

UK Competences for Practitioners in Infection Prevention & Control

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EUNETIPS | European network to promote infection prevention for patient safety

ips Infection Prevention Society



Aims

1. Provide background to IPS development of competences
2. Our journey to current position
3. Give an example of the current competency framework launched in 2017

Background

- Infection Control Nurses Association (ICNA) published competences in 2000 stating ‘the level at which these competences have been set is intended to relate to an *expert* practitioner who uses reasoning, critical thinking, reflection and analysis to inform their assessment and decision making’.

Competence framework 2000

Five domains

- **Specialist knowledge** – microbiology, immunology, epidemiology, IPC practice & decontamination.
- **Evidence based practice** – research in practice & audit to improve quality
- **Teaching and learning** – facilitating learning in others, self learning & professional development
- **Management and leadership** – managing an IPC service
- **Clinical research** – interpreting & conducting research

ICNA self assessment tool (2001)

- Self assessment tool described as being to be pivotal in making competences accessible to a wider group of nurses¹
- Adopted Benner's stages of clinical competence² - novice, advanced beginner, competent, proficient and expert

(1) Tew L, King D, Moore L & Meyers D. *British Journal Infection Control* (2002), Vol 3:4

(2) Benner P. (1984) *From novice to expert: Excellence and power in nursing practice*. Addison-Wesley. California

IPS competences (2011)



Four domains which described the major components of advanced-level practice

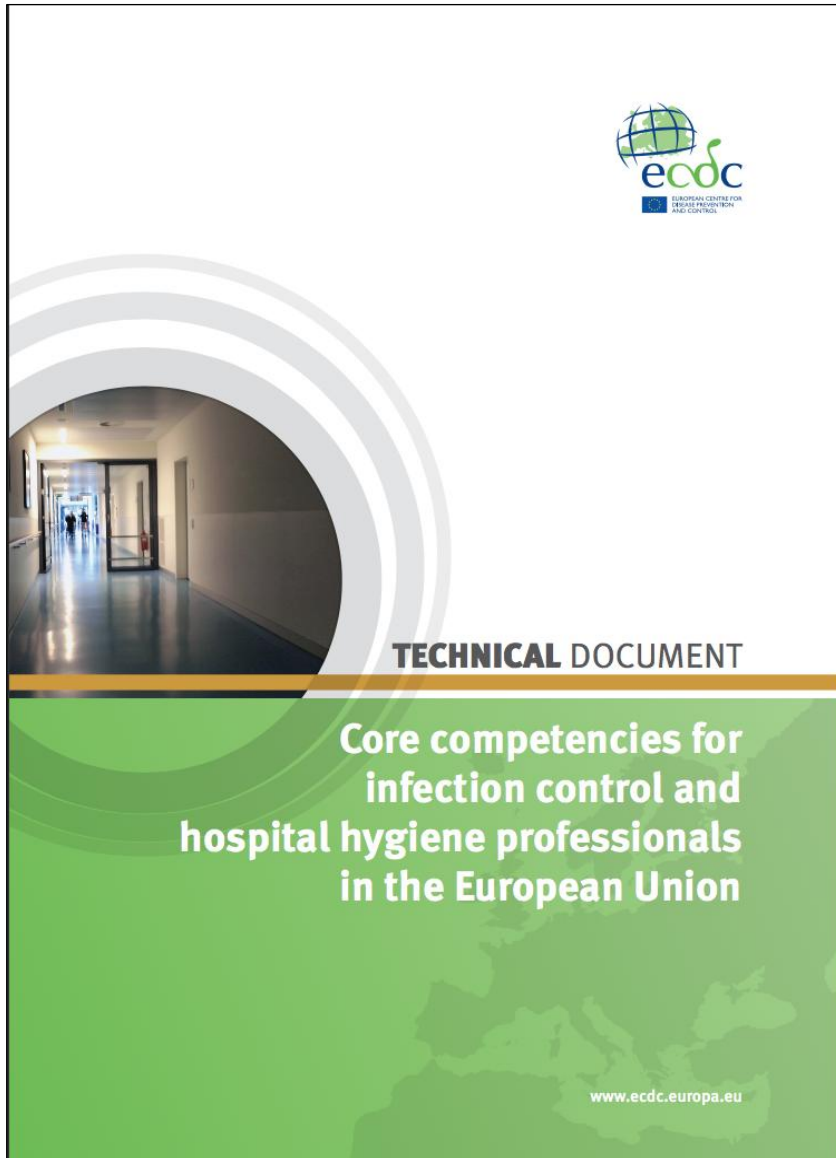
- clinical practice
- education
- research
- leadership and management

Competence statements

Performance indicators

Knowledge, understanding and skills

ECDC 2013



Four areas encompassing 16 domains

- Programme development
- Quality improvement
- Surveillance and investigation of healthcare associated infection
- IPC activities

