

# **Outcome Competences for Practitioners in Infection Prevention and Control**

**Margaret Tannahill**

Consultant Nurse Infection Prevention,  
The Care Inspectorate

IPS Education and Professional Development  
Committee Deputy Coordinator

**ANCI November 2011 Lisboa**

# Presentation outline

- Background and purpose
- Who are they for?
- Links to other frameworks
- What competences are included?
- Using the competences
- Structure and four domains
- Self-assessment against the competences

# Current Situation

- High profile profession
- Rapidly changing healthcare systems
- Evolving Infection Prevention and Control Teams
- Quality Improvement/Patient Safety Culture - “Zero tolerance”
- Increasing public awareness and media attention



# SKILLS SHORTAGE IN THE COUNTRY...



# Challenges for Infection Prevention

- Greater healthcare movement
- Changing host risk factors: ageing population
- More invasive clinical procedures
- Increasing antimicrobial resistance
- Increased surveillance, screening activities
- Information and performance feedback
- Competing priorities (e.g. targets; scarce resources)

# Background: Competences Development

- Infection Control Nurses Association (ICNA) (2001)
- ICNA (2004)
- IPSE (2008)
- Blue Sky Day (2008)
- UK wide partnership (2010)
- Publication of new framework (2011)



# Addressing the Challenges

- Infection Prevention and Control Practitioners - expert advice and support for healthcare delivery
- Pro-active and re-active
- Education and training
- Use data to drive improvement
- Clear direction to plan ahead
- Research
- Competent workforce



Infection Prevention  
Society

# Important Considerations

- Not 'one size fits all'
- Applicable for NHS and non-NHS
- Links to the Knowledge and Skills Framework (KSF) for personal development planning
- Multi professional competences
- Take account of current competences
- Include 'softer skills' and specialist knowledge and skills
- Workable and user friendly (Cooper 2008)



# Competence v Competency

- Competence

*‘the skills and ability to practice safely and effectively without the need for being supervised directly’ (NMC 2002)*

- Competency

*‘person-orientated, in reference to underlying characteristics and qualities that are indicative of effective performance of a job’ (McMullen 2003)*

# Links to other Frameworks

- National Health Service Knowledge and Skills Framework (KSF)
- Four domains of the Advanced Practitioner Toolkit for Modernising Nursing Careers
- Skills for Health: National Occupational Standards (NOS) and competences
- Department of Health advanced level nursing: a position statement
- NHS Leadership Qualities Framework

# The Competences

**Four advanced practice domains:**

**17 competences**

- Clinical Practice (6 competences)
- Education (4 competences)
- Research (3 competences)
- Leadership and Management (4 competences)

# Who can use the Competences?

- Organisations requiring expertise to drive forward the infection prevention and control agenda
- Managers of health and social care services
- Educational commissioners and providers
- Practitioners working at or near the advanced level of practice
- Practitioners who contribute to infection prevention and control and who have an interest in further development

# Why use the Competences?

- Provide clarity for roles and responsibilities
- Benchmarks for recruitment, appraisal and performance management
- Help development of specifications for services
- Contribute to education and training
- Contribute to continuous professional development
- Help development of practitioners working towards advanced practice

*“There are basically two types of people. People who accomplish things, and people who claim to have accomplished things. The first group is less crowded.”*

Mark Twain

# Structure of the Competences

- Competence statements
- Performance indicators aligned to each statement
- Generic and specific knowledge, understanding and skills
- Alignment to SfH NOS and KSF

## CLINICAL PRACTICE

### 1. Advise on the design, construction and modification of facilities to prevent and control infection in the built environment

#### Performance indicators

1. Work with others on plans for the design, construction and modification of facilities to improve safety and quality through infection prevention and control
  2. Advise on the infection prevention and control risk assessment criteria prior to a new build and in advance of any demolition or modification of a building consistent with current building guidance and legislation
  3. Liaise with key health and social care staff and others prior to and at every subsequent stage of the build, demolition or modification to ensure that infection prevention and control advice is effectively incorporated into the works
  4. Work in partnership with key health and social care staff to reduce the risk of infection to individuals, populations, staff and others during construction, demolition or modification activities
- On the completion of the works, review with individuals, populations, staff and others the effectiveness of the development for preventing and controlling infection.

