AMRIC Webinar on the Competency Framework for infection prevention and control practitioners

September 2022



H Today's Webinar will cover:

- Overview
- Development of the Core Competency Framework for Infection Prevention and Control practitioners in Ireland
- Areas and domains
- How to complete, practical application
- Next steps to support its implementation in your area of work
- Questions





H The competency Framework: Overview

- Provides a competency framework to healthcare professionals to review, assess and document their knowledge, skills and competence to work as IPC practitioners.
- Many competencies are gained through continuing professional development while working as an IPC practitioner.
- Aims to support managers in growing and developing a skilled workforce as a basis for multidisciplinary teams within healthcare organisations.
- The competencies reflect the broad range of competencies that a proficient IPC practitioner is expected to gain.
- They may not reflect all the higher-level competencies required of an IPC practitioner who is managing the IPC service.
- Not all the core competencies listed will be relevant to all IPC practitioner roles in all settings where healthcare is delivered.





HE The competency Framework:

- Provide standardisation of core competency for IPC practitioner (Irish context)
- Support curriculum design for post graduate training courses for IPC in Ireland
- Support healthcare organisations in growing and developing skilled & educated IPC workforce
- Support self assessment of competence by IPC practitioner
- Assist and complement staff appraisal & professional development planning (PDP)

Target audience:

 Healthcare professionals currently engaged in or considering a specialist career in IPC & those working in IPC education, training evaluation, management and clinical service delivery





H Core competency framework for Infection Prevention and Control (IPC) practitioners

- New IPC competency framework document for Ireland was developed
- Extensive consultation with key stakeholders
- Adapted from the World Health Organisation (WHO) Core Competencies for IPC Professionals (2020).
- Adaptation has taken account of other international guidance and the experience and expertise of those who contributed to the development of the document.





H Core competency framework for Infection Prevention and Control (IPC) practitioners

- Project agreed by AMRIC team
- review process by AMRIC core team
- competency document adapted for Ireland
- extensive stakeholder engagements and opportunity for feedback
- review of feedback and changes applied
- presented at AMRIC implementation for agreement.
- agreed and endorsed by AMRIC oversight.



HSE Antimicrobial Resistance Infection Control (AMRIC) Competency Framework for Infection Prevention and Control Practitioners in Ireland



H Core competency framework launch

- Online launch of the core competency framework for IPC practitioners on 16th May 2022
- A formal launch and study day for ADoNs and Lead IPCNs was held on 24th of May 2022 in the Aishling Hotel, Dublin
- Webinars held in June and further webinars in September to support implementation for all IPC practitioners at clinical level





H Core competency-where can I find it?

Online:

https://www.hse.ie/eng/about/who/healthwellbeing/our-priorityprogrammes/hcai/resources/general/competency-framework-for-infectionprevention-control-practitioners.pdf

Hard copies have been distributed to IPC Teams.





H Knowledge, skills and ability of IPC Practitioners

Focus the practitioner's attention on what they know (knowledge)

-this is an essential foundation, however.

they need to be able to use what they know and their skills and ability in order to deliver on their role as IPC practitioners.

Assessment of Competencies

Assessment of competence is through self assessment, in conjunction with line manager and professional development planning

Self-assessment and plan of action tools have been developed to support selfassessment and competence levels

Leading to personal development planning (PDP) and supporting performance achievement





H Knowledge, skills and ability of IPC Practitioners

Supporting assessment of competence:

Working towards:

Has acquired some experience of performing the skill, task or responsibility but still requires support or supervision.

Competent:

Able to perform the skill, task or responsibility as an autonomous practitioner.





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H Areas and Domains 6 Areas and 13 Domains

- 1. Leadership in IPC programme management
- 2. Microbiology and surveillance
- **3. Infection Prevention and Control in clinical practice**
- 4. Education
- 5. Quality, patient safety
- 6. IPC related to occupational health





H Areas and Domains

The 6 areas of IPC core competencies and 13 domains outlined in this document are:

- 1. Leadership in Infection Prevention and Control programme management
- IPC programme management and leadership
- Built environment in healthcare settings
- 2. Microbiology and Surveillance
- Basic microbiology
- Antimicrobial resistance prevention
- Healthcare associated infection surveillance
- 3. IPC in Clinical Practice
- Standard precautions
- Transmission-based precautions
- Decontamination of reusable invasive medical devices
- Prevention of healthcare associated infection
- Incident and outbreak management





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- 4. Education
- IPC education and training
- 5. Quality, patient safety
- Quality and patient safety
- 6. <u>Infection prevention and control related to occupational health</u>
 Infection prevention and control practices related to occupational health



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HE Assessment of core competencies

Self-assessment:

in conjunction with line managers professional development planning local IPC team mentorship programmes

Self-assessment and plan of action tools to support self-assessment and competence for the areas and domains of core competencies for IPC practitioners





H Application of Practical experience to complement competencies

Practical IPC experience

Seek to gain broad experience of IPC in different settings: Specialist settings :

- operating theatres
- intensive care
- neonatal intensive care
- renal
- oncology and other specialist areas
- and general clinical areas

Some experience of both acute hospital and community settings. Practical experience in managing outbreaks and HCAI and AMR prevention strategies are *essential*.

