

2021 Preventing and Controlling Infections Standard

This fact sheet provides users with information on the alignment of the actions and criteria from the 2017 Preventing and Controlling Healthcare-Associated Infections Standard (2017 Standard) to the 2021 Preventing and Controlling Infections Standard (2021 Standard).

The 2021 Preventing and Controlling Infections Standard was developed to further support health service organisations to prevent, control and respond to infections that cause outbreaks, epidemics or pandemics, including novel and emerging infections.

The key driver for revision of the 2017 standard was gaps and uncertainties that arose during the response to COVID-19. Issues identified by clinicians and health service organisations included better support to respond to airborne transmission of COVID-19, particularly the concerns of healthcare workers; the importance of a precautionary approach to infection prevention and control, based on risk assessment and management; and guidance regarding management of infections in healthcare workers, and outbreak response and planning.

The changes included in the 2021 Preventing and Controlling Infections Standard clarify existing requirements, and reflect actions taken by the health system in response to COVID-19. New items are highlighted below.

Whilst retaining a focus on patient safety, the 2021 Preventing and Controlling Infections Standard:

- References healthcare worker safety in relation to infection prevention and control, because of the complementary relationship between healthcare worker safety and patient safety
- Promotes use of the hierarchy of controls, which is a work health and safety risk assessment and management framework, in conjunction with infection prevention and control systems to design health service organisation infection prevention and control programs

- Promotes a precautionary approach to transmission-based precautions, aligned with the relevant clinical procedure and based on a risk assessment and consideration of the status of scientific evidence. For example, in relation to COVID-19, infection is transmitted by aerosols in specific circumstances, and evidence continues to evolve. A precautionary approach would involve the adoption of airborne precautions in situations where there is uncertainty about the type of circumstances that may arise in the care of a patient who is a confirmed or suspect COVID-19 case. This means that healthcare workers would use a P2/N95 respirator mask, in addition to other personal protective equipment that may be required as part of standard precautions, to care for this type of patient.
- Requires consideration of ventilation and air management system issues, and emerging evidence in relation to these issues, as part of a precautionary approach to responding to the risk of airborne transmission of COVID-19.
- Requires management of members of the workforce with transmissible infections, which is not a new requirement in relation to either work health and safety or infection prevention and control.
- Has the [*Australian Guidelines for the Control and Prevention of Infection in Healthcare*](#), appended to ensure ready access for development and implementation of systems to meet the requirements of this Standard.

[Existing implementation support resources](#) are being revised to align with 2021 Preventing and Controlling Infections Standard, and new resources are being developed.

Questions?

For more information, please visit: safetyandquality.gov.au/standards

You can also contact the Comprehensive Care project team at: AdviceCentre@safetyandquality.gov.au

Mapping the 2021 Standard to the former 2017 Standard

Criterion 1: Clinical governance and quality improvement systems are in place to prevent and control infections, and support antimicrobial stewardship and sustainable use of infection prevention and control resources (formerly ‘Clinical governance and quality improvement to prevent and control healthcare-associated infections, and support antimicrobial stewardship’ from 2017 Standard)

	2021 Standard	2017 Standard	Key change/alignment between 2021 Standard and 2017 Standard
Item	Action	Former Action	
Integrating clinical governance	3.01 The workforce uses the safety and quality systems from the Clinical Governance Standard when:	3.1 The workforce uses the safety and quality systems from the Clinical Governance Standard when:	
	a. Implementing policies and procedures for infection prevention and control	3.1a Implementing policies and procedures for healthcare-associated infections and antimicrobial stewardship	
	b. Identifying and managing risks associated with infections	3.1b Managing risks associated with healthcare-associated infections and antimicrobial stewardship	
	c. Implementing policies and procedures for antimicrobial stewardship	3.1a Implementing policies and procedures for healthcare-associated infections and antimicrobial stewardship	
	d. Identifying and managing antimicrobial stewardship risks	3.1b Managing risks associated with healthcare-associated infections and antimicrobial stewardship	
			3.1c Identifying training requirements for preventing and controlling healthcare-associated infections, and antimicrobial stewardship

