

Functional Area: _____ Start Date: _____ Overall Auditors: _____

Module: Management of Infection Prevention and Control

Date: _____ Auditors: _____

Standard: Infection prevention and control is managed effectively, given high priority and seen as an integral part of the overall business of the unit

Question Set: Management of Infection Prevention and Control - General Management

Observation: 1

| | Question | Guidance | Yes | No | N/A | Comment |
|---|---|---|-----|----|-----|---------|
| 1 | Is there a named lead person responsible for infection prevention and control? (12, 77, 78, 82) | Ask who the lead person is. This may be a link nurse. | | | | |
| 2 | Does the job description of the named lead person outline responsibilities in respect of infection prevention and control? (77, 78, 82) | Review the job description. Check for items such as audit, action plan for risk, education, surveillance. | | | | |
| 3 | Are there up to date local contact telephone numbers available to obtain advice pertaining to infection prevention and control? (82) | Ask for the list of contact numbers. Check that they are the most up to date. | | | | |
| 4 | Is there evidence of a process for reporting untoward incidents in relation to infection prevention and control? (77, 78, 82) | Ask to see incident records. | | | | |
| 5 | Is there evidence that audits have been undertaken and practice changed to improve infection prevention and control? (14) | Ask to see most recent audit and action plan. This must include hand hygiene audits. | | | | |

Question Set Comments/Recommendations for Management of Infection Prevention and Control - General Management

Question Set: Management of Infection Prevention and Control - Staff Health

Observation: 1

| | Question | Guidance | Yes | No | N/A | Comment |
|---|---|---|-----|----|-----|---------|
| 1 | Do occupational health policies require staff to be offered immunisation in line with current national guidance? (39, 45, 48, 77, 78, 82) | Randomly select two members of staff and ask whether their immunisation status has been assessed. | | | | |
| 2 | Is there a policy on staff exclusion from work with regards to infection prevention? (47, 48, 77, 78, 82) | 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. | | | | |
| 3 | Are staff aware of the procedure for managing an inoculation contamination injury? (20, 81) | Ask two members of staff to describe the procedure. | | | | |

Question Set: Management of Infection Prevention and Control - Staff Health

Observation: 1

| | Question | Guidance | Yes | No | N/A | Comment |
|---|--|-------------------------------------|-----|----|-------------------------------------|---------|
| 4 | Is there a policy/poster available for the management of an inoculation contamination injury? (48) | Visible evidence of staff guidance. | | | <input checked="" type="checkbox"/> | |

Question Set Comments/Recommendations for Management of Infection Prevention and Control - Staff Health

Question Set: Management of Infection Prevention and Control - Staff Training

Observation: 1

| | Question | Guidance | Yes | No | N/A | Comment |
|---|--|---|-----|----|-------------------------------------|---------|
| 1 | Is infection prevention and control included in all staff induction programmes? (77, 78, 82) | 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. | | | <input checked="" type="checkbox"/> | |
| 2 | Have staff received mandatory training in infection prevention and control in line with local policy and training needs analysis? (77, 78, 82) | Check training records and the 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. | | | <input checked="" type="checkbox"/> | |
| 3 | Is there a process in place to ensure all non attendees at mandatory training are followed up? (77, 78, 82) | Ask to see process for follow up of non attendees to mandatory training program. | | | <input checked="" type="checkbox"/> | |

Question Set Comments/Recommendations for Management of Infection Prevention and Control - Staff Training

Question Set: Management of Infection Prevention and Control - Policies, Procedures and Guidelines

Observation: 1

| | Question | Guidance | Yes | No | N/A | Comment |
|---|---|---|-----|----|-------------------------------------|---------|
| 1 | Can staff locate the infection prevention manual (policy & procedures)? | Ask to see the Infection Prevention Control Guidelines (paper / intranet). | | | <input checked="" type="checkbox"/> | |
| 2 | Are up to date infection prevention and control policies and guidelines available and accessible by staff? (77, 78, 82) | 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. | | | <input checked="" type="checkbox"/> | |

Question Set: Management of Infection Prevention and Control - Policies, Procedures and Guidelines

Observation: 1

| | Question | Guidance | Yes | No | N/A | Comment |
|----|--|---|-----|----|-------------------------------------|---------|
| 3 | Are systems in place to ensure infection prevention input is sought prior to purchase of equipment? (77, 78, 82) | Check policy/local procedure for purchasing new equipment. Check for evidence that infection prevention team has been consulted prior to purchase of any new equipment. | | | <input checked="" type="checkbox"/> | |
| 4 | Is there protected time for infection prevention activity? | Ask for evidence of activities ie link worker pack, meetings minutes and audit reports. | | | | |
| 5 | Are there comprehensive written cleaning standards and procedures? (85, 86) | Check cleaning schedules; ensure responsibility for cleaning all areas is clearly identified. | | | <input checked="" type="checkbox"/> | |
| 6 | Are there clearly outlined staff responsibilities for cleaning dedicated areas/equipment? (77, 84, 85, 86, 95) | Identify who is responsible for cleaning specific pieces of equipment. Check cleaning schedule for details. | | | <input checked="" type="checkbox"/> | |
| 7 | Are cleaning processes and outcomes audited regularly? (85, 86) | Check audit records and action plans if non compliant. | | | <input checked="" type="checkbox"/> | |
| 8 | Are up to date cleaning schedules clearly displayed? (85, 86) | Ask to see the department cleaning programme and specifications. | | | <input checked="" type="checkbox"/> | |
| 9 | Is there a documented programme for cleaning soft furnishings? | Check for evidence. | | | | |
| 10 | Is infectious/healthcare risk waste removed by a registered contractor with a valid licence? (23) | Ask to see written evidence. | | | | |

