

# Development of IPC Associations in Africa

## -Strengthening support for IPC programmes



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## **Theme of this conference :**

# **Implementing Infection Prevention and Control (IPC) Practices for a Safer World**

## **Objectives of this presentation:**

- Discuss the importance of Professional IPC Associations in this process and “Strengthening the support for IPC programmes”
- Share experiences from the Infection Control Association (ICAZ) and the Infection Control Africa Network (ICAN)
- Support the formation of IPC Associations across Africa and discuss how we strengthen those that already exist
- Build a network under the umbrella of ICAN that will better understand the problems we have to address and the nature of the IPC programmes required to deal with them and develop safer healthcare

# Currently - Infection Control Associations in Africa

## ICAN

Infection Control  
Africa Network -  
Cape To Cairo

## NICA

Nigerian Infection  
Control Association

**Infection Control  
Association of  
Southern Africa**  
A member of the  
Federation of  
Infectious Disease  
Societies of  
Southern Africa



- Egyptian Society of Infection Control
- Society of Professionals of Infection Control SPIC - EGYPT

**IPNET -Kenya**  
Infection  
Prevention Network  
Kenya

**ICAZ**  
Infection Control  
Association  
of Zimbabwe

# **CHALLENGES for any Infection Prevention and Control Programme**

- **General Burden of infection**
- **Lack of knowledge on the size of the problem with limited data on Health –care associate infections**
- **Lack of resources**
- **Lack of support by Health managers – not a priority**
- **Lack of training**



# In Zimbabwe



# No 1

## Burden of Infections

- ARI's , diarrhoea, TB, HIV/AIDS amongst the top ten causes of morbidity and mortality <sup>1</sup>
- High maternal mortality 614 deaths in every 100,000 pregnancies — and infant mortality rate of 75 per 100,000 with sepsis a contributing factor
- General HIV prevalence rate of 15.2% among the adult population (Zimbabwe HIV Estimates, 2013) with a TB/HIV co-infection rate of 71%
- WHO 2015 Global TB report an estimated TB prevalence of 292 (158–465)/100,000 population and incidence of 278 (193–379)<sup>3</sup>
- 412 Rif resistant lab confirmed MDR-TB <sup>3</sup>
- Cholera and Typhoid are endemic
- MDR bacterial infections a growing problem (but of unknown size)

1. National health profile 2012
2. UNAIDS Global report 2013
3. WHO 2015
4. The National Health Strategy for Zimbabwe 2009-2013

# No 2

**In a resource limited environment:**

How do we develop a safer environment for patient care and  
Improve the quality of patient care both in health facilities and at  
home

**– an essential component is an effective IPC programme**

# No 3

## Challenges for IPC

- To change attitudes of health managers to recognise the critical role IPC plays in healthcare and the importance of funding IPC requirements
- Extending quality training for IPC in Healthcare
- Developing a higher level of training in IPC
- Developing a National Surveillance System for HAIs
- Updating the Disinfectants Policy – regulating disinfectants
- Strengthening antimicrobial Stewardship



# How does ICAZ address these challenges



- Provide support for our membership
- Work with the MOHCC and other partners
- Provide innovative effective leadership
- Mobilise resources



To do this we need a strong robust organisation (not just individuals)

# History of ICAZ

**1992 - 1993** The first Executive of the Infection Control Association of Zimbabwe was elected by a group of health professionals interested in supporting the development of infection control in Zimbabwe and the Association launched by the Minister of Health

- Helped to develop IPC policies in some institutions
- Provided IPC training
- Began to collect and distribute information on important issues relating to infection control produced a newsletter
- Developed a discussion forum
- Provided a network of support

**Lacked a strong structure to withstand the economic challenges, loss of key members and ceased to function from 2002-2010**

**ICAZ revived in 2011 and an interim Committee formed**

ICAZ together with the Biomedical Research and Training Institute (BRTI) and Management Sciences for Health (MSH) submitted a proposal in July 2011 in response to a request for applications for **“Strengthening Infection Control and Prevention in Health Care Facilities in Zimbabwe under PEPFAR”**

**Awarded the funding for :**

Zimbabwe Infection Prevention and Control Project (ZIPCOP)

1<sup>st</sup> Oct. 2011-30<sup>th</sup> Sept. 2016

# **Project Goal**

To support the Ministry of Health and Child Care(MOHCC) in improving infection control practices in health care facilities nationwide to prevent the transmission of infectious diseases, including TB, among patients and staff.

