



Rancho Los Amigos National Rehabilitation Center

ADMINISTRATIVE POLICY AND PROCEDURE

SUBJECT: COMPETENCY OF STAFF

Policy No.: A243
Supersedes: July 31, 2003
Revision Date: August 27, 2009
Page: 1 of 2

PURPOSE:

To define the processes by which competency is continuously determined, demonstrated, maintained, assessed, improved and documented.

POLICY:

The competence of staff members is:

- Defined by a job description that clarifies duties, responsibilities and qualifications for the position;
- Assessed prior to hire via completed application, licenses, credentials/certification documents, previous work experience, and/or personal interviews by the hiring manager;
- Assessed initially during the orientation process and documented;
- Maintained through education updates;
- Evaluated annually and documented in conjunction with job description and competency based performance review process which includes age-specific competencies, as applicable;
- Improved through ongoing education based on needs assessments, continuous quality improvement findings, and patient population care needs;
- Maintained through annual required training classes (fire, safety/security, infection control); and
- CPR certification (when applicable).

PROCEDURE:

I. Human Resources Responsibilities:

Human Resources will:

- Maintain initial verification of licensure/certification.
- Maintain initial verification of post-offer physical exam clearance.
- Obtain verification of completion of New Employee Orientation.
- Obtain annual policy review documentation.

EFFECTIVE DATE: September 1997

COUNTY OF LOS ANGELES • DEPARTMENT OF HEALTH SERVICES

APPROVED BY:

Signature(s) on File.

II. Departmental Responsibilities

The department is responsible for maintaining

- A **current** copy of all required licenses and/or certification in the employee's area file (a copy sent to Human Resources).
- An Education file that would contain documentation of all applicable employee's Continuing Education Units (CEU=s), verification of attendance and/or certificates for in-services and education programs.
- Verification of department/unit/job specific orientation provided to new hires/transfers (includes volunteers and contract employees).
- Verification of completion of required training in safety/security, fire, infection control and other related environment of care classes.
- Copy of current CPR card, if applicable.
- Copy of all job descriptions.
- Any other documentation used by the department to identify and measure competencies.
- Competency of skills - Checklist assessment.

REFERENCES: RLANRC Policy No. A200
RLANRC Policy No. A235
RLANRC Policy No. A243.1
JCAHO, Hospital Accreditation Standards - HR.01.06.01

GLT:jm