**Stage 1: Days 1 - 60**

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| Task/Skill | Track | Status  (Not attempted [NA], Needs Development/In progress [ND], Planned (1-2 yrs) [P] and Complete [C]) | Date | Evidence/Example |
| Become familiar with APIC:   * Join local APIC chapter * Browse APIC website * Complete your APIC member profile * Find a mentor | PD |  |  |  |
| Subscribe to APIC IP Talk & other lists as appropriate | PD |  |  |  |
| Introduce yourself to facility personnel with whom you will interact:   * Lab/microbiologist * Employee health * Infectious disease physicians | PD |  |  |  |
| Assess your IT [information technology] needs:   * What software programs do you have/need? * What training do you need for those programs? * What access/passwords do you need? * Learn your facility's electronic medical records system | PD |  |  |  |
| Learn infectious disease processes:   * Describe how to interpret diagnostic/laboratory reports * Know the following terms and information associated with each infectious disease process: * Define colonization, infection, and contamination * Geographic distribution * Reservoirs * Incubation periods * Periods of communicability * Modes of transmission * Signs and symptoms * Susceptibility | ID |  |  |  |
| Identify appropriate practices for specimen collection, transportation, handling and storage  (E.g., blood, wound, respiratory and urine specimens) | ID |  |  |  |
| Assess the surveillance plan for your facility:   * What data does your facility already gather? * Where do you get your data? * What data do you need? | SUR |  |  |  |
| Review your facility’s surveillance data for these HAIs:   * Central line-associated bloodstream infections (CLABSI) * Catheter-associated urinary tract infections (CAUTI) * Surgical site infections (SSIs) * Clostridium difficile * MRSA bacteremia * Ventilator-associated events (VAE) * Ventilator-associated pneumonia (pediatrics) | SUR |  |  |  |
| Determine your facility’s process for identifying individuals with communicable diseases requiring transmission based precautions | SUR |  |  |  |
| Identify epidemiologically significant infectious diseases that require immediate review and investigation (Check with state health department for complete list):   * Tuberculosis * *Neisseria meningitidis* * Influenza * Measles * Pertussis * Varicella * Mumps | SUR |  |  |  |
| Learn about multidrug-resistant organisms (MDRO) identification and infection prevention implications, for example:   * Methicillin-resistant Staphylococcus aureus (MRSA), Vancomycin-resistant Enterococcus (VRE), Multidrug-resistant Gram-negative rods (extended spectrum beta lactamase ESBL, carbapenem-resistant Enterobacteriaceae [CRE], Acinetobacter baumannii, etc.) |  |  |  |  |
| Begin to learn the steps to investigate a cluster/outbreak:   * Verify diagnosis of reported cases | SUR |  |  |  |
| External public reporting of HAIs:   * What Centers for Medicare & Medicaid Services (CMS) HAI reporting is required for your facility? * What are your state HAI reporting requirements? * What is your facility’s reporting process? * What are the reporting timelines/due dates? | SUR |  |  |  |
| Meet local health department contact:   * Call and introduce yourself and establish a relationship * Know the list of reportable diseases identified by your state health department and reporting requirements | SUR |  |  |  |
| Locate facility manuals/procedures, including:   * Infection prevention * Administrative * Nursing * Safety | IA |  |  |  |
| Identify and define each of the components comprising the chain of infection:   * Infectious agent * Reservoir * Portal of exit * Mode of transmission * Portal of entry * Susceptible host | IA |  |  |  |
| Hand hygiene:   * Read CDC guidelines and World Health Organization guidelines * Read your facility’s policy for hand hygiene * Know when hand hygiene must occur * Determine if monitoring of hand hygiene compliance is done at your facility. If so, how and by whom? * Read policies for surgical hand scrub * Determine your state fire code for use of alcohol hand gel * See National Fire Protection Association (NFPA) life safety codes | IA |  |  |  |
| Review the Standard Precautions/Transmission-Based Precautions policies and procedures for your facility:   * Know when standard, contact, droplet, or airborne infection isolation (AII) precautions are used * Know when respiratory hygiene and cough etiquette are needed * Identify who is responsible and/or has authority for initiating isolation of patients * Locate signage used to notify healthcare workers and visitors of precautions * Locate and become familiar with CDC’s list of organisms and isolation requirements | IA |  |  |  |
| Locate and become familiar with your facility’s TB control plan   * Determine what is done if a known or suspected case of tuberculosis (TB) is admitted to your facility | IA |  |  |  |
| Intravascular device & central line-associated bloodstream infection (CLABSI) prevention:   * Read the Society for Healthcare Epidemiology of America (SHEA) Compendium, APIC Elimination Guides, the CDC Healthcare Infection Control Practices Advisory Committee (HICPAC) guideline, Institute for Healthcare Improvement (IHI) bundles | IA |  |  |  |
