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| **Competency categories, integrating both the APIC and CBIC domains** | **IP practice areas as identified in CBIC practice analysis** | **Describe how/to what extent these areas are addressed in current IP role (or specify N/A)** | **Assessment of personal competency in each practice area** | **Professional development plan to advance competency in the domain** |
| Identification of infectious disease processes (CBIC) | 1. Differentiate among colonization, infection and contamination2. Identify occurrences, reservoirs, incubation periods, periods of communicability, modes of transmission, signs and symptoms, and susceptibility associated with the disease process3. Interpret results of diagnostic/lab reports4. Recognize limitations and advantages of types of tests used to diagnose infectious processes5. Recognize epidemiologically significant organisms for immediate review and investigation6. Differentiate among prophylactic, empiric, and therapeutic uses of antimicrobials7. Identify indications for microbiologic monitoring |  | 1 2 3 4 51 2 3 4 51 2 3 4 51 2 3 4 51 2 3 4 51 2 3 4 51 2 3 4 5 |  |
| Surveillance and epidemiologic investigation (CBIC) | 1.Design of surveillance systems2. Collection and compilation of surveillance data3. Outbreak investigation |  | 1 2 3 4 51 2 3 4 51 2 3 4 5 |  |
| Future-oriented domain (APIC): Technical  | Example: electronic surveillance systems, access to/use of electronic databases/electronic data warehouse (EDW), other related applications, algorithmic detection and reporting processes, clinical decision support, infection prevention within the electronic health record | **If no prior experience, ask: How do I anticipate practicing in the next three to five years? What new knowledge/skills will be required?**

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| **Competency Domain as Described by APIC and CBIC** |
| Identification of infectious disease processes (CBIC) |
| Surveillance and epidemiologic investigation (CBIC) |
| Future oriented domain (APIC): Technical  |
| Preventing/controlling the transmission of infectious agents (CBIC) |
| Future oriented domain (APIC): Infection prevention and control |
| Management and Communication (leadership) (CBIC) |
| Future oriented domain (APIC): Leadership and Program Management |
| Education and research (CBIC) |
| Future oriented domain (APIC): Performance Improvement and Implementation Science |
| Employee/occupational health (CBIC) |

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| Preventing/controlling the transmission of infectious agents (CBIC) | 1. Develop and review infection prevention and control policies and procedures2. Collaborate with public health agencies in planning community responses to biologic agents3. Identify and implement infection prevention and control strategies according to specific topics:* Hand hygiene
* Cleaning, disinfection and sterilization
* Specific direct and indirect care settings
* Therapeutic and diagnostic procedures and devices
* Product/equipment recall procedures
* Use of solation/barrier precautions when indicated
* Patient placement, transfer, discharge
* Environmental hazards
* Use of patient care products and medical equipment
* Patient immunization programs
* Construction and renovation
* Influx of patients with communicable diseases
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| Future-oriented domain (APIC): Infection prevention and control | Examples: ability to apply and use surveillance data and reports, advanced statistical methods and tools, including application of the standard infection ratio, risk assessment, hazard vulnerability analysis, use and evaluation of emerging prevention practices for patient care, diagnostic methods, participation in antimicrobial stewardship programs | **If no prior experience, ask: How do I anticipate practicing in the next three to five years? What new knowledge/skills will be required?**

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| Future oriented domain (APIC): Infection prevention and control |
| Management and Communication (leadership) (CBIC) |
| Future oriented domain (APIC): Leadership and Program Management |
| Education and research (CBIC) |
| Future oriented domain (APIC): Performance Improvement and Implementation Science |
| Employee/occupational health (CBIC) |

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| Management and communication (leadership) (CBIC) | 1.Planning2.Communication and feedback3.Quality/performance improvement and patient safety |  | 1 2 3 4 51 2 3 4 51 2 3 4 5 |  |
| Future-oriented domain (APIC): Leadership and program management | Examples: leads integration of prevention activities within and across departments, high level negotiation skills, financial/value analysis of programs and related projects, relationship management, ability to influence and persuade up to and including executive level, team and consensus building within and across stakeholder groups | **If no prior experience, ask: How do I anticipate practicing in the next three to five years? What new knowledge/skills will be required?**

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| Future oriented domain (APIC): Leadership and Program Management |
| Education and research (CBIC) |
| Future oriented domain (APIC): Performance Improvement and Implementation Science |
| Employee/occupational health (CBIC) |

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| Education and research (CBIC) | 1.Education2. Research |  | 1 2 3 4 51 2 3 4 5 |  |
| Future-oriented domain (APIC): Performance Improvement and Implementation Science | Examples: leads performance improvement (PI) teams for institution/system, develops interprofessional competencies, applies translational research methods, uses advanced PI tools/methods, focus on reliability and sustainability | **If no prior experience, ask: How do I anticipate practicing in the next three to five years? What new knowledge/skills will be required?**

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| **Competency Domain as Described by APIC and CBIC** |
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| Future oriented domain (APIC): Performance Improvement and Implementation Science |
| Employee/occupational health (CBIC) |

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| Employee/occupational health (CBIC) | 1.Review and/or develop screening and immunization programs2.Proivde counseling, follow-up, work restriction recommendations related to communicable diseases or following exposures3.Assist with analysis and trending of occupational exposure incidents and information exchange between occupational health and infection prevention and control departments |  | 1 2 3 4 51 2 3 4 51 2 3 4 5 |  |

Assumptions:

* Once CBIC certification has ben achieved, competency is highly individualized and technically complex. It is driven by multiple factors, including educational opportunities, practice setting, and personal interests. Because competency is highly personalized and develops across the career span, no infection preventionist (IP) is expected to be “advanced” in most/all areas at any particular time. The goal is to identify areas for individual improvement so that professional development becomes a lifelong endeavor.
* The core competencies identified by CBIC and the future oriented domains added by APIC are complementary and not mutually exclusive categories. By integrating them into one comprehensive self-assessment, the IP will be better prepared to address both immediate and evolving professional demands.
* Core competencies as identified by CBIC remain relevant across the career span but their implementation evolves as proficiency increases. Therefore, assessment of core competencies for proficient and advanced IPs focuses on how these skills are applied and the extent to which the IP is able to utilize them to foster program development and to assist others in their prevention efforts.
* The future-oriented domains described by APIC build on the core competencies. The content may at times appear to overlap. However, the future oriented domains attempt to identify those skills not yet included in the CBIC practice analysis but which, based on observation and professional consensus, are expected to be essential for IP practice in the next three to five years.