

Module 2, Session 2: Training, Competency, and Auditing



Preparation Checklist

Materials Required for this Session:

- ☐ Facility Trainer Binder - Module 2, Session 2
- ☐ Facility-specific material: policies and procedures (P&Ps) relevant to the session, including those dealing with: Healthcare Personnel (HCP) training, competencies, and results and documentation of audits.
- ☐ Copy of facility's most recently completed *CDC Infection Control Assessment and Response (ICAR) tool: Domain II*
- ☐ *Facility Trainer Attendance Log* (provided in Session Appendix)
- ☐ *Facility Trainer Assessment Tracker* (provided in Session Appendix)
- ☐ **Participant Notebooks** with Module 2, Session 2 handouts (provided in Session Appendix):
 - *Training, Competency, and Auditing Pre-Session Assessment*
 - *Training, Competency, and Auditing Post-Session Assessment*
 - *Module 2, Session 2: Participant Resources*
 - *Session Follow-Up Task list*
- ☐ Flip chart/ white board and markers
- ☐ Blank name tags/tents and markers
- ☐ Extra pens

Resources used for this session:

- CDC Dialysis Safety: Clinician Education - Staff Competencies
 - <http://www.cdc.gov/dialysis/clinician/index.html>
- CDC Dialysis Safety: Audit Tools and Checklists
 - <http://www.cdc.gov/dialysis/prevention-tools/audit-tools.html>
- CDC Dialysis Safety: Resource Center
 - <http://www.cdc.gov/dialysis/coalition/resource.html>
- Agency for Healthcare Research and Quality (AHRQ) Safety Program for End-Stage Renal Disease Facilities-Toolkit Modules
 - <http://www.ahrq.gov/professionals/quality-patient-safety/patient-safety-resources/resources/esrd/toolkitmodules.html>
- *Federal Regulations: Infection Control Through a Surveyor's Eyes* – Slide Deck
- *CDC Guide to Infection Prevention For Outpatient Settings: Minimum Expectations for Safe Care*
 - http://www.cdc.gov/hai/pdfs/guidelines/Ambulatory-Care+Checklist_508_11_2015.PDF

- AHRQ Safety Program for End-Stage Renal Disease Facilities - Toolkit
 - <http://www.ahrq.gov/professionals/quality-patient-safety/patient-safety-resources/resources/esrd/index.html>

Preparing for the Session:

Before the Facility Trainer begins this session, the following tasks should be completed:

- Notify participants about the session, at least two weeks prior, include the location, date, and time of the session.
- Assemble Module 2, Session 2 handouts for participants to add to their **Participant Notebook**.
- Assemble P&Ps needed for review.
- Make copies of recent ICAR Domain II, and highlight areas with gaps in policy, to be added to the **Participant Notebook**.
- Set up the classroom with handouts and blank name tags at each participant's place.
- Have the Facility Trainer's binder ready before beginning the session.

Tasks to be done as participants arrive:

- Ask to participants sign in using the *Facility Trainer Attendance Log*.
- Give each participant Module 2, Session 2 handouts to be inserted into their **Participant Notebook**.
- Prompt participants to complete the *Pre-Session Assessment*.

Tasks to be done after completion of the session:

- Write notes about the session on the "Notes and Homework" page. Include: which policies need to be developed or updated and any action plans that were developed and require follow-up.
- Complete the *Facility Trainer Assessment Tracker* with Pre- and Post-Session Assessment scores.
- Address areas of concerns, successes, questions, need for follow-up, staff members to check in with, etc.

Facility Trainer Brief

Learning Objectives

At the close of Module 2, Session 2 the participants will be able to:

- Describe training activities that take place at the facility.
- Identify the facility's P&Ps related to HCP training, competency evaluations, and audits.
- Understand the importance of re-training and competency evaluations of HCP.
- Locate and utilize the CDC tools, audits, and resources available for HCP training.
- Develop an action plan to improve the facility's infection control training program.

