

# LOS ANGELES COUNTY COLLEGE OF NURSING AND ALLIED HEALTH POLICY & PROCEDURE MANUAL

Subject: <b>FACULTY COMPETENCY</b>		Original Issue Date: June 28, 2002	Policy #: <b>515</b>
		Supersedes: February 12, 2009	Effective Date: April 18, 2013
Committees Consulted: Credentials	Reviewed & Approved by: Administrative Committee Planning Committee	Approved by:  Provost, College of Nursing & Allied Health (signature on file)	

## **PURPOSE:**

To ensure that faculty possess the qualifications and competencies necessary to fulfill the mission of the College.

## **POLICY:**

The College adheres to the following policies:

- Network #544: Employee Education and Training
- Network #545: Competency Program
- Network #550: Performance Evaluations
- College #220: Peer Review
- College #230: Travel and Training Requests
- College #505: Interview Process
- College #510: New Employee Orientation

Faculty are hired based on their education, clinical expertise, and experience.

Competence is validated during orientation and annually.

Faculty are expected to maintain current knowledge and skills in assigned areas and are encouraged to attend related education and training.

Faculty Development Committee coordinates annual educational events based on faculty needs.

## **PROCEDURE:**

The supervisor evaluates employee performance a minimum of annually.

- Annual performance evaluations include documentation of faculty classroom and clinical teaching and supervisory skills.
- Sources for the evaluation may include:
  - Student theory and clinical course evaluations
  - Written and verbal communications with nursing administration and staff
  - Continuing education program attendance
  - Observation.

Faculty members:

- Obtain one peer evaluation every 2 years
- Attend Medical Center new equipment orientation as applicable to their content area

Subject:

**FACULTY COMPETENCY**

- Submit copies of verification of continuing education attendance to Office of Educational Services (OES)
- Coordinate/participate in Network Skills Validation Program annually
- Successfully complete the annual DHS Core Competency Testing
- Maintain their skills by the following methods as applicable:
  - Attend professional development programs
  - Work in clinical areas of expertise
  - Supervise student performance in clinical practice and skills labs simulations
  - Chair/participate in DHS/Medical Center/College/divisional professional and practice committees
  - Remediate/cross-train in patient care concepts and skills according to classroom and clinical assignments.
- Disclose to immediate supervisor any condition that might negatively impact the ability to competently fulfill job duties.

The OES maintains copies of the following in the faculty member's personnel file/database:

- New Employee Orientation checklist
- Curriculum vitae/resume, educational degrees, licenses, and specialty certifications
- Board of Registered Nursing Faculty Approval Notification
- Education record of continuing education classes attended throughout the year
- Probationary and Annual Performance Evaluations
- Faculty Peer Review (front page only)
- Annual DHS Core Competency: Performance Summary
- RN Annual Validation of Standards Based Practice (pertinent to area of specialty)

**PROCEDURE DOCUMENTATION:**

New Employee Orientation Checklist

Faculty Peer Review

Faculty Self Evaluations

Annual DHS Core Competency: Performance Summary

RN Annual Validation of Standards Based Practice (pertinent to area of specialty)

**REFERENCES:**

Network Policy #544: Employee Education and Training

Network Policy #545: Competency Program

Network Policy #550: Performance Evaluations

College Policy #220: Peer Review

College Policy #230: Travel &amp; Training Requests

College Policy #505: Interview Process

College Policy #510: New Employee Orientation

College Policy #520: Performance Evaluation Processing

**REVISION DATES:**

June 28, 2002

August 12, 2004

February 12, 2009

April 18, 2013