Competencies aimed at
Junior specialist – introductory level

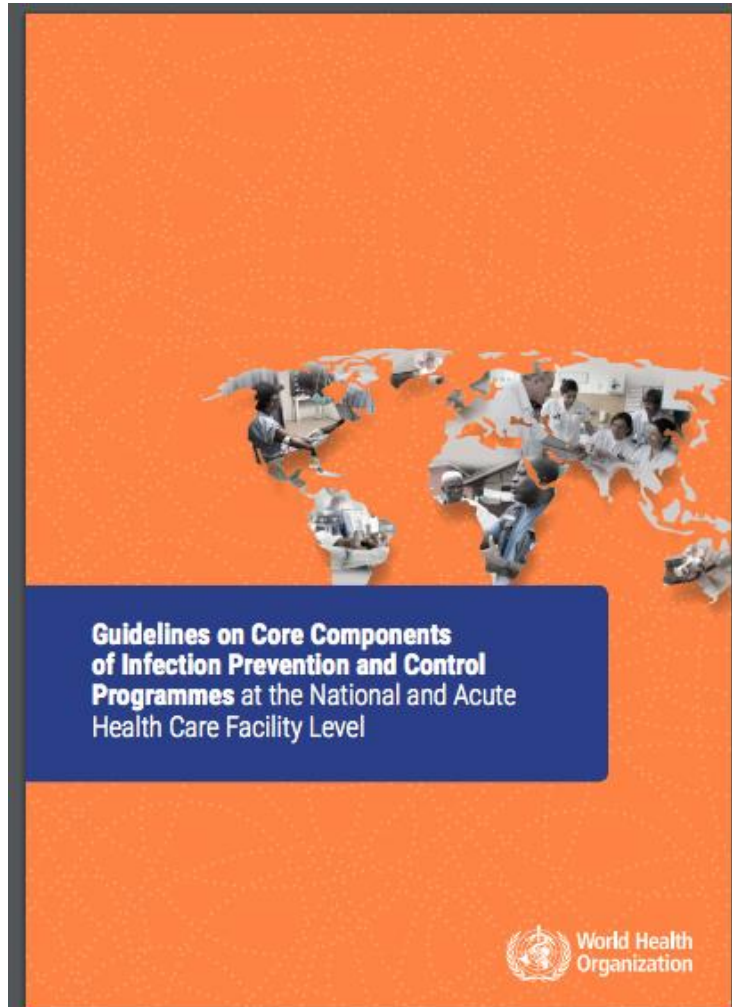
Senior specialist – expert level

ECDC

Table A1. Areas and domains of competency in infection control and hospital hygiene

Area	Domain
Area 1. Programme management	Elaborating and advocating an infection control programme
	Management of an infection control programme, work plan and projects
Area 2. Quality improvement	Contributing to quality management
	Contributing to risk management
	Performing audits of professional practices and evaluating performance
	Infection control training of employees
	Contributing to research
Area 3. Surveillance and investigation of healthcare-associated infections (HAIs)	Designing a surveillance system
	Managing (implementation, follow up, evaluation) a surveillance system
	Identifying, investigating and managing outbreaks
Area 4. Infection control activities	Elaborating infection control interventions
	Implementing infection control healthcare procedures
	Contributing to reducing antimicrobial resistance
	Advising appropriate laboratory testing and use of laboratory data
	Decontamination and sterilisation of medical devices
	Controlling environmental sources of infections

WHO 2017



Core component 1

Recommends that IPC programmes have dedicated trained team in place.

*Strong recommendation,
very low quality evidence*

WHO

Core component 2

- IPC specialists who are responsible for the IPC programme should achieve expert level of knowledge and it is important that they undergo regular updates of their competences
- *Strong recommendation, very low quality evidence*

EPDC review of 2011 competences

Positives

Useful for appraisal preparation

Helpful in identifying personal development needs

Negatives

Too complicated and wordy

Too many elements - needs simplifying

Performance/practice indicators needed

Limited relevance to the majority frontline practitioners

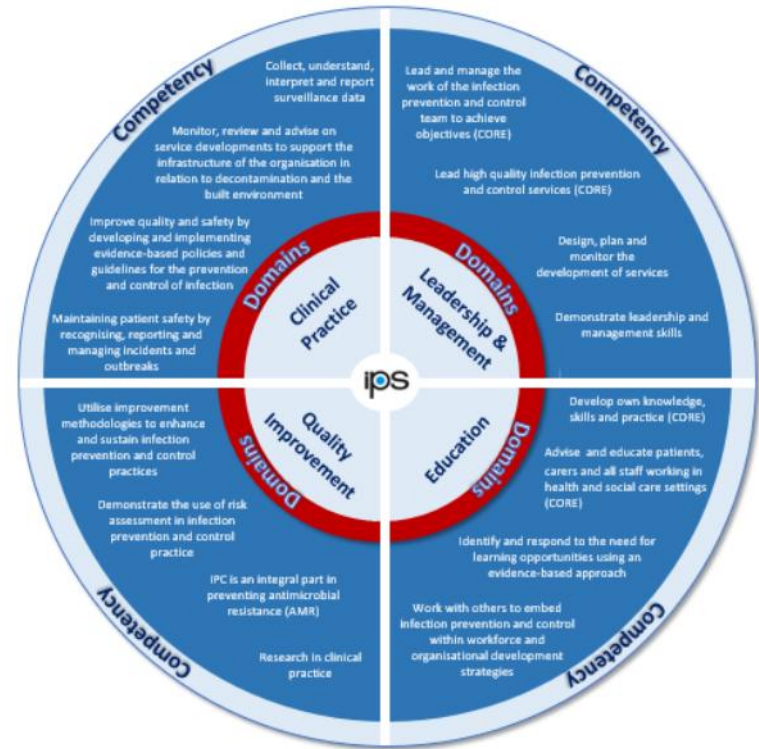
Context revision

- Practitioners in IPC includes a wider range of healthcare professionals in a diverse range of organisations
- Competences need to be relevant to a range of IPC practitioners
- Sub-specialities in IPC eg: surveillance and decontamination
- Revalidation/NMC Code of Practice
- Web-based self assessment tool requested

Competency Framework

There are four Domains

- Clinical Practice
- Education
- Quality Improvement
- Leadership and Management



Each domain has four competencies and each competency then has three practice indicators with the necessary knowledge and skills attached to the practice indicators.

