinical skills are listed in the competency assessment of the Learning and Development intranet page

6.2 Who Can Assess?

- 6.2.1 Registered staff who are trained and competent in a clinical skill, may assess the competence of others in that skill.
- 6.2.2 Healthcare Support Workers may assess the competence of others once the following have been achieved:
- Training and current competence in the clinical skill to be assessed
 - Completion of an approved 'Assessors Module'

6.3 The Assessment Process

- 6.3.1 The assessor is responsible and accountable for appropriate assessment of competence at the time the assessment is carried out, not for the ongoing practice of the individual assessed.
- 6.3.2 A period of supervised practice is recommended, prior to assessment of competence, where the skill is practiced under the direct supervision of a competent individual. 10 supervised sessions are recommended, but this can be tailored to individual need. The 'Log of Supervised Practice' in the competency document should be used to document the supervised sessions.
- 6.3.3 Following a period of supervised practice, staff should be formally assessed using the competence form. If competence is achieved this must be signed before the staff member can undertake the clinical skill in practice.
- 6.3.4 If a member of staff does not reach the required level of competence following 3 formal assessments, even with appropriate support and guidance, the assessor of practice must refer to the individual's line manager for review. Advice from Human Resources should be sought to determine ongoing management.
- 6.3.5 The staff member must keep a copy of the 'Record of Achievement of Competence', give a copy to their line manager, and upload a copy to their learning zone account.

6.3.6 Individual competence must be reviewed annually by the line manager as part of the appraisal process.

6.4 Maintaining Competence and Reassessment of Competence

6.4.1 Formal reassessment of competence in each clinical skill must take place every 3 years. The exception to this is where a risk assessment has been completed, and agreed through the Directorate Governance Process appropriate for that skill.

6.4.2 It may be necessary for staff to access further updates/ training to enable them to practice competently and confidently. This should be considered after periods of extended absence through sickness or maternity leave or where lack of clinical opportunities has compromised potential competence.

6.4.3 If a clinical skill has not been practiced regularly for up to 12 months, refresher training and reassessment of competence may be undertaken. If it hasn't been undertaken for a longer period, then full training and reassessment of competence will be needed. The staff member must discuss and agree their ongoing training needs with their line manager, and the Clinical Skills Team if necessary.

6.5 New staff from other Healthcare Organisations

6.5.1 New staff (including bank staff) recruited from other healthcare organisations may continue to practice existing clinical skills once they have completed the following process:

- Produce a certificate of training and documentation of competency assessment from their previous healthcare employer
- Familiarise themselves with the specific policies and procedures relating to that skill including Infection, Prevention and Control
- Undergo a competency assessment of the skill/s

6.5.2 If staff cannot produce the required certificates and assessment from their previous healthcare employer, they need to discuss their experience relating to this skill with their line manager. If the line manager is assured that the staff member has the appropriate skills and knowledge, the individual may then undergo the appropriate competency assessment for that skill before they practice the skill. If the line manager is not assured, the staff member will be required to attend the relevant formal training course.

6.6 Agency Staff

6.6.1 Agency staff must provide written evidence of training and competence in a particular skill before utilising it.

6.7 Assessing Competency of Patients/Relatives/Carers

6.7.1 In some situations it may be appropriate to enable patients/relatives or carers to undertake specific clinical skills. This needs to be determined by the individual patient's needs, and the ability of the patient/relative/carer involved.

It should be a decision made jointly by the clinical team, the patient and their relatives/carers.

- 6.7.2 Training and assessment must be carried out on a patient specific basis. Therefore the training and assessment of competence is only valid for the named patient. The training must be carried out by a practitioner who is competent in that clinical skill, and assessment of the competence must be carried out by an approved assessor for that particular skill. Once assessed as competent, the assessor and the patient/relative/carer must sign the appropriate competency framework, and the training and assessment of competence must be documented in the patient's record.
- 6.7.3 The patient/relative/carer may wish to continue to carry out a clinical skill when a patient is admitted to our inpatient services. In this situation the patient/relative/carer must be assessed as competent in that skill by an approved assessor within that setting, before they can carry out that skill. This process needs to be followed for each admission.
- 6.7.4 Occasionally patients/relatives/carers may be the experts in a specific skill required by an individual patient. In this situation, where there is no other resource available to provide training and assessment of competence, the patient/relative/carer may teach staff to undertake this skill. This would be on a named patient basis only. A local risk assessment should be undertaken by the line manager in this situation.
- 6.7.5 If the carer is employed by a private domiciliary care organisation registered with the Care Quality Commission, the current Somerset Medicines and Clinical Tasks Policy must be followed. The carer and their line manager are responsible for ensuring the individual maintains their competence and undergoes any further training or reassessment of competence as necessary.

