# Roadmap for Novice Infection Preventionist

Tasks, knowledge, skills, abilities, and resources to take an infection preventionist from day 1 on the job through passing the Certification in Infection Prevention and Control (CIC) exam.



Association for Professionals in Infection Control and Epidemiology

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#### **About APIC**

APIC's mission is to create a safer world through prevention of infection. The association's more than 15,000 members direct infection prevention programs that save lives and improve the bottom line for hospitals and other healthcare facilities. APIC advances its mission through patient safety, implementation science, competencies and certification, advocacy, and data standardization.

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# What is the Novice Roadmap?

The Novice Roadmap provides a general structure for your time on the job, from day 1 until you pass the CIC exam. It provides a list of job-specific knowledge, skills, and professional development goals, and even helps you create your personal library of infection prevention-related resources. However, the way you prioritize proceeding through the roadmap will vary from facility to facility and program to program. It will also depend on your background, level of experience, and resources available to you within your infection prevention program.

#### What does each stage cover?

- Stage 1: Your first two months on the job, a hectic time when you must learn the basics of infection prevention while also learning what surveillance is important in your facility and how to report what you find.
- Stage 2: In days 61- 120, you will continue to report what you observe, but should also connect with more people in your facility and expand your knowledge base.
- **Stage 3:** This stage runs from the end of the first four months to the end of the first year. By this point, you've learned infection prevention basics and can start to serve as your facility's source of infection prevention leadership and information.
- Stage 4: Stretches from after the first year until you've passed the CIC exam. We haven't included a specific end time for this stage because each person is a little different. You may find you are ready to pass the CIC exam after three years on the job or you may not be ready until after four or five years. There is no right or wrong time frame.

#### **How do I use the Novice Roadmap?**

Each stage builds on information you mastered in the previous stage. Thus, someone brand new to the job looks at all entries related to Stage 1. If you've been on the job for six months, then you should technically be in Stage 3. However, you need to have mastered all the skills and knowledge listed in Stages 1 and 2 before doing so.

# Should I have completed each stage during the suggested time allotted? Is it bad if I haven't finished by that time?

The dates are just a rough guide to when you should have done something or learned something. However, these aren't absolute deadlines. For example, some people may take longer than 60 days to get through Stage 1.

#### Do I have to get all the items listed in the Resources area?

We picked the items in the Resources area because they are well-known, highly respected information sources that all infection preventionists should have at their disposal. But although we've highlighted many free resources, we've also included some things that have an expense. (We've indicated when an item isn't free by putting a \$ next to it.)

Before you buy the resource, check around. It's possible that your facility (or maybe someone in your local APIC chapter) might have the resource and you can borrow it.

#### If I follow the Roadmap, will I pass the CIC exam?

Although we made sure that all the competencies listed in the CBIC Content Outline are found somewhere on the Roadmap, following the Roadmap is not a guarantee you will pass the CIC exam. However, doing so will increase your

chances of success on the job and will improve the likelihood that you will pass the exam.

# What about the Professional Development area? That's not on the CIC exam. Can I ignore all those tasks?

The Novice Roadmap does more than just prepare you to take the CIC exam. It also helps you develop as a professional, which will include tasks like networking with important people in your facility and developing your "soft skills," such as leadership. As such, we recommend strongly that you complete the Professional Development tasks, too.

#### Is there anything else I need to know about the Roadmap?

#### A few things:

- The Roadmap is a living document, which means the version you see right now may not be the Roadmap in a month. As technology, diseases, and other changes impact the lives of infection preventionists, APIC will update the Roadmap to keep pace and inform you when these changes occur (via APIC's weekly E-News and updates to our website.
- 2. When you see lists (like lists of healthcare-associated infections or lists of people you should know), please understand that those lists are not exhaustive. They are a good start, but you will probably find that you need to adjust them for your facility.
- 3. Let us know what you think! Is it useful? Is there something new to add? Any and all feedback is welcome! Just email us at education@apic.org.

#### **Acknowledgements**

The Association of Professionals in Infection Control and Epidemiology acknowledges the valuable contributions of each of the following individuals:

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# Roadmap Tasks

**Broken Down by CBIC Content Outline Area** 

On the pages that follow, we've broken down the Novice Roadmap into topics that align with the eight areas in the CBIC Content Outline (plus Professional Development). No task appears in multiple places.

Looking at the Roadmap this way lets you see how you will progress in mastering various skills and knowledge in your novice years as an infection preventionist.

#### Some key acronyms:

- IP Infection Preventionist
- **CDC** Centers for Disease Control and Prevention
- **CBIC** Certification Board of Infection Control and Epidemiology
- **CIC** Certification in Infection Prevention and Control
- HAI Healthcare-Associated Infection
- NHSN National Healthcare Safety Network

# **Professional Development**

Stage 1: Days 1 - 60	<b>Stage 2:</b> Days 61 - 120	Stage 3: Days 121- End of Year 1	Stage 4: Beginning of year 2 - Passing the CIC Exam
Become familiar with APIC:  Join local APIC chapter  Browse APIC website  Complete your APIC member profile  Find a mentor (This can be done through your local chapter or through apic.org)	Become familiar with outside expert resources:  APIC (national and local chapter)  State & local health department  CDC	Network with other IPs to discuss common concerns and solutions	Volunteer in local chapter
Subscribe to APIC IP Talk & other lists, as appropriate	Start watching APIC monthly webinars	Take EPI® 101 and APIC's online class, "Microbiology 101 for Infection Preventionists"	Take EPI®102
Introduce yourself to facility personnel with whom you will interact:  Lab/microbiologist Employee health Infectious disease physicians	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	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	Shadow in areas of unique population or in areas in which you are unfamiliar

<b>Stage 1:</b> Days 1 - 60	<b>Stage 2:</b> Days 61 - 120	Stage 3: Days 121- End of Year 1	Stage 4: Beginning of year 2 - Passing the CIC Exam
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	Continue training:  Learn how to present your data (e.g., using PowerPoint to make basic tables, graphs)	Reassess IT needs identified in first 120 days and address any newly identified needs	
	Develop your skills:  Time management	Develop your skills:  Leadership methods  Effective communication  Change management  Project management  Influence  Facilitation  Presentation skills  Basic statistics  Managing people	<ul> <li>Continue to develop your soft skills:</li> <li>Developing a business case for your program</li> <li>Leadership methods</li> <li>Performance improvement science</li> </ul>
		Create a personalized development plan (e.g., set goals, development and maintenance of competency)	<ul> <li>Prepare for the CIC® examination:</li> <li>Apply for Competency         Advancement Award (CAA) grant         or state sponsored scholarship         opportunities (if available)</li> <li>Review the CBIC Candidate         Handbook</li> <li>Take APIC's online certification         review class</li> <li>Study APIC Text</li> <li>Connect with chapter study group         (if one exists)</li> </ul>

#### **Suggested resources for Professional Development:**

- APIC Text (hard copy/online) \$
- The Infection Preventionist Guide to Long-Term Care (if work in LTC) \$ State Hospital Licensing Rules (if applicable)
- APIC/JCR Infection Prevention and Control Workbook \$
- Certification Study Guide, current edition \$

- CMS Survey Work sheet

#### **Identification of Infectious Disease Processes**

<b>Stage 1:</b> Days 1 - 60	<b>Stage 2:</b> Days 61 - 120	Stage 3: Days 121- End of Year 1	Stage 4: Beginning of year 2 - Passing the CIC Exam
Learn infectious disease processes:  Describe how to interpret diagnostic/laboratory reports  Know the following terms associated with the infectious disease process: Define colonization, infection, and contamination Geographic distribution Reservoirs Incubation periods Periods of communicability Modes of transmission Signs and symptoms Susceptibility	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	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	Recognize limitations and advantages of the types of tests used to diagnose infectious processes
Identify appropriate practices for specimen collection, transportation, handling, and storage (e.g., blood, wound, respiratory, and urine specimens)	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		

Suggested resources for Identification of Infectious Disease Processes:

- APIC Text (hard copy/online) \$
- Ready Reference for Microbes, current edition \$

- The Infection Preventionist Guide to the Lab \$
- Control of Communicable Disease Manual \$
- Red Book American Academy of Pediatrics \$

# Surveillance and Epidemiologic Investigation

<b>Stage 1:</b> Days 1 - 60	<b>Stage 2:</b> Days 61 - 120	Stage 3: Days 121- End of Year 1	Stage 4: Beginning of year 2 - Passing the CIC Exam	
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?	<ul> <li>Based on surveillance information gained in first 60 days, develop/revise surveillance plan as needed:</li> <li>Assess and define populations to be studied based on your specific facility findings</li> <li>Determine regulatory requirements</li> <li>Include significant organisms for your facility you learned from your lab results</li> <li>Be specific about what data your facility gathers currently and what, if anything, needs to change</li> </ul>	Continue to update your surveillance plan:  • Evaluate it (and schedule to evaluate it every six months or sooner, e.g., when NHSN definitions change)		
	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	Identify infection prevention strategies used in your facility's unique populations/services		

<b>Stage 1:</b> Days 1 - 60	<b>Stage 2:</b> Days 61 - 120	Stage 3: Days 121- End of Year 1	Stage 4: Beginning of year 2 - Passing the CIC Exam
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)	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 [SIR])  Calculate risk stratified rates  Incorporate post-discharge surveillance findings into calculation of rates	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? (data, findings, recommendations)  How is it reported (written & verbal)?  Who receives the reports?  How often?	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
Determine your facility's process for identifying individuals with communicable diseases requiring transmission based precautions	Establish mechanisms for response to individuals with communicable diseases requiring follow-up (e.g., vaccination, antiviral/antimicrobial treatment)		
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	Continue to learn about important infectious diseases, such as:  Viral Hepatitis HIV/AIDS MERS - Coronavirus Norovirus	Create a notification system based on surveillance plan, including epidemiologically significant findings.	