Question Set Comments/Recommendations for Management of Infection Prevention and Control - Policies, Procedures and Guidelines

Care Setting Process Improvement Tool : Day Centre - Mental Health/Learning Disability

- 12 Department of Health (2006) Infection Control Guidance for Care Homes. London: Department of Health.
http://www.dh.gov.uk/prod_consum_dh/groups/dh_digitalassets/@dh/@en/documents/digitalasset/dh_4136384.pdf
- 14 Department of Health (2007) Essential Steps to safe, clean care. Reducing healthcare associated infections (HCAI) in primary care trusts, mental health trusts, learning disability organisations, independent healthcare facilities, care homes, hospices, GP practices and ambulance services. London: Department of Health.
www.clean-safe-care.nhs.uk/index.php?pid=8
- 20 Pratt RJ, Pellowe C, Wilson JA, Loveday HP, Harper PJ, Jones SRLJ, McDougall CM, Wilcox MH. (2007) Epic2: National Evidence Based Guidelines for preventing Healthcare-Associated Infection in NHS Hospitals in England. Journal of Hospital Infection. 65 (1) Supplement 1.
- 23 Department of Health (2006) Health Technical Memorandum 07-01: Safe management of healthcare waste.
www.dh.gov.uk/prod_consum_dh/groups/dh_digitalassets/documents/digitalasset/dh_073328.pdf
- 39 Department of Health (2006) "Immunisation against Infectious Disease" - "The Green Book" Department of Health TSO London
- 45 Department of Health (2007) Health clearance for tuberculosis, hepatitis B, hepatitis C and HIV: New Healthcare Workers. London: Department of Health; 2007
- 47 Department of Health (2004) Hepatitis C: Action plan for England. London: Department of Health; 2004
- 48 Department of Health (2000) Hepatitis B infection healthcare workers: guidance on implementation of Health Service Circular 2000/020. London: Department of Health
www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH_073132
- 77 Standards - March 2008 Healthcare Associated Infection (HAI): Quality Improvement Scotland, 2008.
- 78 Draft Infection Prevention and Control Standards: A Consultation Document: Health Information and Quality Authority, Republic of Ireland 2009
- 81 Department of Health (1998) Guidance for Clinical Health Care Workers: Protection Against Infection with Blood-borne Virus Recommendations of the Expert Advisory Group on AIDS and the Advisory Group on Hepatitis
- 82 Department of Health (2009) Code of Practice for the NHS on the prevention and control of healthcare associated infections and related guidance: Department of Health.
- 84 Control of the Environment Policy and Procedure. In: Infection Control Team HPS, editor: NHS National Services Scotland, 2009
www.documents.hps.scot.nhs.uk/hai/infection-control/sicp/environment/mic-p-environment-2009-02.pdf
- 85 The NHS Cleaning Manual: NPSA, 2009
- 86 The NHS Scotland National Cleaning Services Specification. In: Force HAIT, editor: NHS National Services Scotland
www.scotland.gov.uk/Publications/2004/05/19319/36643
- 95 Management of Blood and Other Body Fluid Spillages Policy and Procedure. In: Infection Control Team HPS, editor: NHS National Services Scotland, 2009
www.documents.hps.scot.nhs.uk/hai/infection-control/sicp/spillages/mic-p-spillages-2009-02.pdf

Module: General Environment

Date: Auditors:

Standard: To protect service users, visitors and staff from the risk of infection the environment is managed to ensure a clean environment and reduction of microbial contamination.

Question Set: General Environment - Reception/Waiting Area

Observation: 1

Room Function: Lobby/Reception/Entrance

Room No.: 1

Room:

| | Question | Guidance | Yes | No | N/A | Comment |
|----|--|---|-----|----|-----|---------|
| 1 | Is the environment visibly clean? (15, 20, 52, 53, 80, 84, 86) | Check walls, windows, ceilings, fans and light fittings are free from dust/debris/insects etc. | | | | |
| 2 | Is the environment free from any visible damage? (20, 53, 77, 80, 84, 85, 95) | Check for flaking paint, damaged walls/ceilings/window frames and surfaces. Check for evidence of action taken to repair. | | | | |
| 3 | Is furniture made of impermeable and washable materials? (53, 84, 85, 95) | Check furniture. | | | | |
| 4 | Are all furnishings and fittings visibly clean? (20, 31, 52, 84, 85, 86) | Check all areas are clean, behind and under surfaces. | | | | |
| 5 | Are all furnishings and fittings in a good state of repair? (84, 85, 95) | Where there is damage, check for evidence of action taken to ensure repair or replacement. | | | | |
| 6 | Are all surfaces smooth, impervious (for easy cleaning) and with coved edges? (20, 53, 80, 84) | Check all surfaces. | | | | |
| 7 | Is the floor visibly clean? (20, 52, 84, 85, 86) | Check the edges and corners are clean and free of dust and grit. | | | | |
| 8 | Is the flooring in a good state of repair? (52, 53) | Check for rips and tears. | | | | |
| 9 | Is the environment tidy and uncluttered? | Check all areas are accessible for cleaning. | | | | |
| 10 | Are all telephones visibly clean? (20, 84, 85, 86) | Check receiver. | | | | |
| 11 | Are computer systems visibly clean? (20, 84, 85, 86) | Check up to three. | | | | |