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	2021 Standard	2017 Standard	Key change/alignment between 2021 Standard and 2017 Standard
Item	Action	Former Action	
Integrating clinical governance <i>continued</i>	3.02 The health service organisation:		
	a. Establishes multidisciplinary teams to identify and manage risks associated with infections using the hierarchy of controls in conjunction with infection prevention and control systems		New Action – Multidisciplinary teams and use of hierarchy of controls. Expands scope of Actions 1.10a and 1.10c. 1.10a Identifies and documents organisational risks. 1.10c Acts to reduce risks.
	b. Identifies requirements for, and provides the workforce with access to, training to prevent and control infections	3.1c Identifying training requirements for preventing and controlling healthcare-associated infections, and antimicrobial stewardship	
	c. Has processes to ensure the workforce has the capacity, skills and access to equipment to implement systems to prevent and control infections	3.1c Identifying training requirements for preventing and controlling healthcare-associated infection, and antimicrobial stewardship	New Action – Access to equipment to implement systems to prevent and control infections. Expands scope of Action 3.1c.
	d. Establishes multidisciplinary teams, or processes, to promote effective antimicrobial stewardship		New Action Note: Consistent with the AMS program model described in <i>Antimicrobial Stewardship In Australian Health Care 2018</i> (the AMS Book) promoting multi-disciplinary teams.
e. Identifies requirements for and provides access to training to support the workforce to conduct antimicrobial stewardship activities	3.1c Identifying training requirements for preventing and controlling healthcare-associated infections, and antimicrobial stewardship		

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	2021 Standard	2017 Standard	Key change/alignment between 2021 Standard and 2017 Standard
Item	Action	Former Action	
Integrating clinical governance <i>continued</i>	f. Has processes to ensure the workforce has the capacity and skills to implement antimicrobial stewardship	3.1c Identifying training requirements for preventing and controlling healthcare-associated infection, and antimicrobial stewardship	
	g. Plans for public health and pandemic risks	1.10f Plans for, and manages, internal and external emergencies and disasters	New Action Applies Action 1.10f specifically to infection control.
Applying quality improvement systems	3.03 The health service organisation applies the quality improvement system from the Clinical Governance Standard when:	3.2 The health service organisation applies the quality improvement system from the Clinical Governance Standard when:	
	a. Monitoring the performance of infection prevention and control systems	3.2a Monitoring the performance of systems for prevention and control of healthcare-associated infections, and the effectiveness of the antimicrobial stewardship program	
	b. Implementing strategies to improve infection prevention and control systems	3.2b Implementing strategies to improve outcomes and associated processes of systems for prevention and control of healthcare-associated infections, and antimicrobial stewardship	
	c. Reporting to the governance body, the workforce, patients and other relevant groups on the performance of infection prevention and control systems	3.2c Reporting on the outcomes of prevention and control of healthcare-associated infections, and the antimicrobial stewardship program	
	d. Monitoring the effectiveness of the antimicrobial stewardship program	3.2a Monitoring the performance of systems for prevention and control of healthcare-associated infections, and the effectiveness of the antimicrobial stewardship program	

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	2021 Standard	2017 Standard	Key change/alignment between 2021 Standard and 2017 Standard
Item	Action	Former Action	
Applying quality improvement systems <i>continued</i>	e. Implementing strategies to improve antimicrobial stewardship outcomes	3.2b Implementing strategies to improve outcomes and associated processes of systems for prevention and control of healthcare-associated infections, and antimicrobial stewardship	
	f. Reporting to the governance body, the workforce, patients and other relevant groups on antimicrobial stewardship outcomes	3.2c Reporting on the outcomes of prevention and control of healthcare-associated infections, and the antimicrobial stewardship program	
	g. Supporting and monitoring the safe and sustainable use of infection prevention and control resources		New Action Note: This is implicit in Actions 1.01 and 1.08 of the Clinical Governance Standard.
Partnering with consumers	3.04 Clinicians use organisational processes consistent with the Partnering with Consumers Standard when assessing risks and preventing and managing infections, and implementing the antimicrobial stewardship program to:	3.3 Clinicians use organisational processes from the Partnering with Consumers Standard when preventing and managing healthcare-associated infections, and implementing the antimicrobial stewardship program to:	
	a. Actively involve patients in their own care	3.3a Actively involve patients in their own care	
	b. Meet the patient's information needs	3.3b Meet the patient's information needs	
	c. Share decision-making	3.3c Share decision-making	

