Syllabus

- Who are IPs?
- First things to do
- Resources
  - KHA, APIC, KyIP, CBIC, CDC/NHSN, AHRQ, KDPH
- General overview
  - Infectious disease process
  - Abbreviations
  - Employee health
  - Cleaning, disinfection, sterilization
- IP interviews
- Assignments

Who Are Infection Preventionists?

- Professionals who make sure healthcare workers and patients are doing ALL THE THINGS they should to prevent infections

- Nurses, epidemiologists, public health professionals, microbiologists, doctors, etc

Who Are Infection Preventionists?

- Look for patterns

- Observe practices

- Educate and advise

- Use data

- Policies and procedures

- Collaborate

New IP…Now What?

- Review your job description and become familiar with IP duties
  - Authority statement, budget involvement
- Review minutes from Infection Prevention Committee meetings (and others, as applicable)
- Who accredits your facility?

Now What?

- [Identification of Infectious Agents Scavenger Hunt](#)

- [IP Academic Pathway - APIC](#)

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_____ Locate your Infection Control Authority Statement
_____ Who has authority to initiate and discontinue transmission-based precautions?
_____ Introduce yourself to your hospital Medical Epidemiologist
_____ Locate your Infection Control (IC) Policies and Procedures housed out on the units?
_____ How are staff educated on:
     _____ Infection Control(IC)
     _____ Multi-Drug Resistant Organisms (MDROs)
_____ Clostridium difficile (C. diff)
_____ Where are transmission-based precaution signage located for patient units to access?
_____ How does unit staff access transmission-based precaution carts/supplies?
_____ Locate and become familiar with the CDCs Appendix A: Type and Duration of Precautions _____ Recommended for Selected Infections and Conditions
_____ Identify what epidemiologically significant organisms /MDROs your facility initiates transmission-based precautions for
_____ What is your facilities process to identify patients with a known prior history of colonization/infection with an epidemiologically significant organism/MDRO?
_____ What is your facilities alert notification policy for patients with newly identified epidemiologically significant organisms/MDROs?
_____ Notification of Infection Control
_____ Notification to unit/staff caring for patient
_____ Notification of patient's physician
_____ Introduce yourself to the environmental services (EVS) director/manager.
_____ How are EVS staff educated on:
_____ Transmission-based precautions
_____ Proper room cleaning
_____ Does your facility monitor room cleaning?
_____ If your facility monitors EVS room cleaning, what is the process?
_____ What are considered high touch areas in a patient room?
_____ What is a terminal room cleaning?
_____ What is the process for changing patient privacy curtains in patient rooms?
_____ Is the process for changing patient privacy curtains different for patient rooms when the patient has been on transmission-based precautions? If so, what is that process?
_____ What targeted healthcare associated infection (HAI) surveillance does your facility perform?
_____ Locate surveillance data for your facilities targeted HAIs
_____ What is your hand hygiene (HH) policy?
_____ Where are HH products located throughout your facility?
_____ Who monitors your facility HH compliance?
_____ Where do you report your facilities HH compliance to?
_____ Are patients part of your HH program?
_____ Locate your facilities TB plan
_____ Where is your facilities emergency response plan housed?

Now What?

- APIC-Compentency-Model-To-Do-List_1-27-21.pdf

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Go to APIC Website www.apic.org

Professional Practice
Professional Development

Infection Preventionist (IP) Competency Model

https://apic.org/professional-practice/infection-preventionist-ip-competency-model/

- ☐ Read the APIC **2019 Competency Model paper** AJIC 2019:47(6);602-614
- ☐ Check out the *interactive* **APIC Competency Model**
- ☐ View a **presentation** on the Competency Model
- ☐ Find the **Sample job description** and compare with your job description(s)
- ☐ **Update your job description**(s) using the Sample job description and the Professional and Practice Standards
- ☐ For Novice/Becoming Proficient IPs – Take the **Self-Assessment** using the on-line Tool. Use it to guide your PD and competency improvement plan
- ☐ Consider developing an **IP Career Ladder** for your program. Use the grid in the *AJIC* Competency Model paper as a guide to develop competency statements for different career levels.

Developmental Path of the Infection Preventionist

https://apic.org/professional-practice/roadmap/

- ☐ Read the **APIC Professional and Practice Standards** paper AJIC 2016: 44(7);745-9
- ☐ Locate and review the **Novice Roadmap**
- ☐ Design or update your new novice IP Orientation checklist/program referencing the Novice Roadmap
- ☐ Locate the **Proficient Practitioner Bridge**
- ☐ For the Proficient IP, use the **Proficient Practitioner Bridge** to develop your annual self-evaluation, professional development plan and goals
- ☐ For Expert IPs, explore the **APIC Fellows** program.

