

Assessing Clinical Competency of the Urology Nurse in an Outpatient Clinic

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Policy And Procedure



- ▶ Quality Department at OU Physicians developed a policy for clinical staff (RN, MA, LPN)

“Competency Assessment and Performance Development”

- ▶ Staff MUST demonstrate competency.
- ▶ Assessment & verification program to be applied in all OU clinics.

Objectives of Policy



- ▶ To insure that the health, comfort, and safety of patients and their families are enhanced by competent professional practice, ensuring high quality care.
- ▶ “Clinical orientation” covering the basics (V/S, medications, documentation, safety etc.) and a one day competency fair.
- ▶ An ongoing assessment/ verification program with evidence that tasks are being performed safely and efficiently.
- ▶ Urology specific “procedure” competencies were developed and implemented in our clinic setting.

Competency

Demonstrated knowledge or ability to meet performance standards for a given role. It reflects actual performance in practice.

Individual Core Competency: Expected practice proficiency in skills; considered an essential part of the job.

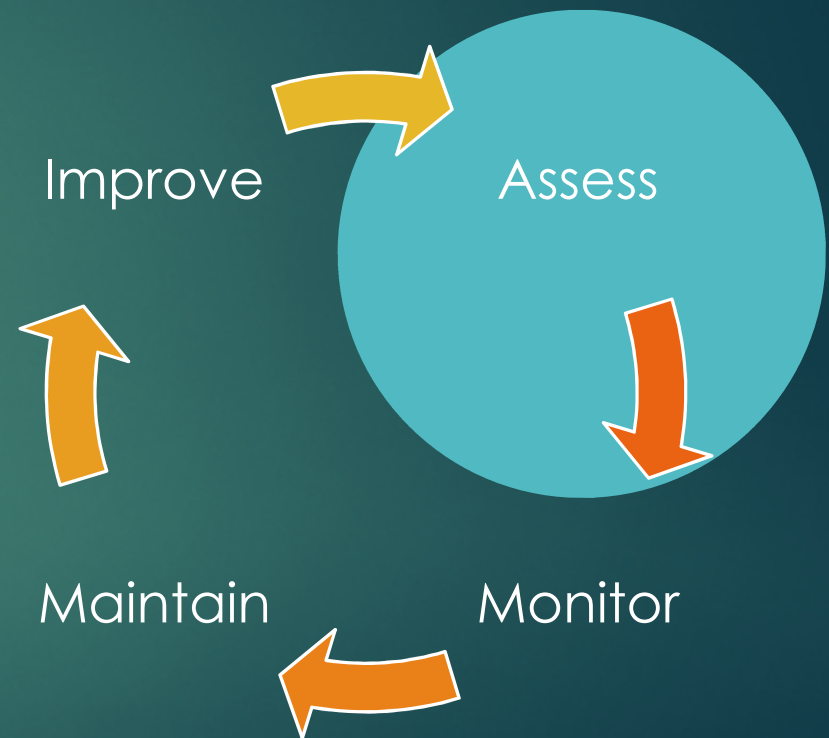
Individual Special Competency: Expected practice proficiency related to working in a particular clinical area or with special patient populations. Ex: Urology, Cardiology.....

Repeatable
&
Consistent

Knowledge
&
Skill

Competency

- ▶ Assessment of clinical competency is conducted on an ongoing basis. Ex: HLD/cystoscope care- every 6 months.
 - ▶ Continually **assess, monitor, maintain, and improve** nurses' clinical competence.
 - ▶ Part of the annual staff evaluations and maintained a copy in the employee file.
 - ▶ New hires
- ▶ Oversight of competencies in clinics resides with the Nurse Manager/ Medical Director



Competency



- ▶ Competency evaluators were identified and trained, based on experience and certification to ensure that every evaluation was conducted in the same way, every time, thus becoming valid and reliable.
- ▶ Self assessment form reviewed with and by staff.
- ▶ Staff's strengths/weaknesses were also evaluated based on Physician/ management review, patient outcomes, and patient survey data.
- ▶ Observation, demonstration, and verbalized understanding of skill are our preferred methods for training. Staff are given a performance rating for knowledge and understanding.