# Achievements

- National IPC Guidelines produced in 2013
- National IPC Policy and Strategic Plan with M&E tools launched in June 2015 by the Perm Sec MOHCC

The image shows the cover of a document titled "NATIONAL INFECTION PREVENTION AND CONTROL GUIDELINES". The cover is primarily green with a red horizontal band across the middle. At the top, it lists "NATIONAL INFECTION PREVENTION and CONTROL POLICY STRATEGIC PLAN M&E PLAN". A yellow banner on the right side of the green area says "May 2013". The bottom left features the logos of the Ministry of Health and Child Care of Zimbabwe and PEPFAR. The bottom right features the logos of PEPFAR and the Ministry of Health and Child Care of Zimbabwe, with the text "Ministry of Health and Child Care 2014".

**NATIONAL  
INFECTION  
PREVENTION  
AND  
CONTROL  
GUIDELINES**

May 2013

PEPFAR

Ministry of Health and Child Care  
2014

Available on  
the  
Zimbabwe  
MoHCC  
website

# Achievements (Contd.)

- Renovations in Health Facilities to reduce overcrowding
- Supply and training in Personal Protective Clothing
- Strengthening of PEP policies
- IPC Training strengthened at pre-service level in the Nursing and Medical Curriculum
- A team of National IPC Trainers
- In- Service Training strengthened at all levels of Healthcare
- Health Facilities developing IPC Plans and Programmes

# In addition – strengthening of ICAZ



ICAZ worked with ICAN to host the 5<sup>th</sup> ICAN conference in Harare November , 2014



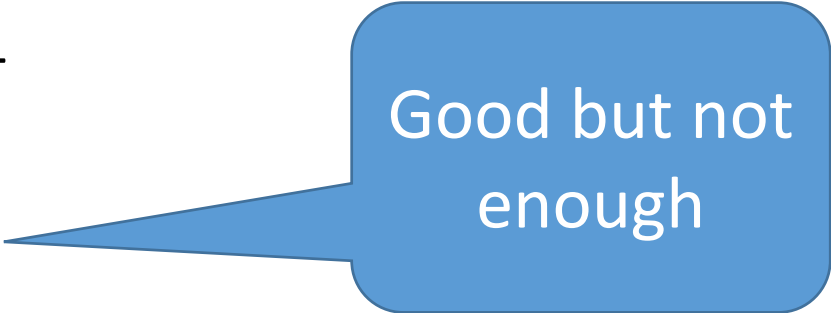
- Support for the WHO Hand Hygiene Day
- Newsletter continues
- Discussion groups on IPC topics ongoing
- ICAZ Branches established in Harare and Bulawayo
- Support for training in Sierra Leone



# How **do** we build strong IPC organisations ?

ICAZ legally registered as a Trust 25<sup>th</sup> February 2014

First AGM held since 2001 in April 2014 in Harare  
A substantive executive elected with 5 members



Good but not  
enough

## **How do we ensure:**

- That that our IPC organisation involves all our members not just a few enthusiasts?
- Provides the Leadership on advocacy and training for IPC issues and ensures a strong IPC culture In healthcare
- Keeps going!



