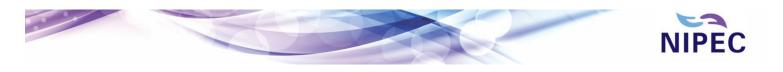




INFECTION PREVENTION CONTROL

DOMAIN 1 – CLINICAL PRACTICE



DOMAIN 1 – CLINICAL PRACTICE

Below are the competence statements within the Clinical Practice Domain. The competence statements have been structured to focus on the expected practice, knowledge, understanding and skills of an individual who is practicing at an advanced level in Infection Prevention and Control.

Use the rating scale below to help you assess yourself against the competency statement.

- LD I need a lot of development
- SD I need some development
- WD I am well developed
- NA Is not applicable to my role

You may find it helpful to discuss the competence statements with one of your peers before you begin your assessment

1.1 COMPETENCY AREA

Improve quality and safety by developing and implementing robust, high-quality policies and guidelines that prevent and control infection.

- Core 4 Service improvement Level 4
- HWB3 Protection of health and wellbeing Level 4

PRA	CTICE	LD	SD	WD	NA
1.	Provide guidance for those working in all areas of health and social-care practice through critically analysing and interpreting national quality and safety resources and initiatives and presenting the information in a way that is suitable for the people involved				
2.	Evaluate the effectiveness of existing policies, guidelines and identify areas for improvement				
3.	Promote evidence-based improvements in policies and guidelines through demonstrating their value in terms of safety and quality in the context concerned				
4.	Work in partnership with individuals, the population and colleagues to develop clear and robust policies and guidelines that prevent and control infection				
5.	Work in partnership with others to plan the effective implementation of policies and guidelines to prevent and control infection				
6.	Provide expert advisory support for the implementation of policies and guidelines to prevent and control infection				
7.	Monitor the implementation of infection prevention and control policies and guidelines, taking any corrective actions as and when necessary				
8.	Identify the need for improvements in infection prevention and control policies and guidelines in the light of implementation and the changing knowledge base and evidence				
9.	Provide expert infection prevention and control input to the development of broader policies and guidelines				
10.	Policy development skills				





KNC	OWLEDGE UNDERSTANDING AND SKILLS	LD	SD	WD	NA
a.	Applied microbiology in relation to the chain of infection and the infection process, alert micro-organisms and conditions, body defence mechanisms				
b.	The significance of microbiological results, interpreting the diagnostic laboratory results, practices designed to break the chain of infection, including standard and transmission-based precautions including the placement of populations and individuals in care settings				
с.	Hand hygiene (including social hand hygiene, antiseptic hand hygiene, surgical scrub)				
d.	Safe management of invasive devices and prevention of device-related infections				
e.	Asepsis				
f.	Antimicrobial stewardship – prudent prescribing of antimicrobials and the surveillance of antimicrobial-resistant organisms				
g.	Aligning infection prevention and control with the quality and safety agenda (using outcomes, risk assessment matrix, programmes and systems) and making use of health information exchange systems				
h.	Legislation, national guidance and outcomes/indicators related to preventing and controlling infection in health and social-care environments and facilities (including ventilation, water sources, waste management, hygiene, isolation facilities, laundry management, food hygiene)				
i.	Legislation, national guidance and outcomes/indicators related to preventing and controlling infection for individuals and populations in health and social-care environments and facilities (for example, communicable disease control; immunisation; prevention and management of injuries(including sharps); post- exposure prophylaxis; specific controls in specialist areas such as burns, critical care, renal and transplant, maternity, neonatal, children, operating rooms, mental health, dentistry and ambulance services)				
j.	The evidence base on which infection prevention and control policies should be based				
k.	Knowledge of national and organisational strategies, objectives, structure and accountability and how to present information in a manner that fits within the strategic context				



1.2 COMPETENCY AREA

Collate, analyse and communicate data relating to preventing and controlling infection for surveillance purposes