Module 2, Session 2: Overview

This session is focused on training and educating nurse managers, clinical coordinators, and policy makers on the educational resources and training tools utilized by and available to the facility through the CDC. The module focuses on having the appropriate P&Ps related to infection control and ensuring the staff is regularly educated and evaluated on their competencies in infection control.

The module prompts an action plan to be developed to ensure regular training, evaluation of competencies, and auditing. The goal is for participants to understand and meet the CDC recommendations in order to work towards creating and implementing policies, therefore improving the facility's infection control program.

Module 2, Session 2 is divided into these five parts:

Part 1: Introduction (5 minutes)

Participants will take the *Pre-Session Assessment* to determine their current knowledge. During this section, the Facility Trainer will introduce and identify the objectives of the session.

Part 2: Training and Competency (10 minutes)

The Facility Trainer leads the participants through a discussion of CDC recommendations for staff training and competencies, in comparison to the facility's current practices. Participants engage in an open discussion and identify gaps in staff education. Together, the Facility Trainer and participants work on an action plan to mitigate any gaps.

Part 3: Audits and Checklists (10 minutes)

The Facility Trainer leads the participants in a discussion about CDC recommendations for auditing as well as the CDC checklists for staff training and reference. Participants engage in an open discussion and identify inconsistencies that exist between facility practices and CDC recommendations for audits. Together, the Facility Trainer and participants work on an action plan to reduce any inconsistencies.

Part 4: Resources (10 minutes)

The Facility Trainer helps the participants to identify available resources to implement action plans developed in parts two and three. The resources will aid in policy gap mitigation. The discussion will include how participants can utilize these resources.

Part 5: Wrap-Up and To-Do List (5 minutes)

The Facility Trainer will summarize the session, reinforce the key messages, emphasize the action plans, and open the floor for questions and discussion. This will include an outline of the tasks participants will complete after the close of Module 2, Session 2, including a *Post-Session Assessment*.

Key Messages




These are the key messages for this session. They should be reinforced from time to time throughout this program.


- Infection control education should be conducted upon hire, annually, and if a gap is identified.
- Evaluation of staff competencies is essential to ensure staff members understand and implement the training appropriately in practice.
- Regular audits can help facilities identify inconsistencies and guide them in identifying needs for the future.
- Infection control training, competency, and auditing help to improve infection control and therefore improve patient care.

Classroom Presentation

Part 1: Introduction

Estimated Time: 5 Minutes

Welcome!	Notes
<p>As participants arrive, have each participant complete a <i>Pre-Session Assessment</i> and sign into the <i>Facility Trainer Attendance Log</i>.</p> <p>Welcome participants to the training session.</p> <p> Present: Welcome to Module 2, Session 2: <i>Infection Control Training, Competency, and Audits</i>, a part of the infection control program. Through this session, we will provide an overview of the facility's infection control training program, which includes training and re-training, competencies, and auditing. We will reference up-to-date CDC resources to be implemented in training and auditing in the future.</p> <p> Ask participants to introduce themselves: name, position in the facility, and goals for attending. Encourage participation of all attendees.</p>	
Objectives	Notes
<p> Present: As we work to improve our infection control program and decrease healthcare associated infections (HAIs), it is important to understand what the facility is already doing and what CDC recommendations are in place. Key messages, which we will highlight throughout the session, include:</p> <ul style="list-style-type: none">• Describing training activities that take place at the facility,• Being able to identify the facility's P&Ps related to HCP training, competency evaluation, and audits,• Understanding the importance of re-training and competency evaluation of HCP,• Being able to locate and utilize the CDC tools, audits, and resources available for HCP training, and• Developing an action plan to improve the facility's infection control training program.	






	<p>Notes to the Facility Trainer</p> <p>The following highlights the points to be addressed in this portion of the presentation. Please note the text in <i>italics</i> should be modified to appropriately represent your facility.</p>
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Ask: Before we move on does anyone have any questions regarding the goals of this session?


