



International Federation of Infection Control

IFIC e-News

Chair Update

Dear IFIC members,

As is customary at the beginning of every year, I would like to take this opportunity to thank you for your membership, on behalf of the IFIC Board and all our member societies.

The year 2007 was an intensely productive year for IFIC. Our annual conference in Budapest last October earned glowing reviews. During this meeting, we were also delighted to launch the latest edition of Basic Concepts, now a full fledged text book. The past year also saw the launch of the IFIC Strategic Partnership programme which improved our collaboration with industry and also strengthened our financial status and ability to expand our outreach. These and other initiatives will be described in the Annual Report 2007, which will soon be posted to you.

This year sees another change in the constitution of the IFIC Board of Directors. Prof. Ulrika Ransjo, who has been our hard working secretary over the past 5 years, resigned from the Board for personal reasons. We shall miss her presence in our meetings, teleconferences and board interactions. I would like to take this opportunity to thank her for the work she has put into the organization and wish her well. The IFIC bylaws will remain her legacy for years to come. We also welcome two new board members: Prof. Akeau Unahalekhaka from Thailand and Dr. Judith Richards from the United Kingdom. Both have extensive experience of infection control in low resource settings and will be major assets to the Federation.



Michael Borg
Chair, 2008
IFIC Board

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FUTURE IFIC CONGRESSES

CHILE

14-17 October 2008
IFIC 9th Annual
Congress
Santiago
www.sociedad-ijh.cl

LITHUANIA

IFIC 10th Annual
Congress
Vilnius

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2007 IFIC Scholarships

IFIC is proud to sponsor individual scholarships that enable individuals to attend its conferences. The 2007 Congress Patricia Lynch scholarship winners were the following infection prevention and control professionals:

Mohammed Lamine Atif

Franz Fanon University Hospital
All Blida University
Blida, Algeria

TITLE: Incidence of surgical site infection and accompanying risk factors in Algerian patients

Hala Badawi

Theodor Bilharz Research Institute (TBRI), Giza, Egypt

(Continued on page 3)

Donations to support the work of the Federation are welcome. Donations can be designated for either general or scholarship funds. The scholarship fund was established to increase participation at IFIC conferences for under-funded member delegates.

Contributions to IFIC can be sent to:

Pamela Allen
47 Wentworth Green
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N Ireland UK
Email: info@theifc.org

Chair Update continued

We hope you have found the activity from the IFIC Board of Directors during 2007 to be valuable to you professionally and, as always, we welcome your feedback and suggestions on how we can offer a better service. None of these initiatives would have been possible without your continued support and participation.

In the last few years, the amount and complexity of work that IFIC manages to put together, has meant ever greater funding. This year we are again asking you to renew your membership subscription as soon as possible. The forms and details will be posted to you with the annual report but they can also be downloaded from the IFIC website. Please let your members know how much we appreciate their support. We would like to work more closely with you to develop some new projects.

Finally, please be sure your email contact information is correct. This is our easiest communication pathway.

Thank you,
Michael Borg
Chair, 2008 IFIC Board

IFIC 2008 – A STEP AHEAD TO THE GLOBALIZATION OF INFECTION CONTROL AND PATIENT SAFETY

Infection Control (IC) and Prevention has evolved and changed greatly over the last 30 years. Many of us in the field have the sensation that many changes have occurred and we need to update our knowledge. That's why many infection control practitioners worry about knowing the latest technology and feel frustrated if they don't have access to the last published article on a specific issue.

In all the IC publications in the decade of 1980s, urinary tract infections were mentioned as the main problem of nosocomial infections (NI) in all hospitals based on the few countries that had surveillance systems for NI. Little attention was paid to the marked differences that exist in different localities due to cultural, economic and geographic aspects that can result in different risks. To evaluate interventions in other countries based on those data could be faulty. Newly thrown into the IC arena are emerging agents that can quickly result in a pandemic.

We must consider IC prevention in a more general context as one part of the main challenge in health care - patient safety. There has been increased consciousness by health care personnel that the patient has risks associated with health care and that these risks can cause severe complications and unexpected outcomes in terms of morbidity, mortality and costs. Therefore the demands on IC practitioners are increasing constantly.

How can we approach these tremendous challenges? Undoubtedly we need to understand these changes and be ready to approach them with new strategies. It is essential to work not only with professionals in our own countries or regions but be open to new information from other areas of the world.