Experience working with clinical microbiology laboratory services, estates and facilities management, occupational health, public health, and senior management are *valuable*.





H Practical experience

Professional expertise grows in a continuum

<u>**Note:**</u> the speed of acquisition and completeness of knowledge and competencies depends on many different variables:

- The opportunities for experience
- Professional development in different settings

This means that the time required to gain a post-graduate qualification in IPC and for a practitioner to feel proficient and capable of practicing at an independent level will vary.

Consideration must be given to the pace at which individual practitioners develop skills and are ready to take on additional roles and responsibilities.

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Knowledge (do I know about?)

Skills and ability (am I able to?)

The intention is to focus the practitioner's attention on the fact what they know (knowledge) is an essential foundation

but that being able to use what they know (skills and ability) is critical to delivering on their role.





Knowledge (do I know about?)

The section on *knowledge* sets out topics that the IPC practitioner should have knowledge of under these sub-headings:

The practitioner should ask themselves:

do they know enough about each topic to support themselves in their practice

and do they know how to access additional knowledge when they require it.





Skills and ability (am I able to?)

The section on <u>skills and ability</u> relates to the skill and ability of the IPC practitioner to apply the knowledge that they have or know how to access.

Again the sub-headings correspond to the sub-headings in the knowledge section

The practitioner should ask themselves do they have the skills and ability to apply their knowledge to fulfil their role in delivering the relevant area of IPC service

Note:

The format of the section on knowledge and skills and ability can appear somewhat repetitive

The intention is to focus the practitioner's attention on the fact what they know (knowledge) is an essential foundation but that being able to use what they know (skills and ability) is critical to delivering on their role.





Here Wicrobiology and surveillance

- Understand basic concepts of epidemiology and surveillance
- Contribute to develop or to improve/sustain HCAI surveillance protocols and systems at local level.
- Support implementation of HCAI surveillance, including AMR, considering the local context and other IPC processes.
- Work with a team to use surveillance data to identify IPC interventions to reduce the risk of HCAIs among patients and with the healthcare organisation.
- Conduct or support training activities.



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2. IPC in clinical practice

- Domain: Standard Precautions
- Domain: Transmission-based precautions
- Domain: Decontamination of reusable invasive medical devices (RIMD)
- Domain: Prevention of healthcare associated infections
- Domain: Incident and outbreak management



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IPC in clinical practice

Domain: Transmission-based precautions

Competence review:

- Implementation of transmission-based precautions according to risk assessment and in relation to the suspected or confirmed microorganism(s), working with nursing teams, medical teams, specialist areas and other multi-disciplinary healthcare workers and senior management.
- Adapt policies and/or SOPs, training resources and monitoring/audit tools on transmission-based precautions, organise and provide training and education for healthcare workers on transmission-based precautions in the context of broader IPC training, undertake audit, monitoring and feedback activities to assess compliance with transmission-based precautions.

Knowledge (do I know about?)

Policy and guidance

- Definitions for use of transmission-based precautions.
- National guidelines regarding:
 - Isolation, including airborne, droplet or contact precautions, or a combination of the three precautions and required duration, based on the confirmed or suspected microorganism or conditions (for example, Ebola, SARS-CoV-2, MERS, multidrug-resistant *Candida species*, measles, tuberculosis, carbapenemase producing- organisms, and other multidrug resistant organisms), including personal protective equipment, patient preparation, and route of patient transit (ambulance, corridors, etc.)
 - Safe transport of patients/service users on isolation precautions-PPE requirements.
 - Criteria for placing and removing patients on transmission-based precautions (suspected, confirmed, or high-risk cases).
 - Criteria for cohorting patients'/service users with infectious diseases (same organism or disease).
 - Engineering and environmental controls supporting the application of transmission-based precautions.
- The equipment, supplies and products needed for the implementation of transmission-based precautions and their technical specifications as appropriate.

