
QSE 2 – Resources

Key Concepts

This QSE describes the need for resources—human, financial, and otherwise—to support the work performed. It also describes personnel issues such as the qualification of staff, assessments of competence [including those performed under Clinical Laboratory Improvement Amendment (CLIA) regulations], and continuing education requirements.

Key Terms

Competence: An individual's demonstrated ability to apply knowledge and skills needed to perform the job tasks and responsibilities.

Qualification (individuals): The aspects of an individual's education, training, and experience that are necessary for the individual to successfully meet the requirements of a position.

Examples of Objective Evidence

- Policies, processes, and procedures related to this chapter.
- Current job descriptions.
- Evaluation of staffing levels and workload, if performed.
- Process for recruiting and hiring.
- Personnel records (eg, certifications, qualifications, competence assessments, diplomas, transcripts).
- Training records.
- Evaluations of competence records.
- Evidence that job qualifications are met.
- Continuing education records.

2. Resources

2.0 Resources

The organization shall have adequate resources to perform, verify, and manage all the activities described in these *Perioperative Standards*.

Guidance

Standard 2.0 requires that the organization have adequate resources. In the setting of perioperative services, having adequate human resources can be challenging, especially in facilities that perform significant emergency surgeries such as trauma centers. The staffing plan should address how to ensure adequate personnel in emergency situations and at times of increased workload.

2.1 Human Resources

The organization shall employ an adequate number of individuals qualified by education, training, and/or experience.

Guidance

This chapter requires that an appropriate number of qualified personnel be hired. Individuals may be qualified by education, experience, or both. When defining qualifications, one should consider technical knowledge, level of decision-making needed (technical vs medical), and amount of supervision required or available. This chapter also requires that these individuals be trained, initially and at defined intervals, and that the organization assess their competence before independent performance of assigned activities and at least annually thereafter. In addition, staff must have adequate time and training to perform their jobs.

The purpose of this standard is to ensure that only qualified individuals perform activities in the organization. Implicit in this standard is the requirement that the organization define qualifications for each job function, define and meet appropriate training needs, and assess staff competence. Records of qualification, training, and competence assessments must be maintained.



2.1.1

Job Descriptions

The organization shall establish and maintain job descriptions defining the roles and responsibilities for each job position related to the requirements of these *Perioperative Standards*.



2.1.2

Qualification

Personnel performing critical tasks shall be qualified to perform assigned activities on the basis of appropriate education, training, and/or experience.



2.1.3

Training

The organization shall provide training for personnel performing critical tasks.

2.1.3.1

The organization shall define the qualifications required for trainers.

Guidance

The organization's personnel should have the qualification(s) required for the subject, by education, by training in/on the subject academically, theoretically, and/or practically by hands-on methods (techniques).

For qualifying staff/personnel, each facility needs to define:

1. Minimum qualifications required. For example, for personnel performing perioperative blood collection for intraoperative blood recovery, qualifications may include training or certificates in operating specified equipment (eg, in-service review by the manufacturer) and a review of any other critical materials.
2. Hours of training required. For example, to qualify the personnel for performing blood administration after intraoperative collection, 6 hours of training must have been documented.
3. Experience in years required. For example, to qualify personnel to train new staff, the facility might require 1 year of experience successfully completing independent processing of intraoperatively collected blood units.
4. Competency required for the task. For example, the staff may have been assessed for competency in processing of intraoperatively collected units and have been found competent and qualified to process units independently.

- 2.1.3.2** The organization shall ensure that personnel from third-party providers are trained to perform critical tasks related to these *Perioperative Standards* and are capable of consistently ensuring the safety and quality of the delivered product.

Guidance

The intent of this standard is to ensure that if third-party providers are utilized for the collection and/or administration of perioperative blood components, there is an available record indicating that the personnel are also expected to be trained and capable in the same way that an organization's own personnel would be qualified, as described above.



2.1.4 Competence

Evaluations of competence shall be performed before independent performance of assigned activities and at specified intervals.

- 2.1.4.1** Action shall be taken when competence has not been demonstrated.

Guidance

Personnel performing critical tasks who fail a competency assessment for any or all of the tasks should be retrained and reevaluated for performance of those tasks before they are permitted to perform testing. If retraining fails, the person should be removed from the tasks and a performance improvement plan should be developed. If the person is unable to be retrained and cannot demonstrate competence, the person may be subject to reassignment of duties, or other action as deemed appropriate by the facility.