

SURVEILLANCE AUDIT TOOL

Date of visit: _____

Name of Hospital: _____ Region: _____

STANDARDS	0	5	10	NA	COMMENTS
1. There are written policies and procedures for surveillance of health care associated infections, using CDC-NHSN/MOH definitions as reference.					
2. The hospital is using updated surveillance forms approved by GDIPC.					
3. There are enough number of well-trained IC practitioners responsible for surveillance according to hospital bed capacity.					
4. There is a clear surveillance process involving other departments (microbiology log book, ICU, OR for Surgery cases)					
5. Hospital Surveillance data is validated within 5% difference between Manual and HESN (number of events per type of infection, patient days, device days, numbers of surgeries)					
6. Results of surveillance are regularly analyzed, interpreted and communicated to all staff and concerned departments					
7. Results of surveillance are regularly reviewed by the IC committee, and an action plan is developed and followed up accordingly if needed (at least once quarterly).					
8. There are improvement projects done after reviewing surveillance results.					
9. Patient care bundles are applied and documented in files of all patients under surveillance (CLABSI, CAUTI, VAP/VAE, SSI, DE)					
10. Staff providing care for the patients under surveillance are well- trained and familiar with all patient care bundle elements for prevention of infection.					
					Score:

Scoring: 0- not met 5- partially met 10- totally met NA- not applicable

Head of IPCD (Hospital): _____

GDIPC Auditor: _____

SURVEILLANCE AUDIT TOOL GUIDE

STANDARD	OBSERVATION	INTERVIEW
1.	Availability of Manual of IC with chapter/s on Surveillance updated according to recent CDC-NHSN / MOH Definitions and Criteria	
2.	Availability of Surveillance Forms: <ul style="list-style-type: none"> • Data collection Forms • Monitoring Forms • Event Forms • Bundle Forms 	
3.		Ask the following: <ul style="list-style-type: none"> • Hospital bed capacity • How many ICPs are trained on Surveillance • How many staff are doing Surveillance and entering data in HESN
4.	Microbiology Logbook for all results	Ask ICP doing surveillance their procedure on doing surveillance
5.	Check for documents on Manual and HESN data submitted to Regional IPCD	Ask ICP how they are validating the surveillance data between manual and HESN
6.	Check for copy of HAI reports done (monthly) in IPCD and in Units/Wards	Ask the ICU/Ward staff the latest HAI rate/s for the month
7.	Check for documented IC Committee Minutes of the Meeting and look for the HAI reports	Ask if they have IC Committee and how many times, they are doing the meetings and follow up of previous meetings and urgent issues
8.	Check for documented Improvement Projects if done	Ask IPCs if IP is done in case of high Infection rate/s
9.	Check for care bundle compliance forms in ICU per patient with devices	
10.		Ask ICU staff about patient care bundles they are using and how they are applying to the patient

Scoring= Total score obtained / Total no. of standards x 100