**9th Congress of the
International Federation of
Infection Control**



**Santiago, Chile
14 - 17 October 2008**

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IFIC 2007 Scholarships continued

TITLE: Impact of antibiotic policy in a tertiary care research institute in Egypt: three years experience

Shehla Baqi

Dow University of Health Sciences, Karachi, Pakistan

TITLE: Infection control survey at a public sector teaching hospital in Karachi, Pakistan



Mohammed Ali Boroumand

Tehran Heart Center, Tehran, Iran

TITLE: Brief report of most important activities of Tehran Heart Center's infection control committee

Irma Burjanadze

National Center for Disease Control and Public Health (NCDC), Tbilisi, Georgia

TITLE: *Pseudomonas aeruginosa* infection in an intensive care unit

Yaffa Raz

Lady Davis Carmel Medical Center, Haifa, Israel

TITLE: Clearing-out local contamination

Elizabeth Anne Scicluna

St. Luke's Hospital, Gwardamangia, Malta

TITLE: Surveillance of Antimicrobial resistance in intensive care setting at St. Luke's Hospital, Malta

Izhaki Shlomit

Lady Davis Carmel Medical Center, Haifa, Israel

TITLE: Infection control in operation room (OR) - meeting the educational needs of a multidisciplinary team

Le Thi Anh Thu

Cho Ray Hospital, Ho Chi Minh City, Vietnam

TITLE: Percutaneous exposure incidents among Vietnamese hospital personnel and the impact of a prevention program

Ekaterine Tsertvadze

National Center for Disease Control and Public Health

(NCDC), Tbilisi, Georgia

TITLE: Nosocomial infections in National Medical Centre of Georgia

Peter Zarb

St. Luke's Hospital, Gwardamangia, Malta

TITLE: Introducing antimicrobial guidelines for surgical prophylaxis—an impact assessment



IFIC – SIG Construction, Design and Renovation

The first meeting of the SIG was held at the IFIC congress in Budapest on October 19. In our meeting we discussed the content of our work. Different papers/drafts will be prepared of about 2-10 pages each, evidence based or not:

- ◇ Protection of immunocompromised patients during construction and renovation (Peter Hoffman),
- ◇ How many beds should be on a ward and in a room (Walter Popp),
- ◇ Water supply, bathrooms, showers... in hospitals (Silvio Brusafarro),
- ◇ Construction standards in emergency departments (Céline Drolet),
- ◇ Construction standards of ICUs (Ulrika Ransjö).

All drafts should try to make differentiated recommendations for low and high income countries:

- ◇ Basic: even with severely limited resources, this is what you should do as a minimum,
- ◇ Standard: this is what you should aim for in less wealthy countries,
- ◇ Ideal: if you have the resources, this is what you could do.

The drafts will circulate by e-mail to all SIG members and a final version developed through e-mail or at the next Congress in Chile in October, 2008. The final papers may be made public on the IFIC website and/or in the IFIC journal and/or in other journals.

Additionally, Sue Wiseman will send a list of guidelines and recommendations to all the SIG members. One aim of the SIG should be to find experts and define good guidelines. For the next year Walter Popp will be the chair of the SIG and coordinate work. Formally the responsible persons for the different drafts may be seen as secretaries.

**SCHOLARSHIP AWARDS FOR THE
NINTH CONGRESS OF THE INTERNATIONAL FED-
ERATION OF INFECTION
SANTIAGO, CHILE
14 – 17 OCTOBER 2008**

SUBMISSION DEADLINE: 15 MAY 2008

The International Federation of Infection Control places great emphasis on the participation of delegates from developing countries at its annual Congress. In order to facilitate this attendance, the Federation in conjunction with the Local Organising Committee is making available a number of scholarships.

Scholarships:

At least one main award will be granted, consisting of:

- ◇ **free registration** to the conference
- ◇ refund - against receipts - of travel expenses, based on the cheapest economy itinerary (up till a **maximum of US\$1200**)
- ◇ a subsistence allowance of **\$450** to cover 4 nights accommodation.

A number of smaller bursaries are also usually awarded, covering:

- ◇ free conference registration
- ◇ a subsistence allowance of **\$450** to cover 4 nights accommodation.

In addition, all scholarship recipients will be invited to present a write-up of their conference presentation, of not less than 1000 words, to be considered for publication in the International Journal of Infection Control. If deemed acceptable, an **additional award of \$250** will be made once the paper has been published in the journal.

Applicants

Applicants must be active in the practice of infection control.

- ◇ Preference will be given to participant(s) living in countries with limited resources, particularly in the case of delegates from members societies affiliated with IFIC.
- ◇ Participants must present a paper, if possible in oral format, in the English or Spanish language. However poster presentations will be accepted from scholarship winning delegates who are not sufficiently proficient in the English language.

Submissions:

Two types of submissions are accepted:

Research style paper – these types of submissions study a specific aspect of infection control. Abstract should be formally structured into Introduction; Methods; Results; Conclusions. Preference will be given to submissions from low resource countries or regions where published information is currently lacking

“How we did it” – these submissions would be a more descriptive account of how infection control practitioners or teams tackled a specific I.C. challenge or brought about improvement in the prevention or control of health-care associated infections in their institution or country. Abstracts can be presented in a descriptive non-structured style.