Question Set Comments/Recommendations for General Environment - Reception/Waiting Area

Question Set: General Environment - Management of Toys

Observation: 1

| | Question | Guidance | Yes | No | N/A | Comment |
|---|--|---|-----|----|-----|---------|
| 1 | Is there a procedure for the management of toys? (9, 10) | Ask a staff member to locate the procedure. | | | | |

Question Set: General Environment - Management of Toys

Observation: 1

| | Question | Guidance | Yes | No | N/A | Comment |
|---|---|--|-----|----|-----|---------|
| 2 | Is there a record of cleaning which includes frequencies of cleaning? | Check documentation. | | | | |
| 3 | Is there a designated storage area for toys? | Check area. | | | | |
| 4 | Is the storage area/toy box visibly clean? | Check area/box. | | | | |
| 5 | Are toys visibly clean? | Check toys. | | | | |
| 6 | Are toys made of a cleanable material? (77, 78, 82) | Check toys. | | | | |
| 7 | Are children`s books clean and undamaged? (9, 10, 82) | Check pages for torn/dirty pages and chewed edges. | | | | |

Question Set Comments/Recommendations for General Environment - Management of Toys

Question Set: General Environment - Toilets

Observation: 1

Room Function: Toilet

Room No.: 1

Room:

| | Question | Guidance | Yes | No | N/A | Comment |
|---|--|---|-----|----|-----|---------|
| 1 | Is the environment visibly clean? (15, 20, 52, 53, 80, 84, 86) | Check walls, windows, ceilings, fans and light fittings are free from dust/debris/insects etc. | | | | |
| 2 | Is the environment free from any visible damage? (20, 53, 77, 80, 84, 85, 95) | Check for flaking paint, damaged walls/ceilings/window frames and surfaces. Check for evidence of action taken to repair. | | | | |
| 3 | Are all surfaces smooth, impervious (for easy cleaning) and with covered edges? (20, 53, 80, 84) | Check all surfaces. | | | | |
| 4 | Is the floor visibly clean? (20, 52, 84, 85, 86) | Check the edges and corners are clean and free of dust and grit. | | | | |
| 5 | Is the floor covering washable and impervious to moisture? (20, 53, 80, 84) | Is the floor covering appropriate for the room. | | | | |
| 6 | Is the flooring in a good state of repair? (52, 53) | Check for rips and tears. | | | | |
| 7 | Is there a designated hand wash basin? (15, 53, 80, 82, 90) | Visually check. | | | | |
| 8 | Is the hand wash basin accessible? (53, 80, 90) | Check for obstructions e.g. equipment. | | | | |

Question Set: General Environment - Toilets

Observation: 1

Room Function: Toilet

Room No.: 1

Room: _____

| | Question | Guidance | Yes | No | N/A | Comment |
|----|--|--|-----|----|-----|---------|
| 9 | Is the hand wash basin in a good state of repair? (15) | Check there are no cracks or chips. | | | | |
| 10 | Is the hand wash basin visibly clean? (52, 84) | Check plugholes and overflows for cleanliness & build up of limescale. | | | | |
| 11 | Are hand wash basins free from extraneous items? (53) | e.g. mugs, medicine pots etc. | | | | |
| 12 | Is the soap dispensed from a single use cartridge? (53, 80, 90, 92, 94) | Check cartridge, there should be enough soap for the next two uses. | | | | |
| 13 | Is the liquid soap dispenser wall mounted? | Check that the soap dispenser is wall mounted. | | | | |
| 14 | Is the soap dispenser visibly clean? (90) | Check the nozzle for build up of soap and debris. | | | | |
| 15 | Are paper towels available from an enclosed dispenser? (53, 80, 90) | Paper towels should be soft tissue with enough in the dispenser for the next two washes. | | | | |
| 16 | Is the paper towel dispenser visibly clean? (90) | Check underside of dispenser. | | | | |
| 17 | Is there a promotional hand hygiene poster displayed? (90) | Check for poster. It should be laminated, clean and relevant to the room. | | | | |
| 18 | Is there a hands-free domestic waste bin available for the disposal of paper towels? (53, 56, 80) | Visually check. | | | | |
| 19 | Is the foot pedal of the domestic waste bin in good working order? (53, 80) | Check the foot pedal opens the lid. | | | | |
| 20 | Is the domestic waste bin visibly clean, including lid and pedal? (23, 85, 86) | Check bins are clean externally and internally. | | | | |
| 21 | Is the domestic waste bin in good condition? (23, 85, 86) | Check for rust i.e. underneath lid. | | | | |
| 22 | Are toilet(s) visibly clean? (20, 52, 84, 85, 86) | Check underneath the toilet seat. | | | | |
| 23 | Are the toilet(s) in a good state of repair? | Check for damage. | | | | |
| 24 | Is there a mechanism to ensure that toilet cleaning can be carried out as needed? (20, 82, 84, 85, 86) | Check for supply of detergent wipes or other cleaner. | | | | |
| 25 | Are toilet brushes and holders visibly clean? (20, 84, 85, 86) | Check two for evidence. | | | | |

