

Rockingham Memorial Hospital

Job Description / Performance Appraisal and Competency Evaluation
(PACE Form)

Position Title	OR Staff Nurse	Employee Name	
Department	OR	Supervisor	Squad Leader
Position Code:		Created Date:	11/01
		Revised Date(s):	10/00;2/99;9/92;5/90
HR Review & Approval:		Dept Review & Approval:	
	_____/_____ Initials/Date		_____/_____ Initials/Date

Our Mission, Vision, and Values

Our **Mission** is to be an innovative community-oriented health care provider committed to offering accessible, personalized, and high-quality services in a cost-effective manner.

Our **Vision** is to be the provider of choice in the market we serve.

Our **Core Values** are: **Service * Enthusiasm * Respect * Value * Integrity * Communication * Excellence**

I. Overview of Job

Basic Purpose of Position

Responsible for the supervision/delivery of perioperative care to patients from pediatrics through the life span using the nursing process.

Contacts

Supervises:	Has no supervisory responsibility # Direct Reports: _____ # Indirect Reports: LPN's, ORT's, OR Patient Care Assistants, Unit Secretaries.
Age of Patient Populations Served:	<input type="checkbox"/> Infant: Birth <1 yr <input type="checkbox"/> Toddler: < 2 1/2 yrs <input type="checkbox"/> Pre-School: 2 - <4 1/2 yrs <input type="checkbox"/> School Age: 4 1/2 < 13 yrs <input type="checkbox"/> Adolescents: 13 <18 yrs <input type="checkbox"/> Adults: 18 < 65 yrs <input type="checkbox"/> Older Adult: 65+ XX All <input type="checkbox"/> Not applicable
Internal Contacts	<input type="checkbox"/> Patients <input type="checkbox"/> Providers: (i.e. Physicians, Therapists, Social Workers) <input type="checkbox"/> Staff: (i.e. clinical and administrative support staff)
External Contacts	<input type="checkbox"/> Outpatients <input type="checkbox"/> Vendors <input type="checkbox"/> Community Health Agencies and Advocates <input type="checkbox"/> Other _____

Overtime Status**Overtime Status**

- Exempt - "Salaried" Employee not eligible for overtime.
 - XX Non-Exempt - "Hourly" Employee eligible for overtime.
- If eligible for overtime**, Employee will be paid time and one-half for time worked:
- Over 40 hours per week, or
 - Over 8 hours each day, and over 80 hours in the two week pay period.

Job Requirements**Minimum Education**

Graduate of NLN approved RN education program.

Minimum Work Experience

None required; med/surg experience preferred.

Required Licenses

Current licensure as a registered nurse from the Virginia State Board of Nursing. Currently qualified in BCLS.

Workplace Conditions**Physical Requirements / Environmental Conditions**

Position patients; may require lifting up to 90 lbs using correct lifting techniques. Frequent exposure to chemicals in OR (please see MSDS).

Blood-borne Pathogen Exposure Category

Category # I

Category I Job usually involves contact with patients or patient specimens. Exposure to blood, body fluids, non-intact skin or tissue specimens, is possible.

Category II Job may expose incumbent occasionally or in emergency situations to blood, body fluids, non-intact skin or tissue specimens.

Category III Job does not involve exposure to blood, body fluids, non-intact skin or tissue specimens. Incumbent does not perform or help in emergency medical care or first aid as a part of his/her job.

II. Organizational Competencies

The following section relates to the Core Values of RMH and contains standards for which all Employees, regardless of their position within the organization, are accountable.

1. Service

- Exceeds (Criteria are listed for each level of performance.)
- Meets
- Does Not Meet

2. Enthusiasm

- Exceeds
- Meets
- Does Not Meet

3. Respect

- Exceeds
- Meets
- Does Not Meet

4. Value

- Exceeds
- Meets
- Does Not Meet

5. Integrity

- Exceeds
- Meets
- Does Not Meet

6. Communication

- Exceeds
- Meets
- Does Not Meet

7. Excellence

- Exceeds
- Meets
- Does Not Meet

8. Confidentiality

- Exceeds
- Meets
- Does Not Meet

9. Attendance and Punctuality

- Exceeds
- Meets
- Does Not Meet

Ila. Clinical Competencies

The following section relates to the Core Clinical Competencies for RMH and contains standards for which employees in all clinical departments are accountable.