Application forms together with submission instructions and deadlines can be downloaded from the IFIC website www.theifc.org as well as from the conference webpage www.ific2008.cl/. These forms can be submitted either in English or alternatively in Spanish.

Awards:

Applications will be reviewed by a committee established by the IFIC Board, whose decision will be final. Applicants will be informed of the success or otherwise of the application by email reply to the address indicated on the application form. A list of awardees will also be published on the IFIC website.

The scholarship grant will be given in the form of a **cash refund** to the delegate at an award ceremony during the Congress. Scholarship recipients are to make and pay for their own travel and accommodation arrangements; it is also their full responsibility to ascertain whether a visa is required for travel and obtain it well in advance of the conference. In addition, all scholarship recipients are required to confirm acceptance of their award and proof of travel arrangements (purchased air ticket and/or confirmed accommodation arrangements) by not less than 2 months from the date of the conference. Failure to do so may result in the scholarship being withdrawn and offered to another candidate.

Completed scholarship applications as well as queries on the scholarship process should be emailed to: scholarships@theifc.org

Requests for information on conference registration, accommodation, social events or the scientific programme should not be sent to the above address but forwarded **directly** to the local organizing committee.

IFIC Special Interest Group - Hand Hygiene

The International Federation of Infection Control (IFIC) Special Interest Group (SIG) -Hand Hygiene- comprises 37 members from around the world. The group members consist of different specialties—microbiologists, epidemiologists and nurses— all share the same title of infection control professional.

As a Special Interest Group we will conduct a “comparative research” project titled ‘Implementation of WHO Hand Hygiene Guidelines’ to determine the most effective methods to sustainably embed WHO hand hygiene guidelines into healthcare organizations located in different parts of the world. For this purpose, the IFIC SIG -Hand Hygiene- is working in partnership with WHO (principally through *Julie Storr* –Project Manager for the First Global Patient Safety Challenge). It is envisaged that this project will be divided into a number of research areas that can better address the specific needs of the SIG members in healthcare settings located in various countries.

The project will be conducted through a qualitative-quantitative research methodology. Qualitative research will be used to explore individual cases to describe in a more detailed way what happens with WHO hand hygiene implementation ‘on the ground’. In addition, quantitative data will be collected through a survey which will be adapted from an existing WHO hand hygiene survey. As the information from the various case studies is expected to have certain similarities, the quantitative research should help to corroborate the credibility and transferability of the findings. The quantitative analysis will generalize the characteristics identified from several cases and in this way it might be possible to identify some “best methods” to implement WHO hand hygiene guidelines worldwide.

In general terms, the project will include the following aspects: tools, tool implementation processes, results and conclusions. If anyone wants to participate in this project, please contact the group leaders.

Group leaders:

Chair

Prof. Dr. Nagwa Khamis

Infection control consultant

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OXOID INFECTION CONTROL TEAM OF THE YEAR AWARDS

Initiated in 2003 by Oxoid, an IFIC patron member, the Awards recognize and reward the dedicated teams of infection control microbiologists, infection control nurses and doctors who, each day, strive to prevent or reduce rates of hospital-acquired infections and improve infection control procedures, making our hospitals safer places for patients, staff and visitors alike.

The Awards are simple to enter – a summary of activity in 1,800 to 2,500 words is all that is required – and entries are welcome from infection control teams in all countries around the world. They are judged by a panel including a representative of the International Association of Infection Control.

For details of how to enter, visit www.oxoid.com.

IFIC thanks its Strategic Partners
for their support and assistance
in the fulfilment of its projects and initiatives.



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live healthy lives

NEW IFIC BOARD MEMBERS

Judith Richards

Judith graduated in Buenos Aires, Argentina, and moved to the UK in 1977. After a period of general training which included general medicine, nephrology and psychiatry, she completed her pathology training specialty in medical microbiology.

She has been a hospital consultant in Medical Microbiology since 1989, and infection control doctor since 1992.

Judith has had a long standing interest in teaching, lecturing at local level both at the hospital and at the University of East Anglia Medical School, where she is an Hon. University Lecturer and PhD supervisor. She is also an examiner for the Royal College of Pathologists (Microbiology).

She was on the Council of the Hospital Infection Society from 1997 to 2007, and as Scientific Secretary organised numerous national and international meetings and conferences. Her interest in supporting overseas developments in the field of infection control led her to organise several lecture tours to South America, Australia and South Africa.

She has published over 32 papers, and presented as invited/keynote lecturer in Uruguay, Argentina and Australia.