Level Definition

Assisted

- Practitioner who may be new to infection prevention and control, or inexperienced and requires assistance or guidance to undertake a specific task or role.

Supervised

- Practitioner who may require observation and direction to carry out a specific task/role they are unfamiliar or inexperienced with. This may require oversight from a more senior colleague.

Independent

- Practitioner who has the knowledge and skills to work autonomously without any supervision or assistance.

Collect, understand, interpret and report surveillance data

- Develop guidance by critically analysing and interpreting national guidance and initiatives, presenting it in an understandable and accessible way for all health care staff
- Identify the need for improvement and monitor the implementation of IPC policies, taking corrective action when necessary
- Evaluate the effectiveness of local policies through audit and evaluations.

Educate, monitor and review the effectiveness of decontamination processes and equipment and the environment, including the built environment

- Demonstrate effective recognition and escalation of incidents and outbreaks
- Participate in the management of incident and outbreaks ensuring effective communication and documentation
- Evaluate the incident or outbreaks and make recommendations for future improvements

Maintaining patient safety by recognising and managing incidents and outbreaks

- Work with estates, facilities, capital planning and laboratory services to plan preventative maintenance and advise on contract specifications
- Provide infection prevention and control input in the development of decontamination policies and procedures
- Advice on actions that are required when decontamination processes are unsafe or ineffective and take necessary action to escalate concerns when there is a failure to act which compromises safety and quality

Improve quality and safety by developing and implementing evidence-based policy and guidelines for the prevention and control of infection

- Demonstrate the use of epidemiological methods to collect meaningful data to inform practice
- Interpret and indent trends, patterns and anomalies to inform appropriate interventions and clinical practice
- Ensure effective feedback and reporting of data to the appropriate people

Quality Improvement

[Return to Overview](#)

Utilisation of improvement methodologies, taking into account human factors and the need for behavioural change

- Recognise and identify where improvements in quality and patient safety can be effective
- Implement initiatives to drive quality improvement through behavioural change
- Identify and communicate changes needed to lead to improvement for patients, staff and the general public

Demonstrate the use of risk assessment in infection prevention and control practice

- Understand risk management process in relation to IPC and to be able to undertake appropriate risk assessments.
- Communicate and escalate risks that are identified effectively and appropriately.
- Implement strategies to mitigate and contain risks that are identified

Ensure AMR is an integral part of IPC

- Promote and implement initiatives for AMR stewardship
- Utilising surveillance to identify resistance and ensure this is reflected in local guidelines
- Educate health professionals and raise awareness of AMR with patients and the public.

Ensure research is embedded in clinical practice

- Critically assess and evaluate research and apply findings to inform evidence-based practice
- Participate in research independently or collaboratively
- Disseminate and apply findings of relevant research into practice

Develop own knowledge, skills and practice (CORE)

- Identify and evaluate own development needs to meet current and emerging work demands and organisation objectives
- Develop a personal portfolio with clear plans, actions and outcomes; recognising strengths and limitations (will need further explanation)
- Engage and participate in learning activities to develop skills and practice in Infection prevention and control

Educate patients, carers and all staff working in health and social care settings (CORE)

- Communicate confidently and competently, directly to patients and carers about infections and the relevant management of their care
- Demonstrate a variety of educational techniques to effectively deliver key infection prevention and control messages
- Promote education and infection prevention and control awareness by participating in key local and national initiatives

