

These audits are based on the infection prevention Quality Improvement Tools from the Infection Prevention Society.

Required Annual Audits	
PRACTICE	
General IPC Compliance Score	85%
<i>This audit should be completed for all practices. Enter Y for YES, N for NO, N/A for NOT APPLICABLE into the outcome box. Enter detailed observations and future actions into the comments box. An action plan with completion dates should be completed for all areas of non-compliance (see action plan tab)</i>	
Environment Compliance Score	100%
Hand Hygiene & PPE Compliance Score	100%
Domestic Cleaning Cupboard Compliance Score	100%
Clinical Compliance Score	100%
Sharps Compliance Score	100%
Waste Compliance Score	100%
Vaccines Compliance Score	#DIV/0!
NPSA Cleaning Audit Tool	
<i>Enter 1 for satisfactory/clean YES, 0 for unsatisfactory/not clean, leave blank for NOT APPLICABLE. Codes, D=Domestic duties, C=Clinical team duties, O=Other e.g. Estates/Maintenance/External Contractor</i>	

Action and Improvement Plan

	Identified Issue / Area on non-compliance	Target date for review / completion	Required action(s) / Action taken	Lead Person	Completion date
1					
2					
3					
4					
5					

General Management			
	Guidance	Outcome	Comments
1	Is there a named lead person responsible for infection prevention and control (IPC)? <i>Ask Practice. Also see IPC annual statement</i>	Y	
2	Does the job description of the named lead person outline responsibilities in respect of infection prevention and control? <i>Review the job description. Check for items such as audit, action plan for risk, education, surveillance.</i>	Y	
3	Has the annual statement of infection prevention and control been completed and made available to the public? <i>CCG can provide a template for the annual IPC statement</i>	N	
4	Are there up to date local contact details available to obtain infection prevention and control advice? <i>Ask for the list of contact numbers. Check that they are the most up to date.</i>	N	
5	Is there evidence of a process for reporting and investigating Significant Events in relation to IPC? <i>See SE forms and minutes of meetings</i>	Y	
6	Is there evidence that audits have been undertaken and practice changed to improve infection prevention and control? <i>See audit schedule, audits and action plans. Evidence of re-audit.</i>	Y	
7	Is mandatory surveillance or SIRI data fed back to staff? <i>Check minutes of meetings to ensure surveillance is discussed and action resulting from root cause analysis is documented.</i>	Y	
8	Are there local risk assessments which document challenges to infection prevention and control? <i>Look for risk assessments processes e.g. risk register, incident book, Datix. Check Root Cause Analysis and Action plans developed to address identified risks</i>	Y	
Staff Health			
9	Do occupational health policies require staff to be offered immunisation in line with current national guidance? <i>See immunisation records. Ask about OH provision. Randomly select two members of staff and ask whether their immunisation status has been assessed.</i>	Y	
10	Is there a policy of staff exclusion from work with regards to infection prevention? <i>Check policy. Check staff are aware of the need to remain off work for 48 hours after resolution of illnesses such as diarrhoea/vomiting/Group A Streptococcal infection.</i>	Y	
11	Are staff aware of the procedure for managing an inoculation contamination injury? <i>ask members of staff to describe the procedure</i>	Y	
12	Is there a policy/poster available for the management of an inoculation contamination injury? <i>Visible evidence.</i>	N	
Staff Training			
13	Is infection prevention and control included in all staff induction programmes? <i>Check training includes: Hand hygiene, use of personal protective equipment, handling & disposal of sharps, management of contamination injuries, decontamination of equipment, management of blood/body fluid spillage, waste, and specimen handling.</i>	Y	
14	Have staff received mandatory training in infection prevention and control line with local policy and needs analysis? <i>ask to see records, ask staff about training, criteria as above</i>	Y	
Policies and Guidelines			
15	Are up to date infection prevention and control policies and guidelines available and accessible by staff? <i>Check staff can access guidelines and that all documents are dated within the last two years. Also check that the following are included: Hand hygiene, personal protective equipment, sharps handling and disposal, management of contamination injuries, decontamination of equipment, management of blood/body fluid spillage, waste management.</i>	Y	
16	Are there written cleaning standards and schedules? <i>Check cleaning schedules; ensure responsibility for cleaning all areas is clearly identified.</i>	Y	
17	Are there clearly outlined staff responsibilities for cleaning dedicated areas/equipment? <i>Identify who is responsible for cleaning specific pieces of equipment. Check cleaning schedule for details.</i>	Y	
18	Are cleaning processes and outcomes regularly audited? <i>Check audit records and action plans if non compliant.</i>	Y	
19	Does the establishment have suitable equipment to clean carpets?	N/A	
20	Is there a mechanism to ensure that urgent cleaning can be carried out as needed?	Y	
21	Does the practice have a legionella water safety risk assessment completed or reviewed within the last 3 years?	Y	
Compliance Score		85%	

