



**Health  
Information  
and Quality  
Authority**

An tÚdarás Um Fhaisnéis  
agus Cáilíocht Sláinte

Regulation of  
Health and Social  
Care Services

# Self-assessment Tool

Preparedness planning and Infection  
prevention and control assurance  
framework for registered providers

September 2020

## Introduction

This self-assessment tool has been developed by the Chief Inspector of Social Services within the Regulation Directorate of the Health Information and Quality Authority (HIQA). Its purpose is to aid registered providers of designated centres for older people and for people with disabilities to critically assess their preparedness, contingency and outbreak management plans to assure themselves that the infection prevention and control practices in their centres are safe.

It is organised according to the themes and standards contained in the *National Standards for infection prevention and control in community services* (2018).

When completing this self-assessment, providers must consult our *COVID 19, An assurance framework for registered providers - preparedness planning and Infection prevention and control measures* Guidance; the Health Act 2007 (as amended) and associated regulations, and relevant national standards for residential centres for older people and for people with disabilities.

The *National Standards for infection prevention and control in community services* are organised into two overarching sections which we term 'dimensions'. These are the dimensions of:

1. Capacity and capability.
2. Quality and safety.

In each of these dimensions are what we call 'themes', or aspects of care. In this self-assessment, you will see a series of statements relevant to each of the eight themes in the *National Standards for infection prevention and control in community services*.

Under each theme, please tick 'Yes' or 'No' to these statements and provide additional information, if required, in the space provided. When complete, you will be asked to make a judgment about your performance against the national standards under that particular theme.

### Judgment descriptors

The following Table 1 shows the levels of compliance — which we term 'judgment descriptors' — which are used to assess performance against each of the eight themes under the standards. During this self-assessment you will be asked to select the descriptor which most accurately describes how you are meeting the standards under each of the themes.

**Table 1. Judgment descriptors to assess performance against each of the eight themes under the standards**

<b>Demonstrates a commitment to quality improvement</b>	<b>Working towards meeting the standard</b>	<b>Significant opportunities for improvement</b>
The service is meeting the national standards. Good practice in infection prevention and control is promoted. As a result, there is clear evidence of positive outcomes for residents. In the event of an outbreak, the provider has systems in place to detect, respond and manage an outbreak.	While the service is making efforts to meet the national standards, there is still further improvement required. There are gaps in infection prevention and control measures. In the event of an outbreak, the provider could not be certain that the systems in place would ensure timely detection, response and management of an outbreak.	The service has not made any substantive effort to meet the national standards. Infection prevention and control practices and measures do not promote a safe environment. In the event of an outbreak, the provider could not quickly and effectively detect, respond and manage it, thus resulting in significant risk to residents.

Mirroring the standards, the self-assessment is divided into two overarching sections which we term 'dimensions'. These are:

1. Capacity and capability
2. Quality and safety.

The statements for assessment by providers are set out on the following pages against each of these two areas.

While you are required to complete the self-assessment, you are not required to submit the completed self-assessment to the Chief Inspector unless specially requested to do so. Inspectors may, however, ask to review the completed self-assessment while on inspection.

You are required to update this self-assessment every **12 weeks**.

## Dimension: Capacity and capability

<b>Theme 5: Leadership, Governance and Management</b>	
Standard 5.1	The service has clear governance arrangements in place to ensure the sustainable delivery of safe and effective infection prevention and control and antimicrobial stewardship.
Standard 5.2	There are clear management arrangements in place to ensure the delivery of safe and effective infection prevention and control and antimicrobial stewardship within the service.
Standard 5.3	There are formalised support arrangements in place to ensure the delivery of safe and effective infection prevention and control and antimicrobial stewardship.
Standard 5.4	Staff are empowered to exercise their professional and personal responsibility for safe and effective infection prevention and control practices and antimicrobial stewardship practices.
Standard 5.5	Service providers ensure that externally contracted agencies adhere to safe and effective infection prevention and control practices.
The governance structures in place ensure regular, timely review of the effectiveness and quality of infection prevention and control practices.	Yes No
An infection prevention and control strategy is in place that takes into account: <ul style="list-style-type: none"> <li>▪ contingency planning</li> <li>▪ emergency plans</li> <li>▪ outbreak management plans</li> <li>▪ allocation of resources</li> <li>▪ deputising arrangements.</li> </ul>	Yes No
A person with overall responsibility for the management of infection prevention and control within the centre is identifiable.	Yes No
There is an internal and external communications strategy.	Yes No

