



Joint Task Force National Capital Region Medical **DIRECTIVE**

NUMBER 1025.01
JUL 26 2011

J-7

SUBJECT: Command Education and Staff Development

References: See Enclosure 1

1. PURPOSE. This Directive, under the authority of the Deputy Secretary of Defense Memorandum, Deputy Secretary of Defense Action Memo, the Comprehensive Master Plan for the NCR Medical, and the Supplement to the Comprehensive Master Plan for the NCR Medical (References (a) through (d)), establishes policy and responsibilities for ensuring each Joint Task Force National Capital Region Medical (JTF CapMed) staff member is competent to perform assigned functions and tasks, as described and/or revealed by assessment and position description (PD). Compliance with training requirements and competency is measured and monitored through ongoing assessment and evaluation.

2. APPLICABILITY. This Directive applies to the JTF CapMed and Joint Medical Treatment Facilities (MTFs) and Centers in the National Capital Region (i.e., Fort Belvoir Community Hospital, Walter Reed National Military Medical Center, and the Joint Pathology Center).

3. DEFINITIONS. See Glossary

4. POLICY. It is JTF CapMed policy to outline basic requirements and documentation standards to ensure the competence of all staff members in any area to which they are assigned or cross-trained to exercise responsibilities. In addition, JTF CapMed Joint MTFs and Centers shall provide or assist staff in obtaining the training necessary to ensure maximum efficiency and effectiveness in the performance of their official duties. All staff are encouraged to seek and carry out opportunities for self-improvement (DoD Instruction 1430.04 (Reference (e))).
 - a. Initial competency assessments are to reflect the knowledge, skills, and behaviors required in a particular job. They are based on core, frequently used, high-risk/low-volume, low-risk/high-volume, and problem-prone skills identified by the organization and are assessed no less than every 3 years in accordance with the "Comprehensive Accreditation Manual for

JUL 26 2011

Hospitals (CAMH): The Official Handbook,” (Reference (f)). All assessments are performed and documented by a supervisor within the 45 days of reporting for duty to the workspace in accordance with Army Regulation 40-68 and Air Force Instruction (AFI) 44-119 (References (g) and (h)).

b. Ongoing competency assessments should be performed no less than every 3 years and should assess a staff member’s performance in a job after the initial competencies have been met in accordance with Reference (f).

c. Joint Training Record (JTR) folders will be initiated and maintained in the staff member’s work space. Documents will be filed in chronological format with the most recent on top (Reference (g)) and adhere to the following format:

(1) Section 1: Duties & Responsibilities. Current PD that describes present duties and responsibilities with evidence of review (signatures and dates) by member and supervisor within preceding year. Privileged providers only require PDs if they are in a leadership position. Privacy Act Statement is also included in this section.

(2) Section 2: Certifications. Mandatory, specialty, and local certifications as applicable to job/position assignment.

(3) Section 3: Orientation and Training. Documentation of orientation to the command/facility and workspace/department, including applicable equipment training and job-specific orientation. Includes documentation of annual regulatory training requirement completion, including training to meet standards issued by Joint Commission, Occupational Safety and Health Administration, and all other accrediting and higher authorities in accordance with Bureau of Medicine and Surgery Instruction 1500.29 (Reference (i)).

(4) Section 4: Competency Assessment. Initial and ongoing competency documentation relative to the workspace. Includes documentation of population specific competency (Reference (f)). Competency documentation that is maintained in separate, Service-specific systems will be referenced by a memorandum filed in this section.

(5) Section 5: Service-specific, In-service, and Continuing Education. Documentation of attendance for in-service training and continuing education courses (such as Continuing Medical Education, Continuing Nursing Education, etc.) as applicable.

(6) Section 6: Miscellaneous. Any documentation of miscellaneous training or other documentation that is not related to staff member’s workplace job duties and responsibilities.

d. Staff with a Permanent Change of Station or transfer will hand carry their JTRs to their new duty station or unit.

e. Short-term staff will be responsible for completing training on:

(1) Current Chain of Command and security communication.

