

# STATENS SERUM INSTITUT

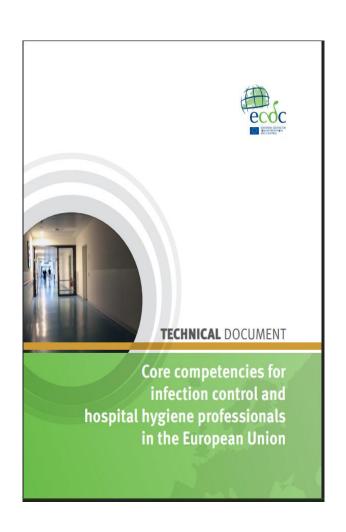
# Kompetencer i IPC – et europæisk rammeværk

Jette Holt, specialuddannet hyg.spl, cand.pæd.pæd, ph.d, CEI, SSI

### 45 minutter om infektionshygiejniske kompetencer



- Begrebsafklaring
- Historisk optakt til Core competences i EU
- Præsentation af ECDC core competences
- Fremtidige ønskede kompetencer
- Self assessment system og videre træning i Infektionshygiejne
- Diskussion



### Begrebsafklaring



- At have kvalifikation
  - formel anerkendelse af teoretisk viden- erhvervet gennem uddannelse
- At være kompetent
  - Dygtig og kvalificeret til at udføre eller handle effektivt indenfor et område og træffe velinformerede beslutninger
    - Kræver en kombination af viden, færdigheder, erfaring og personlige egenskaber
  - At have færdighed
    - noget man kan, en evne (medfødte eller udviklet talent)
      - Praktiske, kognitive, kreative,, kommunikative
  - At have kompetence
    - den konkrete handling, hvori man bruger sin viden, færdigheder og erfaring til at opnå det specifikke resultat
    - det du kan og det du gør
      - Tekniske og bløde kompetencer
      - Opbygget gennem uddannelse, træning og erfaring

### Faglige kompetencer



- De målrettede kompetencer man får gennem
  - Formel uddannelse
  - Kurser
  - Arbejdspladsoplæring
    - Nye opgaver
    - Projektarbejde
    - Jobbytte
    - Refleksion
      - Vidensdeling
      - Sparring
      - Mentoring

#### Faglige kompetencer

Dine faglige kompetencer, er det du har lært gennem din uddannelse, tidligere jobs eller andre erfaringer.

Eksempler på faglige kompetencer: retstavning, kundebetjening, div. IT-programmer, projektledelse, planlægning, god sælger osv.

### Personlige kompetencer



- Kombination af ens evner, personlighedstræk og erfaringer
  - Dine menneskelige egenskaber....
  - Personlige OG sociale kompetencer
  - Kommunikationsevner, problemløsningstilgang, tålmodighed, ansvarlighed,....
    - evne til at være empatisk, lyttende, indgå i relationer, kreativitet, at kunne genkende mønstre, at

være analytisk, ....

Personlighedstest, samarbejdsøvelser, ....

#### Personlige kompetencer

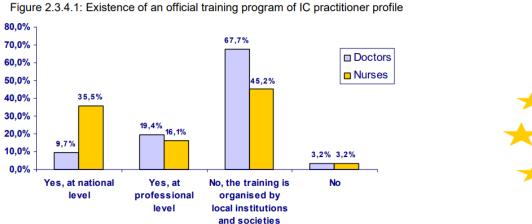
Dine personlige kompetencer er dem, der kendetegner din personlighed og dine menneskelige egenskaber. Personlige kompetencer har betydning for, hvordan du løser en opgave, og hvordan du arbejder sammen med andre.

Eksempler på personlige kompetencer: udadvendt, initiativrig, humoristisk, detaljeorienteret, energisk, positiv, nysgerrig, struktureret, grundig, beslutsom, god til at samarbejde osv.