Dr Judith Richards
Consultant Medical Microbiologist
Director of Infection Prevention & Control
Dept. of Medical Microbiology and Infection Control
Norfolk & Norwich University Hospital (NHS Trust)
Bowthorpe Road
Norwich, NR2 3TX
UK



Akeau Unahalekhaka

Akeau has a BS in Nursing, MS and Ph.D. in Epidemiology. She also received a Certificate in Surveillance and Applied Epidemiology for HIV and AIDS from CDC (USA) and a Certificate in Statistical, Epidemiological and Operational Methods Applied in Medicine and Public Health from the University of Brussels, Belgium. She worked for the Ministry of Public Health, Thailand in its Division of Epidemiology as a Disease Control Officer for 14 years. She became a professor of the faculty of nursing, Chiang Mai University in 1992.

Akeau is currently a consultant in Infection Control at many hospitals in Thailand, the Society of Central Sterile

Supply Department (CSSD) of Thailand and the Bureau of Health System Development, Department of Health Service Support, Ministry of Public Health.

Akeau wrote books on Infection Control starting in 1995: Nosocomial Infections Surveillance, Prevention of Nosocomial Infections, Disinfection and Sterilization, Knowledge in Disinfection and Sterilization, Knowledge in Prevention of Nosocomial Infection, Nosocomial Infections : Epidemiology and Prevention, and Surveillance and Outbreak Investigation of Nosocomial Infections. She translated the IFIC book "Infection Control: Basic Concepts and Training" (2nd Edition) into Thai. About 4000 copies of this book were distributed throughout Thailand.

She firstly participated in the IFIC congress as a panelist in "Tsunami in South East Asia" in Istanbul, Turkey. She presented her work on "The Application of Collaborative Quality Improvement Concept in Prevention of Ventilator-Associated Pneumonia in 18 Hospitals, Thailand" at the 7th IFIC congress in Stellenbosch, South Africa and was awarded "The Best Oral Free Paper Presentation". At the 8th IFIC congress in Budapest, Hungary, she presented her work on "Glass particles contamination in single dose ampoules". At this congress she was accepted to be an IFIC Board member.

Akeau Unahalekhaka , RN,
Ph.D.(Epidemiology)
Associate Professor
Faculty of Nursing, Chiang Mai
University
A. Muang , Chiang Mai 50200
THAILAND



IFIC – SIG Surveillance

The SIG meeting was held October 19, 2007. The SIG is not aiming at formation of some new surveillance network(s), but rather on helping each other in problems that we encounter during surveillance in our hospitals/countries. IFIC will provide the SIG with a specific forum on its web site, and S. Kalenic will send the address of the forum to all SIG participants. This address will also be put in the IFIC News. IFIC will put on its website the addresses (organizations) of existing surveillance networks, as well as literature on surveillance. We have identified the main areas of interest that we would like to discuss:

- ◇ how to survey hand hygiene
- ◇ how to prioritise surveillance in the infection control practice
- ◇ how to perform post-discharge surveillance
- ◇ how to make surveillance easier for clinical staff
- ◇ how to better use information technology
- ◇ how to link surveillance with risk management
- ◇ how to group process surveillance and audits together

As it is the beginning of this SIG, participants have decided that Smilja Kalenic will be the chair person and recording secretary until next year.

Six countries meet on WHO's "High 5s" Project to improve patient safety in hospitals

In a unique display of international patient safety collaboration, the top health leaders from Canada, Germany, the Netherlands, New Zealand, the United Kingdom and the United States met on November 1 in Washington, D.C. to sign a letter of intent to support efforts to advance the global patient safety agenda through engagement in a special World Health Organization (WHO) Action on Patient Safety Initiative. The collaborative initiative, known familiarly as the High 5s Project, seeks to improve the safety of patients around the world. The Project is being coordinated by the WHO Collaborating Centre, which is led by The Joint Commission and Joint Commission International, in partnership with the WHO World Alliance for Patient Safety and the Commonwealth Fund. The centerpiece of the High 5s Project involves the development and implementation of standardized operating protocols (SOPs) to address five widespread patient safety problems in the participating countries and elsewhere. The SOPs will seek to:

- ◇ Promote effective management of concentrated injectable medicines.
- ◇ Assure medication accuracy at transitions in care.
- ◇ Improve communications during patient care handovers.
- ◇ Assure performance of the correct procedure at the correct body site.
- ◇ Promote improved hand hygiene to prevent healthcare-associated infections.

Four of the five SOPs have been finalized and approved by the participating countries. The fifth will be finalized within the next month. Once in place, the SOPs are expected to have broad impacts in preventing avoidable deaths and serious injuries in hospitals. The Project also involves the elaboration of a sophisticated impact evaluation strategy that will assess not only the degree to which patient safety vulnerabilities have been eliminated but also the economic and cultural impacts of the SOPs at the hospital level. Project implementation is targeted for late summer of 2008, with the expectation that its impacts will be assessed over a five-year period. Volunteer hospitals will be invited to share their experiences and lessons learned with each other over time through an electronic learning community. It is anticipated that the learning experience will lead to continuing refinements to the SOPs over the project period.