| Pneumonia prevention:   * Read SHEA Compendium, APIC Elimination Guide, HICPAC guidelines, IHI bundles | IA |  |  |  |
| Catheter-associated urinary tract infection (CAUTI) prevention:   * Read SHEA Compendium, APIC Elimination Guide, HICPAC guideline, IHI bundles | IA |  |  |  |
| Surgical site infection (SSI) prevention:   * Read SHEA Compendium, APIC Elimination Guides, HICPAC guideline, Association of periOperative Registered Nurses (AORN) standards | IA |  |  |  |
| Clostridium difficile (C. difficile):   * Read SHEA Compendium, APIC Elimination Guide * Learn about: * Transmission * Risk factors * Complications * Role of environment * Treatment options | IA |  |  |  |
| Learn about multidrug-resistant organisms (MDROs) and their implications:   * Identification * Transmission * Risks * Complications   Examples include:   * Methicillin-resistant Staphylococcus aureus (MRSA) * Vancomycin-resistant Enterococcus (VRE) * Multidrug-resistant Gram-negative rods (extended spectrum beta lactamase ESBL, carbapenem-resistant Enterobacteriaceae [CRE], Acinetobacter baumannii, etc.) | IA |  |  |  |
| Learn about safe injection practices:   * Review the online “One and Only Campaign” materials | IA |  |  |  |
| Find and review your facility’s emergency response plan | IA |  |  |  |
| Identify your facility’s therapeutic and diagnostic procedures (e.g., dialysis, angiography, bronchoscopy, endoscopy) | IA |  |  |  |
| Nutrition services:   * Review policies for: * Safe preparation (clean, separate, cook, chill) * Safe handling and food storage * Safe temperature zone * Sanitation of trays, utensils, equipment, and surfaces * Hand hygiene and glove use during food preparation | IA |  |  |  |
| Determine what infection prevention-specific products are in use and where (e.g., alcohol-based hand sanitizer, PPE, safety devices) | IA |  |  |  |
| Identify state licensing, regulatory, and facility requirements for healthcare worker immunizations:   * MMR * Varicella * Hepatitis B * Influenza * Tdap | E/OH |  |  |  |
| Know facility plan for healthcare worker communicable disease exposure:   * Incubation periods * Mode of transmission * Periods of communicability * Signs and symptoms | E/OH |  |  |  |
| Identify current facility process for healthcare worker illness or sick leave | E/OH |  |  |  |
| Review Bloodborne Pathogen (BBP) Exposure Control Plan and the OSHA Rule:   * Learn about Hepatitis B, C, and HIV transmission * What is considered potentially infectious material? * Learn how Standard Precautions (Universal) are used to prevent contact with blood or other potentially infectious material * What training is available for staff? (Required by OSHA) | E/OH |  |  |  |
| Determine type of testing performed to monitor staff for exposure to TB and development of TB disease   * Annual PPD, blood assay testing | E/OH |  |  |  |
| Describe what annual employee influenza vaccination campaign is in place   * Determine CMS and state healthcare personnel influenza vaccination reporting requirements: * Where will you get this data? * How do you report this in NHSN | E/OH |  |  |  |
| Learn your role and the scope of your Infection Prevention Program:   * Locate and review your job description * Locate and review your duties * Locate and review the minutes from your facility’s Infection Prevention Committee meetings * Review infection prevention authority statement * Describe your role in developing the infection prevention program’s budget | MCL |  |  |  |
| Determine if your facility has an infection prevention plan or program:   * If one exists, learn the elements and scope of your facility’s plan * If one does not, then create one, based on the risk assessment in Stage 2 | MCL |  |  |  |
| Learn what committees on which you serve (besides the Infection Prevention Committee), to what other groups you are responsible for reporting, and frequency of attendance  Committees may include:   * Product Review * Sharps Safety * Safety * Patient Safety * Antimicrobial Stewardship * Quality/Performance Improvement * Emergency Response * Regulatory * Employee Health * Construction and/or Facility Maintenance * Nursing Councils   Groups may include:   * Department * Medical Staff * Board of Trustees | MCL |  |  |  |
| Determine your role in new hire orientation:   * How is orientation delivered? (live, computer-based, video, etc.) * If live, what is the orientation schedule? * How are employees trained for bloodborne pathogens prior texposure to blood and body fluids in their work setting? (requirement of OSHA) * How are employees trained on tuberculosis? * Do you teach new residents? Do you teach new physicians? | E/R |  |  |  |
| Familiarize yourself with housekeeping (i.e., environmental Services [EVS]) policies. For example:   * What are your facility’s policies for environmental cleaning? | EC |  |  |  |
| Familiarize yourself with housekeeping (i.e., environmental Services [EVS]) personnel and practices. For example:   * How are staff trained? * What personal protective equipment is used during cleaning? * How would a blood spill be managed? | EC |  |  |  |
| Familiarize yourself with the products your housekeeping (i.e., environmental Services [EVS]) personnel are using  Learn about characteristics of different classes of disinfectants (e.g., quaternary ammonium compounds, phenolics, bleach, hydrogen peroxide) | EC |  |  |  |