The roles and responsibilities of staff are clearly defined and staff understand their individual and collective responsibilities.	Yes No
Staff know the provider contingency arrangements in the event that key management positions are vacant due to unexpected leave. Staff know how to escalate infection prevention and control-related risks.	Yes No
The provider is assured through staff supervision, monitoring and review that managers and members of staff understand their infection prevention and control responsibilities.	Yes No
There is a system in place to monitor and report on infection prevention and control activities, including the identification of opportunities to improve the safety and quality of the care and support provided.	Yes No
There are clear and effective risk management arrangements in place to: <ul style="list-style-type: none"> <li>▪ identify</li> <li>▪ manage</li> <li>▪ review, and</li> <li>▪ address and learn from</li> </ul> infection prevention and control risks and outbreaks in the centre.	Yes No
There are policies, procedures and guidance in line with HSE, HPSC, Irish and European legislation to guide staff in the effective implementation of good infection prevention and control practices.	Yes No
There is a clear escalation strategy in place and staff know how to access to: <ul style="list-style-type: none"> <li>▪ HSE crisis management teams</li> <li>▪ Specialist staff with expertise in infection prevention and control</li> <li>▪ Healthcare advice; for example, in relation to general practice, end-of-life care and psychiatry</li> <li>▪ Screening services.</li> </ul>	Yes No
The contractual or service level agreements with external services adhere to the centre's infection prevention and control measures.	Yes No
All notifiable diseases are notified to the relevant authorities.	Yes No

<b>Additional information or notes</b>		
<b>Demonstrates a commitment to quality improvement</b>	<b>Working towards meeting the standard</b>	<b>Significant opportunities for improvement</b>

<b>Theme 6: Workforce</b>	
Standard 6.1	Service providers plan, organise and manage their workforce to meet the services' infection prevention and control needs.
Standard 6.2	Service providers ensure their workforce has the competencies, training and support to enable safe and effective infection prevention and control and antimicrobial stewardship practices.
There are deputising arrangements in place for the ongoing management of the centre and in the event that the person in charge and other key managers are unable to work.	Yes No
Staffing levels are maintained at levels that can safely meet the service's ongoing infection prevention and control needs and activities, including out-of-hours and deputising arrangements, that ensures the continuity of care for residents.	Yes No

In determining the skill-mix of staff, the provider has specifically considered the COVID-19 infection prevention and control needs of the service.	Yes No
There are on-call arrangements for staff, and these have been tested and are effective.	Yes No
Staff have access to education and suitable training in infection prevention and control appropriate to their role and in line with national, HSE and HPSC COVID-19 guidance.	Yes No
The provider has identified and developed the skill set of staff with an interest in infection prevention and control.	Yes No
The provider has good arrangements in place to assess the impact and effectiveness of the staff training provided.	Yes No
The health surveillance measures in place for the early detection of infections in staff are supervised and audited.	Yes No
There are signposting arrangements in place for staff to seek advice on all aspects of infection prevention and control.	Yes No
There are effective documented arrangements in place to meet staff occupational health requirements, including for staff to avail of vaccinations.	Yes No
Staff understand the infection prevention and control restrictions and staff allocation and zoning measures to be put in place during an outbreak (suspected and confirmed).	Yes No
<b>Additional information or notes</b>	

<b>Demonstrates a commitment to quality improvement</b>	<b>Working towards meeting the standard</b>	<b>Significant opportunities for improvement</b>

<b>Theme 7: Use of Resources</b>	
Standard 7.1	Service providers plan and manage the use of available resources to meet the services' infection prevention and control needs
There are good arrangements in place to review and provide the resources required to meet the centre's infection prevention and control needs.	Yes No
In the event of any building or upgrade works in the centre, infection prevention and control assessment and controls are considered.	Yes No
Effective arrangements are in in place to ensure all equipment is fit for purpose, appropriately cleaned, maintained and stored.	Yes No
<b>Additional information or notes</b>	





<b>Demonstrates a commitment to quality improvement</b>	<b>Working towards meeting the standard</b>	<b>Significant opportunities for improvement</b>
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<b>Theme 8: Use of Information</b>	
Standard 8.1	Information is used to plan, manage and deliver care that is in line with safe and effective infection prevention and control and antimicrobial stewardship practices.
Standard 8.2	Service providers have effective arrangements in place for information governance for infection prevention and control-related information.
Information is routinely collected, analysed and shared to inform effective and timely clinical decision-making, and to identify trends to improve the quality of the service.	Yes No
Staff have access to timely and quality infection prevention and control information to inform and enhance practice.	Yes No

Service-specific and individual personal information is gathered, retained and communicated in line with general data protection legislation.	Yes No	
<b>Additional information or notes:</b>		
<b>Demonstrates a commitment to quality improvement</b>	<b>Working towards meeting the standard</b>	<b>Significant opportunities for improvement</b>