Question Set: General Environment - Toilets

Observation: 1

Room Function: Toilet

Room No.: 1

Room:

| | Question | Guidance | Yes | No | N/A | Comment |
|----|---|---|-----|----|-----|---------|
| 26 | Are facilities available for the disposal of sanitary waste? | Check for sanitary bin. | | | | |
| 27 | Is there a hands free waste bin available for the disposal of offensive waste? (23, 53, 90) | Visually check. | | | | |
| 28 | Is the foot pedal of the offensive waste bin in good working order? (53, 80) | Check the foot pedal opens the lid. | | | | |
| 29 | Is the offensive waste bin visibly clean, including lid and pedal? (23, 85, 86) | Check bins are clean externally and internally. | | | | |
| 30 | Is the offensive waste bin in good condition? (23, 85, 86) | Check for rust i.e. underneath lid. | | | | |

Question Set Comments/Recommendations for General Environment - Toilets

Question Set: General Environment - Toilets

Observation: 1

Room Function: Toilet

Room No.: 2

Room:

| | Question | Guidance | Yes | No | N/A | Comment |
|---|--|---|-----|----|-----|---------|
| 1 | Is the environment visibly clean? (15, 20, 52, 53, 80, 84, 86) | Check walls, windows, ceilings, fans and light fittings are free from dust/debris/insects etc. | | | | |
| 2 | Is the environment free from any visible damage? (20, 53, 77, 80, 84, 85, 95) | Check for flaking paint, damaged walls/ceilings/window frames and surfaces. Check for evidence of action taken to repair. | | | | |
| 3 | Are all surfaces smooth, impervious (for easy cleaning) and with coved edges? (20, 53, 80, 84) | Check all surfaces. | | | | |
| 4 | Is the floor visibly clean? (20, 52, 84, 85, 86) | Check the edges and corners are clean and free of dust and grit. | | | | |
| 5 | Is the floor covering washable and impervious to moisture? (20, 53, 80, 84) | Is the floor covering appropriate for the room. | | | | |
| 6 | Is the flooring in a good state of repair? (52, 53) | Check for rips and tears. | | | | |
| 7 | Is there a designated hand wash basin? (15, 53, 80, 82, 90) | Visually check. | | | | |
| 8 | Is the hand wash basin accessible? (53, 80, 90) | Check for obstructions e.g. equipment. | | | | |

Question Set: General Environment - Toilets

Observation: 1

Room Function: Toilet

Room No.: 2

Room:

| | Question | Guidance | Yes | No | N/A | Comment |
|----|--|--|-----|----|-----|---------|
| 9 | Is the hand wash basin in a good state of repair? (15) | Check there are no cracks or chips. | | | | |
| 10 | Is the hand wash basin visibly clean? (52, 84) | Check plugholes and overflows for cleanliness & build up of limescale. | | | | |
| 11 | Are hand wash basins free from extraneous items? (53) | e.g. mugs, medicine pots etc. | | | | |
| 12 | Is the soap dispensed from a single use cartridge? (53, 80, 90, 92, 94) | Check cartridge, there should be enough soap for the next two uses. | | | | |
| 13 | Is the liquid soap dispenser wall mounted? | Check that the soap dispenser is wall mounted. | | | | |
| 14 | Is the soap dispenser visibly clean? (90) | Check the nozzle for build up of soap and debris. | | | | |
| 15 | Are paper towels available from an enclosed dispenser? (53, 80, 90) | Paper towels should be soft tissue with enough in the dispenser for the next two washes. | | | | |
| 16 | Is the paper towel dispenser visibly clean? (90) | Check underside of dispenser. | | | | |
| 17 | Is there a promotional hand hygiene poster displayed? (90) | Check for poster. It should be laminated, clean and relevant to the room. | | | | |
| 18 | Is there a hands-free domestic waste bin available for the disposal of paper towels? (53, 56, 80) | Visually check. | | | | |
| 19 | Is the foot pedal of the domestic waste bin in good working order? (53, 80) | Check the foot pedal opens the lid. | | | | |
| 20 | Is the domestic waste bin visibly clean, including lid and pedal? (23, 85, 86) | Check bins are clean externally and internally. | | | | |
| 21 | Is the domestic waste bin in good condition? (23, 85, 86) | Check for rust i.e. underneath lid. | | | | |
| 22 | Are toilet(s) visibly clean? (20, 52, 84, 85, 86) | Check underneath the toilet seat. | | | | |
| 23 | Are the toilet(s) in a good state of repair? | Check for damage. | | | | |
| 24 | Is there a mechanism to ensure that toilet cleaning can be carried out as needed? (20, 82, 84, 85, 86) | Check for supply of detergent wipes or other cleaner. | | | | |
| 25 | Are toilet brushes and holders visibly clean? (20, 84, 85, 86) | Check two for evidence. | | | | |

Question Set: General Environment - Toilets

Observation: 1

Room Function: Toilet

Room No.: 2

Room:

| | Question | Guidance | Yes | No | N/A | Comment |
|----|---|---|-----|----|-----|---------|
| 26 | Are facilities available for the disposal of sanitary waste? | Check for sanitary bin. | | | | |
| 27 | Is there a hands free waste bin available for the disposal of offensive waste? (23, 53, 90) | Visually check. | | | | |
| 28 | Is the foot pedal of the offensive waste bin in good working order? (53, 80) | Check the foot pedal opens the lid. | | | | |
| 29 | Is the offensive waste bin visibly clean, including lid and pedal? (23, 85, 86) | Check bins are clean externally and internally. | | | | |
| 30 | Is the offensive waste bin in good condition? (23, 85, 86) | Check for rust i.e. underneath lid. | | | | |