Let's Elevate the Profession Together!!!

APIC Competency Model

My To Do List

Now What?

- Get to know people!
  - Round on all units, introduce yourself, ask questions, ask about concerns
  - Attend staff meetings
  - Shadow staff on units/in areas you aren't familiar with
  - Build a relationship with engineering, EVS, and dietary

Infection Prevention & Control (IPC) Plan

- Facility risk assessment
- Describe the IPC program
- Goals and objectives
- Risk reduction strategies
- Surveillance
- TB & bloodborne

- pathogen exposure control plans
- Performance improvement
- Emergency management/planning
- Annual evaluation process

Content_of_an_Infection_Prevention_and_Control_Plan.pdf (apic.org)

(Annual) Risk Assessment

- Use a template

- Tailor to your facility

- Include IP/appropriate personnel

- Prioritize risks

Episode 42: Breaking Down the Annual Risk Assessment and IP Program Plan – 5-Second Rule

(Annual) Risk Assessment

Infection Prevention Risk Assessment Month: January Year: 2024

Event	Probability of Occurrence				Severity Rating				Current Capacity and Performance				Return to Hosp/Worsened Condition				Risk Score
	1 Rarely	2 Sometimes	3 Frequently	4 Almost always/ ongoing	1 Minimal Harm	2 Some Harm	3 Major Harm	4 Cata-strophic Harm	1 Policy, Resources	2 Policy, some Resources	3 Policy Gaps, some Resources	4 Major Policy Gaps, lack Resources	1 Rarely	2 Sometimes	3 Frequently	4 Almost Always/ Ongoing	
Staff non-compliant with hand hygiene		2					3		1					2			8
Staff non-compliant with infection precautions		2				2			1				1				6
Improper cleaning and disinfection of shared medical equipment	1					2				2			1				6
Residents with new C. difficile infections	1					2			1				1				5
Residents with recurrent wound infections		2			1					2				2			7
Residents that develop pressure ulcers in the facility	1					2				2				2			7
Needle stick injuries	1					2			1				1				5
Ineffective cleaning and disinfection of resident care areas	1					2			1				1				5
Ineffective surveillance practices		2			1					2			1				6

Infection Prevention Resources

Kentucky Hospital Association

- https://www.kyha.com/
- http://www.khaquality.com/
- Webinars, conferences, CEs/IPUs, scholarships, resources, quality/process improvement, HRIP, advocacy…

APIC: Association for Professionals in Infection Control and Epidemiology

- www.apic.org
- Kentucky Chapters
  - 023 Bluegrass: East of Frankfort
    - Vickie Risner; vrisner@arh.org
  - 026 Greater Cincinnati-Dayton Area: Cincy, Dayton, N. KY
    - Pamela Carnes; pamela_carnes@TriHealth.com
  - 042: Kentuckiana: Louisville, KY area and S. Indiana
    - Julia Frith; julia.frith@nortonhealthcare.org
  - 083: West Kentucky
    - Amber Herman; hermaj@mchealth.net

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APIC

- APIC Connect/IP Talk
  - New IP discussion board
- Roadmap for the Novice Infection Preventionist
  - Competency Self-Assessment for Novice IPs
- Scheduled and on-demand webinars
- Resource materials
  - APIC Text
- CIC study materials
- Annual National Conference
  - San Antonio, TX: June 3-5, 2024
 - [APIC 2024 Annual Conference & Exposition](#)

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Infection preventionist (IP) competency model
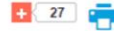
To meet the demands of the rapidly expanding field of infection prevention, and equip professionals for the challenges of the future, APIC created the first model for infection preventionist (IP) competency in 2012. Learn more about the May 2012 white paper in the American Journal of Infection Control (AJIC).

The updated APIC Competency Model for the IP (enclosed below) also reflects the dynamic nature of the IPC field. Patient safety remains the core of IPC practice. New to the updated model is a focus on the continuum of care. The updated model has four career stages (Novice, Becoming Proficient, Proficient, and Expert) and six future-oriented competency domains (each with subdomains) to guide IPs in progressing through the career stages and pursuing leadership roles.

- New! Access a members-only presentation "The Future is Here: Applying APIC's Updated Competency Model to Guide IPC Practice," by Heather Bernard, DNP, RN, CIC, FAPIC (2020-2021 Professional Development Committee – PDC Chair) and Angel Mueller, MPH, CIC, FAPIC (2020-2021 PDC Vice Chair). This 27-minute presentation focuses on understanding, using, and applying the interactive APIC Competency Model, including in real-life situations. Use it for your own professional development, or with your teams or members of your chapter.

- Review a "to do" check list to guide your professional development/practice

- Access the June 2019 AJIC white paper introducing the updated model. It includes guidance on application and examples of competency statements across career stages.

