

1. Disease Patterns

Q: How much detail is provided in the dossier (basic knowledge only or more in-depth knowledge)?

A: Kompetanseportalen provides references to guidelines and relevant documentation, offering basic information along with a checklist for verifying understanding of the subject matter. We recommend a good description of the requirements, and it's for the local subject matter experts how detailed they set up their requirements locally. We have a guide that gives examples of a good starting point when setting up the local requirements.

Q: What kind of learning material (care manuals, current studies) is made available?

A: We have a range of learning materials available, including e-learning, guidelines, and manuals for medical equipment. We track participation in classroom learning of Advanced Cardiovascular Life Support (ACLS) and Basic Life Support (BLS) for Healthcare Providers where the participants send the requirement to the instructor for approval.

Q: How are changes in guidelines and internal regulations dealt with? How often are changes made?

A: When necessary. We often have links directly to the sources, and it should therefore always be up to date. If there is a major update, we have the option to reset the requirements; everyone must repeat the requirement when it is reset.

2. External Training / Languages Skills / Soft Skills

Q: Where are these knowledge and skills mapped in the dossier?

A: Local requirements for external training are specified in local competency plans, with an option to mark as "not relevant" for certain employees. We hope Dossier will implement a possibility for adding individual requirements in the future.

Q: How is the deposited information used?

A: They upload a certificate/proof of completion as part of completing the requirement.

3. Rollout

Q: How was the rollout in a new ward started (direct involvement of all employees or only individual employees)?

A: The rollout was conducted clinic by clinic, engaging central staff and subject matter experts (individual employees) in system training.

Q: Which plans were used to start (all plans at once or one specific plan)?

A: A central competency plan based on mandatory courses was created, alongside local competency plans developed by clinics with project team support.

Q: How long did it take for Dossier to become established on a ward?

A: Varying from unit to unit. The project team was available for all units/wards in the clinic over a 2-month period. Depends on the subject matter experts' technical expertise, time set aside to actually work with digitizing the competency plans, and other factors.

4. Lessons Learned

Q: What were the greatest challenges?

A: It is a challenge being a small team tasked with overseeing the adoption of the system across the

different units. Responsibility has been transferred to each individual clinic. We are 2.5 positions serving a hospital with 25,000 employees.

Another challenge was having to pivot conducting the system training digitally. The advantage of this was that we could train more people at the same time, but there was very little interaction with the course participants digitally. Often, only 2-3 out of 25-30 participants would speak up. Very few had cameras available, as until the pandemic, we only had Outlook as a communication tool. We got Skype 1-2 weeks after the lockdown.

The communication from the clinic staff to the various units was varying in quality.

5. Acceptance of Dossier

Q: How high is the acceptance of the Dossier Solution among employees and managers?

A: The system was well-received, with minimal negative feedback. Managers appreciate the improved training oversight, and employees value clarity regarding training requirements. Clinics with a higher percentage of technical personnel had a more controlled implementation with “focus groups”.

Q: What is the feedback from employees on the wards?

A: Overall very positive. It was important that the competency plans were well-structured and the content was good. There have been cases where we have assisted units in merging several plans into one based on input from the employees.

Q: What were the fears when using it (e.g. transparency of data)?

A: Only for the functionality regarding employee-to-leader conversations (Dialog-module). As for the requirements and following the progression, we have not received any fears.

6. Interfaces

Q: Which interfaces are built?

A: Personalportalen (users & organizational structure (master data)) and Læringsportalen (tracking status of e-learning and classroom attendance). Local requirements are set up manually with linking to the guidelines system (no integration).

Q: What data is used via the interfaces?

A: Data on classroom attendance and e-learning completion is tracked. Data travels one way from the learning management system to Kompetanseportalen. Status, course name, id is sent to Kompetanseportalen.

From Personalportalen to Kompetanseportalen we get organizational structure with leaders and employees mapped up to the correct units.

7. Role Model & Organizational Structures

Q: What does the role model in the hospital look like?

A: HF admin, leaders, subject matter experts, employee

Q: How are the competency plans structured?

A: Competency plan name, sections with good section naming, requirements with clear/precise/informative description (think user experience). We have a central competency plan

that is handed out automatically to all employees, there are 4 sections in this plan where one section is for everyone, one section for all employees working with patients , one section for those who do not work directly with patients, and a last section with recommended courses. The first section can not be marked as “not relevant”, the other sections can be marked as “not relevant”.

Before system training we hand out a competency plan that gives an introduction to Kompetanseportalen.

Central competency plan for all employees:

<https://hso.dossier.no/profile/app/trainingplantype/preview/88404>

Competency plan handed out a week in advance of the system training:

<https://hso.dossier.no/profile/app/trainingplantype/preview/86808>