


**Implementação dos componentes essenciais para os programas de prevenção e controle de Infecções Relacionadas a Assistência a Saúde (IRAS), Parte 1**

**Maria Clara Padoveze, Universidade de São Paulo**




**Implementação dos componentes essenciais para os programas de prevenção e controle de Infecções Relacionadas a Assistência a Saúde (IRAS)**

**Parte 1**

**Maria Clara Padoveze**  
**Escola de Enfermagem**  
**Universidade de São Paulo, Brasil**

[www.webbertraining.com](http://www.webbertraining.com) 25 de outubro de 2017



**Sem conflito de interesse com relação aos conteúdos desta apresentação**

São Paulo

# Implementação dos componentes essenciais para os programas de prevenção e controle de Infecções Relacionadas a Assistência a Saúde (IRAS), Parte 1

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## Implementação dos componentes essenciais

Este assunto será apresentado em duas partes (tele-aulas distintas):

1. Ferramentas de avaliação
2. Guia de implementação dos componentes essenciais para o nível nacional

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[www.who.int/infection-prevention/tools/core-components/en](http://www.who.int/infection-prevention/tools/core-components/en)

Sign up for WHO updates

World Health Organization

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### Infection prevention and control

Home page  
About us  
Campaigns  
Implementation tools and resources  
Evidence, guidelines and publications  
Work in countries

#### Core components for IPC - Implementation tools and resources

IPC infographic

PREVENT INFECTIONS SAVE LIVES IN HEALTH CARE

WHAT'S THE PROBLEM?

PREVENT INFECTIONS SAVE LIVES IN HEALTH CARE

WHAT'S THE SOLUTION?

Guidelines on core components of infection prevention and control programmes at the national and acute health care facility level

WHO guidelines on hand hygiene in health care

Guide to Implementation

Global guidelines on the prevention of surgical site infection

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# Implementação dos componentes essenciais para os programas de prevenção e controle de Infecções Relacionadas a Assistência a Saúde (IRAS), Parte 1

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www.who.int/infection-prevention/tools/core-components/en

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Sign up for WHO updates

- Download the infographic here pdf, 1.20Mb
- Guidelines on core components of infection prevention and control programmes at the national and acute health care facility level - Summary pdf, 176kb

Supporting national implementation of the WHO Guidelines on Core Components of Infection Prevention and Control Programmes

- Interim practical manual pdf, 1.17kb
- Visual representation pdf, 39kb
- National level assessment tool (IPCAT2) xls, 435kb
- IPCAT2 instruction booklet pdf, 3.20Mb

New IPC recommendations from WHO - the importance of IPC actions in fighting AMR, Dr Benedetta Allegranzi slide presentation

- Slides only | Recording pdf, 5.23Mb

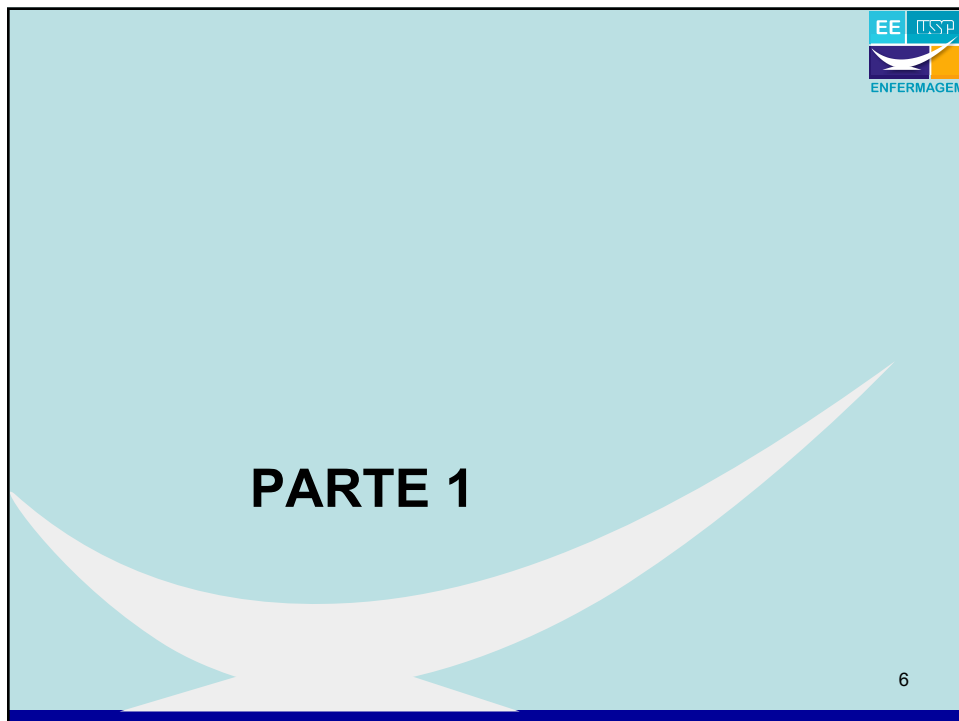
What are the core components for effective infection prevention and control?

Advocacy video

WHO: Health care w...