| Facilities maintenance, renovation, and construction:   * What are your facility’s infection prevention related policies on maintenance, renovation, and construction? | EC |  |  |  |
| Learn basics of, and monitoring requirements for, your facility’s water system:   * Legionella prevention * Dialysis systems | EC |  |  |  |
| Learn basics of, and monitoring requirements for, heating, ventilation and air conditioning (HVAC) systems:   * Positive and negative air differentials * Air exchange requirements for specific areas * Levels of air filtration (e.g., HEPA filtration) * Parameters for humidity | EC |  |  |  |
| Disinfection and sterilization of equipment:   * Learn the Spaulding classification of disinfection and sterilization * Differentiate between cleaning, disinfection, high-level disinfection and sterilization | CSDA |  |  |  |

**Stage 2: Days 61 – 120**

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| Task/Skill | Track | Status  (Not attempted [NA], Needs Development/In progress [ND], Planned (1-2 yrs) [P] and Complete [C]) | Date | Evidence/Example |
| Become familiar with outside expert resources:   * APIC (national and local chapter) * State & local health department * CDC | PD |  |  |  |
| Start watching APIC monthly webinars | PD |  |  |  |
| Introduce yourself to facility personnel with whom you will interact:   * Environmental services * Emergency preparedness * Pharmacy * Nursing leadership * Surgery leadership * Safety officer * Central services * Quality management * Medical affairs * Facility maintenance and construction * Risk management * Patient safety * Laundry services * Materials management | PD |  |  |  |
| Continue your IT training   * Learn how to present your data (e.g., using PowerPoint to make basic tables, graphs) | PD |  |  |  |
| Develop your skills:   * Time management | ID |  |  |  |
| Understand the basics characteristics of microbiology/virology:   * Bacteria * Fungi * Parasites * Viruses   Differentiate normal flora versus pathogenic flora by site:   * Respiratory tract * Genitourinary tract * Gastrointestinal tract * Skin, eye, ear * Bone and Joints * Blood * Central nervous system | ID |  |  |  |
| Identify appropriate reasons for environmental culturing:   * Culture of water and dialysate in hemodialysis units * Environmental cultures of potential sources during an outbreak investigation   Identify inappropriate reasons for environmental culturing:   * Random undirected microbiological culturing of air, water, and environmental surfaces * Culturing of staff not linked to an epidemiological investigation | ID |  |  |  |
| Based on surveillance information gained in first 60 days, develop/revise surveillance plan as needed:   * Assess and define populations to be studied based on your specific facility findings * Determine regulatory requirements * Include significant organisms for your facility you learned from your lab results * Be specific about what data your facility gathers currently and what, if anything, needs to change | EI |  |  |  |
| Identify surveillance used in unique populations/services, which may include:   * Ambulatory surgery centers * Ambulatory clinics * Dialysis centers * Long-term care facilities * Pediatrics * Pain management clinics * Nursery * Critical care * Immunosuppressed * Labor and delivery * Surgery * Anesthesia * Behavioral health * Emergency department * Rehabilitation | EI |  |  |  |
| Generate your facility’s surveillance data:   * Determine numerators, denominators, and constants for calculations of rates for outcomes and processes * Organize and manage data in preparation for analysis * Determine the incidence or prevalence of infections * Calculate specific infection rates (e.g., provider-specific, unit-specific, device-specific, procedure-specific, standardized infection ratio, or SIR) * Calculate risk stratified rates * Incorporate post-discharge surveillance findings into calculation of rates | EI |  |  |  |
| Learn the steps to investigate clusters and outbreaks:   * Collaborate with appropriate persons to establish the case definition, period of investigation, and case-finding methods * Define the problem using time, place, person, and risk factors * Confirm that an outbreak exists * Formulate hypothesis on source and mode of transmission * Implement and evaluate control measures, including ongoing surveillance * Summarize findings and present to key stakeholders | EI |  |  |  |
| Establish mechanisms for response to individuals with communicable diseases requiring follow-up (e.g., vaccination, antiviral/antimicrobial treatment) | EI |  |  |  |
| Continue to learn about important infectious diseases, such as:   * Viral Hepatitis * HIV/AIDS * MERS - Coronavirus * Norovirus | EI |  |  |  |
| Continue to learn about MDRO identification and infection prevention implications:   * Vancomycin intermediate Staphylococcus aureus (VISA) * Glycopeptide intermediate Staphylococcus aureus (GISA) * Vancomycin-resistant Staphylococcus aureus (VRSA) * Vancomycin-resistant Staphylococcus epidermidis (VRSE) | EI |  |  |  |
| Review NHSN case studies:   * Find NHSN event form * Submit data to NHSN * Review NHSN newsletters | EI |  |  |  |