<b>Stage 1:</b> Days 1 - 60	<b>Stage 2:</b> Days 61 - 120	Stage 3: Days 121- End of Year 1	Stage 4: Beginning of year 2 - Passing the CIC Exam
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.)	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)	Be familiar with your facility's antibiogram  Participate with facility antimicrobial stewardship program (if applicable)	Provide guidance on how to interpret and generate action following antibiogram review
Begin to learn the steps to investigate a cluster/outbreak:  • Verify diagnosis of reported cases	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	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	Prepare reports for dissemination, evaluate strategies implemented for control

<b>Stage 1:</b> Days 1 - 60	<b>Stage 2:</b> Days 61 - 120	Stage 3: Days 121- End of Year 1	Stage 4: Beginning of year 2 - Passing the CIC Exam
<ul> <li>Enroll in NHSN and complete the mandatory CDC NHSN training:</li> <li>Apply for Secure Access Management Services, or SAMS</li> <li>Use standardized definitions for the identification of outcomes and processes</li> <li>Note: It is important to enroll in NHSN early!</li> </ul>	Review NHSN case studies: Find NHSN event form Submit data to NHSN Review NHSN newsletters	Attend or view NHSN training update:  • Ensure quality of data submission using NHSN guidance tools	Learn NHSN advanced analysis/building custom reports
<ul> <li>External public reporting of HAIs:</li> <li>What Centers for Medicare &amp; Medicaid Services (CMS) HAI reporting is required for your facility?</li> <li>What are your state HAI reporting requirements?</li> <li>What is your facility's reporting process?</li> <li>What are the reporting timelines/due dates?</li> </ul>	Access CMS Hospital Compare and state reporting website to locate your facility data:  Utilize these websites to compare your data to other facilities	Learn effective ways to communicate facility publicly reported HAI status to key stakeholders:  Senior leadership Committee Physicians Frontline staff	
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	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		

# Suggested resources for Surveillance and Epidemiologic Investigation:

- NHSN Patient Safety Manual
- APIC Text (hard copy/online) \$
- The Infection Preventionist Guide to Long-Term Care (if work in LTC) \$
- Ready Reference for Microbes, current edition \$
- The Infection Preventionist Guide to the Lab \$
- Control of Communicable Disease Manual \$
- Red Book American Academy of Pediatrics \$
- CDC's "CRE Toolkit Guidance for Control of Carbapenemresistant Enterobacteriaceae"

# **Preventing/Controlling the Transmission of Infectious Agents**

<b>Stage 1:</b> Days 1 - 60	<b>Stage 2:</b> Days 61 - 120	Stage 3: Days 121- End of Year 1	Stage 4: Beginning of year 2 - Passing the CIC Exam
Locate facility manuals/ procedures, including: Infection prevention Administrative Nursing Safety	Review infection prevention manual:  Develop schedule for reviewing/ revising	Develop evidence-based/informed infection prevention and control policies and procedures	Review, and become involved in development of, policies of other facility departments, as needed
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	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		
<ul> <li>Hand hygiene:</li> <li>Read CDC guidelines and World Health Organization guidelines</li> <li>Read your facility's policy for hand hygiene</li> <li>Know when hand hygiene must occur</li> <li>Determine if monitoring of hand hygiene compliance is done at your facility</li> <li>If so, how and by whom?</li> <li>Read policies for surgical hand scrub</li> <li>Determine your state fire code for use of alcohol hand gel</li> <li>See National Fire Protection Association (NFPA) life safety codes</li> </ul>	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	Describe justification for elimination of artificial nails in patient care areas  Develop a process for reporting hand hygiene monitoring compliance to stakeholders	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

<b>Stage 1:</b> Days 1 - 60	<b>Stage 2:</b> Days 61 - 120	Stage 3: Days 121- End of Year 1	Stage 4: Beginning of year 2 - Passing the CIC Exam
Review the Standard Precautions/ Transmission-Based Precautions policies and procedures for your facility:  • Know when standard, contact, droplet, or airborne infection isolation (All) 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 (in Isolation Guidelines	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	Monitor effectiveness of isolation precautions  Determine process for isolation patients receiving therapeutic treatment and procedures	Communicate compliance with isolation precautions to key stakeholders (Infection Prevention & Control Committee, departments, etc.)

Stage 1: Days 1 - 60  Locate and become familiar with your facility's tuberculosis (TB) control plan  Determine what is done if a known or suspected case of TB is admitted to your facility	Stage 2: Days 61 - 120	Stage 3: Days 121- End of Year 1  Perform annual TB risk assessment	Stage 4: Beginning of year 2 - Passing the CIC Exam
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	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	Monitor CLABSI prevention processes (e.g., bundle compliances)	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
Pneumonia prevention:  Read SHEA Compendium, APIC Elimination Guide, HICPAC guidelines, IHI bundles	Learn about pneumonia prevention activities at your facility:  Head of the bed elevated Sedation vacations Weaning protocols Patient immunization Staff training	Monitor pneumonia prevention processes (e.g., bundle compliance)	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

<b>Stage 1:</b> Days 1 - 60	<b>Stage 2:</b> Days 61 - 120	Stage 3: Days 121- End of Year 1	Stage 4: Beginning of year 2 - Passing the CIC Exam
Catheter-associated urinary tract infection (CAUTI) prevention:  Read SHEA Compendium, APIC Elimination Guide, HICPAC guideline, IHI bundles	Learn about CAUTI prevention activities at your facility:  Indications for use of indwelling urinary catheter established	Monitor CAUTI prevention processes	Develop strategies to improve CAUTI prevention process compliance Explore CAUTI prevention
guideline, irii bundles	<ul><li>Insertion practices</li><li>Maintenance of catheter</li><li>Removal protocols</li><li>Staff training</li></ul>		collaboratives and consider participating. These collaboratives may be found in:  State health departments
			<ul><li>Quality improvement organizations</li><li>Hospital associations</li></ul>
Surgical site infection (SSI) prevention:  Read SHEA Compendium, APIC Elimination Guides, HICPAC guideline, Association of periOperative Registered Nurses (AORN) standards	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	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	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
<ul> <li>Clostridium difficile (C. difficile):</li> <li>Read SHEA Compendium, APIC Elimination Guide</li> <li>Learn about:</li> <li>Transmission</li> <li>Risk factors</li> <li>Complications</li> <li>Role of environment</li> <li>Treatment options</li> </ul>	Learn about <i>C. difficile</i> 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	Monitor Contact Precautions compliance  Be familiar with your facility's antimicrobial stewardship program and your role with the team	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

<b>Stage 1:</b> Days 1 - 60	<b>Stage 2:</b> Days 61 - 120	Stage 3: Days 121- End of Year 1	Stage 4: Beginning of year 2 - Passing the CIC Exam
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 Gramnegative rods (extended spectrum beta lactamase ESBL, carbapenem-resistant Enterobacteriaceae [CRE], Acinetobacter baumannii, etc.)	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	Monitor Contact Precautions compliance  Be familiar with your facility's antibiogram  Be familiar with your facility's antimicrobial stewardship program and your role with the team	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  Provide guidance on how to interpret and generate action following antibiogram review
Learn about safe injection practices:  Review the online "One and Only Campaign" materials	Review safe injection practice policies for departments, especially nursing and anesthesia	Incorporate safe injection practices into your department rounding	Learn about outbreaks that have occurred in different settings as a result of breaks in infection prevention practices