ICAZ organised a capacity building workshop (a retreat) for its National Executive and Board (11 people) supported by funding from CDC- PEPFAR

**Facilitators:**

Dr Godfrey Sikipa ( formerly a Permanent Secretary with our MoHCC , MSH now a consultant in Zimbabwe

Ms Alethea Mashamba RGN MBA and part of the ZIPCOP team

Why the retreat? – our facilitators set the goals:

- Reaffirm importance of infection control in the health sector
- Confirm our commitment to the promotion of infection control in Zimbabwe
- Establish, consolidate governance structures and processes
- Reflect on and internalize the full implications are responsibility of being on the Board of Trustees and the National executive
- **Ensure** that when ZIPCOP ends ICAZ will have the capacity to provide strong IPC support

# Their expected outcomes

- Committed board members are fully aware of their responsibilities as a Board/ Executive
- Board members that are equipped with the knowledge of how to build a strong governance system for ICAZ
- Committees and other governance organs established (standing committees, task forces, technical working Groups, secretariat)
- Bye-Laws strengthened
- Draft Work Plan for 2015

## Importance of these goals shown in the results of a pre- capacity building check-list response on participant knowledge of different aspects of the organisation

All 11 participants said “Yes” to four of the questions:

- Do you have a constitution
- Are you a legal entity
- Do you have a Board of Trustees
- Does ICAZ have linkages with other associations

10/11 said they had a role in the running of the organisation

## On other questions -

QUESTION	YES	NO	NOT SURE
Does your org. have a written Vision & Mission Statement	7	1	3
Operational Guidelines/Manuals	4	6	1
Annual Plan with a Budget	3	6	2
Strategic Plan	1	7	3
Have your Board members received any training/orientation on their roles and responsibilities	2	8	1

QUESTION	YES	NO	NOT SURE
Do you have a Job Description	3	8	0
Do you have standing committees to run/manage the day to day affairs of the org.	5	5	1
Do you have a schedule for meetings	4	7	0
Do you have written financial Management system	2	4	5
Are your Finances Audited annually	2	4	5
Do you have Resource Mobilization strategy	0	6	5

# So what are the -“Characteristics of an Effective Governance Board”

## What a governing board needs

- Solid definition of the board's roles and responsibilities
- Strong job description for each member of the governing board
- Strong code of conduct and conflicts of interest policy and procedures
- Solid orientation program to goals of the organization, and the work of the board
- Annual self-assessment program

James Rice

## Five areas that are critical to effective governance

- Being an Accountable Board: Earning and Maintaining the Public's Trust
- Building and Sustaining a Proactive and interactive Board Culture
- Laying a Foundation for Effective Decision-Making: Board Meetings and Information for Governing
- Focusing the Board on Key Governance Priorities
- Clarifying Authority and Responsibility: The Bucks Stops Where.

- Define clear roles of chair, vice chair, committee chairs
- Define term limits for board members and officers
- Charter that outlines responsibilities of individuals and committees

# Outputs and Outcomes

A stronger commitment of all members of the management of ICAZ to the development of the Association

- An Organogram
- New standing committees : Finance  
Research and Scientific Committee  
Training  
Membership
- Process for revision of constitution with clearer job definitions
- Revised Vision and Mission Statement and Objectives
- A Harare Branch of ICAZ

Developing a strategy to promote research In IPC – train, develop proposals apply for funding

First CME day in Harare on “ The controversies of the decontamination process” Nov 28<sup>th</sup> 2015





## **Vision**

Infection Prevention and Control  
for all

## **Mission**

*To promote, encourage,  
advocate and advise on Infection  
Prevention and Control (IPC)  
issues for the benefit of the  
Community*

Also important that National Associations such as ICAN and IPNET become affiliated to the Infection Control Africa Network

Why?

