A Nontraditional Approach:
Hybrid Competency Evaluation for Emergency Nurses

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Background

Emergency nursing is a specialty within the nursing profession that utilizes the patient's chief complaint as the primary focus of assessment and intervention. This requires a broad spectrum of knowledge, skills, abilities, and judgment. Effective competency evaluation is the cornerstone of continuing professional development and has been traditionally evaluated with the conduction of a formal Annual Competency Day.

PICOT Question & Goals

PICOT Question:

Among the ED nurses at Rush Copley Medical Center's main campus (P), does the implementation of a unit-based hybrid competency evaluation (I) compared to the traditional scheduled "Annual Competency Day" (C) impact ED nurse engagement and cost (O) during FY2019 (T)?

Goals:

- Develop a competency evaluation process that promotes nurse ownership and accountability.
- Implement key strategies for meaningful content delivery and competency evaluation process to encourage autonomy.
- Achieve cost-savings.

Methods

PLAN
- Define objectives/goals
- New process and stakeholder engagement

ACT
- Result dissemination
- Plan for FY2020 Competency Evaluation

DO
- Competency evaluation logistics & related factors
- Meaningful delivery

STUDY
- Evaluate process measures and staff survey
- Cost-effectiveness

Theoretical Framework

Kurt Lewin's Three Stages of Change

Unfreeze
- Change from traditional scheduled "Annual Competency Day"
- Stakeholder buy-in

Change
- Nurses will complete competency validation during their shift
- Attend open house/ drop-in competency evaluation session for incomplete activities

Refreeze
- Accountability and ownership
- ED nurse engagement

Measures

- Ownership and accountability
- Perception of autonomy
- Cost-effectiveness

Process

ED RNs
- Choose and complete one method for competency validation
- Collect documentation/get signed off
- Submit completed competency form
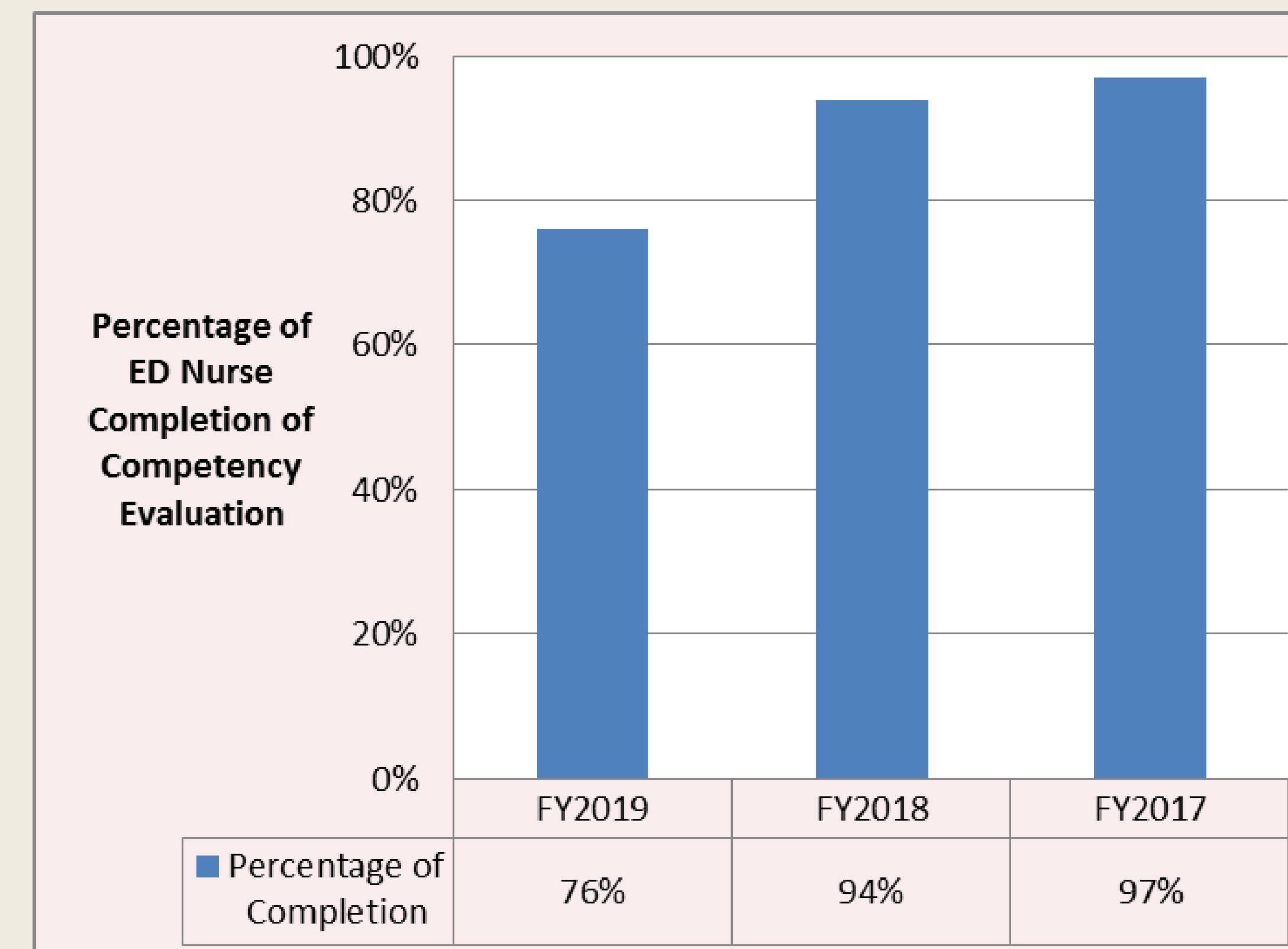- Remediate if needed