#### IPSE Work Packages i 2005- 2008 – forløberen for ECDC



- Improving Patient Safety in Europe (IPSE)
- European Coordination: IPSE provided a framework for EU countries to work together on infection prevention, building on the efforts of earlier projects and laying the groundwork for permanent coordination through the ECDC.
  - Surveillance, standards and indicators, rapid exchange of data
- Training and Competencies: The project worked on standardizing infection control and hospital hygiene (IC/HH) training for doctors and nurses across Europe by <u>developing a core</u> <u>curriculum</u>.





Improving Patient Safety in Europe (IPSE). The IPSE report 2005-2008. Lyon: Université Claude Bernard Lyon 1; November 2009]. Available from:

https://www.ecdc.europa.eu/sites/default/files/media/en/healthtopics/Healthcare-associated\_infections/HAI-Net/Documents/healthcare-associated-infections-IPSE-Technical-

## Dette var IPSE's core competences i 2008



- Aimed at professional organisations responsible for training ICPs as well as healthcare institutions
- The proposed curriculum would be used as a reference for adapting and improving existing training programmes.
- The proposed curriculum would also be the base for initiating a European dialogue on qualification/specialisation of ICPs



Table 2.3.4.1: Core Curriculum Synthesis

| 4 5 4 (510)  |         |
|--|---------|
| 1. Programme Management (PM)   |         |
| Elaborating and advocating an infection control programme              | PM 1    |
| Managing an infection control programme, work plan and projects        | PM 2    |
| 2. Quality Improvement (QI)  |         |
| Contributing to quality management                                     | QI1     |
| Contributing to risk management  | QI2     |
| Performing audits of professional practices and evaluating performance | QI3     |
| Training of hospitals employees in Infection control                   | QI4     |
| Contributing to research   | QI5     |
| 3. Infection Control (IC)  | •       |
| 3.1. Surveillance and Investigation (SI)                               |         |
| Designing a surveillance system  | IC-SI1  |
| Managing (implementation, follow up, evaluation) a surveillance system | IC-SI2  |
| Identifying investigating and managing outbreaks                       | IC-SI3  |
| 3.2. Infection Control activities (ICA)                                |         |
| Elaborating infection control interventions                            | IC-ICA1 |
| Implementing infection control and healthcare Procedures               | IC-ICA2 |
| Contributing to reducing antibiotic resistance                         | IC-ICA3 |
| Advising appropriate laboratory testing and use of laboratory data     | IC-ICA4 |
| Decontamination and Sterilisation of medical devices IC-ICA5           |         |
| Controlling environmental sources of infections                        | IC-ICA6 |

# Og så var der TRICE (2009) og TRICE- IS(2014)



- ECDC 'Infection control training needs assessment in the European Union' (TRICE)
- Styrke IPC træning i EU
- Afdækning af organisering af uddannelse i IPC i Europa
- store forskelle
- Ambitionen var en Wiki tool en e-learning platform for trainers in IPC
  - store, share, exchange, and optimize the knowledge on IPC in a collaborative way

among European countries



> Euro Surveill. 2014 Dec 11;19(49):20985. doi: 10.2807/1560-7917.es2014.19.49.20985.

Training infection control and hospital hygiene professionals in Europe, 2010: agreed core competencies among 33 European countries

S Brusaferro <sup>1</sup>, B Cookson, S Kalenic, T Cooper, J Fabry, R Gallagher, P Hartemann, K Mannerquist, W Popp, G Privitera, C Ruef, P Viale, F Coiz, E Fabbro, C Suetens, C Varela Santos; National representatives of the Training in Infection Control in Europe (TRICE) project

#### Harmonizing and supporting infection control training in Europe

S. Brusaferro a, \*, L. Arnoldo a, G. Cattani a, E. Fabbro a, B. Cookson b,

R. Gallagher<sup>c</sup>, P. Hartemann<sup>d</sup>, J. Holt<sup>e</sup>, S. Kalenic<sup>f</sup>, W. Popp<sup>g</sup>,

G. Privitera<sup>h</sup>, V. Prikazsky<sup>i</sup>, C. Velasco<sup>i</sup>, C. Suetens<sup>i</sup>, C. Varela Santos<sup>i</sup>

