



COMPETENCY BASED JOB DESCRIPTION

Field	Detail
Job Title	Infection Preventionist — Skilled Nursing Facility (SNF)
Department	Skilled Nursing Facility / Infection Prevention and Control
Reports To	Director Of Nursing, Reports to the Chief Operating Officer. Works closely with the SNF Director of Nursing
Supervises	None
FLSA Status	Non-Exempt / Hourly, Subject to HR Classification Review (HR-014, HR-015)
Pay Range	\$47.00 – \$72.00 Per Hour, Based on Experience and Qualifications (Market-Referenced)
Work Location	Southern Inyo Healthcare District Distinct Part (D/P) Skilled Nursing Facility (33 Licensed Beds)
Schedule	Full-Time (40 Hours Per Week), Onsite, Dedicated to Infection Prevention and Control
Effective Date	Created June 2026; Revised [October 2026]
Position Review	This Job Description Describes the General Nature and Level of Work Expected and May Be Updated Based on District Operational, Regulatory, Licensing, or Resident-Care Requirements.

Job Summary

The Southern Inyo Healthcare District (SIHD) Infection Preventionist (IP) Is Responsible for Identifying, Investigating, Monitoring, and Reporting Healthcare-Associated Infections (HAI) in The Distinct Part (D/P) Skilled Nursing Facility at SIHD. The IP Collaborates with Departments and Individuals to Create, Provide Feedback On, and Sustain Infection Prevention Strategies, and Designs, Manages, and Evaluates the Facility's Infection Prevention and Control Program (ICPC) To Protect Residents, Staff, And Visitors.

The IP merges clinical surveillance with data-driven quality improvement. The IP Tracks Infections, active member of the Antibiotic Stewardship Program with the Medical Director and Pharmacy, Ensures Compliance with All Regulatory Agency Mandates, and Drives Quality Assurance and Performance Improvement (QAPI) Initiatives. This Role is Full-Time and Onsite.

Designation, Dedicated Time and Coverage

Federal and California requirements apply to the IP role in a SNF regardless of size. The following controls are part of this position:

- The Incumbent is the SNF's Designated Infection Preventionist, as confirmed in writing by the Administrator and the Director of Nursing, and Works Full-Time (40 Hours Per Week) Onsite
- The Position is Dedicated to Infection Prevention and Control. The Incumbent May Not be Assigned Routine Direct-Care, Staffing, or Other Duties that Displace Required IPCP Work, and the IP's Hours are Not Counted Toward Minimum Direct-Care Staffing Hours



COMPETENCY BASED JOB DESCRIPTION

- A Written Coverage Plan Names a Qualified, Trained Backup for Planned Absences, and the Director of Nursing Reviews Completion of Required IPCP Activities at Least Monthly

Essential Duties and Responsibilities

A. Surveillance, Data and Reporting

- Performs Surveillance of Residents and staff when indicated, reported to have infections, or reported to Have Infections by collecting, analyzing, and Interpreting Documented Data
- Maintains the Infection Line List and Surveillance Report for Each Resident Who Has an Infection, and an Infection Control Log for Each Infection Occurring in the Facility Monthly
- Maintains a Tracking Log for MDRO Infections and Reviews Antibiotic Resistance Patterns, especially MDROs (MRSA, VRE, CRE, ESBL, and Others)
- Collaborates with Laboratory Staff on any Results Flagged with an MDRO
- Summarizes Data for Monthly, Quarterly, and Annual Reports
- Develops an Annual Surveillance Plan Based on the Population Served, Services Provided, and Analysis of Surveillance Data, and Evaluates and Modifies It, and the Infection Prevention and Control Policies and Procedures, as Needed and No Less than Annually
- Completes Required Reporting to the National Healthcare Safety Network (NHSN), CDPH, and Inyo County Public Health, with Accuracy and on Time

B. Antibiotic Stewardship

- Participates in the Antibiotic Stewardship Program and the Infection Control Committee to Ensure Safe and Appropriate Use of Antibiotics
- Reviews Every Antibiotic Order to confirm a Proper Indication for Use and Appropriateness for the Resident Based on Criteria Being Met, Including Whether Cultures were done before Treatment, the Physician Starting Therapy, and the Length of Therapy and any Changes During the Course of Treatment
- Reviews, Monitors, and Reports Antibiotic Usage Patterns, and Collects and Reviews the Types of Antibiotics Used in the Facility
- Coordinates and Consults with the Pharmacist or Pharmacy Consultant on Antibiotic Use, And Communicates with Physicians Regarding Appropriate Use of Antibiotic Medications
- Shares Feedback with Physicians on Individual Prescribing Patterns, Including Cultures Ordered and Antibiotics Prescribed

