

| Institution Na Document Tit | Document Title: Policy and Procedure of Continuous Availability of Infection Control Equipment and Supplies | | | | | | | | | | |
|--------------------------------|--|-----------------------------|------------------------|--------------|-----------|--|--|--|--|--|--|
| Approval Process | | | | | | | | | | | |
| | Name | Title | Institution | Date | Signature | | | | | | |
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| Approved by | Dr. Bader Al Habsi | Hospital Director | Al Masarra Hospital | 24-5.2022 | ./> | | | | | | |





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Acronyms:

| AMRH | Al Masarra Hospital | | | |
|------|-------------------------------------|--|--|--|
| CSSD | Central Sterile Supply Department | | | |
| HOD | HOD Head of Department | | | |
| MDRO | IDRO Multi-drug Resistant Organisms | | | |
| P&P | Policy & Procedure | | | |
| РРЕ | Personal Protective Equipment | | | |
| ТВ | Tuberculosis | | | |



1. Introduction

Patient care activities should be undertaken in a clean and/or hygienic environment that facilitates practices related to the prevention and control of hospital acquired infection, as well as including availability of appropriate Infection Control materials and equipment.

2. Scope

This document is applicable to all Staff Nurses, Infection Control Practitioners, Medical Store Staff, and maintenance staff of Al Masarra Hospital (AMRH).

3. Purpose

3.1 To ensure the quality and availability of infection control materials and equipment for continuous quality care for the patients.

4. Definitions

- 4.1 **Negative Air Pressure:** is a system used in hospitals and medical centers to prevent cross-contaminations from room to room. It includes a ventilation system that generates negative pressure to allow air to flow into the isolation room but not escape from the room, as air will naturally flow from areas with higher pressure to areas with lower pressure, thereby preventing contaminated air from escaping the room.
- 4.2 **Personal Protective Equipment (PPE):** are equipment designed to provide barrier between a person and a known or potential infectious material in order to minimize or reduce the risk of exposure to the infectious material.
- 4.3 **Multidrug-Resistant Organisms:** Multi-drug resistant organisms (MDRO) are common bacteria (germs) that have developed resistance to multiple types of antibiotics.



5. Policy

- 5.1 All Infection Prevention & Control Equipment must be available in the clinical areas at all times for quality care of the patients.
- 5.2 Health care facility of Al Masarra Hospital must provide sufficient water at all times for drinking, hand washing, food preparation, personal hygiene, medical activities, cleaning and laundry through the maintenance department.
- 5.3 Access to hand hygiene facilities equipped and supplied with alcohol-based hand rubs and (where appropriate) with water, soap and disposable or tissue paper at the point of care and within 5 meters of sanitation facilities must be provided by infection prevention & control department.
- 5.4 Medical and General Store must supply adequate supply of appropriate personal protective equipment (PPE) and puncture-resistant sharps containers, containers for separating other types of health care waste and other supplies necessary for cleaning.

6. Procedure

- 6.1 Ensure that sufficient water for drinking, hand washing, food preparation, personal hygiene, medical activities, cleaning and laundry are available.
- 6.2 Check that the hand hygiene facilities are equipped with alcohol-based hand rubs, water, soap and disposable or tissue paper within five (5) meters at the point of care.
- 6.3 Supply appropriate personal protective equipment (PPE) and punctureresistant sharps containers, containers for separating other types of health care waste and other supplies necessary for cleaning.
- 6.4 Maintain regular cleaning and hygienic conditions including cleaning of examination rooms, waiting areas, surfaces and toilets through contractor company.
- 6.5 Ensure the availability of tissue rolls in the examination bed/couch through the General Store.
- 6.6 Healthcare worker shall segregate, treat and dispose of safely all health care wastes in the clinical area.



- 6.7 Ensure the availability of a dedicated centralized decontamination area and/or Central Sterile Supply Department (CSSD) for the decontamination and sterilization of medical devices and other items/equipment supplied with sufficient water.
- 6.8 Prevent transmission of infection to other patients, staff and visitors by ensuring the availability of two single rooms in each ward with private toilet facilities and/or rooms suitable for isolating infected patients, including those with tuberculosis (TB) and multidrug-resistant organisms.
- 6.9 Provide a dedicated clean storage area for patient care items and equipment, including sterile material and a separate area for the storage of clean linen.
- 6.10 Ensure, provide and maintain adequate waste facilities for safe disposal of health care waste including safe use and disposal of sharps.
- 6.11 Make available at the area a separate garbage area for medical wastes with controlling area temperature using air condition.

