

Infection Prevention & Control Education & Training



GDIPC

Annual infection control training program:

- Basic goal of healthcare education and training is to improve job skills and competence.
- Workplace training in healthcare is a response to emerging issues in the field and tends to be problem-focused.

Annual infection control training program:

- Needs assessments or performance improvement studies identify deficiencies in knowledge, skills, or attitude and serve as the basis for educational program development.
- Need assessment is a process for determining the needs, or "gaps," between a current and desired outcome.

Infection control manual (IC policies & procedures)

Element : A-7

- Sub- Element (5)
- Activities for auditing:
 - (D) documentation
 - (SI) staff interview
 - (PF) personal file
- Score (0-1-2-NA)

Sub- Element (A-7.1)

Annual infection control training program based on need assessment and include basic and specialized infection control training. (D,SI)

Review:

- Annual infection control training plan that is not routinely including the same programs and topics but updated annually based on need assessment and staff interests and include lectures and practical training sessions.
- In addition, annual training plan need to be updated periodically if there is any increased infection rate reported from any unit.

Review:

For example:

increased VAP rate in ICUs necessitates urgent training program including all personnel involved in ventilator insertion and care.

Review:

- Educational program should also include basic program for all staff, plus specialized program for different staff categories as specialized program for staff working in ***OR and surgery department, ICUs, AKU, etc.....***
- Educational program courses and training workshops shall cover all kinds of IPC personnel of different specialties and categories (***trainee, volunteers, new employees, lab, OR, etc.....***).

interview:

ask:

- Interview the IC staff about Justification for programs included in the annual training plan and methods used for need assessment either survey, group discussion, personal interview, analysis of internal reports, etc.

Sub- Element (A-7.2)

IC department provides continuous education and training (formal & on- job training) for HCWs on infection control with competency assessment. (D,PF,SI)

Training & education:

- is the most important domain of infection control program to ensure and sustain the competencies of healthcare workers (HCWs) in infection control practices by limiting the chances of infectious disease transmission among HCWs, patients, sitters, and visitors.
- This can be achieved by ensuring all HCWs are properly informed, trained and provided with the required knowledge and skills on infection control best practices

Training & education:

- Further, by engaging leadership support to provide the necessary resources for implementing trainings on infection control best practices & establishing auditing tools on performance measurements to ensure the accountability of leadership and HCWs

Competence:

implies an expert level of knowledge and skill that is transferable to the practice of infection prevention and control

Learning and Accountability :

Learning:

is a way to transform knowledge, insights, and skills into behavior.

Accountability:

is being responsible for one's own actions and disclosing the results in a transparent manner

Review:

- Training file that includes documentation of previously conducted training activities.
- It must include schedule, list of attendees, competency testing.
- Random selection of a number of personal files to review the certificates of pre-employment training and competency together with any documented specific training certificates.

interview:

Ask:

- Ask the staff about Last IC course or on job training they attended.
- Ask the staff about **the knowledge attitude practice KAP** acquired from attending this course.

interview:

NOTE:

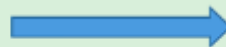
- Competency assessment should be conducted for all Health Care Workers based on assigned area and nature of work in order to have skilled & competent workforce.
- For instance, staff working in Intensive care units ICU, NICU PICU etc. must undergo competency assessment for care bundles for prevention of CLABSI, CAUTI, VAE etc.

interview:

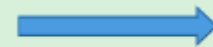
NOTE:

- must undergo competency assessment for care bundles for prevention of CLABSI, CAUTI, VAE etc.
- Similarly, HCWs working in ER must have valid competency Assessment for Respiratory Triage etc & likewise the job specific competency assessment for OR, CSSD & lab staff.
- Competency done for Hand Hygiene and PPE use ONLY is not enough.

TRAINING



MONITORING



EVALUATION

Sub- Element (A-7.3)

IC department provides orientation and training on basics of infection control for newly hired staff before or maximum within 1 month of joining the work. (D,SI)

Review:

Randomly request a sample from personal files of a newly hired staff in order to look for their IPC training attendance and competencies.