18th Annual Scientific Meeting of
The Society for Healthcare
Epidemiology of America
(SHEA)

April 5-8, 2008 ○ Orlando, Florida



Those involved in or responsible for infection prevention and control face the challenges of merging science with cost containment realities, adapting to local and federal pressures, and staying on top of emerging issues. SHEA's Annual Scientific Meeting brings together top clinicians, scientists, and practitioners to identify best practices, new technologies, and up-to-date advances to keep you on the forefront of patient care and healthcare worker safety.

SHEA's faculty will provide you with the very latest information in such areas as cost-effective infection prevention, antibiotic resistance, and surveillance. SHEA's meeting allows for frequent conversation with the top international and domestic movers in the field, as well as exposure to the range of perspectives and roles in this community.

Registration is now open!

Pre-registration closes on Friday, March 7.

To register and to learn more about SHEA 2008, check SHEA's Annual Meeting site at:

http://www.shea-online.org/about/annual_meeting_overview.cfm

Hotel Reservations

SHEA has negotiated for the low rate of \$192 US for single/double occupancy at the Buena Vista Palace Hotel & Spa, located across the street from Downtown Disney. In-room wireless, shuttles to all Disney parks, daily membership to the fitness center and spa, and onsite parking are included with the room fee.

Click at the link to access the hotel reservations site:

https://reservations.ihotelier.com/crs/g_reservation.cfm?groupID=17169&hotelID=6579

Questions? Email info@shea-online.org; Call (703) 684-1006.

THE SIXTH NATIONAL SYMPOSIUM ON NOSOCOMIAL INFECTIONS AND DISINFECTION, SOFIA, BULGARIA, NOVEMBER 29-30, 2007

**(Dedicated to: World Alliance for Patient
Safety)**

The National Symposium on Nosocomial Infections and Disinfection is held annually in Sofia, Bulgaria. The Symposium is the official Forum of the Bulgarian Association for Prevention and Infection Control "BulNoso". The annually held Symposium and the Bulletin (a peer review journal "Nosocomial Infections") are the major means BulNoso uses to provide a regular source of information on European standards and worldwide achievements in infection control and disinfection to support continuing education and professional qualification.

The Symposium provides a unique opportunity for sharing scientific information and practical knowledge, not only during the oral and poster sessions, but also through the educational module, traditionally nested into the scientific programme and the industry exhibition, presenting the latest innovations in the dynamic area of hospital hygiene and disinfection.

In the context of the international collaboration, since 2006 the programme has been designed to follow the ideas and meet the targets of the WHO Global Alliance for Patient Safety and its Initiatives: "Clean care is safer care" and "Safe surgery saves lives".

BulNoso was the first Bulgarian organization to promote the Initiatives among the professionals in the country. In October 2006 a campaign was begun to build commitment to the WHO initiatives in the national programmes of the Surgical Society, Association of Neonatology and BulNoso. In addition, Bulgaria was among 13 new countries that pledged their commitment to the Initiative 10 November 2006 at the Palace of Nations in Geneva where the first successful anniversary of the Global Patient Safety Challenge was celebrated.

Assoc. Prof. Dr. Nina Gatcheva, President of "BulNoso" and Chair of the Organizing Committee, opened the Symposium with 280 attendees and guests from Belgium, United Kingdom, Germany and Switzerland.

Professionals from all over the country (infection control nurses, doctors - microbiologists and epidemiologists, clinicians) were brought together to exchange information and experience in the field of infection control and prevention. Hospital directors and members of the Ministry of Health

also attended the Symposium. All the participants received free copies of the 5th and 6th issues of the BulNoso Bulletin "Nosocomial Infections".

The main topics of the Symposium included: surveillance of nosocomial infections, modern approaches to prevention of device-associated infections, SSI, epidemiology and diagnostics of nosocomial pathogens such as VHC, legionella, NFGB, MRSA and *C.difficile*, vaccines/ immuno-biologicals for personnel and patients protection, new antiseptics and disinfectants.

Carl Suetens from the Public Health Institute, Brussels was invited as a representative of IPSE and Barry Cookson from the Health Protection Agency, UK, was a guest-expert invited by the Bulgarian-Swiss Hospital-Hygiene Programme. There were 33 oral presentations and 33 poster presentations.

The social event (gala dinner) was superb and even more colourful because of the included quiz .