Leadership and implementation

- Working with a team to develop/implement strategies for implementation and compliance with transmission based precautions for healthcare workers.
- The roles and responsibilities of the organisation and health care workers to minimise the risk of exposure to, and transmission of infectious diseases in health care settings through implementation of transmission based precautions.

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3. Quality and Patient Safety

Domain: Quality and patient safety

- Contribute to development, implementation and evaluation of IPC related quality improvement initiatives, patient safety programmes, national healthcare quality standards (monitoring, inspection, reporting) within healthcare organisations.
- Use multimodal strategies in the context of quality improvement and patient safety programmes to create structured change and translate IPC standards into practice.
- Contribute to linkages between IPC and national strategic direction on quality

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Self-assessment and plan of action tools have been developed to support selfassessment and competence development process.

These tools are interactive, allowing user to download the file and input information as required, save, review and update throughout the self-assessment and competence development process.

IPC compet	tency self- assessment to	Date of assessment	
Area	Domain	Self-assessmen	t of competence kills and ability) Competent
	Basic microbiology		
Microbiology and surveillance	Antimicrobial resistance prevention		
	Healthcare associated infection surveillance		



IPC competency self- assessment tool

Name		Date of assessment		
Area	Domain	Self-assessment of competence (Knowledge, skills and ability)		
		Working towards	Competent	
Infection prevention and control in clinical practice	Standard precautions			
	Transmission-based precautions			
	Decontamination of reusable invasive medical devices			
	Prevention of healthcare associated infections			
	Incident and outbreak management			



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in Ireland



	Basic microbiology	Learning more about the chain of infection; routes of transmission; incubation times and transmission; bed placement priority; lab systems; and screening procedures. Developing my	Knowledge of basic microbiology-Competent 08.08.22 Aware of modes of transmission -08.08.22. Referrred to guidance for incubation periods and
Microbiology and surveillance	Antimicrobial resistance prevention	MDROs- different types, know whats relevant to clinical setting. Secrening for MDROs, type of screening, recommendations for clinical areas, high risk areas. Know how to interpret results	Aware of Key MDROs Know resistance methods-completed by xxx date. Competent to understand and interpret laboratory results etc
	Healthcare associated infection surveillance	Learning more about what AMR and MDROs are, and understand better the work of surveillance scientists. Understanding better the work of HPSC and the skills behind appropriate signposting. To keep track of	



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IPC competency self- assessment tool

Name		Date of assessment	
loe Bloggs		24.05.22	
			t of competence
Area	Domain		kills and ability)
		Working towards	Competent
Leadership and IPC programme management	IPC programme management and leadership		
	The built environment in healthcare settings		
Microbiology and surveillance	Basic microbiology	Learning more about the	Chowledge of basic incrobiology-Competent D8.08.22 Aware of modes of transmission -08.08.22. Referrred to guidance for ncubation periods and
	Antimicrobial resistance prevention	MDROs- different types, know whats relevant to clinical setting. Secrening for MDROs, type of screening, recommendations for clinical areas, high risk areas. Know how to interpret results	Aware of Key MDROs Know resistance methods-completed by xxx date. Competent to understand and interpret laboratory results etr.
	Healthcare associated infection surveillance	Learning more about what AMR and MDROs are, and understand better the work of surveillance scientists. Understanding better the work of HPSC and the skills behind appropriate simmerstan. To know teack.	

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Infection Control (AMRIC) **Competency Framework** for Infection Prevention and Control Practitioners in Ireland

Areas and Domains of Competence Self-Assessment and Plan of Action tools.





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Competency Framework for Infection Prevention and Control Practitioners in Ireland



Microbiology and surveillance	Basic microbiology	24.05.22 Need to gain knowledge of General classification of microorganisms, Modes of transmission. Incubation periods and period of communicability.	Knowledge of basic microbiology-Competent 08.08.22 Aware of modes of transmission -08.08.22. Referrred to guidance for incubation periods and
	Antimicrobial resistance prevention	24.05.22 I need to increase knowledge of Antimicrobials, AMS programmes linkages to IPCneed to shadow AMPs AMR mechanisms & common microorganisms causing HCAIs	Completed AMP rounds 17.06.22. Completed HSEland modules on AMS/ AMR Attended AMS meeting on 16.05.22 Work with the IPC team to
	Healthcare associated infection surveillance	Understand types of surveillance Learn about surveillance of common HCAIs, reporting, how this works? Learn how to interpret data, spend time with surveillance scientists to see how reports	29.05.22: Went to lab to see how surveillance reported generated . 31.05.22 Shadowed ADON IPC to see how BIU HCAI data completed and submitted 10.06.22