Question Set Comments/Recommendations for General Environment - Toilets

Question Set: General Environment - Toilets

Observation: 1

Room Function: Toilet

Room No.: 3

Room:

| | Question | Guidance | Yes | No | N/A | Comment |
|---|--|---|-----|----|-----|---------|
| 1 | Is the environment visibly clean? (15, 20, 52, 53, 80, 84, 86) | Check walls, windows, ceilings, fans and light fittings are free from dust/debris/insects etc. | | | | |
| 2 | Is the environment free from any visible damage? (20, 53, 77, 80, 84, 85, 95) | Check for flaking paint, damaged walls/ceilings/window frames and surfaces. Check for evidence of action taken to repair. | | | | |
| 3 | Are all surfaces smooth, impervious (for easy cleaning) and with coved edges? (20, 53, 80, 84) | Check all surfaces. | | | | |
| 4 | Is the floor visibly clean? (20, 52, 84, 85, 86) | Check the edges and corners are clean and free of dust and grit. | | | | |
| 5 | Is the floor covering washable and impervious to moisture? (20, 53, 80, 84) | Is the floor covering appropriate for the room. | | | | |
| 6 | Is the flooring in a good state of repair? (52, 53) | Check for rips and tears. | | | | |
| 7 | Is there a designated hand wash basin? (15, 53, 80, 82, 90) | Visually check. | | | | |
| 8 | Is the hand wash basin accessible? (53, 80, 90) | Check for obstructions e.g. equipment. | | | | |

Question Set: General Environment - Toilets

Observation: 1

Room Function: Toilet

Room No.: 3

Room:

| | Question | Guidance | Yes | No | N/A | Comment |
|----|--|--|-----|----|-----|---------|
| 9 | Is the hand wash basin in a good state of repair? (15) | Check there are no cracks or chips. | | | | |
| 10 | Is the hand wash basin visibly clean? (52, 84) | Check plugholes and overflows for cleanliness & build up of limescale. | | | | |
| 11 | Are hand wash basins free from extraneous items? (53) | e.g. mugs, medicine pots etc. | | | | |
| 12 | Is the soap dispensed from a single use cartridge? (53, 80, 90, 92, 94) | Check cartridge, there should be enough soap for the next two uses. | | | | |
| 13 | Is the liquid soap dispenser wall mounted? | Check that the soap dispenser is wall mounted. | | | | |
| 14 | Is the soap dispenser visibly clean? (90) | Check the nozzle for build up of soap and debris. | | | | |
| 15 | Are paper towels available from an enclosed dispenser? (53, 80, 90) | Paper towels should be soft tissue with enough in the dispenser for the next two washes. | | | | |
| 16 | Is the paper towel dispenser visibly clean? (90) | Check underside of dispenser. | | | | |
| 17 | Is there a promotional hand hygiene poster displayed? (90) | Check for poster. It should be laminated, clean and relevant to the room. | | | | |
| 18 | Is there a hands-free domestic waste bin available for the disposal of paper towels? (53, 56, 80) | Visually check. | | | | |
| 19 | Is the foot pedal of the domestic waste bin in good working order? (53, 80) | Check the foot pedal opens the lid. | | | | |
| 20 | Is the domestic waste bin visibly clean, including lid and pedal? (23, 85, 86) | Check bins are clean externally and internally. | | | | |
| 21 | Is the domestic waste bin in good condition? (23, 85, 86) | Check for rust i.e. underneath lid. | | | | |
| 22 | Are toilet(s) visibly clean? (20, 52, 84, 85, 86) | Check underneath the toilet seat. | | | | |
| 23 | Are the toilet(s) in a good state of repair? | Check for damage. | | | | |
| 24 | Is there a mechanism to ensure that toilet cleaning can be carried out as needed? (20, 82, 84, 85, 86) | Check for supply of detergent wipes or other cleaner. | | | | |
| 25 | Are toilet brushes and holders visibly clean? (20, 84, 85, 86) | Check two for evidence. | | | | |

Question Set: General Environment - Toilets

Observation: 1

Room Function: Toilet

Room No.: 3

Room:

| | Question | Guidance | Yes | No | N/A | Comment |
|----|---|---|-----|----|-----|---------|
| 26 | Are facilities available for the disposal of sanitary waste? | Check for sanitary bin. | | | | |
| 27 | Is there a hands free waste bin available for the disposal of offensive waste? (23, 53, 90) | Visually check. | | | | |
| 28 | Is the foot pedal of the offensive waste bin in good working order? (53, 80) | Check the foot pedal opens the lid. | | | | |
| 29 | Is the offensive waste bin visibly clean, including lid and pedal? (23, 85, 86) | Check bins are clean externally and internally. | | | | |
| 30 | Is the offensive waste bin in good condition? (23, 85, 86) | Check for rust i.e. underneath lid. | | | | |

