

**T-11020/17/2015-NACO (ART)**  
**Ministry of Health & Family Welfare**  
**National AIDS Control Organisation**  
**(Care, Support & Treatment Division)**

6<sup>th</sup> Floor, Chandralok Building  
36, Janpath, New Delhi  
Dated: 15<sup>th</sup> October, 2015

**OFFICE MEMORANDUM**

**Subject: Strengthening Infection Control Activities at ART Centers.**

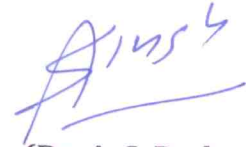
NACO has been focusing on strengthening infection control activities at ART centres in order to prevent occurrence of various infections among PLHIV who are already immune compromised. This includes AIC activities for prevention of TB among PLHIV incorporating Air borne Infection Control (AIC) practices as per AIC guidelines of Govt of India (April 2010) at ART Centres across the country through display of IEC material (on cough & hand hygiene practices) and by making use of surgical mask at sites. However, it has been observed that the activities as per AIC guidelines are being followed sub-optimally at many ART centers.

Hence there is a need to intensify the efforts being made in this direction. In reference to the Operational Guidelines for ART services (July 2012), below are some of the points which need to be strictly adhered.

- The team of 10 faculty members from departments of medicine, paediatrics, Obstetrics & Gynaecology, Surgery, Microbiology Biochemistry, Pathology, Chest & TB, Surgery, Community Medicine and Dermatology (and/or Venereology) are to be constituted at all ART Centers when these centers are set up. However, the number is 5-6 in peripheral health facilities. This ART team is headed by Nodal Officer of the ART Centre. At many sites these teams are now dysfunctional as many members have been transferred / retired. If in place, the meeting of team is not held regularly as per norms. These teams should be reconstituted & regular meeting of ART team should be held. The agenda of team meeting should include infection control including AIC.
- The Nodal Officer should review and monitor the functioning of the centre regularly. Once in a week the Nodal Officer should sit with the ART staff to review the functioning of the centre, record completion, and computerization and also check whether Airborne Infection Control activities are followed at the ART centre. The ART Team as above should meet every month under leadership of Dean/Superintendent of hospital & discuss all issues related to ART centre. The Nodal Officer of ART should be member of hospital Infection Control Committee also.
- Hospital Infection control committees should be constituted in all hospitals and nodal officers should be part of it. Along with waste management and hygiene, this committee should also look into the airborne infection as well and conduct risk assessment, surveillance of health status of health care providers and conduct trainings on infection control practices. The Nodal Officer should ensure that all the team members of ART centre are trained in Universal Workplace Precautions, Waste segregation and disposal and Airborne Infection Control Practices, with special reference to tuberculosis. In addition, ventilation standard for Airborne Infection Control (AIC) as per the guidelines should be ensured.

- The ART centre should ensure the display of IEC materials on cough hygiene, fast tracking of patients with cough and availability of mask at the ART centre and also practice these guidelines:
- Health care providers (HCP) have potential risk of getting occupational exposure to various potential blood borne infections (HIV, HBV and HCV) that occur during performing duties. Therefore, screening for hepatitis to be done irrespective of symptoms. Further, it should be ensured that the ART center staffs are vaccinated for Hepatitis B.
- HCP also need to be periodically screened for tuberculosis as per AIC guidelines of Govt. Of India (As per 2010).

Regular follow up to be done to ensure that the quality of services at the ART centre is adhered, keeping in view the programmatic goal and objectives.



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**Dy. Director General (CST)**

To

**Project Directors, All State AIDS Control Societies**

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