
Hospital Epidemiology and Infection Prevention Program Scope of Service and Authority Statement**I. PURPOSE**

- A. To define the Scope of the Hospital Epidemiology and Infection Prevention (HEIP) program and articulate the Authority accorded by UCSF Medical Center to HEIP.
 - 1. The mission of HEIP is to develop and maintain an environment that minimizes the risk of acquiring or transmitting infections among patients, visitors, staff, faculty, learners, and volunteers.

II. REFERENCES

- A. [The Joint Commission Infection Prevention and Control Chapter](#)
- B. [Center for Medicaid and Medicare Services \(CMS\) 482.42 Conditions of Participation: Infection prevention and control and antibiotic stewardship programs](#)
- C. [California Health and Safety Code 1288.8](#)
- D. [Center for Disease Control and Prevention's Core Infection Prevention Practices for Safe Healthcare Delivery in All Settings](#)
- E. [HEIP policies](#)

III. DEFINITIONS

- A. Staff: All UCSF Medical Center employees, Medical Staff, Advance Practice Providers, temporary or contract workers, learners, and volunteers.

IV. SCOPE OF SERVICE

- A. HEIP is given the authority by the UCSF Medical Center to develop, approve, and institute policies, procedures, and interventions aimed at preventing and controlling the transmission of infectious diseases in the healthcare setting.
 - 1. The scope of the HEIP program includes all areas under the UCSF Medical Center license including:
 - a. Inpatient areas
 - b. Ambulatory areas that provide patient care services
 - c. Procedural areas that provide patient care services
- B. The HEIP program also provides consultation to the Langley Porter Psychiatric Hospital (LPPH).
- C. The scope of the HEIP program excludes Benioff Children's Hospital-Oakland, St. Mary's Medical Center, St. Francis Medical Center, and other UCSF affiliates.

V. AUTHORITY STATEMENT

- A. HEIP considers these activities to be within its scope and areas of responsibility:
 - 1. Perform surveillance of healthcare-associated infections (HAIs) in accordance with Centers for Disease Control and Prevention (CDC) National Healthcare Safety Network

Hospital Epidemiology and Infection Prevention (HEIP) Scope of Service and Authority Statement

Approved by the
Quality Improvement
Executive Committee
01/17/2025

-
- (NHSN) guidelines to meet California state mandates, Centers for Medicare and Medicaid (CMS) requirements, and the requirements of other regulatory and quality improvement organizations.
2. Collect, analyze, and distribute critical data and information required for the prevention of HAIs.
 3. Work in partnership with nursing, providers, core services, and other groups at UCSF Medical Center to prioritize and implement evidence-based practices to prevent HAIs.
 4. Develop infection prevention policies and procedures to guide activities and methods for identifying, reporting, investigating, controlling, and preventing the transmission of infectious microorganisms within UCSF Medical Center and with other healthcare facilities.
 5. Assist in implementation of evidence-based infection prevention practices including CDC Core Infection Practices such as hand hygiene, Standard precautions, and transmission-based precautions.
 6. Perform ongoing surveillance to enable timely detection and response to possible clusters or outbreaks of infections or when there is concern for transmission of infections.
 7. Educate and train healthcare personnel regarding fundamental infection prevention practices.
 8. In partnership with Materiel Services and others, help ensure appropriate materials and equipment (e.g., personal protective equipment) are available to prevent infection transmission and acquisition.
 9. Provide guidance regarding the infection prevention aspects of policies and procedures for Occupational Health Services and other core groups including but not limited to Hospitality, Facilities Management, Clinical Technologies, and Respiratory Care.
 10. Provide consultation on facility design, renovation, and construction projects and work in partnership with Facilities Management, Design and Construction, and Environment, Safety, and Health on Infection Control Risk Assessments (ICRAs) utilized to identify appropriate mitigation activities to minimize infectious risks associated with these projects.
 11. Work in partnership with other UCSF Medical Center groups, including the Sterile Processing Department (SPD), to ensure reliable and appropriate cleaning, disinfection, and sterilization of reusable medical and surgical devices and equipment, compliance with manufacturer instructions for use, and review of new equipment that needs an infection prevention assessment.
 12. Provide subject matter expertise and participate in emergency and high-consequence infectious disease preparedness.
 13. If needed, provide consultation for temporary changes in the provision of patient care based on epidemiologic data suggestive of infectious risks (e.g., temporarily closing a clinical area due to an infectious hazard).
 14. HEIP has the authority to develop and institute policies and procedures. HEIP policies are reviewed at a minimum of every 3 years or more often if needed, and approved through the UCSF Medical Center Infection Prevention Committee.

**Hospital Epidemiology and
Infection Prevention (HEIP)
Scope of Service and
Authority Statement**

VI. COMMUNICATION

A. Internal communications

1. HEIP works closely with departments/areas/core services throughout UCSF Medical Center to ensure adherence to infection prevention policies and standards and to evaluate the effectiveness of implementation.
2. HEIP distributes information and communicates with other departments/areas/groups using a variety of communication modalities including but not limited to staff meetings, committee meetings, in-service training, memos, emails, dashboards, and other reports.

B. External communications

1. HEIP communicates with infection prevention staff from referring healthcare facilities regarding infections identified at UCSF Medical Center that are attributable to those facilities.
2. HEIP communicates and collaborates with regulatory agencies in response to infection prevention-related issues.
3. HEIP serves as the liaison between UCSF Medical Center and local and state public health agencies (e.g., San Francisco Department of Public Health, California Department of Public Health) for infection prevention-related issues, including new and re-emerging infectious diseases of epidemiologic importance.

VII. HEIP STAFFING

A. The HEIP team including the System Director, Medical Directors, Managers, and infection preventionists are designated as the UCSF Medical Center Infection Prevention Officers.