- Access the Summer 2019 Prevention Strategist article featuring an interview with members of the Competency Model Revision Task Force.

- Novice or Becoming Proficient IP self-assessment tool for the CBIC core competencies and APIC Competency Model.

- Sample job description for an IP developed by the Professional Development Committee.

- Explore the updated, interactive competency model below. To see a definition for each element in the model, including for each future-oriented competency domain and subdomain, click on the screen.
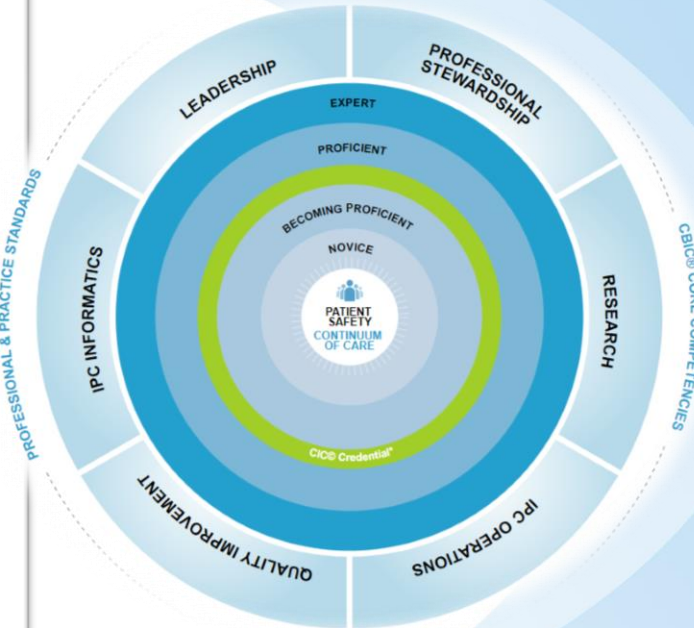
KyIP

- [KyIP- Kentucky Infection Prevention Training Center (kentuckyiptraining.com)](kentuckyiptraining.com)
- Webinars, conferences, open office hours, modules, CEs

CIC: Certification in Infection Control

- [Certification-The Defining Difference – YouTube](#)

- www.cbic.org

- 3 types of certification
  - CIC
  - a-IPC
  - LTC-CIP
  - AD-CIP (still to come!)

CDC: Centers for Disease Control and Prevention

- [Training and Education Resources | Infection Control | CDC](#)

- [Guideline for Isolation Precautions: Preventing Transmission of Infectious Agents in Healthcare Settings (2007) (cdc.gov)](#)

  – Become familiar with your facility's policies and procedures and make sure they align with best practice recommendations

  – TB control plan

[Learn About Infection Control | Project Firstline | CDC](#)

NHSN: National Healthcare Safety Network

- Healthcare-associated infection tracking system
  - Identify IP problems by facility, state, or specific QI project
  - Benchmark progress of IP efforts
  - Comply with state/federal reporting mandates
  - Drive national progress toward elimination of HAIs
- [NHSN | CDC](#)
  - Enrolling new facility, training, CMS requirements, etc
  - [Training | NHSN | CDC](#)

NHSN

- CAUTI, CLABSI, CDIFF, MRSA, SSI: COLO, HYST
- [NHSN Patient Safety Component Manual (cdc.gov)](#)
- [Patient Safety Component (PSC) Training | NHSN | CDC](#)
- [PSC Roadmap | NHSN Roadmap | NHSN | CDC](#)

NHSN and Surveillance Plan

- What data does your facility already gather?
  - Where/how do you find that data?
  - What data do you still need?
- [Healthcare Personnel Safety Component (HPS) | NHSN | CDC](#)

NHSN Antimicrobial Use and Resistance (AUR)

- [AUR | PSC | NHSN | CDC](#)

AHRQ: Agency for Healthcare Research and Quality

- [AHRQ's Healthcare-Associated Infections Program | Agency for Healthcare Research and Quality](#)
- Healthcare-Associated Infections Program
  - Antibiotic use
  - CAUTI and CLABSI Toolkits
  - CUSP (Comprehensive Unit-based Safety Program) Toolkit
  - C. diff, MRSA, CAP, CRE, SSIs, and more!

KY Reportable Diseases

- [902 KAR 2:020](#)

- [HAI Prevention Program - CHFS](#)

- [EPID 200](#)

- [EPID 250](#)

Kentucky Public Health
Prevent. Promote. Protect.