Part 2: Training and Competency

Estimated Time: 10 Minutes

CDC Recommendations and Facility Practices	Notes
<p> Refer Participants to CDC Dialysis Safety: Clinician Education - Staff Competencies http://www.cdc.gov/dialysis/clinician/index.html</p> <p> Present: The CDC recommends staff be trained upon hire and re-trained <i>at least</i> annually on the following four key competencies:</p> <ul style="list-style-type: none"> • Gloving and hand hygiene, • Catheter dressing change technique, • Vascular access technique, and • Safe injection/safe medication practices. <p> Refer participants to the facility's P&Ps related to staff training and competencies including, but not limited to, gloving/hand hygiene, catheter dressing changes, vascular access, and safe injection and medication practices.</p> <p> Present: In order to improve our infection control we need to review the practices already in place so we can identify inconsistencies in our training program and the CDC recommendations.</p> <p> Refer participants to CDC Dialysis Safety: Audit Tools and Checklists http://www.cdc.gov/dialysis/prevention-tools/audit-tools.html</p>	



Present: The CDC Checklist tools are valuable resources for staff to utilize to ensure they are performing the skills appropriately. Additionally, the checklists can aid in our evaluation of staff competencies. Please use these for reference as we discuss the facility's current practice, training, and evaluation of the CDC's four key competencies.

	Notes to the Facility Trainer The following sections address each of the four key competencies and open the floor for discussion. The following sections highlight the questions to be discussed and the text in <i>italics</i> serve as guides and suggestions to assist in eliminating discrepancies.
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Write on a white board or flip chart throughout the discussion, and note the gaps identified for each of the four key competencies.

Gloving and Hand Hygiene

Notes



Ask: Are we training staff upon hire and annually in gloving and hand hygiene?

If no, develop an action plan to develop and implement P&Ps that ensure initial as well as annual training



Ask: Are we documenting and recording attendance to training sessions?

If no, develop an action plan and system to ensure documentation and record keeping of staff training.









Ask: Are we regularly evaluating staff competency of the training and documenting those results?

If no, discuss an evaluation plan and develop a system to implement and document evidence of evaluations and staff demonstration of competency.



Open Responses

Catheter Dressing Change Technique	
<p> Ask: Are we training staff upon hire and annually on catheter dressing change technique?</p> <p><i>If no, create an action plan to develop and implement policy and procedures that ensure initial as well as annual training.</i></p> <p> Are we documenting and recording attendance to training sessions?</p> <p><i>If no, develop an action plan and system to ensure documentation and record keeping of staff training.</i></p> <p> Are we regularly evaluating staff competency and documenting that evaluation?</p> <p><i>If no, discuss an evaluation plan and develop a system for implementing evaluations as well as documenting evidence of evaluations and staff demonstrations of the competency.</i></p> <p> Open Responses</p>	
Vascular Access Technique	
<p> Ask: Are we training staff upon hire and annually on vascular access technique?</p> <p><i>If no, create an action plan to develop and implement policy and procedures that ensure initial as well as annual training.</i></p> <p> Are we documenting and recording attendance to training sessions?</p> <p><i>If no, develop an action plan and system to ensure documentation and record keeping of staff training.</i></p> <p> Are we regularly evaluating and documenting staff competency?</p> <p><i>If no, discuss an evaluation plan, develop a system for implementation, and document evidence of evaluation and staff competency demonstrations.</i></p>	



Open Responses

Safe Injection/Safe Medication Practices



Ask: Are we training staff upon hire and annually on safe injection/safe medication practices?

If no, create an action plan to develop and implement policy and procedures that ensure initial as well as annual training



Are we documenting and recording attendance to training sessions?

If no, develop an action plan and system to ensure documentation and record keeping of staff training.



Are we regularly evaluating and documenting their competency of the training?

If no, discuss an evaluation plan, develop a system for implementation, and document evidence of evaluation and staff competency demonstrations.



Open Responses

Action Plan



Notes to the Facility Trainer

Action is required after the previous discussion. Use this time to assign roles, tasks, and deadlines to complete the items and ensure that participants are up to date on P&Ps, competencies, and evaluations.