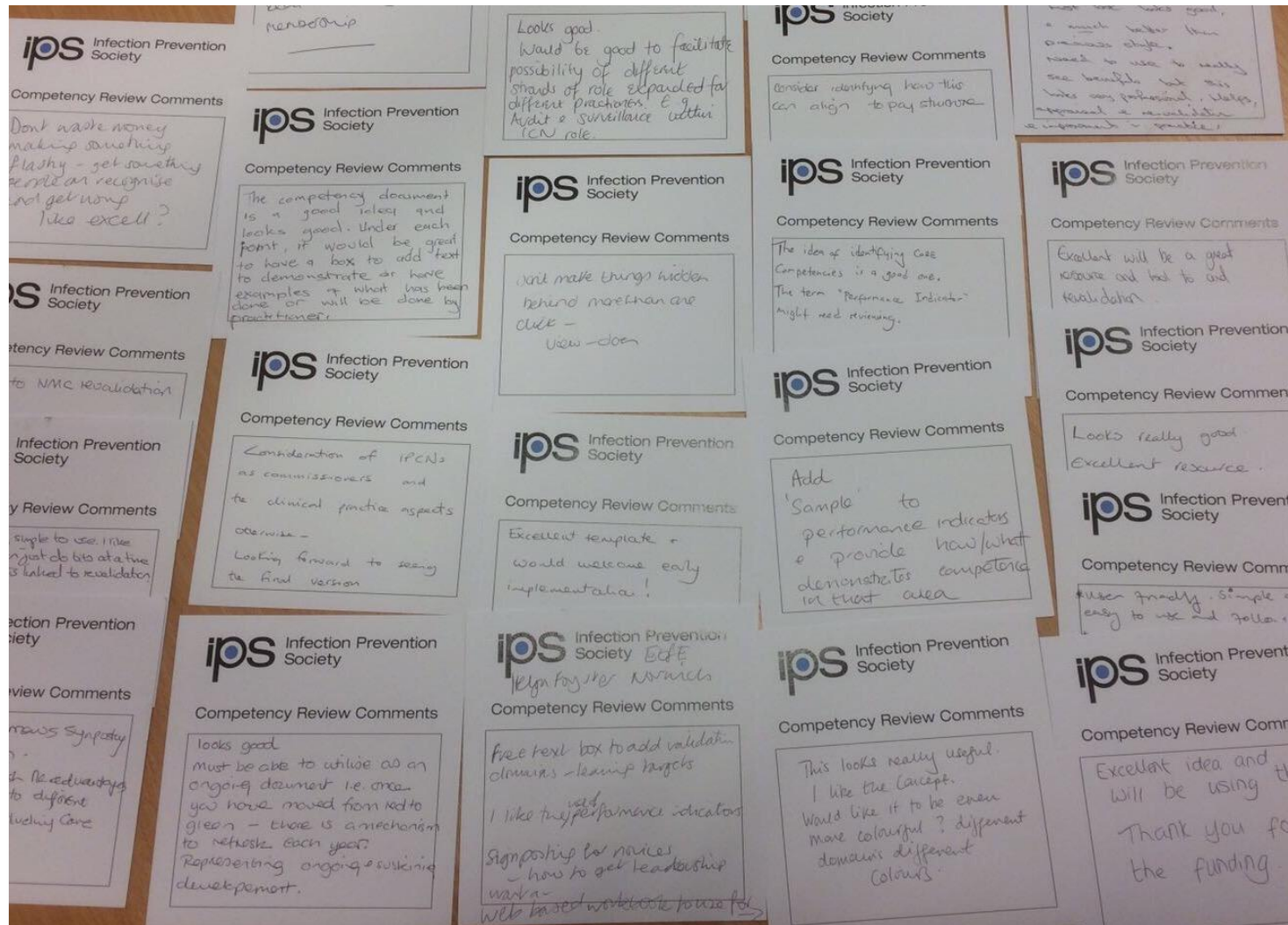
Develop and implement learning opportunities using evidence-based practice

- Equip staff with knowledge and skills to enable them to maintain patient safety and empower them to challenge unsafe practice
- Recognise and address gaps in knowledge, skills and competence of staff working within health and social care
- Participate in the development of learning resources, training packages, study days, conferences and events