Clinical Nurse Educator
- Pre-competency modules
- Simulate events per regulatory requirements, problem areas, high-risk and low-volume items
- Collect, grade, track, and document competency submission
- Follow up and follow through
- Remediation
- Process for make-up

ED Manager & ED Director
- Promote staff ownership and accountability
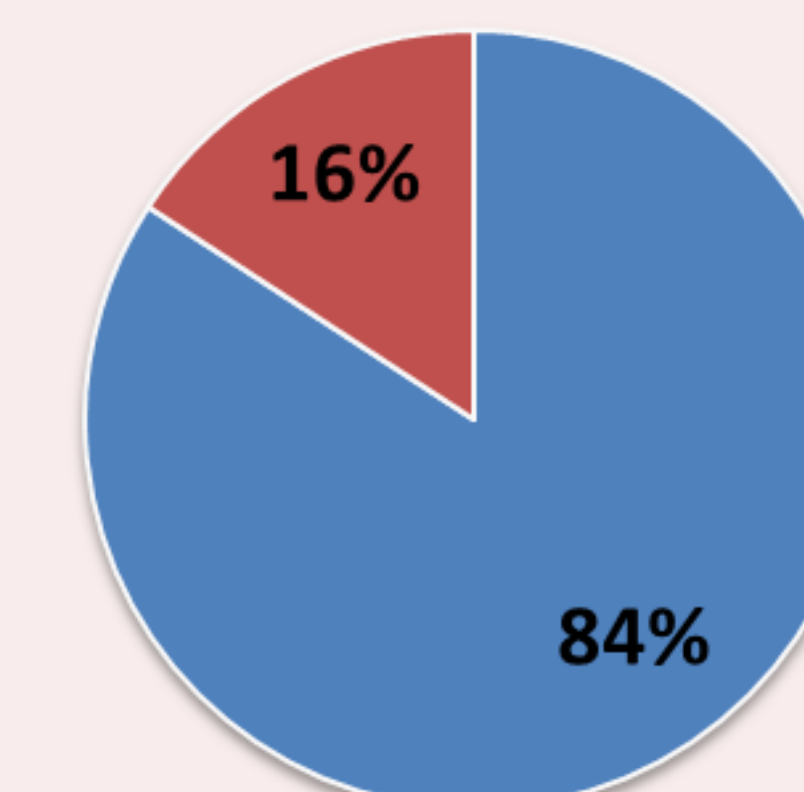- Follow through
- Remediation
- Performance evaluation

Results

Completion of Competency Evaluation

	Percentage of Completion
FY2019	76%
FY2018	94%
FY2017	97%

ED Nurse Survey Results

Perceived Accountability of ED Nurses in Completing the Competency Evaluation

- Competency evaluation process provided accountability: 84%
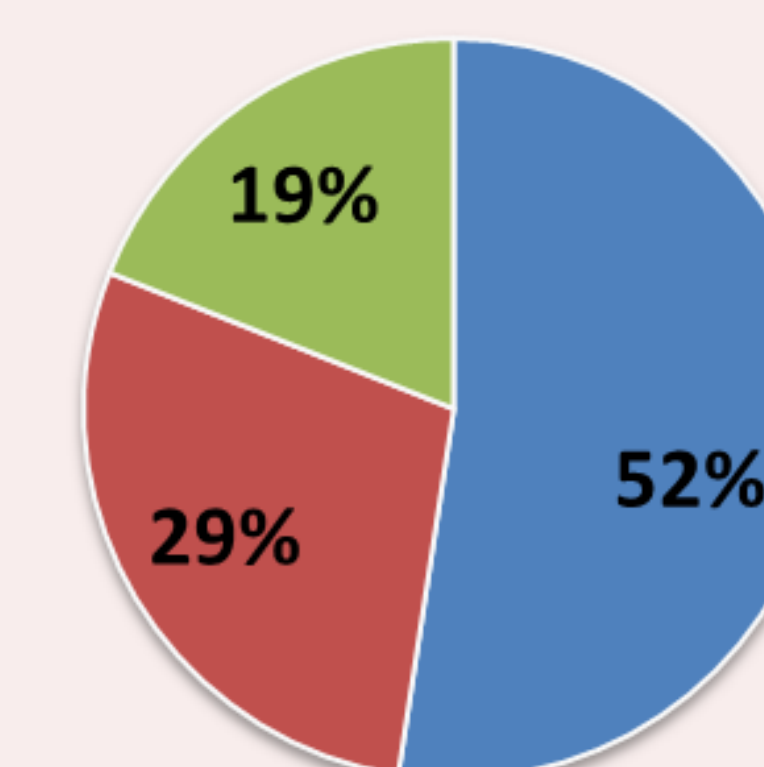- Competency evaluation process did not provide accountability: 16%