Present: In order to move forward and ensure we develop and implement the necessary tasks to ensure up to date P&Ps, competencies, and evaluations, we need to develop an action plan.



Write on a white board or flip chart the tasks needed to mitigate gaps, and assign tasks and deadlines to individuals in order to complete assignments in a timely manner.



Refer participants to *Session Follow-Up Task List* and have participants fill in their assigned tasks.

Part 3: Audits and Checklists

Estimated Time: 10 Minutes

CDC Recommendations

Notes



Refer participants to the CDC Dialysis Safety: Audit Tools and Checklists

<http://www.cdc.gov/dialysis/prevention-tools/audit-tools.html>



Present: The CDC provides audit tools and recommendations that should be implemented regularly at the facility. The facility should be documenting and noting the results of all audits. CDC audits and recommendations include:

- Hand Hygiene – monthly audit,
- Catheter Connection and Disconnection – quarterly audit,
- Catheter Exit Site Care – quarterly audit,
- Arteriovenous Fistula (AVF) & Graft Cannulation and Decannulation – quarterly audit,
- Dialysis Station Routine Disinfection**, and
- Injection Safety: Medication Preparation & Administration.**

**The CDC currently has no recommendations for when these two audits should take place.


Facility Practice



Refer participants to the facility's P&Ps related to results and documenting of auditing.



Present: In order to improve our infection control we need to review the practices already in place so we can identify inconsistencies in our audits when compared to CDC recommendations.

	<p style="text-align: center;">Notes to the Facility Trainer</p> <p>Open the floor for a live Q&A with open responses to evaluate what is occurring at the facility and/or what needs to occur. Lead the discussion using the questions below. The following section highlights the questions to be discussed and the text in <i>italics</i> serve as directions and suggestions to eliminate inconsistencies.</p>
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Write on a white board or flip chart throughout the discussion and record the gaps identified for each of the audits.



Ask: Are we performing monthly hand hygiene audits? Are we using the CDC tools? Do we have a record of the data collected? Who performs these audits? Who is reviewing the results?

If gaps are identified, develop a plan to implement monthly audits, utilize the CDC tools, and create a system to track the obtained data.



Open Responses



Ask: Are we performing quarterly Catheter Connection and Disconnection audits? Are we using the CDC tools? Do we have records of the data collected? Who performs these audits? Who is reviewing the results?

If gaps are identified develop a plan to implement monthly audits, utilize the CDC tools, and create a system to track the obtained data.



Open Responses



Ask: Are we performing quarterly Catheter Exit Site Care audits? Are we using the CDC tools? Do we have records of the data collected? Who performs these audits? Who is reviewing the results?

If gaps are identified develop a plan to implement monthly audits, utilize the CDC tools, and create a system to track the obtained data.



Open Responses



Ask: Are we performing quarterly AVF & Graft Cannulation and Decannulation audits? Are we using the CDC tools? Do we have a record of the data collected? Who performs these audits? Who is reviewing the results?

If gaps are identified develop a plan to implement monthly audits, utilize the CDC tools, and create a system to track the obtained data.



Open Responses



Ask: Are we regularly performing Dialysis Station Routine Disinfection audits? Are we using the CDC tools? Do we have records of the data collected? Who performs these audits? Who is reviewing the results?

If gaps are identified develop a plan to implement monthly audits, utilize the CDC, and create a system to track the obtained data.



Open Responses



Ask: Are we regularly performing Injection Safety: Medication Preparation & Administration audits? Are we using the CDC tools? Do we have records of the data collected? Who performs these audits? Who is reviewing the results?

If gaps are identified develop a plan to implement monthly audits, utilize the CDC tools, and create a system to track the obtained data.







Open Responses





Notes to the Facility Trainer

If the review of audits indicates poor results, consider re-training staff on the appropriate skills, using module 5.