| Access CMS Hospital Compare and state reporting website to locate your facility data:   * Utilize these websites to compare your data to other facilities | EI |  |  |  |
| Sign up for updates and alerts from CDC (e.g., Healthcare Advisory Network, or HAN, and Morbidity and Mortality Weekly Report, or MMWR)  and your state/local health departments | EI |  |  |  |
| Identify opportunities to break the chain between each component:   * Personal Protective Equipment, or PPE * Vaccination of patients and healthcare workers * Hand hygiene * Sanitation * Disinfection and sterilization * Safe food handling | IA |  |  |  |
| Review infection prevention manual:  ƒƒ Develop schedule for reviewing/revising | IA |  |  |  |
| Understand the different roles of hand hygiene products:   * Soap and water * Antimicrobial soap and water * Alcohol hand hygiene products - gels, foams etc. * Lotions and moisturizers * Products for surgical scrub * Learn the advantages and methods for brushless alcohol-based surgical hand scrubs | IA |  |  |  |
| Determine when and where personal protective equipment (PPE) should be worn and not worn within your facility  Describe your facility’s practical applications of isolation precautions related to:   * Hand hygiene * Transporting isolation patients * Gloving * Gowns * Masks, N-95 particulate respirator, Powered Air Purifying Respirator (PAPR) * Eye protection, face shields * Patient care equipment and supplies * Handling of linen * Routine and terminal (discharge) cleaning * Requirements to discontinue isolation * Requirements for patient placement on Transmission-Based Precautions (cohorting, use of private rooms) * Identify airborne infection isolation (negative pressure) rooms in your facility:   + Understand the engineering controls for airborne infection isolation rooms   + How is air handling of room monitored when in use? How frequently and who is responsible?   + Know the appropriate length of time for clearance of organisms from air in room prior to placing next patient (consider exam rooms, too!) | IA |  |  |  |
| Learn about CLABSI prevention activities at your facility:   * Indications for central line use established * Insertion bundle * Maintenance bundle * Scrub the hub * Removal of devices ASAP * Staff training | IA |  |  |  |
| Learn about pneumonia prevention activities at your facility:   * Head of the bed elevated * Sedation vacations * Weaning protocols * Patient immunization * Staff training | IA |  |  |  |
| Learn about CAUTI prevention activities at your facility:   * Indications for use of indwelling urinary catheter established * Insertion practices * Maintenance of catheter * Removal protocols * Staff training | IA |  |  |  |
| Learn about SSI prevention activities at your facility:   * Prophylactic antibiotics: appropriate agent, dose, re-dosing, timing * Bathing * Glucose control * Skin prep * Oxygenation * Temperature * Staff training | IA |  |  |  |
| Learn about C. difficile prevention activities at your facility:   * Contact Precautions and PPE * Use of soap and water for hand hygiene (no alcohol products) * Cleaning/disinfection products used * Staff training | IA |  |  |  |
| Learn about MDRO prevention activities at your facility:   * Contact Precautions and PPE * Hand hygiene practices * Cleaning/disinfection products used * Staff training * Alert notification system * Newly identified patients * Readmitted or transferred patients | IA |  |  |  |
| Review safe injection practice policies for departments, especially nursing and anesthesia | IA |  |  |  |
| Understand your role in your facility’s emergency response plan:   * Influx of patients (bioterrorism, emerging infectious diseases) | IA |  |  |  |
| Learn about infection risks associated with your facility’s therapeutic and diagnostic procedures (e.g., dialysis, angiography, bronchoscopy,  endoscopy) | IA |  |  |  |
| Know microorganisms commonly involved in foodborne illnesses | IA |  |  |  |
| Determine non-infection prevention-specific products used in your facility that impact infection prevention (e.g., dressings, connectors, IV  supplies) | IA |  |  |  |
| Collaborate with occupational health to determine current requirements for healthcare worker immunizations   * Describe how these immunization records can be queried in order to identify staff that may require post-exposure notification | E/OH |  |  |  |
| Guide occupational health with healthcare worker follow-up of exposures to communicable diseases:   * TB * Neisseria meningitidis * Pertussis | E/OH |  |  |  |
| Confirm IP authority to require work restriction of healthcare worker in event of communicable disease transmission risk | E/OH |  |  |  |
| Contribute to policy development on follow up related to bloodborne pathogen exposures:   * First aid * Source testing * Post-exposure prophylaxis (PEP)   Determine engineering controls and personal protective equipment available at your facility to prevent exposure to bloodborne pathogens | E/OH |  |  |  |
| Utilize CDC recommendations to determine TB screening frequency of healthcare workers | E/OH |  |  |  |
| Participate in annual planning of healthcare worker influenza vaccination campaign, based on updated information from current year’s MMWR and Vaccine Information Sheet (VIS)   * Evaluate types of currently available vaccines to meet needs of campaign: * Example: Three-strain versus four-strain vaccine; egg-free; thimerosal-free; nasal vs. IM vs. intradermal | E/OH |  |  |  |