<b>Stage 1:</b> Days 1 - 60	<b>Stage 2:</b> Days 61 - 120	Stage 3: Days 121- End of Year 1	Stage 4: Beginning of year 2 - Passing the CIC Exam
Find and review your facility's emergency response plan	Understand your role in your facility's emergency response plan:  Influx of patients (bioterrorism,	Understand your role in community emergency response:  Contact your community's	Review/revise emergency preparedness plans
	emerging infectious diseases, syndromic surveillance)	<ul> <li>emergency response team</li> <li>Collaborate with relevant groups and agencies in planning community/facility responses to biologic threats and disasters (e.g., anthrax, influenza, flooding)</li> </ul>	Learn infection prevention practices to prevent transmission of bioterrorism agents:  Learn signs and symptoms of bioterrorism agents
		Learn about commonly recognized bioterrorism agents and how they are transmitted:	
		<ul><li>Anthrax</li></ul>	
		■ Plague	
		• Tularemia	
		<ul><li>Q fever</li><li>Brucella</li></ul>	
		Smallpox	
		Botulism	
Identify your facility's therapeutic and diagnostic procedures (e.g., dialysis, angiography, bronchoscopy, endoscopy)	Learn about infection risks associated with your facility's therapeutic and diagnostic procedures (e.g., dialysis, angiography, bronchoscopy, endoscopy)	Implement infection prevention and control strategies related to therapeutic and diagnostic procedures (e.g., dialysis, angiography, bronchoscopy, endoscopy)	
Nutrition services:  Review policies for:	Know microorganisms commonly involved in foodborne illnesses	Know steps involved in foodborne outbreak management	
<ul> <li>Safe preparation (clean, separate, cook, chill)</li> </ul>			
Safe handling and food storage			
Safe temperature zone			
<ul> <li>Sanitation of trays, utensils, equipment, and surfaces</li> </ul>			
<ul> <li>Hand hygiene and glove use during food preparation</li> </ul>			

<b>Stage 1:</b> Days 1 - 60	<b>Stage 2:</b> Days 61 - 120	Stage 3: Days 121- End of Year 1	Stage 4: Beginning of year 2 - Passing the CIC Exam
Determine what infection prevention-specific products are in use and where (e.g., alcohol-based hand sanitizer, PPE, safety devices)	Determine non-infection prevention- specific products used in your facility that impact infection prevention (e.g., dressings, connectors, IV supplies)	<ul> <li>Understand your facility's product process:</li> <li>What is your facility's procedure for introducing new products?</li> <li>Determine process for dealing with recalls (equipment, food, medication and supplies)</li> </ul>	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)
		Locate USP797 pharmacy regulations that pertain to infection control	Assess your pharmacy's compliance with USP797 regulations that pertain to infection control:  • Make recommendations based on your assessment
Suggested resources for Preventing/Controlling the Transmission of Infectious Agents:  • APIC Text (hard copy/online) \$  • The Infection Preventionist Guide to Long-Term Care (if work in LTC) \$  • Ready Reference for Microbes, current edition \$  • APIC Infection Prevention Elimination Guides  • Compendium of Strategies to Prevent Healthcare Associated Infections in Acute Care Hospitals  • Control of Communicable Disease Manual \$  • Red Book - American Academy of Pediatrics \$  • CDC Guide to Infection Prevention in Outpatient Settings: Minimum Expectations for Safe Care		<ul> <li>Institute for Healthcare Improvement</li> <li>AORN Preoperative Standards and</li> <li>AAMI ST 79 - Steam Sterilization</li> <li>AAMI ST58 - Chemical Sterilization</li> <li>APIC EVS topic web page</li> <li>Scientific Guidelines from APIC, CE</li> <li>Guidelines for Design and Construction</li> <li>The CDC Healthcare Infection Concommittee, or HICPAC, Guideline</li> </ul>	Recommended Practices \$ and High Level Disinfection \$ DC, or other credible sources action of Hospitals and es Guidelines Institute \$

# **Employee/Occupational Health**

Stage 1 Days 1 -		<b>Stage 2:</b> Days 61 - 120	Stage 3: Days 121- End of Year 1	Stage 4: Beginning of year 2 - Passing the CIC Exam
and facility	; B	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	Review and develop screening and immunizations programs to protect healthcare worker from new agents and exposures	
worker cor exposure: Incubation Mode of Periods of	ity plan for healthcare mmunicable disease on periods transmission of communicability d symptoms	Guide occupational health with healthcare worker follow-up of exposures to communicable diseases:  TB  Neisseria meningitidis Pertussis	Be familiar with how physicians, students, contract workers, patients and visitors are handled in your facility if there is a communicable disease exposure	Assist with providing guidance for counseling, testing, treatment, prophylaxis and work restrictions following communicable disease exposure
	rrent facility process for worker illness or sick	Confirm IP authority to require work restriction of healthcare worker in event of communicable disease transmission risk	Assist occupational health with analysis & trending of illnesses of healthcare worker data	
<ul> <li>(BBP) Expethe OSHA</li> <li>Learn ab HIV trans</li> <li>What is confection.</li> <li>Learn how (Universe contact we potential)</li> <li>What transtaff? (Reference)</li> </ul>	out Hepatitis B, C, and smission considered potentially s material?  w Standard Precautions al) are used to prevent with blood or other lly infectious material ining is available for equired by Occupational and Health Administration,	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	Provide counseling, work restriction recommendations related to BBP exposure	Conduct annual review of facility BBP exposure control plan  Assist with analysis & trending of data from BBP exposure:  Prepare annual sharps safety risk assessment per Federal OSHA

<b>Stage 1:</b> Days 1 - 60	<b>Stage 2:</b> Days 61 - 120	Stage 3: Days 121- End of Year 1	Stage 4: Beginning of year 2 - Passing the CIC Exam
Determine type of testing performed to monitor staff for exposure to TB and development of TB disease  Annual PPD, blood assay testing	Utilize CDC recommendations to determine TB screening frequency of healthcare workers	Be familiar with respirator fit testing:  TB healthcare worker history screening  N-95 particulate respirator versus PAPR	
Describe what annual healthcare worker influenza vaccination campaign is in place  Determine CMS and state healthcare worker influenza vaccination reporting requirements:  Where will you get this data?  How do you report this in NHSN?	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	Analyze seasonal influenza coverage for facility by profession (e.g., medical staff, doctors, nurses):  Research and implement methods for improving facility compliance rate	

#### Suggested resources for Employee Health:

- APIC Text (hard copy/online) \$
- The Infection Preventionist Guide to Long-Term Care (if work in LTC) \$
- Epidemiology and Prevention of Vaccine-Preventable Diseases (Pink Book)
- NHSN Healthcare Personnel Safety Component Protocol
- OSHA Bloodborne Pathogens Standard and Q&A
- Control of Communicable Disease Manual \$
- OSHA Respiratory Protection Standard
- Clinicians' Post Exposure Prophylaxis Hotline (PEPline)or call: (888) 448-4911

# **Management and Communication (Leadership)**

<b>Stage 1:</b> Days 1 - 60	<b>Stage 2:</b> Days 61 - 120	Stage 3: Days 121- End of Year 1	Stage 4: Beginning of year 2 - Passing the CIC Exam
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	<ul> <li>Answer these questions:</li> <li>What is your facility's chain of command?</li> <li>What is the structure of your Infection Prevention/Quality Committee? When does it meet?</li> </ul>	Learn your leadership's priorities and engage them  Participate in your facility's budgeting process, as needed:  Recommend specific equipment, personnel, and resources for the Infection Prevention and Control Program	Begin to formulate actions steps to making your infection prevention business case
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	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	Develop and review/revise your infection control program plan:  Mission and vision statement  Goals  Measurable objectives  Action plans  Put date on your calendar to revisit the risk assessment at least every six months	Conduct risk assessment and develop infection prevention plan for the following year  Recommend changes in practice based on current evidence, clinical outcomes, and financial implications

<b>Stage 1:</b> Days 1 - 60	<b>Stage 2:</b> Days 61 - 120	Stage 3: Days 121- End of Year 1	Stage 4: Beginning of year 2 - Passing the CIC Exam
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	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	Determine your role during an accreditation survey or health department/CMS inspection  Use CMS infection control worksheet to assess readiness	

#### Management and Communication (Leadership), continued

<b>Stage 1:</b> Days 1 - 60	<b>Stage 2:</b> Days 61 - 120	Stage 3: Days 121- End of Year 1	Stage 4: Beginning of year 2 - Passing the CIC Exam
	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	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)	

#### Suggested resources for Management and Communication:

- APIC Text (hard copy/online) \$
- The Infection Preventionist Guide to Long-Term Care (if work in LTC) \$
- APIC/JCR Infection Prevention and Control Workbook \$
- The Joint Commission Infection Prevention Standards Chapter