1. Abuse and Neglect

Not Applicable to this Position

- Exceeds (Criteria are listed for each level of performance.)
- Meets
- Does not meet

2. Standard Precautions and Infection Control

Not Applicable to this Position

- Exceeds
- Meets
- Does Not Meet

3. Pain Management

Not Applicable to this Position

- Exceeds
- Meets
- Does Not Meet

4. Patient Safety

Not Applicable to this Position

- Exceeds
- Meets
- Does not Meet

5. Restraints & Seclusion

Not Applicable to this Position

- Exceeds
- Meets
- Does Not Meet

6. Emergency Preparedness

Not Applicable to this Position

- Exceeds
- Meets
- Does Not Meet

Organizational Competency Summary and Action Plan

Based on the above, list personal/professional development strategies and goals that will further enhance this individual's level of competency:

- No specific action needed at this time.
- Formal Individual Performance Improvement Plan is needed. (See attached)

III. Key Results and Standards of Performance

In this section, Key Result Areas and Standards of Performance are defined. In order to receive a **Meets** rating, all of the standards within that area must be met. To achieve an **Exceeds** rating, all of the Meets and 50% of all of the Exceeds Standards must be met.

1. Assessment		5% of time
<input type="checkbox"/> Exceeds	<input type="checkbox"/> Acts as a role model and mentor in assessment skills, consistently identifies subtleties in patient condition. Always follows through. <input type="checkbox"/> Makes recommendations for quality improvement/special projects/initiatives. Sees through approval and implementation stages.	
<input type="checkbox"/> Meets	<input type="checkbox"/> Performs preop assessment according to established policies and procedures. <input type="checkbox"/> Accurately assesses safety level of patients, physical, social, mental status, cultural needs. Verifies surgical site, consent forms, etc.	
<input type="checkbox"/> Does Not Meet	<input type="checkbox"/> Assessment contains information that is inaccurate, sketchy, and/or not timely as observed by Supervisor/peers/health care team. <input type="checkbox"/> Lacks clinical knowledge to perform assessment.	
Comments are required to justify an Exceeds/Does Not Meet rating.		

2. Planning and Implementation		70% of time
<input type="checkbox"/> Exceeds	<input type="checkbox"/> Functions effectively and competently in all surgeries, as per feedback and observation.	
<input type="checkbox"/> Meets	<input type="checkbox"/> Functions effectively as a circulating RN. Plans, directs, provides and supervises perioperative care of the surgical patients of all ages. <input type="checkbox"/> Functions in the roles of first and second assistant, working within the sterile field for the duration of the case or relief. <input type="checkbox"/> When functioning as a first assistant, demonstrates solid knowledge of anatomy and physiology. <input type="checkbox"/> When functioning as a second assistant, demonstrates solid knowledge of instrumentation and established protocol. <input type="checkbox"/> Lifts and/or moves heavy equipment/supplies in the preparation, management and cleanup of surgical procedures.	
<input type="checkbox"/> Does Not Meet	<input type="checkbox"/> Does not follow established procedures on more than one occasion during the evaluation period. <input type="checkbox"/> Fails to individualize treatment plan.	
Comments are required to justify an Exceeds/Does Not Meet rating.		

3. Education and Teaching		5% of time
<input type="checkbox"/> Exceeds	<input type="checkbox"/> Recommends new and improved nursing/cost containment/quality improvement initiatives based on current professional literature. Sees through approval and implementation stages. <input type="checkbox"/> Presents at least one in-service to staff on new, difficult, or infrequently performed procedures.	
<input type="checkbox"/> Meets	<input type="checkbox"/> Identifies learning needs of unit personnel and students to provide for optimal clinical practice. <input type="checkbox"/> Assists new staff members/students with procedures and/or unit orientation.	
<input type="checkbox"/> Does Not Meet	<input type="checkbox"/> Not helpful on more than one occasion during the evaluation period.	
Comments are required to justify an Exceeds/Does Not Meet rating.		

4. Documentation		10% of time
<input type="checkbox"/> Exceeds	<input type="checkbox"/> Makes recommendations for quality improvement/special projects/initiatives. Sees through approval and implementation stages.	
<input type="checkbox"/> Meets	<input type="checkbox"/> Documentation is complete, legible and timely. <input type="checkbox"/> Appropriate forms are utilized and complete.	
<input type="checkbox"/> Does Not Meet	<input type="checkbox"/> Supervisor has had to counsel employee on more than three occasions during the evaluation period regarding incomplete documentation.	
Comments are required to justify an Exceeds/Does Not Meet rating.		

5. Medication Administration		5% of time
<input type="checkbox"/> Exceeds	<input type="checkbox"/> Stays current on medication administration knowledge. <input type="checkbox"/> Functions as department resource on medication knowledge.	
<input type="checkbox"/> Meets	<input type="checkbox"/> Demonstrates competency in all medication administration and blood product transfusion.	
<input type="checkbox"/> Does Not Meet	<input type="checkbox"/> Supervisor has had to counsel employee on more than one occasion during the evaluation period regarding incomplete documentation.	
Comments are required to justify an Exceeds/Does Not Meet rating.		

