

<b>Logo</b>	<b>Centre name</b> <b>Address</b>	Doc No	AAPC/CM/01
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<b>Hospital Infection Control Committee</b>			

<b>TITLE</b>	Terms of Reference – Hospital Infection Control Committee
<b>SUMMARY</b>	This document details the constitution and functioning of the Hospital Infection Control Committee at <b>Centre Name</b>
<b>DISTRIBUTION</b>	All departments, units Hospital Manual. and wards of the Hospital through

### Composition

SI	Members of the committee	Names of the committee members
1	Sr. Doctor – Chair person	<b>Doctor Name</b>
2	Hospital Quality Officer	<b>Doctor Name</b>
3	Accreditation Co-ordinator	<b>Doctor Name</b>
4	NABH Representative of Panchkarma	<b>Doctor Name</b>
5	Infection Control Nurse(s)	<b>Therapist Name</b>

<b>Prepared By</b>	<b>Approved By</b>
<b>Doctor Name</b>	<b>Doctor Name</b>

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#### **A. Responsibilities**

1. To establish a practical system for identifying, reporting and evaluating infection in inpatients, selected outpatients, discharged patients.
2. To establish policy criteria for distinguishing between non social and community acquired infections
3. To develop guidelines for segregation and disposal of Hospital wastes
4. To establish a mechanism to investigate and identify the reservoir, source, and method of transmission of each outbreak of nosocomial infection and institute appropriate measures to limit further spread from identified sources of contagion.
5. To establish and implement institution-wide policies and procedures.
6. To review and evaluate written policies and procedures pertinent to hygiene maintenance and infection control for all services on an annual basis and revised wherever necessary.
7. To establish a system for reporting, evaluating and maintaining records of infections among patients and personnel and the on-going collection and analytic review of data and action taken with subsequent dispersion of this data throughout the Hospital.
8. To review the types of surveillance and reporting programmes implemented by Infection Control.
9. To review standard criteria for reporting all types of infections.
10. To provide input into the Hospital Employee Health Programme.

#### **B. Meeting and Reporting**

1. The committee meets once a month.
2. The minutes of the meeting are submitted to the Hospital management within three days for information and action plan approval.
3. The minutes are circulated to the committee members and the concerned parties for implementation within five days.
4. The committee in any of their meeting shall first discuss the implementation and outcome of the previous meeting with its minutes and then will proceed to the agendas of the present meeting.
5. A copy of the agenda and minutes of every meeting shall be sent to the QI Coordinator by the member secretary.

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### C. Functions of individual Members

#### Chairperson

- ☐ Acts as a liaison between the infection control committee members and the Hospital administration.
- ☐ As a Clinical with knowledge about infection control aspects in Ayurveda practice and treatments provided expert inputs on technical issues
- ☐ Receives all the surveillance reports and information pertaining to Hospital-acquired infection, initiate necessary action based on the reports.
- ☐ Initiate research activities and surveillance programmes in the institution.
- ☐ Education and feedback to the Clinicians.
- ☐ Conducts monthly meeting of infection control committee

#### Infection Control Co-ordinator

- ☐ Takes Hospital visits periodically to ensure all the infection control practices are being practiced.
- ☐ Report any short coming noted to the chairperson, co-ordinate with the chairperson in planning infection control programmes and measures.
- ☐ Keep a track of any developing outbreaks
- ☐ Participate and guide in research activities.
- ☐ Management of proper isolation technique
- ☐ Provision of hand washing or alcohol based hand-cleansing solutions.
- ☐ Development of standards for management of proper insertion of and maintenance of medical devices.

#### Infection Control Nurse

- ☐ Works as a Hospital supervisor by ensuring all the established policies and protocols are practiced e.g. hand washing procedures, use of hand rub, isolation policies, care of Surgical/Para surgical procedure sites, universal precautions, terminal cleaning and disinfection and follow up of needle-stick injuries
- ☐ Works as an investigator along with the infection control committee to track outbreaks, evaluate the equipment like OR tables, Mini procedure room tables,
- ☐ Wound care room, dhroni, steam bath etc to detect risks leading to infection hazards.

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- ☐ Works as an educator by participating in formal and in-formal teaching programmes for nurses and other health care workers. Attend appropriate courses and workshops.
- ☐ Works as a researcher in co-ordination with the other members of the committee

#### **D. SOP of the Committee**

##### **I. Selection of members**

1. Chair person
2. Secretary (Member)
3. Members

- ☐ Chair Person - selected by the Medical Director
- ☐ Secretary - selected by the chair person, he or she is also a member of the committee
- ☐ Members - selected by the chair person

##### **II. Term of the committee**

5 years

##### **III. Agenda**

Agendas for the meeting shall be prepared by the secretary in consultation with the chairperson and signed by the members. Then it is sent to all committee members and other experts. The agenda shall be sent to all at least one week before the scheduled meeting.

A meeting shall be called even by an oral / telephone communication in case of an emergency meeting. A justification for the emergency meeting has to be given by the chair to the Medical Director and the minutes of that meeting.

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#### IV. Minutes

Shall be prepared by secretary and sent to the committee. It is signed by the chair person and then sent to Medical Director for the approval within three days of the meeting. The minutes shall be sent with the copy of agenda of that meeting.

After the approval of the minutes by the Medical Director which shall be done within 5 days of the meeting, it should be collected back.

The approved minute is circulated to all the committee members and the person and department concerned for implementation.

#### V. Role of Secretary (Member Secretary)

- ☐ Prepare the agenda for the next meeting
- ☐ Circulate the agenda approved by the chair person with the date to the members and the concerned persons
- ☐ The minutes of meeting shall be prepared by the secretary
- ☐ Submission for approval of minutes by the Medical Director and then circulating it to member's after approval is also done by the secretary
- ☐ To maintain all records related to the committee

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### AMENDMENT RECORD

AMENDMENT		DOCUMENT SECTION NO	DETAILS OF AMENDMENT	EDITION STATUS	REV. STATUS
NO	DATE				

<b>Prepared By</b>	<b>Approved By</b>
<b>Doctor Name</b>	<b>Doctor Name</b>