*Assoc. Prof. Dr. Nina Gatcheva, Chair of BulNoso
Dr. Violeta Voynova-Georgieva, Scientific Secretary of Bul-
noso*

**Palais des Congrès
Montréal, Québec
May 29 - June 5, 2008**

**CHICA 2008 Education
Conference**



**Conference
Planning Office**

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Report from the IFIC annual general meeting (AGM)

The AGM of 2007 was held in Budapest, in the midst of a very successful and well attended conference. The AGM too was well attended, with delegates from the member societies in Bulgaria, Canada, Chile, Egypt, Italy, Lithuania, Malaysia, Malta, Netherlands, Norway, Romania, Taiwan, United Kingdom and USA, and many other attendees.

This year IFIC celebrated its 20th anniversary, so the opening ceremony of the conference included a great Hungarian pianist playing Happy Birthday while a huge birthday cake with sparks on it was wheeled into the meeting room! We have moved a long way from the first meeting in London UK August 1987. The aims of IFIC have remained the same, namely: To promote international exchange of knowledge, information, ideas and support in the control of hospital-associated infections. IFIC now has 71 member societies from 59 countries around the world, and the member societies are what make IFIC tick.

Member societies nominate and appoint trustees of the board, which then select the Chair, the Treasurer and the Secretary among them. In 2007, Michael Borg has been chair, and he has graciously accepted to continue as Chair for 2008. Ulrika Ransjö has resigned from the board, and Carol Goldman will be Secretary for 2008 onward. Two new trustees, Judith Richards UK and Akeau Unahalekaka Thailand were unanimously elected at the AGM, to serve for the period 1 Jan 2008 – 31 Dec 2011.

The board has expanded during the leadership of Patricia Lynch and Michael Borg, and now works more through committees between the board meetings, which are held twice a year.

Finances have improved considerably, mainly through donations and through the strong support of our strategic partners Becton Dickinson, 3M, Covidien (formerly Tyco Healthcare International), Medi-Flex, Chlorox and Enturia; Baxter Worldwide joined in 2007. The Treasurer's report is available from Nizam Damani.

The IFIC Basic Concepts of Infection Control is now available in hard copy, distributed at IFIC Congress and in electronic copy on website. The book consists of 23 chapters, written by 19 authors, has selected references and covers 208 pages. Editors were Candace Friedman and William Newsom. The publishing of the book was sponsored by 3MWorldwide, Becton Dickinson and Covidien. IFIC is grateful to these companies for their invaluable support. Translations of Basic Concepts of Infection Control can only be done by agreement with IFIC, who owns the copyright.

The IFIC website has moved from Russia to Malta, and is now taking new shape with the support of our webmaster

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IFIC 2008

IFIC has contributed to the globalization and evolution of IC and patient safety. It promotes the interchange and collaboration of projects among all countries giving them a unique opportunity to share experiences and work together.

The Congress in Chile 2008 is the first time an IFIC congress will be held in a Latin American country. It is a major step toward globalization of IC. We will again have the opportunity to meet, join and increase our horizons.

All of us have worked very hard to make sure that this congress is similar to last year's and that it will be unforgettable both technically and scientifically. We have confirmed the participation of many experts in the field of NI, patient safety, sterilization and disinfection and hospital epidemiology. They include Prof. Didier Pittet, Prof. Seto Wing Hong, Prof. Elaine Larson, Prof. William Rutala, Prof. Gary French, Prof. Antoni Torres and many others.

We cordially invite all of you to participate in this great experience and to learn more about the congress at www.ific2008.cl. You can be part of scientific papers, workshops, and interest groups and share your experiences and initiatives increasing our huge infection control team to other areas of the world.

You will also have the opportunity to get to know a beautiful country that is widely recognized for its hospitality and natural beauty. We hope you will come and visit them.

See you in Santiago October 14 to 17 2008.

POLA BRENNER, RN, MSC, CHAIR OF THE CONGRESS

The First Global Patient Safety Challenge: Clean Care is Safer Care

A message from Professor Pittet to colleagues in IFIC: Recap - where we are in 2008:

A pioneering global initiative, concerned with ensuring concrete action on healthcare-associated infection in every healthcare facility in the world is well underway. At the centre of this initiative, is the newly developed WHO Guidelines on Hand Hygiene in Health Care (Advanced Draft) and a suite of novel, practical and adaptable tools to aid implementation. The Guidelines are intended to be implemented in any situation in which health care is delivered. The unique "selling point" associated with this First Global Patient Safety Challenge is in the suite of tools to assist regions, countries and facilities in the implementation of hand hygiene improvement initiatives. Added value components include the toolkit itself with its simple but effective resources designed to convey core messages. In particular, the newly developed Five Moments for Hand Hygiene¹ and the training film to help health care workers to recognize these Five Moments (http://www.who.int/gpsc/media/training_film/en/index.html) offer a refreshing and novel way to practically address hand hygiene improvement in health care.

