

# Position Description



<b>Position Title:</b>	<b>Infection Prevention and Control Coordinator</b>
<b>Location:</b>	Monash Children's Hospital (12-18 months during rebuild) Malvern once new build completed
<b>Department</b>	Hospice
<b>Reporting To:</b>	Direct: Hospice Manager Line Direct: Deputy Hospice Manager
<b>Main Purpose of Position:</b>	<p>In collaboration with the Hospice Management Team, this role will provide overall coordination and development of the infection control related systems, policies, processes and risks.</p> <p>This includes managing day to day infection control issues of surveillance, waste management, staff health, risk management, outbreak identification, auditing and implementation of relevant NSQHSS standards and guidelines.</p>
<b>Number of Direct Reports</b>	Nil
<b>Decision Making Authority</b>	As per Very Special Kids' Delegation of Authority
<b>Key Relationships</b>	<p><b>Internal:</b></p> <ul style="list-style-type: none"> <li>• Hospice Management Team</li> <li>• Hospice Staff</li> <li>• Family Support Team</li> <li>• Quality Improvement Officer</li> <li>• GM Service Delivery &amp; Improvement</li> </ul> <p><b>External:</b></p> <ul style="list-style-type: none"> <li>• Very Special Kids Families</li> <li>• Hospitals and allied health providers</li> <li>• Community agencies</li> <li>• Department of Health</li> <li>• HICMR</li> </ul>

<b>Key Selection Criteria</b>	<p><b>Qualifications/ Education Training and Work Experience</b></p> <ul style="list-style-type: none"> <li>• Current Nursing Registration Certificate</li> <li>• Nursing Degree which meets the requirements of AHPRA</li> <li>• Proven experience working within an interdisciplinary team environment</li> <li>• Demonstrated competence in infection prevention and control</li> <li>• HHA Gold Standard Auditor Workshop Accreditation</li> </ul> <p><b>Knowledge and Skills</b></p> <ul style="list-style-type: none"> <li>• Experience in infection prevention and control</li> <li>• Knowledge and understanding of the NSQHSS Standard 3 infection prevention and control requirements and HICMR guidelines</li> </ul> <p><b>Personal Attributes</b></p> <ul style="list-style-type: none"> <li>• Commitment to the purpose, values and philosophy of Very Special Kids</li> <li>• Commitment to a strengths based practice approach with families and volunteers</li> <li>• Commitment to quality improvement, infection prevention and ongoing evaluation and control</li> <li>• Demonstrated commitment to ongoing professional development</li> </ul>
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## Key Areas of Responsibility

### Hand Hygiene

### Key Performance Indicators

Advocate and educate staff and volunteers about the importance of Hand Hygiene in the prevention of cross infection by using a hand hygiene solution	Achieve minimum 80% hand hygiene compliance across VSK Hospice Staff and Volunteers
Develop and maintain related policies and procedures relating to Hand Hygiene.	Policies meeting the requirements of the NSQHSS are implemented within VSK
Encourage staff participation to facilitate a culture change program aimed at enhancing infection control practice.	Achieve minimum 80% hand hygiene compliance across VSK Hospice Staff and Volunteers
Coordinate hand hygiene compliance and infection control audits, detect changing patterns or problems and implement actions as required.	Achieve minimum 80% hand hygiene compliance across VSK Hospice Staff and Volunteers
Maintain Infection Prevention and Control standards as documented in policies, procedures and guidelines.	Compliance with NSQHSS Infection Prevention and Control standards

### Food Safety

### Key Performance Indicators

Maintain registration for Food Safety Supervisor Hospice Position.	Compliance training to be a Food Safety Supervisor completed.
Review and authorize periodical food temperature checks for Hospice Kitchen. Review, investigate and resolve any instances of non-compliance.	Temperature checks in line with Food Safety requirements.
Provide education to Hospice Team regarding correct food handling procedures.	

**Transmission Based Precaution****Key Performance Indicators**

Develop and maintain policies and procedures for Transmission Based Precautions.	Policies and procedures meeting the NSQHSS are up to date and implemented in the Hospice.
Educate and support Hospice staff regarding what procedures to follow and Personal Protective Equipment to use when a child has a known acquired infection and is staying in the Hospice.	Correct procedures followed.

**Policies, Procedures and National Standards****Key Performance Indicators**

Research, develop, monitor and maintain Infection Prevention and Control policies in conjunction with the Hospice Management Team.	Policies and procedures meeting the NSQHSS are up to date and implemented in the Hospice.
Support the Hospice Management Team in the roll out of Infection Prevention and Control Policies, Procedures and Guidelines and education as required.	Hospice Staff & Volunteers awareness of Infection Prevention and Control Policies, Procedures and Guidelines.
Assist in organising and convening meetings relevant to improving infection prevention and control practices.	
Source and order the correct Personal Protective Equipment (PPE), ensuring readily available, in place and in the correct position in the Hospice ie. Gloves, aprons, hand sanitisers, waste bins and educate staff on correct usage.	Compliance with Infection Prevention and Control procedures.
Ensure Infection Prevention and Control containers are utilised in the Hospice.	Drugs stored in compliant baskets.
Liaise with Managers, Quality Improvement Committee and Quality Improvement Coordinator regarding infection control practices.	VSK compliance with Infection prevention and control standards.
Liaise with Contracted Cleaning Agencies to ensure trained Cleaning staff are utilised in the Hospice.	Cleaning Staff procedures are compliant with the NSQHSS infection prevention and control standards.

**Auditing****Key Performance Indicators**

Conduct surveillance of Hospice acquired infection and investigate and ensure correct procedures followed.	Minimisation of infection spread.
Audit Infection Control information upon each child's departure and report on statistics.	Biannual reporting to Hospice Management Team
Conduct Hand Hygiene audits	Minimum of once a month and reporting once a quarter
Conduct family surveys for feedback on Infection Control measures in the hospice	Yearly reporting
Conduct and report on Standard Precautions audits (Including Aseptic Technique)	Minimum of once a quarter

Conduct Environmental and Equipment Cleaning audits	Minimum of once a quarter
Conduct Environmental audits	Minimum of once a quarter

### Quality, Safety and Improvement

<p>VSK Employees have a responsibility and accountability to contribute to the organisation's commitment to Quality, Safety and Improvement by:</p> <ul style="list-style-type: none"> <li>• Acting in accordance and complying with all relevant Safety and Quality policies and procedures</li> <li>• Identifying risks, reporting and being actively involved in risk mitigation strategies</li> <li>• Participating in and actively contributing to quality improvement programs</li> <li>• Complying with the requirements of the National Safety &amp; Quality Health Service Standards</li> <li>• Complying with all relevant clinical and/or competency standards</li> <li>• Complying with the principles of Patient and Family Centred Care that relate to this position</li> </ul>
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Conditions of Service	
Hours	8 hours per week IPC (+ 3 Registered Nurse shifts per week) i.e. .8 EFT
Other	Current driver's licence (if required)
Salary Package	Nurses and Personal Care Workers Enterprise Agreement 2018-2022 Registered Nurse – Level 3B
Tenure	Permanent position after successful completion of six month probationary period.
General	Employment with Very Special Kids will be subject to a satisfactory Police Check and a Working with Children Check.

**Privacy Statement: Personal Information may be collected and stored for the purpose of recruitment and selection. The information will only be used and disclosed for the primary purpose of its collection. Some exceptions exist. These may be obtained from the Privacy Officer.**

Approvals	
Created by:	Katrina Hall, HR Manager
Approved by:	Angie Dredge, GM Service Delivery & Improvement
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