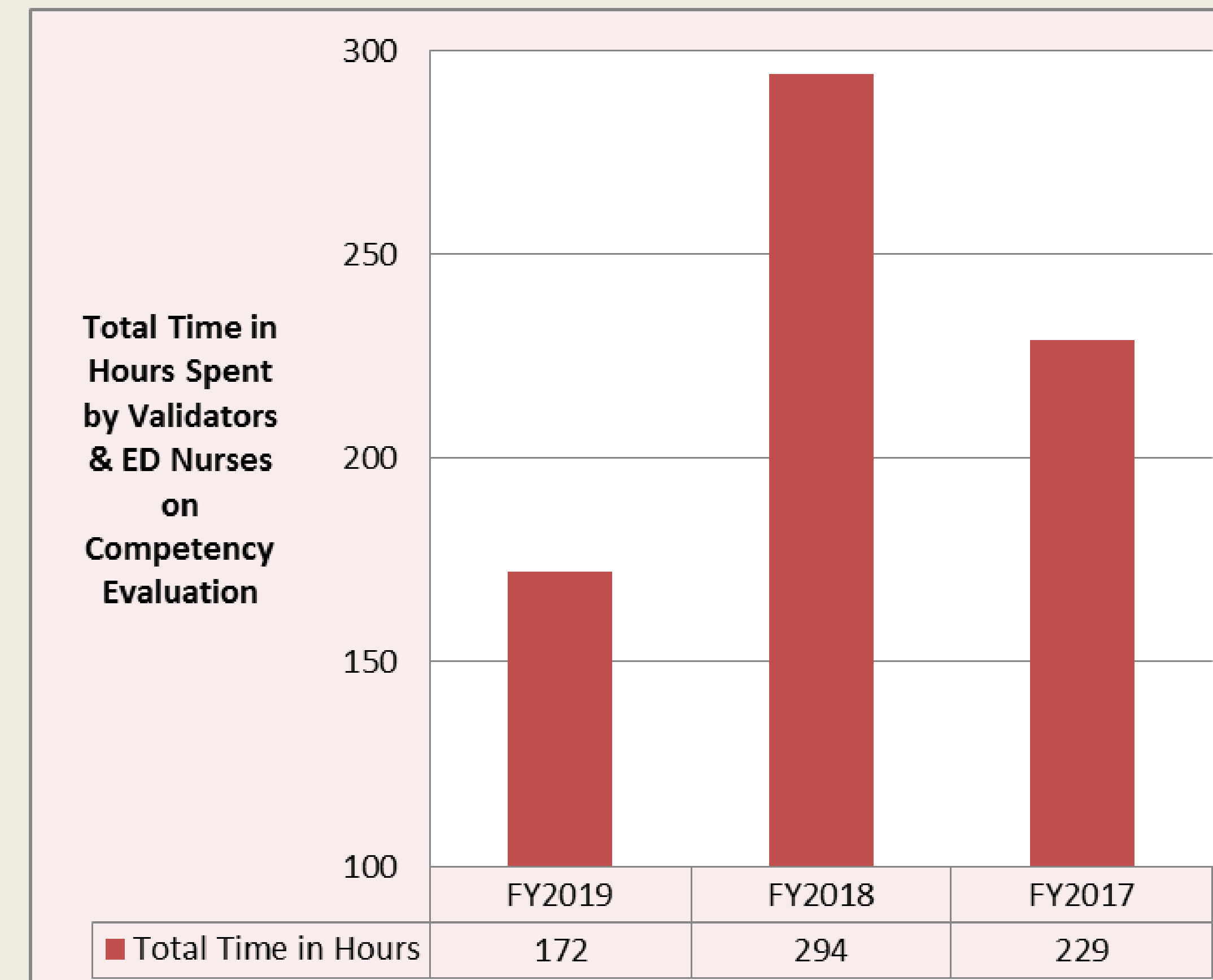**Perception of ED Nurse Autonomy in the Competency Evaluation Process**

- Competency evaluation process provided MORE autonomy: 80%
- Competency evaluation process provided LESS autonomy: 20%

Preferred Competency Evaluation Process

- Annual Competency Day: 52%
- Hybrid Competency Evaluation: 29%
- Not Applicable - First Time Attending: 19%

Results

Cost Effectiveness

	Total Time in Hours
FY2019	172
FY2018	294
FY2017	229

Outcomes

- Decrease in percentage of completion of competency evaluation from previous years.
- ED nurses prefer the scheduled Annual Competency Day based on survey response.
- Savings of 122 nursing salary hours.

Implications

- ED nurses' response to survey question pertaining to perceived accountability was not reflected in the actual percentage of completion of competency evaluation.
- Exploring a different process measure should guide the planning of subsequent competency evaluation process to address this non-correlation.
- Although cost-savings was achieved, utilizing outcome measures may provide a more accurate reflection of process effectiveness in critical care areas such as the ED.

References

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