



Infection Prevention and Control Portfolio Holders Procedure

1. Guiding Principles

Portfolio holders are an integral part of the WA Country Health Service (WACHS) - Kimberley strategy to increase the effectiveness of infection prevention and control practices. Portfolio holders are encouraged to develop ownership and accountability in their workplace, serving as a liaison between the staff in their unit/area; their department line manager, and site specific Infection Control Clinical Nurse (CN).

WACHS-Kimberley is committed to:

- minimising the risk of infection to patients and staff by ensuring best practice in the management, education, and implementation of infection control policies and procedures
- reducing the rates of healthcare associated infection
- minimising the transmission of infectious disease
- raising the profile of infection prevention and control program through implementation of an Infection Prevention and Control portfolio holders program.

2. Procedure

Promote and assist with the implementation of National Safety and Quality Healthcare Service (NSQHS) Standard 3: Preventing and Controlling Healthcare Associated Infections.

3. Definitions

Infection Prevention and Control Portfolio Holder	Registered nurse/midwife or enrolled nurse delegated the portfolio, with responsibility for assisting the line manager in infection prevention and management at a local unit or site.
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4. Roles and Responsibilities

- The line manager is to meet with appointed portfolio holder to discuss plans and negotiate time and resources to fulfil role responsibilities.
- The site-specific Infection Control CN to meet with portfolio holder one-on-one on appointment to discuss role responsibilities.
- Communicate with other portfolio holders through attendance at scheduled meetings.
- Create portfolio holder ownership and accountability.
- Work with unit staff to improve the quality of patient care through improved infection prevention and control practices.
- Increase staff awareness by acting as an information resource for their portfolio.
- Be a role model for infection prevention and control practices.

4.1 Safety and quality activities

- Actively participate in quality activities which help improve practices in workplace.
- Undertake infection control audits per WACHS-Kimberley Infection Prevention and Control Audit Schedule.
- Complete Action Plans to address areas of concern and submit with audit.
- Respond to findings from these audits with feedback to manager and at local staff meetings.
- Work with peers to correct any lapses in infection prevention and control practice.
- Infection surveillance activities.
- Participate as requested in activities to promote Hand Hygiene or other infection prevention initiatives.
- Ensuring infection control information is readily accessible by all staff who work in the area. This includes ensuring Infection Control notice board is current.

4.2 Education Activities

- Maintain and improve current knowledge and skills through ongoing educational opportunities, reviewing current literature and attending education on portfolio related subjects.
- Complete Infection Prevention & Control- Clinical Standards in Capabiliti LMS (CL92 EL2).
- Complete Hand Hygiene Compliance Auditor training as recommended by site infection control CN.
- Promote policies, procedures and guidelines within own department.
- Promote professional development activities.
- Deliver/organise activities in response to issues identified on audits, dashboard, CIMS and policy procedure updates or as directed through Infection Control.
- Make recommendations and seek suggestions for formal education as required based on perceived needs.

4.3 Risk assessment and management

Encourage staff driven change through empowering all staff to identify problem areas and solutions and contribute to policy decisions. Improve risk identification and implement risk minimisation interventions, adhere to Occupational Health and Safety principles.

- Risk assessment and management of transmissible disease.
- Adhering to screening requirements for multi-resistant organisms.
- Provide accurate information regarding potential or actual infection control concerns.
- Facilitates and supports investigation and communication of any real or potential outbreak of infection and monitoring of the appropriate interventions and management.

5. Evaluation

Compliance with this document is to be evidenced by:

- monthly meetings with line manager and infection prevention and control portfolio holder
- completion of monthly activity report using the template provided
- minuted attendance at local Infection Control Meetings or network forums. This includes tabling agenda items and addressing action items relative to the portfolio
- Infection Control is an agenda item at department/site ward meetings
- Infection Control audits submitted
- measureable improvements on dashboard.

6. Standards

[National Safety and Quality Healthcare Standards](#) (First Edition 2012) - 3.1.1; 3.4

[National Safety and Quality Healthcare Standards](#) (Second Edition 2017) - 3.2

[National Standards for Mental Health Services](#) 2010 - 2.7

7. References

Dawson, S.J. The role of the infection control link nurse. *J Hosp Infect* 2003; 54:251-257.

Lloyd-Smith, E., Curtin, J., Gilbert, W., and Romney, M. Qualitative evaluation and economic estimates of an infection control champions program. *Am J Infection Control* 2014; 42:1303-7.

[NHMRC \(2010\) Australian Guidelines for the Prevention and Control of Infection in Healthcare. Commonwealth of Australia](#)

Sopirala, M.M., Yale-Dunbar, L., Smyer, J., Wellington, L., Dickman, J., Zikri, N., et. al. Infection control link nurse program: An interdisciplinary approach in targeting health care-acquired infection. *Am J Infection Control* 2014; 42(4): 353-359.

8. Related Policy Documents

WACHS [Infection Prevention and Control Policy](#)

9. Acknowledgement

Infection Prevention and Control, WACHS-Pilbara

**This document can be made available in alternative formats
on request for a person with a disability**

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Infection Control Portfolio Holder Activity Statement

Activity Statement for: _____ (insert name)

Month: Jan Feb Mar Apr May Jun Jul Aug Sep Oct Nov Dec **Year** _____

I received a portfolio day this month

If no portfolio day allocated, please indicate reason, e.g. clinical needs, annual or sick leave, etc. _____

REGIONAL SITE:	BRO	DBY	FCH	HAL	KUN	WYN
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UNIT OR AREA: _____

INSTRUCTIONS:

Submit monthly to:

- § Unit Manager
- § Infection Control Clinical Nurse for health service area

Monthly Meeting Scheduled with Unit Manager

All portfolio holders to schedule a monthly meeting with their Unit Manager to: (1) discuss the content of this document, (2) provide updates on their portfolio, and (3) discuss plans for their respective department.	
Name – Unit Manager	
Date meeting held	
Location meeting held	
Signature – Unit Manager	
Signature - Portfolio Holder	
Date of next meeting <i>Please schedule in calendar</i>	

TOPICS FOR DISCUSSION AT MEETING

- .. Dashboard/audit results and plans to ensure compliance
- .. Content of WACHS-Kimberley Infection Prevention and Control Portfolio Holders Procedure
- .. Concerns / issues
- .. Next month's plans for implementation
- .. Updates from regional staff

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1. Audits Completed

Date	Infection Control Audit	Time spent (mins/hrs)

2. Policy review

Date	Policy reviewed	Time spent (mins/hrs)

3. Meetings (e.g. committee meetings, network forums)

Date	Activity	Time spent (mins/hrs)

4. Staff / Patient / Visitor education given (include teaching done “on the go”)

Date	Topic	Time spent (mins/hrs)

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