Competency



- ▶ Checklists developed for our most common urology procedures:
- ▶ Cysto, Prostate biopsies, HLD, vasectomy's, Sterile procedures etc.
- ▶ Urology specific Competencies developed based on:
 - ▶ Best practices/standards in urology- AUA and SUNA
 - ▶ Infection control policies/practices
 - ▶ Vendor procedural protocols (Testopel, Interstim, Xiaflex)
 - ▶ Experienced NP, certified urology RN , and approved and supported by experienced board certified Urologists and Medical Director

Competency



- ▶ Standardize our assessments/maintains a record of competency
- ▶ Scoring key 1-3 = provides a level of competency (baseline to expert)
- ▶ Able to observe behaviors on a constant basis and gives staff a sense of confidence and value. Plus, an opportunity to learn and grow.
- ▶ Procedure tray photo book/ supplies needed and preference notes for each Provider helps to ensure proper procedure is followed. Ex: Vasectomy (scalpel vs non)

Urology Specific Competency Verification Form

Post Void Residual (Bladder scan PVR)

Name of Employee: _____ Clinic: _____

Type of Review: Entry Annual Date: _____

Primary Population foci for this competency:

Ages: Pediatric Adolescent Adult Late Adult



Scoring Key	Qualified Evaluator		Employee	
0 = Not applicable at present	Name - Please Print	Initials	Name - Please Print	Initials
1 = Able to perform with assistance				
2 = Able to perform with minimal assistance				
3 = Able to perform without assistance				

Critical Behavior	Methods for Training	Score	Comments/Plan for competency
A. Patient Rights/Organizational Ethics: Displays respect for patient's rights and practice patient advocacy.	<input type="checkbox"/> Observed <input type="checkbox"/> Verbalized <input type="checkbox"/> Demonstrated		
B. Assessment of Patients: In collaboration with the patient and family, will systematically assess the patient.	<input type="checkbox"/> Observed <input type="checkbox"/> Verbalized <input type="checkbox"/> Demonstrated		
1. Patient registered and roomed, vital signs obtained. Urinalysis, uroflow, if indicated performed prior. If necessary provider approval obtained.	<input type="checkbox"/> Observed <input type="checkbox"/> Verbalized <input type="checkbox"/> Demonstrated		
2. Assure instruments/bladder scanner cleaned, calibrated and charged.	<input type="checkbox"/> Observed <input type="checkbox"/> Verbalized <input type="checkbox"/> Demonstrated		
3. Patient positioned, in supine position with abdominal muscles relaxed. Palpate patient's pubic bone for guidance. Apply gel midline to patient's abdomen and approximately 1 inch above the pubic bone.	<input type="checkbox"/> Observed <input type="checkbox"/> Verbalized <input type="checkbox"/> Demonstrated		

4. Turn on machine. Main menu press SCAN. Press male/female appropriately. Use female option ONLY for women who have NOT undergone hysterectomy.	<input type="checkbox"/> Observed <input type="checkbox"/> Verbalized <input type="checkbox"/> Demonstrated		
5. Locate the icon on the scanhead and make sure pointed and aligned appropriately when applied to abdomen. Note: there is a slight downward angle (toward the coccyx) for initial scan.	<input type="checkbox"/> Observed <input type="checkbox"/> Verbalized <input type="checkbox"/> Demonstrated		
6. Press and release the scan button located on the scanhead. Hold the scan head steady throughout the scan.	<input type="checkbox"/> Observed <input type="checkbox"/> Verbalized <input type="checkbox"/> Demonstrated		
7. Acknowledges the greatest measured bladder volume is displayed in large type in the upper left hand corner of the Aiming screen.	<input type="checkbox"/> Observed <input type="checkbox"/> Verbalized <input type="checkbox"/> Demonstrated		
8. Appropriately utilizes the aiming screen for greatest accuracy of PVR.	<input type="checkbox"/> Observed <input type="checkbox"/> Verbalized <input type="checkbox"/> Demonstrated		
9. Able to print results appropriately.	<input type="checkbox"/> Observed <input type="checkbox"/> Verbalized <input type="checkbox"/> Demonstrated		
10. Provide results to provider if indicated.	<input type="checkbox"/> Observed <input type="checkbox"/> Verbalized <input type="checkbox"/> Demonstrated		
11. Assure appropriate documentation and billing has been recorded in patient record.	<input type="checkbox"/> Observed <input type="checkbox"/> Verbalized <input type="checkbox"/> Demonstrated		