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#### SUMMARY

Healthcare-associated infection (HCAI), patient safety, and the harmonization of related policies and programmes are the focus of increasing attention and activity in Europe. Infection control training for healthcare workers (HCWs) is a cornerstone of all patient safety and HCAI prevention and control programmes. In 2009 the European Centre for Disease Prevention and Control (ECDC) commissioned an assessment of needs for training in infection control in Europe (TRICE), which showed a substantial increase in commitment to HCAI prevention. On the other hand, it also identified obstacles to the harmonization and promotion of training in infection control and hospital hygiene (IC/HH), mostly due to differences between countries in: (i) the required qualifications of HCWs, particularly

a Department of Medical and Biological Sciences, University of Udine, Udine, Italy

<sup>&</sup>lt;sup>b</sup> Division of Infection and Immunity, University College London, London, UK

<sup>&</sup>lt;sup>c</sup> Infection Prevention and Control, Royal College of Nursing, London, UK

d Service d'Hygiène Hospitalière, C.H.U. de Nancy & DESP-SERES, Faculté de Médicine, Vandoeuvre-Nancy, France

<sup>&</sup>lt;sup>e</sup> National Center for Infection Control, Statens Serum Institut, Copenhagen, Denmark

f Department of Medical Microbiology, University of Zagreb, Zagreb, Croatia

g Hospital Hygiene, University Clinics Essen, Essen, Germany

<sup>&</sup>lt;sup>h</sup> Dipartimento di Ricerca Traslazionale e delle Nuove Tecnologie in Medicina e Chirurgia, University of Pisa, Pisa, Italy

<sup>&</sup>lt;sup>1</sup>European Centre for Disease Prevention and Control, Stockholm, Sweden

## Og så udkom ECDC core competences, 2013



Core competencies for

Goal: Developing a basic training strategy at the EU level in the area of infection

control

A reference paper for different groups of users and a variety of uses.

- Proposing a comprehensive list of core competencies
- European Qualifications Framework (kvalifikationsrammen)
- Competencies:
  - 'the proven ability to use knowledge, skills and personal, social and/or methodological abilities, in work or study situations and in professional and personal development"

#### Målet med rammeværket i EU fra ECDC



- standardisation of the competencies for IPC professionals
- design and implementation of training courses according to different national contexts while facilitating the mutual recognition of competencies across EU Member States;
- self-assessment of performance for IPC professionals and planning of their professional development;
- identification of the needs of healthcare organisations with regard to professional staff
- evaluation of the performance of IPC professionals.
- facilitate the mobility and comparability of job descriptions of professionals



### ECDC's niveauopdeling i kompetencekrav



- Introductory level (junior specialist)
  - newly appointed infection control and hospital hygiene staff member with little or no previous experience.
- Expert level (senior specialist)
  - infection control and hospital hygiene professionals who are confident and experienced; who use
    - Reasoning
    - critical thinking
    - reflection and analysis to inform his/her assessment and decision-making; and
    - are able to develop and implement new solutions to problems



# ECDC's CC er en fortsættelse af IPSE's areas og domæner



#### **Table 2.3.4.1: Core Curriculum Synthesis**

| 1. Programme Management (PM)   |  |  |
|--|--|--|
| Elaborating and advocating an infection control programme              |  |  |
| Managing an infection control programme, work plan and projects        |  |  |
| 2. Quality Improvement (QI)  |  |  |
| Contributing to quality management                                     |  |  |
| Contributing to risk management  |  |  |
| Performing audits of professional practices and evaluating performance |  |  |
| Training of hospitals employees in Infection control                   |  |  |
| Contributing to research   |  |  |
| 3. Infection Control (IC)  |  |  |
| 3.1. Surveillance and Investigation (SI)                               |  |  |
| Designing a surveillance system  |  |  |
| Managing (implementation, follow up, evaluation) a surveillance system |  |  |
| Identifying investigating and managing outbreaks                       |  |  |
| 3.2. Infection Control activities (ICA)                                |  |  |
| Elaborating infection control interventions                            |  |  |
| Implementing infection control and healthcare Procedures               |  |  |
| Contributing to reducing antibiotic resistance                         |  |  |
| Advising appropriate laboratory testing and use of laboratory data     |  |  |
| Decontamination and Sterilisation of medical devices                   |  |  |
| Controlling environmental sources of infections                        |  |  |