Environment				
		Guidance	Outcome	Comments
Environment				
1	Is the environment visibly clean?	<i>Check walls, windows, ceilings, fans and light fittings are free from dust/debris/insects etc.</i>	Y	
2	Is the environment free from any visible damage?	<i>Check for flaking paint, damaged walls/ceilings/window frames and surfaces. Check for evidence of action taken to repair.</i>	Y	
3	Is furniture made of impermeable and washable materials?	<i>Check furniture.</i>	Y	
4	Is the furniture visibly clean?	<i>Check the furniture, especially the underside of tables.</i>	Y	
5	Is the furniture in a good state of repair?	<i>Check for rips and tears.</i>	Y	
6	Are all surfaces smooth, impervious (for easy cleaning) and with covered edges?	<i>Check all surfaces.</i>	Y	
7	Is the floor visibly clean?	<i>Check the edges and corners are clean and free of dust and grit.</i>	Y	
8	Is the flooring in a good state of repair?	<i>Check for rips and tears.</i>	Y	
9	Is the environment tidy and uncluttered?	<i>Check all areas are accessible for cleaning.</i>	Y	
10	Are items stored appropriately?	<i>e.g. Boxes with lids</i>	Y	
11	Are all posters able to be cleaned?	<i>Check posters are wipe-able i.e. laminated.</i>	Y	
Compliance Score			100%	

Hand Hygiene & PPE			
	Guidance	Outcome	Comments
Hand Wash Basins			
1	Are there designated hand wash sinks?	Y	
2	Are the hand wash basins plug free (for clinical sinks only)?	<i>Check the hand wash basin does not have a plug.</i>	Y
3	Are the hand wash basins overflow free (for clinical sinks only)?	<i>Check the hand wash basin does NOT have an overflow.</i>	Y
4	Are the wastes offset so the water does not flow directly into them (for clinical sinks only)?	<i>Check the water from the tap does NOT flow directly into the plug hole.</i>	Y
5	Are elbow/sensor taps available (for clinical sinks only)?	Y	
6	If no elbow or sensor taps, are staff aware of how to turn off the taps with a paper towel?	<i>Observe practice or ask a member of staff to describe procedure.</i>	N/A
7	Are mixer taps or thermostatically controlled water available?	<i>Test water temperature.</i>	Y
8	Are the hand wash basins accessible?	<i>Check for obstructions e.g. equipment.</i>	Y
9	Are the hand wash basins in a good state of repair?	<i>Check there are no cracks or chips.</i>	Y
10	Are the hand wash basins visible clean?	<i>Check plugholes and overflows for cleanliness & build up of lime scale.</i>	Y
11	Are hand wash basins free from extraneous items?	<i>e.g. mugs, medicine pots etc.</i>	Y
Soap			
12	Is the soap dispensed from a single cartridge?	<i>Check cartridge, there should be enough soap for the next two uses.</i>	Y
13	Are the liquid soaps wall mounted?	Y	
14	Are the soap dispensers visibly clean?	<i>Check the nozzle for build up of soap and debris.</i>	Y
Paper Towels			

