Policy · WRK-POL-001 · Version 1.0 · Approved by the ASF Expert Committee

Supports: 2E.1

At a glance

- Every workforce member is assessed against the competencies of their own job description at least once a year.
- Assessments use the forms for the role (WRK-FRM-001), signed by the staff member and the line manager.
- A competency gap always leads to a learning action with an owner and a date.
- Assessment results are kept in the personnel file and are not used for any other purpose without consent.
- Stop and get help straight away if: a staff member is working in a clinical role with no current competency assessment.

1. Purpose

To make sure every staff member is competent for the work they actually do, and that gaps are found and closed, not left unnoticed [EC].

2. Scope

Applies to	All workforce members, paid and unpaid, including locums and volunteers in clinical roles
Locations	All services of the facility
When	At appointment, at each annual assessment, and after any change of role
Does not apply to	Students on placement (covered by their placement agreement)

3. Definitions

Term	Meaning

Competency	The knowledge, skill and behaviour needed to do a job safely and well
Job description	The written statement of duties and required competencies for a role
Competency gap	A required competency that the staff member does not yet show

4. Background

Competence is not a one-time event. Practice changes, equipment changes and people change role. Criterion 2E.1 asks for regular evaluation against the actual job, not a certificate filed at appointment.

5. Responsibilities

Role	Responsibility	Competence
Chief executive	Approves the policy and receives the annual summary	Executive
Clinical and service managers	Run assessments for their teams on time; agree learning actions	Management training
Staff member	Takes part in the assessment and completes agreed learning	Own role
Human resources lead	Keeps the assessment schedule and the personnel records	HR administration

6. Materials and equipment

Item	Requirement	Condition
Competency assessment form by role (WRK-FRM-001)	Current version for the role	Matches the job description
Job description	Current, signed	Dated within the last 12 months

7. Safety

- A staff member who is found not competent for a task must not carry out that task unsupervised until the gap is closed.

8. Before you start

- Confirm the role’s job description and its competency list are current.

9. Procedure

Step 1. Schedule the assessment.

- Set the date at least 4 weeks ahead, for every staff member.
- Tell the staff member what will be assessed and what evidence to bring.

Key point: No one is missed. The schedule is checked each month.

Step 2. Assess against the job description.

- Use WRK-FRM-001 for the role.
- Observe or review evidence for each competency listed.

Key point: Assess what the person does, not what they say they do.

Step 3. Record gaps and agree learning.

- Write each gap on the form.
- Agree one learning action per gap, with an owner and a date.

Key point: A gap without an action is not closed.

Step 4. Check closure.

- Re-assess the gap when the learning action is due.
- Record the result and sign the form.

Key point: Closure is proven by a second assessment.

10. Decision points

- If a gap affects patient safety, the staff member is supervised or removed from the task until the gap is closed. The line manager decides and records the decision the same day.

11. Special situations

Situation	Action
New staff member	Assessment is completed within the probation period, before independent practice.
Change of role	Assessment for the new role is completed before the change takes effect.

12. Escalation

- A staff member who refuses assessment, or a gap that is not closed by its date, is reported to the clinical director and then the chief executive.

13. Monitoring

Measure	Target	Frequency	Owner	If not met
Staff assessed in the last 12 months	100%	Monthly	Human resources lead	Escalate to clinical director
Gaps with a learning action and date	100%	Quarterly	Clinical managers	Escalate to chief executive
Gaps closed by their due date	At least 70%	Quarterly	Clinical managers	Review the learning action

14. Records

Record	Kept in	Retention
WRK-FRM-001 Competency assessment form	Personnel file	Employment plus the period set by the facility’s records policy years

15. Training

- Managers who assess competency are trained in the method before they assess their first team.

16. Related documents

ID	Title	Use
WRK-SOP-001	Annual competency assessment procedure	How the assessment is run
WRK-FRM-001	Competency assessment form by role	Record of each assessment
STF-SOP-001	Staff qualification procedure	Qualification checks at appointment

17. Evidence

Reference	Note
E-006	ASF Policy Framework v1.2. Adapted.
E-009	ASF Expert Committee consensus. Assessment frequency set by the ASF Expert Committee by the Committee.

18. Change history

Version	Date	What changed	Approval
1.0	the date of approval	First version	set Expert Committee approval

E-learning for this document

- **Credentialing, Competence and the Training Matrix** (T-14)

References

- Accréditation Sans Frontières (2026). ASF Policy Framework v1.2. (E-006)
- Accréditation Sans Frontières (2026). ASF Expert Committee consensus on Standard 1. (E-009)

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