C. Precautions, Screening and Resident Care Practices

- Reviews the Assessment by the Facility Nurse for Appropriateness of Care for Infection Control and Adherence to Isolation Policies and Procedures, According to Evidence-Based Practices, Including Standard Precautions, Transmission-Based Precautions, and CDC Enhanced Barrier Precautions
- Completes the Infection Risk Assessment and Scale Upon Admission and When Changes in Condition Occur
- Conducts Resident Tuberculosis Screening During Admission Using A 2-Step Tuberculin Skin Test, with A Chest X-Ray When the Skin Test is Positive, Consistent with CDPH Guidance and District Policy
- Directs the Immunization Program for Influenza, RSV, COVID-19, and Pneumonia, Ensures Informed Consent or Declination is Completed, and Maintains a Current Immunization Log for All Residents



COMPETENCY BASED JOB DESCRIPTION

D. Rounds, Audits and Environmental Compliance

- Performs Daily Rounds in the Facility to Identify Infection-Control Issues and Problems, and Conducts In-Service Education when Needed to Correct Known Problems
- Performs Hand Hygiene Observations and Documents Findings for All Departments, Including Clinicians and Outside Contracted Providers
- Conducts and Reports Findings of Environmental Rounding for Infection Control Compliance in General Maintenance, Plumbing and Ventilation, Food Preparation and Storage, Laundry Collection and Cleaning, Infectious Waste Collection and Disposal, Housekeeping and Cleaning, Disinfection and Sanitation, and Equipment Cleaning

E. Outbreak Management and Exposure Follow-Up

- Confirms, Investigates, and Reports Outbreaks, and Leads Response Efforts and Contact Tracing for Outbreaks Such as Influenza, COVID-19, and Gastrointestinal Illness
- Manages and Follows Up on Employee and Resident Exposures to Infectious Diseases, in Coordination with Employee Health
- Notifies the Medical Director, Director of Nursing, Administrator, and Public Health Authorities as Required, and Recommends Admission, Visitation, or Staffing Restrictions to The Medical Director and Administrator

F. Policies and Program Administration

- Ensures All Infection Prevention and Control Policies and Procedures are Complete, Up to Date, and Carried Out
- Maintains the Infection Prevention Quality-Control Plan and the Annual IPCP Risk Assessment

G. Education, Training and Competency

- Provides Infection Prevention Education at the Time of Hire, No Less than Annually, and when Training or Re-Education is Required or Needed
- Assists Employee Health with Education Programs for Staff on Proper Infection Control Practices
- Acts as Subject Matter Expert and Resource within the SNF to Residents, Families, Staff, Partners, Providers, Visitors, The Community, and Public Health Personnel on Infection Prevention and Control Measures, Including Identification of Infectious Disease Processes
- Creates a Process for Demonstrating Infection Prevention Competencies Following Each Training Activity

H. QAPI and Committees

- Attends Quality Improvement Committee (monthly) and QAPI (quarterly) meetings and participates as a member of the QAPI Committee
- Collects and gathers data for committee review and reports monthly, quarterly, and annual findings of infection control data review and analysis to the QA Committee

I. Professional Standards and Compliance

- Complies With the SIHD Attendance Policy Requiring Regular, Reliable, and Punctual Attendance
- Complies With HIPAA and District Privacy and Security Policies, and Handles Confidential Information and Protected Health Information as Authorized and Necessary for Assigned Duties
- Adheres to All District Policies and Procedures, Completes Work Promptly in Compliance with State and Federal Regulations, Accepts New Assignments, and Initiates New Projects as Indicated



COMPETENCY BASED JOB DESCRIPTION

- Demonstrates Flexibility and Willingness to Adapt to Workday Expectations as the Need Arises, and Performs Other Duties as Assigned

Regulatory Requirements for the 33-Bed SNF

This table summarizes requirements most relevant to the role and does not replace the regulations. The District's Compliance function confirms applicability and updates it when requirements change.

