

## PHYSICIAN COMPETENCY PROFILE

Name:	Date of hire:
Title:	Employee number:
License number:	Evaluation date:
License renewal date:	Specialty certification: Expiration date:
BLS renewal date:	
Other:	

Key for met/not met categories and self-needs assessment:

1. Able to perform independently
2. Able to perform after review of information
3. Able to perform with assistance only
4. Unable to perform

Time frame:

3 months = 3m  
 6 months = 6m  
 1 year = 1 yr

\* = Annual evaluation required

Task/Behavior	References: A. Review policy/procedure B. Direct observation C. Video review D. Competency testing lab E. Written test F. Self-study packet	A	B	C	D	E	F	Date	Instructor Initials	Time Frame	Met	Not met	Self-needs Assessment
<b>A. DEPARTMENT OVERVIEW</b>													
Tour of ( <i>PACE program</i> )	Direct observation									1m			
Dress code	P&P									1m			
Time	P&P, direct observation*									1m			
Beeper paging	Direct observation									1m			
Telephone & intercom system	Direct observation									1m			
Meeting schedule	Direct observation									1m			
<b>B. DEPARTMENT SAFETY PROCEDURES</b>													
Fire safety procedure*	P&P, video									3m			
Disaster plan, evacuation plan*	P&P									3m			
Location of safety manuals*	Direct observation									3m			
Hazardous materials	P&P									3m			
Body mechanics	Direct observation									3m			
CPR/basic life support	Direct observation, competency testing									3m			
Sharps	P&P									3m			
<b>C. INFECTION CONTROL</b>													
Handwashing	Infection control manual									3m			
Standard precautions*	Infection control manual									3m			
TB control/fit check	Policy #									3m			
Immunizations (PPD yearly)	Policy #									3m			
Management of communicable diseases	P&P												
<b>D. RESOURCE MANAGEMENT</b>													
Pharmacy	Direct observation									3m			
<b>E. USE OF EQUIPMENT</b>													
Wheelchair	P&P, direct observation									3m			
EKG machine	P&P, direct observation									3m			
Glucometer	P&P, direct observation									3m			
Centrifuge	P&P, direct observation									3m			
Suction machine	P&P, direct observation									3m			
Oxygen	P&P, direct observation									3m			
Ophthalmoscope	P&P, direct observation									3m			
Otoscope	P&P, direct observation									3m			
Nebulizer	P&P, direct observation									3m			
IVAC	P&P, direct observation									3m			
Location of all emergency equipment	P&P, direct observation									3m			

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<b>F. MANAGEMENT OF INFORMATION</b>													
Computer Access													
♦ E-mail	P&P, direct observation									3m			
♦ Intranet	P&P, direct observation									3m			
♦ Internet	P&P, direct observation									3m			
♦ Other	P&P, direct observation									3m			
Confidentiality													
Charting	P&P, direct observation									3m			
♦ Forms	P&P, direct observation									3m			
♦ Re-evals	P&P, direct observation									3m			
♦ Intakes	P&P, direct observation									3m			
♦ Orders	P&P, direct observation									3m			
♦ Lab review	P&P, direct observation									3m			
♦ Flowsheets	P&P, direct observation									3m			
♦ DataPACE or successor	P&P, direct observation									3m			
<b>G. QUALITY IMPROVEMENT</b>													
QI committees	P&P, direct observation									3m			
Record review	P&P, direct observation									3m			
Primary care	P&P, direct observation									3m			
Occurrence reporting	P&P, direct observation									3m			
♦ Incident	P&P, direct observation									3m			
♦ Adverse drug reactions	P&P, direct observation									3m			
♦ Equipment/serious incidents	P&P, direct observation									3m			
<b>H. PARTICIPANT CARE</b>													
Knowledge of diseases & management	Direct observation, written test									on-going			
Completion of approved residency in IM or FP	Direct observation, written test									on-going			
Board certification or Board eligibility and pursuing certification	Direct observation, written test									on-going			
Patient management in acute care setting (inpatient and ER)	Direct observation, written test									on-going			
Medical staff privileges at <i>hospital</i>	Direct observation, written test									on-going			
Patient management in LTC setting	Direct observation, written test									on-going			

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<b>I. PARTICIPANT SPECIFIC COMPETENCIES</b>													
Knowledge and skills related to management of specific issues in geriatric care	Direct observation, written test									on-going			
CAQ in geriatrics; successful completion of fellowship, demonstrated knowledge of:	Direct observation, written test									on-going			
♦ Management of chronic conditions in outpatient setting	Direct observation, written test									on-going			
♦ Functional assessment and maintenance	Direct observation, written test									on-going			
♦ Geriatric preventive care issues-primary, secondary and tertiary	Direct observation, written test									on-going			
♦ Diagnosis and management of geriatric syndromes	Direct observation, written test									on-going			
Ability to effectively address issues around death and dying	Direct observation, written test									on-going			
♦ Establishing advance directives (formal and informal)	Direct observation, written test									on-going			
♦ Comfort care, palliative care, pain management	Direct observation, written test									on-going			
Judicious consultant use	Direct observation, written test									on-going			
<b>I. CARE OF PARTICIPANTS</b>													
Oral and written communication with peers, other staff, participants, families and public	P&P, direct observation									6m			
Working cooperatively in small groups	P&P, direct observation									6m			
Conflict resolution skills	P&P, direct observation									6m			
Team dynamics	P&P, direct observation									6m			

Date competency profile completed: \_\_\_\_\_

Action plan initiated:    Yes    No

(If yes, please add action plan to competency profile.)

I understand that it is my responsibility to notify my immediate supervisor if at any time I am unable to perform the basic competencies required to practice in my assigned clinical area.

Employee signature: \_\_\_\_\_

Preceptor signature: \_\_\_\_\_

*(Attach the competency profile action plan here.)*