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From Skills Day to Competency Assessment of Critical Elements

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From Skills Day to Competency Assessment of Critical Elements

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Background/Problem

Current annual assessment of clinical staff competency is measured by use of a skills day with checklists. Competency should assess knowledge, skills, and attitudes/abilities. A skills day alone does not assess these critical components.

PICOT

P = acute care clinical staff
I = competency model including knowledge, skills, attitudes
C = current skills day
O = revised competency assessment

Practice Question

For acute care clinical staff (P) is there a model/method to assess knowledge, skills, and attitudes of nursing competency (I) compared to the current process of assessing skills at a skills day (C) that could be used to revise the annual competency assessment process to include knowledge, skills, and attitudes (O)?

Evidence Summary: Strength and Quality of Evidence

Level II B

- Implementation of Wright's Competency Model using peer review. Nurse survey provided positive experience, collaboration, and empowerment.
- Peer Review is one form of staff involvement in the competency assessment process which leads to higher accountability and satisfaction.

Level III B (2 articles)

- Comparison of skills day to unit-based competency (UBC) assessment (Wright's Model). Supported higher nurse satisfaction with UBC, reported as greater autonomy, improved confidence, and increased independence.
- One limited size study supported nurses' input in educational and competency needs and assessments.

Level IV A (4 articles)

- Change from skills day to Wright's Model resulted in decreased education costs, increased clinical nurse educator satisfaction, and increased accountability for staff involvement.
- Implementation of Wright's Model shifted from "one size fits all" to customized approach for continual competency accountability of the staff member.
- Wright's Model supports the use of knowledge, skills, attitudes, and abilities in competence of practice.

Recommendations for Change Based on Evidence Synthesis

Wright's Model has been in use since 2005. A few research studies have been conducted on the model. Of these studies, a quasi-experimental study showed improved staff accountability and satisfaction using the model. Qualitative studies reveal increased accountability of staff when involved in selecting and having a choice in how to demonstrate annual or continual competency. The transition from an annual skills day, which largely assesses psychomotor skills and not knowledge or abilities, should be investigated.

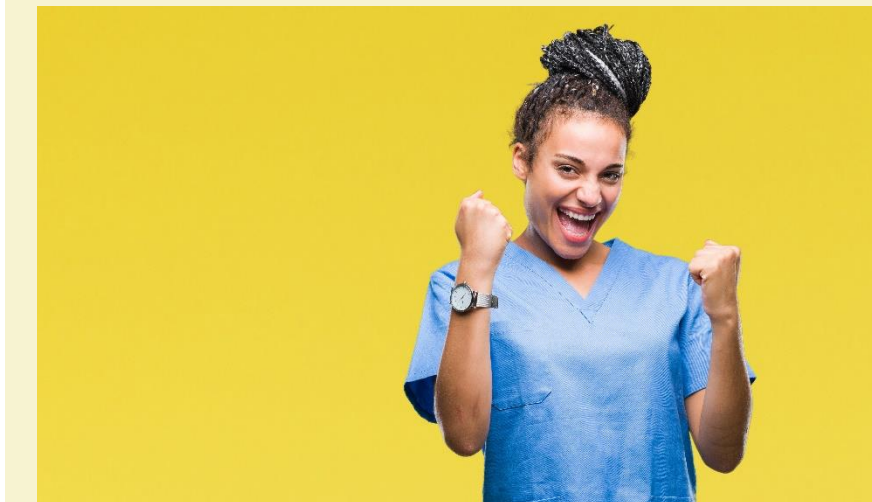
Translation of Evidence into Practice

(Action plan. Are changes to practice feasible, appropriate and a good fit (JHH, p. 49); what is the plan – who, what, when, where, how, and why, JHH, p. 50)?

- NP Department to form sub team
 - Educate sub team on Wright's Model
 - Obtain reference material/resources
 - Create implementation plan for one competency
 - Complete SWOT analysis
 - Engage organizational Stakeholder
 - Build excitement
 - Possibly invite Donna Wright to visit/speak
- Pilot One Competency

Evaluation of Practice Change/Outcomes

- Collect pre-data on nurse satisfaction of current process
- Locate tool to evaluate increased knowledge, skills, and attitudes (KSAs)
- After pilot intervention re-assess nurse satisfaction and KSAs



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Database Search Strategy

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Keywords

Competency Assessment
Annual Competency Assessment
Skills Days
Knowledge, Skills, Attitudes
Competency Models