15	Are paper towels available from an enclosed dispenser?	<i>Paper towels should be soft tissue with enough in the dispenser for the next two washes.</i>	Y	
16	Are the paper towel dispensers' visibly clean?	<i>Check underside of dispenser.</i>	Y	
Waste				
17	Are there hands free waste bins available for the disposal of domestic / Offensive / Infectious waste?		Y	
18	Are all the domestic waste bins, including foot peddles in working order?	<i>Check the foot pedal opens the lid.</i>	Y	
19	Are all the waste bins visible clean, including lids and pedals?	<i>Check bins are clean externally and internally.</i>	Y	
20	Is the waste bin in good condition?	<i>Check for rust i.e. underneath lid.</i>	Y	
Personal Protective Equipment				
21	Are single use plastic aprons available?	<i>Check they are readily available.</i>	Y	
22	Are single use plastic aprons stored appropriately away from the risk of infection?	<i>e.g. not stored in the dirty utility room.</i>	Y	Need to order wall mount for Cons 2
23	Is a single use apron worn when in contact or anticipated contact with body fluids or contaminated items?	<i>Observe practice or ask a member of staff to describe procedure.</i>	Y	
24	Are single use aprons worn as single use items and changed between every care episode?	<i>Observe practice or ask a member of staff to describe procedure.</i>	Y	
25	Is there a range of sterile and non-sterile powder free gloves available?	<i>Check gloves are readily available by obtaining a pair. Check gloves conform to CE mark (European Community standards).</i>	Y	
26	Are gloves stored appropriately?	<i>Check visually that gloves are stored away from the risk of contamination and heat sources.</i>	Y	
27	Are gloves worn when any invasive procedure is performed?	<i>Observe practice such as insertion of invasive device e.g. catheter or ask a member of staff to describe the procedure.</i>	Y	
28	Are gloves worn when in contact or anticipated contact with body fluids or contaminated items?	<i>Observe practice such as handling of contaminated dressings/cleaning equipment.</i>	Y	

29	Are gloves removed immediately after care activity and hand hygiene performed?	<i>Check gloves are not worn when handling records, answering phone etc. Moment 3 - after body fluid exposure.</i>	Y	
30	Is eye and face protection available and worn when there is an anticipated risk of splash injury?	<i>Observe practice or ask a member of staff to describe procedure.</i>	Y	
Compliance Score			100%	

Domestic Cleaning				
		Guidance	Outcome	Comments
Domestic Cleaning Cupboard				
1	Is there a dedicated room for storage of cleaning equipment?	<i>Check that equipment is stored in a dedicated store[separate from other items] e.g. linen, sterile supplies.</i>	Y	
2	Is the environment visibly clean?	<i>Check walls, windows, ceilings, fans and light fittings are free from dust/debris/insects etc.</i>	Y	
3	Is the environment free from any visible damage?	<i>Check for flaking paint, damaged walls/ceilings/window frames and surfaces. Check for evidence of action taken to repair.</i>	Y	
4	Is furniture / fixtures / fittings made of impermeable and washable materials?	<i>Check</i>	Y	
5	Are all furnishings and fittings visibly clean?	<i>Check</i>	Y	
6	Are all furnishings and fittings in a good state of repair?	<i>Check</i>	Y	
7	Is the floor visibly clean?	<i>Check the edges and corners are clean and free of dust and grit.</i>	Y	
8	Is the floor covering washable and impervious to moisture?	<i>Is the floor covering appropriate for the room.</i>	Y	
9	Is the flooring in a good state of repair?	<i>Check for rips and tears.</i>	Y	
10	Is there a disposal unit for the disposal of contaminated waste water?	<i>Check there is a disposal unit.</i>	Y	
11	Is the unit for the disposal of contaminated waste water visibly clean?	<i>Visually check.</i>	Y	
12	Are mops and buckets stored clean and dry?	<i>Check storage and cleanliness of mops and buckets.</i>	Y	
13	Are detachable mop bucket wringers removed and cleaned daily?	<i>Remove and check underneath.</i>	Y	
14	Are mop heads laundered or disposable?	<i>Check local policy for frequency and that mop heads are in a good state of repair.</i>	Y	