7. Responsibility

7.1 Infection Prevention and Control Staff/Practitioner Shall:

- 7.1.1 Indent the needed inventory for the Infection Control Department.
- 7.1.2 Count down the needed inventory for each month. (See Appendix 2. List of Infection Control Supplies in the Medical Store)
- 7.1.3 Prepare justification and submit to the medical store department to get medical supplies.

7.2 **Staff Nurse Shall:**

- 7.2.1 Ensure availability of items and supplies for the isolation room in case of isolation case and other Infection Prevention & Control equipment.
- 7.2.2 Check the expiry dates of the supplies and items periodically.



7.3 Medical Store Staff Shall:

- 7.3.1 Ensure the stock of enough medical supply items related to infection control activities in the stock. (See Appendix 2. List of Infection Control Supplies in the Medical Store)
- 7.3.2 Distribute items as per the requirements in units and wards.

8. Document History and Version Control

| | Document History and Version | ion Control | | | |
|------------------|--|--------------------|--------------------|--|--|
| Version | Description of Amendment | Author | Review Date | | |
| 1 | Initial Release | Siham Al Zadjali | January 2021 | | |
| 2 | Procedure modified Responsibilities added and modified List of Infection Control Supplies in the Medical Store added | Siham Al Zadjali | June 2022 | | |
| 3 | Review and Update | Siham Al Zadjali | April 2025 | | |
| Written by | Reviewed by | Approved by | | | |
| Siham Al Zadjali | Noora Al Zadjali | Dr. Bader Al Habsi | | | |

9. Related Documents

- 9.1 Appendix 1. List of Infection Control Supplies in the Medical Store.
- 9.2 Appendix 2. Audit Tool.



10. References

| Title of book/journal/articles/ Website | Author | Year of Publication | Page |
|---|------------------------------|------------------------|------|
| Guidelines on Core Components of Infection Prevention and Control Programmes at the National and Acute Health Care Facility Level. | World Health organization | 2016 | |



Appendices

Appendix 1. List of Infection Control Supplies in the Medical Store

Ward/Department:

| Name of the item | Date & Month of checking | | | | | | | | | | | |
|---------------------|--|-------------------------------|---|--|--|---|--|--|---|--|---|--|
| | Jan | Feb | Mar | Apr | May | Jun | Jul | Aug | Sep | Oct | Nov | Dec |
| Disposable gloves | | | | | | | | | | | | |
| latex | | | | | | | | | | | | |
| Sterile gloves | | | | | | | | | | | | |
| Disposable gown | | | | | | | | | | | | |
| Surgical mask | | | | | | | | | | | | |
| N95 mask | | | | | | | | | | | | |
| Goggles | | | | | | | | | | | | |
| MMR Vaccine | | | | | | | | | | | | |
| Influenza vaccine | | | | | | | | | | | | |
| PPD (Mantoux test) | | | | | | | | | | | | |
| Varicella vaccine | | | | | | | | | | | | |
| Hepatitis B vaccine | | | | | | | | | | | | |
| | Disposable gloveslatexSterile glovesDisposable gownSurgical maskN95 maskGogglesMMR VaccineInfluenza vaccinePPD (Mantoux test)Varicella vaccine | JanDisposable gloves latex | JanFebDisposable gloves latexIIIISterile glovesIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIII | JanFebMarDisposable gloves latexIIISterile glovesIIIDisposable gownIIISurgical maskIIIN95 maskIIIGogglesIIIMMR VaccineIIIInfluenza vaccineIIIVaricella vaccineIII | JanFebMarAprDisposable gloves latexIIIISterile glovesIIIIDisposable gownIIIISurgical maskIIIIN95 maskIIIIGogglesIIIIMMR VaccineIIIIInfluenza vaccineIIIIVaricella vaccineIIII | JanFebMarAprMayDisposable gloves latexIIIIIIIIISterile glovesIIIIIIIIIIIIIIIIIDisposable gownIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIII | JanFebMarAprMayJunDisposable gloves latexII </td <td>JanFebMarAprMayJunJulDisposable gloves latexIII</td> <td>JanFebMarAprMayJunJulAugDisposable gloves latexImage: Second Second</td> <td>JanFebMarAprMayJunJulAugSepDisposable gloves latexIII</td> <td>JanFebMarAprMayJunJulAugSepOctDisposable gloves latexIII</td> <td>JanFebMarAprMayJunJulAugSepOctNovDisposable gloves latexII<!--</td--></td> | JanFebMarAprMayJunJulDisposable gloves latexIII | JanFebMarAprMayJunJulAugDisposable gloves latexImage: Second | JanFebMarAprMayJunJulAugSepDisposable gloves latexIII | JanFebMarAprMayJunJulAugSepOctDisposable gloves latexIII | JanFebMarAprMayJunJulAugSepOctNovDisposable gloves latexII </td |