Health care without avoidable infections - peoples' lives depend on it

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# PARTE 1

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# Implementação dos componentes essenciais para os programas de prevenção e controle de Infecções Relacionadas a Assistência a Saúde (IRAS), Parte 1

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## FERRAMENTAS DE AVALIAÇÃO

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### Nível Nacional - IPCAT



World Health Organization

Instructions for the national infection prevention and control assessment tool 2 (IPCAT2)

Updated July 2017

Interim Practical Manual supporting national implementation of the WHO Guidelines on Core Components of Infection Prevention and Control Programmes

Supporting national implementation through effective baseline assessment and evaluation

### Nível de Serviços- IPCAF



INFECTION PREVENTION AND CONTROL ASSESSMENT FRAMEWORK AT THE FACILITY LEVEL DRAFT 2017

World Health Organization

**Introduction and user instructions**

The Infection Prevention and Control (IPC) Assessment Framework (IPCAF) is a tool to support the implementation of the most recent (2016) WHO guidelines on core components of IPC programmes. It is an evidence-based tool that can be used to provide a baseline assessment of IPC performance within a health facility or across multiple facilities through repeated administration to document progress over time.

**What is the purpose?**

The IPCAF is a structured, domain-focused questionnaire with an associated scoring system. It is primarily intended to be self-administered (i.e. a self-assessment tool). It can also be used for joint assessments through facilitated sessions (internal assessment) or by a team of assessors (i.e. external assessment) and locally staff. The goal of the framework is to assess existing IPC activities, resources, and identify strengths and gaps that can inform future plans. It can be customized as a self-assessment tool for facilities to assess internal progress or determine their current performance and identify areas where they can meet international standards and requirements. The results can be used to develop a facility action plan to strengthen existing processes and introduce facilities to establish where needed. By completing regularly, facilities can monitor their progress over time.

**How to proceed to assess the implementation of IPC facility programmes:**

1. prepare to assess
2. conduct a baseline assessment
3. develop and monitor an action plan
4. conduct a repeat
5. sustain the programme over the long term

To facilitate the initial or repeat visits to support these 5 steps it is suggested that a baseline or repeat assessment is conducted with understanding the current situation, including strengths and weaknesses, to guide action planning for improvement. Also, "baseline findings" are presented with assessing the performance of activities undertaken in the context of the action plan.

**Visit [here](#) for an overview of the programme in the context of our own tool kit.**

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## Componentes essenciais

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Interim Practical Manual supporting national implementation of the WHO Guidelines on Core Components of Infection Prevention and Control Programmes

World Health Organization

- O conteúdo deste material será abordado na Parte 2 (próxima tele-aula)

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# Implementação dos componentes essenciais para os programas de prevenção e controle de Infecções Relacionadas a Assistência a Saúde (IRAS), Parte 1

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1	IPC programmes	R1a Strong 1b Onc
2	Evidence-based guidelines	R2 Strong
3	Education & training	R3a Strong 3b Onc
4	Surveillance	R4a Strong R4b Strong
5	Multimodal Strategies	R5a Strong R5b Strong
6	Monitoring, audit & feedback	R6a Strong R6b Strong
7	Workload, staffing & bed occupancy	R7 Strong
8	Built environment, materials & equipment	8a Onc R8b Strong

1. Programas de P&C
2. Guias baseados em evidências
3. Educação e treinamento
4. Vigilância
5. Estratégias multimodais
6. Monitoramento, avaliação e retroalimentação
7. Carga de trabalho, equipe e ocupação de leitos
8. Ambiente predial, materiais e equipamentos

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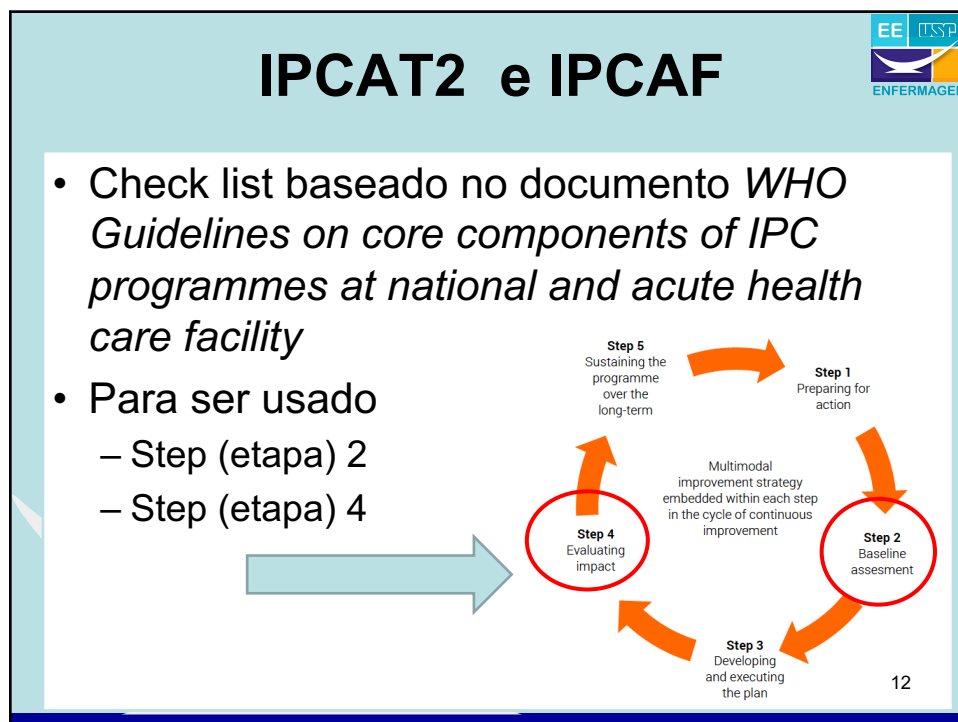
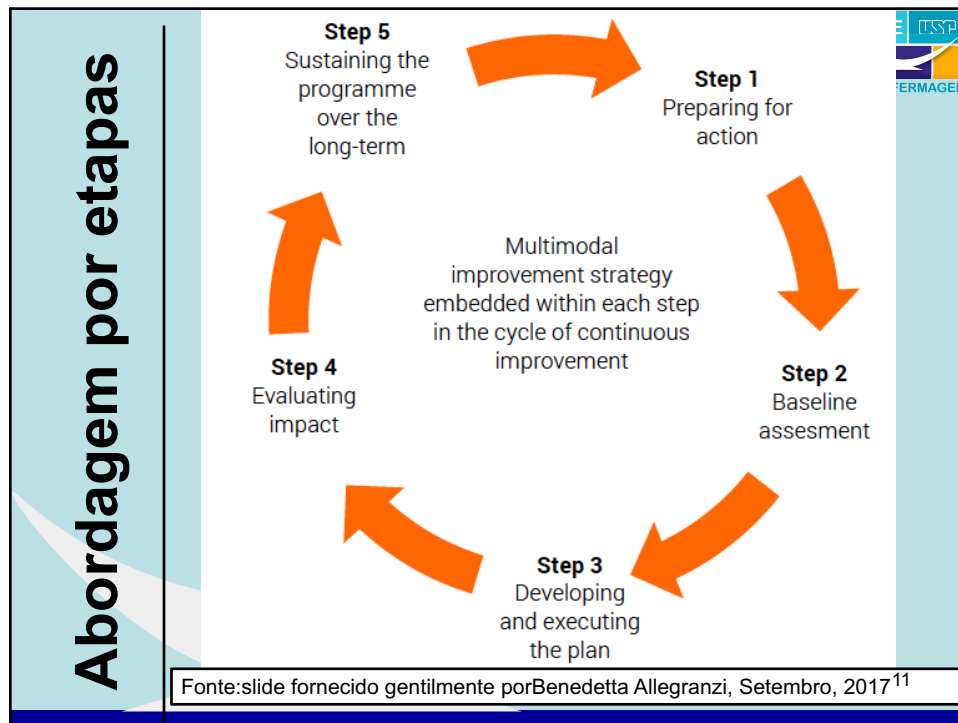
### Representação visual dos componentes essenciais para os programas de prevenção e controle de infecções

