

Annual competency assessment procedure

Standard operating procedure (SOP) | WRK-SOP-001

Document type	Standard operating procedure (SOP)
Title	Annual competency assessment procedure
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Prepared by	{{roles.quality_lead.name}}, Quality lead
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Replaces	None (new document)
Standards and criteria supported	Standard 2E, criterion 2E.1
Evidence basis	E-006, E-009
Status of this document	Recommended best-practice model. A hospital may adopt, adapt or replace it with an equivalent that meets the same criteria.

At a glance: what to do

1. Assess each staff member once a year against their job description, using WRK-FRM-001.
2. Observe or review evidence for every competency listed for the role.
3. Agree one learning action for each gap, with an owner and a date.
4. Re-assess each gap when its learning action is due.

Stop and get help straight away if: a staff member is in a clinical role and has not been assessed in the last 12 months.

1. Purpose

To describe how the annual competency assessment is run, so that it is the same in every service [EC].

2. Scope

Applies to	Every staff member in a clinical role
Locations	All services of {{facility.legal_name}}
When	Annually, at appointment, and at change of role
Does not apply to	Non-clinical staff (see the job description for their own assessment)

3. Definitions and abbreviations

Term	Meaning in this SOP
Evidence	What the assessor sees or reviews to show a competency, such as observation, a case record or a logged procedure
Assessor	A manager or senior clinician trained in the method

4. Background and rationale

A consistent method lets the organisation compare results between teams and see where training is needed.

5. Responsibilities

Role	Duties in this SOP	Competence needed
Assessor	Runs the assessment and records the result	Trained in the method
Line manager	Agrees learning actions and checks closure	Management
Human resources lead	Schedules assessments and keeps records	HR administration

6. Equipment, materials and resources

Item	Specification or standard	Check before use
Competency assessment form (WRK-FRM-001)	Current for the role	Version number matches the role
Job description	Current	Signed and dated

7. Safety and infection prevention

- Assessment of a clinical skill is done with a patient safety focus; any unsafe practice seen stops the assessment and is reported at once.

8. Before you start

- Confirm the list of competencies for the role. Confirm the assessor is trained and is not assessing a direct report alone where the policy requires two assessors.

9. Procedure

Follow the steps in order. Where a step says "If", take the action for the case that applies. Do not skip a step. If a step cannot be done, use section 11 and section 12.

Step	Action	How to do it	Key point
1	Prepare the assessment.	- Send the staff member the date, the competencies and the evidence to bring. - Print WRK-FRM-001 for the role.	Preparation is what makes the assessment fair.
2	Carry out the assessment.	- For each competency, observe the task or review a case record. - Mark the result as met, partly met or not met, with a note of the evidence.	Record the evidence, not an opinion.
3	Agree learning actions.	- For each partly met or not met item, agree one action, owner and date. - Both the staff member and the assessor sign the form.	An agreed action is the start of closure.
4	Close the gaps.	- Re-assess the item when the action is due. - Update the record and the training matrix (WRK-REG-001).	Closure is proven by re-assessment.

Decision points

- If any competency is not met and it is needed for safe practice now, the staff member is supervised until the gap is closed.

10. Special situations

Situation	What to do
Assessor not available	Another trained assessor completes the assessment. The change is recorded on the form.

11. Problems and escalation

- Any unsafe practice found during an assessment is reported to the clinical director on the same day.

12. Monitoring and compliance

What is checked	Target	How often	Who	If the target is missed
Assessments completed on time	100%	Monthly	Human resources lead	Escalate to clinical director
Forms with evidence recorded for every item	100%	Quarterly	Clinical managers	Re-assess the incomplete items

13. Records

Record	Where it is kept	Kept for
WRK-FRM-001 Competency assessment form	Personnel file	Employment plus {{facility.records_retention_years}} years

14. Training and competence

- Assessors complete a short course on the method and observe at least one assessment before assessing alone.

15. Related documents

ID	Title	Relationship
WRK-POL-001	Ongoing competency evaluation policy	Policy this procedure supports
WRK-FRM-001	Competency assessment form by role	Record used in step 2
WRK-REG-001	Training matrix register	Updated after each closure

16. Evidence

ID	Source and status
E-006	ASF Policy Framework v1.2. Adapted.
E-009	ASF Expert Committee consensus.

EC = ASF Expert Committee consensus. Items marked EC are reviewed by the Committee each year.

17. Change history

Version	Date	What changed	Approver and signature
1.0	{{document.effective_date}}	First version	Pending Expert Committee approval