# **Education and Research**

<b>Stage 1:</b> Days 1 - 60	<b>Stage 2:</b> Days 61 - 120	Stage 3: Days 121- End of Year 1	Stage 4: Beginning of year 2 - Passing the CIC Exam
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 healthcare workers trained for bloodborne pathogens prior to exposure to blood and body fluids in their work setting? (requirement of OSHA)  How are healthcare workers trained on tuberculosis?  Do you teach new residents? Do you teach new physicians?	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, computerbased, video, etc.)  • If live, what is the schedule?  • How are licensed independent practitioners (LIPs) and residents given annual education?	Update orientation and annual education	
	Identify your facility's patient, family, and visitor IPC education process	Facilitate effective education of patients, families, and others regarding prevention and control measures	Develop and implement strategies that engage the patient, family, and others in activities aimed at preventing infection
	Learn how to do a literature search:  Learn how to use PubMed	Learn how to critically review literature  Facilitate incorporation of applicable research findings into practice	Recognize the appropriate epidemiologic study to investigate a problem:  Case control, cohort studies

#### Education and Research, continued

<b>Stage 1:</b> Days 1 - 60	<b>Stage 2:</b> Days 61 - 120	Stage 3: Days 121- End of Year 1	Stage 4: Beginning of year 2 - Passing the CIC Exam
	<ul> <li>Learn basics of adult education</li> <li>What makes adults different from other learners?</li> <li>Learn how best to develop materials for adults:</li> <li>What training needs does the staff have?</li> <li>Develop learning objectives based on those needs</li> <li>Create lesson plans based on the objectives</li> </ul>	<ul> <li>Develop/deliver educational materials for in-services:</li> <li>What important research needs to be implemented by staff?</li> <li>Reactive (e.g., new pandemic erupts and you need to train the staff)</li> <li>Proactive (e.g., basics of infectious disease, transmission, prevention; hand hygiene)</li> <li>Provide immediate feedback, education, and/or training when lapses in practice are observed</li> </ul>	Develop evaluation plan to assess success/failure of your training (e.g., observation of practices, process measures)
Suggested resources for Educate  • APIC Text (hard copy/online) \$	ation and Resources	The Infection Preventionist Guide to	o Long-Term Care (if work in LTC) \$

# **Environment of Care**

<b>Stage 1:</b> Days 1 - 60	<b>Stage 2:</b> Days 61 - 120	Stage 3: Days 121- End of Year 1	Stage 4: Beginning of year 2 - Passing the CIC Exam
Familiarize yourself with housekeeping (i.e., environmental services [EVS]) policies. For example:  • What are your facility's policies for environmental cleaning?	<ul> <li>Learn facility policies for:</li> <li>Pest control practices (e.g., bed bugs)</li> <li>Waste management: Handling, storage, and transport of biohazardous waste</li> <li>Cleaning in special circumstances and populations (e.g., surgery, NICU)</li> </ul>	Collaborate with EVS to review and approve policies	Recommend revisions to EVS policies as needed, based on new and emerging diseases and threats
Familiarize yourself with housekeeping/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?	Determine how cleaning effectiveness is monitored	Collaborate with EVS to report cleaning effectiveness to key stakeholders (e.g., infection control committee, frontline staff, administration)	
Familiarize yourself with the products your housekeeping/EVS personnel are using.  Learn about characteristics of different classes of disinfectants (e.g., quaternary ammonium compounds, phenolics, bleach, hydrogen peroxide)	Identify products your housekeeping/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)?	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  Collaborate with EVS on exploring/selecting new cleaning technologies	Participate in cost benefit assessment, efficacy studies, and product evaluation:  Recommend changes in practice based on product trials
Facilities maintenance, renovation and construction:  What are your facility's infection prevention related policies on maintenance, renovation, and construction?	Learn basics of construction phases as they impact infection prevention:  Design Renovation Demolition Maintenance Repair	Locate your facility's infection prevention construction policy and infection control risk assessment tool (ICRA)  Participate in pre-construction/ renovation meetings to provide guidance for infection control risks	Develop contingency plan for potential utility outages, based on the project risk assessment

Stage 1: Days 1 - 60		<b>Stage 2:</b> Days 61 - 120	Stage 3: Days 121- End of Year 1	Stage 4: Beginning of year 2 - Passing the CIC Exam
Learn basics of and morequirements for your water system:  • Legionella prevention • Dialysis systems	facility's	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?	Review and/or develop policies related to your facility's water management system (e.g., Legionella prevention, dialysis systems, fountains and fish tanks)	Develop contingency plan for water outage
Learn basics of, and m requirements for, heat ventilation and air con (HVAC) systems:  Positive and negative differentials Air exchange require specific areas Levels of air filtration filtration) Parameters for humi	ting, nditioning e air ements for n (e.g., HEPA	<ul> <li>Learn your facility's HVAC-related policies and practices</li> <li>How is it monitored?</li> <li>What is the monitoring schedule?</li> <li>What is done in the event of an abnormal finding?</li> <li>Determine your authority to take action in the event of an abnormal finding</li> </ul>		Develop contingency plan for potential HVAC outages

#### Suggested Resources for Environment of Care:

- APIC Text (hard copy/online) \$
- Control of Communicable Diseases Manual
- AORN Preoperative Standards and Recommended Practices \$
- APIC EVS topic web page
- Guidelines for Design and Construction of Hospitals and Outpatient Facilities The Facilities Guidelines Institute \$
- Certification Study Guide, current edition \$
- Compendium of Strategies to Prevent Healthcare Associated Infections in Acute Care Hospitals

# Cleaning, Sterilization, Disinfection, Asepsis

<b>Stage 1:</b> Days 1 - 60	<b>Stage 2:</b> Days 61 - 120	Stage 3: Days 121- End of Year 1	Stage 4: Beginning of year 2 - Passing the CIC Exam
Disinfection and sterilization of equipment:  Learn the Spaulding classification of disinfection and sterilization  Differentiate between cleaning, disinfection, high-level disinfection and sterilization	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	Determine if your facility participates in reuse of single-use devices:  Determine appropriate practices for reprocessing single-use devices	Learn the special disinfection/ sterilization requirements for resilient pathogens. For example:  Creutzfeldt-Jakob Disease (CJD)  Human Papillomavirus (HPV)  After observation of high-level disinfection and sterilization processes at your facility, determine if practices meet guidelines and update policies and procedures as needed
		Assess products under evaluation for their ability to be reprocessed:  Manufacturers guidelines  End users  Product team	
	Learn the importance of decontamination of instruments/scopes	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	
Suggested Resources for CSDA:  APIC Text (hard copy/online) \$  Control of Communicable Diseases Manual  AAMI ST 79 - Steam Sterilization \$		<ul> <li>AAMI ST58 - Chemical Sterilization</li> <li>APIC Scientific Guidelines</li> <li>CDC and other scientific publication</li> <li>Certification Study Guide, current e</li> </ul>	ns and guidelines

# Roadmap Tasks Broken Down by Stage

On the pages that follow, we've broken down the Novice Roadmap by stages:

To use the Roadmap by stages, you will need the following key:

**Stage 1:** Days 1-60

**Stage 2:** Days 61-120

Stage 3: Days 121 - end of year 1

#### Stage 4: Beginning of year 2 - passing the CIC exam

Looking at the Roadmap this way gives you a more detailed view of what you will do and learn in each stage. It also gives you an idea of the resources you will need for each stage.

#### Some key acronyms:

IP - Infection Preventionist

**CDC** - Centers for Disease Control and Prevention

**CBIC -** Certification Board of Infection Control and Epidemiology

**CIC -** Certification in Infection Prevention and Control

HAI - Healthcare-Associated Infection

NHSN - National Healthcare Safety Network

#### Tracks:

PD - Professional Development

**ID** - Identification of Infectious Disease Processes

**SUR -** Surveillance and Epidemiologic Investigation

**IA -** Preventing/Controlling the Transmission of Infectious Agents

E/OH - Employee/Occupational Health

**MCL -** Management and Communication (Leadership)

**E/R** - Education and Research

**EC** - Environment of Care

**CSDA -** Cleaning, Sterilization, Disinfection, Asepsis

# **Stage 1:** Days 1 - 60

Task/skill		Track
Become familiar with APIC:		PD
Join local APIC chapter	<ul> <li>Complete your APIC member profile</li> </ul>	
Browse APIC website	<ul><li>Find a mentor</li></ul>	
Subscribe to APIC IP Talk & other lists as appropriate		PD
Introduce yourself to facility personnel with whom you will into	eract:	PD
<ul> <li>Lab/microbiologist</li> </ul>		
<ul> <li>Employee health</li> </ul>		
<ul> <li>Infectious disease physicians</li> </ul>		
Assess your IT [information technology] needs:		PD
What software programs do you have/need?	What access/passwords do you need?	
• What training do you need for those programs?	<ul> <li>Learn your facility's electronic medical records system</li> </ul>	
Learn infectious disease processes:		ID
<ul> <li>Describe how to interpret diagnostic/laboratory reports</li> </ul>		
<ul> <li>Know the following terms and information associated with ea</li> </ul>	ch infectious disease process:	
Define colonization, infection, and contamination	<ul> <li>Periods of communicability</li> </ul>	
Geographic distribution	<ul> <li>Modes of transmission</li> </ul>	
◆ Reservoirs	<ul> <li>Signs and symptoms</li> </ul>	
◆ Incubation periods	Susceptibility	
Identify appropriate practices for specimen collection, transpo	ortation, handling and storage	ID
(E.g., blood, wound, respiratory and urine specimens)		
Assess the surveillance plan for your facility:		SUR
• What data does your facility already gather?		
Where do you get your data?		
What data do you need?		
Review your facility's surveillance data for these HAIs:		SUR
<ul> <li>Central line-associated bloodstream infections (CLABSI)</li> </ul>	<ul> <li>MRSA bacteremia</li> </ul>	
<ul> <li>Catheter-associated urinary tract infections (CAUTI)</li> </ul>	<ul><li>Ventilator-associated events (VAE)</li></ul>	
<ul><li>Surgical site infections (SSIs)</li></ul>	<ul><li>Ventilator-associated pneumonia (pediatrics)</li></ul>	
Clostridium difficile		
Determine your facility's process for identifying individuals with	communicable diseases requiring transmission based precautions	SUR