Question Set Comments/Recommendations for General Environment - Toilets

Question Set: General Environment - Dining Room/Area

Observation: 1

Room Function: Dining Room/Cafe

Room No.: 1

Room:

| | Question | Guidance | Yes | No | N/A | Comment |
|---|---|---|-----|----|-----|---------|
| 1 | Is the environment visibly clean? (15, 20, 52, 53, 80, 84, 86) | Check walls, windows, ceilings, fans and light fittings are free from dust/debris/insects etc. | | | | |
| 2 | Is the environment free from any visible damage? (20, 53, 77, 80, 84, 85, 95) | Check for flaking paint, damaged walls/ceilings/window frames and surfaces. Check for evidence of action taken to repair. | | | | |
| 3 | Is furniture made of impermeable and washable materials? (53, 84, 85, 95) | Check furniture. | | | | |
| 4 | Are all furnishings and fittings visibly clean? (20, 31, 52, 84, 85, 86) | Check all areas are clean, behind and under surfaces. | | | | |
| 5 | Are all furnishings and fittings in a good state of repair? (84, 85, 95) | Where there is damage, check for evidence of action taken to ensure repair or replacement. | | | | |
| 6 | Is the floor visibly clean? (20, 52, 84, 85, 86) | Check the edges and corners are clean and free of dust and grit. | | | | |
| 7 | Is the floor covering washable and impervious to moisture? (20, 53, 80, 84) | Is the floor covering appropriate for the room. | | | | |
| 8 | Is the flooring in a good state of repair? (52, 53) | Check for rips and tears. | | | | |

Care Setting Process Improvement Tool : Day Centre - Mental Health/Learning Disability

Question Set: General Environment - Dining Room/Area

Observation: 1

Room Function: Dining Room/Cafe

Room No.: 1

Room:

| | Question | Guidance | Yes | No | N/A | Comment |
|----|---|---|-----|----|-----|---------|
| 9 | Is the environment tidy and uncluttered? | Check all areas are accessible for cleaning. | | | | |
| 10 | Are all curtains visibly clean and on a cleaning/replacement schedule? (52, 84, 85, 86) | Check local protocol for cleaning and replacement. Change every 6 months. | | | | |
| 11 | Is there sufficient storage space? | Check there are no items stored on the floor and tops of cupboards. | | | | |
| 12 | Are table mats visibly clean? | Check a selection. | | | | |
| 13 | Are condiments visibly clean? | Check condiments are free from a build of debris – i.e. brown sauce. | | | | |
| 14 | Are condiments kept refrigerated between uses? | Check condiments left out. | | | | |

Question Set Comments/Recommendations for General Environment - Dining Room/Area

Question Set: General Environment - Activity Room

Observation: 1

Room Function: Activity/Art Room

Room No.: 1

Room:

| | Question | Guidance | Yes | No | N/A | Comment |
|---|--|---|-----|----|-----|---------|
| 1 | Is the environment visibly clean? (15, 20, 52, 53, 80, 84, 86) | Check walls, windows, ceilings, fans and light fittings are free from dust/debris/insects etc. | | | | |
| 2 | Is the environment free from any visible damage? (20, 53, 77, 80, 84, 85, 95) | Check for flaking paint, damaged walls/ceilings/window frames and surfaces. Check for evidence of action taken to repair. | | | | |
| 3 | Is furniture made of impermeable and washable materials? (53, 84, 85, 95) | Check furniture. | | | | |
| 4 | Are all furnishings and fittings visibly clean? (20, 31, 52, 84, 85, 86) | Check all areas are clean, behind and under surfaces. | | | | |
| 5 | Are all furnishings and fittings in a good state of repair? (84, 85, 95) | Where there is damage, check for evidence of action taken to ensure repair or replacement. | | | | |
| 6 | Are all surfaces smooth, impervious (for easy cleaning) and with coved edges? (20, 53, 80, 84) | Check all surfaces. | | | | |
| 7 | Is the floor visibly clean? (20, 52, 84, 85, 86) | Check the edges and corners are clean and free of dust and grit. | | | | |

Question Set: General Environment - Activity Room

Observation: 1

Room Function: Activity/Art Room

Room No.: 1

Room:

| | Question | Guidance | Yes | No | N/A | Comment |
|----|---|--|-----|----|-----|---------|
| 8 | Is the floor covering washable and impervious to moisture? (20, 53, 80, 84) | Is the floor covering appropriate for the room. | | | | |
| 9 | Is the flooring in a good state of repair? (52, 53) | Check for rips and tears. | | | | |
| 10 | Is there a designated hand wash basin? (15, 53, 80, 82, 90) | Visually check. | | | | |
| 11 | Is the hand wash basin accessible? (53, 80, 90) | Check for obstructions e.g. equipment. | | | | |
| 12 | Is the hand wash basin in a good state of repair? (15) | Check there are no cracks or chips. | | | | |
| 13 | Is the hand wash basin visibly clean? (52, 84) | Check plugholes and overflows for cleanliness & build up of limescale. | | | | |
| 14 | Are hand wash basins free from extraneous items? (53) | e.g. mugs, medicine pots etc. | | | | |
| 15 | Is the soap dispensed from a single use cartridge? (53, 80, 90, 92, 94) | Check cartridge, there should be enough soap for the next two uses. | | | | |
| 16 | Is the liquid soap dispenser wall mounted? | Check that the soap dispenser is wall mounted. | | | | |
| 17 | Is the soap dispenser visibly clean? (90) | Check the nozzle for build up of soap and debris. | | | | |
| 18 | Are paper towels available from an enclosed dispenser? (53, 80, 90) | Paper towels should be soft tissue with enough in the dispenser for the next two washes. | | | | |
| 19 | Is the paper towel dispenser visibly clean? (90) | Check underside of dispenser. | | | | |
| 20 | Is there a promotional hand hygiene poster displayed? (90) | Check for poster. It should be laminated, clean and relevant to the room. | | | | |
| 21 | Is there a hands-free domestic waste bin available for the disposal of paper towels? (53, 56, 80) | Visually check. | | | | |
| 22 | Is the foot pedal of the domestic waste bin in good working order? (53, 80) | Check the foot pedal opens the lid. | | | | |
| 23 | Is the domestic waste bin visibly clean, including lid and pedal? (23, 85, 86) | Check bins are clean externally and internally. | | | | |
| 24 | Is the domestic waste bin in good condition? (23, 85, 86) | Check for rust i.e. underneath lid. | | | | |
| 25 | Are all products stored above floor level? (84) | Visually check. | | | | |