15	Is there a colour coding system in place for cleaning equipment?	<i>Check equipment is colour coded and posters are displayed and the available equipment is coloured as per poster.</i>	Y	
16	Is cleaning equipment and machinery left clean and dry after use?	<i>Visually check.</i>	Y	
17	Are cleaning cloths laundered or disposable?	<i>Observe practice or ask a member of staff to describe procedure.</i>	Y	
17	Compliance Score		100%	

Clinical			
	Guidance	Outcome	Comments
1	Is all clinical equipment clean and in a good state of repair? <i>Check BP cuffs / machines, blood glucose monitor, stethoscopes, sats probes, ophthalmoscopes etc.</i>	Y	
2	Is all equipment detailed on a cleaning schedule? <i>Ask to see cleaning schedule and check it is comprehensive. Is all equipment documented?</i>	Y	
3	Are schedules completed, signed and up to date with frequencies and responsibilities identified? <i>Check schedules are completed, signed and up to date.</i>	Y	
4	Are cleaning products available for routine cleaning of equipment? <i>Check against local policy/guidelines. Check availability, for example look in dirty utility rooms.</i>	Y	
5	Is all reusable equipment routinely cleaned between every patient use with general purpose cleaning materials? <i>Observe practice or ask a member of staff to describe procedure.</i>	Y	
6	If single use items are used are they disposed of following use? <i>Check items including the following where used: forceps, specula, scissors, and surgical instruments. Or ask a member of staff to describe procedure.</i>	Y	
7	Can staff describe the symbol used to indicate single use items? <i>Ask a member of staff to describe the symbol.</i>	Y	
8	Are sterile products stored above floor level? <i>Check store/clean utility/treatment etc.</i>	Y	
9	Are sterile packs sealed and undamaged? <i>Check a selection of packs.</i>	Y	
10	Are all sterile items in date? <i>Check a selection of items.</i>	Y	
11	Are items sent for service, inspection or repair, appropriately cleaned and a label of contamination status attached? <i>Ask to see labels used to mark items being sent for service, inspection or repair.</i>	Y	
12	Are all re-usable instruments returned to a sterile services provider for decontamination? <i>Check laryngoscope blades, handles, supra glottic airways.</i>	N/A	
13	Are used instruments (awaiting collection) stored in a rigid, lidded container? <i>Check all used instruments awaiting collection, are stored in a rigid, lidded container and that containers provided for this purpose are clean.</i>	N/A	

14	Are sterile instrument trays traceable?	<i>Check processes and documentation.</i>	N/A	
15	Are tourniquets single use or decontaminated between use?	<i>Visually check.</i>	Y	
16	Is the couch/chair visibly clean?	<i>Check frame as well as top surface.</i>	Y	
17	Is the couch/chair in a good state of repair?	<i>Check for damage.</i>	Y	
18	Are couch rolls stored off the floor on a couch roll holder?	<i>Check with member of staff that couch roll is changed in between patient use.</i>	Y	
19	Are the disposable couch roll/sheets changed in between patient use?	<i>Check with member of staff that couch roll is changed in between patient use.</i>	Y	
20	Are spillage kits or alternative available for use on body fluid spillages?	<i>Kit: Check expiry date and that it contains a brush/scrapper. Alternative: Check expiry of hypochlorite.</i>	Y	
21	Are staff aware of the procedures for managing body fluid spillages?	<i>Question staff member.</i>	Y	
Specimen Handling and Storage				
22	Is there a written procedure for specimen handling?	<i>Check it is available where specimens are handled.</i>	Y	
23	Have all staff handling / transporting specimens received appropriate training?	<i>Question staff member.</i>	Y	
24	Are patients provided with an appropriate specimen container if required to produce specimens at home?	<i>Ask staff member to describe procedure.</i>	Y	
25	Are specimen containers sealed in a designated plastic transit bag?	<i>Check 2 specimens awaiting collection.</i>	Y	
26	Are specimens awaiting transport kept in a secure designated area?	<i>Visually check.</i>	Y	
27	Is there a designated specimen fridge available when required?	<i>Visually check.</i>	Y	
28	Are specimens stored in a dedicated refrigerator which is separate to food, medicines and vaccines?	<i>Visually check.</i>	Y	

