

Knowing how to act in a situation: the French approach of ICP core competencies

Pascal Astagneau

IFIC, Cracovie, April 25-27 2018



Programme for HAI prevention

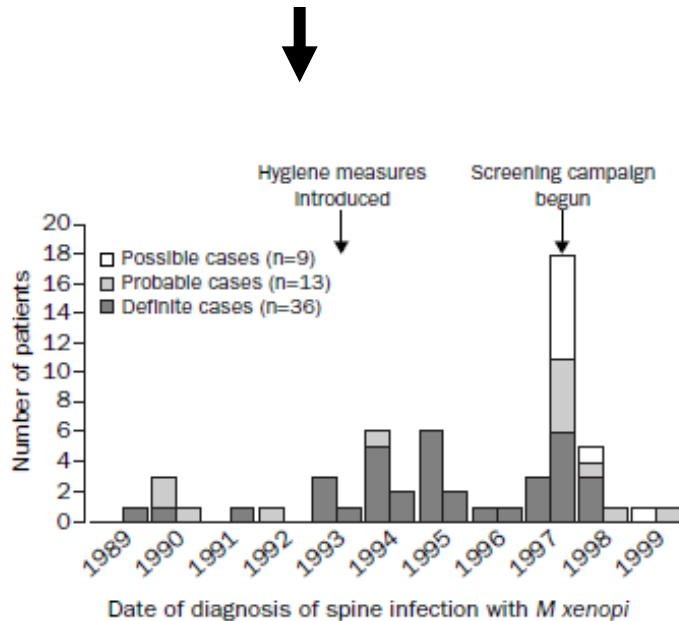
Historical landmarks in France since 1990

- Local IC team and committee in each public hospital
- Regional centres for IC (C-CLIN)
- National IC programme (MoH and public health national agency) implementing:
 - point-prevalence survey / 5 years
 - targeted surveillance networks (voluntary basis) : MDRO, SSI, ICU, ...
 - guidelines for prevention (100 Reco)
 - audits of IC practices
- But ...

The turning point: the patients/public empowerment in 2000's

Mycobacterium xenopi spinal infections after discosvertebral surgery: investigation and screening of a large outbreak