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

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

### ECDC's udvidelse af domænernes kompetencer



#### Area 4. Infection control activities

| Domain   | Competencies for a junior specialist – introductory level   | Competencies for a senior specialist – expert level  |
|--|---|--|
| Elaborating<br>infection control<br>interventions    | Collect and analyse the relevant<br>documentation for the development of an<br>infection control procedure  | Collect and analyse the relevant<br>documentation for the development of an<br>infection control procedure   |
|  | <ul> <li>Prepare infection control policies and<br/>procedures according to national or local<br/>standard operating procedures (SOPs), for<br/>example for validated main infection<br/>control activities, i.e. standard precautions<br/>and hand hygiene</li> </ul>  | example for validated main infection   |
|  | Isolation and special (barrier) precautions   | Isolation and special (barrier) precautions  |
|  | Skin disinfection   | Skin disinfection  |
|  | <ul> <li>Patient pre-operative preparation</li> </ul>   | <ul> <li>Patient pre-operative preparation</li> </ul>  |
|  | <ul> <li>Decontamination and sterilisation of<br/>medical devices</li> </ul>  | <ul> <li>Decontamination and sterilisation of<br/>medical devices</li> </ul>   |
|  | <ul> <li>Invasive procedures: vascular and urinary<br/>catheterisation, mechanical ventilation,<br/>etc.</li> </ul>   | <ul> <li>Invasive procedures: vascular and urinary<br/>catheterisation, mechanical ventilation,<br/>etc.</li> </ul>  |
|  | <ul> <li>Support activities: linen and waste<br/>management, housekeeping, food service,<br/>environmental safety (air, water),<br/>decontamination of environmental<br/>surfaces</li> </ul>  | <ul> <li>Support activities: linen and waste<br/>management, housekeeping, food service,<br/>environmental safety (air, water),<br/>decontamination of environmental<br/>surfaces</li> </ul>   |
|  | <ul> <li>Examples for occupational health<br/>activities: management following fluid<br/>exposure, prevention of inoculation<br/>injuries and other infection risks in HCWs</li> </ul>  | <ul> <li>Examples for occupational health<br/>activities: management following fluid<br/>exposure, prevention of inoculation<br/>injuries and other infection risks in HCWs</li> </ul>   |
|  | <ul> <li>Immunisation of HCWs and patients</li> </ul>   | <ul> <li>Immunisation of HCWs and patients</li> </ul>  |
|  | Contribute to the design and implementation of procedures for crisis management in infection control: alert management, recall of patients, recall of potentially contaminated equipment and supplies, reporting and exchange with relevant healthcare professionals  Contribute to the drawing up of clinical procedures when special precautions for infection control are required  Contribute to the drawing up of clinical procedures for specific settings  Plan strategies for the design of healthcare procedures | Prepare a procedure for crisis management in infection control: alert management, recall of patients, recall of potentially contaminated equipment and supplies, reporting and exchange with relevant healthcare professionals Contribute to the drawing up of clinical procedures when special precautions for infection control are required Contribute to the drawing up of clinical procedures for specific settings Plan strategies for the design of healthcare procedures |
| Implementing infection control healthcare procedures | <ul> <li>Contribute to set a policy for the<br/>implementation and revision of infection<br/>control guidelines and recommendations<br/>according to the SOPs: roles and<br/>responsibilities of supervisor, trainers, link<br/>professionals</li> </ul>  | <ul> <li>Set a programme for the implementation<br/>and the revision of infection control<br/>guidelines and recommendations<br/>according to the SOPs: roles and<br/>responsibilities of supervisor, trainers, link<br/>professionals</li> </ul>  |
|  | <ul> <li>Disseminate pertinent policies and<br/>procedures to applicable departments and<br/>help HCWs in their implementation<br/>through continuous support.</li> </ul>   | <ul> <li>Disseminate pertinent policies and<br/>procedures to applicable departments and<br/>help HCWs in their implementation<br/>through continuous support.</li> </ul>  |