29	Are specimens transported in a container that complies with UN3373? <i>Check container.</i>	Y	
30	Are specimens transported by post, labelled according to UN3373 and packaged following IATA packing instruction 650? <i>Check SOP or ask member of staff to describe process.</i>	N/A	
31	Are specimen transport boxes visibly clean? <i>Check inside and outside.</i>	Y	
Compliance Score		100%	

Sharps Handling and Disposal			
		Guidance	Outcome Comments
1	Do the sharps containers conform to BS7320/UN3291 standards?	<i>Check all bins.</i>	Y
2	Are the sharps containers correctly assembled?	<i>Check that the lids are secure on the sharps bins in use.</i>	Y
3	Are all sharps containers labelled or tagged with date, locality and signature on assembly?	<i>Check the labels on all sharps bins in use.</i>	Y
4	Are all sharps bins free from protruding items?	<i>Check all sharps bins in use.</i>	Y
5	Are the contents of all sharps containers below the fill line?	<i>Check all sharps containers are not overfilled.</i>	Y
6	Are in use sharps containers safely positioned and out of the reach of vulnerable people?	<i>Check bins are not stored in an open access area and are positioned at a safe height.</i>	Y
7	Are sharps container lids temporarily closed in between use?	<i>Visually check.</i>	Y
8	Are sharps disposed of safely and at the point of use?	<i>Observe practice or ask a member of staff to describe procedure. Also check that clean trays/bins are available and are compatible with the bins in use.</i>	Y
9	Are used needles and syringes discarded as a complete single unit?	<i>Observe practice or ask a member of staff to describe procedure.</i>	Y
10	Are used sharps disposed of without re-sheathing?	<i>Observe practice or ask a member of staff to describe procedure.</i>	Y
11	Has training been provided where needle safe devices are in use?	<i>Ask a member of staff to explain how a device works where in use.</i>	Y
12	Are locked sharps containers stored in a secure facility away from public access until collected for disposal?	<i>Check sharps bins awaiting collection.</i>	Y
13	Are staff aware of the procedure for managing an inoculation contamination injury?	<i>Ask two members of staff to describe the procedure.</i>	Y
Compliance Score			100%

Waste Management				
		Guidance	Outcome	Comments
1	Are waste bags under 2/3 full and capable of being tied?	<i>Check bags are no more than two thirds full.</i>	Y	
2	Are separate waste streams available according with local guidance?	<i>Check that different coloured bags are available e.g. for offensive and infectious/healthcare risk waste.</i>	Y	
3	Are infectious/healthcare risk waste bags labelled before storage and disposal?	<i>Observe practice or ask a member of staff to describe procedure.</i>	N/A	
4	Are waste streams (domestic/offensive/infectious) segregated and stored in a secure designated storage area?	<i>Check waste is stored separately and the area is locked.</i>	N/A	
5	Is offensive/infectious waste removed by a registered contractor with a valid license?	<i>Ask to see written evidence.</i>	Y	
6	Are outside waste containers or storage/waste compound areas secure?	<i>Check the door is locked if compound if large bin only check lid is locked and the bin is securely fastened e.g. to the wall.</i>	Y	
7	Are outside waste containers or storage/waste compound areas kept clean and tidy and without evidence of vermin?	<i>Check there are no items on the floor and behind the bin/s.</i>	Y	
5	Compliance Score		100%	