| Answer these questions:   * What is your facility’s chain of command? * What is the structure of your Infection Prevention/Quality Committee? When does it meet? | MCL |  |  |  |
| Determine if an annual infection prevention risk assessment was performed (The risk assessment documents and prioritizes infection risks  for your facility):   * If so, then make sure your infection prevention program is aligned to your facility’s risks * If not, conduct risk assessment: * Use a multidisciplinary team to conduct the Infection prevention risk assessment: * What population does your facility serve? * What procedures do you do? * What community endemic infections are identified? * Use previous facility surveillance and process monitoring data that is available * Know your high risk patients and what special prevention measures they require | E/R |  |  |  |
| Become familiar with the regulatory bodies that govern your organization and their requirements (e.g., Joint Commission, Accreditation Association for Ambulatory Health Care [AAAHC], Det Norske Veritas [DNV], Centers for Medicare & Medicaid Services [CMS], Occupational Safety and Health Administration [OSHA], Environmental Protection Agency [EPA], Food and Drug Administration [FDA], Department of Transportation [DOT], National Fire Protection Association [NFPA], National Institute for Occupational Safety and Health [NIOSH], and state health department).   * Determine state and/or local HAI coordinator (http://www.cdc.gov/hai/state-based/) | MCL |  |  |  |
| Become familiar with tools used for quality/performance improvement/patient safety:   * Root cause analysis * Fishbone diagram * Pareto chart * Flow chart * Strengths-Weaknesses-Opportunities-Threats (SWOT) * Gap analysis | MCL |  |  |  |
| Determine your role in annual infection prevention education. To do this, answer the following:   * What infection prevention annual education is currently required at your facility? * How is the annual education delivered? (live, computer-based, video, etc.) * If live, what is the schedule? * How are licensed independent practitioners (LIPs) and residents given annual education? | E/R |  |  |  |
| Identify your facility’s patient, family, and visitor IPC education process | E/R |  |  |  |
| Learn how to do a literature search:   * Learn how to use PubMed | E/R |  |  |  |
| Learn basics of adult education:   * What makes adults different from other learners? * Learn how best to develop materials for adults * What training needs does the staff have? * Develop learning objectives based on those needs * Create lesson plans based on the objectives | E/R |  |  |  |
| Learn facility policies for:   * Pest control practices (e.g., bed bugs) * Waste management: * Handling, storage, and transport of biohazardous waste * Cleaning in special circumstances and populations (e.g., surgery, NICU) | EC |  |  |  |
| Determine how cleaning effectiveness is monitored | EC |  |  |  |
| Identify products your housekeeping (i.e., environmental Services [EVS]) personnel are using in unique circumstances and populations  For example:   * Tuberculocidal * Sporicidal (C. diff) * What is used in surgery and special care areas (e.g., NICU)? | EC |  |  |  |
| Learn basics of construction phases as they impact infection prevention:   * Design * Renovation * Demolition * Maintenance * Repair | EC |  |  |  |
| Identify water-related features or decorations in your facility (e.g., fountains, fish tanks) and how they impact infection prevention   * What is the cleaning schedule? * What products are used in the cleaning? * Are there state recommendations for environmental sampling? If so, how frequently? | EC |  |  |  |
| Learn your facility’s HVAC-related policies and practices   * How is it monitored? * What is the monitoring schedule? * What is done in the event of an abnormal finding? * Determine your authority to take action in the event of an abnormal finding | EC |  |  |  |
| Learn critical steps of cleaning, high-level disinfection, and sterilization. For example:   * Event-related sterility * Chemical and biological indicators for different sterilization process * Testing for effective levels of high-level disinfectant solutions; and * Documentation/monitoring requirements * Recall steps for failed instrument processing and actions to take to mitigate risks | CSDA |  |  |  |
| Learn the importance of decontamination of instruments/scopes | CSDA |  |  |  |

**Stage 3: Days 121 –End of Year 1**

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| Task/Skill | Track | Status  (Not attempted [NA], Needs Development/In progress [ND], Planned (1-2 yrs) [P] and Complete [C]) | Date | Evidence/Example |
| Network with other IPs to discuss common concerns and solutions | PD |  |  |  |
| Introduce yourself to facility personnel with whom you will interact (based on your setting) within unique populations/services:   * Ambulatory surgery centers * Ambulatory clinics * Dialysis centers * Long-term care facilities * Pediatrics * Pain management clinics * Nursery * Critical care * Immunosuppressed * Labor and delivery * Anesthesia * Behavioral health * Emergency department * Rehabilitation * Home health * Wound centers | PD |  |  |  |