Task/skill		Track
Identify epidemiologically significant infectious department for complete list):	s diseases that require immediate review and investigation (Check with state health	SUR
<ul><li>Tuberculosis</li></ul>	<ul><li>Pertussis</li></ul>	
<ul> <li>Neisseria meningitidis</li> </ul>	<ul> <li>Varicella</li> </ul>	
<ul><li>Influenza</li></ul>	<ul><li>Mumps</li></ul>	
<ul><li>Measles</li></ul>		
Learn about multidrug-resistant organisms (MI	DRO) identification and infection prevention implications, for example:	SUR
<ul> <li>Methicillin-resistant Staphylococcus aureus (M</li> </ul>	IRSA),	
<ul> <li>Vancomycin-resistant Enterococcus (VRE),</li> </ul>		
<ul> <li>Multidrug-resistant Gram-negative rods (exter Acinetobacter baumannii, etc.)</li> </ul>	nded spectrum beta lactamase ESBL, carbapenem-resistant Enterobacteriaceae [CRE],	
Begin to learn the steps to investigate a cluster	/outbreak:	SUR
<ul> <li>Verify diagnosis of reported cases</li> </ul>		
Enroll in NHSN and complete the mandatory Cl	DC NHSN training:	SUR
<ul> <li>Apply for Secure Access Management Service</li> </ul>	es, or SAMS	
<ul> <li>Use standardized definitions for the identifica</li> </ul>	tion of outcomes and processes	
Note: It is important to enroll in NHSN early!		
External public reporting of HAIs:		SUR
<ul> <li>What Centers for Medicare &amp; Medicaid Service</li> </ul>	es (CMS) HAI reporting is required for your facility?	
<ul> <li>What are your state HAI reporting requirement</li> </ul>	nts?	
• What is your facility's reporting process?		
What are the reporting timelines/due dates?		
Meet local health department contact:		SUR
Call and introduce yourself and establish a rel	ationship	
<ul> <li>Know the list of reportable diseases identified</li> </ul>	by your state health department and reporting requirements	
Locate facility manuals/procedures, including:		IA
<ul><li>Infection prevention</li></ul>	<ul><li>Nursing</li></ul>	
<ul> <li>Administrative</li> </ul>	<ul><li>Safety</li></ul>	
Identify and define each of the components co	mprising the chain of infection:	IA
<ul> <li>Infectious agent</li> </ul>	<ul><li>Mode of transmission</li></ul>	
<ul> <li>Reservoir</li> </ul>	<ul><li>Portal of entry</li></ul>	
<ul><li>Portal of exit</li></ul>	<ul> <li>Susceptible host</li> </ul>	

Task/skill	Track
<ul> <li>Hand hygiene:</li> <li>Read CDC guidelines and World Health Organization guidelines</li> <li>Read your facility's policy for hand hygiene</li> <li>Know when hand hygiene must occur</li> <li>Determine if monitoring of hand hygiene compliance is done at your facility. If so, how and by whom?</li> <li>Read policies for surgical hand scrub</li> <li>Determine your state fire code for use of alcohol hand gel</li> <li>See National Fire Protection Association (NFPA) life safety codes</li> </ul>	IA
Review the Standard Precautions/Transmission-Based Precautions policies and procedures for your facility:  Know when standard, contact, droplet, or airborne infection isolation (All) 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

Task/skill		Track
Learn about multidrug-resistant organisms (MDROs) and their implicati	ons:	IA
<ul><li>Identification</li><li>Transmission</li></ul>	<ul><li>Risks</li><li>Complications</li></ul>	
Examples include:		
<ul> <li>Methicillin-resistant Staphylococcus aureus (MRSA)</li> <li>Vancomycin-resistant Enterococcus (VRE)</li> </ul>	<ul> <li>Multidrug-resistant Gram-negative rods (extended spectrum beta lactamase ESBL, carbapenem-resistant Enterobacteriaceae [CRE], Acinetobacter baumannii, etc.)</li> </ul>	
Learn about safe injection practices:		IA
<ul><li>Review the online "One and Only Campaign" materials</li></ul>		
Find and review your facility's emergency response plan		IA
Identify your facility's therapeutic and diagnostic procedures (e.g., dial	ysis, angiography, bronchoscopy, endoscopy)	IA
Nutrition services:  Review policies for: Safe preparation (clean, separate, cook, chill) Safe handling and food storage Safe temperature zone	<ul> <li>Sanitation of trays, utensils, equipment, and surfaces</li> <li>Hand hygiene and glove use during food preparation</li> </ul>	IA
Determine what infection prevention-specific products are in use and w	here (e.g., alcohol-based hand sanitizer, PPE, safety devices)	IA
Identify state licensing, regulatory, and facility requirements for health	care worker immunizations:	E/OH
	Influenza Tdap	
Know facility plan for healthcare worker communicable disease exposu	re:	E/OH
·	Periods of communicability Signs and symptoms	
Identify current facility process for healthcare worker illness or sick leav	ve	E/OH
Review Bloodborne Pathogen (BBP) Exposure Control Plan and the OS  Learn about Hepatitis B, C, and HIV transmission  What is considered potentially infectious material?  Learn how Standard Precautions (Universal) are used to prevent conta  What training is available for staff? (Required by OSHA)		E/OH

	Track
nitor staff for exposure to TB and development of TB disease	E/OH
accination campaign is in place	E/OH
nnel influenza vaccination reporting requirements:	
acility's Infection Prevention Committee meetings ement	MCL
of your facility's plan the risk assessment in Stage 2	MCL MCL
■ Regulatory	
<ul> <li>Construction and/or Facility Maintenance</li> </ul>	
<ul> <li>Nursing Councils</li> </ul>	
Groups may include:  Department  Medical Staff  Board of Trustees	
	E/R
5?	
	<ul> <li>Nursing Councils</li> <li>Groups may include:</li> <li>Department</li> <li>Medical Staff</li> </ul>

### Stage 1: Days 1 - 60

Task/skill		Track
Familiarize yourself with housekeeping (i.e., environmental S  What are your facility's policies for environmental cleaning		EC
Familiarize yourself with housekeeping (i.e., environmental S	Services [EVS]) personnel and practices. For example:	EC
• How are staff trained?		
<ul> <li>What personal protective equipment is used during cleani</li> </ul>	ing?	
• How would a blood spill be managed?		
Familiarize yourself with the products your housekeeping (	i.e., environmental Services [EVS]) personnel are using	EC
Learn about characteristics of different classes of disinfect peroxide)	ants (e.g., quaternary ammonium compounds, phenolics, bleach, hydrogen	
Facilities maintenance, renovation, and construction:		EC
<ul> <li>What are your facility's infection prevention related policies</li> </ul>	es on maintenance, renovation, and construction?	
Learn basics of, and monitoring requirements for, your facil	lity's water system:	EC
<ul> <li>Legionella prevention</li> </ul>		
<ul><li>Dialysis systems</li></ul>		
Learn basics of, and monitoring requirements for, heating,	ventilation and air conditioning (HVAC) systems:	EC
<ul> <li>Positive and negative air differentials</li> </ul>	<ul><li>Levels of air filtration (e.g., HEPA filtration)</li></ul>	
<ul> <li>Air exchange requirements for specific areas</li> </ul>	<ul><li>Parameters for humidity</li></ul>	
Disinfection and sterilization of equipment:		CSDA
<ul> <li>Learn the Spaulding classification of disinfection and steril</li> </ul>	lization	
<ul> <li>Differentiate between cleaning, disinfection, high-level dis</li> </ul>	infection and sterilization	