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	2021 Standard	2017 Standard	Key change/alignment between 2021 Standard and 2017 Standard
Item	Action	Former Action	
Surveillance	3.05 The health service organisation has a surveillance strategy for infections, infection risk and antimicrobial use and prescribing that:	3.4 The health service organisation has a surveillance strategy for healthcare-associated infections and antimicrobial use that:	
	a. Incorporates national and jurisdictional information in a timely manner		New Action
	b. Collects data on healthcare-associated and other infections relevant to the size and scope of the organisation	3.4a Collects data on healthcare-associated infections and antimicrobial use relevant to the size and scope of the organisation	
	c. Monitors, assesses and uses surveillance data to reduce the risks associated with infections	3.4b Monitors, assesses and uses surveillance data to reduce the risks associated with healthcare-associated infections and support appropriate antimicrobial prescribing	
	d. Reports surveillance data on infections to the workforce, the governing body, consumers and other relevant groups	3.4c Reports surveillance data on healthcare-associated infections and antimicrobial use to the workforce, the governing body, consumers and other relevant groups	
	e. Collects data on the volume and appropriateness of antimicrobial use relevant to the size and scope of the organisation	3.4a Collects data on healthcare-associated infections and antimicrobial use relevant to the size and scope of the organisation	
	f. Monitors, assesses and uses surveillance data to support appropriate antimicrobial prescribing	3.4b Monitors, assesses and uses surveillance data to reduce the risks associated with healthcare-associated infections and support appropriate antimicrobial prescribing	

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	2021 Standard	2017 Standard	
Item	Action	Former Action	Key change/alignment between 2021 Standard and 2017 Standard
Surveillance <i>continued</i>	g. Monitors responsiveness to risks identified through surveillance		New Action Applies Actions 1.10b and 1.10d specifically to infection control. 1.10b Uses clinical and other data collections to support risk assessments. 1.10d Regularly reviews and acts to improve the effectiveness of the risk management system.
	h. Reports surveillance data on the volume and appropriateness of antimicrobial use, to the workforce, the governing body, consumers and other relevant groups	3.4c Reports surveillance data on healthcare-associated infections and antimicrobial use to the workforce, the governing body, consumers and other relevant groups	

Criterion 2: Infection prevention and control systems (no name change from 2017 Standard)

	2021 Standard	2017 Standard	Key change/alignment between 2021 Standard and 2017 Standard
Item	Action	Former Action	
Standard and transmission-based precautions	3.06 The health service organisation has processes to apply standard and transmission-based precautions that are consistent with the current edition of the <i>Australian Guidelines for the Prevention and Control of Infection in Healthcare</i> , and jurisdictional requirements, and relevant jurisdictional laws and policies, including work health and safety laws	3.5 The health service organisation has processes to apply standard and transmission-based precautions that are consistent with the current edition of the <i>Australian Guidelines for the Prevention and Control of Infection in Healthcare</i> , and jurisdictional requirements	
Standard and transmission-based precautions	3.07 The health service organisation has:		
	a. Collaborative and consultative processes for the assessment and communication of infection risks to patients and the workforce		New Action Applies Action 1.10e specifically to infection control. 1.10e Reports on risks to the workforce and consumers.
	b. Infection prevention and control systems, in conjunction with the hierarchy of controls, in place to reduce transmission of infections so far as is reasonably practicable	3.5 The health service organisation has processes to apply standard and transmission-based precautions that are consistent with the current edition of the <i>Australian Guidelines for the Prevention and Control of Infection in Healthcare</i> , and jurisdictional requirements	New component of the Action – Use of hierarchy of controls. Applies Action 1.10c specifically to infection control. Expands scope of Action 3.5. 1.10c Acts to reduce risks.
	c. Processes for the use, training, testing and fitting of personal protective equipment by the workforce	3.11c Include training in the appropriate use of specialised personal protective equipment for the workforce	Expanded scope and specificity of 3.11c.