Requirement	Source	How It Applies to This Position
Infection Prevention and Control Program, including a Designated Infection Preventionist with Specialized Training who Works at Least Part-Time, and An Antibiotic Stewardship Program	42 CFR § 483.80 (F880 series)	Core Purpose of the Position; Program Design, Management, and Evaluation
California Requires a Full-Time, Dedicated Infection Preventionist (40 Hours Per Week) With Primary Professional Training in a Health-Related Field, Qualified by Education, Training, Experience, or Certification, and With Specialized Infection Prevention and Control Training; IP Hours are Not Counted in Minimum Direct-Care Hours	Health & Safety Code § 1255.9; CDPH AFL 20-84, 20-85, 21-51	Full-Time Onsite Schedule; Qualifications; Dedicated Time; Coverage Plan
Initial IPC Training (Minimum 14 Hours) And 10 Hours of Annual Continuing Education in Infection Prevention and Control; Annual IPC Training for All Health Care Personnel	CDPH AFL 20-84; AB 2644 (Stats. 2020, ch. 287)	IP Training Milestones; Annual Staff Education and Competency
Enhanced Barrier Precautions for Residents with Indwelling Devices, Wounds, or MDRO Colonization or Infection	CMS QSO-24-08-NH; CDPH AFL 24-15	Precaution Implementation, Signage, And Audits
Immunization Of Residents and Staff; Resident and Employee Tuberculosis Screening; Exposure Control	42 CFR § 483.80(d); Cal/OSHA 8 CCR § 5199 and § 5193; CDPH guidance	Immunization Program, TB Screening, And Exposure Follow-Up
Reporting Of Outbreaks and Reportable Communicable Diseases; NHSN and Facility Data Reporting as Required	Title 17, CCR § 2500 et seq.; CDPH and CMS requirements; Inyo County Public Health	Outbreak Notification, Contact Tracing, And Data Submission
Quality Assurance and Performance Improvement	42 CFR § 483.75	Data Reporting to the QAPI Committee



COMPETENCY BASED JOB DESCRIPTION

Knowledge, Skills and Abilities

Knowledge of

- CDPH Title 22, CDC, NHSN, OSHA, and CMS Infection Control Program Regulations
- NHSN Reporting Guidelines and Timelines, the NHSN Reporting Portal, and Mandatory SNF Reporting Requirements for HAI
- Surveillance Methods and Standardized Infection Definitions, Antibiotic Stewardship, and MDRO Management
- Familiarity with CDPH Survey Processes and Guidelines, and Inyo County Public Health Resources and Reporting Processes
- Outbreak Investigation, Contact Tracing, and Quality-Improvement Methods

Ability To

- Communicate Clearly in Both Oral and Written Forms Using the English Language; Bilingual English/Spanish Preferred
- Respond to Common Inquiries or Complaints from Residents, Patients, Physicians, Peers, Regulatory Agencies, or Members of the Business Community
- Work Independently, Set Priorities, and Manage Multiple Deadlines
- Work with Confidential Information and Handle Protected Health Information Consistent with HIPAA
- Collect, Analyze, and Present Data and Use it to Drive Improvement
- Tolerate Wearing Required Personal Protective Equipment (PPE) for Prolonged Periods

Minimum Qualifications

License And Education

- Current California Nursing License, Maintained in Good Standing
- College Degree in Nursing, Public Health, Epidemiology, Clinical Laboratory Science, Medical Technology, or a Related Field

Certification And Development Expectations

- Valid CPR and BLS Certification, Kept Current During Employment
- Successful Completion of an Infection Prevention and Control Training Program Meeting CDPH AFL 20-84 (Initial Training of at Least 14 Hours) Within Three (3) Months of Hire
- Successful Completion of the CDC Antibiotic Stewardship Training Program Within Six (6) Months of Hire
- At Least 10 Hours of Continuing Education in Infection Prevention and Control Each Year
- These are Employment Expectations Unless the District Formally Approves an Exception Based on Documented Circumstances

Other Requirements

- Satisfactory Completion of the Conditions of Employment Under Hr-032, Including Criminal Background Clearance as Required by California Law for Long-Term-Care Personnel, Drug Test, Tuberculosis and Other Required Health Clearance, Physical Exam, and Satisfactory References