## **Stage 2:** Days 61 - 120

Took /okill		
Task/skill		Track
Become familiar with outside expert resources:		PD
<ul> <li>APIC (national and local chapter)</li> </ul>		
State & local health department		
• CDC		
Start watching APIC monthly webinars		PD
Introduce yourself to facility personnel with whom you w	vill interact:	PD
<ul><li>Environmental services</li></ul>	<ul><li>Quality management</li></ul>	
<ul><li>Emergency preparedness</li></ul>	<ul><li>Medical affairs</li></ul>	
<ul><li>Pharmacy</li></ul>	<ul> <li>Facility maintenance and construction</li> </ul>	
<ul> <li>Nursing leadership</li> </ul>	<ul><li>Risk management</li></ul>	
<ul><li>Surgery leadership</li></ul>	<ul><li>Patient safety</li></ul>	
<ul> <li>Safety officer</li> </ul>	<ul><li>Laundry services</li></ul>	
<ul> <li>Central services</li> </ul>	<ul><li>Materials management</li></ul>	
Continue your IT training		PD
<ul> <li>Learn how to present your data (e.g., using PowerPoint</li> </ul>	to make basic tables, graphs)	
Develop your skills:		PD
Time management		
Understand the basics characteristics of microbiology/v	irology:	ID
■ Bacteria	<ul><li>Parasites</li></ul>	
■ Fungi	<ul><li>Viruses</li></ul>	
Differentiate normal flora versus pathogenic flora by site	<u>:</u>	
<ul> <li>Respiratory tract</li> </ul>	<ul><li>Bone and Joints</li></ul>	
<ul> <li>Genitourinary tract</li> </ul>	<ul><li>Blood</li></ul>	
<ul> <li>Gastrointestinal tract</li> </ul>	<ul><li>Central nervous system</li></ul>	
■ Skin, eye, ear		
Identify appropriate reasons for environmental culturing	:	ID
<ul> <li>Culture of water and dialysate in hemodialysis units</li> </ul>		
<ul> <li>Environmental cultures of potential sources during an o</li> </ul>	utbreak investigation	
Identify inappropriate reasons for environmental culturing		
<ul> <li>Random undirected microbiological culturing of air, was</li> </ul>	ter, and environmental surfaces	
<ul> <li>Culturing of staff not linked to an epidemiological inves</li> </ul>	tigation	

Task/skill		Track
Based on surveillance information gained in first 60 days, develop,	/revise surveillance plan as needed:	El
<ul> <li>Assess and define populations to be studied based on your specif</li> </ul>	fic facility findings	
<ul> <li>Determine regulatory requirements</li> </ul>		
<ul> <li>Include significant organisms for your facility you learned from yo</li> </ul>	our lab results	
Be specific about what data your facility gathers currently and wh	nat, if anything, needs to change	
Identify surveillance used in unique populations/services, which m	ay include:	El
<ul> <li>Ambulatory surgery centers</li> </ul>	<ul><li>Immunosuppressed</li></ul>	
<ul><li>Ambulatory clinics</li></ul>	<ul><li>Labor and delivery</li></ul>	
<ul><li>Dialysis centers</li></ul>	<ul><li>Surgery</li></ul>	
<ul><li>Long-term care facilities</li></ul>	<ul><li>Anesthesia</li></ul>	
<ul><li>Pediatrics</li></ul>	<ul><li>Behavioral health</li></ul>	
<ul> <li>Pain management clinics</li> </ul>	<ul><li>Emergency department</li></ul>	
<ul><li>Nursery</li></ul>	<ul><li>Rehabilitation</li></ul>	
<ul><li>Critical care</li></ul>		
Generate your facility's surveillance data:		EI
<ul> <li>Determine numerators, denominators, and constants for calculation</li> </ul>	ons of rates for outcomes and processes	
Organize and manage data in preparation for analysis		
Determine the incidence or prevalence of infections		
<ul> <li>Calculate specific infection rates (e.g., provider-specific, unit-spec SIR)</li> </ul>	cific, device-specific, procedure-specific, standardized infection ratio, or	
<ul> <li>Calculate risk stratified rates</li> </ul>		
• Incorporate post-discharge surveillance findings into calculation of	of rates	
Learn the steps to investigate clusters and outbreaks:		El
<ul> <li>Collaborate with appropriate persons to establish the case definition, period of investigation, and case-finding methods</li> </ul>	Formulate hypothesis on source and mode of transmission	
<ul> <li>Define the problem using time, place, person, and risk factors</li> </ul>	<ul> <li>Implement and evaluate control measures, including ongoing surveillance</li> </ul>	
Confirm that an outbreak exists	<ul> <li>Summarize findings and present to key stakeholders</li> </ul>	
Establish mechanisms for response to individuals with communica treatment)	ble diseases requiring follow-up (e.g., vaccination, antiviral/antimicrobial	EI
Continue to learn about important infectious diseases, such as:		EI
<ul> <li>Viral Hepatitis</li> </ul>	<ul><li>MERS - Coronavirus</li></ul>	
<ul> <li>HIV/AIDS</li> </ul>	<ul><li>Norovirus</li></ul>	

Task/skill		Track
Continue to learn about MDRO identification and infection prevention  Vancomycin intermediate Staphylococcus aureus (VISA)  Glycopeptide intermediate Staphylococcus aureus (GISA)	<ul> <li>implications:</li> <li>Vancomycin-resistant Staphylococcus aureus (VRSA)</li> <li>Vancomycin-resistant Staphylococcus epidermidis (VRSE)</li> </ul>	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 y  Utilize these websites to compare your data to other facilities	your facility data:	EI
Sign up for updates and alerts from CDC (e.g., Healthcare Advisory N and your state/local health departments	etwork, or HAN, and Morbidity and Mortality Weekly Report, or MMWR)	EI
Identify opportunities to break the chain between each component:  Personal Protective Equipment, or PPE Vaccination of patients and healthcare workers Hand hygiene	<ul><li>Sanitation</li><li>Disinfection and sterilization</li><li>Safe food handling</li></ul>	IA
Review infection prevention manual:  Develop schedule for reviewing/revising		IA
Understand the different roles of hand hygiene products:		IA
<ul> <li>Soap and water</li> <li>Antimicrobial soap and water</li> <li>Alcohol hand hygiene products - gels, foams etc.</li> <li>Lotions and moisturizers</li> </ul>	<ul> <li>Products for surgical scrub</li> <li>Learn the advantages and methods for brushless alcohol-based surgical hand scrubs</li> </ul>	
Determine when and where personal protective equipment (PPE) sho	ould be worn and not worn within your facility	IA
<ul> <li>Describe your facility's practical applications of isolation precautions</li> <li>Hand hygiene</li> <li>Transporting isolation patients</li> <li>Gloving</li> <li>Gowns</li> <li>Masks, N-95 particulate respirator, Powered Air Purifying Respirator (PAPR)</li> <li>Eye protection, face shields</li> <li>Patient care equipment and supplies</li> <li>Handling of linen</li> <li>Routine and terminal (discharge) cleaning</li> </ul>	<ul> <li>related to:</li> <li>Requirements to discontinue isolation</li> <li>Requirements for patient placement on Transmission-Based Precautions (cohorting, use of private rooms)</li> <li>Identify airborne infection isolation (negative pressure) rooms in your facility:</li> <li>Understand the engineering controls for airborne infection isolation rooms</li> <li>How is air handling of room monitored when in use? How frequently and who is responsible?</li> <li>Know the appropriate length of time for clearance of organisms from air in room prior to placing next patient</li> </ul>	

Task/skill		Track
Learn about CLABSI prevention activities at your facility:		IA
<ul> <li>Indications for central line use established</li> <li>Insertion bundle</li> <li>Maintenance bundle</li> </ul>	<ul><li>Scrub the hub</li><li>Removal of devices ASAP</li><li>Staff training</li></ul>	
Learn about pneumonia prevention activities at your facility:		IA
<ul><li>Head of the bed elevated</li><li>Sedation vacations</li><li>Weaning protocols</li></ul>	<ul><li>Patient immunization</li><li>Staff training</li></ul>	
Learn about CAUTI prevention activities at your facility:		IA
<ul> <li>Indications for use of indwelling urinary catheter established</li> </ul>	<ul> <li>Removal protocols</li> </ul>	
<ul><li>Insertion practices</li></ul>	Staff training	
Maintenance of catheter		
Learn about SSI prevention activities at your facility:		IA
<ul> <li>Prophylactic antibiotics: appropriate agent, dose, re-dosing, timing</li> </ul>	<ul><li>Skin prep</li><li>Oxygenation</li></ul>	
<ul><li>Bathing</li><li>Glucose control</li></ul>	<ul><li>Temperature</li><li>Staff training</li></ul>	
Learn about <i>C. difficile</i> prevention activities at your facility:		IA
<ul> <li>Contact Precautions and PPE</li> <li>Use of soap and water for hand hygiene (no alcohol products)</li> <li>Cleaning/disinfection products used</li> </ul>	Staff training	
Learn about MDRO prevention activities at your facility:		IA
<ul> <li>Contact Precautions and PPE</li> <li>Hand hygiene practices</li> <li>Cleaning/disinfection products used</li> <li>Staff training</li> </ul>	<ul> <li>Alert notification system</li> <li>Newly identified patients</li> <li>Readmitted or transferred patients</li> </ul>	
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 therapeu endoscopy)	tic and diagnostic procedures (e.g., dialysis, angiography, bronchoscopy,	IA