- \*Receive support from ICAN for IPC activities
- \*Give feedback on IPC issues – IPC programmes that work, challenges on the ground
- \*Benefit from training courses
- \*Provide experienced IPC faculty for deployment in other parts of Africa



ICAN  
members  
across  
Africa



## The Infection Control Africa Network (ICAN)

\*The largest IPC organisation in Africa

\*Committed to supporting countries and organisations involved in establishing infection prevention and control

# ICAN



## **Vision**

Our Vision is an African Continent where safe patient care is ensured for all with the implementation of strong infection control programmes

## **Mission Statement**

The Infection Control Africa Network exists to promote and facilitate the establishment infection control programmes, achievement and maintenance of infection reduction, including healthcare associated infections and promote antimicrobial stewardship activities, through education by working with infection prevention structures in Africa and other international health related Associations

The AIM of ICAN is to bring together healthcare personnel from the African continent to establish and support professional capacity building towards a sustainable IPC structure for the benefit of patients, staff and the community.

## ***OBJECTIVES***

- To increase general awareness and knowledge among all HCW by building skills and capacity through accredited IPC training.
- To raise awareness among patients and the community and catalyse participation.
- To act as a resource for government, academia, and other policy makers using evidence based guidelines.
- To encourage appropriate surveillance and research.
- To establish and support strategic partnership that is sustainable and mutually beneficial
- To promote an accreditation process that will lead to improved healthcare and best practice

# ICAN - <http://www.icanetwork.co.za>



- With support from CDC and WHO has provided training in Sierra Leone to strengthen IPC programmes
- Has a core faculty of experienced IPC practitioners from the African continent and beyond
- Provides Information about accredited IPC courses e.g UIPC at Stellenbosch University, Al-Azhr University in Egypt
- Is in the final processes of developing an ICAN accreditation system led by the ICAN Deputy Chairperson Prof Ossama Rasslan that will allow the IPC courses/ curriculum we may offer as a National Association to be ICAN accredited to ensure the highest standard of IPC training across Africa

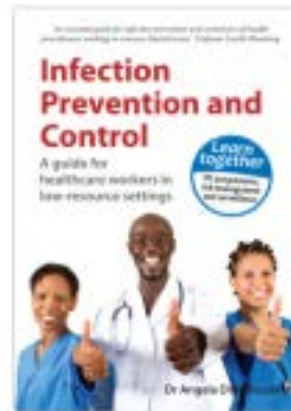
Has an MOU with Webber Training and provides access to the Webber training site [www.webbertraining.com](http://www.webbertraining.com).

Has offered in collaboration with the International Society of Chemotherapy a distance Learning programme in Antimicrobial stewardship

Provides information on the website on IPC issues

Download your FREE copy of the IPC guide for HCW

#### Infection Prevention and Control



Order from Bettercare

"An essential guide for infection prevention and control for all health practitioners working in resource-limited areas"

—Professor Lucille Blumberg

"A very comprehensive and clearly written infection prevention and control manual applicable to all healthcare workers"—Bette du Toit, Infection Prevention and Control Specialist, Mediclinic Southern Africa

Infection Prevention and Control is a crucial guide for healthcare workers, especially those working in low resource settings. Chapters cover:

- Infection prevention and control programmes
- Micro-organisms relevant to infection prevention and control
- Risk assessment and management
- Hand hygiene
- Healthcare facility design
- Cleaning and waste management
- Surveillance and outbreak investigation
- Tuberculosis IPC
- Anti-microbial stewardship

# National Associations play a critical role:

- *In advocacy for IPC*
- *An advisory role on IPC issues to the community and government*
- *Developing Quality IPC and health education initiatives in partnership with our members*
- *Setting standards in IPC*
- *Providing support to members*
- *Encourage research*
- *Partners with funders to ensure sustainable development*



Develop  
Support  
Strengthen

You can also attend the bi-annual conference



**Save The Date!**  
**25 – 28 September, 2016**



**6<sup>th</sup> Infection Control Africa Network Congress**  
Indaba Hotel, Fourways, Johannesburg, South Africa  
[www.icanetwork.co.za](http://www.icanetwork.co.za)

**THANK  
YOU!**