Action Plan	Notes
<div>  <div> Notes to the Facility Trainer Action is required after the previous discussion. Use this time to assign roles, tasks, and deadlines to complete the items needed to ensure up to date P&Ps, competencies, and evaluations. </div> </div> <p>  Present: In order to move forward and ensure we develop and implement the necessary tasks involved to ensure regular audits, we need to develop an action plan. </p> <p>  Write on the white board or flip chart and list the tasks needed to mitigate gaps in auditing, and assign tasks and deadlines to individuals in order to complete the assignments in a timely manner. </p> <p>  Refer participants to <i>Session Follow-Up Task list</i> and have participants fill in their assigned tasks. </p>	

Part 4: Resources

Estimated Time: 5 Minutes





Resources	Notes
<p>  Present: As we move forward in improving our staff training, competency, and audits, it is important to utilize the most up to date CDC tools. The Dialysis Infection Control Curriculum utilizes CDC tools to train staff so it is recommended that we use this method as well. </p> <ul style="list-style-type: none"> • Module 1 is an overview of basic infection control. • Modules 3-5 are directed toward patient care staff and focus on how to train them utilizing CDC tools. <p>In addition to the resources highlighted in this session, as well as references noted below may also be helpful when training staff and creating P&Ps:</p> <p>  Refer participants to: <i>CDC Dialysis Safety: Resource Center</i> http://www.cdc.gov/dialysis/coalition/resource.html </p>	

AHRQ Safety Program for End-Stage Renal Disease Facilities-Toolkit
<http://www.ahrq.gov/professionals/quality-patient-safety/patient-safety-resources/resources/esrd/toolkitmodules.html>

Federal Regulations: Infection Control Through a Surveyor's Eyes – Slide Deck

Part 5: Wrap Up and To-Do List

Estimated Time: 5 Minutes

To-Do	Notes
<div><p>Present: As active members of the facility's infection control program, we need to work together to improve staff education and training. By participating in regular audits, annual training, and evaluations of staff competency, we can refine our infection control program, decrease HAIs, and improve patient care.</p><p>Today we have established a list of activities to follow-up on and actions to take moving forward. Before closing the session we will review our "To-Do" list.</p></div> <div><p>Write on the white board and have participants list items they need to complete on the <i>Session Follow-Up Task List</i>. For each item you list, include the staff members that will be charged with completing each task, specific tasks to be done, and deadlines to complete assignments on time. Items that need to be addressed, depending on your facility's needs and what has been established after the session, include:</p><ul style="list-style-type: none">• Staff education plan – new P&Ps to be established or updated,• Completing and documenting audits,• System for documenting of activities, and• Training to identify inconsistencies during audit review.</div> <div><p>Ask: Does anyone have any questions regarding the session content or action plan moving forward?</p></div> <div><p>Open Responses</p></div>	

Closing	Notes
<div data-bbox="191 289 263 361" data-label="Image"></div> <p>Present and Summarize key points:</p> <ul style="list-style-type: none"> • Infection control education should be conducted annually and upon hire. • Evaluating staff competencies is essential in ensuring staff members understand and implement the training appropriately. • Regular auditing can help facilities identify gaps and guide the staff and facility needs for future training. • Infection control training, competencies, and auditing help to improve infection control and therefore improve patient care. <div data-bbox="191 772 263 844" data-label="Image"></div> <p>Address questions or concerns.</p> <div data-bbox="191 892 263 963" data-label="Image"></div> <p>Present: Thank you all for coming and for your commitment to improving the facility and infection control program. Please take the <i>Post-Session Assessment</i> before leaving.</p> <div data-bbox="191 1081 256 1152" data-label="Image"></div> <p>Refer participants to <i>Infection Control Training, Competency, and Audits Post-Session Assessment</i> – have each participant complete the <i>Post-Session Assessment</i> and turn it into the Facility Trainer.</p> <p>Dismiss the group.</p>	

Session Appendix

- *Facility Trainer Attendance Log*
- *Facility Trainer Assessment Tracker*
- *Training Competency, and Auditing Pre-Session Assessment*
- *Training Competency, and Auditing Post-Session Assessment*
- *Module 2, Session 2: Participant Resources*
- *Session Follow-Up Task List*