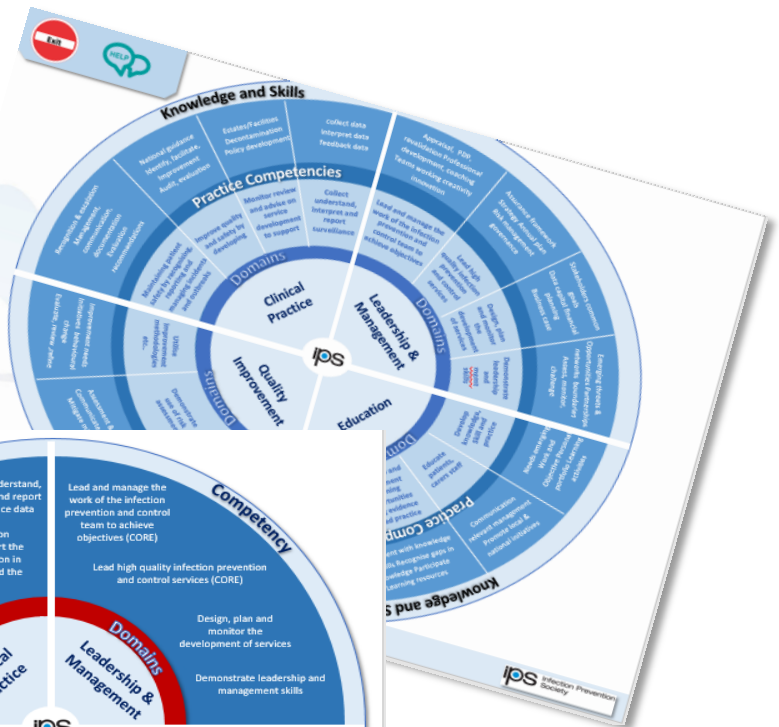
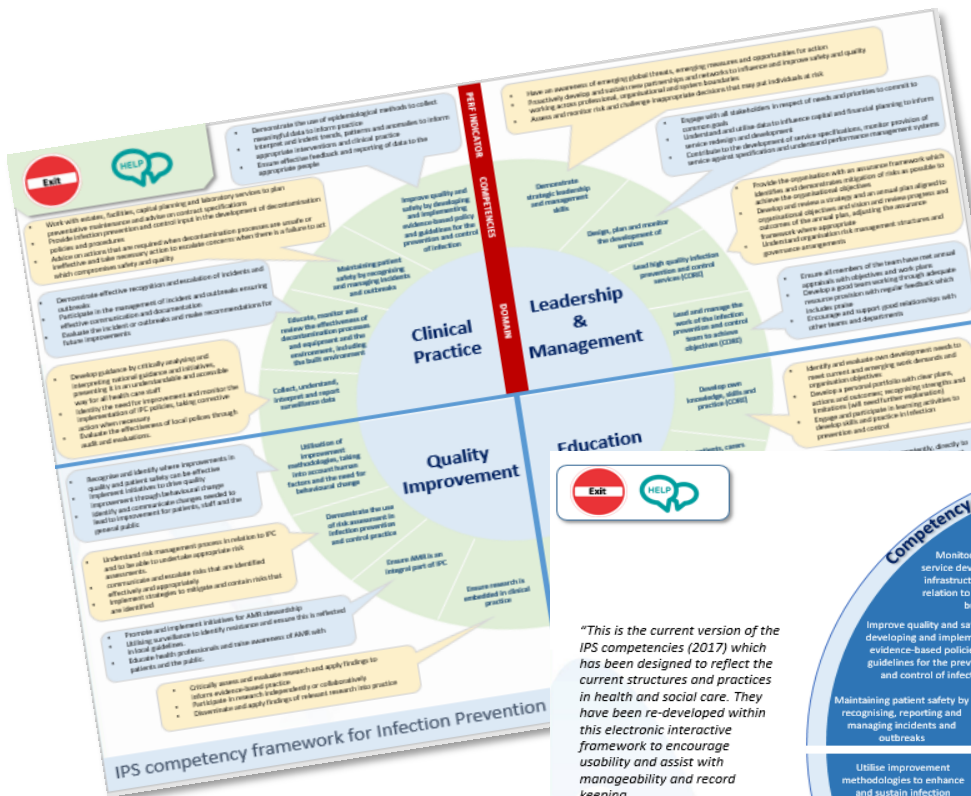
Work with others to develop, implement, evaluate and embed infection prevention and control within workforce development strategies

- Work in partnership to build and implement infection prevention and control into workforce development strategies so it is an integral part of learning and development culture (needs reviewing)
- Evaluate the effectiveness of workforce development strategies in improving infection prevention and control practice (needs reviewing)
- Make recommendations to improve the knowledge and skills of the workforce (needs reviewing)

Feedback from IPC conference 2016 delegates



Developmental Stages



"This is the current version of the IPS competencies (2017) which has been designed to reflect the current structures and practices in health and social care. They have been re-developed within this electronic interactive framework to encourage usability and assist with manageability and record keeping."

The competencies can be used by anyone at any stage of their IPC career and can assist in developing career pathways."