| 12. | Alcohol swab | | | | | | |
|-----|-------------------------|--|--|--|--|--|------|
| | (Steriswabs) | | | | | | |
| | | | | | | | |
| | Vacuum blood | | | | | | |
| 13. | collection tube red | | | | | | |
| | 2ml /4ml plane | | | | | | |
| | - | | | | | | |
| 14. | Specimen collection | | | | | | |
| | bag | | | | | | |
| | | | | | | | |
| 15. | Sharps container | | | | | | |
| | | | | | | | |
| 16. | Antimicrobial wipes | | | | | | |
| | | | | | | | |
| 17. | Zygel | | | | | | |
| | | | | | | | |
| 18. | Chlorine release tablet | | | | | | |
| | for disinfection (HAZ | | | | | | |
| | TAB) | | | | | | |
| | | | | | | | |
| 19. | Chlorine release | | | | | | |
| | granules. | | | | | | |
| 20. | Incontinent sheet | | | | | | |
| | | | | | | | |
| 21. | Cotton wool | | | | | | |
| | | | | | | | |
| 22. | Disposable needle | | | | | | |
| | G23 | | | | | | |
| | | | | | | | |



| | | | | | | |] |
|-----|---------------------|--|--|--|--|--|---|
| 23. | Disposable syringe | | | | | | |
| | 2ml | | | | | | |
| | | | | | | | |
| 24. | Disposable syringe | | | | | | |
| | 5ml | | | | | | |
| | 51111 | | | | | | |
| | | | | | | | |
| 25. | Band aid spots | | | | | | |
| | | | | | | | |
| 26. | Gauze swab | | | | | | |
| | 7.5cmx7.5cm | | | | | | |
| | | | | | | | |
| | | | | | | | |
| 27. | Microspore adhesive | | | | | | |
| | tape | | | | | | |
| | | | | | | | |
| 28. | Hibiscrub liquid | | | | | | |
| | 500ml 4% | | | | | | |
| | 500m 470 | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | Signature of IPC | | | | | | |
| | | | | | | | |
| | | | | | | | |



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Appendix 2. Audit Tool

Al Masarra Hospital Infection Prevention & Control Department Continuous Availability of Infection Control Equipment and Supplies

Department: ____

Date: _____

| S.N. | Audit Process | Standard / Criteria | Yes | Partial | No | N/A | Comment |
|------|---------------|---|-----|---------|----|-----|---------|
| 1. | Observation | Is the availability of sufficient water | | | | | |
| | | for drinking, hand washing, food | | | | | |
| | | preparation, personal hygiene, | | | | | |
| | | medical activities, cleaning and | | | | | |
| | | laundry ensured? | | | | | |
| 2. | Observation | Are hand hygiene facilities | | | | | |
| | | equipped with alcohol-based hand | | | | | |
| | | rubs, water, soap and disposable or | | | | | |
| | | tissue paper within five (5) meters | | | | | |
| | | at the point of care? | | | | | |
| 3. | Observation | Are appropriate personal protective | | | | | |
| | | equipment (PPE) and puncture- | | | | | |
| | | resistant sharps containers, | | | | | |
| | | containers for separating other types | | | | | |



| | | of health care waste and other | | |
|----|-------------|--|--|--|
| | | supplies necessary for cleaning | | |
| | | supplied? | | |
| 4. | Observation | Is regular cleaning and hygienic | | |
| | | conditions including cleaning of | | |
| | | examination rooms, waiting areas, | | |
| | | surfaces and toilets through | | |
| | | contractor company maintained? | | |
| 5. | Observation | Is the availability of tissue rolls in | | |
| | | the examination bed/couch | | |
| | | ensured? | | |
| 6. | Observation | Are health care wastes segregated, | | |
| | | treated and disposed of safely by | | |
| | | the health care workers in the | | |
| | | clinical area? | | |
| 7. | Observation | Is the availability of dedicated | | |
| | | centralized decontamination area | | |
| | | and/or Central Sterile Supply | | |
| | | Department (CSSD) for the | | |
| | | decontamination and sterilization of | | |
| | | medical devices and other | | |



