Report

Baseline Assessment, Infection and Prevention Control (IPC),

16 Makara RH, Preah Vihear Province

16-17 Dec. 2021

Outline

- 1. WHO recommendations and MoH guideline
- 2. Assessment (team, process and constraints)
- 3. Findings and recommendations
- 4. Ways forward

WHO recommendations and MoH guideline

To minimize risks of COVID-19:

1. Administrative measure

- 1. IPC focal point, with clear TOR and sufficiently trained in IPC
- 2. Proper patient management (flow, diagnose, care and treatment)
- 3. Sufficiently educate/train patients, care-takers, visitors and staff
- 4. Proper cleaning/disinfection of hands, equipment and related surfaces
- 5. Proper management of wastes (infectious and non-infectious)
- 6. Sufficient resources (human and materials)

2. PPE measure

Availability and appropriate use of PPE (coat, glove, face shiel, surgical mask, N95...)

3. Environmental measure

Ventilation (good airflow in patient's and staff's areas)

Assessment Processing

1. Team

- 1. Dr. Ngov Bora, Chief, AIDS Care Unit and technical bureau, NCHADS
- 2. Ms. Hum Sokheng, AIDS Care Unit, NCHADS
- 3. Mr. Chhaily Hy, PEPFAR Co-coordinator, TPT and IPC Focal Point, US CDC Cambodia

2. Facilities assessed

- 1. COVID screening area (hospital entrance)
- OPD
- 3. TB/Xpert lab
- 4. X-Ray room
- TB ward
- 6. Waste storage area
- 7. Waste disposal area/incinerator
- 8. COVID treatment ward
- 9. ART clinic

3. Process

- Interview
- 2. Check
- 3. Observe
- 4. Assessment Time: 10:00 AM-12:00PM, Dec. 16-17, 2021

5. Constraints

Limited time and access to interview key relevant staff, observe relevant practices and check/verify relevant documents

Findings and recommendations

1. Administrative

Positive:

- 1. IPC Committee and IPC focal point
- 2. System to screen for COVID
- 3. Necessary facilities (separate buildings)
- 4. COVID sample management (collection, packaging and sending)

Gaps:

- 1. Waiting area at COVID screening area
- 2. Quality of screening at the 1st screening point, hospital entrance
- 3. Risk controlling officer at OPD
- 4. IEC materials (COVID screening area, OPD, X-ray, ART clinic)
- 5. Waste management (dust bin, storage, disposal)
- 6. Hand washing (ART clinic)
- 7. TAT for COVID PCR result (3-5 days)
- 8. Loss of COVID samples

Findings and recommendations

2. PPE

Positive:

- 1. Availability of surgical masks and N-95
- 2. PPE trainings to staff
- 3. Use of surgical masks among patients, care takers and staff

Gaps:

- 1. Limited sizes of N95
- 2. SOP on PPE

Findings and recommendations

3. Environmental

Positive:

- 1. Separate buildings and designs (big windows and grills)
- 2. Plenty of empty and green area

Gaps:

1. Airflow (OPD, Xpert and TB smear room, ART Clinic)

Ways forward

Hospital Management and Leadership Team

- 1. Revisit/review MoH guideline and NCHADS findings
- 2. Assign and train IPC focal point, clear TOR
- 3. Develop, implement and monitor IPC workplan
- 4. Document and share with NCHADS and partners

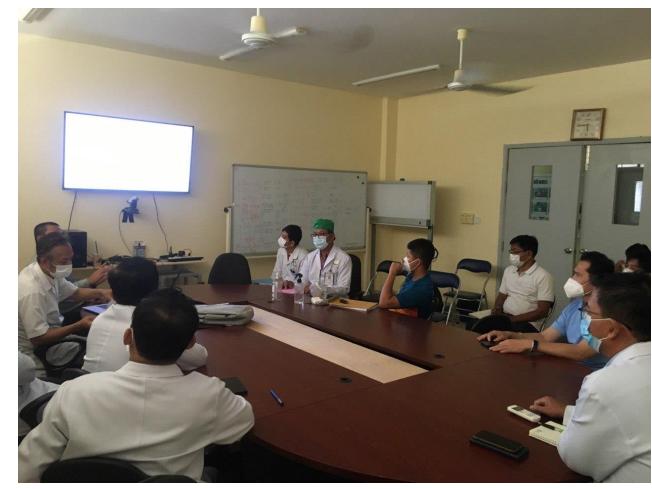
NCHADS and US CDC/Partners

- 1. Interventions
- 1. Training material development
- 2. Trainings
- 3. IEC materials and necessary items (fans...)
- 2. Site supervision/coaching
- 3. End line assessment
- 4. Workshop





















Thank!