COMPETENCY BASED JOB DESCRIPTION

- Ability to Meet Immunization and Health-Clearance Requirements Applicable to Long-Term-Care Personnel

Preferred Qualifications

The Following Are Not Required but Will Be Given Favorable Consideration:

- Two or More Years of Experience as an Infection Preventionist
- Two or More Years of Experience as an LVN Or RN
- Knowledge of and Previous Experience with Infection Control Surveillance
- Board Certification in Infection Control, Such as CIC or LTC-CIC Through CBIC, and Membership in a Local APIC Chapter
- Bilingual English/Spanish Ability
- Experience With NHSN, QAPI, Survey Readiness, And Outbreak Response in a Skilled Nursing or Long-Term Care Setting

Performance Measures

Performance is measured against strict, specific targets aligned with a 33-bed SNF. Measures tied to a regulatory timeframe are held to 100%. With a small census, one case can swing a rate, so infections and outbreaks are also measured as events with individual review, and process measures are held to 100%. The Director of Nursing confirms targets at least annually.

1. Surveillance and Reporting

Measure	Target
Infection Line List	100% of New Infections Reviewed Against Standardized Surveillance Definitions and Entered Within 1 Business Day of Identification
MDRO Tracking	100% of MDRD results flagged by the laboratory reviewed the same day and entered on the MDRD log within 1 Business Day
Monthly Report	100% delivered to the Quality Improvement Committee by the 10th of the Following Month, with Trends and Root-Cause Review of Any Month Above the Baseline Rate Set in the First 90 Days
Quarterly And Annual Reports	100% Presented at QAPI Meetings; Annual Summary Completed By [January 31]
Annual Surveillance Plan and IPCP Risk Assessment	100% Completed and Approved Annually
External Reporting (NHSN, CDPH, Inyo County Public Health)	100% Accurate and Submitted by the Required Deadline



COMPETENCY BASED JOB DESCRIPTION

2. Antibiotic Stewardship

Measure	Target
Antibiotic Order Review	100% of Antibiotic Orders Reviewed Within 1 Business Day for Indication, Culture, Dose, and Length of Therapy, with A Documented Time-Out at 72 Hours
Appropriate Use	At Least 90% of Antibiotics Start Meeting Documented Criteria or Having A Documented Prescriber Rationale
Prescriber Feedback	100% of Prescribers Receive Individual Feedback At Least Quarterly
Usage and Resistance Report	100% Delivered by the 10th of the Following Month
CDC Core Elements Assessment	Annual Facility Assessment Completed 100%

3. Precautions, Screening and Immunization

Measure	Target
Infection risk assessment	100% completed within 1 business day of admission and after a change in condition
Isolation and Enhanced Barrier Precautions	100% of residents meeting criteria have the correct precautions and signage in place; at least 95% adherence on weekly audits
Tuberculosis screening	100% of admissions screened per policy, with chest x-ray completed when the skin test is positive
Immunization	100% of residents offered influenza, RSV, COVID-19, and pneumococcal vaccines with consent or declination documented; at least 90% of eligible residents up to date on influenza

4. Rounds, Audits and Environmental Compliance

Measure	Target
Daily rounds	Documented rounds each scheduled workday, 100%
Hand hygiene	At least 40 observations per month across shifts, departments, and contracted providers, at 95% or higher compliance
PPE use	At least 20 observations per month at 95% or higher compliance
Environmental rounds	100% of the full environmental checklist completed monthly; 100% of deficiencies corrected within 7 days or escalated to the Administrator



COMPETENCY BASED JOB DESCRIPTION

5. Outbreak and Exposure Management

Measure	Target
Suspected outbreak notification	100% reported the same day to the DON, Chief Operating Officer, Administrator, Medical Director, and Inyo County Public Health, with CDPH reporting as required
Outbreak Response	Control Measures Implemented, Line List and Contact Tracing Started Within 24 Hours; After-Action Report Within 14 Days of Outbreak Closure
Exposure Follow-Up	100% of Resident and Employee Exposures Investigated with Follow-Up Documented Within 1 Business Day