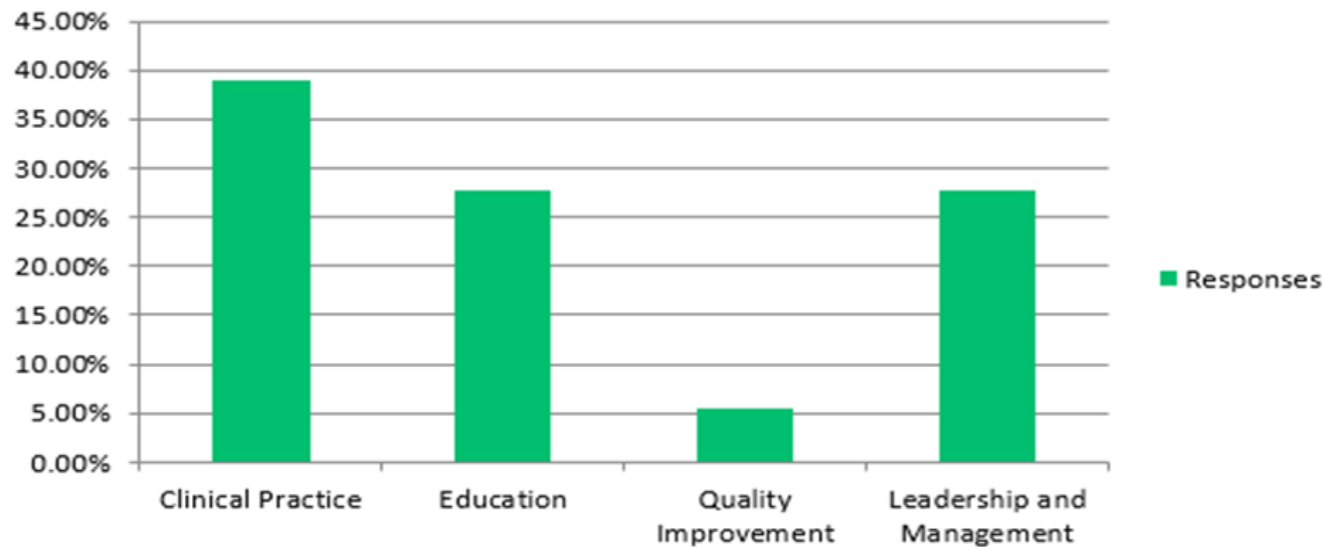
Progression

Pilot

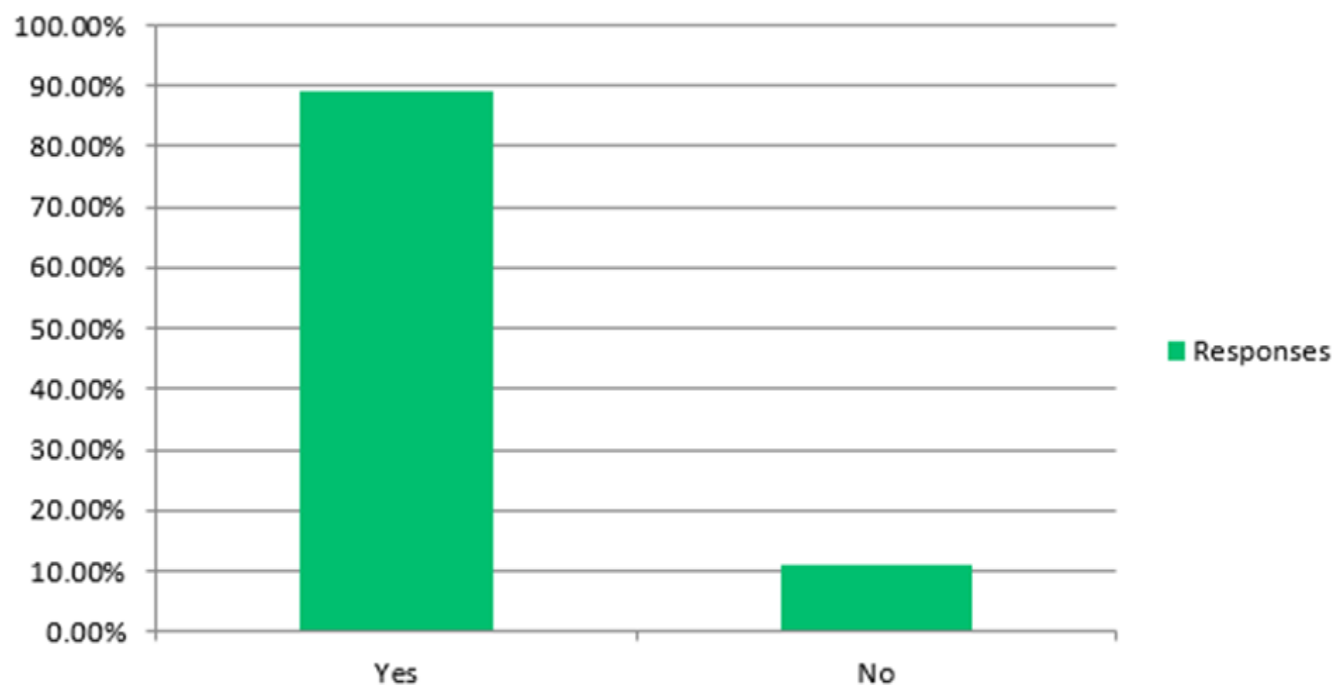
- Response rate 13%
- Survey which included good representation across England and Wales there were no responses from Ireland and Scotland.
- Heads of Nursing Services, Assistant DIPCs, Matrons, Nurses and advanced Practitioners
- The majority of respondents were from secondary care, but mental health, primary care higher education an integrated health board and 2 researchers

Pilot

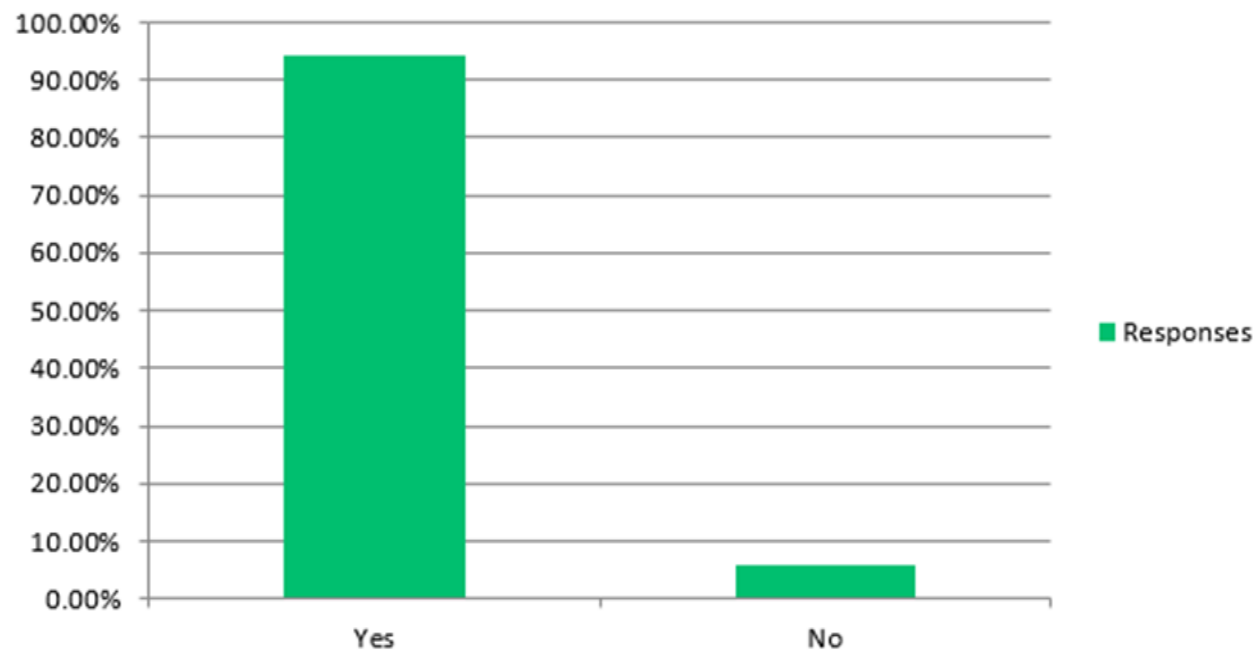
Which domains did you access as part of the pilot?