Question Set: General Environment - Activity Room

Observation: 1

Room Function: Activity/Art Room

Room No.: 1

Room:

| | Question | Guidance | Yes | No | N/A | Comment |
|----|--|---|-----|----|-----|---------|
| 26 | Is there sufficient storage space? | Check there are no items stored on the floor and tops of cupboards. | | | | |
| 27 | Are all areas free from clutter and inappropriate items? | Check the area can easily be cleaned. | | | | |
| 28 | Are items stored appropriately? | e.g. Boxes with lids. | | | | |

Question Set Comments/Recommendations for General Environment - Activity Room

Question Set: General Environment - Shower

Observation: 1

Room Function: Bath/Shower Room

Room No.: 1

Room:

| | Question | Guidance | Yes | No | N/A | Comment |
|----|--|---|-----|----|-----|---------|
| 1 | Is the environment visibly clean? (15, 20, 52, 53, 80, 84, 86) | Check walls, windows, ceilings, fans and light fittings are free from dust/debris/insects etc. | | | | |
| 2 | Is the environment free from any visible damage? (20, 53, 77, 80, 84, 85, 95) | Check for flaking paint, damaged walls/ceilings/window frames and surfaces. Check for evidence of action taken to repair. | | | | |
| 3 | Are all surfaces smooth, impervious (for easy cleaning) and with coved edges? (20, 53, 80, 84) | Check all surfaces. | | | | |
| 4 | Is the floor visibly clean? (20, 52, 84, 85, 86) | Check the edges and corners are clean and free of dust and grit. | | | | |
| 5 | Is the floor covering washable and impervious to moisture? (20, 53, 80, 84) | Is the floor covering appropriate for the room. | | | | |
| 6 | Is the flooring in a good state of repair? (52, 53) | Check for rips and tears. | | | | |
| 7 | Is there a designated hand wash basin? (15, 53, 80, 82, 90) | Visually check. | | | | |
| 8 | Is the hand wash basin accessible? (53, 80, 90) | Check for obstructions e.g. equipment. | | | | |
| 9 | Is the hand wash basin in a good state of repair? (15) | Check there are no cracks or chips. | | | | |
| 10 | Is the hand wash basin visibly clean? (52, 84) | Check plugholes and overflows for cleanliness & build up of limescale. | | | | |

Question Set: General Environment - Shower

Observation: 1

Room Function: Bath/Shower Room

Room No.: 1

Room: _____

| | Question | Guidance | Yes | No | N/A | Comment |
|----|---|--|-----|----|-----|---------|
| 11 | Are hand wash basins free from extraneous items? (53) | e.g. mugs, medicine pots etc. | | | | |
| 12 | Is the soap dispensed from a single use cartridge? (53, 80, 90, 92, 94) | Check cartridge, there should be enough soap for the next two uses. | | | | |
| 13 | Is the liquid soap dispenser wall mounted? | Check that the soap dispenser is wall mounted. | | | | |
| 14 | Is the soap dispenser visibly clean? (90) | Check the nozzle for build up of soap and debris. | | | | |
| 15 | Are paper towels available from an enclosed dispenser? (53, 80, 90) | Paper towels should be soft tissue with enough in the dispenser for the next two washes. | | | | |
| 16 | Is the paper towel dispenser visibly clean? (90) | Check underside of dispenser. | | | | |
| 17 | Is there a promotional hand hygiene poster displayed? (90) | Check for poster. It should be laminated, clean and relevant to the room. | | | | |
| 18 | Is there a hands-free domestic waste bin available for the disposal of paper towels? (53, 56, 80) | Visually check. | | | | |
| 19 | Is the foot pedal of the domestic waste bin in good working order? (53, 80) | Check the foot pedal opens the lid. | | | | |
| 20 | Is the domestic waste bin visibly clean, including lid and pedal? (23, 85, 86) | Check bins are clean externally and internally. | | | | |
| 21 | Is the domestic waste bin in good condition? (23, 85, 86) | Check for rust i.e. underneath lid. | | | | |
| 22 | Are all toiletries single use? | Check for evidence of communal toiletries in bathroom. | | | | |
| 23 | Are baths/showers visibly clean? (20, 84, 85, 86) | Visually check. | | | | |
| 24 | Are shower curtains visibly clean? (20, 84, 85, 86) | Check for mould. | | | | |
| 25 | Are anti-slip bath mats visibly clean and free from mould? | Check round suction cups for evidence of dirt or mould. | | | | |
| 26 | Are all bathroom furniture and fittings visibly clean? (20, 52, 84, 85, 86) | Check visible cleanliness. | | | | |
| 27 | Is there a hands free waste bin available for the disposal of offensive waste? (23, 53, 90) | Visually check. | | | | |