#### Knowledge, understanding and skills

- a. Basic and applied microbiology, the chain of infection and the infection process / alert microorganisms and conditions / body defence mechanisms
- b. The significance of microbiological results / interpreting the diagnostic laboratory results and practices designed to break the chain of infection, for example standard and transmission based precautions including the placement of individuals and populations within care settings
- c. Antimicrobial stewardship – prudent prescribing of antimicrobials and the surveillance of antimicrobial resistant organisms
- d. Legislation, national guidance and outcomes / indicators relating to the design, construction and modification of the built environment in general and health and social care facilities in particular (eg ventilation, water sources, waste management, hygiene)
- e. Organisational strategy for new builds, refurbishments, planned programme maintenance
- f. Interpretation of architects' , estates' and facilities' plans for new builds, refurbishment and modification.

#### Links to the NHS Knowledge and Skills Framework DRAFT

This competence relates to the following dimensions and levels within the NHS KSF:  
EF2 Environments and Buildings Level 4

**Links to national occupational standards** The following national occupational standards relate to this competence: HSC 3117 *Conduct a health and safety risk assessment of a workplace* – see <https://tools.skillsforhealth.org.uk/competence/show?code=HSC3117>

Domain

Competence Statement

Performance Indicators

Knowledge, understanding & skills

Links to KSF and SfH NOS



# Domain – Clinical Practice

## Competence Statement

- Advise on the design, construction and modification of facilities to prevent and control infection in the built environment



# Performance Indicator

- Advise on the infection prevention and control risk assessment criteria prior to a new build and in advance of any demolition or modification of a building consistent with current building guidance and legislation



# Knowledge, Understanding and Skills

- Legislation, national guidance and outcomes/ indicators relating to design, construction and modification of the built environment in general and health and social care facilities in particular
  - Ventilation
  - Water sources
  - Waste management
  - Hygiene

# Links to NHS Knowledge and Skills Framework and NOS

- This competence relates to the following dimensions and levels within the NHS KSF:
- EF2 Environments and Buildings Level 4
- **Links to national occupational standards (NOS)**
- The following national occupational standards relate to this competence:
- HSC 3117 *Conduct a health and safety risk assessment of a workplace* – see <https://tools.skillsforhealth.org.uk/competence/show?code=HSC3117>

Self assessment and line manager feedback of Competence Statement 8 (Education)

Education		
8 Lead the development of the knowledge, skills and practice of the infection prevention and control team	Your Self Assessment	Line Manager's Feedback
<p><b>Performance indicators</b></p> <p>1.Encourage others to make accurate and credible assessments of their knowledge and skills, challenging complacency and actions which are not in the interests of safety and quality</p> <p>2.Identify and address gaps in knowledge, skills and competence of staff working within the infection prevention and control team</p> <p>3.Develop an environment that values learning and development and promotes a learning culture in the workplace</p> <p>4.Develop and inspire all members of the team to use their abilities to practise effectively and efficiently to deliver the infection prevention and control programme</p> <p>5.Work in partnership with members of the infection prevention and control team to include professional development as part of their personal development planning</p> <p>6.Alert relevant others to resource issues that affect learning, development and performance</p>		

Identification of learning needs, learning and development activities and actions and timescales based on self assessment of Competence Statement 8 (Education). *Identify one - three learning needs*  
Consider what evidence you could produce to demonstrate your competence:

Learning needs	Learning and development activities	Actions and timescale

# Benefits of Competency Document

*‘People with clear, written goals, accomplish far more in a shorter period of time, than people without them could ever imagine’ (Brian Tracey)*

Leading to:

- More skilled and effective workforce
- Increased overall safety and quality of care for patients and service users

# Sourcing the Competences?

- On the IPS website [www.ips.uk.net](http://www.ips.uk.net)
- *Journal of Infection Prevention* Volume 12 Issue 2 March 2011



*“The health of the people is really the foundation upon which all their happiness and all their powers as a state depend.”*

Benjamin Disraeli (1804-1881)

# Thank you