Urology Specific Competency Verification Form

Dipstick Urinalysis

Name of Employee: _____

Clinic: _____

Type of Review: Entry Annual

Date: _____

Primary Population foci for this competency:

Ages: Pediatric Adolescent Adult Late Adult

Scoring Key	Qualified Evaluator		Employee	
0 = Not applicable at present	Name - Please Print	Initials	Name - Please Print	Initials
1 = Able to perform with assistance				
2 = Able to perform with minimal assistance				
3 = Able to perform without assistance				

Critical Behavior	Methods for Training	Score	Comments/Plan for competency
A. Patient Rights/Organizational Ethics: Displays respect for patient's rights and practice patient advocacy.	<input type="checkbox"/> Observed <input type="checkbox"/> Verbalized <input type="checkbox"/> Demonstrated		
B. Assessment of Patients: In collaboration with the patient and family, will systematically assess the patient.	<input type="checkbox"/> Observed <input type="checkbox"/> Verbalized <input type="checkbox"/> Demonstrated		
1. Assure instruments if utilized have been acceptably calibrated or quality controls have been met. (See consult for urine analyzer).	<input type="checkbox"/> Observed <input type="checkbox"/> Verbalized <input type="checkbox"/> Demonstrated		
2. Patient registered and roomed, vital signs obtained. Urinalysis performed. If necessary, provider approval obtained. Assure if other test is indicated such as uriflow, this is also considered.	<input type="checkbox"/> Observed <input type="checkbox"/> Verbalized <input type="checkbox"/> Demonstrated		
3. Assure bottles and strips are not contaminated or outdated, when in doubt perform quality control test.	<input type="checkbox"/> Observed <input type="checkbox"/> Verbalized <input type="checkbox"/> Demonstrated		
4. Patient appropriately instructed on clean catch specimen or cath specimen if indicated. 1) wash hands, 2) cleansing cloth used as directed, 3) begin voiding and catch mid stream, 4) specimen labeled and in appropriate area for assessment.	<input type="checkbox"/> Observed <input type="checkbox"/> Verbalized <input type="checkbox"/> Demonstrated		

5. Able to appropriately run dipstick urinalysis. Dipstick appropriately saturated and adequate time to assess results has been demonstrated, 90-100 sec.

Observed
 Verbalized
 Demonstrated

6. Appropriately documents test results, education, and interventions in the patient's medical record and/or chart. Results are also given to provider for review.

Observed
 Verbalized
 Demonstrated

7. If micro urinalysis or urine culture, cytology or other testing is necessary. Appropriately labels specimens and sends accurately to appropriate indicated lab.

Observed
 Verbalized
 Demonstrated

8. Functions within own scope of practice and competency. Seeks assistance, guidance, and clarification when needed.

Observed
 Verbalized
 Demonstrated

Challenges

- ▶ Staff turnover
- ▶ Time constraints
- ▶ Type and scope of staff being evaluated (M.A., LPN, RN)
- ▶ Qualified evaluator to conduct the competency checks



How to Maintain Competency



- ▶ Get involved in CE programs, attend conferences, join SUNA, and obtain and maintain a certification in urology.
- ▶ Cross train in specific areas (UDY, penile doppler, IPG programming)
- ▶ Regularly review state practice act/ regulatory body for definitions of clinical competency, standards of practice, and changes that may take place.
- ▶ Consider membership on the quality improvement committee, or provide regular input to the committee on competency practice issues of concern.
- ▶ Whatever the reason, never attempt to provide patient care or treatment when not competent to do so!!

Conclusion

- ▶ Evaluating competency is imperative within the healthcare environment.
- ▶ Stakes are high in healthcare.....applied across professions.
- ▶ Competency checklists are designed to be a guide for evaluation and should be tailored to your clinical practice if utilized.
- ▶ SUNA is creating new clinical practice guidelines which can assist with development of new evaluation checklists.
- ▶ M.A's role and responsibilities should be defined prior to competency checks.
- ▶ These proficiencies are valuable and have become essential for training, completing initial/annual evaluations, and for allowing us and achieve best

Questions

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