



## **Global Infection Prevention Control Network – facilitated by WHO HQ, Infection Prevention and Control Global Unit**

### **Terms of Reference**

#### **Role and purpose of the Network**

The Global Infection Prevention Control (GIPC) Network's aim is to enhance local, national (Member States) and international coordination and collaboration in the field of infection prevention and control (IPC) and to support WHO's and Member States' efforts on IPC, from preparedness to IPC systems and programmes' strengthening, outbreak prevention and control, as well as capacity building for surveillance. Ultimately, the GIPC Network's goal is the reduction of health care associated infection (HAI) (including in the context of outbreaks) and to address the global burden of antimicrobial resistance (AMR) in support of all Member States and WHO priorities. In doing so, the GIPC Network in particular focuses on the needs of low- and middle-income health care settings/countries, contributing to the formulation and spread of evidence-based recommendations, adaptable to different settings and considering best use of often scarce resources.

For more information on the burden and importance of preventing and managing HAI and AMR visit: <http://www.who.int/antimicrobial-resistance/en/> and <http://www.who.int/infection-prevention/en/>.

Additionally, when a communicable disease outbreak occurs in a community, health care settings are called upon to identify and care for infected individuals. In either routine or outbreak situations, if IPC practices are inadequate or not in place, the health care setting may become a source of infectious disease amplification and spread. Member states, country and regional WHO offices have requested that WHO HQ plays a strong coordinating role in global IPC including response efforts. Thus again, the importance of this GIPC Network.

#### **Objectives of the Global IPC Network**

The GIPC Network will assist by:

- Aligning expertise and thinking to effectively support development, dissemination and implementation of IPC recommendations, technical documents, campaign promotional messages and supporting resources, and training materials and tools (including related to outbreaks);

- Contributing to the information/evidence for the WHO AMR surveillance programme of work and supporting implementation of surveillance;
- Enhancing global outbreak response through provision of technical advice and rapid development and dissemination of relevant recommendations/documents during emergency situations and by providing evidence-based IPC recommendations to contain outbreaks as well as contributing to WHO Emerging Diseases Clinical Assessment and Response Network's (EDCARN) and/or Global Outbreak Alert and Response Network's (GOARN) calls to action in the event of a global health emergency;
- Contributing to define the global health and research agenda for IPC including in the context of quality universal health coverage, as well as the most effective ways of working together to promote and implement them.

### **Status of GIPC Network**

The GIPC Network is administered by the WHO's HQ Service Delivery and Safety Department, under the auspices of the Infection Prevention and Control Global Unit (IPC-GU). In this function, the IPC-GU collaborates with the WHO AMR secretariat, the WHO Infectious Hazard Management department and relevant focal points in regional offices. The GIPC Network is not an independent legal entity but a collaborative mechanism between the interested parties including WHO and participants. The operations of the GIPC Network shall in all respects be administered in accordance with the WHO Constitution, WHO's Financial and Staff Regulations and Rules, Manual provisions, and applicable policies, procedures and practices.

### **Membership of the GIPC Network**

The GIPC Network may be comprised of:

1. Institutions, organizations, agencies and professional societies with demonstrated influence and experience in international IPC capacity building, particularly in low resource settings or in settings where IPC capacity is minimal;
2. Agencies and organizations that provide emergency IPC in health care services in countries or regions experiencing (or have the potential to experience) communicable disease outbreaks amplified by the provision of care in health care settings;
3. Selected WHO Collaborating Centres.

Individuals representing institutions should agree to these terms of reference and ensure their institution is clear on the commitment required.

Proposals of inclusion of a new member will be made through the WHO secretariat and discussed with the Network participants.

At times, other parties will be co-opted to the group if necessary expertise is required for particular project work.

## **Methods of working/accountability**

The GIPC Network will be coordinated by the IPC-GU as primarily a virtual group, facilitated by the use of an on-line web-based 'platform' where 'closed' information can be shared. WHO staff will contribute to this platform with the aim to meet the objectives of the Network, by proposing more detailed work plans for the Network and sharing information. However, WHO will not moderate the platform (all participants are expected to represent themselves in a professional and evidence-based/informed manner). It is also the responsibility of those who are part of the Network to visit the platform regularly to check for information and calls to contribute to WHO work.

Names and contact details of the WHO secretariat including those different staff at WHO HQ working on IPC, AMR and infectious hazard management will be shared so that it is clear how effective two-way communications can be achieved when necessary with different WHO Departments.

Teleconference/WebEx discussions that are deemed necessary will be facilitated by WHO. Notes from any group discussions and recommendations/actions arising from these will be recorded and shared by WHO on the GIPC Network web-based platform.

## **Budget**

WHO acts as secretariat for the Network. Subject to the availability of funds, WHO will provide expenses for travel to WHO led face-to-face meetings when these are necessary, in line with UN approved per diem for external experts.

## **Lifespan and evaluation of the Network**

The Network will exist until no longer deemed necessary by WHO and participants. WHO has the right to close the Network at any time or to revise the participant list, including if any persons are found to in breach of the terms of reference outlined.

The work of the Network will be documented through annual reports describing engagement between WHO and participants as well as any collaborative outputs delivered, and will feed into reviews of WHO related work.

## **Disclaimer**

The opinions represented by the Network participants are not necessarily the opinions or recommendations of WHO. Every effort should be made by those who are part of the Network to present WHO recommendations, above other recommendations/technical information. No participant part of the Network can claim they are working for or on behalf of WHO (unless under certain circumstances, any members are contracted to work for WHO).