* Lancet 2001

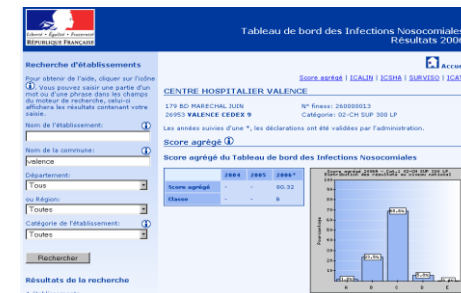


Media
Patients

Mandatory IC
committee

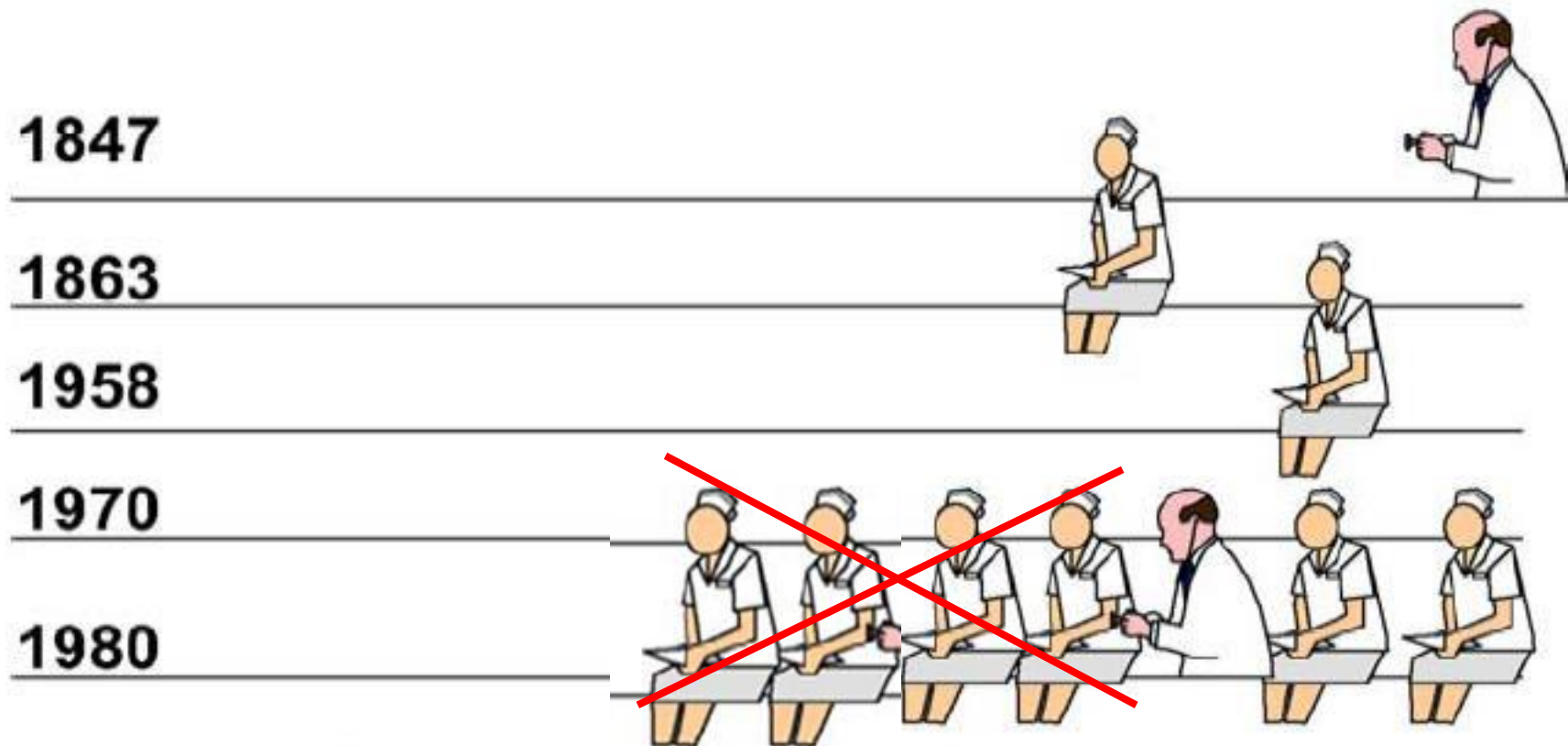
Annual
public
reporting

No IC committee/team



Understaffing ICP in France

Requirement: post-graduate diploma in IC, depending on core competencies in each university (no national CC)