\*Note how they are interconnected to improve IPC practices and reduce infection outcomes.

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# Implementação dos componentes essenciais para os programas de prevenção e controle de Infecções Relacionadas a Assistência a Saúde (IRAS), Parte 1

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## FERRAMENTAS DE AVALIAÇÃO

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Updated July 2017

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### Nível de Serviços- IPCAF



INFECTION PREVENTION AND CONTROL ASSESSMENT FRAMEWORK AT THE FACILITY LEVEL DRAFT 2017  
World Health Organization

**Introduction and user instructions**  
The Infection Prevention and Control (IPC) Assessment Framework (IPCAF) is a tool to support the implementation of the most essential infection control components of IPC programmes. It is an evidence-based facility-level tool that can provide a baseline assessment of IPC programme activities within a health facility or across multiple facilities through repeated administration to document progress over time.

**What is the purpose?**  
The IPCAF is a structured, closed-format questionnaire with an associated scoring system. It is primarily intended to be self-administered (as a self-assessment tool), but it can also be used for joint assessments through facilitated external assessment (by one or several assessors), with or without additional and locally-tailored questions. The purpose of the framework is to assess existing IPC activities, measure and identify strengths and gaps that can inform future plans. It can be used as a diagnostic tool for facilities to detect current problems or opportunities that require improvement and identify areas where they can meet international standards and requirements. The results can be used to develop a facility action plan to strengthen existing processes and introduce facilities to establish where needed. By completing regularly, facilities can monitor their progress over time.

**How prepared to assess the implementation of IPC facility programmes:**

1. prepare to assess
2. conduct a baseline assessment
3. develop and monitor an action plan
4. conduct a repeat
5. sustain the programme over the long term

For guidance, the manual is available from the support team at the end of this section. Also, if you have a baseline assessment in progress, you can use the manual to guide your current activities, including strengths and weaknesses, to guide action planning for improvement. Also, "baseline manual" is concerned with assessing the performance of activities undertaken in the context of the action plan.

**Visit [here](#) for an overview of the programme in the context of our work on the [IPCC](#).**


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# IPCAT2

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## IPCAT2



World Health Organization

Instructions for the national infection prevention and control assessment tool 2 (IPCAT2)


Updated July 2017



Supporting national implementation through effective baseline assessment and evaluation


### Objetivo

- Apoiar os países a determinar os componentes essenciais:
  - Identificar e reforçar os já existentes
  - Lacunas ou fragilidades a serem trabalhadas



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## IPCAT2



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- Baseado em Excel
- Sistema de score
- Visualização dos resultados
- Fonte: <http://www.who.int/infection-prevention/tools/core-components/en/>
- Alternativamente: versão impressa
  - Necessário inserir os dados na planilha excel para obter os scores

Fonte: Adaptado de slide fornecido gentilmente por Benedetta Allegranzi, Setembro, 2017

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# Implementação dos componentes essenciais para os programas de prevenção e controle de Infecções Relacionadas a Assistência a Saúde (IRAS), Parte 1

