

Nursing Staff Competencies and Reporting Procedures	1
I. Nursing Staff Competencies	1
A. Two Categories of Competency Verification	1
B. Types of Nursing Staff Competencies Verification	2
C. Procedure of Completing Nursing Staff Competency Verification.....	2
II. Confidentiality	3
III. Reporting Procedure for Certified medication Aides.....	3
A. Reporting Abuse and/or Neglect	3
B. OSDH Forms	3
IV. References	4
V. Action	4
Attachments	4

Section-14 Medical Services Resource Manual	MSRM-140143-01	Page: 1	Effective Date: 11/10/15
Nursing Staff Competencies and Reporting Procedures	ACA Standards:		
Joel McCurdy, M.D. Chief Medical Officer Oklahoma Department of Corrections		Signature on File	

Nursing Staff Competencies and Reporting Procedures

Nursing staff are responsible for on-going professional growth and development. Nursing development programs exist to move staff from novice to expert practice. The performance based development system is used to identify strengths and areas needing improvement in new and existing nursing staff members. The goals of the orientation process are to demonstrate competent nursing practice in critical thinking, technical skills and interpersonal relationships based on the licensure/certificate scope of practice. As part of the overall process, nurses will coach and mentor other nursing staff to foster their growth and continued development.

CMA's are vital members of the nursing staff that are regulated by the Oklahoma State Department of Health. Violations such as abuse and neglect are to be reported to the OSDH.

The following are the guidelines/procedures for completing nursing staff competencies and reporting any violations of CMA's.

I. Nursing Staff Competencies

All ODOC nursing staff will have a current competency verification completed by a designated RN, Nurse Manager, or clinical CHSA.

A. Two categories of competency verifications

1. Initial competency verification - Completed during orientation of the new nursing staff.
2. Annual competency verification – Review/complete with the annual Performance Management Process (PMP) for current staff.

Section-14 Medical Services Resource Manual	MSRM-140143-01	Page: 2	Effective Date: 11/10/15
--	-----------------------	----------------	---------------------------------

B. Types of Nursing staff competency verifications

1. RN - Registered Nurses employed by ODOC, attachment A “Basic RN Initial/Annual Competency Verification”, attached.
2. LPN - Licensed Practical Nurses employed by ODOC, attachment B “Basic LPN Initial/Annual Competency Verification”, attached.
3. CMA - Certified Medication Aides employed by ODOC, attachment C “Basic CMA Initial/Annual Competency Verification”, attached.
4. MHU - Nursing staff working in a facility with a MHU, attachment D “Basic Initial/Annual MHU Competency Verification”, attached.
5. OB-GYN - Nursing staff working with female offenders, attachment E “Basic Initial/Annual OB-GYN Competency Verification”, attached.

C. Procedure for Completing Nursing staff competency verifications

1. Designated RN mentor/preceptor will document the employee name, facility name, mentor name, the initial medication learning assessment score and initial CPR expiration date on page one of the competency verification.
2. The mentor/preceptor will review each practice and task listed on the competency verification and document the method utilized to determine competency. N/A will be documented for all tasks that the employee will not be responsible for completing. If an employee is not competent in an area that will be part of their job, the task will not be completed until the employee has been trained and is deemed competent.
3. The mentor/preceptor documents the date and their initials for each task evaluated on the employees competency verification
4. The mentor/preceptor signs the competency verification as the “initial evaluator” and documents the date that the competency verification was completed.
5. The “Medication Administration Learning Assessment” (MSRM 140143.01 Attachment G) will be completed by the nursing staff employee and scored by the designated RN. A score of 90% or above is required to pass. If score is less than 90%, a second learning assessment will be given. If the score is again below 90%, a developmental plan will be developed, education completed and learning assessment given again. Education will continue until learning assessment passed. CHSA and designated RN will be responsible for continued education and completed developmental

Section-14 Medical Services Resource Manual	MSRM-140143-01	Page: 3	Effective Date: 11/10/15
--	----------------	---------	--------------------------

plan. The medication administration learning assessment will be completed with the initial competency verification and with each new annual competency verification done after four (4) years of reviews.

7. Annual competency verifications and the "Medication Learning Assessment" (MSRM 140143.01 Attachment G) are to be completed along with the employees' annual PMP. CPR expiration date will be documented on the annual competency verification.

II. Confidentiality

Confidentiality is the right of an individual to have personal medical information kept private and not be disclosed to others unless the individual has given specific permission for such release. This includes but is not limited to printed, electronic, oral, and recorded information. Each employee will be required to sign the "Confidentiality Acknowledgement Agreement" (MSRM 140143.01 Attachment F).

III. Reporting Procedures for Certified Medication Aides (CMA's) as per [OP-140143](#), entitled "Nursing Service."

A. Reporting abuse and/or neglect

1. Oklahoma State Department of Health Telephone Numbers
 - a. 8:00 AM – 4:30 PM – (405) 271-9444 Ext. 57223
 - b. After 4:30 PM, weekends and holidays – 1-800-747-8419

B. OSDH Forms

1. Notification of Nurse Aide Abuse (ODH Form 718) - [http://www.ok.gov/health2/documents/LTC%20Notification%20of%20Nurse%20Aide%20Abuse,%20Neglect\(11k.PDF\).pdf](http://www.ok.gov/health2/documents/LTC%20Notification%20of%20Nurse%20Aide%20Abuse,%20Neglect(11k.PDF).pdf)
2. Incident report form (ODH Form 283) - <http://www.ok.gov/health2/documents/LTC%20Form%20ODH%20283%20Fillable%20Incident%20Report%20Form.pdf>

Both forms should be faxed Toll-free to 1-866-239-7553 or locally to (405) 271-4172.

IV. References

OP-140143 entitled "Nursing Service"

V. Action

The chief medical officer, Medical Services will be responsible for compliance with this procedure.

Section-14 Medical Services Resource Manual	MSRM-140143-01	Page: 4	Effective Date: 11/10/15
--	-----------------------	----------------	---------------------------------

The clinical director, Medical Services will be responsible for the annual review and revisions.

Any exceptions to this procedure will require prior written approval from the director.

This procedure will be effective as indicated.

Replaced: Medical Services Resource Manual 140143-01 entitled, "Nursing Staff competencies and Reporting Procedures", dated December 10, 2009

Distribution: Medical Services Resource Manual

<u>Attachments</u>	<u>Title</u>	<u>Location</u>
Attachment A	"Basic RN Initial/Annual Competency Verification"	Attached
Attachment B	"Basic LPN Initial/Annual Competency Verification"	Attached
Attachment C	"Basic CMA Initial/Annual Competency Verification"	Attached
Attachment D	"Basic Initial/Annual MHU Competency Verification"	Attached
Attachment E	"Basic Initial/Annual OB-GYN Competency Verification"	Attached
Attachment F	"Confidentiality Acknowledgement Agreement"	Attached
Attachment G	"Medication Administration Learning Assessment"	Attached