Sharp Memorial Hospital finds a pot of gold at the end of its competency assessment rainbow.

San Diego, California

Problem

In today's economic health care climate of scarce resources, it is important to implement innovative methods to evaluate nursing competency and preserve limited education dollars. Sharp Memorial Hospital used a competency assessment model for validating annual competence, which included a significant amount of nonproductive nursing time and education dollars and did not meet individual employee learning needs or unit/department resource demands.

Solution

Four progressive care units (PCUs) at Sharp Memorial Hospital replaced the traditional annual skills day for validating clinical competence with a diverse evaluation program that involved nurse selected modalities as introduced by Donna Wright's Competency Assessment Model. While the annual skills day had typically featured simulated clinical scenarios, the various verification methods used in the revised process included a written exam, return demonstration, evidence of daily work, case studies, exemplars, peer review, self-assessment, and mock events. Each of the four PCUs had a designated clinical nurse specialist (CNS) who collaborated with their individual leadership team (manager, clinical leads, and advanced clinicians) to select the most applicable modality for evaluating competency, taking unit culture and patient population into consideration.

Outcome

This new innovative process for ongoing verification of competence produced a 600-hour reduction in nonproductive time usage from 2011 to 2012 (1148 hours vs. 548 hours).

While the impetus for changing the competency assessment model was borne out of a desire to make the process more relevant and applicable to...
everyone involved, both financial and educational benefits were realized. The new program allowed nursing staff to demonstrate their competence at the bedside via the modalities they felt best exemplified their knowledge and skill. Unit leadership was gratified with the new program which reduced employee nonproductive time, and therefore, saved significant health care dollars. The cost savings in the first year of this innovative program were approximated at $25,320, based on a calculation of registered nurse average rate of pay and number of employee hours accumulated during the previous process of an annual skills day.

![Nonproductive Time Usage](chart.png)

Another positive outcome of using the Donna Wright Competency Assessment Model was an increase in staff empowerment. Typically, nurse engagement improves when staff are given the freedom to decide how best to demonstrate their knowledge and skill. Each PCU leadership team identified unit specific competencies based on their culture and patient population which were relevant, meaningful, and educational to further staff development. This commitment to the new competency validation process was recognized for its innovation and cost saving benefits.

**Summary**

Donna Wright is known for using the terms “ownership, empowerment, and accountability” when incorporating her competency assessment model. If the staff are empowered to design their own work, their sense of ownership increases, and they become a group that exercises high accountability, not just at the task at hand, but elsewhere in their work as well.

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