



Overview of the institution for the certification of hospitals and clinics

HygiMed.₊

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I. General information

1. Name of the institution to certify or re-certify <i>If the institution is spread over different sites, list all sites</i>	
2. Year of the last (partial or full) renovation of the institution	
3. Number of beds in the institution	
4. Number of healthcare workers employed by the institution	
5. Number of patient-days in the preceding year	

II. Place of hospital hygiene

A. Overview

6. Start date of an institution-wide hand hygiene promotion programme	
7. Methods of hand hygiene adherence monitoring used in the institution: a) indirect monitoring (alcohol-based handrub consumption) If YES, start date b) direct monitoring (observation of hand hygiene practices) If YES, start date	<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> YES <input type="checkbox"/> NO
8. Description of the healthcare-associated infection monitoring programme implemented in the institution	

<p>9. Date from which the institution has been registered in the WHO hand hygiene promotion campaign SAVE LIVES: Clean Your Hands¹</p>	<p><input type="checkbox"/> Not yet registered</p>
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B. Organization

<p>10. The institution has its own hospital hygiene/infection prevention and control (IPC) unit/department²</p>	<p><input type="checkbox"/> YES <input type="checkbox"/> NO</p>
<p>11. The institution employs healthcare staff with a specific training in hospital hygiene/IPC If YES, specify which training</p>	<p><input type="checkbox"/> YES <input type="checkbox"/> NO</p>
<p>12. The institution is bound by a consultancy contract to a centre with a hospital hygiene/IPC unit/department If YES, specify which centre</p>	<p><input type="checkbox"/> YES <input type="checkbox"/> NO</p>
<p>13. The institution is advised by a private sector provider specialized in hospital hygiene/IPC If YES, specify which provider</p>	<p><input type="checkbox"/> YES <input type="checkbox"/> NO</p>

C. Healthcare staff

<p>14. Title(s) and name(s) of the person(s) responsible for the hand hygiene programme implemented in the institution</p>	
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¹ <http://www.who.int/gpsc/5may/register/en/>

² Unit or department with physicians and nurses specialized in hospital hygiene/PCI.

15. Number of physicians trained in IPC in FTE ³	
16. Number of FTE ³ nurses specialized in IPC	
17. Number of FTE ³ nurses and auxiliaries having undergone IPC training	
18. Number of FTE ³ microbiologists	

D. Equipment

19. Percentage of points of care ⁴ equipped with an alcohol-based handrub dispenser Note: Wall-mounted dispensers located at room entry should not be counted as alcohol-based handrub must be available without leaving the point of care.	
20. Percentage of healthcare workers carrying pocket bottles of alcohol-based handrub	
21. Name of the alcohol-based handrub used (specify the formulation)	
22. Total amount (litres) of alcohol-based handrub used in the preceding year	

³ Full-time equivalent dedicated to infection control.

⁴ A point of care is a place where 3 elements converge: the patient, the healthcare professional and care or treatment involving contact with the patient or his/her environment.

Document completed by:

Last name: _____

First name: _____

Role: _____

Date and signature: _____