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	2021 Standard	2017 Standard	Key change/alignment between 2021 Standard and 2017 Standard
Item	Action	Former Action	
Standard and transmission-based precautions <i>continued</i>	d. Processes to monitor and respond to changes in scientific and technical knowledge about infections, relevant national or jurisdictional guidance, policy and legislation		New Action Applies Actions 1.7a and 1.7c specifically to infection control. 1.7a Set out, review, and maintain the currency and effectiveness of, policies, procedures and protocols. 1.7c Review compliance with legislation, regulation and jurisdictional requirements.
	e. Processes to audit compliance with standard and transmission-based precautions	3.2a Monitoring the performance of systems for prevention and control of healthcare-associated infections, and the effectiveness of the antimicrobial stewardship program	
	f. Processes to assess competence of the workforce in appropriate use of standard and transmission-based precautions	3.1c Identifying training requirements for preventing and controlling healthcare-associated infections, and antimicrobial stewardship	
	g. Processes to improve compliance with standard and transmission-based precautions	3.2b Implementing strategies to improve outcomes and associated processes of systems for prevention and control of healthcare-associated infections, and antimicrobial stewardship	
	3.08 Members of the workforce apply standard precautions and transmission-based precautions whenever required, and consider:	3.6 Clinicians assess infection risks and use transmission-based precautions based on the risk of transmission of infectious agents, and consider:	

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	2021 Standard	2017 Standard	Key change/alignment between 2021 Standard and 2017 Standard
Item	Action	Former Action	
Standard and transmission-based precautions <i>continued</i>	a. Patients' risks, which are evaluated at referral, on admission or on presentation for care, and re-evaluated during care	3.6a Patients' risks, which are evaluated at referral, on admission or on presentation for care, and re-evaluated when clinically required during care	
	b. Whether a patient has a communicable disease, or an existing or a pre-existing colonisation or infection with organisms of local or national significance	3.6b Whether a patient has a communicable disease, or an existing or a pre-existing colonisation or infection with organisms of local or national significance	
	c. Accommodation needs and patient placement to prevent and manage infection risks	3.6c Accommodation needs to manage infection risks	
	d. The risks to the wellbeing of patients in isolation		New Action
	e. Environmental control measures to reduce risk, including but not limited to heating, ventilation and water systems; work flow design; facility design; surface finishes	3.6d The need to control the environment	
	f. Precautions required when a patient is moved within the facility or between external services	3.6e Precautions required when the patient is moved within the facility or to external services	
	g. The need for additional environmental cleaning or disinfection processes and resources	3.6f The need for additional environmental cleaning or disinfection	
	h. The type of procedure being performed		New Action

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	2021 Standard	2017 Standard	
Item	Action	Former Action	Key change/alignment between 2021 Standard and 2017 Standard
Standard and transmission-based precautions <i>continued</i>	i. Equipment required for routine care	3.6g Equipment requirements	
	3.09 The health service organisation has processes to:		
	a. Review data on and respond to infections in the community that may impact patients and the workforce	3.4b Monitors, assesses and uses surveillance data to reduce the risks associated with healthcare-associated infections and support appropriate antimicrobial prescribing	Applies Action 1.10b specifically to infection control. 1.10b Uses clinical and other data collections to support risk assessments.
	b. Communicate details of a patient's infectious status during an episode of care, and at transitions of care	3.7 The health service organisation has processes for communicating relevant details of a patient's infectious status whenever responsibility for care is transferred between clinicians or health service organisation	
	c. Provide relevant information to a patient, their family and carers about their infectious status, infection risks and precautions and their duration to minimise the spread of infection	3.3b Meet the patient's information needs	
Hand hygiene	3.10 The health service organisation has a hand hygiene program that is incorporated in its overarching infection prevention and control program as part of standard precautions and:	3.8 The health service organisation has a hand hygiene program that:	
	a. Is consistent with the current National Hand Hygiene Initiative, and jurisdictional requirements	3.8a Is consistent with the current National Hand Hygiene Initiative, and jurisdictional requirements	