6. Education, Policies and Competency

Measure	Target
New-Hire Education	100% of New Staff Receive Infection Prevention Education At Hire (HR-035)
Annual Staff Training	100% of Staff Complete Annual Infection Prevention Training by the Due Date
Competency Demonstration	100% of Staff Trained Complete a Competency Demonstration After Each Training Activity
Policy Currency	100% of Infection Prevention and Control Policies Reviewed at Least Annually, None Overdue
IP Training And Continuing Education	Initial Training Within 3 Months and CDC Stewardship Training Within 6 Months of Hire; 10 Hours of Continuing Education Annually, 100%

7. QAPI, Survey Readiness And Professional Performance

Measure	Target
Committee Participation	100% Attendance at Monthly Quality Improvement and Quarterly QAPI Meetings, with Surveillance Data Presented
Survey Readiness	Monthly Internal Infection Control Audit; 100% of Corrective Actions Closed by the Due Date; Zero Repeat Infection-Control Deficiencies
Professionalism And Reliability	Dependable Attendance; Zero Substantiated HIPAA or Conduct Violations; Collaboration with Departments and Contracted Providers

How Metrics Are Applied

- The Director of Nursing reviews a monthly scorecard with the Incumbent, and Chief Operating Officer and QAPI Committee Review It Quarterly
- Any Miss on A Measure Tied to A Regulatory Timeframe Triggers a Documented Root-Cause Review within 5 Business Days and a Corrective Plan
- Two Consecutive Months Below Target on any Measure, or any Miss that Results in A Survey Citation, Triggers A Formal Performance Review with the Director of Nursing and Human Resources



COMPETENCY BASED JOB DESCRIPTION

- A Baseline Period of Up To 90 Days After Hire or Adoption of these Measures May Be Used to Calibrate Rate-Based and Non-Regulatory Targets
- Results Affected by Factors Outside the Incumbent's Control, Such as Staffing Shortages, Laboratory Delays, or Outbreaks, are Documented and Considered
- Metrics Inform, and Do Not by Themselves Determine, the Overall Performance Evaluation, which Also Considers the Duties, Behavioral Expectations, and Compliance Requirements in this Job Description

Working Conditions and Physical Requirements

- Extended Periods of Sitting, Standing, and Walking
- Performing Rounds or Environmental Checks May Require Bending, Twisting, Reaching, and Squatting
- Periods of Lifting and Carrying Up To 25 Pounds When Transporting Equipment, Manuals, or Testing Supplies
- Clear and Audible Speaking Voice and the Ability to Hear Normal Speech Levels to Observe Resident Environments, Monitor Data Reports, And Communicate Clearly in Person and on the Phone
- Dexterity to Operate Computers, Analyze Laboratory Data, and Handle Specialized Medical or Testing Instruments
- Regular Exposure to Communicable Diseases and Hazardous Substances
- Must Be Able to Tolerate Wearing Required PPE For Prolonged Periods

Reasonable Accommodation Will Be Considered Consistent with Applicable Requirements.

Role Authority and Escalation

The Infection Preventionist makes independent infection prevention and control decisions within the scope of the IPCP, nursing practice, delegated authority, and District policy, including implementing precautions, isolation, and outbreak control measures, and stopping a practice that poses an immediate infection risk until the Director of Nursing, Chief Operating Officer or Administrator can review it. The incumbent does not independently establish District policy, approve compensation, make final staffing or personnel decisions, or restrict admissions or visitation without the Medical Director, Chief Operating Officer or Administrator.

Outbreaks, resident-safety events, suspected abuse or neglect, medication-safety concerns, survey and compliance concerns, and HIPAA or privacy concerns must be escalated promptly to the Director of Nursing, Chief Operating Officer and/or Administrator and, as applicable, the Medical Director, Compliance/Privacy leadership, Human Resources, or public health authorities.



COMPETENCY BASED JOB DESCRIPTION

Employee Acknowledgment

I acknowledge that I have reviewed this job description and can fulfill these responsibilities. This job description is not designed to cover or contain a comprehensive listing of activities, duties, or responsibilities that are required of the employee for this job. I understand that Southern Inyo Healthcare District reserves the right to revise this job description without notice.

Employee Printed Name: _____ Signature: _____ Date: _____

Supervisor (DON) Name: _____ Signature: _____ Date: _____

Human Resources Name: _____ Signature: _____ Date: _____



COMPETENCY BASED JOB DESCRIPTION