

INFECTION CONTROL COMMITTEE TERMS OF REFERENCE

Purpose

The Committee exists to maintain an overview of infection control priorities within the Trust, and to link this into the clinical governance and risk management processes. It will ensure that infection control issues are appropriately managed within the hospital.

Terms of reference

1. To identify key standards for infection control and prevention as part of the Trust's clinical governance programme.
2. To ensure that programmes for the control of infection are in place and working effectively
3. To ensure that appropriate infection control policies and procedures are in place, implemented and monitored
4. To ensure that robust plans for the management of outbreaks of infection are in place and to monitor their effectiveness.
5. To monitor trends in infection control surveillance, and ensure the provision of appropriate information to clinicians, managers and CCDCs
6. To highlight priorities for action in infection control management.
7. To agree the annual infection control audit programme, and monitor its implementation.
8. To agree the annual infection control report, prior to its submission to the Trust Board
9. To ensure that national guidance and best practice in infection control is implemented within the Trust.
10. To contribute to the Trust's annual report on Clinical Governance.
11. To ensure the delivery of national infection control targets.

Meetings and accountability

1. The committee **reports to the Clinical Governance Committee** as part of the clinical governance structures.
2. The Committee will meet every two months.
3. Membership will be:
 - 3.1. Chief Executive (David Sloman)
 - 3.2. Director of Infection, Prevention & Control (Julie Andrews)
 - 3.3. Director of Nursing & Clinical Development (Deborah Wheeler)
 - 3.4. Consultant Microbiologist (Michael Kelsey)
 - 3.5. Senior Infection Control Practitioner (Caroline Mitchell)
 - 3.6. Infection Control Nurses (Trish Folan, Gretta O'Toole)
 - 3.7. Antimicrobial Pharmacist (Ai-Nee Lim)
 - 3.8. Assistant Director of Nursing (Veronica Shaw)
 - 3.9. Head of Nursing (Camilla Wiley)
 - 3.10. Senior clinicians for:
 - 3.10.1. Medicine (Gurcharan Rai)
 - 3.10.2. Diagnostic & Therapies (TBC)
 - 3.10.3. Surgery (Tim Blackburn/Harry Charalambides)

APPENDIX A

- 3.10.4. Women & Children's Health (Juliet Penrice/Narendra Pisal)
 - 3.11. Matrons for:
 - 3.11.1. Medicine (Tina Jegede)
 - 3.11.2. Diagnostic & Therapies (Adrienne Simons)
 - 3.11.3. Surgery (Maggie Pratt)
 - 3.11.4. Women & Children's Health (Soo Tai)
 - 3.12. Director of Facilities (Phil Ient)
 - 3.13. Assistant Director of Facilities (Housekeeping) (Steven Packer)
 - 3.14. Director of Pharmacy services (John Farrell)
 - 3.15. Health Protection Agency representative (Grainne Nixon)
 - 3.16. Occupational Health representative (Deborah Mathews)
 - 3.17. Islington PCT representative (Jennie Williams)
4. The Chief Executive has the power to convene a meeting at other than the scheduled dates if there is urgent business to discuss.
5. Six members shall constitute a quorum, of which three must be clinicians, and one a Trust Board member. Other trust staff can be required to attend as appropriate.