B. Staffing levels

1. HEIP leadership will determine, with input from Department of Quality and Safety leadership, if the HEIP team has appropriate resources to maintain an effective program.
2. If additional staffing resources are needed, requests will be made to the Chief Quality Officer, Vice President of Quality and Safety, and additional UCSF Medical Center leadership as needed.

Position	Current FTE
Infection Preventionists, Field Unit (FU)	7
Infection Preventionists, Surveillance and Clinical Analytics (SCA)	3
System Director	1
Managers for the FU and SCA	2
Medical Directors, Associate Medical Directors, Assistant Medical Directors	2.75
Administrative	1
Total	16.75

Hospital Epidemiology and Infection Prevention (HEIP) Scope of Service and Authority Statement

C. Staff qualifications

1. Education and training are consistent with regulatory requirements and UCSF Medical Center policy.
2. Individuals are certified and registered as appropriate. The individual's knowledge and experience are appropriate for assigned responsibilities. Infection Prevention Officers shall maintain their qualifications through ongoing education and training.
 - a. Infection Preventionist: Baccalaureate of science degree in Nursing or other healthcare field (e.g., medical technology, public health), or equivalent combination of education and experience. Certification in Infection Control required depending on experience.
 - b. Medical Directors: Board certification in Infectious Diseases and completion of Infection Control training per California law.

D. Hours of operation

1. HEIP staff members are available during business hours Monday-Friday 8:00 am – 4:00 pm at the Main Office line (415) 353-4343 or through the HEIP On-Call Voalte (adults: 628-248-9059; pediatrics: 628-248-8503)
2. Non-business hours access is through the Hospital Supervisors:
 - a. Benioff Children's Hospital-San Francisco: 415-502-0728 or 415-353-1964
 - b. Parnassus/Mission Bay adult hospital: 415-353-8036
 - c. Mt. Zion adult hospital: 628-248-9911

VIII. GOVERNANCE STRUCTURE

- A. HEIP is part of the UCSF Medical Center Department of Quality and Safety.
- B. The HEIP Medical Directors report up to the UCSF Medical Center Chief Quality Officer for the adult services and to the Executive Medical Director of Quality & Safety, BCH-San Francisco for the pediatric services.
- C. The HEIP System Director reports up to the UCSF Vice President of Quality and Safety.
- D. The UCSF Infection Prevention Committee:
 1. Is co-chaired by the HEIP Medical Directors.
 2. Meets at least 4 times per year.
 3. Consists of members who represent a variety of adult and pediatric disciplines and departments/groups, including but limited to Hospital Medicine, Nursing, Pharmacy, clinical microbiology laboratory, Respiratory Care, Hospitality Services, Facilities Management, Sterile Processing Department, Occupation Health Services, Nutrition and Food Services, Environment, Health, and Safety, Regulatory, Dialysis.
 4. HEIP policies are reviewed and approved by the Infection Prevention Committee.
 5. Develops and approves the UCSF Medical Center Annual Infection Prevention Risk Assessment and Plan that is reviewed and approved by the Quality Improvement Executive Committee (QIEC).
 6. Provides an annual report and updates as needed to QIEC.

**Hospital Epidemiology and
Infection Prevention (HEIP)
Scope of Service and
Authority Statement**

IX. ESTABLISHMENT OF UCSF MEDICAL CENTER INFECTION PREVENTION PROGRAM PRIORITIES AND GOALS

- A. UCSF Medical Center Infection Prevention program priorities and goals are established annually using a Hazard Vulnerability Analysis (HVA) that takes into account relevant HAI surveillance results and other performance measures.
- B. The priorities and goals identified through the HVA are summarized in the Annual Infection Prevention Work Plan which is approved by the IPC and QIEC.

X. DELEGATION OF AUTHORITY

- A. HEIP is responsible for coordinating and ensuring implementation of the activities within the Infection Prevention Work Plan under the leadership of the HEIP System Director and Medical Directors.
- B. HEIP provides guidance to and works in close collaboration with UCSF Medical Center entity leaders and managers on implementation of infection prevention policies and procedures.
- C. The HEIP System Director and Medical Directors:
 - 1. Advise the Infection Preventionists in prevention and investigative activities.
 - 2. Direct the implementation of prevention measures as needed that have potential impact on the daily operations of UCSF Medical Center.
 - 3. Provide subject matter expertise and input to UCSF Medical Center leadership regarding prevention measures that may have a substantial impact on the delivery of patient care.
 - 4. Are responsible for identifying and prioritizing HEIP goals and daily operational HEIP activities.

XI. QUALITY MONITORING

- A. HAI surveillance data is used to identify opportunities for improvement of infection prevention-related practices and processes.
- B. HAI outcome summaries are prepared and distributed to UCSF Medical Center leadership monthly.
- C. HEIP provides an annual report on behalf of the HEIP team and the Infection Prevention Committee to the UCSF Quality Improvement Executive Committee (QIEC) annually.
- D. HAI surveillance results are used to identify, investigate, and contain possible clusters of infections involving patients and/or healthcare personnel.
- E. HEIP collaborate with interdisciplinary colleagues in the organization to design and implement improvement initiatives as needed.
 - 1.

XII. RESPONSIBILITY

- A. HEIP is responsible for writing and updating this policy. Questions about the implementation of this policy should be directed to HEIP.

XIII. HISTORY OF DEPARTMENTAL DOCUMENT

- A. Issued 5/91 and revised 8/92, 10/95, 4/01, 9/03, 12/05, 5/07, 5/10, 8/11, 6/15, 2/19, 3/22, 12/24.
- B. Last approved by the Infection Prevention Committee on 12/17/2024
- C. Last approved by the Quality Improvement Executive Committee on xx/xx/xxxx