## Dimension: Quality and safety

<b>Theme 1: Person-centred Care and Support</b>		
Standard 1.1	People are provided with appropriate information and are involved in decisions about their care to prevent, control and manage healthcare-associated infections and antimicrobial resistance	
Residents are consulted and kept up to date whenever public health restrictions are implemented.	Yes	No
Residents are provided with sufficient information to make an informed decision to help them in the prevention of acquired infections.	Yes	No
Advocacy services are available to support residents.	Yes	No
Systems are in place to ensure concerns regarding the infection status of residents are detected, responded to and recorded efficiently and accurately.	Yes	No
Individual care records, including infection prevention and control risk assessments and associated care planning records, are up to date and record the arrangements to mitigate against the psychosocial impact of any public health restrictions.	Yes	No
<b>Additional information or notes</b>		

<b>Demonstrates a commitment to quality improvement</b>	<b>Working towards meeting the standard</b>	<b>Significant opportunities for improvement</b>
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<b>Theme 2: Effective care and support</b>	
Standard 2.1	Infection prevention and control is part of the routine delivery of care to protect people from preventable healthcare-associated infections.
Standard 2.2	Care is provided in a clean and safe environment that minimises the risk of transmitting a healthcare-associated infection.
Standard 2.3	Equipment is decontaminated and maintained to minimise the risk of transmitting a healthcare-associated infection.
Standard 2.4	Service providers measure, assess and report the effectiveness of infection prevention and control practices to support improvements in infection prevention and control and antimicrobial stewardship.
Everyone working in the service considers infection prevention and control as part of the job or role.	Yes No
Infection prevention and control risks are identified and recorded in a risk register, and corrective actions are taken to address them.	Yes No
Infection prevention and control practices and standard precautions are monitored, and corrective action taken whenever necessary.	Yes No
HSE, HPSC and national guidance is implemented and adhered to.	Yes No
The centre is always clean, safe and supervised to minimise the risk of infection. Cleaning and disinfection products are used correctly.	Yes No
All equipment is clean and decontaminated in line with good infection prevention and control practices, and is safely stored.	Yes No

**Additional information or notes**

<b>Demonstrates a commitment to quality improvement</b>	<b>Working towards meeting the standard</b>	<b>Significant opportunities for improvement</b>
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<b>Theme 3: Safe Care and Support</b>	
Standard 3.1	Arrangements are in place to support effective hand hygiene practices to minimise the risk of acquiring or transmitting infection.
Standard 3.2	Antimicrobial medications are appropriately prescribed, dispensed, administered, used and disposed of to reduce the risk of antimicrobial resistance.
Standard 3.3	Arrangements are in place to protect staff from the occupational risk of acquiring an infection.
Standard 3.4	Outbreaks of infection are identified, managed, controlled and documented in a timely and effective manner.

All staff have received hand hygiene training, and refresher training is routinely scheduled at regular intervals.	Yes No
<p>Hand-hygiene facilities are accessible and well-designed:</p> <ul style="list-style-type: none"> <li>▪ Alcohol hand rub is available at the point of care in all residential care facilities</li> <li>▪ There is a clinical hand-wash sink in each resident's room (with the exception of those with a learning disability).</li> <li>▪ In the absence of hand-wash sinks, there are alternative measures in place.</li> </ul>	Yes No
There is a system in place to manage the occupational health needs of staff in relation to infection.	Yes No
Staff are offered and encouraged to receive the annual influenza vaccine.	Yes No
Appropriate personal protective equipment is provided to staff and is widely available in line with national guidelines.	Yes No
There is a nominated lead for COVID-19 preparedness and response.	Yes No
Outbreak preparedness and management plans are in place and are communicated and understood by all staff.	Yes No
<b>Additional information or notes</b>	

<b>Demonstrates a commitment to quality improvement</b>	<b>Working towards meeting the standard</b>	<b>Significant opportunities for improvement</b>

<b>Theme 4: Better Health and Wellbeing</b>	
Standard 4.1	People are empowered to protect themselves and others from healthcare-associated infections and antimicrobial resistance.
Residents are informed, educated and supported to protect themselves and others from the risk of healthcare-associated infections.	Yes No
Visitors are informed about what they can do to help prevent the spread of infection and keep themselves infection-free while in the centre.	Yes No
Residents are offered recommended vaccines, in line with the national immunisation guidelines?	Yes No
Signage, instructional information and educational material relating to infection prevention and control and antimicrobial stewardship are easily accessible and visible throughout the centre?	Yes No
<b>Additional information or notes</b>	

<b>Demonstrates a commitment to quality improvement</b>	<b>Working towards meeting the standard</b>	<b>Significant opportunities for improvement</b>





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