

INFECTION CONTROL MANUAL (IC POLICIES & PROCEDURES)



GDIPC

Policy and procedure :

A policy is a set of rules or guidelines for your organization and employees to follow in or to achieve compliance. Policies answer questions about what employees do and why they do it. A procedure is the instructions on how a policy is followed.

Infection control manual (IC policies & procedures)

Element : A-6

- Sub- Element (3)
- Activities for auditing:
 - (D) documentation
 - (SI) staff interview
 - (O) observation
- Score (0-1-2-NA)

Sub- Element (A-6.1)

Infection control policies and procedures are developed by IC department to be approved by IC committee (policies and procedures are based on scientific references approved by MOH (e.g. GCC, CDC, WHO or APIC). (D)

Sub- Element (A-6.1)

- Evidence-based Policies & Procedures / guidelines should be developed and implemented for the purpose of reducing HAI and AMR.
- The education and training of relevant health care workers on the guidelines and the monitoring of adherence with guideline recommendations should be undertaken to achieve successful implementation.

Sub- Element (A-6.1)

Appropriate IPC expertise is necessary to write or adapt and adopt a guideline both at the national and health care facility level. Guidelines should be evidence-based and reference international or national standards. Adaptation to local conditions should be considered for the most effective uptake and implementation.

Review:

- All Infection Control policies & procedures related to Infection Control.
- Review IC policies and procedures to make sure that they are developed by IC staff and approved by the IC committee.
- Verify in each policy that all IC policies and procedures are developed by infection Control department in collaboration with relevant medical staff, nursing staff and other internal and external stakeholders.

Review:

For example:

Policies & Procedures related to Hemodialysis unit (HDU) should be developed in collaboration with head of HDU, nursing department, environmental health etc.



Review:

Check for following in each Policy & Procedure:

Validity: All P/P should be valid (updated within 2 - 3 years and when indicated)

Title of Policy: Title should be clear, concise and matching with the content.

Review:

For example:

Instead of:

(Blood Spill) 

would be:

(Management of Blood &
body fluid spills)



Review:

Other examples:

Old Title	Suggested improved Title
Outbreaks	Management of Infectious Diseases Outbreaks
Dental Unit	Infection Control Measures in Dental Settings
Waste Management	Management of Infectious Medical Waste

Review:

Content of policy:

Comprehensive: Covers all aspects of infection control relevant to particular unit, program etc.

Fully applicable: All elements of the policy can be applied and comply with the hospital's scope of services.

Review:

References:

All P/P to be based on scientific references approved by MOH

- GCC
- CDC
- WHO
- APIC

Don't use hospitals as references

Review:

Signatories:

Signed from authorized personnel (i.e., owner of the policy / hospital director or medical director / concerned department head)

Review:

Approvals:

Each policy & procedure should be discussed and approved by IC Committee (*Check for specific policy approval in the documented Infection control committee meeting minutes*)

Approval by IC committee is required for the infection control manual as a whole before distribution and for individual policy after major changes.

Sub- Element (A-6.2)

Infection control policies and procedures are organized in one manual that is well- distributed and available in all hospital areas. (D,O,SI)

Sub- Element (A-6.1)

- Every facility should have an infection prevention manual compiling evidence- based practices for patient care.
- This manual should be developed and updated in a timely manner by the infection control team.
- It is to be reviewed and approved by infection control committee.

Review:

Infection Control Manual & check for following:

- 1) IC Manual is updated as per hospital policy.
- 2) Nicely designed & appropriately indexed with table of contents (Policy number, Title of Policy & Page numbers.)
- 3) Divided into appropriate sections for ease of accessibility (Administrative policies, Departmental policies & procedures, Isolation Procedures, Environmental health, support services etc.)

Review:

Infection Control Manual & check for following:

- 4) IC Manual must be available in the infection control department (*Electronic + Printed version*)
- 5) The manual must be available in each department. (*Electronic or hard version*)

Importance of written documents is considered least not to encounter shut down of the electricity / system failure.

Observe:

- Availability & accessibility of policy and procedure documents in each department.
- Healthcare workers are familiar with the policy and procedure and know how to access the system whenever needed.

Interview:

- 1) Staff about availability of Infection Control Manual
(Electronic and/ or Manual)

- 2) Staff to enumerate infection control policy and procedures (P/P) applicable for their department.

Interview:

For example, in ICU: Staff must mention

- P/P for standard precautions
- P/P for Transmission based precautions
- P/P for Aseptic technique
- P/P for Patient's Care Bundles for Prevention of HAIs & MDROs

Interview:

For example, in ICU: Staff must mention:

- P/P for Cleaning & disinfection of Medical Equipment's
- P/P for Housekeeping Services
- P/P for Management of infectious Waste etc.

Interview:

- 3) Randomly ask any staff to access policies & procedures for Prevention of central line associated Blood stream infections incorporating Central line care bundles.
- 4) Ask staff what alternate they have if the system is down (For hospitals relying electronic versions of IC Manual only)
- 5) Ask staff what alternate they have if the system is down (For hospitals relying electronic versions of IC Manual only)

Sub- Element (A-6.3)

Infection control policies and procedures are revised periodically by the infection control department every 2-3 years, or when required. (D)

Review:

- 1) Main policy stating the periodic revision of each policies and procedures. *(2 OR 3 years)*
- 2) Any relevant document stating P/P will undergo revisions every **2 OR 3 years & when required**. For example, if new guidelines from ministry or new updates are available.
- 3) Match the revision dates mentioned on the policies with the periodic revision policy for purpose of verification.

Review:

NOTE:

- A. Policies and procedures exceeding the revision dates will be considered (Not met)
- B. Each hospital should start revision process ahead of time in order to avoid delay.
- C. Any new guidelines / updates released from Ministry of Health need to be incorporated in the policies within 2 months maximum.

For more information



GDIPC website

<https://gdipc.sa/>