Infection Control in Hemodialysis

Training Curriculum: Module 2, Session 2

Training, Competency, Auditing Pre-Assessment

Date:	
Participant Name:	
Facility:	

1. Infection control education should take place at which time points? (select all that apply)
 - a. Upon hire
 - b. Every 6 months
 - c. Annually
 - d. When gaps are identified
2. Which of the following is not included in the CDC's staff key competencies?
 - a. Gloving and hand hygiene
 - b. Patient education
 - c. Catheter dressing change technique
 - d. Vascular access technique
 - e. Safe injection and safe medication practices
3. The CDC recommends quarterly auditing of staff key competencies.
 - a. True
 - b. False
4. The CDC provides audit tools for facility use. Audit tools available through the CDC include: (select all that apply)
 - a. AVF and AVG cannulation and decannulation
 - b. Hand hygiene
 - c. Catheter exit site care
 - d. Dialysis station routine disinfection
 - e. Medication preparation and administration
 - f. Catheter connection and disconnection
5. I understand the CDC recommendations for staff training and auditing and how to access and utilize the CDC resource for training and auditing purposes.
 - a. Strongly Disagree
 - b. Disagree
 - c. Neither disagree or agree
 - d. Agree
 - e. Strongly Agree

Infection Control in Hemodialysis

Training Curriculum: Module 2, Session 2

Training, Competency, Auditing Post-Assessment

Date:	
Participant Name:	
Facility:	

1. Infection control education should take place at which time points? (select all that apply)
 - a. Upon hire
 - b. Every 6 months
 - c. Annually
 - d. When gaps are identified
2. Which of the following is not included in the CDC's staff key competencies?
 - a. Gloving and hand hygiene
 - b. Patient education
 - c. Catheter dressing change technique
 - d. Vascular access technique
 - e. Safe injection and safe medication practices
3. The CDC recommends quarterly auditing of staff key competencies.
 - a. True
 - b. False
4. The CDC provides audit tools for facility use. Audit tools available through the CDC include: (select all that apply)
 - a. AVF and AVG cannulation and decannulation
 - b. Hand hygiene
 - c. Catheter exit site care
 - d. Dialysis station routine disinfection
 - e. Medication preparation and administration
 - f. Catheter connection and disconnection
5. I understand the CDC recommendations for staff training and auditing and how to access and utilize the CDC resource for training and auditing purposes.
 - a. Strongly Disagree
 - b. Disagree
 - c. Neither disagree or agree
 - d. Agree
 - e. Strongly Agree

Infection Control in Hemodialysis

Training Curriculum: Module 2, Session 2

Participant Resources

Date:	
Participant Name:	
Facility:	

- CDC Dialysis Safety: Clinician Education - Staff Competencies
 - <http://www.cdc.gov/dialysis/clinician/index.html>
- CDC Dialysis Safety: Audit Tools and Checklists
 - <http://www.cdc.gov/dialysis/prevention-tools/audit-tools.html>
- CDC Dialysis Safety: Resource Center
 - <http://www.cdc.gov/dialysis/coalition/resource.html>
- Agency for Healthcare Research and Quality (AHRQ) Safety Program for End-Stage Renal Disease Facilities-Toolkit Modules
 - <http://www.ahrq.gov/professionals/quality-patient-safety/patient-safety-resources/resources/esrd/toolkitmodules.html>
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- *CDC Guide to Infection Prevention For Outpatient Settings: Minimum Expectations for Safe Care*
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 - <http://www.ahrq.gov/professionals/quality-patient-safety/patient-safety-resources/resources/esrd/index.html>

Infection Control in Hemodialysis

Training Curriculum: Module 2, Session 2

Session Follow- Up Task List

Date:	
Participant Name:	
Facility:	

Personal To-Do Items:

1. _____
2. _____
3. _____
4. _____
5. _____
6. _____

Facility-Wide To-Do Items:

1. _____
2. _____
3. _____
4. _____
5. _____
6. _____

Additional Comments:
