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INTRODUCTION:


Hospital acquired infection is almost entirely preventable by good standards of clinical practice. All healthcare providers must recognize that the observation of infection control practices is essential and that the implementation of measures to control infection cannot be limited by cost.

Standard Precautions emphasize the need to treat all blood and body fluids from all patients as potentially infectious. These precautions are designed to reduce the risk of transmission of microorganisms from both recognized and unrecognized sources of infection in hospitals.

DPOTMH Infection prevention and control program is designed through its unique characteristics of the organization to direct the selection and implementation of guidelines and successful practices to support appropriate interventions. Infection control procedures have been developed and refined continuously over the years.

PURPOSE:

- 1 To establish a mechanism for the development, coordination, implementation, recommendation and review of all Infection Control policies and procedures.
- 2 To maintain a safe environment for everyone by reducing the risk of potential spread of disease.
- 3 The two main goals for infection prevention and control programs is to identify and to reduce the risk of acquiring and transmitting infections among patients, staff, health care professionals, contract workers, students and visitors.
- 4 To assist in providing a high level of patient care by reducing the ever-present risk of nosocomial infection of the patients and staff through:

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- 4.1 Active Surveillance
 - 4.2 Strict implementation of IPC Protocols, Environmental Audit and *feedbacking*
 - 4.3 Continuous review and evaluation of Infection Control Practices
 - 4.4 Education, Training and Updating of all Healthcare workers
- 5 To institute appropriate infection control measures or studies when potential danger to patients, staff, or visitors exists and promote occupational health safety through continuing education, in-house training for all healthcare providers and health teachings to patients and significant others.

LEVEL:

ALL DPOTMH Employees, medical staff, clinical faculty and students, paramedical staff and medical students, MRCCC, and Una Konsulta

DEFINITION OF TERMS:

1. **Acute Disease** – Disease in which symptoms develop rapidly and that runs its course quickly.
2. **Asymptomatic Disease** – Disease without symptoms
3. **Center for Disease Control (CDC)** – CDC has been dedicated to protecting health and promoting quality of life through the prevention and control of disease, injury, and disability. Committed to programs that reduce the health and economic consequences of the leading causes of death and disability, thereby ensuring a long, productive, healthy life for all people.
4. **Infection Prevention and Control Professional (IPCP):** Health care professional (medical doctor, nurse, or other health-related professional) who has completed a certified postgraduate IPC training course, or a nationally or internationally recognized postgraduate course on IPC, or another core discipline including IPC as a core part of the curriculum as well as IPC practical and clinical training.
5. **Chronic Disease** – Disease with usually mild symptoms that develop slowly and last a long time.




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6. **Communicable Disease** – Disease transmitted from one host to another.
7. **Contagious Disease** – Communicable disease that is easily spread.
8. **Focal Infection** – *Infection that serves as a source of pathogens for infections at other sites in the body.*
9. **Isolation** – Separation and confinement of individuals known or suspected (based upon signs, symptoms or laboratory findings) to be infected with a contagious disease to prevent them from transmitting the disease to others.
10. **Quarantine** – Compulsory physical separation, including restriction of movement, population or groups of healthy individuals who have been potentially exposed to a contagious disease.
11. **Latent Disease** – Disease that appears a long time after infection.
12. **Noncommunicable Disease** – Disease arising from outside of hosts or from opportunistic pathogen.
13. **Local Infection** – Infection confined to a small region of the body.
14. **Outbreaks** – Generally defined as an increase in illness above the expected, or “normal” rate.
15. **Primary Infection** – Initial Infection within a given patient.
16. **Standard Infection Control Precautions (SICPs)** - Aim to reduce the risk of disease transmission in the health care setting, even when the source of infection is not known. Used by all health and social care workers to prevent the spread of microorganisms that may cause infection.
17. **Secondary Infection** – Infections that follow a primary infection; often by opportunistic pathogens.
18. **Sub-acute Disease** – Disease with time course and symptoms between acute and chronic.
19. **Systemic Infection** – Widespread infection in many systems of the body; often travels in the blood or lymph.
20. **CDC Criteria for Determining Health Care Associated Infections:**
 - 20.1 CDC definitions for infection at various body sites (i.e., bloodstream, respiratory tract, urinary tract, etc.) will be used.

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20.2 A physician's or surgeon's diagnosis of healthcare associated infection derived from direct observation during surgery, endoscopic examination, or other diagnostic study, or based on clinical judgment, will be accepted unless there is compelling evidence to the contrary.

20.3 An infection will be defined as healthcare associated if there is no evidence that the infection was present or incubating at the time of hospital admission.

20.4 Infection that occurs as the result of the following special situation is not considered healthcare associated:


- 20.4.1 Infection that is associated with a complication or extension of infection(s) already present on admission, unless a change in pathogen or symptoms strongly suggests the acquisition of a new infection and
- 20.4.2 Infection in an infant that is known or proved to have been acquired transplacentally (e.g., herpes simplex, toxoplasmosis, rubella, cytomegalovirus, and syphilis) and becomes evident shortly after birth.