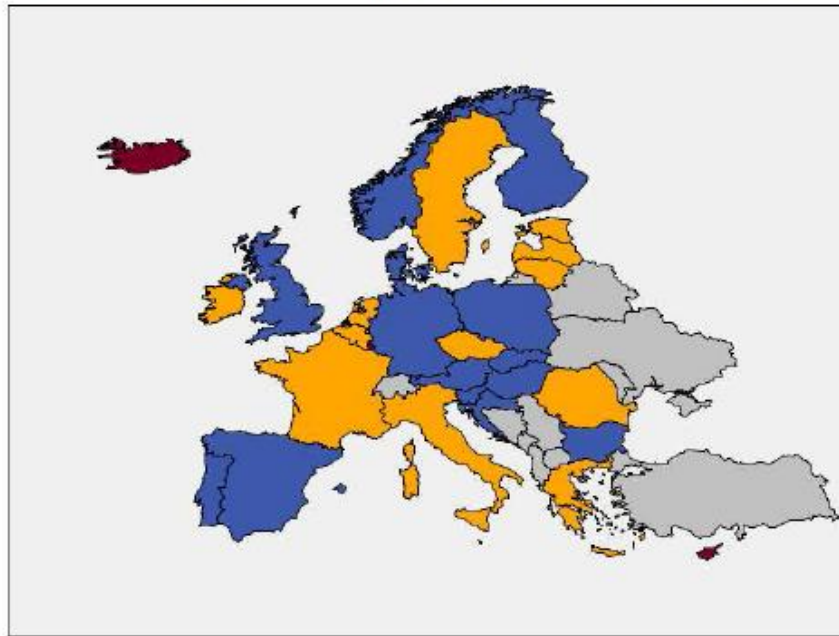


Earlier steps in infection control

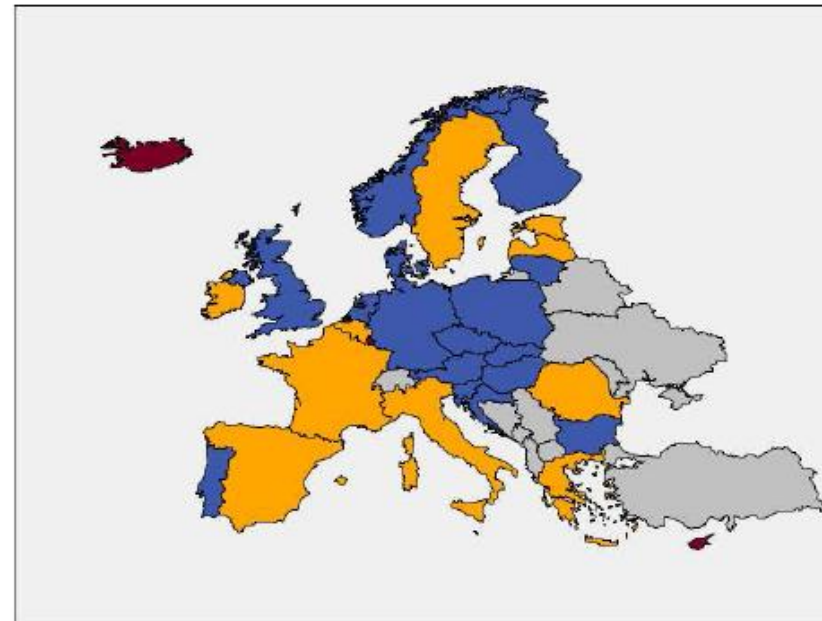
Training IC in Europe – TRICE

National curriculum for training ICP, 2014

The presence of a national curriculum or programme for IC/HH training for doctors i The presence of a national curriculum or programme for IC/HH training for nurses in 2014 (30 countries).



■ Yes ■ No ■ Not reported/not available



■ Yes ■ No ■ Not reported/not available

Malta



- Ministry of health : hospital nurses, biologists
- French pharmacist association

Hygiéniste - Page 1/3
Ministère de la santé et des sports - Direction générale de l'offre de soins

Bio-hygiéniste - Page 10
Ministère de la santé et des sports - Direction générale de l'offre de soins

<http://www.ordre.pharmacien.fr/Le-pharmacien/Le-metier-du-pharmacien/Fiches-met...> 13/05/2016



French IC programme (PROPIAS)

Since 2015 ...

- Promote training of professionals and patients to IC
- Define the role and activity of the ICP based on a reference guidelines with the stakeholders (french Society for IC, experts, ...)

Need for adaptation to new challenges

- Global approach for patient safety and patient empowerment
- Emerging AMR
- New technologies in healthcare
- Big data sources
- Development of ambulatory cares
- Ongoing changes in hospital management
- Limitations of financial resources

Goals of the CC guidelines

Professional references and competencies

- To highlight the role of ICP in the healthcare community
- To be a reference for doctors, nurses and scientists
- To better define skills and limits of IC regarding the other HC risks
- To encourage junior professionals for training
- To better evaluate needs vs. resources allocations

Methods

- Expert group (n=10)
- Help of a methodologist (M. Le Boterf)
- Selection of key situations (KS) in IC activity
- Describe each situation : process and steps, how to act at each step, expected results
- Identify factors that could influence the professional activity over time
- Determine resources needed
- External reviewing and validation

Key situations

- KS1: Investigating an outbreak
- KS2: Managing a case notification
- KS3: Implementing a surveillance system
- KS4: Building a guidelines for HAI prevention
- KS5: Implementing AMR prevention programme
- KS6: Implementing healthcare practices evaluation or audit
- KS7: Implementing prevention for environmental risk
- KS8: Counselling decision makers for construction and equipment projects
- KS9: Managing training activity for professionals