Impact:

Work remains in progress, but the impact of the First Global Patient Safety Challenge, should not be underestimated and can be demonstrated across many levels:

Global - 82 countries worldwide have made a national ministerial pledge to tackle health care-associated infection,

Regional - 8 pilot sites are field-testing the implementation of the guidelines

National - Over 20 countries are running national hand hygiene campaigns. If you are running or considering running a national hand hygiene improvement campaign, we want to know - contact us at patientsafety@who.int

Facility - Over 300 individual health care facilities/networks



have enrolled via the web site to become a Complementary Test Site, agreeing to test the implementation strategy and provide feedback to shape future resources (http://www.who.int/gpsc/country_work/pilot_testing_info/en/index.html) Individual patients - we are currently conducting a global survey of patients to capture their perceptions relating to health care-associated infection and hand hygiene (http://www.who.int/gpsc/patient_survey/en/index.html). The results will permit us to have greater insight to ensure meaningful patient involvement across a range of contexts.

Actions for 2008:

- ◇ By the end of 2008, the guidelines will no longer be an advanced draft, but will be finalized and updated to reflect cutting edge evidence and case study learning from the pilot and complementary test sites;
- ◇ The accompanying implementation strategy will be finalized in parallel to the guideline work, influenced by the learning from pilot and complementary test sites
- ◇ Throughout 2008, we will work effectively with WHO regional patient safety focal points to support and strengthen actions to ensure sustainability;
- ◇ We will also strengthen relationships with already established hand hygiene improvement initiatives both within and outside of health care, e.g., the IFIC Special Interest Group on Hand hygiene;
- ◇ We will formalize the growing network of nations currently running hand hygiene campaigns;
- ◇ We will scope out the feasibility of establishing a global day of action on hand hygiene in health care.

Conclusion:

The WHO Guidelines and associated implementation toolkit can best be summarized as a multimodal strategy which promotes hand hygiene improvement through staff education and motivation programmes, adoption of alcohol-based handrub at the point of care as an international standard, use of performance indicators, and strong commitment by all stakeholders, such as frontline staff, managers and health-care leaders, as well as social marketing, neurosciences and human factors' techniques to influence behavior and culture in order to improve practices for patients and lessen the harm and death caused by these avoidable infections. We welcome you in joining us in strengthening this global movement towards

(Continued on page 11)

FAREWELL FROM ULRIKA RANSJÖ

Uppsala, Sweden
January 1, 2008

Dear friends and colleagues in the IFIC network,

As I am now leaving the board of IFIC and the position as Secretary. I would just like to say thank you. It has been five years of fun and hard work, lots of new experiences, new friendships. As the French say, *partir c'est mourir un peu*. You have given me so much, and if I have been able to contribute something in return during these years, I am truly grateful. The lovely engraved crystal bowl that you see in the picture, adorned my New Year party table, filled with whipped cream!
Good luck, Carol Goldman, and keep up the good work!

Ulrika Ransjö

AGM 2007*(Continued from page 9)*

Aaron Cauchi.

The Publications report was given by Gertie van Knippenberg-Gordebeke. Candace Friedman is Chair of the Publications Committee.

The IFIC Journal, **INTERNATIONAL JOURNAL OF INFECTION CONTROL (IJIC)**, is registered at ISSN 1816-6296. The Digital Object Identifiers (DOI) prefix is 10.3396 and was obtained 18 September 2007. The IJIC now has a new format, in alignment with other scientific journals, and will be published only electronically. Editors / editorial council members are being selected (goal: editorial team of 5/reviewer panel of 10). Guidelines for authors will be finalized by late October 2007. Spanish translations of the IJIC and other IFIC documents will be sponsored by 3M Chile.

The Newsletter, **IFIC e-news**, is published quarterly on the IFIC website from Candace Friedman's office. An e-mail list is served with a link to the Newsletter at each issue. Three issues have published in 2007; one a 20th anniversary issue. Next deadline – January 10, 2008. Member societies and associate members are invited to send material both for IJIC and Newsletter to Candace Friedman.

Over the past year IFIC has worked closely with the World Health Organisation, particularly in worldwide efforts to foster better hand hygiene in clinical care. Regular teleconferences were held with the leaders of the Global Patient Safety Challenge. As a result, a page in the IFIC website was dedicated to this initiative and member societies were sent a communication requesting them to endorse this programme and publicise it within their countries and to lobby their government to sign the WHO Patient Safety pledge. Nizam Damani has also been made a member of WHO Hand Hygiene Education Task Force. More corroborative efforts are planned for the next year. Ms Julie Storr of WHO Geneva spoke from the floor about the importance of close cooperation between IFIC and WHO in issues of infection prevention and control

The Scholarship Fund is established to increase participation for under-funded member delegates at IFIC Congresses. IFIC can now accept donations by Master Card and Visa. As the Scholarship Fund was established by Patricia Lynch as Chair of IFIC, the scholarships are now named after her. Patricia Lynch also chaired the 2007 Scientific Scholarship committee. Awards and scholarships were given at the closing ceremony of the IFIC Conference.