| Reassess IT needs identified in first 120 days and address any newly identified needs | PD |  |  |  |
| Develop your skills:   * Leadership methods * Effective communication * Change management * Project management * Influence * Facilitation * Presentation skills * Basic statistics * Managing people | PD |  |  |  |
| Create a personalized development plan (e.g. set goals, development and maintenance of competency) | PD |  |  |  |
| Consider taking EPI® 101 and APIC’s online class, “Microbiology 101 for Infection Preventionists,” *or another similar educational opportunity offered by local/state IP programs* | PD |  |  |  |
| Determine methods of antimicrobial susceptibility testing at your facility (e.g., minimum inhibitory concentration versus disc diffusion)   * Differentiate among prophylactic, empiric, and therapeutic uses of antimicrobials | ID |  |  |  |
| Continue to update your surveillance plan:   * Evaluate it (and schedule to evaluate it every six months or sooner, e.g., when National Healthcare Safety Network, or NHSN, definitions * change, new services) | EI |  |  |  |
| Identify infection prevention strategies used in your facility’s unique populations/services | EI |  |  |  |
| Establish internal mechanisms to analyze and validate surveillance data:   * Compare surveillance results to published data or other benchmarks * Develop and disseminate reports: * What is reported? * How is it reported (written & verbal)? * Who receives the reports? * How often? | EI |  |  |  |
| Create a notification system based on surveillance plan, including epidemiologic significant findings | EI |  |  |  |
| Be familiar with your facility’s antibiogram | EI |  |  |  |
| Participate with facility antimicrobial stewardship program | EI |  |  |  |
| Learn the appropriate use of culturing during an outbreak:   * Healthcare worker culturing * Collection of environmental samples that may be linked epidemiologically to outbreaks   Understand the role of pulse field gel electrophoresis (PFGE) and whole human genome sequencing in outbreak investigation | EI |  |  |  |
| Develop evidence-based/informed infection prevention and control policies and procedures | IA |  |  |  |
| Attend or view NHSN training update:   * Ensure quality of data submission using NHSN guidance tools | EI |  |  |  |
| Learn effective ways to communicate facility publicly reported HAI status to key stakeholders:   * Senior leadership * Committee * Physicians * Frontline staff | EI |  |  |  |
| Describe justification for elimination of artificial nails in patient care areas  Develop a process for reporting hand hygiene monitoring compliance to stakeholders | IA |  |  |  |
| Monitor effectiveness of isolation precautions  Determine process for isolation patients receiving therapeutic treatment and procedures | IA |  |  |  |
| Perform annual TB risk assessment | IA |  |  |  |
| Monitor CLABSI prevention processes (e.g., bundle compliances) | IA |  |  |  |
| Monitor pneumonia prevention processes (e.g., bundle compliance) | IA |  |  |  |
| Monitor CAUTI prevention processes (e.g., bundle compliance) | IA |  |  |  |
| Review the principles of asepsis in the operating room:   * Develop competence in assessing compliance with these principles during OR rounds   Know environmental controls:   * Control of air quality, ventilation, and humidity * Traffic control * Surgical attire * Housekeeping * Storage of supplies | IA |  |  |  |
| Monitor Contact Precautions compliance | IA |  |  |  |
| Be familiar with your facility’s antimicrobial stewardship program and your role with the team | IA |  |  |  |
| Continue to monitor Contact Precautions compliance | IA |  |  |  |
| Be familiar with your facility’s antibiogram | IA |  |  |  |
| Incorporate safe injection practices into your department rounding | IA |  |  |  |
| Understand your role in community emergency response:   * Contact your community’s emergency response team * Collaborate with relevant groups and agencies in planning community/facility responses to biologic threats and disasters (e.g., anthrax, influenza, flooding) | IA |  |  |  |
| Learn about commonly recognized bioterrorism agents and how they are transmitted:   * Anthrax * Plague * Tularemia * Q fever * Brucella * Smallpox * Botulism | IA |  |  |  |
| Implement infection prevention and control strategies related to therapeutic and diagnostic procedures (e.g., dialysis, angiography,  bronchoscopy, endoscopy) | IA |  |  |  |
| Know steps involved in foodborne outbreak management | IA |  |  |  |
| Understand your facility’s product process   * What is your facility’s procedure for introducing new products? * Determine process for dealing with product recalls (equipment, food, medication and supplies) | IA |  |  |  |
| Locate USP797 pharmacy regulations that pertain to infection control | E/OH |  |  |  |
| Review and develop screening and immunizations programs to protect healthcare workers from new agents and exposures | E/OH |  |  |  |
| Be familiar with how physicians, students, contract workers, patients, and visitors are handled in your facility if there is a communicable  disease exposure | E/OH |  |  |  |
| Assist occupational health with analysis & trending of illnesses of healthcare worker data | E/OH |  |  |  |