- HWB3 Protection of health and wellbeing Level 4
- IK2 Information collection and analysis Level 3

PRA	CTICE	LD	SD	WD	NA
1.	Obtain and link data using appropriate methods and systems for the surveillance of infection				
2.	Structure and analyse the data correctly to identify patterns, trends and anomalies that may be significant in relation to preventing and controlling infection				
3.	Critically assess the strengths and limitations of the data using methods of analysis that are appropriate to the nature and form of the data and the purpose for which the results are to be used				
4.	Identify areas that might require further investigation or analysis in relation to potential risks				
5.	Analyse potential risks and reach conclusions appropriate to the risks				
6.	Critically assess the conclusions reached, identifying the strengths and limitations of the analysis undertaken				
7.	Act upon the risks identified, communicating them effectively to the appropriate people				
8.	Enable health and social-care staff to understand the data and make the necessary changes to achieve improved outcomes				
9.	Take the appropriate action when surveillance methods and data can be improved				

KNC	OWLEDGE UNDERSTANDING AND SKILLS	LD	SD	WD	NA
a.	Applied microbiology in relation to the chain of infection and the infection process, alert micro-organisms and conditions, body defence mechanisms				
b.	The significance of microbiological results, interpreting the diagnostic laboratory results and practices designed to break the chain of infection, including standard and transmission-based precautions including the placement of populations and individuals in care settings				
c.	Definitions, methods and types of surveillance, data handling, data analysis, interpreting outcomes, assessing limitations of data				
d.	Epidemiology, descriptive and applied (that is, the application and evaluation of epidemiologic discoveries and methods in public health and health and social- care settings, including applications of aetiological research, priority setting and evaluation of programmes, policies and services)				
e.	Principles of epidemiology, incidence, prevalence				
f.	Principles of statistics and variation				
g.	Feedback and reporting mechanisms.				



1.3 COMPETENCY AREA

Manage incidents and outbreaks

This competence relates to the following dimensions and levels within the NHS KSF:

• HWB3 Protection of health and wellbeing Level 4

PRA	CTICE	LD	SD	WD	NA
1.	Assess the information available on the incident/outbreak and seek any necessary further evidence to establish its nature and scale				
2.	Establish the appropriate response using local incident/outbreak/emergency planning guides				
3.	Inform and involve relevant colleagues and partner organisations in a timely manner consistent with incident or emergency plans				
4.	Facilitate the development of an outbreak/incident management team, ensuring that the appropriate organisations and functions are represented				
5.	Communicate clear, accurate and timely information with colleagues, partner organisations and others throughout the incident in a manner that effectively manages risk and supports effective team working				
6.	Establish agreement on the control measures to be taken to minimise exposure to hazards and to reduce risks and prevent secondary or further spread or exposures				
7.	Review the availability of resources to implement the control measures throughout the duration of the incident/outbreak				
8.	Ensure accurate records of the investigation and management of the incident/outbreak are maintained throughout the process				
9.	Lead review of the investigation and management of the incident/outbreak and modify measures as a result				
10.	Produce a final report of the incident/outbreak and communicate it to all concerned				
11.	Evaluate the incident/outbreak and make recommendations for future improvement				

KNC	OWLEDGE UNDERSTANDING AND SKILLS	LD	SD	WD	NA
a.	Alert micro-organisms, baseline				
b.	Defining and recognising outbreaks				
с.	Definitions, methods and types of surveillance, data handling, data analysis, interpreting outcomes, assessing limitations of data				
d.	Investigation of outbreaks, data collection				
e.	The significance of microbiological results; interpreting the diagnostic laboratory results; practices designed to break the chain of infection, including standard and transmission-based precautions including the placement of populations and individuals in care settings				
f.	Control measures				