6. Departmental Policies and Procedures		5% of time
<input type="checkbox"/> Exceeds	<input type="checkbox"/> Makes recommendations for staff education, in-services and quality improvement of RMH. Sees through approval and implementation stages.	
<input type="checkbox"/> Meets	<input type="checkbox"/> Always attends required in-services, and actively participates in self-education. <input type="checkbox"/> Completes all job functions as per departmental policies and procedures.	
<input type="checkbox"/> Does Not Meet	<input type="checkbox"/> Employee has missed one mandatory in-service during the evaluation period. Supervisor has had to counsel more than two times during the evaluation period with regard to following policies and procedures.	
Comments are required to justify an Exceeds/Does Not Meet rating.		

<i>Key Results and Standards Summary and Action Plan</i>	
Based on the above, list personal/professional development strategies and goals that will further enhance this individual's level of performance:	

<input type="checkbox"/> No specific action needed at this time. <input type="checkbox"/> Formal Individual Performance Improvement Plan is needed. (See attached)	

IV. Job Specific Competencies

Job Specific Competencies are skills that are needed to successfully perform in this position.

COMPETENCY	TYPE	AGE OF PATIENT POPULATION SERVED	COMPETENCY CONTINUUM LEVEL	METHOD OF ASSESSMENT	ASSESSOR
Aseptic technique Patient safety CLIN	High volume	<input type="checkbox"/> Infant: Birth <1 yr <input type="checkbox"/> Toddler: 1<2 1/2 yrs <input type="checkbox"/> Pre-School: 2 1/2<4 1/2 yrs <input type="checkbox"/> School Age: 4 1/2<13 yrs <input type="checkbox"/> Adolescents: 13 18 yrs <input type="checkbox"/> Adults: 18<65 yrs <input type="checkbox"/> Older Adult: 65+ <input type="checkbox"/> All <input type="checkbox"/> Not applicable	<input type="checkbox"/> 1 <input type="checkbox"/> 2 Developing <input type="checkbox"/> 3 <input type="checkbox"/> 4 Proficient <input type="checkbox"/> 5 <input type="checkbox"/> 6 Advanced	<input type="checkbox"/> Observed <input type="checkbox"/> Demonstrated <input type="checkbox"/> Verbalized <input type="checkbox"/> Test	_____/_____ Initials/Date
Malignant hyperthermia CLIN	Low Vol/ High Risk	<input type="checkbox"/> Infant: Birth <1 yr <input type="checkbox"/> Toddler: 1<2 1/2 yrs <input type="checkbox"/> Pre-School: 2 1/2<4 1/2 yrs <input type="checkbox"/> School Age: 4 1/2<13 yrs <input type="checkbox"/> Adolescents: 13 18 yrs <input type="checkbox"/> Adults: 18<65 yrs <input type="checkbox"/> Older Adult: 65+ <input type="checkbox"/> All <input type="checkbox"/> Not applicable	<input type="checkbox"/> 1 <input type="checkbox"/> 2 Developing <input type="checkbox"/> 3 <input type="checkbox"/> 4 Proficient <input type="checkbox"/> 5 <input type="checkbox"/> 6 Advanced	<input type="checkbox"/> Observed <input type="checkbox"/> Demonstrated <input type="checkbox"/> Verbalized <input type="checkbox"/> Test	_____/_____ Initials/Date
New Instruments/ equipment EQUIP Computers and software COMP	New technology	<input type="checkbox"/> Infant: Birth <1 yr <input type="checkbox"/> Toddler: 1<2 1/2 yrs <input type="checkbox"/> Pre-School: 2 1/2<4 1/2 yrs <input type="checkbox"/> School Age: 4 1/2<13 yrs <input type="checkbox"/> Adolescents: 13 18 yrs <input type="checkbox"/> Adults: 18<65 yrs <input type="checkbox"/> Older Adult: 65+ <input type="checkbox"/> All <input type="checkbox"/> Not applicable	<input type="checkbox"/> 1 <input type="checkbox"/> 2 Developing <input type="checkbox"/> 3 <input type="checkbox"/> 4 Proficient <input type="checkbox"/> 5 <input type="checkbox"/> 6 Advanced	<input type="checkbox"/> Observed <input type="checkbox"/> Demonstrated <input type="checkbox"/> Verbalized <input type="checkbox"/> Test	_____/_____ Initials/Date

The Competency Continuum

LEVEL	#	STAGE	DESCRIPTION
Developing	1	Learning	Minimum level of competency
	2	Exhibiting	Some command of competency
Proficient	3	Demonstrating	Consistent command of competency
	4	Modeling	Best example of competency
Advanced	5	Teaching	Instructs others in competency
	6	Leading	Innovates, advances competency

Methods of Assessment Definitions

Observed Assessor has watched skill being performed in actual practice.

Verbalized Employee has verbally demonstrated sufficient knowledge and competency of skill.

Demonstrated Assessor has watched employee demonstrate or present this skill.

