

Policy for the management of infection prevention and control

Outlines the requirements for IPC governance and explains the components that make up the Southern Cross Healthcare IPC programme.

Who is this policy for?

All employees and medical practitioners who work in SCH facilities and who have a responsibility to comply with infection prevention practices.

Why is this important?

This ensures hospitals meet the requirements for infection prevention and antimicrobial stewardship set out in Standard 5 of Ngā Paerewa Health and Disability Services standard.

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Clinical governance structure

The IPC governance committee structure is made up of national and local committees.

- **National committees** are managed by appointed committee secretaries, coordinators and a chairperson as defined in their committee charter.
- **Local committees** and processes are managed by appointed local hospital committee members in line with their committee charter.

The Hospital Infection Prevention Control Committee (HIPCC) reports to the National Infection Prevention Control Committee (NIPCC), which is advisory to the Chief Executive Officer (CEO) and Board of Directors (the Board).

National and local committees have functional relationships with auxiliary clinical governance committees where there are matters of shared concern.

These relationships are explained further in:



Clinical governance structure overview

National Infection Prevention and Control Committee (NIPCC)

- Plans, implements, and reports the national IPC programme
- Is advisory to the CEO and is responsible for overseeing and monitoring the functions of hospital's infection prevention and control processes.
- Meets at least 3 times per year and reports to the CEO via the National Clinical Governance Committee (NCGC).
- [National Infection Prevention and Control Committee charter](#)

Hospital Infection Prevention and Control Committee (HIPCC)

- Plans, implements, and reports the local IPC programme
- Is multi-disciplinary
- Meets at least 3 times per year
- Provides reports to:
 - NIPCC – all matters via committee minutes
 - HCGC – IPC related eventful cases
 - SQR Committee – programme updates and reports e.g. surveillance reports, hand hygiene compliance, IPC adverse events
- [Hospital Infection Prevention and Control Committee charter](#)

Note: HIPCC function in some facilities is included as a subgroup of the SQR Committee, governed by the facility size and complexity, and at the discretion of the General Manager (GM).

IPC programme

The IPC programme ensures the requirements for infection prevention and antimicrobial stewardship set out in Standard 5 of Ngā Paerewa Health and Disability Services Standard are met.

It is made up of several components which enable the identification of risks of infection, and the development and maintenance of appropriate systems and processes for prevention and control of infection-related risks.

The programme provides employees, managers, and medical practitioners with tools for managing and preventing infection.

Components of the IPC programme

Policies, guidelines, and procedures

- IPC policies, guidelines and procedures are developed and reviewed in consultation with relevant experts and personnel. These documents are:
 - Consistent with national and international guidelines or recommendations.
 - Aligned with professional regulatory or licensing organisations relevant to infection prevention and control.
 - Appropriate to the work of Southern Cross Healthcare.
- Infection Prevention and Control personnel will have input into other clinical policies that may impact on healthcare acquired infection.
- Policies, guidelines and procedures are readily available in the online content management system (CMS).
- Area-specific hospital procedures may be linked to the national IPC documents on the CMS where there is a need for these and as approved by the HIPCC and GM.

Education and training

- IPC team members will receive continuing education in Infection Prevention and Antimicrobial Stewardship
- Education is provided to employees in hospitals and will be included in orientation with updates at regular intervals (in line with hospital education plan).
- Consumer/patient education is provided. Resources are available in formats accessible and understandable for Māori
- Education is carried out by the hospital's IPC Nurse/coordinator or other suitably qualified person.
- National education is coordinated by the national IPC Lead

Refer to:



Infection prevention and control education guidelines

Surgical site surveillance (SSS)

Surveillance for surgical site infection is carried out in each hospital and will be reported locally (to HIPCC, SQR Committee and HCGC) and nationally (to NIPCC/NCGC).

Refer to:



Surgical site surveillance guidelines

Antimicrobial stewardship (AMS)

- There will be a national and hospital AMS plan in place.
- Policies and procedures are established and implemented to support these plans and to promote prudent prescribing and use of antibiotics agents, consistent with accepted good practice guidelines.

Refer to:



SCH National Antimicrobial Stewardship Plan 2022-2023



Antimicrobial stewardship policy

Hand hygiene

- Hand hygiene observational audits will be carried out in each hospital using the electronic Hand Hygiene New Zealand application.
- Compliance will be reported on a 4-monthly basis (to align with the HQSC) locally to HIPCC and SQR committee, and nationally to NIPCC.
- Results will be benchmarked with Te Whatu Ora and other Private Surgical Hospitals enrolled in the programme and made publicly available on our website.