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Componente	Sub-componente	Yes OR No Sim OU Não	Verifiers
<b>1 Infection prevention control (IPC) programmes*</b>		0%	
Components for assessment (Red font=Gap or "N" response)		Score (Y or N)	Comments
<b>1.1 Organization and leadership of the programme</b>		0%	
1.1.1	An active IPC programme exists at the national level		Interview or national IPC programme/work plan, website
1.1.2	An appointed infection preventionist(s) in charge of the programme can be identified		Interview or national IPC programme/work plan, website
1.1.3	The appointed technical team of infection preventionist(s) includes both doctors and nurses		Interview or national IPC programme/work plan, website
1.1.4	The appointed infection preventionist(s) have undergone training in IPC in the prevention of health care-associated infection (HAI)		Interviews, training certificates or equivalent
1.1.5	The appointed infection preventionist(s) have dedicated time for the tasks (at least one full-time person)		Interview & check of TORs
1.1.6	The programme has been granted authority to make decisions that influence field implementation		Document signed by most responsible national authority
1.1.7	There is an identified, protected and dedicated budget allocated according to planned activity		An official document or budget summary
1.1.8	An official multidisciplinary group/committee or equivalent structure is established to support the IPC team at the national level (for example, national IPC committee)		A national IPC programme/work plan
<b>1.2 The scope of IPC responsibilities is defined and includes</b>		0%	
1.2.1	Development of national policies, guidelines and standards for effective, evidence-based practices		Interviews and a national IPC programme/work plan
1.2.2	Development of a national plan for preventing HAIs relating to endemic pathogens and those with epidemic potential, for example, including national goals, objectives and strategies		Interviews and a national IPC programme/work plan
1.2.3	Development of national monitoring frameworks to measure implementation with policies, guidelines and standards		Interviews and a national IPC programme/work plan
1.2.4	Development and support of IPC training and educational programmes to support the facility level		Interviews and a national IPC programme/work plan
1.2.5	Surveillance and epidemiology of HAI and HAI-related aspects of antimicrobial resistance (AMR) in collaboration with epidemiologists, data managers and information technology experts		Interviews and a national IPC programme/work plan
1.2.6	A national plan to support early detection of HAI outbreaks and prompt and effective response		Interviews and a national IPC programme/work plan
1.2.7	Assurance of national procurement of adequate supplies for IPC practices, including access to essential infrastructures, materials and equipment necessary for safe IPC practice		Interviews and a national IPC programme/work plan

Fonte: Adaptado de slide fornecido gentilmente por Benedetta Allegranzi, Setembro, 2017

Componente Score (índice conformidade)	Score (sub-componente)	Parcialmente implementado ou componente em progresso	Verificadores
<b>1 Infection prevention control (IPC) programmes*</b>		0%	
Components for assessment (Red font=Gap or "N" response)		Score (Y or N)	Comments
<b>1.1 Organization and leadership of the programme</b>		0%	
1.1.1	An active IPC programme exists at the national level		Interview or national IPC programme/work plan, website
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Fonte: Adaptado de slide fornecido gentilmente por Benedetta Allegranzi, Setembro, 2017


## IPCAT2

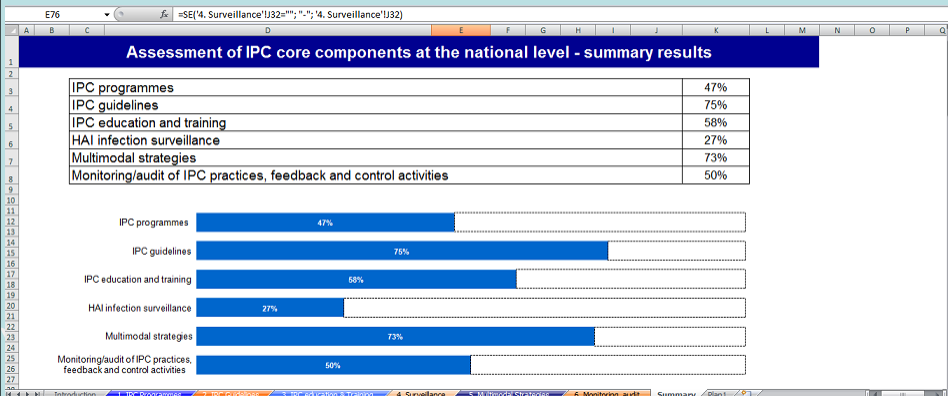


- Ações parcialmente implementadas ou em progresso devem ser registradas como Não.
  - Campo de comentários para detalhar
- Todas as respostas devem ser respondidas
- Um resposta negativa automaticamente fica destacada em vermelho
- Verificadores para facilitar o usuário