JUL 26 2011

(2) Patient safety, confidentiality, and interactions.

(3) Appropriate infection control, fire prevention, and hazardous materials/hazardous communication policies.

(4) Processes for responding to emergencies, unusual clinical events, or incidents.

f. Joint Newcomers' Orientation:

(1) Is a mandatory requirement for all staff as defined in this Directive.

(2) Will introduce staff to command's mission, vision, goals, policies, procedures, and special services.

(3) Will include required Joint Commission, Occupational Health and Safety, and other command-specific training.


(4) Must be completed within the first 45 days of reporting to duty at the assigned workspace.

g. The Annual Command Training Plan aims to assist in staff development needs identified by periodic needs assessment, Service-specific requirements, emerging education topics, and accreditation-related training topics (Reference (e)) and AFI 44-102 (Reference (j)).

5. RESPONSIBILITIES. See Enclosure 2

6. RELEASABILITY. UNLIMITED. This Directive is approved for public release and is available on the Internet from the JTF CapMed Web Site at: www.capmed.mil

7. EFFECTIVE DATE. This Directive is effective immediately.



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Vice Admiral, MC, U.S. Navy
Commander

Enclosures

1. References
 2. Responsibilities
 3. Training Record Section Cover Sheet
- Glossary

JUL 26 2011

ENCLOSURE 1

REFERENCES

- (a) Deputy Secretary of Defense Memorandum, "CapMed Establishing Authority for Joint Task Force - National Capital Region/Medical (JTF CapMed) and JTF CapMed Transition Team (Unclassified)," September 12, 2007
- (b) Deputy Secretary of Defense Action Memo for Civilian and Military Personnel Management Structures for the Joint Task Force National Capital Region – Medical," January 15, 2009
- (c) Comprehensive Master Plan for the NCR Medical, April 23, 2010
- (d) Supplement to the Comprehensive Master Plan for the NCR Medical, August 31, 2010
- (e) DoD Instruction 1430.04, "Civilian Employee Training," June 1, 2007
- (f) Joint Commission on the Accreditation of Healthcare Organizations, "Comprehensive Accreditation Manual for Hospitals (CAMH): The Official Handbook," current edition
- (g) Army Regulation 40-68, "Clinical Quality Management," February 26, 2004
- (h) Air Force Instruction 44-119, "Medical Quality Operations," September 24, 2007
- (i) Bureau of Medicine and Surgery Instruction 1500.29, "Navy Medicine Command Training Program," September 24, 2010
- (j) Air Force Instruction 44-102, "Medical Community Health Management," November 17, 1999

JUL 26 2011

ENCLOSURE 2

RESPONSIBILITIES

1. SUPERVISORS. Supervisors at all levels shall:

a. Ensure that all staff, including short-term staff, covered by this Directive receive orientation training and that all required training, licensure, and qualifications are documented in the JTR and any required credentialing and training databases (i.e., Central Credentials Quality Assurance System, Defense Medical Human Resources System - Internet).

b. Appoint and empower a Training Manager(s) and an alternate to be responsible for implementing the JTR and monitoring, reporting, and documenting completion of required training in the JTR within the applicable department/directorate. Ensure appointment of Training Manager liaisons with the Staff and Faculty Development Department.

c. Ensure staff member competency is assessed and documented periodically according to need or requirement (Reference (f)).

d. Develop competency assessment evaluations pertinent to workspace and staff roles and responsibilities (Reference (f)).

2. STAFF MEMBERS. All staff members are mandated to ensure their individual JTRs are kept up to date at all times.

3. JOINT MTF STAFF AND FACULTY DEVELOPMENT DEPARTMENT. Joint MTF Staff and Faculty Development Department shall:

a. Conduct, coordinate, or communicate required training to staff.

b. Conduct periodic command-wide education needs assessments to identify education needs, requests, and gaps that underpin the Command Annual Training Plan.

c. Develop the Command Annual Training Plan.

d. Provide Joint Newcomers' Orientation.

e. Submit periodic training compliance reports to Executive leadership and other individuals as necessary (Reference (f)).

f. Train and coordinate Training Managers on the JTR, record keeping, and use of computer-based training.

