

IPC.2.3.4 Ensuring effective implementation of infection prevention and control policies.

IPC.2.3.5 Ensuring that healthcare associated infection surveillance is conducted in a systematic manner.

IPC.2.3.6 Providing ongoing consultation to all hospital departments.

Standard Intent:

Infection prevention and control activities should be overseen by one or more persons who should be qualified in infection prevention and control practices through education, training, experience, or certification. This qualified staff should directly report to higher administrative authority to ensure the presence of an independent administrative unit that oversees IC issues in the whole institution. The person fulfills program oversight responsibilities as per standard requirements that should be described within the job description.

IPC.3 The hospital has an infection prevention and control structure (e.g., department, team) with adequate qualified staff, based on its size, level of risks, and program scope and complexity.

IPC.3.1 At least one full time infection prevention and control practitioner is assigned per hundred beds (including emergency beds, dental chairs, day case, dialysis and others).

IPC.3.1.1 An additional ratio of one infection prevention and control practitioner per thirty intensive care beds is considered where ventilation and hemodynamic monitoring are routinely performed.

IPC.3.1.2 An additional ratio of one infection prevention and control practitioner per one hundred twenty patients dialyzed per day.

IPC.3.2 The infection prevention and control practitioners are qualified in infection prevention and control practices by education (physician, registered nurse, or certified professional in infection prevention and control), training or experience.

IPC.3.3 The infection prevention and control practitioners acquire and maintain current knowledge and skills in the field of infection prevention and control and epidemiology.

Standard Intent:

The infection prevention and control program should be appropriate to the hospital's size, level of risks, complexity of activities, and the program's scope. One or more Infection Prevention and Control Practitioner (s), working on a full-time basis as per standard requirements, should oversee the infection control program as part of their assigned responsibilities in the job descriptions. Their qualifications depend on the activities they will carry out and should be met through education; training; experience; and certification. The hospital should provide a continuous medical education program

to update the knowledge and skills of Infection Prevention and Control Practitioner (s).

IPC.4 There is a designated multidisciplinary committee that provides oversight of the infection prevention and control program.

IPC.4.1 The infection prevention and control committee is chaired by the hospital director or the medical director.

IPC.4.2 The membership of the infection prevention and control committee includes representatives from the medical staff, nursing staff, microbiology, operating room, central sterilization service, pharmaceutical care, dietary services, housekeeping, infection prevention and control staff, and other departments as needed.

IPC.4.3 The infection prevention and control committee meets on a regular basis (at least quarterly).

IPC.4.4 Functions of the infection prevention and control committee include, but are not limited to, the following:

IPC.4.4.1 Review of the hospital infection prevention and control policies and procedures.

IPC.4.4.2 Review of the reports of healthcare-associated infections surveillance submitted regularly by the infection prevention and control team and suggestion of appropriate actions.

IPC.4.4.3 Revision of the yearly plan submitted by infection prevention and control team and suggestion of additions/changes if necessary.

IPC.4.4.4 Evaluates and revises on a continuous basis the procedures & the mechanisms developed by the infection prevention & control team to serve established standards and goals.

IPC.4.4.5 Brings to the attention of the infection prevention & control team new infection control issues arising in different departments of the hospital & suggests solutions.

IPC.4.4.6 Each member of the committee acts as an advocate of infection prevention & control in his department, trying to promote its principles, and ensures application of its rules.

Standard Intent:

The activities of the Infection Prevention and Control unit should be supervised and be overseen by a multidisciplinary body that is chaired by a designee of the higher administration. Infection prevention and control activities should reach to every part of a health care hospital and involve individuals from multiple departments and services via multidisciplinary committee. Coordination involves communicating with all parts of the hospital to ensure that the program is continuous and proactive; physicians and nurses are represented and engaged in the activities with the infection prevention and