| Provide counseling, work restriction recommendations related to BBP exposure | E/OH |  |  |  |
| Be familiar with respirator fit testing:   * TB healthcare worker history screening * N-95 particulate respirator versus PAPR | E/OH |  |  |  |
| Analyze seasonal influenza coverage for facility by profession (e.g., medical staff, doctors, nurses):   * Research and implement methods for improving facility compliance rate | E/OH |  |  |  |
| Learn your leadership’s priorities and engage them | MCL |  |  |  |
| Participate in your facility’s budgeting process, as needed:   * Recommend specific equipment, personnel, and resources for the Infection Prevention and Control Program | MCL |  |  |  |
| Develop and review/revise your infection control program plan:   * Mission and vision statement * Goals * Measurable objectives * Action plans * Put date on your calendar to re-visit the risk assessment at least every six months | MCL |  |  |  |
| Determine your role during an accreditation survey or health department/CMS inspection | MCL |  |  |  |
| Use CMS infection control worksheet to assess readiness | MCL |  |  |  |
| Collaborate with risk management/quality management in the identification and review of adverse and sentinel events:   * Look for information on patient safety organizations * Participate in root cause analysis (as applicable) | MCL |  |  |  |
| Facilitate effective education of patients, families, and others regarding infection prevention and control measures | E/R |  |  |  |
| Update orientation and annual education | E/R |  |  |  |
| Learn how to critically review literature | E/R |  |  |  |
| Facilitate incorporation of applicable research findings into practice | E/R |  |  |  |
| Develop/deliver educational materials for in-services:   * What important research needs to be implemented by staff? * Reactive (e.g., new pandemic erupts and you need to train the staff) * Proactive (e.g., basics of infectious disease, transmission, prevention; hand hygiene) * Provide immediate feedback, education and or training when lapses in practice are observed | EC |  |  |  |
| Collaborate with EVS to review and approve policies | EC |  |  |  |
| Collaborate with EVS to report cleaning effectiveness to key stakeholders (e.g., infection control committee, frontline staff, administration) | EC |  |  |  |
| Collaborate with EVS on exploring/selecting new cleaning products   * What is your facility’s procedure for introducing new products? * Determine process for dealing with recalls | EC |  |  |  |
| Collaborate with EVS on exploring/selecting new cleaning technologies |  |  |  |  |
| Locate your facility’s infection prevention construction policy and infection control risk assessment tool (ICRA) | EC |  |  |  |
| Participate in pre-construction/renovation meetings to provide guidance for infection control risks | EC |  |  |  |
| Review and/or develop policies related to your facility’s water management system (e.g., Legionella prevention, dialysis systems, fountains  and fish tanks) | EC |  |  |  |
| Determine if your facility participates in reuse of single-use devices:   * Determine appropriate practices for reprocessing single-use devices | CSDA |  |  |  |
| Assess products under evaluation for their ability to be reprocessed:   Manufacturers guidelines   End users   Product team | CSDA |  |  |  |
| Learn your facility’s processes for disinfection and sterilization:   * Observe processing of patient care equipment in specialty areas:   + Endoscopy/Bronchoscopy   + Central Services   + Respiratory therapy   + Surgical/ Procedural areas and Anesthesia   + Dialysis   + Angiography | CSDA |  |  |  |

**Stage 4: Year 2 and beyond**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Task/Skill | Track | Status  (Not attempted [NA], Needs Development/In progress [ND], Planned (1-2 yrs) [P] and Complete [C]) | Date | Evidence/Example |
| Volunteer in local chapter | PD |  |  |  |
| Consider taking APIC EPI® 102 | PD |  |  |  |
| Shadow in areas of unique population or in areas in which you are unfamiliar | PD |  |  |  |
| Continue to develop your soft skills:   * Developing a business case for your program * Leadership methods * Performance improvement science | PD |  |  |  |
| Prepare for the CIC examination:   * Apply for Competency Advancement Award (CAA) grant or state sponsored scholarship opportunities (if available) * Review the CBIC Candidate Handbook * Take APIC’s online certification review class * Study APIC Text * Connect with chapter study group (if one exists) | PD |  |  |  |
| Recognize limitations and advantages of the types of tests used to diagnose infectious processes | ID |  |  |  |
| Recognize the statistical significance of data   * Use basic statistical techniques to describe data (e.g., mean, standard deviation, rates, ratios, proportions) * Create and implement action plans based on your surveillance data | EI |  |  |  |
| * Provide guidance on how to interpret and generate action following antibiogram review | EI |  |  |  |
| Prepare reports for dissemination, evaluate strategies implemented for control | EI |  |  |  |
| Learn NHSN advanced analysis/building custom reports | EI |  |  |  |
