

**MILLE LACS BAND OF OJIBWE  
HEALTH AND HUMAN SERVICES POLICY & PROCEDURE**

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**Department:** Health Services-Radiology

**Policy Number:** HHS-HS-RAD 1420

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**Policy Title:** Radiology Competency Assessment

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**Attachments:**

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**Revision History:** 07/01, 02/15; 3/18

**Revised by/Date:** Lance Roeschlein/Holly Hunter 1/2022

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**Approved by:**

Jenna Kuduk, Health Services Director



**Date:**

11/31/22

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**Approved by:**

Nicole Anderson, Commissioner of HHS



**Date:**

2-3-22

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**POLICY STATEMENT:** Mille Lacs Band Health Services Radiology department personnel are routinely assessed to ensure competency. These reviews are documented and kept in the employee's file.

**PURPOSE:** The Radiology competency assessment is performed to assure reliability and that timely, accurate results are delivered to our patients.

**PROCEDURE:**

Schedule

1. Each employee completes general orientation, including age specific competencies if indicated upon hire.
2. Each technical person is assessed on technical aspects, six months after the initial orientation.
3. After six months, competency reviews are performed annually in October, with their performance review.

Areas of Evaluation

1. The employee will be assessed in all areas he or she performs testing
  - a. The Radiology manager will choose areas for review. Usually, they are chosen from areas where an opportunity for continued improvement has been identified or when tests are implemented or revised.
  - b. The supervisor will discuss the area to be used with the Radiology director prior to assessment.
2. Other areas reviewed are:
  - a. Incident reports
  - b. Continuing Education
  - c. Compliance

*Outcomes: if no areas are found where retraining is required, the employee is competent to perform the duties outlined in the job description*

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Corrective Action

1. If areas within Radiology are found when retraining is needed the supervisor will conduct the training and retest.
2. The employee will not perform testing the area of retraining until successful retesting is performed.

Review

1. The Radiology manager and director will review all competency assessments.
2. All records are retained in the compliance officer's office.
3. The Radiology manager will meet with the employee to review the competencies at the time of the annual meeting.

<b>Internal and/or External References</b>	
<b>Compliance - Posting Date</b>	2/3/2023 <sup>2023</sup> KLD
<b>Replaces – Policy Number</b>	
<b>Next Review - Due Date</b>	