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	2021 Standard	2017 Standard	Key change/alignment between 2021 Standard and 2017 Standard
Item	Action	Former Action	
Hand hygiene <i>continued</i>	b. Addresses noncompliance or inconsistency with benchmarks and the current National Hand Hygiene Initiative	3.8b Addresses noncompliance or inconsistency with the current National Hand Hygiene Initiative	
	c. Provides timely reports on the results of hand hygiene compliance audits, and action in response to audits, to the workforce, the governing body, consumers and other relevant groups		New Action Expands scope of Action 3.4c to specifically relate to hand hygiene.
	d. Uses the results of audits to improve hand hygiene compliance		New Action Expands scope of Action 3.2b to relate specifically to hand hygiene.
Aseptic technique	3.11 The health service organisation has processes for aseptic technique that:	3.9 The health service organisation has processes for aseptic technique that:	
	a. Identify the procedures where aseptic technique applies	3.9a Identify the procedures where aseptic technique applies	
	b. Assess the competence of the workforce in performing aseptic technique	3.9b Assess the competence of the workforce in performing aseptic technique	
	c. Provide training to address gaps in competency	3.9c Provide training to address gaps in competency	
	d. Monitor compliance with the organisation's policies on aseptic technique	3.9d Monitor compliance with the organisation's policies on aseptic technique	

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	2021 Standard	2017 Standard	Key change/alignment between 2021 Standard and 2017 Standard
Item	Action	Former Action	
Invasive medical devices	3.12 The health service organisation has processes for the appropriate use and management of invasive medical devices that are consistent with the current edition of the <u>Australian Guidelines for the Prevention and Control of Infection in Healthcare</u>	3.10 The health service organisation has processes for the appropriate use and management of invasive medical devices that are consistent with the current edition of the <u>Australian Guidelines for the Prevention and Control of Infection in Healthcare</u>	
Clean and safe environment	3.13 The health service organisation has processes to maintain a clean, safe and hygienic environment – in line with the current edition of the <u>Australian Guidelines for the Prevention and Control of Infection in Healthcare</u> , and jurisdictional requirements – to:	3.11 The health service organisation has processes to maintain a clean and hygienic environment – in line with the current edition of the <u>Australian Guidelines for the Prevention and Control of Infection in Healthcare</u> , and jurisdictional requirements – that:	
	a. Respond to environmental risks, including novel infections	3.11a Respond to environmental risks	Expands scope of Action 3.11a specifically to include novel infections
	b. Require cleaning and disinfection using products listed on the Australian Register of Therapeutic Goods consistent with manufacturers' instructions for use and recommended frequencies	3.11b Require cleaning and disinfection in line with recommended cleaning frequencies	Expands scope of Action 3.11b specifically to include instructions for use and recommended frequencies
	c. Provide access to training on cleaning processes for routine and outbreak situations, and novel infections		Expands scope of Action 3.1c specifically to environmental cleaning