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## Folha sumário

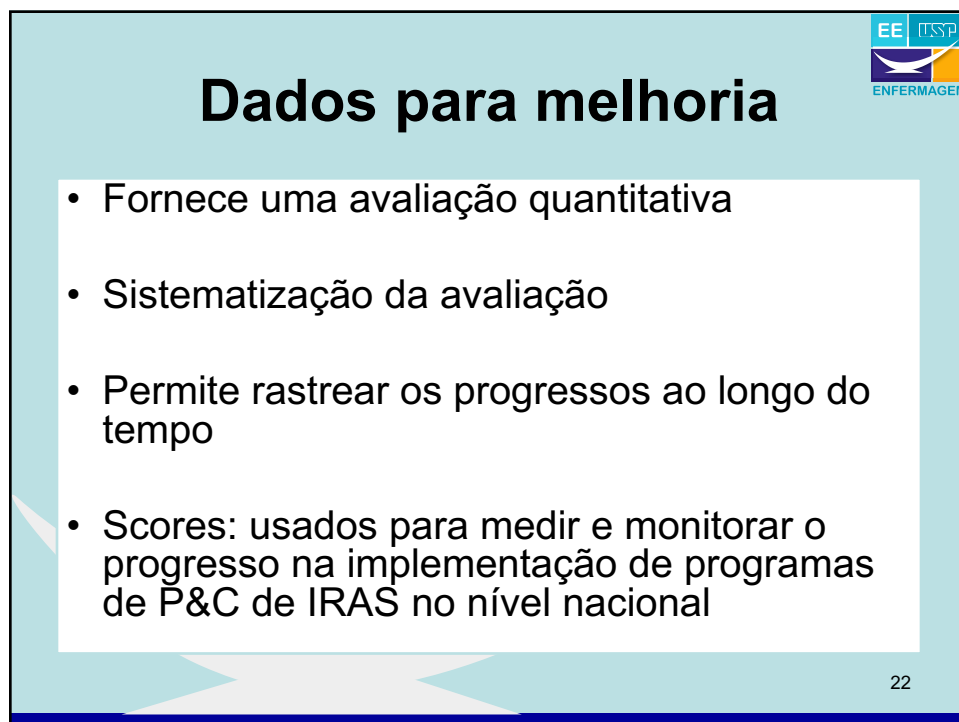
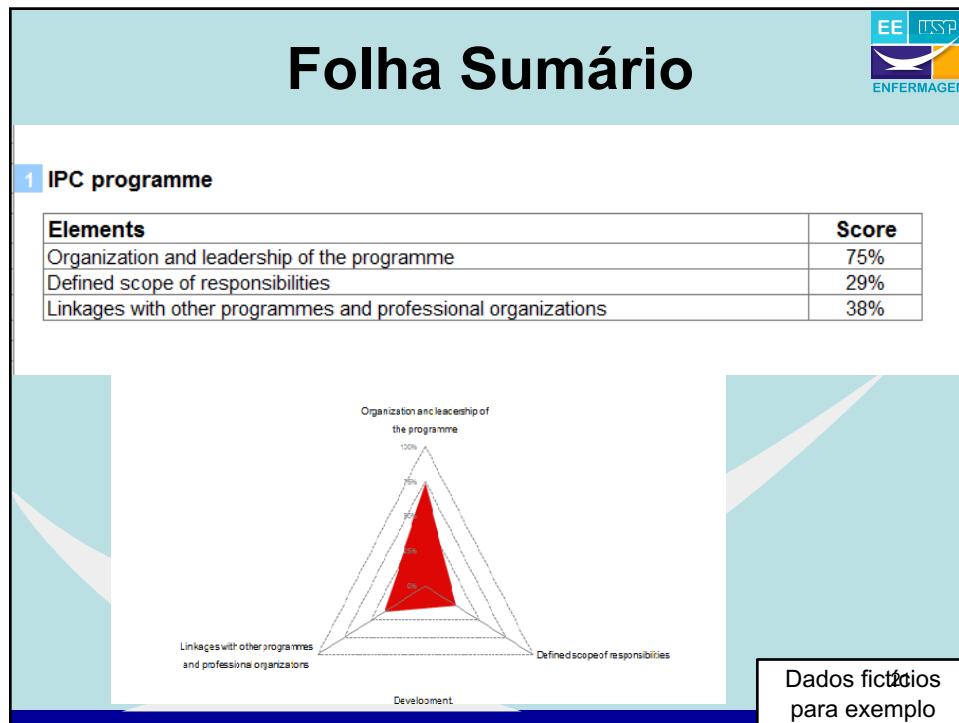




Assessment of IPC core components at the national level - summary results	
IPC programmes	47%
IPC guidelines	75%
IPC education and training	58%
HAI infection surveillance	27%
Multimodal strategies	73%
Monitoring/audit of IPC practices, feedback and control activities	50%

Dados fictícios para exemplo

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## Dados para melhorias

Scores:

- porcentagens refletem o número de componentes implementados
- Não devem ser usados para classificação ou comparação
- Abaixo de 100%: elementos ainda precisam ser implementados
- Não possuem ponderação no conjunto

Considerar Prioridades Nacionais


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## IPCAT2

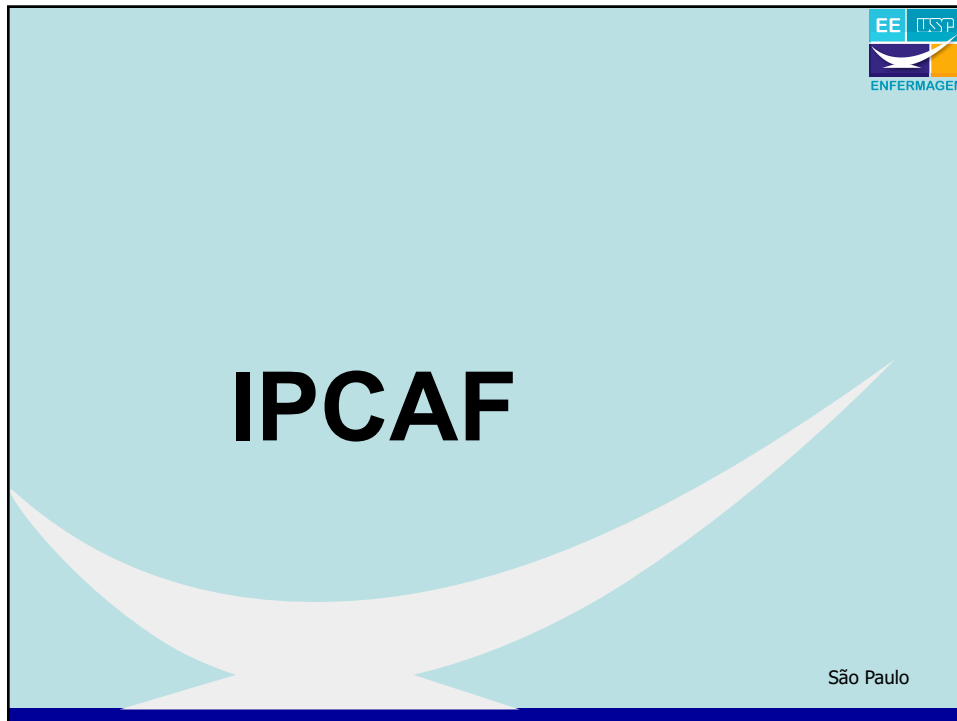
- Foco é a auto-avaliação
- Pode ser usada para avaliação externa
  - Ter em mente o objetivo da avaliação para melhorias e não para comparação
- IPCAT2 não pretende ser completamente abrangente
  - Outras ferramentas de avaliação podem ser necessárias para aprofundar componentes