KNC	WLEDGE UNDERSTANDING AND SKILLS	LD	SD	WD	NA
g.	Epidemiology, descriptive and applied (that is, the application and evaluation of epidemiologic discoveries and methods in public health and health and social- care settings, including applications of aetiological research, priority setting and evaluation of programmes, policies and services)				
h.	Principles of epidemiology, incidence, prevalence				
i.	Principles of statistics and variation				
j.	Feedback and reporting mechanism				
k.	Epidemics, pandemics, endemic				
١.	Public health dimension; public health epidemiology				
m.	Methods of performing post-outbreak evaluation; report evaluation feedback; serious untoward incident tools				
n.	Emergency systems and procedures for managing incidents and outbreaks				
0.	The roles and responsibilities of national, regional and local agencies and departments in managing incidents and outbreaks				
p.	Knowledge of sources of advice and expertise that can be drawn upon to contribute to investigating and managing the hazard				
q.	Legal frameworks (that is, legal powers and duties, responsibilities and accountability) and organisational and professional policies and protocols when there is an outbreak or incident.				



1.4 COMPETENCY AREA

Improve quality and safety through the application of improvement methodologies

- Core 4 Service improvement Level 4
- HWB3 Protection of health and wellbeing Level 4

PRA	CTICE	LD	SD	WD	NA
1.	Identify the need for change in practices and environments				
2.	Work in partnership with others to develop practice innovations and service re- design solutions to improve safety and quality				
3.	Lead the organisation's infection prevention and control programme to improve safety and the overall quality and experience of care through linking it with the work of internal and external partners and influencing direction				
4.	Ensure that audit, surveillance, epidemiology and risk register data are collated, communicated, used and interpreted effectively				
5.	Access existing and create new databases to manage and use data and information related to improving quality and safety				
6.	Guide practice in infection prevention and control through the critical analysis and effective communication of national quality and safety resources and initiatives				
7.	Work in partnership with individuals, populations, staff and others to develop improvement programmes that are in line with the culture and context of the area				
8.	Lead the implementation of improvement programmes, working in partnership with all involved				
9.	Evaluate the effectiveness of improvement programmes in partnership with individuals, populations, staff and others, identifying the improvements that need to be made in practice				
10.	Prepare and present infection prevention and control reports and recommendations to individuals, populations, staff, members of the organisation and others				
11.	Confirm that agreed actions have been taken to improve safety and the quality of health and social-care practice				
12.	Take the necessary action to escalate concerns when there is a failure to act which compromises safety and quality.				

KNC	OWLEDGE UNDERSTANDING AND SKILLS	LD	SD	WD	NA
a.	Clinical governance, quality assurance, clinical effectiveness, quality improvement framework and service improvement frameworks				
b.	Risk identification, assessment and management including: risk analysis, action planning, feedback and re-evaluation				
c.	Serious untoward incident and root cause analysis				
d.	Review of audit findings, action planning, feedback and re-evaluation				
e.	Available quality and safety resources and initiatives				
f.	Outcome measures including measures that are reported by individuals receiving health and social-care services				





KNC	OWLEDGE UNDERSTANDING AND SKILLS	LD	SD	WD	NA
g.	Corrective and preventive actions				
h.	Development, implementation and evaluation of evidence-based achievable metrics and outcome measures that can be audited				
i.	Improvement and change methodologies.				





Advise on the design, construction and modification of facilities to prevent and control infection in the built environment

This competence relates to the following dimensions and levels within the NHS KSF:

• EF2 Environments and buildings Level 4

PRA	CTICE	LD	SD	WD	NA
1.	Work with others on plans for the design, construction and modification of facilities to improve safety and quality through infection prevention and control				
2.	Advise on the infection prevention and control risk assessment criteria prior to a new build and in advance of any demolition or modification of a building consistent with current building guidance and legislation				
3.	Liaise with key health and social-care staff and others prior to and at every subsequent stage of the build, demolition or modification to ensure that infection prevention and control advice is effectively incorporated into the works				
4.	Work in partnership with key health and social-care staff to reduce the risk of infection to individuals, populations, staff and others during construction, demolition or modification activities				
5.	On the completion of the works, review with individuals, populations, staff and others the effectiveness of the development for preventing and controlling infection.				

