STATEMENT

Responsibility for the prevention and control of infections within the healthcare facility and for the evaluation of the infectious potential of the related environment is vested in a multidisciplinary committee under the aegis of the medical staff.

The Infection Control Committee coordinates an objective and systematic review process to evaluate the quality and appropriateness of patient care as it relates to infection prevention and control.

PURPOSE

To coordinate and supervise the activities of the Infection Prevention and Control Program and to communicate with all departments of the organization to ensure the program is continuous and proactive.

RESPONSIBILITIES

1. Pursue opportunities to improve patient care and clinical performance.
2. Recommend practices to resolve identified infection control problems in care and performance.
3. Recommend corrective actions to governing bodies when necessary.
4. Approve the type and scope of surveillance activities including stratified infection risk, focused infection studies, and prevalence and incidence studies.
5. Determine the amount of time required to conduct infection surveillance, prevention and control activities based on several parameters:
   b. Risk factors of the patient population.
   c. Complexity of the services.
   d. Educational needs of the personnel.
   e. Resource and support services available.
6. Determine the appropriate definitions and criteria to recognize the existence of healthcare-associated infection (HAIs).
7. Establish a review process that is directed to detect epidemics, clusters of infections and incidences of infections above the usual baseline levels.
8. Conduct at least annual reviews of the data trend analysis generated by surveillance activities during the past year as well as the effectiveness of prevention and control intervention strategies in reducing nosocomial infection risks and priorities or problems identified in the past year.
9. Initiate and conduct epidemiological investigations relating to infection prevention and control of infection incidents.
10. Establish, review, and approve, at least every two years, all policies and procedures related to infection surveillance and prevention and control activities in all departments/services.
11. Review and approve the cleaning procedures, agents and schedules that are used throughout the hospital. This review is to be done biannually or more frequently if necessary.
STRUCTURE
The committee consists of multidisciplinary team members.
Membership includes representation from the Medical, Administration, Nursing, Microbiology, Quality Improvement, and Infection Control Departments (the last should include those individuals directly responsible for the management of the infection surveillance and the prevention and control program).

Representation from ancillary departments is available for consultative purposes as discussion items dictate.

Membership is selected from:

- Dept. of Internal Medicine - Infectious Disease Specialist
- Dept. of Family Medicine (Employee Health)
- Dept. of Surgery
- Dept. of Obstetrics/Gynecology
- Dept. of Pediatrics
- Health Affairs
- Hospital Administration
- Microbiology Laboratory
- Dept. of Infection Prevention and Control:
  - Infection Control Practitioner(s)
  - Environmental Health Specialist
  - Occupational Health Safety Specialist
- Dept. of Nursing Services Operating Room
- Quality Improvement - Health Affairs
- Others
  - Guests from other departments such as: Housekeeping, Laundry, Cardiopulmonary, and CSSD are invited on an ex officio basis when matters pertaining to their services are to be discussed.

PROCEDURE
A. Meeting
The Committee meets quarterly or as scheduled in each hospital and healthcare facility. Special meetings will be called by the Chair when circumstances dictate.

NB: All matters to be addressed by the Committee should be brought to the attention of the Chairperson, infection control practitioner (ICP), and/or the appropriate Committee member.

B. Documentation
Discussions, conclusions, recommendations, assignments, actions, and approvals are documented in the minutes of the Committee meetings.

Minutes are distributed to each Committee member and are forwarded to other appropriate staff through the Administrative Advisory Committee.