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	2021 Standard	2017 Standard	Key change/alignment between 2021 Standard and 2017 Standard
Item	Action	Former Action	
Clean and safe environment <i>continued</i>	d. Audit the effectiveness of cleaning practice, and compliance with its environmental cleaning policy		New Action Expands scope of Action 3.2a specifically to environmental cleaning.
	e. Use the results of audits to improve environmental cleaning processes and compliance with policy		New Action Expands scope of Action 3.2b specifically to environmental cleaning.
	3.14 The health service organisation has processes to evaluate and respond to infection risks for:	3.12 The health service organisation has processes to evaluate and respond to infection risks for:	
	a. New and existing equipment, devices and products used in the organisation	3.12a New and existing equipment, devices and products used in the organisation	
	b. Clinical and non-clinical areas, and workplace amenity areas		New Action Expands scope of Action 3.12 to include non-clinical and work amenity areas.
	c. Maintenance, repair and upgrade of buildings, equipment, furnishings and fittings	3.12b Maintaining, repairing and upgrading buildings, equipment, furnishings and fittings	
	d. Handling, transporting and storing linen	3.12c Handling, transporting and storing linen	
	e. Novel infections, and risks identified as part of a public health response or pandemic planning		New Action Applies Action 1.10f specifically to novel infections. 1.10f Plans for, and manages, internal and external emergencies and disasters.

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	2021 Standard	2017 Standard	Key change/alignment between 2021 Standard and 2017 Standard
Item	Action	Former Action	
Workforce screening and immunisation (formerly 'Workforce immunisation' in 2017 Standard)	3.15 The health service organisation has a risk-based workforce vaccine-preventable diseases screening and immunisation policy and program that:	3.13 The health service organisation has a risk-based workforce immunisation program that:	
	a. Is consistent with the current edition of the <u><i>Australian Immunisation Handbook</i></u>	3.13a Is consistent with the current edition of the <u><i>Australian Immunisation Handbook</i></u>	
	b. Is consistent with jurisdictional requirements for vaccine-preventable diseases	3.13b Is consistent with jurisdictional requirements for vaccine-preventable diseases	
	c. Addresses specific risks to the workforce, consumers and patients	3.13c Addresses specific risks to the workforce and patients	
Infections in the workforce	3.16 The health service organisation has risk-based processes for preventing and managing infections in the workforce that:		New Item
	a. Are consistent with the relevant state or territory work health and safety regulation and the current edition of the <u><i>Australian Guidelines for the Prevention and Control of Infection in Healthcare</i></u>		New Action Applies Action 1.7c specifically to infection control. 1.7c Review compliance with legislation, regulation and jurisdictional requirements.
	b. Align with state and territory public health requirements for workforce screening and exclusion periods		New Action Applies Action 1.7c specifically to infection control. 1.7c Review compliance with legislation, regulation and jurisdictional requirements.

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	2021 Standard	2017 Standard	Key change/alignment between 2021 Standard and 2017 Standard
Item	Action	Former Action	
Infections in the workforce <i>continued</i>	c. Manage risks to the workforce, patients and consumers, including for novel infections		New Action Applies Action 1.10c specifically to infection risks. 1.10c Acts to reduce risks.
	d. Promote non-attendance at work and avoiding visiting or volunteering when infection is suspected or actual		New Action
	e. Monitor and manage the movement of staff between clinical areas, care settings, amenity areas, and health service organisations		New Action
	f. Manage and support members of the workforce who are required to isolate and quarantine following exposure to or acquisition of an infection		New Action
	g. Provide for outbreak monitoring, investigation and management		New Action
	h. Plan for, and manage, ongoing service provision during outbreaks and pandemics or events where there is increased risk of transmission of infection		New Action Applies Action 1.10f to specifically address service provision where there is increased risk of transmission of infection. 1.10f Plans for, and manages, internal and external emergencies and disasters.

Criterion 3: Reprocessing reusable equipment and devices (no name change from 2017 Standard)