#### Area 2. Quality improvement

# Infection control • training of employees

- Evaluate the training needs of the healthcare organisation and of HCWs through consultations and surveys and other methodologies such as gap analysis
- Integrate within the healthcare organisation's training programme for new employees, basic knowledge and awareness of infection control issues
- Design a training programme on infection control activities and procedures for all employees in healthcare organisation to update their knowledge and awareness according to the latest data (national, local, newly published)
- Select and provide appropriate training modalities to achieve expected outcomes
- Evaluate the impact of the training sessions

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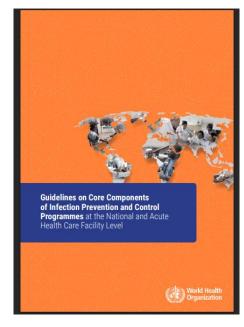
#### WHO fulgte op i 2020 med deres bud på core competencies

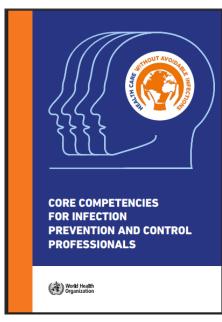


- Refererer til ECDC's technical document
- Opererer med (IPCP I junior):
  - IPC professional with up to 3 years of IPC practical experience. Og
- II (IPCP II senior):
  - IPC professional with more than 3 years of IPC practical experience and more senior roles and responsibilities

Tager udgangspunkt i WHO's Core components som bl.a omhandler beskrivelse af

national IPC curriculum og training programme





#### JAMRAI 2 WP ønsker til fremtidige kompetencer



Joint Action on Antimicrobial Resistance and Healthcare-Associated Infections

- Behavioral social and implementation science
  - the understanding of human behavior, safety culture, and organizational change.
  - how to create a good working environment including
    - a strategy for retention and how to promote psychological resilience to impede workforce burnout.
- Cross-sectoral collaboration
  - interprofessional communication, knowledge of care transitions and integrated care models.
- Leadership and advocacy.
  - advocate for system change, funding, and education at institutional and national levels. understand the political and administrative commitment on IPC implementation.
- Digital health.
  - digital surveillance, electronic health records, telehealth IPC protocols, robot control, molecular epidemiology and use of AI for outbreak prediction.
  - Climate change and sustainability
- understand how climate-driven change and green hospital policies impact IPC.
- AMS integration
   IPC and AMS are interdependent
- Preparedness

IPC in humanitarian/crisis settings: Pandemics, climate-driven outbreaks, conflict, and migration



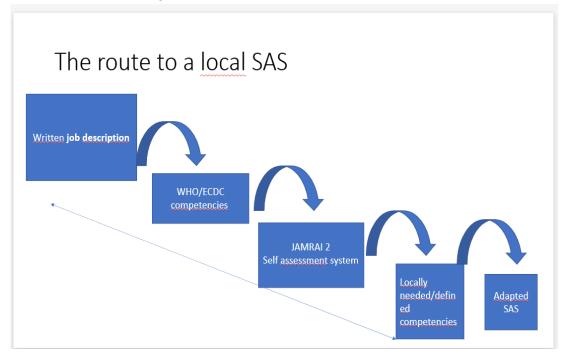
# Ønske om at supplere core competences med et SAS (self assessment system)