| Develop strategies to improve hand hygiene compliance:   * Explore hand hygiene monitoring methods (manual versus electronic observations, hand hygiene product usage) * Recruitment of hand hygiene champions throughout facilities * Reward and recognition | IA |  |  |  |
| Review, and become involved in development of, policies of other facility departments, as needed | IA |  |  |  |
| Communicate compliance with isolation precautions to key stakeholders (Infection Prevention & Control Committee, departments, etc.) | IA |  |  |  |
| Develop strategies to improve CLABSI prevention process compliance  Explore CLABSI prevention collaboratives and consider participating. These collaboratives may be found in:   * State health departments * Quality improvement organizations * Hospital associations | IA |  |  |  |
| Develop strategies to improve pneumonia prevention process compliance  Explore pneumonia prevention collaboratives and consider participating. These collaboratives may be found in:   * State health departments * Quality improvement organizations * Hospital associations | IA |  |  |  |
| Develop strategies to improve CAUTI prevention process compliance  Explore CAUTI prevention collaboratives and consider participating. These collaboratives may be found in:   * State health departments * Quality improvement organizations * Hospital associations | IA |  |  |  |
| Develop strategies to improve SSI prevention process compliance  Explore SSI prevention collaboratives and consider participating. These collaboratives may be found in:   * State health departments * Quality improvement organizations * Hospital associations | IA |  |  |  |
| Develop strategies to improve C. difficile prevention process compliance  Explore C. difficile prevention collaboratives and consider participating. These collaboratives may be found in:   * State health departments * Quality improvement organizations * Hospital associations | IA |  |  |  |
| Develop strategies to improve MDRO prevention process compliance  Explore MDRO prevention collaboratives and consider participating. These collaboratives may be found in:   * State health departments * Quality improvement organizations * Hospital associations | IA |  |  |  |
| Provide guidance on how to interpret and generate action following antibiogram review | IA |  |  |  |
| Learn about outbreaks that have occurred in different settings as a result of breaks in infection prevention practices | IA |  |  |  |
| Review/revise emergency preparedness plans | IA |  |  |  |
| Learn infection prevention practices to prevent transmission of bioterrorism agents:   * Learn signs and symptoms of bioterrorism agents | IA |  |  |  |
| Participate in cost benefit assessment, efficacy studies, and product evaluation   * Recommend changes in practice based on product trials * Make recommendations, based on product’s ability to be reprocessed (if applicable) | IA |  |  |  |
| Assess your pharmacy’s compliance with USP797 regulations that pertain to infection control:   * Make recommendations based on your assessment | IA |  |  |  |
| Assist with providing guidance for counseling, testing, treatment, prophylaxis and work restrictions following communicable disease  exposure | E/OH |  |  |  |
| Conduct annual review of facility BBP exposure control plan | E/OH |  |  |  |
| Assist with analysis & trending of data from BBP exposure:   * Prepare annual sharps safety risk assessment per Federal OSHA | E/OH |  |  |  |
| Begin to formulate actions steps to making your infection prevention business case | MCL |  |  |  |
| Conduct risk assessment and develop IPC plan for following year | MCL |  |  |  |
| Recommend changes in practice based on current evidence, clinical outcomes and financial implications | MCL |  |  |  |
| Develop and implement strategies that engage the patient, family, and others in activities aimed at preventing infection. | E/R |  |  |  |
| Recognize the appropriate epidemiologic study to investigate a problem:   * Case control, cohort studies | E/R |  |  |  |
| Develop evaluation plan to assess success/failure of your training (e.g., observation of practices, process measures) | E/R |  |  |  |
| Recommend revisions to EVS policies as needed, based on new and emerging diseases and threats | EC |  |  |  |
| Participate in cost benefit assessment, efficacy studies, and product evaluation:   * Recommend changes in practice based on product trials | EC |  |  |  |
| Develop contingency plan for potential utility outages, based on the project risk assessment | EC |  |  |  |
| Develop contingency plan for water outage | EC |  |  |  |
| Develop contingency plan for potential HVAC outages | E/OH |  |  |  |
| Learn the special disinfection/sterilization requirements for resilient pathogens. For example:   * Creutzfeldt-Jakob Disease (CJD) * Human Papillomavirus (HPV) | CSDA |  |  |  |
| After observation of high-level disinfection and sterilization processes at your facility, determine if practices meet guidelines and update  policies and procedures as needed | CSDA |  |  |  |

(*See last page for signatures*)

Infection Preventionist Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Infection Prevention Manager/Lead Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date Review 1: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date Review 2: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_