It is only in the last years that we have been arranging regular international multidisciplinary congresses. The

The 8th IFIC Congress, in Budapest 2007, gathered > 600 delegates from > 50 countries. Both scientific and social arrangements were outstanding. Selected presentations from the scholarship winners will be published in IJIC. An evaluation sheet will be sent by e-mail to conference participants. The proceedings of the conference The chair expressed heartfelt thanks from IFIC to the Hungarian organization committee.

The 9th IFIC congress will take place in Santiago, Chile. October 14-17, 2008.

Further information can be found at the conference website www.ific2008.cl. Pola Brenner, Chair of the conference and a board member of IFIC, welcomed us to next year's IFIC conference which will be held in Santiago, Chile.

The venue for the IFIC Congress in 2009 will be announced in early 2008. See www.theific.org. For IFIC supported conferences see also the Global Infection Control Calendar of events, hosted by www.chica.org/ific/ific.html.

The minutes in full of the AGM will be posted on the IFIC website shortly.

*(Continued from page 10)***First Global Patient Safety Challenge**

cleaner and safer care.

Further information:

The WHO World Alliance for Patient Safety:

<http://www.who.int/patientsafety/worldalliance/alliance/en/index.html>

The First Global Patient Safety Challenge:

<http://www.who.int/gpsc/en/index.html>

The WHO Guidelines on Hand Hygiene in Health Care (Advanced Draft)

http://www.who.int/patientsafety/information_centre/ghhad_download/en/index.html

The Implementation Tools:

<http://www.who.int/gpsc/tools/en/>

Countries committed to tackling HAI

<http://www.who.int/gpsc/statements/countries/en/index.html>

1) Sax H, Allegranzi B, Uckay I, Larson E, Boyce J, Pittet D (2007) 'My five moments for hand hygiene': a user-centred design approach to understand, train, monitor and report hand hygiene J Hosp Infect 200; 67: 9-21.

IFIC Basic Concepts Translation Agreement

These are the requirements for translation and use of the book, *IFIC Basic Concepts of Infection Control*.

1. IFIC encourages its member societies to translate IFIC Basic Concepts in Infection Control to their native language and to disseminate it amongst their members
2. Translation must be complete and fully faithful to the original version, with nothing left out in terms of content and nothing added. However translation of words need not be literal (for example, infection control is translated to hygiene in French).
3. It is highly desirable that the translation is undertaken by an infection control professional conversant in English and the local language or, if this is not possible, by a translator with a medical or nursing background.
4. In the event of difficulties in interpretation of the original text or any questions on meaning or content, the chair of the IFIC Publications Committee would be available to provide any assistance required.
5. Explanations regarding differing requirements in a country may be added as footnotes.
6. The identical structure, size and format of the original version are to be fully retained. The complete number of chapters should be retained in exactly the same order of the book. Furthermore the size of the book as well as the front and back cover design should also be identical (these will be provided by IFIC).
7. Nevertheless, the logo and details of the member society undertaking the translation may be printed in colour on the back cover.
8. Twelve (12) copies of the completed translated publication are to be sent to the IFIC Executive Officer within three months of the book's publication. In addition, an electronic PDF file should also be provided. IFIC reserves the right to place this translation on the IFIC web site (www.theific.org).
9. The book may not be sold for profit. Copies may be sold at a price to cover costs.
10. Sponsorship may be obtained to cover costs. In such situations, the approval of the IFIC Executive Committee should be obtained before any agreement with the sponsor is finalized. A detailed spreadsheet indicating the costs of translation, printing and distribution as well as the size of the sponsorship grant should be included in the approval request. In the event of a profit being generated, IFIC would be entitled to 50% of this profit.
11. The sponsor may be acknowledged on second frontispiece page. Acknowledgement of the sponsor must be restricted to a logo not larger than 4cm² and the words: The International Federation of Infection Control (IFIC) and the (name of member society) gratefully acknowledge the support of (name of company or organisation) for an unrestricted grant to enable publication of this translated edition of *IFIC Basic Concepts of Infection Control*.
12. The sponsor must have no input into the translated content nor include any sort of advertising material, whether this is of a word or picture nature.
13. The translation may not be part of a journal – either as a regular edition or a supplement. However it is permissible, in order to reduce distribution costs, to include the translated book within the envelope or bag of the society's regular journal, newsletter or other printed material normally posted to its members.
14. In the event of any additional clarifications required beyond the extent of these terms, the decision of the IFIC Executive Committee will be final and binding.
15. The copyright to *IFIC Basic Concepts of Infection Control* will remain with the International Federation of Infection Control.

Contact basic.concepts@theific.org if you wish to translate this book.