DPOTMH Infection Prevention and Control Program:

The role of the Infection Prevention and Control Unit is to implement, review and recommend to the annual infection control program and policies:

1 Active Surveillance of Healthcare Associated Infections (HAIs)

- 1.1 Develop a system for identifying, reporting, analyzing, investigating and controlling HAIs.
- 1.2 Active surveillance shall be done for high risk areas. High risk areas under various setting include: Intensive care units (ICU), Neonatal ICU, Pediatric ICU, SARI/Respiratory infections units, Operation Theaters, Dialysis Unit,

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Burns patient room, Chemotherapy unit, Food handlers – Dietary, Drinking water - Central Sterile Services Department, Hemodialysis Unit.

1.3 Monitoring of device associated infections:

- 1.3.1 Ventilator associated events (VAE)
- 1.3.2 Central Line Associated blood stream infections (CLABSI)
- 1.3.3 Catheter associated urinary tract infections (CAUTI)
- 1.3.4 Surgical Site Infection (SSI)

1.4 Disease Surveillance

- 1.4.1 Adherence to RA 11332


1.5 Monitoring Hospital Environmental Hygiene

- 1.5.1 Routine Cleaning
- 1.5.2 Terminal Cleaning

2 PREVENTIVE AND CORRECTIVE PROGRAMS TO PREVENT AND CONTROL HOSPITAL HAZARDS TO EMPLOYEES.

2.1 Hospital outbreak management

- 2.1.1 Control measures should be initiated during the process of investigation
- 2.1.2 Hand Hygiene
- 2.1.3 Intensification of environmental cleaning and disinfection
- 2.1.4 Adherence to aseptic protocols and strengthening of disinfection and sterilization.
- 2.1.5 Microbiological study (Culture and Sensitivity results) to identify possible sources and routes of transmission.
 - 2.1.5.1 The investigation may include cultures from other body sites of the patient, staff and environmental sampling if needed for study.

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- 2.1.5.2 Identification and elimination of the contaminated product, Modification of nursing procedures
- 2.1.5.3 Identification and treatment of carriers, Rectification of lapse in clinical technique or procedure
- 2.1.5.4 Controlling the spread of specific organisms (MDROs).
- 2.1.5.5 Evaluation on the efficacy of control measures.


2.2 Application of Infection Control Basic Principles

2.2.1 Standard Precautions

- 2.2.1.1 Are designed to reduce the risk of transmission of microorganisms from both recognized and unrecognized sources of infection in the hospital.
- 2.2.1.2 All blood and all bodily fluids, secretions and excretions, with the exception of sweat regardless of whether or not they contain visible blood, Non-intact and mucous membranes.
- 2.2.1.3 Implement Policy and Procedures on the Standard Precautions
 - 2.2.1.3.1 Policy and procedures on sharps/splash injury
 - 2.2.1.3.2 Exposure management of Blood - borne pathogens
 - 2.2.1.3.3 Management of Blood Spill and Other bodily fluid (Small and Large Spill.
 - 2.2.1.3.4 Hand hygiene: Five (5) Moments of Hand Hygiene
 - 2.2.1.3.5 Proper use of Personal protective equipment (PPE)
 - 2.2.1.3.6 Cleaning and Disinfection of environmental surfaces and equipment.

2.2.2 Transmission based precaution / Isolation Precaution

- 2.2.2.1 Patient Placement according to route of transmission (Color coded room signage)
- 2.2.2.2 Patient Transport
- 2.2.2.3 Patient care equipment and devices

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2.2.2.4 Environmental care (Clean and Disinfection)

2.2.3 Review policy and procedures on the implementation of biomedical waste/infectious waste management in collaboration with Hospital facility and engineering department.

2.2.3.1 Segregation and proper disposal of Sharps and Infectious Waste

2.2.4 Coordinates with the Antimicrobial Stewardship Committee.


2.2.5 Collaborates with AMS Committee when antibiotic resistant strains are detected. Continue monitoring and analysis of antibiotic usage, if possible track changes in antibiotic resistance.

2.2.6 Review and analyze antibiogram data

3 Training and Education of all healthcare workers.

- 3.1 Training on the proper use of personal protective equipment (PPE) and proper sequence of Donning and Doffing.
- 3.2 Implementation of Respirator Fit Testing every year.
- 3.3 Basic infection control principles.
- 3.4 Health education regarding matters related to Healthcare Associated Infections.
- 3.5 Collaborates with Human Resource Department regarding employees health and safety program.


