Staff competency record for infection prevention and control

All staff must be trained and demonstrate competency in infection prevention and control.

Your practice’s infection prevention and control coordinator should assess and record all staff members’ infection prevention and control education and competency and can do so using the [staff competency record for infection prevention and control](#template) template below.

Ongoing auditing of competences and education may also be useful to identify training needs.

This template if drawn from the Royal Australian College of General Practitioners *Infection prevention and control guidelines for general practices and other office-based and community-based practices* (IPC Guidelines). Refer to [Section 1 – Principles](https://www.racgp.org.au/running-a-practice/practice-standards/racgp-infection-prevention-and-control-guidelines/1-principles/overview) of the guidelines for more information.

For more information regarding the role of an infection prevention and control coordinator, refer to:

* [Risk assessment and planning](https://www.racgp.org.au/running-a-practice/practice-standards/racgp-infection-prevention-and-control-guidelines/1-principles/risk-assessment-and-planning#role-of-the-infection-prevention-and-control-coordinator) in the IPC Guidelines
* [Criterion GP4.1 – Infection prevention and control, including sterilisation](https://www.racgp.org.au/getmedia/7a44e591-84ab-49f3-9a52-c3262fbad131/Standards-for-general-practices-5th-edition.pdf.aspx#page=152) in the [*Standards for general practices*](https://www.racgp.org.au/running-a-practice/practice-standards/standards-5th-edition/standards-for-general-practices-5th-ed-1)(5th edition).

**Disclaimer**

The information set out in this publication is current at the date of first publication and is intended for use as a guide of a general nature only and may or may not be relevant to particular patients or circumstances. Nor is this publication exhaustive of the subject matter. It is no substitute for individual inquiry. Compliance with any recommendations does not guarantee discharge of the duty of care owed to patients.

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We acknowledge the Traditional Custodians of the lands and seas on which we work and live, and pay our respects to Elders, past, present and future.

Insert practice name here.

Staff competency record for infection prevention and control

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Training, knowledge and competency** | **Staff member** | | **Competent Y/N** | **Date checked** | **Staff checker\*** | **Date for re-check  (if applicable)** |
| **Name** | **Job role** |
| **General** | | | | | | |
| **Hand hygiene** |  |  |  |  |  |  |
| **Respiratory hygiene and cough etiquette** |  |  |  |  |  |  |
| **Use of appropriate personal protective equipment (including fit-checking mask)** |  |  |  |  |  |  |
| **Fit-testing masks** |  |  |  |  |  |  |
| **Aseptic technique** |  |  |  |  |  |  |
| **Safe use and disposal of sharps** |  |  |  |  |  |  |
| **Waste management** |  |  |  |  |  |  |
| **Linen handling and laundry processes** |  |  |  |  |  |  |
| **Transmission-based precautions** |  |  |  |  |  |  |
| **Management of blood/other body substance spills** |  |  |  |  |  |  |
| **Management of exposure to blood/other body substances** |  |  |  |  |  |  |
| **Appropriate use of detergent and/or disinfectants products** |  |  |  |  |  |  |
| **Routine environmental cleaning** |  |  |  |  |  |  |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Training, knowledge and competency** | **Staff member** | | **Competent Y/N** | **Date checked** | **Staff checker\*** | **Date for re-check (if applicable)** |
| **Name** | **Job role** |
| **Reprocessing reusable medical devices and equipment** | | | | | | |
| **Transportation** |  |  |  |  |  |  |
| **Pre-treatment *(manual and ultrasonic)*** |  |  |  |  |  |  |
| **Cleaning (*manual*, *automatic washer-disinfector), drying, assembly/inspection*** |  |  |  |  |  |  |
| **Packaging** |  |  |  |  |  |  |
| **Loading steriliser** |  |  |  |  |  |  |
| **Monitoring sterilisation cycle** |  |  |  |  |  |  |
| **Unloading steriliser** |  |  |  |  |  |  |
| **Storage** |  |  |  |  |  |  |
| **Recording cycle** |  |  |  |  |  |  |

\* Practice to determine an appropriate member of staff who can sign-off on staff members' competency (for example, the infection prevention and control coordinator).