7. MONITORING COMPLIANCE AND EFFECTIVENESS

- 7.1 Review of competence will be undertaken at the time of appraisal to ensure the staff member is still utilising the skill and is still capable and confident in their abilities in line with the their Job description and local service needs.
- 7.2 All incidents, complaints and feedback relating to assessment of competence will be monitored locally by team leaders/ward managers and matrons. Good practice, any shortfalls, action points and lessons learnt will be discussed at the relevant Best Practice Groups, who will be responsible for ensuring improvements, where necessary, are implemented. The results and action plans resulting from any audits related to this policy will be disseminated through the Trusts newsletter.

8. TRAINING AND COMPETENCY REQUIREMENTS

- 8.1 Registered staff do not require any further training in order to become an assessor of competence in a skill they are trained and competent to undertake the skill themselves.
- 8.2 Healthcare Support Workers who are trained and competent in a clinical skill, may assess the competence of others in that skill if they have completed an approved 'Assessors Module'. This is available by contacting the Learning and Development Department.

9. REFERENCES, ACKNOWLEDGEMENTS AND ASSOCIATED DOCUMENTS

9.1 References

Department of Health (2013). Patients First and Foremost: The Initial Government Response to the Report of the Mid Staffordshire NHS Foundation Trust Public Inquiry.

Clinical Skills – Developing and Maintaining a Competent Clinical Workforce. Version 2, Musgrove Park Hospital

NHSLA (2011). Risk Mandatory Standards – 2011/12. V1

Royal Marsden Nursing Manual of Nursing procedures (2015) 9th Edn
Nursing and Midwifery Council. 2015. The Code: Professional Standards of Practice and Behaviour for Nurses and Midwives. London: NMC

9.2 Cross references to other procedural documents

Clinical Supervision Policy

Learning, Development and Mandatory Training Policy

Medicines Policy

Staff Appraisal and Management Supervision Policy

Record Keeping and Records Management Policy

SOPs and policies relating to specific clinical skills

All current policies and procedures are accessible in the policy section of the public website (on the home page, click on 'Policies and Procedures'). Trust Guidance is accessible to staff on the Trust Intranet.

10. APPENDICES

- 10.1 For the avoidance of any doubt the appendices in this policy are to constitute part of the body of this policy and shall be treated as such. This should include any relevant Clinical Audit Standards.

Appendix A	Responsibilities of the Person Being Assessed and the Assessor
------------	--

The Responsibilities of the Person Being Assessed

The person being assessed should own the process and be proactive in ensuring they:

1. Make the first contact with the assessor within 4 weeks of attending the clinical skills training.
2. Make the most of the opportunities which arise within the work place to gain practice in the clinical skill under supervision.
3. They should review their clinical skills competencies with their line manager annually at appraisal, or sooner if they are not able to practice the skill regularly.

Responsibilities of the Assessor

The Assessor:

1. Must work as an excellent role model for the clinical skill, develop a sound working relationship based on honesty and trust with those being assessed, provide constructive feedback at an appropriate time and place and maintain confidentiality. The assessor must always ensure that the needs of the patient take priority.
2. Should agree a mutually convenient time for the competency assessment to take place, with the person being assessed, within the agreed timescale and explain how the assessment will be undertaken.
3. Provide constructive feedback to the staff member
4. Complete the competency assessment document with sufficient detail to enable understanding of the level of competence achieved for each criterion.
5. Communicate the outcome at the time of assessment, summarising what was done well and any improvements that are required
6. If referred the assessor will agree action plans with the staff member, advise on how to achieve competence at reassessment, agree a date and time for reassessment and undertake the reassessment within the agreed timescales
7. Encourage the person being assessed to discuss any competency issues with their line manager themselves, and refer any concerns about levels of competence to the appropriate line manager after discussion with the person being assessed.