In an operational research study involving three tertiary healthcare facilities in Freetown, Sierra Leone (2020-21), the level of Infection Prevention and Control (IPC) implementation was graded as basic and suboptimal according to the World Health Organization Infection Prevention and Control Assessment Framework (IPCAF) tool grading system.

There is thus an urgent need for both financial and technical support to address the gaps and challenges identified including IPC orientation training for all healthcare workers and administrative staff, provision of personal protective equipment, continued monitoring of IPC practices, and the development of a national strategy to undertake regular surveillance of HAI.
Monitoring/Audit of IPC practice; Workload, staffing and bed occupancy; Built environment, materials and equipment.

What did we find?

- Out of a maximum of 800 points, IPC compliance scores were 333.5 for Connaught Hospital, 323.5 for Ola During Children’s Hospital, and 296 for Princess Christian Maternity Hospital.
- These equate to a ‘Basic’ level of compliance indicating suboptimal implementation of IPC measures.
- Out of the eight core components, IPC programs were the best performing and the least performing were healthcare-associated infection surveillance.
- Other implementation challenges included (i) lack of clean, safe, and uninterrupted water supply (ii) inadequate IPC supplies such as personal protective equipment, hand hygiene stations, and cleaning agents (iii) lack of a dedicated IPC budget for implementation of IPC activities including training of newly posted staff.

Implications and Recommendations

- The IPC programs at tertiary hospitals in Freetown are sub-optimal.
- This has the potential to increase the burden of HAI and AMR in these hospitals.
- An effective IPC program is essential for achieving universal health coverage and sustainable development goals by 2030.
- We therefore recommend:
  o Hospital IPC teams to conduct new employee orientation and training for all healthcare workers and administrative staff ensuring adequate supplies of safe water and personal protective equipment.
  o National IPC unit should develop a national HAI surveillance strategy and ensure regular HAI surveillance.
  o Routine monitoring of IPC practices using the WHO IPCAF Tool.
  o Government of Sierra Leone and its partners should provide technical and financial support to the national and hospital IPC team for the implementation of IPC programs to reduce the burden of healthcare-associated infections and antimicrobial resistance.