

HIGH DESERT HEALTH SYSTEM AMBULATORY SURGICAL CENTER

SUBJECT: II-101 ORIENTATION, COMPETENCY ASSESSMENT AND EDUCATION/TRAINING	POLICY #: 1046
	VERSION: 1
APPROVED BY: Aram. Messerlian (CHIEF PHYSICIAN I ANESTHESIOLOGY), Beryl Brooks (ADMR, COMP AMB HEALTH CARE CENTER), Leila Adriano (NURSE MANAGER)	
DATE APPROVED: 06/28/2016	

PURPOSE: To provide guidelines for initial orientation, ongoing assessment and methods of performance evaluation of the Ambulatory Surgical Center (ASC) nursing staff.

POLICY:

ASC Nursing Director, with the assistance of High Desert Regional Health Center Nursing Leadership, will provide support and resources, as defined in the Memoranda of Understanding (MOU), to ensure staff has appropriate knowledge, education, training and competence to perform assigned responsibilities.

All ASC nursing staff will:

- Participate in the initial Ambulatory Care Network (ACN) and ASC orientation program.
- Demonstrate competency in their job responsibilities as required by the standards of their profession, state and federal laws and regulations, and accreditation agencies.
- Will be given the opportunity to attend and participate in education and/or training, to ensure that they have appropriate knowledge and skills to competently perform their duties as assigned.

PROCEDURE:

I. ORIENTATION

A. The ASC Specific orientation will consist of, at a minimum, the following:

1. ASC Services, Days and Hours of Operation
2. Physical work environment
3. Job Description to be reviewed with workforce member, and signed.
4. Performance Expectations
5. Patient Care and flow
6. Medication Management

HIGH DESERT HEALTH SYSTEM AMBULATORY SURGICAL CENTER

SUBJECT: II-101 ORIENTATION, COMPETENCY ASSESSMENT AND EDUCATION/TRAINING	POLICY #: 1046
	VERSION: 1

7. Fire/Life/Safety/Emergency Preparedness
8. Use and Maintenance of Equipment
9. Quality Performance Activities
10. Staff Rights
11. Personal Security and Safety
12. Hazardous Materials/Waste Management
13. Patient Education
14. Patient Safety/Risk Management
15. Information Management and Documentation
16. Communication and Organizational Charts
17. ASC Policies and Procedures

- B. Each ASC staff member will complete the ASC specific Clinical Competency Orientation Checklist.
- C. The "Orientation Checklist" will be kept in the employee file in the ASC and High Desert Regional Health Center's (HDRHC) Office of Human Resources (OHR) (per MOU).

II. COMPETENCY

- A. All competencies of ASC nursing staff will be evaluated initially upon hiring or beginning a new job assignment in the ASC, and annually through the performance evaluation process.
- B. These competencies are based on observations; examinations; demonstrated evidence of use of skills, knowledge, or equipment; and work volume and quantity.
- C. The competency program includes the following minimum components when applicable:
 1. Assessment of qualifications
 2. Licensure/professional certification document review and verification
 3. Orientation to HDRHC and the ASC
 4. Competency assessments, skills validation checklists

HIGH DESERT HEALTH SYSTEM AMBULATORY SURGICAL CENTER

SUBJECT: II-101 ORIENTATION, COMPETENCY ASSESSMENT AND EDUCATION/TRAINING	POLICY #: 1046
	VERSION: 1

5. Performance Evaluation
6. BLS – all clinical staff
7. ACLS –Identified Registered Nurses
8. PALS- Identified Registered Nurses
9. HDRHC Mandatory annual training/updates and ASC specific annual training/updates

D. The results of each nursing employee’s competency testing is documented and maintained in the employee file in the ASC and HDRHC OHR.

III. EDUCATION AND TRAINING

- A. The ASC Nursing Director or designee shall be responsible for ongoing competency assessment and identification of staff’s education and training needs.
- B. Internal training shall include, but not limited to ASC specific unit orientation, review of policies and procedures; job processes and expectations for job performance (including assessment of the employee’s ability to fulfill specified responsibilities); equipment safety; infection control; training required to meet state, federal, and regulatory standards, applicable MOU requirements and ASC requirements.
- C. Staff is required to comply with specific training and in-service education expectations established for individual job functions, to ensure patient safety, infection prevention and control, and regulatory standards are met.
- D. All education requests must be presented in writing and approved by the ASC Nursing Director or designee.
- E. Nursing staff is responsible for signing the participant sign-in sheets for each session attended and submitting verification of all onsite and off-site training/in-service education to the ASC Nursing Director or designee. This will be placed in the employees area file.
- F. It is the responsibility to all staff required to maintain a valid license, certificate, permit, or registration, attend continuing education courses, as required by the appropriate licensing/certificating/permit/registration board or agency.

HIGH DESERT HEALTH SYSTEM AMBULATORY SURGICAL CENTER

SUBJECT: II-101 ORIENTATION, COMPETENCY ASSESSMENT AND EDUCATION/TRAINING	POLICY #: 1046
	VERSION: 1

G. Ongoing staff development and education/training is age appropriate for the patient groups served by the ASC and is approved to maintain/improve (a) quality and efficiency of patient care, (b) employs effectiveness, and (c) competent job performance.

REFERENCES:

- Los Angeles County Policy, Number 101& 706
- California Code of Regulations, Title 22
- Applicable Memorandum of Understanding

Original Date: 07/01/2003
Reviewed: 07/10/2017
Next Review Date: 01/10/2019
Previous Review Dates: 11/22/08; 01/28/09; 07/07/14; 07/10/17
Previous Revise Dates: 01/28/09; 11/22/13; 07/07/14; 07/10/17