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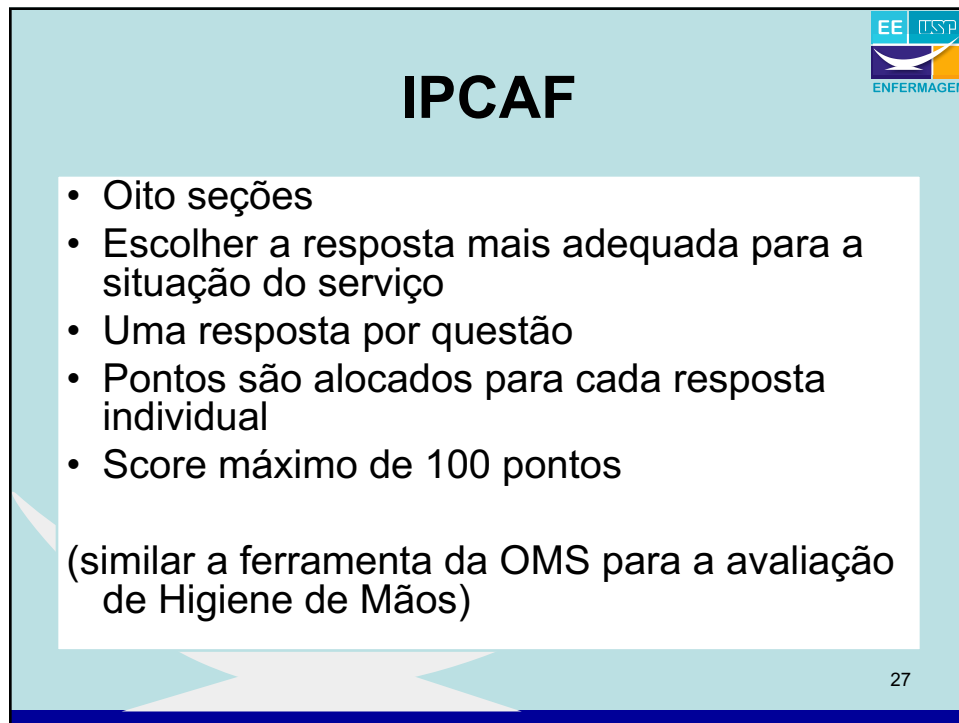


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## Quem deve utilizar o IPCAF?

- Profissionais de assistência a saúde responsáveis pela organização e implementação das atividades de P&C
- Gerente senior do serviço
- Assessor externo com experiência sobre componentes essenciais

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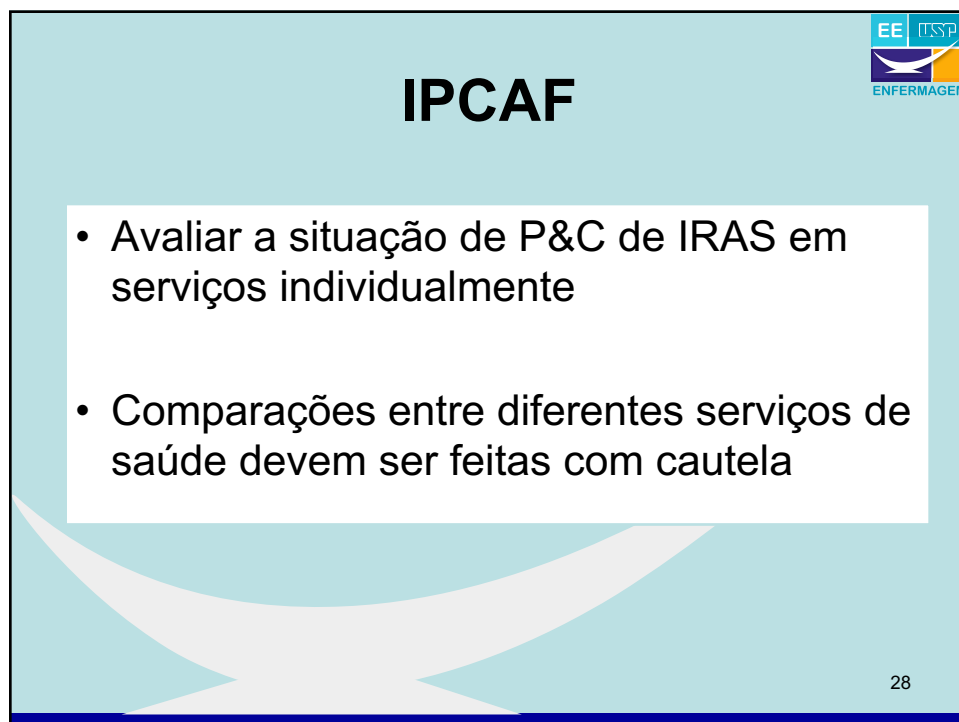
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## IPCAF

- Oito seções
- Escolher a resposta mais adequada para a situação do serviço
- Uma resposta por questão
- Pontos são alocados para cada resposta individual
- Score máximo de 100 pontos