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Area	Domain	Self-assessment of competence (Knowledge, skills and ability)		
		Working towards	Competent	
	Standard precautions	18.05.22: Awareness of standard precautions & how to apply in everyday practice. Applies Standard precautions as the minimum practice standards for all patients in all settings	O6.08.22 Competent, knowledge of standard precautions and their application in everyday practices. How to apply standard precautions in differennt situations and how to advise	
Infection prevention and control in clinical practice	Transmission-based precautions	20.05.22 Understands that the route of transmission of the organism determines which type of precaution category is needed (i.e., Contact, Droplet and/or Airborne).	O2.O7.22: Basic knowledge of droplet, airborne, contact precautions. Understand COVID-19 precautions and know how to adapt to changing situations.	
	Decontamination of reusable invasive medical devices	Meeting 22.06.22: Identified needs to understand the cleaning, reprocessing and storage requirements for health care equipment. Understands that non-critical health care	17.11.22: Review and competent as understands the differences between critical, semi-critical and non-critical health care equipment. Understands that semi-critical health care	
	Prevention of healthcare associated infections	Definitions and classification of HCAI for surgical site infections (SSI), HCAI bloodstream infections (BSI) from invasive medical devices: peripheral venous catheter (PVC), central venous catheter (CVC)	22.11.23: Competent and understands Monitoring and evaluation methods for the surveillance of HCAI, audit of care bundles and their relevance. Understand HSE National Key Performance Indicators	

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	Incident and outbreak management	Definitions and basic principles: levels of disease occurrence, definition of incidents, outbreak, cluster; types of outbreaks, including health care-associated outbreaks and their possible sources.	Competent steps for incident and outbreak investigation and management 19.10.22 Completed line lists and charts. 12.10.22 Attended and gave update at outbreak meeting
Quality and patient safety	Quality and patient safety	Understanding and knowledge of Health Information and Quality Authority (HIQA) standards relating to prevention and control of healthcare associated infections Require awareness of	10.11.22. Completion of , root cause analysis (RCA), incident review tools as relevant tp HCAIs. Supported the development of quality 20.11.22: mprovement approaches for IPC

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Area	Domain	Self-assessment of competence (Knowledge, skills and ability)		
7002		Working towards	Competent	
Education	IPC training and education			
Quality and patient safety	Quality and patient safety	Understanding and knowledge of Health Information and Quality Authority (HIQA) standards relating to prevention and control of healthcare associated infections Require awareness of	10.11.22. Completion of , root cause analysis (RCA), incident review tools as relevant to HCAIs. 20.11.22: Supported the development of quality improvement approaches for IPC practices leading	
IPC related to occupational health	IPC practices related to occupational health			

Additional comments/actions

22.07.22; Attended HICCM, shadowed ADON at meeting to see what IPC data was presented.
17.08.22; Attended an outbreak meeting.
19.09.22: Shadowed ADON with preparation of writing up outbreak report, collecting data.
17.10.22 Would like additional time to see specimens being processed in Microbiology and Serology labs, requested time via ADON and LAB to support same.
21.10.22: Attend IPC education sessions to see how transmission based precautions presentation is delivered and explained to different levels of clinical staff. See how presentations are developed, updated and be familiar with content.

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Self-assessment and plan of action (POA) tools

Self-assessment and plan of action (POA) tools have been developed to support self-assessment and competence development process.

Again: as per the other sections these tools are interactive

allows the user to download the file input information as required,

save

review

update throughout the self-assessment and competence development process.







IPC competency development plan of action tool

Area	Domain	Actions	Supports required	Date to be achieved
Leadership and IPC	IPC programme management and leadership			
programme management	The built environment in healthcare settings			
	Basic Microbiology	Get set up with surveillance system. Know how to review lab reports, local procesess. How to phone results and what advice to give.	Go to Lab and see how specimens are processed in different areas, microbiology (stool bench, urine benches, molecular, PCR, cultures etc). Go to secology lab	12.12.22
Microbiology and surveillance	Antimicrobial resistance prevention	Meeting 23.06.22: Need support with understanding AMR, basic principles. Explain basic level AMR, relevant to healthcare setting and how to manage patients with MDROs.	23.06.22: Signposted and given relevant policies. Shadowed AMP rounds.	10.09.22







- Have you got the core competency Framework?
- Have you started to use it?
- Electronic Format-how do you find it?
- Any issues using it?
- Any questions?







- Practical Issues
- Questions
- Plan additional webinars as required
- Further queries:

Any queries for AMRIC nursing team

Contact Josephine, Barbara or Eimear directly on email or phone at: <u>hcai.amrteam@hse.ie</u>