	2021 Standard	2017 Standard	
Item	Action	Former Action	Key change/alignment between 2021 Standard and 2017 Standard
Reprocessing of reusable equipment and devices (formerly 'Reprocessing of reusable devices' in 2017 Standard)	3.17 Where reusable equipment and devices are used, the health service organisation has:	3.14 Where reusable equipment, instruments and devices are used, the health service organisation has:	
	a. Processes for reprocessing that are consistent with relevant national and international standards, in conjunction with manufacturers' guidelines	3.14a Processes for reprocessing that are consistent with relevant national and international standards, in conjunction with manufacturers' guidelines	
	b. A traceability process for critical and semi-critical equipment, instruments and devices that is capable of identifying <ul style="list-style-type: none"> – the patient – the procedure – the reusable equipment, instruments and devices that were used for the procedure 	3.14b A traceability process for critical and semi-critical equipment, instruments and devices that is capable of identifying <ul style="list-style-type: none"> – the patient – the procedure – the reusable equipment, instruments and devices that were used for the procedure 	
	c. Processes to plan and manage reprocessing requirements and additional controls for novel and emerging infections	3.14a Processes for reprocessing that are consistent with relevant national and international standards, in conjunction with manufacturers' guidelines	Applies Action 1.10f specifically to infection control. Expands Action 3.14a to include novel and emerging infections. 1.10f Plans for, and manages, internal and external emergencies and disasters.

Criterion 4: Antimicrobial stewardship (no name change from 2017 Standard)

	2021 Standard	2017 Standard	
Item	Action	Former Action	Key change/alignment between 2021 Standard and 2017 Standard
Antimicrobial stewardship	3.18 The health service organisation has an antimicrobial stewardship program that:	3.15 The health service organisation has an antimicrobial stewardship program that:	
	a. Includes an antimicrobial stewardship policy	3.15a Includes an antimicrobial stewardship policy	
	b. Provides access to, and promotes the use of, current evidence-based Australian therapeutic guidelines and resources on antimicrobial prescribing	3.15b Provides access to, and promotes the use of, current evidence-based Australian therapeutic guidelines and resources on antimicrobial prescribing	
	c. Has an antimicrobial formulary that is informed by current evidence-based Australian therapeutic guidelines or resources, and includes restriction rules and approval processes	3.15c Has an antimicrobial formulary that includes restriction rules and approval processes	Expands scope of Action 3.15c to specifically include current evidence-based Australian therapeutic guidelines or resources.
	d. Incorporates core elements, recommendations and principles from the current <i>Antimicrobial Stewardship Clinical Care Standard</i>	3.15d Incorporates core elements, recommendations and principles from the current <i>Antimicrobial Stewardship Clinical Care Standard</i>	
	e. Acts on the results of antimicrobial use and appropriateness audits to promote continuous quality improvement	3.2b Implementing strategies to improve outcomes and associated processes of systems for prevention and control of healthcare-associated infections, and antimicrobial stewardship	New Action Expands scope of Action 3.2b to specifically include antimicrobial use.

	2021 Standard	2017 Standard	Key change/alignment between 2021 Standard and 2017 Standard
Item	Action	Former Action	
Antimicrobial Stewardship <i>continued</i>	3.19 The antimicrobial stewardship program will:	3.16 The antimicrobial stewardship program will:	
	a. Review antimicrobial prescribing and use	3.16a Review antimicrobial prescribing and use	
	b. Use surveillance data on antimicrobial resistance and use to support appropriate prescribing	3.16b Use surveillance data on antimicrobial resistance and use to support appropriate prescribing	
	c. Evaluate performance of the program, identify areas for improvement, and take action to improve the appropriateness of antimicrobial prescribing and use	3.16c Evaluate performance of the program, identify areas for improvement, and take action to improve the appropriateness of antimicrobial prescribing and use	
	d. Report to clinicians and the governing body regarding <ul style="list-style-type: none"> – compliance with the antimicrobial stewardship policy and guidance – areas of action for antimicrobial resistance – areas of action to improve appropriateness of prescribing and compliance with current evidence-based Australian therapeutic guidelines or resources on antimicrobial prescribing – the health service organisation’s performance over time for use and appropriateness of use of antimicrobials 	3.2c Reporting on the outcomes of prevention and control of healthcare-associated infections, and the antimicrobial stewardship program 3.16d Report to clinicians and the governing body regarding <ul style="list-style-type: none"> – compliance with the antimicrobial stewardship policy – antimicrobial use and resistance – appropriateness of prescribing and compliance with current evidence-based Australian therapeutic guidelines or resources on antimicrobial prescribing 	Applies Action 3.2c specifically to antimicrobial stewardship