

SUBJECT: STAFF QUALIFICATIONS AND COMPETENCY	REFERENCE #1004
DEPARTMENT: HOSPITALWIDE	PAGE: 1 OF: 3
APPROVED BY:	EFFECTIVE:
	REVISED:

POLICY:

- Every position within the organization shall have a written, clearly defined job description.
- Each individual job description shall take into account the following:
 - _____ Hospital's mission
 - Care, treatment and services provided by _____ Hospital
 - The care, treatment and services needed by the patient population that _____ Hospital serves
 - Equipment and technology used
 - Professional practice guidelines
 - General competency requirements established by hospital policy, such as attending hospital orientation or annual HIPAA guidelines review
 - Patient and staff safety
 - Federal, state, local or other legal requirements
 - Health status and requirements of staff
- _____ Hospital shall have in place a system to ensure that the licensure, registration and certification required for patient care staff is continually maintained.
- _____ Hospital shall demonstrate, assess, maintain and improve staff competence on an ongoing basis.
- The competency of all staff, whether they are an employee of this hospital or an employee of a licensed independent practitioner shall be assessed using a single set of criteria.
- Comprehensive staffing plans that take into account the scope and complexity of care, treatment and services, needed by patients, shall be developed for each unit and department of the organization.

POSITION DESCRIPTION / PERFORMANCE EVALUATION

Job Title: Infection Control Practitioner (ICP)

Supervised by: Nurse Executive,
Infection Control Chairperson

Prepared by: _____

Approved by: _____

Date: _____

Date: _____

Job Summary: Responsibilities include the identification, investigation, reporting, prevention and control of infections and communicable diseases within the organization, including both healthcare associated infections and community-acquired infections.

The ICP is knowledgeable of CDC guidelines and definitions of healthcare associated infections (HAIs), Joint Commission standards, federal and state regulations and national guidelines.

Collaborates with facility Leadership and healthcare providers responsible for inpatient and outpatient departments and services, as well as non-patient care support staff, i.e., Maintenance and Environmental Services staff. Assists with inservice programs related to infection prevention and control. Participates in the organization performance improvement program.

DUTIES AND RESPONSIBILITIES:

3 = Exceeds Performance

2 = Expected Performance

1 = Needs Improvement

Demonstrates Competency in the Following Areas:

Demonstrates comprehensive knowledge of the infection control process in the healthcare setting.	3	2	1
Assists in the development, implementation and improvement of infection control practices.	3	2	1
Develops and implements policies governing the prevention and control of infections and communicable diseases.	3	2	1
In collaboration with the Infection Control Committee Chairperson, reviews and/or revises all department policies and procedures related to infection control on a concurrent basis.	3	2	1
Demonstrates knowledge of risk stratified statistics as applicable to trending healthcare associated infections (HAIs).	3	2	1
Designs and implements new methods to improve the efficacy and outcomes of the Infection Control Program.	3	2	1
Demonstrates knowledge of microbiology and modes of transmission of disease entities.	3	2	1
Demonstrates understanding of Standard Precautions and Transmission-Based Precautions as set forth by the CDC.	3	2	1
Demonstrates ability to teach principles and practical application of infection control to all levels of healthcare staff.	3	2	1
Develops and implements a system for identifying, investigating, reporting and preventing the spread of healthcare associated infections (HAIs) among patients of all ages and healthcare staff.	3	2	1
Initiates culture and sensitivity and/or appropriate isolation precautions when indicated.	3	2	1
Reviews cultures and sensitivities reported by microbiology laboratory of patients and staff to determine if infection is healthcare associated in origin.	3	2	1

SUBJECT: BACKGROUND SCREENING	REFERENCE #1105
DEPARTMENT: HUMAN RESOURCES	PAGE: 1 OF: 4
APPROVED BY:	EFFECTIVE: REVISED:

POLICY:

- _____ Hospital shall not employ or retain persons in positions of trust who have demonstrated a propensity to engage in illegal activities. This includes individuals who are to provide care, treatment or services. If a person has been excluded from participation in a federally-funded or state-funded healthcare program, that person will not be eligible for employment or be associated with _____ Hospital. At the time of the exclusion, _____ Hospital may terminate employment/relationship. If the person has not been excluded from participation in a healthcare program, but has been convicted of a criminal offense, the nature of the conviction and the responsibility of the person with _____ Hospital will be considered in determining whether to employ or terminate employment/association with the individual.
- The inquiries into the background of employees, volunteers, vendors and prospective employees and vendors are intended to comply with federal and state laws, and are required as per the hospital’s corporate compliance plan.
- All contracts with academic agencies that utilize the organization to advance education for their students, will include a requirement for criminal background screening of any students providing care, treatment or services. It is understood that these academic agencies will abide by the terms of this policy.