Vaccines			
		Outcome	Comments
Vaccine Storage and Transportation			
1	Is there a policy / procedure for the storage and transport of vaccines available? <i>Check documentation.</i>	Y	
2	Is an audit completed at least annually? <i>Check the last audit and review action plan.</i>	Y	
3	Is there a named individual who is responsible for receiving and storing vaccines? <i>Check who the person is.</i>	Y	
4	Is there a named deputy who is responsible for receiving and storing vaccines? <i>Check who the person is.</i>	Y	
5	Have staff attended training which includes information on vaccine storage and the maintenance of the cold chain? <i>Check training records.</i>	Y	
Receipt of Vaccines			
6	Are all vaccines checked against the delivery note? <i>Check a recent delivery note.</i>	Y	
7	Are vaccines placed in a designated vaccine refrigerator on receipt? <i>Observe practice or ask member of staff to describe process.</i>	Y	
8	Are vaccine types, brands, quantities, batch numbers, expiry dates and date and time received recorded? <i>Check documentation.</i>	Y	
Storage of Vaccines			
9	Are the vaccines stored in a designated vaccine refrigerator which is fit for purpose and is not a domestic type? <i>Visually check.</i>	Y	
10	Does the refrigerator have an uninterrupted power supply? <i>Check the refrigerator is wired directly into the socket.</i>	Y	
11	Is the refrigerator situated away from a heat source and is air able to freely circulate around it? <i>Check the refrigerator is not next to a radiator.</i>	Y	
12	Are the contents evenly distributed within the refrigerator to allow air to circulate? <i>Check fridge contents.</i>	Y	
13	Is there no more than four weeks worth of vaccines? <i>Ask staff member average number of vaccines used each week.</i>	Y	
14	Is the refrigerator locked? <i>Visually check.</i>	Y	

15	Is the refrigerator located in an area with restricted public access?	<i>Check the area is staff supervised.</i>	Y	
16	Are vaccines stored in their original packaging?	<i>Check vaccines in fridge.</i>	Y	
17	Are vaccines in date?	<i>Check a selection of vaccine expiry dates.</i>	Y	
18	Are vaccine stocks rotated and used according to date?	<i>Check the dates at the front and back.</i>	Y	
19	Is the refrigerator serviced on a regular basis as per manufacturers guidance?	<i>Check service report.</i>	Y	
20	Is the refrigerator checked, defrosted and cleaned monthly?	<i>Check documentation and fridge for ice and cleanliness. If the vaccine fridge is self defrosting (check manufacturer's instructions) then the question can be answered as not applicable.</i>	N/A	
21	Are temperature checked performed and recorded each working day?	<i>Check documentation.</i>	Y	
22	Is a maximum and minimum temperature thermometer being used?	<i>Check thermometer.</i>	Y	
23	Are recorded temperatures within the acceptable range of 2-8 degrees	<i>Check temperature monitoring record.</i>	Y	
24	Has the refrigerator an alarm which activates when its temperature exceeds high or low limits?	<i>Check manufacturer's instructions.</i>	Y	
25	Is there a system in place for safe disposal of expired / surplus / damaged vaccines?	<i>Ask staff member to describe process.</i>	Y	
Transportation of Vaccines				
26	Are vaccines only removed from the base refrigerator immediately before leaving for an external session?	<i>Observe practice or ask a member of staff to describe procedure.</i>	Y	
27	Are vaccines returned immediately to the base refrigerator after an external session?	<i>Observe practice or ask a member of staff to describe procedure.</i>	Y	

28	<p>During transport, are vaccines wrapped in bubble wrap (or insulating material) and stored in a suitable cool box with a maximum/minimum thermometer?</p>	<p><i>The need for insulation material may vary check manufacturer's instructions for each cool box.</i></p>	<p>Y</p>	
27	<p>Compliance Score</p>		<p>100%</p>	