Audit programme

- There will be a local annual audit programme to include IPC environmental audit, cleaning audit, CLABSI audit, hand hygiene audit.
- The results will be reported locally to HIPCC and SQR committees with actions agreed and monitored, and nationally to NIPCC.
- External Certification audits will take place in line with Ministry of Health/Manatū Hauora requirements.

Consultation on facilities, equipment, and processes

The environments we work in, the equipment we use and the processes we undertake contribute to the risk of infection.

To eliminate or minimise these risks local and national IPC team members / committees will be consulted on the following:

- Procurement processes for equipment, devices and consumables used in the delivery of healthcare.
- Significant changes to work practices or workforce/staffing that may impact on IPC.

- During the design of any new building or during any proposed renovation or remodelling of existing facilities.
- During any other material change to facilities, processes, or equipment where IPC risk should be considered.

Documented records of IPC consultation are kept to evidence early consultation and involvement of IPC teams (Ngā Paerewa, 2021).

The IPC team

Title	Reports to
National IPC Team	
National IPC Lead	Chief of Quality and Risk / NIPCC
National IPC Advisor	National IPC Lead
National Clinical Microbiologist	NIPCC
Local (hospital) IPC team	
IPC Nurse coordinator/facilitator	General Manager / HIPCC
IPC Link Nurse	IPC Nurse
Clinical Microbiologist	HIPCC

Local IPC team personnel are members of HIPCC and are supported in their activities by the national IPC team. An IPC link team structure is in place locally to provide additional resource to the IPC nurse in implementing the annual programme plan.

A Clinical Microbiologist is available for local expert advice and guidance via the HIPCC membership. If unavailable, this support can be obtained via the SCH National Clinical Microbiologist where needed (e.g. antimicrobial stewardship advice).

Position descriptions

PDs for:

- IPC Nurse coordinator/facilitator
- Clinical Microbiologist
- IPC Link Nurse

Can be found here:



IPC role descriptions

IPC programme planning

The programme and its components are reviewed annually by governing committees with annual plans developed at local and national level. Annual programme plans identify goals and focus areas, with associated action plans to implement activities and report on progress.

Annual plans align with:

- External standards, legislation, and regulations
- Industry best practice
- Internal systems, processes, and policies
- Appropriate internal departments and services
- Organisation and business goals and strategies.

Consideration is given to the resources required to implement plans and achieve the intended outcomes.

National programme planning

- Is aligned to the organisational strategic plan
- Provides strategic direction for activities at National Support Office.
- Is developed and led by the National Infection Prevention Programme Lead
- Is approved and overseen by NIPCC
- Is summarised in an annual report of activity and outcomes

Local programme planning

- Is aligned to the national programme plan and the hospital business plan
- Provides direction for operational activities in the hospital.
- Is developed and led by the Hospital Infection Prevention Coordinator/Nurse
- Is approved by and overseen by HIPCC
- Is summarised in an annual report of activity and outcomes

2023 programme plans



SCH National IPC plan 2022-2023



SCH National Antimicrobial Stewardship Plan 2022-2023

References

- NZS 8134:2021 Ngā Paerewa Health and Disability Services Standard - Chapter 5 Infection Prevention and Antimicrobial Stewardship
- Health and Safety at Work Act 2015
- AS/NZS 4187:2014 Cleaning, disinfecting and sterilizing reusable medical and surgical instruments and equipment, and maintenance of associated environments in health care facilities

Associated documents



Clinical governance committee guidelines

Details the SCH clinical governance committee structures and processes including membership, reporting, responsibilities, and authorities.



National Infection Prevention and Control Committee Charter

Outlines the objectives, responsibilities, membership, and meeting protocols of the National Infection Prevention and Control Committee.



Hospital Infection Prevention and Control Committee Charter

Outlines the objectives, responsibilities, membership, and meeting protocols of the Hospital Infection Prevention Control Committee.



Infection prevention and control education guidelines



Surgical site surveillance guidelines

Guidance on implementing the surgical site surveillance programme, including data collection and reporting.



Antimicrobial stewardship policy

Our responsibilities with regards to the prescribing, safe management and proper disposal of antibiotics used in the Southern Cross Healthcare network.



SCH National IPC plan 2022-2023



SCH National Antimicrobial Stewardship Plan 2022-2023



IPC role descriptions

Position descriptions for Hospital IPC Coordinator, Hospital IPC Consultant Clinical Microbiologist Support, and Hospital IPC Link Representative.

CONTENT CONTROL

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