Resources needed for how-to-act

- **Knowledge in:**
 - science
 - methodology
 - occupational context
- **Know-how in:**
 - methodology and technics
 - management
 - human relationships

Ex: Investigating an HAI outbreak (KS1)

Knowledges

Scientific

Microbiology
Physiopathology
Epidemiology (HAI transmission, reservoir, vehicles, ...)
Infection control measures
Socio-economic aspects

Methodology

Lab-technics for isolated pathogens
Outbreak management steps
Descriptive and analytic epidemiology
Care practice and CP assessment
Route cause analysis and feedback
Effective preventive measures

Occupational context

Experts and expertise networks
Alert and notification systems
Principles of early-warning surveillance
Local epidemiology, HC facilities and IC organization and socio-economical context

Ex: investigating an HAI outbreak (KS1)

Know-hows

Methodology and technics

- Validate a HAI diagnosis
- Use tools of epidemiology
- Use hospital information system
- Assess care practices
- Analyze patient healthcare circuit
- Perform descriptive analysis
- Explain preventive measures
- Perform route cause analysis
- Set up a priority prevention plan
- Assess environmental risks
- Perform environmental samplings
- Use a risk/cost-benefit analysis

Management

- Write a summary note
- Manage a multiprofessional meeting
- Manage a feedback reporting
- Communicate results to targeted groups

Human relationships

- Establish trustfull relationship with HCW
- Convince for applying an ICP decision
- Manage a crisis group

Resources for know-how in management

- To manage a multi-professional meeting
- To manage feedback reporting
- To write a summary note
- To develop project initiatives
- To communicate widely results in a comprehensive way
- To communicate results to target groups
- To ensure leadership in IC activity
- To set up communication tools that fit to specific populations
- To organize promotion campaign to specific populations
- To foster network activity

SA1	SA2	SA3	SA4	SA5	SA6	SA7	SA8	SA9
x	x	x	x	x	x	x	x	
x	x	x	x	x	x	x	x	
x	x	x	x	x		x	x	
		x	x	x	x	x	x	
		x			x		x	
x				x				
			x	x				
			x					
			x					
		x						

Resources for know-how in human relationship

- To establish a trustful relationship with professionals, stakeholders, patients
- To convince for applying an IC programme decision and implementation
- To listen the point of view of other partners
- To ask for external expertise when needed
- To set up an ongoing support with HC pro.
- To manage a crisis group
- To make a mediation among stakeholders
- To make counselling with decision makers

	SA1	SA2	SA3	SA4	SA5	SA6	SA7	SA8	SA9
	X	X	X	X	X	X	X	X	
	X			X	X		X	X	
				X	X	X	X	X	
	X	X					X	X	
				X		X			
	X	X							
	X	X							
							X	X	

To monitore and communicate with good teaching skills

X

Conclusion

- Methodology criteria for professional ICP competencies to be shared among countries
- Good opportunity to improve the ICP training programme initiatives (doctors, nurses, patients, ...)
- Enhancement of IC attractiveness for junior colleagues
- Limitations: human and financial resources in healthcare settings

ICP competencies

To be or not to be...



Working group, SF2H

- **Michèle AGGOUNE** Cadre supérieur de santé - Paris
- **Raoul BARON** Médecin Praticien Hospitalier - Brest
- **Pascale CHAIZE** Infirmière - Montpellier
- **Bruno GRANDBASTIEN** Médecin MCU-PH - Lausanne
- **Olivia KEITA-PERSE** Médecin Praticien Hospitalier - Monaco
- **Pierre PARNEIX** Médecin Praticien Hospitalier - Bordeaux
- **Anne-Marie ROGUES** Médecin PU-PH – Bordeaux
- **Pascal ASTAGNEAU** Médecin PU-PH - Paris
- **Nathalie ARMAND** Pharmacien Praticien Hospitalier - Valence
- **Sandrine CANOUE** Pharmacien Praticien Hospitalier - Foix
- **Catherine QUESNEL** Médecin Praticien Hospitalier - Bouscat, Arès, Lesparre, Pessac