



ADESH MEDICAL COLLEGE & HOSPITAL

NH-1, VILLAGE MOHRI, SHAHABAD (M)

AMCH/MICRO/HIC/24/04

24.05.24

To,
The Principal,
Adesh Medical College,
Shahbad, Kurukshetra

Sub: Minutes of Meeting - Hospital Infection Control Committee (23.05.24)

Sir,

Please find below the minutes of the meeting held on **23.05.24**:

Agenda Item (Discussed by)	Agenda details	Action item	Responsible person	Timeline
Biomedical Waste Management update (Dr Swati Mittal)	<ul style="list-style-type: none"> • Inappropriate sharp disposal is still an important cause of needle stick injury. • Needles were observed to have been pinned in the mattress. • Sharps mixing and re-segregation is being reported, though instances have reduced. • Sharps being disposed along with IV sets (mixing) in few instances. • Gloves being discarded with dressings in yellow bin instead of red. • Inappropriate disposal of Folley's catheter and urobag 	Interns and PG residents have been observed to be noncompliant despite advice by the Nursing staff. Nursing staff to be more observant and raise the complaints of non-compliance by interns and PG residents to the HoD of the concerned department and MS office.	Nursing Superintendent	Immediately
Surgical site infections and dressing material issues (Dr Ashwini Manhas)	Issue of infections following dressings of elective cases being reported from surgical departments. Observations and proposed action items are mentioned below.			
	<ul style="list-style-type: none"> • Dressing drums being used past expiry dates • Dressing material is being kept in polybags • Class V chemical sterilization controls are not being used 	<p>Dressing drums should not be used beyond expiry dates. The dressing drum be sent for re-sterilization after the due date.</p> <p>Dressing gauze/ pads should always be inside the dressing drums labeled "unsterile dressings."</p> <p>Nursing incharges to procure Class V chemical indicators from the store</p>	Nursing Superintendent	Immediately

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	<ul style="list-style-type: none"> • Savlon dipped Cheatele's forceps 	<p>and place it inside the pack at least twice in a week and check for its efficacy.</p> <p>Use of savlon for dipping cheatele's forceps is best avoided. However, if needed undiluted savlon be used and replaced after a week (mention date on the container) or earlier if there is visible turbidity in the solution. Avoid putting gauze/ cotton inside the savlon solution.</p>	Nursing Superintendent	Immediately
	<ul style="list-style-type: none"> • Open and rusting racks observed in few wards. • Cramped up dressing trolleys. 	<p>Its preferable not to use open racks for storing any of the dressing material before or after sterilization. It should be in almirah or a cupboard.</p> <p>Additional trolleys are required for disposing off the dressing waste generated during the dressing specially from Orthopaedics or Surgery wards.</p>	Medical superintendent (to kindly direct the concerned)	Within six months
<p>3 Do's weekly campaign (Dr Ashwini Manhas)</p>	<p>During this month, 3 Do's weekly campaign was initiated for improving the awareness and compliance of Nursing staff about practices that are often requiring a behavioral intervention. Every Monday, three action and compliance items are circulated to the Nursing staff and a reminder is sent everyday by the DNS through WhatsApp group.</p> <p>There is some noticeable impact on the practices however, it is also being felt that it is not being as effective as initially thought. The roll-over of action items is being quite rapid and universal awareness and compliance is somewhat lacking.</p>	<p>The Weekly campaign will be converted to fortnightly now. So, the action items will be released on 1st and 15th of every month. Further impact assessment on behavioral change will continue to be monitored.</p> <p>The Nursing Incharges/ Supervisors need to be more proactive with a huddle meeting everyday in the morning before kicking off the day's work.</p>	Nursing Superintendent / Deputy Nursing Superintendent / Nursing Incharges/ ICN	Immediately



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<i>Needle stick injury events</i> <i>(Dr Ashwini Manhas)</i>	<p>The number of reported NSI events were as below: Feb 2024: 01 Mar 2024: Nil Apr 2024: 04</p> <p>The cases were reviewed. The causes were Inappropriate disposal or handling of sharps. The events were observed to be higher in interns (04 events). Two sensitization sessions were conducted with interns after the first two events, considering a higher risk among interns. Additionally, hepatitis B immunization and documentation is being further strengthened across the institute for all the healthcare staff since it is vaccine preventable and has highest risk of transmissibility.</p>	ICN to continue with documentation and training for NSI prevention	ICN	Not applicable																												
<i>HIC indices</i> <i>(Dr Ashwini)</i>	<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: center;">Indicator</th> <th style="text-align: center;">Feb-24</th> <th style="text-align: center;">Mar-24</th> <th style="text-align: center;">Apr-24</th> </tr> </thead> <tbody> <tr> <td>CAUTI rate (per 1000)</td> <td style="text-align: center;">5.3</td> <td style="text-align: center;">4.51</td> <td style="text-align: center;">4.54</td> </tr> <tr> <td>VAP rate (per 1000)</td> <td style="text-align: center;">20.4</td> <td style="text-align: center;">38.4</td> <td style="text-align: center;">16.6</td> </tr> <tr> <td>CLABSI rate (per 1000)</td> <td style="text-align: center;">5.4</td> <td style="text-align: center;">8.06</td> <td style="text-align: center;">4.7</td> </tr> <tr> <td>SSI rate (%)</td> <td style="text-align: center;">0.24</td> <td style="text-align: center;">0.24%</td> <td style="text-align: center;">0.32%</td> </tr> <tr> <td>Hand hygiene compliance (%)</td> <td style="text-align: center;">63.90%</td> <td style="text-align: center;">64.50%</td> <td style="text-align: center;">65.40%</td> </tr> <tr> <td>Needle stick injuries (Number)</td> <td style="text-align: center;">1</td> <td style="text-align: center;">0</td> <td style="text-align: center;">4</td> </tr> </tbody> </table>	Indicator	Feb-24	Mar-24	Apr-24	CAUTI rate (per 1000)	5.3	4.51	4.54	VAP rate (per 1000)	20.4	38.4	16.6	CLABSI rate (per 1000)	5.4	8.06	4.7	SSI rate (%)	0.24	0.24%	0.32%	Hand hygiene compliance (%)	63.90%	64.50%	65.40%	Needle stick injuries (Number)	1	0	4	Continued surveillance	ICN	Not applicable
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Dr Ashwini Manhas,
Member Secretary,
Hospital Infection Control Committee

Copy for information:

Medical Superintendent (Chairperson)
Deputy Medical Superintendent
Deputy Medical Superintendent (PSQ)
Dr Moneet Walia, Prof (Obstetrics and Gynaecology)
Dr Girish Singla, Asst Prof (General Surgery)
Dr Sanjeev Chawariya, Asst Prof (Anaesthesiology)
Dr Tarvinderjit Khurana, Assoc Prof (General Medicine)
Dr Swati Mittal, Asst Prof (Microbiology)
Mrs Shashi Bala, NS
Ms Swati Sharma, ICN
Dr Pooja, Quality Manager