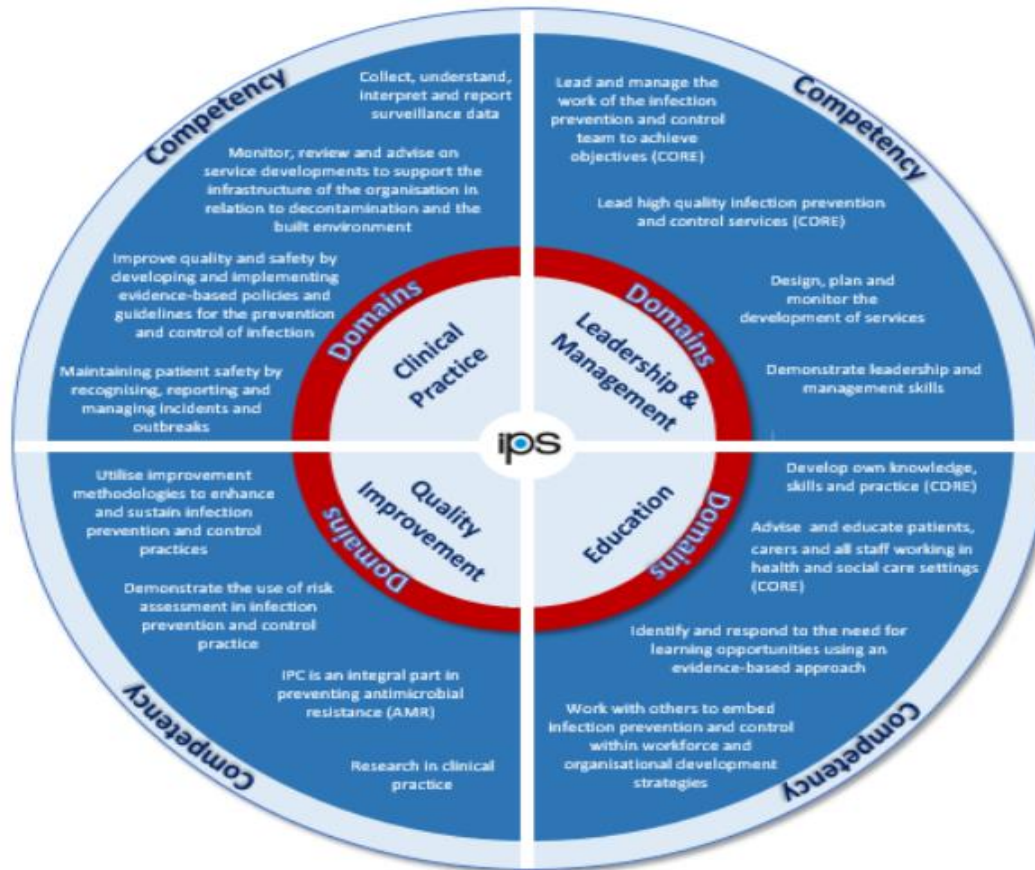
Did you find everything you needed to?



Are the titles of the Domains suitable?



Final Framework



New Competency Framework



4 competency statements for EDUCATION Domain

- Develop own knowledge, skills and practice
- Advise and educate patients, carers and all staff working in health and social care settings
- Identify and respond to the need for learning opportunities using an evidence-based approach
- Work with others to embed infection prevention and control within workforce and organisational development strategies

EDUCATION domain

Domain: Education

Competency: Develop own knowledge, skills and practice

Practice indicators

- Identify and evaluate own development needs to meet current and emerging work demands and organisational objectives
- Have a personal portfolio with clear plans, actions and outcomes; recognising strengths and limitations as part of ongoing professional development
- Engage and participate in educational and learning activities to develop skills and practice in infection prevention and control

Knowledge and skills for EDUCATION

- Demonstrate knowledge of the core principles of infection prevention and control, microbiology and epidemiology relevant to your clinical area, incorporating evidence-based practice
- Evidence a personal portfolio that is up to date, highlighting areas for development in line with organisational objectives.
- Have an awareness of the local IPC Annual Plan and identify any knowledge or skill gaps there are for your own personal development. This should be included in your annual appraisal.
- Document educational activities undertaken to support and enhance your professional development
- Engage with peers, experts in the field to enhance personal and professional development
- Acknowledge skill gaps within the IPC team and contribute towards the team development

Knowledge and Skills Required

My Evidence

[Home](#)[Competency Tool](#)[?](#)**Competency
Framework****Tool****Domain:** Education**Competency:** Advise and educate patients, carers and all staff working in health and social care settings (CORE)**Practice Indicators**

Communicate confidently and competently, directly to patients and carers about infections and the relevant management of their care.