PROCEDURE:

- Human Resources Department Responsibilities:
 - The Human Resources Department is responsible for screening:
 - All applicants are screened upon completion of application
 - Volunteers are screened prior to job assignment
 - Screening will determine whether the individual has:
 - A conviction of any sort or an unfavorable credit history that may be inconsistent with the duties of the position, or
 - Has been listed by a federal agency as debarred, excluded or otherwise ineligible for federally-funded healthcare program participation

SUBJECT: ORGANIZATIONAL PERSONNEL EDUCATION PLAN	REFERENCE #1402
	PAGE: 1 OF: 7
DEPARTMENT: HUMAN RESOURCES	EFFECTIVE:
APPROVED BY:	REVISED:

POLICY:

- _____ Hospital shall provide ongoing programs that will educate or enhance employees in the day-to-day performance of their job duties and improve competence, and, therefore, foster patient safety and the quality of care at this hospital.
- Ongoing education and training shall be provided to staff when job responsibilities change.
- Education and training provided to _____ Hospital staff is specific to the patient population served by this hospital.

INSERVICE RESPONSIBILITIES:

- The following occurs for staff, students and volunteers who work in the same capacity as staff providing care, treatment and services:
 - Each department manager/director/supervisor is responsible for providing current and factual information to his or her employees regarding performance of their job duties. New methods, procedures or policies governing such duties shall be conveyed to the employees in a manner that is understandable and reasonable to all involved. Proper documentation is required of all such programs.
 - The Chief Executive Officer and/or Human Resources Department will provide up-to-date and factual information to all employees regarding policies, procedures and benefits. In most cases, policies and procedures will be conveyed to department managers/directors who will convey such information to their employees. Information regarding benefits will be distributed to the employees as deemed proper and reasonable by the Human Resources Director and/or Chief Executive Officer. Handbooks containing information about the benefit plans are available from the Human Resources Department. New employee orientation is held for all new employees.
 - Inservice information shall be posted to inform employees of upcoming inservices at the facility and in the community.

PROCEDURE - INSERVICE ATTENDANCE WITHIN THE HOSPITAL:

- Inservice education will be provided for staff, students and volunteers who work in the same capacity as staff providing care, treatment or services.
- Training will be provided when job responsibilities or duties change. This includes changes brought about by new technology.

SUBJECT: ASSIGNING DISASTER RESPONSIBILITIES TO VOLUNTEER LICENSED NON-INDEPENDENT PRACTITIONERS	REFERENCE #1703
	PAGE: 1
DEPARTMENT: HOSPITALWIDE	OF: 3
	EFFECTIVE:
APPROVED BY:	REVISED:

POLICY:

- _____ Hospital shall have a process in place to assign disaster responsibilities to volunteer licensed non-independent practitioners to meet the immediate needs of the organization and its patient population during times of disaster.
- A volunteer practitioner is defined as those practitioners who are required by law and regulation to have a license, certification or registration to practice their profession.
- Assigning disaster responsibilities to volunteers shall be made on a case-by case basis, taking into consideration the needs of the organization, the patient population and the qualifications of the practitioner.
- Assignment of disaster responsibilities to volunteer practitioners shall only be made when:
 - The Emergency Operations Plan has been implemented
 - _____ Hospital is not able to meet the immediate needs of patients with existing staff
- A streamlined process for verifying practitioner competence shall be implemented including, at a minimum:
 - Licensure, certification or registration verification
 - Oversight of care and treatment provided by the practitioner
- _____ shall be responsible for assigning disaster responsibilities to volunteers and maintaining a list of all volunteer practitioners and the responsibilities they have been assigned
- Oversight of the professional performance of volunteer practitioners will be performed by _____. This oversight will include:
 - Direct observation
 - Mentoring
 - Clinical record review