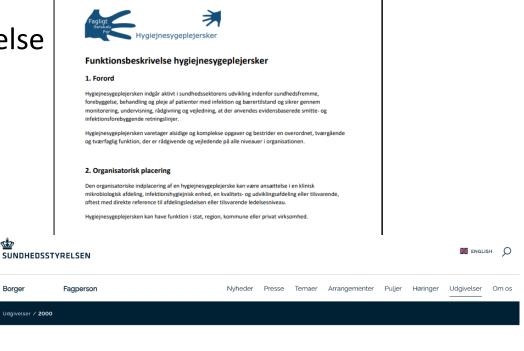
- part of the EU-JAMRAI 2 project one sub-task is
  - "to develop a self-assessment system (SAS) which can be used to assess **the degree of IPC core competencies** integrated at the local and national level based upon IPC competency recommendations from WHO and **adjusted** to EU needs".
- Inspiration fra dansk MUS (medarbejderudviklingssamtale årlig planlagt, styret samtale mellem nærmeste leder og medarbejder)
- Formål: En samtale, hvor medarbejder og leder diskuterer medarbejderens faglige og personlige udvikling, trivsel, arbejdsopgaver og fremtidige mål.
- Hvad det indebærer
  - en dialog, der giver **medarbejderen** mulighed for at sætte ord på, hvad der er vigtigt for vedkommende, og hvad der skal til for at trives og vokse i jobbet.
- Hvorfor:
  - Formålet er at skabe klarhed, afstemme forventninger, opnå gensidige mål og sikre, at **medarbejderens kompetencer udvikles i tråd med organisationens strategi.**

### Hvor finder man ECDC's kompetencer i dansk IPC



- I stillingsopslag
- Indlejret i national og lokal funktionsbeskrivelse
- Lokalt tilpasset SAS/MUS





Cirkulære nr. 113 om specialuddannelsen for sygeplejersker i infektionshygiejne (hygiejnesygeplejersker)

### Forslag til SAS dialog – hvad skal tilføjes?

#### TOPICS OF THE DIALOGUE

Please elaborate on the topic(s) of main importance

- · How do you experience your overview of your tasks, and do you feel able to prioritize in your daily work?
- · Where do you experience that tasks/processes may be solved more efficiently in your daily work?
- . How do you experience the balance between your work life and your private life? Do any particular factors affect this?

· Which of your tasks contribute the most to your professional

. How may you contribute to the present and future tasks of the



- · What successes have you had in your job?
- · How has your job developed, and what has in particular contributed to your professional and personal development?
- · Did we succeed with last years' agreements? Why?/why not?

- · What will it require to strengthen your personal development?
- · What motivates you in your work?

. . . .

· How do you experience your own motivation? What can we do to make it even better?

and personal development

. How do you see your career in 2-3 years?



Strategy and

develop-ment





Organizational

collabora-tion

and relations

- · What are your professional strengths and challenges? · What professional competences do you feel the need to
- · Do you feel that you have unexploited potential and
- competences that may be used in your work?



- Motivation
- colleagues, your leader and your collaborators? How do you contribute to the collaboration?
- . Which kind of sparring would strengthen your job satisfaction, your development and your handling of tasks?

· How do you find the collaboration between you, your

#### Self assessment system for IPC competences

SAS

#### TOPICS OF THE ASSESSMENT

PLEASE ELABORATE ON THE TOPIC(S) OF MAIN IMPORTANCE



- · Reflections on personal competencies Cabability
- Opportunity

trait

Personal

prevention and controlprogra mme management

Infection prevention and control programme management and leadership Built environment in health care facilities

- Occupational health
- · Quality and patient safety

Quality, patient health and occupational safety

· Infection prevention and control education and training

#### Goals

What will be your most important competence development focus for Microbiology and surveillance

Infection

- Basic microbiology Antimicrobial resistance prevention
- Health care-associated infection surveillance

Infection

prevention

- · Standard precautions
- · Transmission-based precautions Decontamination and reprocessing of medical devices and equipment
- Catheter-associated bloodstream infection prevention
- Catheter-associated urinary tract infection prevention
- Surgical site infection prevention
- Prevention of health care-associated pneumonia
- Health care-associated outbreak prevention and management

and control in clinical

Education practise



# Tak for jeres tid