Test An objective test measuring this competency was successfully completed.

Competency Classifications

ADMIN Administrative

CLIN Technical: Clinical

COMP Technical: Computer/Software

CORE Clinical Core Competencies

CSVS Customer Service

EQUIP Equipment/Mechanical

MGMT Management/Leadership

PERS Interpersonal Skills

PROF Professional/ Trade Knowledge

OTHER Other

Job Specific Competencies Summary and Action Plan

Based on the above, list personal/professional development strategies and goals that will further enhance this individual's level of job specific competency:

- No specific action needed at this time.
- Formal Individual Performance Improvement Plan is needed. (See attached)

V. Performance Score

Performance Rating Levels

4 = Exceeds rating 2 = Meets rating 0 = Does not meet rating

Key Result Areas (90%)

	Key Result Area	Performance Rating Level		Weight	Score
1. Enter the appropriate Performance Rating Level and weight for each Key Result Area. 2. Multiply the Performance Level Rating times the weight. 3. Total the score column.	1.		X		=
	2.		X		=
	3.		X		=
	4.		X		=
	5.		X		=
	6.		X		=
	7.		X		=
	8.		X		=
	9.		X		=
				100%	
Total for Key Results					<input type="text"/>

Organizational Competencies (10%)

	Key Result Area	Performance Rating Level		Weight	Score
1. Circle the Performance Rating Level for each competency. 2. Enter the result in the score column. 3. Total the score column.	Competency		X	10%	=
	Service		X	10%	=
	Enthusiasm		X	10%	=
	Respect		X	10%	=
	Value		X	10%	=
	Integrity		X	10%	=
	Communication		X	10%	=
	Excellence		X	10%	=
	Confidentiality		X	20%	=
Attendance/Punctuality		X	10%	=	
				100%	
Total for Organizational Competencies					<input type="text"/>

Total Score

1. Copy the totals for Key Result and Competency scores from shaded boxes above. 2. Multiply times the rating to get the weighted score. 3. Add the weighted score to get the Total Score.	SCORE From above	
	Key Result Score <input type="text"/>	X 90% = <input type="text"/> (A)
	Organizational Competency Score <input type="text"/>	X 10% = <input type="text"/> (B)
		Total Score <input type="text"/> (A+B)

VI. Overall Summary

Annual Performance Appraisal and Competency Evaluation

Additional Supervisor Comments: (please use extra pages if necessary)

Employee Comments: (please use extra pages if necessary)

VII. Employee Statement of Understanding, Confidentiality, and Compliance

I agree to uphold the Mission, Vision, and Values; **Service * Enthusiasm * Respect * Value * Integrity * Communication * Excellence**, of Rockingham Memorial Hospital.

I understand that this document is intended to describe the general nature and level of work being performed. The statements in this document are not intended to be construed as an exhaustive list of all responsibilities, duties and skills required of personnel so classified.

Rockingham Memorial Hospital is committed to protecting the confidentiality of information concerning Patients, Employees, and Facility Operations. Furthermore, we are committed to protecting the interests of our patients, community, and organization by ensuring that we consistently provide the highest quality health care services at the most affordable cost.

I agree that, as an Employee of Rockingham Memorial Hospital, I have a legal and moral responsibility to protect the confidentiality of privileged information obtained by me through the delivery of patient care and/or daily facility operations, and I agree not to share or release personal health information or other confidential information to anyone who does not have a right or need to know.

I understand that the improper communication of confidential information (i.e., the release, possession, copying, use, reading or discussion of such information inappropriately or without proper authority) is strictly prohibited and considered grounds for disciplinary action up to and including termination of employment.

Confidential information includes facts, anecdotes, data, perceptions and other knowledge of patients, employees, physicians, patient care providers and other organizational business obtained in the work environment. This includes, but is not limited to, information learned from verbal, written, computerized, faxed, emailed, audio or video taped, observed, or other means.

I understand my responsibility to follow the Hospital's guidelines as stated in the Confidentiality/ Information Access policy. The policy is found in the Hospital Policy Manual, and is available to all departments and units. I understand the Hospital will take disciplinary action against anyone who does not follow these established guidelines.

It is the responsibility of all Employees and members of the Medical Staff to make certain that RMH services are provided in an ethical, legal, and compliant manner and to disclose to management any violation or potential violation of RMH's Code of Conduct. I understand that failure to report fraudulent behavior will result in disciplinary action up to and including termination of employment.

Currently, I am aware of no unreported issue that could pose a risk of non-compliance to RMH. If I am or do become aware of any activity that could pose a risk of non-compliance and/or may violate RMH's Code of Conduct, I will notify management or the Compliance Hotline immediately.

Employee Signature: _____ **Date:** _____

Print your name: _____

Supervisor Signature: _____ **Date:** _____

_____ **Date:** _____

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