Interview:

Ask

- the staff if they have received any formal or on job training upon hiring HCWs must be able to recall and explain the title and components of any training program that they previously attended upon hiring.
- Assess staff knowledge by asking to describe and explain any types of IPC services and practices *e.g. ask about the difference between standard and transmission – based precautions, aseptic technique during medication preparation etc.*

Interview:

Ask

- the staff if they have received any formal or on job training upon hiring HCWs must be able to recall and explain the title and components of any training program that they previously attended upon hiring.
- Assess staff knowledge by asking to describe and explain any types of IPC services and practices *e.g. ask about the difference between standard and transmission – based precautions, aseptic technique during medication preparation etc.*

Sub- Element (A-7.4)

IC department provides education on infection control for patients, families, and visitors. (D,SI)

Review:

- If there is any document that is designed and formulated to help in the education of the patients and visitors, e.g. plans and Posters, Brochures....
- The educational programs designed for visitors and patients, if they are valid and incorporate all relevant information.

Review:

You can check one of the patient programs directed to:

- *Isolation services and practices.*
- *Post discharge wound care for prevention of surgical site infection etc.*

interview:

Ask:

- Randomly ask any visitor in the isolation ward/s, if they have received any precautions before being allowed to visit the isolated relative.
- If so, ask the visitor about these precautions and if he can practice it correctly. e.g. how to perform hand hygiene, wear appropriate PPE etc....

- infection Control department provides MUST provide health education on infection control for patients, families and visitors.

IC team must ensure the availability of the following:

- Bilingual infection control health education & awareness material must be designed/ formulated to help in the education of the patients and visitors,

e.g. Posters, Brochures, pamphlets, booklets, leaflets etc. containing information easy to understand with help of pictorial display

- The educational material must be posted and available in all patient care areas, waiting areas, entrances at the place easily seen and readable by patients \, families & visitors. e.g. hand hygiene, cough etiquette, COVID 19 & MERS educational material etc.

- In the patient care areas/units, education provided to patients and visitors must be structured and documented in patient's files.

For example:

hemodialysis patients must receive education about personal hygiene, importance of frequent hand hygiene, care of central venous catheter at home, how to take shower with intact CVC etc.

- Visitors are educated on precautions to be taken while being in the surrounding of a patient, the importance of hand hygiene and the isolation precautions required in case of isolated patients etc.
- education must be provided on how to don / doff PPE and perform hand hygiene before entering isolation room. Education must also include importance of not visiting patients under isolation precautions for their safety. etc.

Sub- Element (A-7.5)

Basic Infection Control Skills license (BICSL) Training Program is implemented & all HCWs in the hospital have been trained and received BICSL license. (D, SI).

Review:

- Updated BICSL trainer's guide is available for the trainer and all BICSL educational materials are updated accordingly.
- If there is, any document approves the certification of BICSL trainers in the Hospitals either valid **certified BICSL trainer CARD OR memos** from IC directorates in the region or health cluster.

Review:

- If there is any documentation method used for registration of BICSL data for example – **HESN**, or they used their own program like **EXCEL, Word**.
- If there is, any **tracking system** in the facility for checking the validity of BICSL license for staff and detect the expired license.

Review:

- If there is plan and schedule for training and renewal of BICSL license for staff.
- Randomly select 3 health care workers during clinical round and check their BICSL license for validity and also check their data on the BICSL program data base.

interview:

Ask:

Select one of the BICSL trainer in the facility:

- Discuss with BICSL Trainer about all components of the BICSL license and evaluate his knowledge level.
- Ask the selected BICSL Trainer for demonstration of one or more of the BICSL components as HH technique, PPE donning and doffing, correct management of spills,...etc. and evaluate the practice level.

interview:

Ask:

Select one of the BICSL trainer in the facility:

- The auditor may attend one of the BICSL training sessions in the facility and evaluate the quality of training offered by the trainer.

interview:

Ask:

Randomly select 3 health care workers during clinical round::

- During the round, select any 3 HCWs (who have direct or in direct contact with the patient) and ask them about the components of BICSL program.

interview:

NOTE:

- **This substandard is applicable to all MOH Hospitals & Private Hospitals ONLY.**
- **Non MOH Governmental Hospitals are currently NOT included.**

For more information



GDIPC website

<https://gdipc.sa/>