Not Selected ▼

Not Selected ▼



Demonstrate knowledge of a variety of educational and training techniques to effectively deliver key infection prevention and control messages.

Not Selected ▼

Not Selected ▼



Promote education and IPC awareness by participating in local, regional and national initiatives.

Not Selected ▼

Not Selected ▼

[Save](#)[Knowledge and Skills Required](#)[My Evidence](#)

Knowledge of infections including HCAI modes of transmission, virulence, prevention, treatment and management



Awareness of national and local policies and guidelines that inform IPC practices



Be able to devise and develop posters, leaflets, and presentations to deliver key messages about IPC to patients, carers and staff



Participate, plan or manage educational initiatives (locally, nationally or internationally).



Demonstrate skills of critical analysis and evaluation of published literature and research studies

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Education

Domains

Develop own knowledge, skills and practice

Advise and educate patients, carers and all staff working in health and social care settings

Identify and respond to the need for learning opportunities using an evidence-based approach

Work with others to embed infection prevention and control within workforce and organisational development strategies

Competences

Clinical Practice	Achieved	Level
Demonstrate the ability to collect, collate and analyse data to inform practice using principles of epidemiology		
Interpret data and identify trends, patterns and anomalies to inform appropriate interventions, clinical practice and benchmarking.		
Ensure effective feedback and reporting of data to the appropriate people		
Work with estates, facilities, capital planning and laboratory services to plan preventative maintenance and advise on contract specifications. □		
Provide IPC input in the development of decontamination policies and procedures.		
Advise on actions that are required when decontamination processes are unsafe or ineffective and take necessary action to escalate concerns which compromises safety and quality.		
Develop guidance by critically analysing the evidence-base and interpreting national guidance and initiatives, presenting it in an understandable and accessible way for all health and social care staff.		
Identify the need for improvement and monitor the implementation of IPC policies and guidelines, facilitating changes where necessary.		
Assess the effectiveness of local policies and guidelines through audit, evaluation and bench marking.		
Demonstrate effective recognition and escalation of incidents and outbreaks.		
Participate in the management of incidents and outbreaks ensuring effective control measures are put in place, to include communication and documentation.		
Evaluate incidents and outbreaks and make recommendations for future improvements		
Quality Improvement	Achieved	Level
Recognise and identify where improvements in quality and patient safety can be effective		
Implement initiatives to drive quality improvement through behavioural and system changes.		
Evaluate, review and refine IPC practices		

IPS competences are designed for practitioners working in the field of Infection Prevention. They are set out in 4 domains which are designed to capture all aspects of infection prevention however, it is not anticipated that all users will be engaged in every aspect. The competences are designed for you to consider and reflect on your practice. If you are setting out in the speciality you may perform some of the clinical indicators totally unsupervised but may require guidance and support in others. As you develop your expertise and become highly proficient it is likely there are fewer areas where you will require supervision.

This section gives time for reflection on your 'Progress Report' and consider the levels of competency you have expressed and have provided evidence for. The domain 'Self- Assessment' will take you to a final stage to assess your overall level of practice as either Primary, Advanced or Expert. It is likely that you will achieve different levels across the domains. The competences are designed to assist and support you in the revalidation for practice process if your professional regulator requires you to undertake this.

Domain	Self Assessment Notes	Self Assessment	Manager Assessment Notes	Manager Assessment
Clinical Practice	<input type="text"/>	Not Selected ▼	<input type="text"/>	Not Selected ▼
Quality Improvement	<input type="text"/>	Not Selected ▼	<input type="text"/>	Not Selected ▼
Education	<input type="text"/>	Not Selected ▼	<input type="text"/>	Not Selected ▼
Leadership and Management	<input type="text"/>	Not Selected ▼	<input type="text"/>	Not Selected ▼
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Usage

- Within the first 3 weeks the tool was accessed 181 times
 - 145 users visited once
 - 36 users revisited the tool.
-
- The tool was accessed using PCs, smart phones, tablets, Amazon Fire, Apple and Android devices

Finally

- Provide a multi-purpose tool to support and inform service,
and Strategic planning, workforce development and management at an operational and strategic level.
- They can assist in designing education programmes
- Assist with staff appraisal, personal development plans
- Support staff in NMC revalidation (NMC, 2016) and other Health and Care Professional Council (HCPC) CPD requisites
- Support in developing team structures and role requirements.

Recognition of project colleagues

Competency Project Group:

- Dr Andrea Denton, Snr. Lecturer University of Huddersfield
- Carol Fry, Lead Nurse Chelsea & Westminster Hospital EPDC Member
- Tracey Gauci, Assistant Director of Nursing (Infection Prevention and Control), Abertawe Bro Morgannwg University Health Board.
- Alistair Knox, KLO Solutions
- Jude Robinson Lecturer, University of Nottingham
- Members of EPDC
- UK IPS Regional Educational Leads

Thank-
you for
listening

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