Task/skill	Track
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	Е/ОН
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)	E/OH
Determine engineering controls and personal protective equipment available at your facility to prevent exposure to bloodborne pathogens	
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	Е/ОН
Answer these questions:	MCL
<ul> <li>What is your facility's chain of command?</li> <li>What is the structure of your Infection Prevention/Quality Committee? When does it meet?</li> </ul>	
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	MCL
<ul> <li>If not, conduct risk assessment:</li> <li>Use a multidisciplinary team to conduct the Infection prevention risk assessment:</li> <li>What population does your facility serve?</li> <li>What precedures do your do?</li> </ul>	
<ul> <li>What procedures do you do?</li> <li>What community endemic infections are identified?</li> <li>Use previous facility surveillance and process monitoring data that is available</li> </ul>	
Know your high risk patients and what special prevention measures they require	

Task/skill			Track
Association for Ambulatory He Occupational Safety and Healt	ealth Care [AAAHC], Det Norske V th Administration [OSHA], Environ [DOT], National Fire Protection A	ganization and their requirements (e.g., Joint Commission, Accreditation (eritas [DNV], Centers for Medicare & Medicaid Services [CMS], mental Protection Agency [EPA], Food and Drug Administration [FDA], ssociation [NFPA], National Institute for Occupational Safety and Health	MCL
<ul> <li>Determine state and/or local</li> </ul>	HAI coordinator (http://www.cdc	.gov/hai/state-based/)	
Become familiar with tools use	ed for quality/performance improv	rement/patient safety:	MCL
<ul> <li>Root cause analysis</li> </ul>	<ul><li>Pareto chart</li></ul>	<ul><li>Strengths-Weaknesses-Opportunities-Threats (SWOT)</li></ul>	
<ul> <li>Fishbone diagram</li> </ul>	<ul><li>Flow chart</li></ul>	<ul><li>Gap analysis</li></ul>	
Determine your role in annual i	infection prevention education. To	o do this, answer the following:	E/R
<ul> <li>What infection prevention an</li> </ul>	nual education is currently require	d at your facility?	
<ul> <li>How is the annual education</li> </ul>	delivered? (live, computer-based, v	video, etc.)	
If live, what is the schedule?			
<ul> <li>How are licensed independer</li> </ul>	nt practitioners (LIPs) and resident	s given annual education?	
Identify your facility's patient,	family, and visitor IPC education p	process	E/R
Learn how to do a literature se	arch:		E/R
<ul> <li>Learn how to use PubMed</li> </ul>			
Learn basics of adult education	n:		E/R
<ul> <li>What makes adults different</li> </ul>	from other learners?		
<ul> <li>Learn how best to develop m</li> </ul>	naterials for adults		
<ul> <li>What training needs does t</li> </ul>	the staff have?		
Develop learning objectives	s based on those needs		
Create lesson plans based of	on the objectives		
Learn facility policies for:			EC
<ul> <li>Pest control practices (e.g., b</li> </ul>	ed bugs)		
Waste management:			
<ul> <li>Handling, storage, and tran</li> </ul>	sport of biohazardous waste		
Cleaning in special circums	tances and populations (e.g., surge	ery, NICU)	
Determine how cleaning effect	tiveness is monitored		EC

Task/skill		Track
Identify products your housekeeping (i.e., environmental Services For example:	s [EVS]) personnel are using in unique circumstances and populations	EC
<ul> <li>Tuberculocidal</li> </ul>		
■ Sporicidal ( <i>C. diff</i> )		
What is used in surgery and special care areas (e.g., NICU)?		
Learn basics of construction phases as they impact infection prev	ention:	EC
<ul><li>Design</li></ul>	<ul><li>Maintenance</li></ul>	
<ul><li>Renovation</li></ul>	<ul><li>Repair</li></ul>	
<ul><li>Demolition</li></ul>		
<ul> <li>Identify water-related features or decorations in your facility (e.g.</li> <li>What is the cleaning schedule?</li> <li>What products are used in the cleaning?</li> <li>Are there state recommendations for environmental sampling? If</li> </ul>		EC
Learn your facility's HVAC-related policies and practices		EC
How is it monitored?	• What is done in the event of an abnormal finding?	
• What is the monitoring schedule?	<ul> <li>Determine your authority to take action in the event of an abnormal finding</li> </ul>	
Learn critical steps of cleaning, high-level disinfection, and steriliz	zation. For example:	CSDA
<ul><li>Event-related sterility</li></ul>	<ul> <li>Documentation/monitoring requirements</li> </ul>	
<ul> <li>Chemical and biological indicators for different sterilization process</li> </ul>	<ul> <li>Recall steps for failed instrument processing and actions to take to mitigate risks</li> </ul>	
• Testing for effective levels of high-level disinfectant solutions; a	nd	
Learn the importance of decontamination of instruments/scopes		CSDA

# Stage 3: Days 121 - End of Year 1

Task/skill			Track
Network with other IPs to discuss comr	non concerns and solutions		PD
Introduce yourself to facility personnel with whom you will interact (based on your setting) within unique populations/services:			PD
<ul><li>Ambulatory surgery centers</li></ul>	<ul><li>Nursery</li></ul>	<ul><li>Behavioral health</li></ul>	
<ul> <li>Ambulatory clinics</li> </ul>	<ul><li>Critical care</li></ul>	<ul><li>Emergency department</li></ul>	
<ul><li>Dialysis centers</li></ul>	<ul><li>Immunosuppressed</li></ul>	<ul><li>Rehabilitation</li></ul>	
<ul> <li>Long-term care facilities</li> </ul>	<ul><li>Labor and delivery</li></ul>	<ul><li>Home health</li></ul>	
<ul><li>Pediatrics</li></ul>	<ul><li>Anesthesia</li></ul>	<ul><li>Wound centers</li></ul>	
<ul> <li>Pain management clinics</li> </ul>			
Reassess IT needs identified in first 120	days and address any newly identified nee	eds	PD
Develop your skills:			PD
<ul><li>Leadership methods</li></ul>	<ul><li>Project management</li></ul>	<ul><li>Presentation skills</li></ul>	
<ul> <li>Effective communication</li> </ul>	<ul><li>Influence</li></ul>	<ul><li>Basic statistics</li></ul>	
<ul><li>Change management</li></ul>	<ul><li>Facilitation</li></ul>	<ul><li>Managing people</li></ul>	
Create a personalized development pla	<b>n</b> (e.g. set goals, development and mainten	ance of competency)	PD
Take EPI® 101 and APIC's online class, "	Microbiology 101 for Infection Preventionis	ts"	PD
Determine methods of antimicrobial su	sceptibility testing at your facility (e.g., mi	nimum inhibitory concentration versus disc diffusion)	ID
Differentiate among prophylactic, em	piric, and therapeutic uses of antimicrobials		
Continue to update your surveillance p	an:		EI
<ul> <li>Evaluate it (and schedule to evaluate in change, new services)</li> </ul>	t every six months or sooner, e.g., when Nat	cional Healthcare Safety Network, or NHSN, definitions	
Identify infection prevention strategies	used in your facility's unique populations/	services	EI
Establish internal mechanisms to analy	ze and validate surveillance data:		EI
<ul> <li>Compare surveillance results to publis</li> </ul>	hed data or other benchmarks		
Develop and disseminate reports:			
• What is reported?	■ Who rece	ives the reports?	
• How is it reported (written & verbal)?	■ How ofter	9?	
Create a notification system based on s	urveillance plan, including epidemiologic s	ignificant findings	EI
Be familiar with your facility's antibiog	amParticipate with facility antimicrobial st	ewardship program	