(similar a ferramenta da OMS para a avaliação de Higiene de Mãos)

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## IPCAF

- Avaliar a situação de P&C de IRAS em serviços individualmente
- Comparações entre diferentes serviços de saúde devem ser feitas com cautela

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# Implementação dos componentes essenciais para os programas de prevenção e controle de Infecções Relacionadas a Assistência a Saúde (IRAS), Parte 1

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**Componentes**

**Core component 1: IPC programme**

Question	Answer	Score
1. Do you have an IPC programme? <sup>2</sup> Choose one answer	<input type="checkbox"/> No	0
	<input type="checkbox"/> Yes, without clearly defined responsibilities and annual work plan	5
	<input type="checkbox"/> Yes, with clearly defined responsibilities and annual work plan	10
2. Is the IPC programme supported by an IPC team comprising of IPC professionals? <sup>3</sup>	<input type="checkbox"/> No	0
	<input type="checkbox"/> Not a team, only an IPC focal person	5
	<input type="checkbox"/> Yes	10
3. Does the IPC team have at least one full-time infection preventionist or equivalent (nurse or doctor working 100% in IPC available)? Choose one answer	<input type="checkbox"/> No infection preventionist available	0
	<input type="checkbox"/> Yes, only a part-time infection preventionist available	2.5
	<input type="checkbox"/> Yes, one per ≥ 250 beds	5
	<input type="checkbox"/> Yes, one per ≤ 250 beds	10
4. Does the IPC team have an IPC team/focal person with dedicated time for IPC activities?	<input type="checkbox"/> No	0
	<input type="checkbox"/> Yes	5
5. Does the IPC team include both doctors and nurses?	<input type="checkbox"/> No	0
	<input type="checkbox"/> Yes	2.5
6. Do you have an IPC committee <sup>4</sup> or an equivalent actively supporting the IPC team?	<input type="checkbox"/> No	0
	<input type="checkbox"/> Yes	5
7. Are any of the following professional groups represented/included in the IPC committee or an equivalent?	<input type="checkbox"/> No	0
	<input type="checkbox"/> Senior facility leadership (for example administrative director, chief executive officer (CEO), medical director)	2.5
	<input type="checkbox"/> Senior clinical staff (for example physician, nurse)	2.5
	<input type="checkbox"/> Facility management (for example housekeeping, waste, and those tasked with addressing water, ventilation, and hygiene (HVAC))	2.5
	<input type="checkbox"/> Infection preventionist	2.5
8. Do you have clearly defined IPC objectives (that is, in specific critical areas)? Choose one answer	<input type="checkbox"/> No	0
	<input type="checkbox"/> Yes, IPC objectives only	2.5
	<input type="checkbox"/> Yes, IPC objectives, measurable outcome indicators (that is, adequate measures for improvement)	5
	<input type="checkbox"/> Yes, IPC objectives, measurable outcome indicators, and set track targets	7.5
9. Does the senior facility leadership demonstrate support for the IPC programme?	<input type="checkbox"/> No	0
	<input type="checkbox"/> Yes	5
10. Is there demonstrable support for IPC objectives and indicators within the facility (for example, at executive level, through executive committee participation in meetings and monthly meetings)?	<input type="checkbox"/> No	0
	<input type="checkbox"/> Yes	5
11. Does your facility have administrative/labouratory support for infection day-to-day care? Choose one answer	<input type="checkbox"/> No	0
	<input type="checkbox"/> Yes, the facility is linked to a reference laboratory of another facility	2.5
	<input type="checkbox"/> Yes, an onsite laboratory is available	5
<b>Subtotal Score</b>		<b>7/30</b>

**IPC guidelines**

Question	Answer	Score
1. Does your facility have the expertise for developing or adapting guidelines?	<input type="checkbox"/> No	0
	<input type="checkbox"/> Yes	10
2. Does your facility have IPC guidelines available for:		
Standard precautions?	<input type="checkbox"/> No	0
	<input type="checkbox"/> Yes	2.5
Hand hygiene?	<input type="checkbox"/> No	0
	<input type="checkbox"/> Yes	2.5
Transmission-based precautions?	<input type="checkbox"/> No	0
	<input type="checkbox"/> Yes	2.5
Prevention of surgical site infection?	<input type="checkbox"/> No	0
	<input type="checkbox"/> Yes	2.5
Prevention of vascular catheter-associated bloodstream infections?	<input type="checkbox"/> No	0
	<input type="checkbox"/> Yes	2.5
Prevention of hospital-acquired pneumonia?	<input type="checkbox"/> No	0
	<input type="checkbox"/> Yes	2.5
Prevention of catheter-associated urinary tract infections?	<input type="checkbox"/> No	0
	<input type="checkbox"/> Yes	2.5
Prevention of transmission of multidrug-resistant (MDR) pathogens?	<input type="checkbox"/> No	0
	<input type="checkbox"/> Yes	2.5
Disinfection and sterilisation?	<input type="checkbox"/> No	0
	<input type="checkbox"/> Yes	2.5
Health care worker protection and safety	<input type="checkbox"/> No	0
	<input type="checkbox"/> Yes	2.5
Injection safety?	<input type="checkbox"/> No	0
	<input type="checkbox"/> Yes	2.5
Waste management?	<input type="checkbox"/> No	0
	<input type="checkbox"/> Yes	2.5
Antibiotic stewardship?	<input type="checkbox"/> No	0
	<input type="checkbox"/> Yes	2.5
3. Are the guidelines in your facility evidence-based and consistent with national/international guidelines (if they exist)?	<input type="checkbox"/> No	0
	<input type="checkbox"/> Yes	10
4. Implementation of the guidelines is adapted <sup>5</sup> according to the local conditions?	<input type="checkbox"/> No	0
	<input type="checkbox"/> Yes	10
5. Are frontline health care workers involved in planning and executing the implementation of IPC guidelines in addition to IPC personnel?	<input type="checkbox"/> No	0
	<input type="checkbox"/> Yes	10
6. Are relevant stakeholders (for example, leading doctors and nurses, hospital managers, quality management) involved in the development and adaptation of the IPC guidelines in addition to IPC personnel?	<input type="checkbox"/> No	0
	<input type="checkbox"/> Yes	7.5
7. Do health care workers receive specific training related to IPC guidelines each time they are issued?	<input type="checkbox"/> No	0
	<input type="checkbox"/> Yes	10
8. Do you regularly monitor the implementation of at least some of the guidelines in your facility?	<input type="checkbox"/> No	0
	<input type="checkbox"/> Yes	10
<b>Subtotal Score</b>		<b>7/30</b>