| | | items/equipment supplied with | |
|-----|-------------|--|--|
| | | sufficient water ensured? | |
| | | | |
| 8. | Observation | Is the transmission of infection to | |
| | Interview | other patients, staff and visitors | |
| | | prevented by ensuring the | |
| | | availability of two single rooms in | |
| | | each ward with private toilet | |
| | | facilities and/or rooms suitable for | |
| | | isolating infected patients, including | |
| | | those with tuberculosis (TB) and | |
| | | multidrug-resistant organisms? | |
| 9. | Observation | Is a dedicated clean storage area for | |
| | | patient care items and equipment, | |
| | | including sterile material and a | |
| | | separate area for the storage of clean | |
| | | linen provided? | |
| 10. | Observation | Are adequate waste facilities for | |
| | | safe disposal of health care waste | |
| | | including safe use and disposal of | |
| | | sharps provided and maintained? | |



| 11. | Observation | Is a separate garbage area for | | | |
|-----|-------------|-------------------------------------|--|--|--|
| | | medical waste with controlling area | | | |
| | | temperature with air condition made | | | |
| | | available at the area? | | | |



Appendix 3. Document Request Form

| Section A: Cor | npleted by D | ocument Req | uester | | | | | |
|----------------------|--|--------------------------|------------|-------------------------|--|--|--|--|
| 1. Requester | Details | | | | | | | |
| Name | Siham Al Zad | Siham Al Zadjali | | April 2022 | | | | |
| Institute | Al Masarra Hospital | | Mobile | 93693628 | | | | |
| Department | Infection Cor Sterilization S | | Email | siham.mohd@hotmail.com | | | | |
| The Purpose of Re | equest | | | | | | | |
| Develop New Document | | Modification of Document | | □ Cancelling of Documen | | | | |
| 1. Document | Information | | | | | | | |
| Document Title | Policy and Procedure of Continuous Availability of Infection Control Equipment and Supplies | | | | | | | |
| Document Code | AMRH/IC/P&P/012/Vers.03 | | | | | | | |
| Section B: Comp | leted by Docun | nent Controller | | | | | | |
| Approved | | Cancelled For | | ward To: | | | | |
| Comment and Re | commendation: | | | | | | | |
| Name | Kunooz Al Balushi | | Date | April 2022 | | | | |
| Signature | Jund | | Stamp | | | | | |
| 1 | / | | - وزارة ال | JUL | | | | |

AN. MINISTR



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Policy and Procedure of Continuous Availability of Infection Control Equipment and Supplies

AMRH/IC/P&P/012/Vers.03 Effective Date: April 2022 Review Date: April 2025

Appendix 4. Document Validation Checklist

| | | Document Code: AMRH/IC/P&P/012/Vers.03 | | | | |
|-----|---|---|--------------------|---------|----------|--|
| | uous Availability of Infection Control | AMRF | I/IC/P& | P/012/V | ers.03 | |
| | ment and Supplies | | | | Comments | |
| No | Criteria | | Meets the Criteria | | | |
| | | Yes | No | N/A | | |
| 1. | Approved format used | | | | | |
| 1.1 | Clear title - Clear Applicability | V | | | | |
| 1.2 | Index number stated | V | | | | |
| 1.3 | Header/ Footer complete | V | | | | |
| 1.4 | Accurate page numbering | V | | | 1 | |
| 1.5 | Involved departments contributed | 12 | | | | |
| 1.6 | Involved personnel signature /approval | V | | | | |
| 1.7 | Clear Stamp | | | | | |
| 2. | Document Content | | | | | |
| 2.1 | Clear purpose and scope | | | | | |
| 2.2 | Clear definitions | ~ | | | | |
| 2.3 | Clear policy statements (if any) | V | | | | |
| 3. | Well defined procedures and steps | | | | | |
| 3.1 | Procedures in orderly manner | 1 | | | | |
| 3.2 | Procedure define personnel to carry out step | 5 | | | - | |
| 3.3 | Procedures define the use of relevant forms | V | | 1 | | |
| 3.4 | Procedures to define flowchart | | 1- | | | |
| 3.5 | Responsibilities are clearly defined | V | | | F1. | |
| 3.6 | Necessary forms and equipment are listed | V | | | | |
| 3.7 | Forms are numbered | V | | | | |
| 3.8 | References are clearly stated | 11 | | | | |
| 4. | General Criteria | | | | | |
| 4.1 | Policy is adherent to MOH rules and regulations | V | 1 | | | |
| 4.2 | Policy within hospital/department scope | 1 | | | | |
| 4.3 | Relevant policies are reviewed | V | | 1 | | |
| 4.4 | Items numbering is well outlined | V | | | | |
| 4.5 | Used of approved font type and size | V | | | | |
| 4.6 | | IV | | | | |