### Stage 3: Days 121 - End of Year 1

Task/skill	Track
Learn the appropriate use of culturing during an outbreak:	EI
Healthcare worker culturing	
<ul> <li>Collection of environmental samples that may be linked epidemiologically to outbreaks</li> </ul>	
Understand the role of pulse field gel electrophoresis (PFGE) and whole human genome sequencing in outbreak investigation	
Develop evidence-based/informed infection prevention and control policies and procedures	IA
Attend or view NHSN training update:	EI
■ Ensure quality of data submission using NHSN guidance tools	
Learn effective ways to communicate facility publicly reported HAI status to key stakeholders:	EI
<ul><li>Senior leadership</li><li>Physicians</li></ul>	
■ Committee ■ Frontline staff	
Describe justification for elimination of artificial nails in patient care areas	IA
Develop a process for reporting hand hygiene monitoring compliance to stakeholders	
Monitor effectiveness of isolation precautions	IA
Determine process for isolation patients receiving therapeutic treatment and procedures	
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:	IA
<ul> <li>Develop competence in assessing compliance with these principles during OR rounds</li> </ul>	
Know environmental controls:	
<ul> <li>Control of air quality, ventilation, and humidity</li> </ul>	
■ Traffic control	
■ Surgical attire	
<ul><li>Housekeeping</li></ul>	
Storage of supplies	
Monitor Contact Precautions compliance	IA
Be familiar with your facility's antimicrobial stewardship program and your role with the team	

Task/skill	Track
Continue to monitor Contact Precautions compliance	IA
Be familiar with your facility's antibiogram	
Incorporate safe injection practices into your department rounding	IA
Understand your role in community emergency response:	IA
<ul> <li>Contact your community's emergency response team</li> </ul>	
<ul> <li>Collaborate with relevant groups and agencies in planning community/facility responses to biologic threats and disasters (e.g., anth influenza, flooding)</li> </ul>	rax,
Learn about commonly recognized bioterrorism agents and how they are transmitted:	
■ Anthrax ■ Brucella	
■ Plague ■ Smallpox	
■ Tularemia ■ Botulism	
• Q fever	
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	IA
• What is your facility's procedure for introducing new products?	
<ul> <li>Determine process for dealing with product recalls (equipment, food, medication and supplies)</li> </ul>	
Locate USP797 pharmacy regulations that pertain to infection control	IA
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 communication disease exposure	able 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:	E/OH
■ TB healthcare worker history screening	
<ul> <li>N-95 particulate respirator versus PAPR</li> </ul>	
Analyze seasonal influenza coverage for facility by profession (e.g., medical staff, doctors, nurses):	E/OH
Research and implement methods for improving facility compliance rate	

Task/skill		Track
Learn your leadership's priorities and engage the	em	MCL
<ul><li>Participate in your facility's budgeting process, a</li></ul>	as needed:	
<ul> <li>Recommend specific equipment, personnel, and</li> </ul>	d resources for the Infection Prevention and Control Program	
Develop and review/revise your infection control	l program plan:	MCL
<ul> <li>Mission and vision statement</li> </ul>	<ul><li>Action plans</li></ul>	
■ Goals	<ul><li>Put date on your calendar to re-visit the risk assessment at</li></ul>	
<ul><li>Measurable objectives</li></ul>	least every six months	
Determine your role during an accreditation surv	vey or health department/CMS inspection	MCL
Use CMS infection control worksheet to assess re	eadiness	
Collaborate with risk management/quality management	gement in the identification and review of adverse and sentinel events:	MCL
<ul> <li>Look for information on patient safety organiza</li> </ul>	tions	
Participate in root cause analysis (as applicable)		
Facilitate effective education of patients, familie	s, 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 fire	ndings into practice	
Develop/deliver educational materials for in-serv	vices:	E/R
<ul> <li>What important research needs to be implement</li> </ul>	nted by staff?	
<ul> <li>Reactive (e.g., new pandemic erupts and you need)</li> </ul>		
<ul> <li>Proactive (e.g., basics of infectious disease, trans</li> </ul>		
Provide immediate feedback, education and or	training when lapses in practice are observed	
Collaborate with EVS to review and approve poli	icies	EC
Collaborate with EVS to report cleaning effective	eness to key stakeholders (e.g., infection control committee, frontline staff, administration)	EC
Collaborate with EVS on exploring/selecting new	v cleaning products	EC
<ul> <li>What is your facility's procedure for introducing</li> </ul>	g new products?	
<ul> <li>Determine process for dealing with recalls</li> </ul>		
Collaborate with EVS on exploring/selecting new	v cleaning technologies	

Ta	sk/skill	Track
Loc	cate your facility's infection prevention construction policy and infection control risk assessment tool (ICRA)	EC
Par	ticipate in pre-construction/renovation meetings to provide guidance for infection control risks	
	view and/or develop policies related to your facility's water management system (e.g., Legionella prevention, dialysis systems, fountains dish tanks)	EC
	termine if your facility participates in reuse of single-use devices: retermine appropriate practices for reprocessing single-use devices	CSDA
■ M	sess products under evaluation for their ability to be reprocessed: lanufacturers guidelines nd users roduct team	CSDA
Lea	arn your facility's processes for disinfection and sterilization:	CSDA
• •	bserve processing of patient care equipment in specialty areas: Endoscopy/Bronchoscopy Central Services Respiratory therapy Surgical/ Procedural areas and Anesthesia	
	Dialysis	
•	Angiography	

## **Stage 4:** Beginning of Year 2 - Passing the CIC Exam

Task/skill	Track
Volunteer in local chapter	PD
Take EPI® 102	PD
Shadow in areas of unique population or in areas in which you are unfamiliar	PD
Continue to develop your soft skills:	PD
<ul> <li>Developing a business case for your program</li> </ul>	
<ul> <li>Leadership methods</li> </ul>	
Performance improvement science	
Prepare for the CIC examination:	PD
<ul> <li>Apply for Competency Advancement Award (CAA) grant or state sponsored scholarship opportunities (if available)</li> </ul>	
<ul> <li>Review the CBIC Candidate Handbook</li> </ul>	
■ Take APIC's online certification review class	
<ul> <li>Study APIC Text</li> </ul>	
Connect with chapter study group (if one exists)	
Recognize limitations and advantages of the types of tests used to diagnose infectious processes	ID
Recognize the statistical significance of data	EI
<ul> <li>Use basic statistical techniques to describe data (e.g., mean, standard deviation, rates, ratios, proportions)</li> </ul>	
Create and implement action plans based on your surveillance data	
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:	IA
<ul> <li>Explore hand hygiene monitoring methods (manual versus electronic observations, hand hygiene product usage)</li> </ul>	
<ul> <li>Recruitment of hand hygiene champions throughout facilities</li> </ul>	
<ul> <li>Reward and recognition</li> </ul>	
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	IA
Explore CLABSI prevention collaboratives and consider participating. These collaboratives may be found in:	
State health departments	
<ul> <li>Quality improvement organizations</li> </ul>	

Hospital associations

Task/skill	Track
Develop strategies to improve pneumonia prevention process compliance	IA
<ul> <li>Explore pneumonia prevention collaboratives and consider participating. These collaboratives may be found in:</li> <li>State health departments</li> <li>Quality improvement organizations</li> <li>Hospital associations</li> </ul>	
Develop strategies to improve CAUTI prevention process compliance	IA
<ul> <li>Explore CAUTI prevention collaboratives and consider participating. These collaboratives may be found in:</li> <li>State health departments</li> <li>Quality improvement organizations</li> <li>Hospital associations</li> </ul>	
Develop strategies to improve SSI prevention process compliance	IA
<ul> <li>Explore SSI prevention collaboratives and consider participating. These collaboratives may be found in:</li> <li>State health departments</li> <li>Quality improvement organizations</li> <li>Hospital associations</li> </ul>	
Develop strategies to improve <i>C. difficile</i> prevention process compliance	IA
<ul> <li>Explore C. difficile prevention collaboratives and consider participating. These collaboratives may be found in:</li> <li>State health departments</li> <li>Quality improvement organizations</li> <li>Hospital associations</li> </ul>	
Develop strategies to improve MDRO prevention process compliance	IA
<ul> <li>Explore MDRO prevention collaboratives and consider participating. These collaboratives may be found in:</li> <li>State health departments</li> <li>Quality improvement organizations</li> <li>Hospital associations</li> </ul>	
Provide guidance on how to interpret and generate action following antibiogram review	
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	

### Stage 4: Beginning of Year 2 - Passing the CIC Exam

Task/skill	Track
Participate in cost benefit assessment, efficacy studies, and product evaluation	IA
Recommend changes in practice based on product trials	
<ul> <li>Make recommendations, based on product's ability to be reprocessed (if applicable)</li> </ul>	
Assess your pharmacy's compliance with USP797 regulations that pertain to infection control:	IA
<ul> <li>Make recommendations based on your assessment</li> </ul>	
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:	
<ul> <li>Prepare annual sharps safety risk assessment per Federal OSHA</li> </ul>	
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	
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:	E/R
Case control, cohort studies	
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:	EC
Recommend changes in practice based on product trials	
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	EC
Learn the special disinfection/sterilization requirements for resilient pathogens. For example:	CSDA
<ul> <li>Creutzfeldt-Jakob Disease (CJD)</li> </ul>	
■ Human Papillomavirus (HPV)	
After observation of high-level disinfection and sterilization processes at your facility, determine if practices meet guidelines and update policies and procedures as needed	

Spreading knowledge Preventing infection.

