**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 attendanceCommittees 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 usingLearn 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 facilityDescribe 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, IVsupplies) | 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 risksfor 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 populationsFor 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 areasDevelop a process for reporting hand hygiene monitoring compliance to stakeholders | IA |  |  |  |
| Monitor effectiveness of isolation precautionsDetermine 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 communicabledisease 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, fountainsand 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 complianceExplore 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 complianceExplore 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 complianceExplore 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 complianceExplore 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 complianceExplore 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 complianceExplore 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 diseaseexposure | 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 updatepolicies 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: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_