Standard operating procedure (SOP) · HOS-SOP-014 · Version 1.0 · Approved by the ASF Expert Committee

Supports: System S1 (Hospital), criterion S1.18

At a glance

- Count healthcare-associated infections every month by type and ward.
- Review the rates every quarter.
- Act on any rise with an investigation and an action.
- Report the results to the governance meeting.
- Stop and get help straight away if: no monthly infection count has been recorded for two months.

1. Purpose

To track healthcare-associated infections over time and act when they rise (S1.18). Based on WHO core components of IPC programmes.

2. Scope

Applies to	Clinical and support staff in the hospital
Locations	All wards, clinics and departments of the facility
When	Whenever the activity described is carried out
Does not apply to	Activities covered by another document listed in section 15

3. Definitions

Term	Meaning
Clinical lead	The doctor or nurse in charge of the area at the time

4. Background

Healthcare-associated infections are common and often preventable. Tracking the rate over time shows whether prevention works.

5. Responsibilities

Role	Responsibility	Competence
Infection prevention and control lead	Runs surveillance and reports	Infection control
Ward manager	Reports infections; acts on rises	Nurse manager

6. Materials and equipment

Item	Requirement	Condition
Surveillance register (HOS-REG-005)	Current	Updated monthly

7. Safety

- Stop and call for help if a patient is at immediate risk. Do not delay urgent care to complete paperwork.

8. Before you start

- Confirm the forms and equipment named in this document are available and current.

9. Procedure

Step 1. Count.

- Record each infection with type, ward and date, using the agreed definitions.

Key point: Same definitions every month.

Step 2. Review.

- Calculate the rates each quarter and compare with the previous year.

Key point: Trends matter more than single months.

Step 3. Respond to a rise.

- Investigate the cause.
- Agree an action with an owner and a date.

Key point: A rise without an action is not acted on.

10. Decision points

- No decision points in this procedure.

11. Special situations

Situation	Action
Out of hours	Follow the same steps. Use the on-call contact on the wall of the area.

12. Escalation

- Any serious problem goes to the duty clinical lead at once and to the clinical director the same day.

13. Monitoring

Measure	Target	Frequency	Owner	If not met
Monthly counts recorded	100%	Monthly	Infection prevention lead	Escalate to chief executive
Rises with an action	100%	Quarterly	Infection prevention lead	Escalate to governance

14. Records

Record	Kept in	Retention
Record named in this document	Patient record or the area file	the period set by the facility’s records policy years

15. Training

- Staff are trained in this document at induction and refreshed each year, with a recorded competency check.

16. Related documents

ID	Title	Use
HOS-REG-005	Healthcare-associated infection surveillance register	Register

17. Evidence

Reference	Note
E-002	WHO Core components of IPC programmes (2016).
E-006	ASF Policy Framework v1.2. Adapted.
E-009	ASF Expert Committee consensus.

18. Change history

Version	Date	What changed	Approval
1.0	the date of approval	First version	set Expert Committee approval

E-learning for this document

No e-learning course is linked to this document yet.

References

- Accréditation Sans Frontières (2026). ASF Policy Framework v1.2. (E-006)
- Accréditation Sans Frontières (2026). ASF Expert Committee consensus on Standard 1. (E-009)
- World Health Organization (2016). Guidelines on Core Components of Infection Prevention and Control Programmes at the National and Acute Health Care Facility Level. Geneva: WHO. **Open source** (E-002)

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Related standard

- **Standard 2: Governance and Safety Culture**

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