KNC	OWLEDGE UNDERSTANDING AND SKILLS	LD	SD	WD	NA
a.	Applied microbiology in relation to the chain of infection and the infection process, alert micro-organisms and conditions, body defence mechanisms				
b.	The significance of microbiological results, interpreting the diagnostic laboratory results; practices designed to break the chain of infection – for example, standard and transmission-based precautions including the placement of individuals and populations within care settings				
c.	Antimicrobial stewardship – prudent prescribing of antimicrobials and the surveillance of antimicrobial resistant organisms				
d.	Legislation, national guidance and outcomes/indicators relating to the design, construction and modification of the built environment in general and health and social-care facilities in particular (for example, ventilation, water sources, waste management, hygiene)				
e.	Organisational strategy for new builds, refurbishments, planned programme maintenance				
f.	Interpretation of architects', estates' and facilities' plans for new builds, refurbishment and modification				



1.6 COMPETENCY AREA

Evaluate, monitor and review the effectiveness of decontamination processes for equipment and environment

- EF1 Systems, buildings and equipment Level 4
- EF2 Environments and buildings Level 4

PRACTICE		LD	SD	WD	NA
1.	Provide evidence-based infection prevention and control input in the development of decontamination policies and procedures				
2.	Audit decontamination methods to determine their effectiveness				
3.	Report the outcomes of the audit, drawing specific attention to the risks to safety and quality that have been identified				
4.	Advise on the actions that are required to improve quality and safety when decontamination processes are ineffective and the timescale in which they need to be implemented				
5.	Confirm that the required actions have been effectively undertaken to control infection and promote safety and quality				
6.	Take the necessary action to escalate concerns when there is a failure to act which compromises safety and quality.				

KNC	OWLEDGE UNDERSTANDING AND SKILLS	LD	SD	WD	NA
a.	Applied in relation to the chain of infection and the infection process, alert micro- organisms and conditions, body defence mechanisms				
b.	The significance of microbiological results; interpreting the diagnostic laboratory results; practices designed to break the chain of infection – for example, standard and transmission-based precautions including the placement of individuals and populations in care settings				
c.	Antimicrobial stewardship – prudent prescribing of antimicrobials and the surveillance of antimicrobial-resistant organisms				
d.	Levels of decontamination – lifecycle and cycle parameters, use of various tests, water quality tests (for example, TVC levels)				
e.	Methods and processes of decontamination (for example, physical and chemical disinfection, sterilisation)				
f.	Methods and processes of decontamination for: medical devices (for example, endoscopes, surgical instruments), equipment and environments				
g.	Risk assessment of processes, environments and systems used for decontamination				
h.	Evaluation of application of decontamination processes in clinical practice				
i.	National guidance on decontamination processes for equipment and reusable medical devices (for example, Health Technical Memorandum (HTM), Scottish HTM) and the evidence base on which they are built				
j.	Legislation, national guidance and outcomes/indicators on decontamination processes for the built environment and the evidence base on which they are built				
k.	Regional and local policies which differ from national guidance and the rationale for this.				





SCORING

	Competency Area	LD	SD	WD	NA
1.1	Improve quality and safety by developing and implementing robust, high-quality policies and guidelines that prevent and control infection				
1.2	Collate, analyse and communicate data relating to preventing and controlling infection for surveillance purposes				
1.3	Manage incidents and outbreaks				
1.4	Improve quality and safety through the application of improvement methodologies				
1.5	Advise on the design, construction and modification of facilities to prevent and control infection in the built environment				
1.6	Evaluate, monitor and review the effectiveness of decontamination processes for equipment and environment				
TOTALS					