**Score**

**Core component 1: IPC programme**

Question	Answer	Score
1. Do you have an IPC programme? <sup>2</sup> Choose one answer	<input type="checkbox"/> No	0
	<input type="checkbox"/> Yes, without clearly defined responsibilities and annual work plan	5
	<input type="checkbox"/> Yes, with clearly defined responsibilities and annual work plan	10
2. Is the IPC programme supported by an IPC team comprising of IPC professionals? <sup>3</sup>	<input type="checkbox"/> No	0
	<input type="checkbox"/> Not a team, only an IPC focal person	5
	<input type="checkbox"/> Yes	10
3. Does the IPC team have at least one full-time infection preventionist or equivalent (nurse or doctor working 100% in IPC available)? Choose one answer	<input type="checkbox"/> No infection preventionist available	0
	<input type="checkbox"/> No, or only a part-time infection preventionist available	2.5
	<input type="checkbox"/> Yes, one per ≥ 250 beds	5
	<input type="checkbox"/> Yes, one per ≤ 250 beds	10

**Questão**

**Respostas**

**Score**

**Subtotal Score** 7/30

# Implementação dos componentes essenciais para os programas de prevenção e controle de Infecções Relacionadas a Assistência a Saúde (IRAS), Parte 1

Maria Clara Padoveze, Universidade de São Paulo

**Componentes**

**Score final do componente**

**Score final do componente**

31

## Interpretação

### Processo com 3 etapas

1. Identifique os pontos de cada componente
2. Determine o nível geral de conformidade do Programa
3. Identifique as áreas de melhoria e faça um plano de ação

### Nível de P&C:

- Inadequado
- Básico
- Intermediário
- Avançado



# Implementação dos componentes essenciais para os programas de prevenção e controle de Infecções Relacionadas a Assistência a Saúde (IRAS), Parte 1

**Maria Clara Padoveze, Universidade de São Paulo**

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INFECTION PREVENTION AND CONTROL ASSESSMENT FRAMEWORK AT THE FACILITY LEVEL DRAFT 2017

### Interpretation: A three-step process

1. Add up your points

Section (Core component)	Subtotals
1. IPC programme	
2. IPC guidelines	
3. IPC education and training	
4. HAI surveillance	
5. Multimodal strategies	
6. Monitoring/audits of IPC practices and feedback	
7. Workload, staffing and bed occupancy	
8. Built environment, materials and equipment for IPC at the facility level	
<b>Final Total</b>	<b>/800</b>

2. Determine the assigned "IPC level" in your facility using the total score from Step 1

Total score (range)	IPC level
0-200	Inadequate
201-400	Basic
401-600	Intermediate
601-800	Advanced

3. Review the areas identified by this evaluation as requiring improvement in your facility and develop an action plan to address them (reference relevant WHO IPC improvement tools: <http://www.who.int/infection-prevention/tools/core-components/en/>). Keep a copy of this assessment to compare with repeated uses in the future.

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## Interpretação

**Processo com 3 etapas**

1. Identifique os pontos de cada componente
2. Determine o nível geral de conformidade do Programa
3. Identifique as áreas de melhoria e faça um plano de ação

**Nível de P&C:**

- Inadequado
- Básico
- Intermediário
- Avançado

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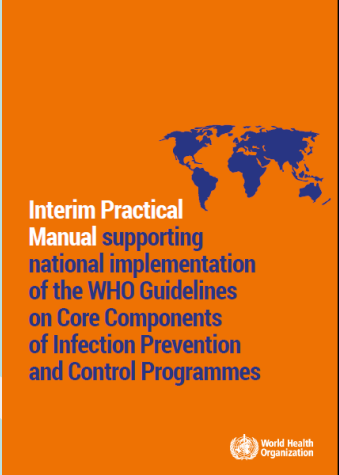


A hand-drawn diagram titled "ACTION PLAN" in blue capital letters. Below the title is a table with four columns labeled "WHO", "WHAT", "WHEN", and "HOW" in red capital letters. The table has three empty rows below the headers. The entire diagram is enclosed in a green hand-drawn border with two red dots at the top, resembling binder holes. A small number "35" is visible in the bottom right corner of the diagram.

WHO	WHAT	WHEN	HOW

EE USP ENFERMAGEM

## Próxima tele-aula



Interim Practical Manual supporting national implementation of the WHO Guidelines on Core Components of Infection Prevention and Control Programmes

World Health Organization

Manual prático para apoiar a implementação dos componentes essenciais para Programas de Prevenção e Controle de Infecção no nível nacional

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