Section 6. Notifiable Infectious Conditions Requiring Urgent Notification. (1) Notification of the following diseases shall be considered urgent and shall be made within twenty-four (24) hours:

(a) Anthrax;
(b) Botulism;
(c) Brucellosis (multiple cases, temporally or spatially clustered);
(d) Diphtheria;
(e) Hepatitis A, acute;
(f) Measles;
(g) Meningococcal infections;
(h) Middle East Respiratory Syndrome-associated Coronavirus (MERS-CoV) disease;
(i) Multi-system Inflammatory Syndrome in Children (MIS-C);
(j) Novel influenza A virus infections;
(k) Plague;
(l) Poliomyelitis;
(m) Rabies, animal;
(n) Rabies, human;
(o) Rubella;
(p) Severe Acute Respiratory Syndrome-associated Coronavirus (SARS-CoV) disease;
(q) Severe Acute Respiratory Syndrome Coronavirus 2 (SARS-CoV-2) (the virus that caus-es COVID-19);
(r) Smallpox;
(s) Tularemia;
(t) Viral hemorrhagic fevers due to:
1. Crimean-Congo Hemorrhagic Fever virus;
2. Ebola virus;
3. Lassa virus;
4. Lujo virus;
5. Marburg virus; or
6. New world arenaviruses including:
a. Guanarito virus;
b. Junin virus;
c. Machupo virus; and
d. Sabia virus; and
(u) Yellow fever.

Start to learn…

IP BASICS

Infectious Disease Process

- Know the terms and information below that are related to the infectious disease process
  - Colonization, infection, contamination, geographic distribution, reservoir, incubation period, periods of communicability, modes of transmission, signs and symptoms, susceptibility

What is...

- **HAI:** Healthcare-associated infection
- **CAUTI:** Catheter associated urinary tract infection
  - UTI where an indwelling catheter was in place for >2 consecutive days on the date of event (DOE) and the catheter was in place on the DOE or the day before
    - **F/C:** Foley catheter
- **CLABSI:** Central line associated bloodstream infection
  - Central line in place for >2 consecutive calendar days (on/after CL day 3)
  - Lab confirmed bloodstream infection where an eligible BSI organism is identified
    - **LCBI:** Laboratory Confirmed Bloodstream Infection

What is...

- **MDRO:** multidrug resistant organism
    - VRE: vancomycin-resistant *Enterococcus*
    - CRE: carbapenem-resistant *Enterobacteriaceae*
    - CRAB: carbapenem-resistant *Acinetobacter baumannii*
    - ESBL: extended spectrum beta-lactamase
    - MRSA: methicillin resistant *Staphylococcus aureus*
- **C. diff:** *Clostridiodes difficile*
- **SSI:** surgical site infection
- **VAE:** ventilator-associated event
- **VAP:** ventilator-associated pneumonia
- **PNEU:** non-ventilator-associated pneumonia

What is…

DOE: Date of event

POA: Present on admission

IWP: Infection window period

RIT: Repeat infection timeframe

SIR: Standardized infection ratio

AFB: Acid fast bacilli

PCR: Polymerase chain reaction

NAAT: Nucleic Acid Amplification Tests

CDI: *C. diff* infection

IUSS: Immediate-use steam sterilization ("flashing")

Employee/Occupational Health

- [Recommended Vaccines for Healthcare Workers | CDC](#)
- [902 KAR 20:205 TB Testing for HCWs](#)
- [Education and Training | HCP | Infection Control Guidelines Library | CDC](#)
- COVID/respiratory illness isolation and quarantine guidelines and requirements
- Illnesses/infections that exclude employees from work
- [Safety Courses Catalog - OSHAcademy](#)
- **American Association of Occupational Health Nurses**
  - www.aaohn.org

Cleaning, Disinfection, Sterilization

- Get to know your Central Sterile and OR managers
  - Observe in the OR, take a tour of sterile processing
- **Spaulding Classification System**
  - Critical, semicritical, noncritical items
- **Cleaning:** removal of foreign material (visible soil and microbial contaminants)
- **Disinfection:** eliminates many/all pathogenic microorganisms except bacterial spores
- **Sterilization:** destroys all microorganisms

https://www.cdc.gov/infectioncontrol/guidelines/disinfection/cleaning.html

IP Interviews

- What did you do before IP?
- How long have you been an IP?
- What do you like about IP?
- What is your most valuable/used resource for IP?
- What do you wish someone had told you when you were a new IP?

Assignments

- Complete APIC Competency Self-Assessment
  - Will also email
- Check out your local APIC chapter
- Pre-work for session 3:
  - Make sure you have a working NHSN account
    - Enrollment Acute Care Hospitals/Facilities | NHSN | CDC

Resources

- [Content of an Infection Prevention and Control Plan.pdf (apic.org)](#)
- [Infection preventionist (IP) competency model – APIC](#)
- [KyIP- Kentucky Infection Prevention Training Center (kyiptraining.org)](#)
- KHA New IP Starter Kit document (*will email*)
- IP 101 Course Book *(will email)*