JUL 26 2011

g. Provide consultative services on JTR and competency training efforts throughout the Command.

h. Make site visits as needed to workplaces and outlying clinics to meet with Training Managers and review the JTRs.

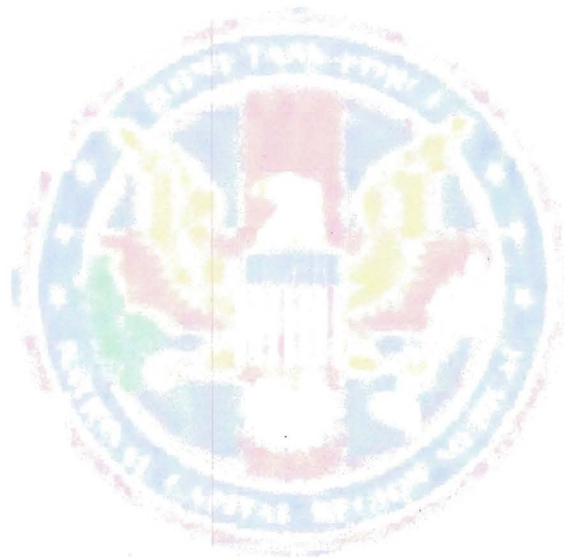
i. Provide consultative services on development of competency assessment tools.

JUL 26 2011

ENCLOSURE 3

TRAINING RECORD SECTION COVER SHEET

Part One



- Position Description(s)
- Privacy Act Statement

Part Two



- License verification
- Mandatory certifications/registrations
- Specialty certifications as required by PD(s)

Part Three



- Training and Education Transcript
- General Orientation to Facility
- Unit/Department(s) orientation

JUL 26 2011

Part Four



- Initial Competency Assessment
- Periodic Competency Assessment
- Service-specific training

JUL 26 2011

Part Five



- Continuing Education Documents/Certificates
- In-service Record (or location of record of attendance and topic)

JUL 26 2011

Part Six



- Miscellaneous Training-related documents

JUL 26 2011

GLOSSARYDEFINITIONS

Unless otherwise noted, the following definitions apply to the JTF CapMed Command Education and Staff Development.

annual regulatory training. Training required by local, accrediting organizations, Service-specific, or higher authority which must be completed on an annual basis.

competency. An employee's ability to demonstrate and apply decision-making, psychomotor, and interpersonal skills at the level of proficiency expected for his or her current duty position (Reference (g)).

competency assessment. A process for the initial and periodic evaluation and documentation of an individual's knowledge, skills, and ability to perform a specific job or task according to established standards that are determined, in part, by the work setting and the staff member's designated role in that setting (Reference (g)).

Defense Medical Human Resources System - Internet. The system by which staff work hours are reported and tracked and education and training classes are accessed and reported.

inservice training. Organized educational opportunities designed to enhance staff member knowledge and skills or to teach new knowledge and skills relevant to their particular responsibilities and disciplines (Reference (g)).

JTR. The six-sided folder which contains documentation of a staff member's PD, orientation, required training, Annual Regulatory Training, and competency assessment.

Joint Newcomers Orientation. The general orientation to the facility which provides a new staff member with the organization's mission and vision, introduces key persons and processes, and provides job-specific and Service-specific computer-based training and online classes as required.

Service-specific training. Training required by one or more of the uniformed Services.

short-term staff. Those staff working 8 consecutive weeks annually or less.

staff. Includes all military, civilian, contract, volunteer, and student employees assigned to duties within the MTF. Includes short-term staff unless otherwise noted.

Training Manager. The department or workspace staff member assigned to liaison with the Staff and Faculty Development Department to ensure all Command Education and Staff Development policy is implemented and carried out in his or her workspace.

workspace. The location(s) health care personnel perform duties and document work hours in the Defense Medical Human Resources System - Internet timecard.