4 Review and update hospital infection control policies and procedures.

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POLICY:

- 1 It is the policy of Dr. Pablo O. Torre Memorial Hospital to adopt, maintain, and enforce Infection Control procedures in-patient care to minimize the occurrence of infection incidents.
- 2 DPOTMH Personnel Health Services composed of the company physicians and medical director in collaboration with the administration have a major function to arrange for prompt diagnosis and management of job-related illnesses and providing prophylaxis (considering immunization status of healthcare workers) for certain preventable diseases to which personnel may be exposed.
- 3 Each Health Care Worker is accountable for their own practice and should always act in such a way as to promote and safeguard patients/staff and visitors from the potential risk of cross-infection.
- 4 The manual should be developed and updated by the Infection Prevention and Control unit (IPCU) and reviewed. It must be made readily available for health care workers, and updated in a timely fashion based on the recommendation of Department of Health, World health organization and Center for Disease Control.
- 5 Policies have been developed that define surveillance, prevention and control measures in all patient care, support and service areas and identify methods effective in reducing the risk of transmission of microorganisms while increasing patient safety.
- 6 Policies are amended as need arises. It may be reviewed and revised by Infection Control and contributing departments.
- 7 The procedures adhere to all rules and regulations concerning control measures for communicable disease as:

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- 7.1 Established by the Philippine Department of Health (DOH)
- 7.2 Recommended by the Center for Disease Control (CDC)


Organization Infection Control Committee (ICC) (Please See Terms of Reference in Annex A)

Infection Prevention and Control Unit


Interim Chair or IPCU Chairman
IPCU Supervisor
IPCU Nurse – Education and Training
IPCU Nurse – Surveillance
IPCU Nurse – Operation, Non Patient Care
IPCU Nurse – Operation, Patient Care
IPCU Technician – Surveillance Coordinator for DOH
IPCU Technician – Environmental Monitor

CORE COMPETENCIES FOR THE INFECTION CONTROL PROFESSIONAL

- 1 Professional Accountability – has completed a certified postgraduate IPC training course, or a nationally or internationally recognized postgraduate course on IPC, or another core discipline including IPC as a core part of the curriculum as well as *IPC practical and clinical training*.
 - 1.1 Infection prevention and control professional I (IPCP I – junior): IPC professional with up to 3 years of IPC practical experience.
 - 1.2 Infection prevention and control professional II (IPCP II – senior) IPC professional with more than 3 years of IPC practical experience and more senior roles and responsibilities.

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- 2 Meets minimum qualifications to enter the profession
 - 2.1 Has working knowledge of patient care practices, microbiology, asepsis, *disinfection and sterilization practices, adult education principles, infectious diseases, communication methods, program administration, epidemiology and disease transmission, surveillance techniques, statistical measures used in Infection Control, occupational health issues, performance measurement and improvement principles, and standards, regulations, and other requirements affecting Infection Control Programs.*
 - 2.2 Attends a basic training course in infection prevention and control within the first year of entering the profession.
 - 2.3 Establishes and strives to meet Infection Control Program goals, objectives and participates in related professional organizations and in professional development. Remains current in infection prevention and control practices (e.g. by attending formal educational programs and meetings, networking with other ICPs, reading IC and infectious disease literature, and using technology such as the Internet and email alerts to obtain the latest information).
- 3 Skills: An ability and capacity acquired through deliberate, systematic, and sustained effort to smoothly and adaptively carryout complex activities or job functions involving ideas (cognitive skills), things (technical skills), people (interpersonal skills), and leadership skills.
- 4 Ethics. Performs work in an ethical and confidential manner.

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DOCUMENTATION:

Revised Policy

DISSEMINATION:

1. Departmental meetings
2. Orientations and Lectures
3. Memorandum
4. Hospital Communicator System

REFERENCES:

1. Centers for Disease Control and Prevention – 2007 Guideline for Isolation Precautions: Preventing Transmission of Infectious Agents in Healthcare Settings, <http://www.cdc.gov/hicpac/pdf/isolation/Isolation2007.pdf>
2. A Guide to Infection Control in the Hospital 5th Edition, official publication of the International Society for Infectious Diseases (ISID)
3. <https://www.cdc.gov/oralhealth/infectioncontrol/summary-infection-prevention-practices/standard-precautions.html>
4. <https://www.cdc.gov/infectioncontrol/guidelines/isolation/index.html>
5. <https://www.ncbi.nlm.nih.gov/books/NBK214342/>
6. <https://medlineplus.gov/ency/patientinstructions/000446.htm>
7. World Health Organization: Core competencies for infection prevention and control professionals retrieve from <https://apps.who.int/iris/handle/10665/335821>



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APPROVAL:

	Name/Title	Signature	Date
Prepared by:	HELEN E. MANDARIO, RM Infection Prevention and Control Unit Technician		7-8-2022
	APRIL ROSE N. BERJIT, RN, MN OIC, Infection Prevention and Control Unit Supervisor		7-8-2022
Verified:	DOLORES ROMMELA T. RUIZ, MD, FPSMID Infection Prevention and Control Unit Interim Chair		7-8-2022
Reviewed by:	DENNIS C. ESCALONA, RN, MN, FPSQua Quality Assurance Supervisor		7-08-2022
Recommending Approval:	FREDERIC IVAN L. TING, MD OIC- Total Quality Division		7/15/22
	MA. ANTONIA S. GENSOLI, MD, FPPS, FPCHA Vice President – Chief Medical Officer		7-15-22
Final approved by:	GENESIS GOLDI D. GOLINGAN President & CEO		8/3/22