Question Set: General Environment - Shower

Observation: 1

Room Function: Bath/Shower Room

Room No.: 1

Room:

| | Question | Guidance | Yes | No | N/A | Comment |
|----|---|---|-----|----|-----|---------|
| 28 | Is the foot pedal of the offensive waste bin in good working order? (53, 80) | Check the foot pedal opens the lid. | | | | |
| 29 | Is the offensive waste bin visibly clean, including lid and pedal? (23, 85, 86) | Check bins are clean externally and internally. | | | | |
| 30 | Is the offensive waste bin in good condition? (23, 85, 86) | Check for rust i.e. underneath lid. | | | | |

Question Set Comments/Recommendations for General Environment - Shower

Question Set: General Environment - Bathroom

Observation: 1

Room Function: Bath/Shower Room

Room No.: 1

Room:

| | Question | Guidance | Yes | No | N/A | Comment |
|----|--|---|-----|----|-----|---------|
| 1 | Is the environment visibly clean? (15, 20, 52, 53, 80, 84, 86) | Check walls, windows, ceilings, fans and light fittings are free from dust/debris/insects etc. | | | | |
| 2 | Is the environment free from any visible damage? (20, 53, 77, 80, 84, 85, 95) | Check for flaking paint, damaged walls/ceilings/window frames and surfaces. Check for evidence of action taken to repair. | | | | |
| 3 | Are all surfaces smooth, impervious (for easy cleaning) and with coved edges? (20, 53, 80, 84) | Check all surfaces. | | | | |
| 4 | Is the floor visibly clean? (20, 52, 84, 85, 86) | Check the edges and corners are clean and free of dust and grit. | | | | |
| 5 | Is the floor covering washable and impervious to moisture? (20, 53, 80, 84) | Is the floor covering appropriate for the room. | | | | |
| 6 | Is the flooring in a good state of repair? (52, 53) | Check for rips and tears. | | | | |
| 7 | Is there a designated hand wash basin? (15, 53, 80, 82, 90) | Visually check. | | | | |
| 8 | Is the hand wash basin accessible? (53, 80, 90) | Check for obstructions e.g. equipment. | | | | |
| 9 | Is the hand wash basin in a good state of repair? (15) | Check there are no cracks or chips. | | | | |
| 10 | Is the hand wash basin visibly clean? (52, 84) | Check plugholes and overflows for cleanliness & build up of limescale. | | | | |

Question Set: General Environment - Bathroom

Observation: 1

Room Function: Bath/Shower Room

Room No.: 1

Room:

| | Question | Guidance | Yes | No | N/A | Comment |
|----|---|--|-----|----|-----|---------|
| 11 | Are hand wash basins free from extraneous items? (53) | e.g. mugs, medicine pots etc. | | | | |
| 12 | Is the soap dispensed from a single use cartridge? (53, 80, 90, 92, 94) | Check cartridge, there should be enough soap for the next two uses. | | | | |
| 13 | Is the liquid soap dispenser wall mounted? | Check that the soap dispenser is wall mounted. | | | | |
| 14 | Is the soap dispenser visibly clean? (90) | Check the nozzle for build up of soap and debris. | | | | |
| 15 | Are paper towels available from an enclosed dispenser? (53, 80, 90) | Paper towels should be soft tissue with enough in the dispenser for the next two washes. | | | | |
| 16 | Is the paper towel dispenser visibly clean? (90) | Check underside of dispenser. | | | | |
| 17 | Is there a promotional hand hygiene poster displayed? (90) | Check for poster. It should be laminated, clean and relevant to the room. | | | | |
| 18 | Is there a hands-free domestic waste bin available for the disposal of paper towels? (53, 56, 80) | Visually check. | | | | |
| 19 | Is the foot pedal of the domestic waste bin in good working order? (53, 80) | Check the foot pedal opens the lid. | | | | |
| 20 | Is the domestic waste bin visibly clean, including lid and pedal? (23, 85, 86) | Check bins are clean externally and internally. | | | | |
| 21 | Is the domestic waste bin in good condition? (23, 85, 86) | Check for rust i.e. underneath lid. | | | | |
| 22 | Are all toiletries single use? | Check for evidence of communal toiletries in bathroom. | | | | |
| 23 | Are baths/showers visibly clean? (20, 84, 85, 86) | Visually check. | | | | |
| 24 | Are anti-slip bath mats visibly clean and free from mould? | Check round suction cups for evidence of dirt or mould. | | | | |
| 25 | Are hoists visibly clean and in a good state of repair? (52, 77, 78, 82, 85) | Visually check. | | | | |
| 26 | Are appropriate cleaning materials available for staff to clean the bath/shower between uses? | Check that there is information provided on where cleaning materials are stored. | | | | |
| 27 | Are bathrooms free from inappropriate items? | Check for equipment storage. | | | | |

Question Set: General Environment - Bathroom

Observation: 1

Room Function: Bath/Shower Room

Room No.: 1

Room:

| | Question | Guidance | Yes | No | N/A | Comment |
|----|--|---|-----|----|-----|---------|
| 28 | Is there evidence that baths, showers and sinks not in use have planned provision for running water on a weekly basis? | Check documentation. | | | | |
| 29 | Is there a hands free waste bin available for the disposal of offensive waste? (23, 53, 90) | Visually check. | | | | |
| 30 | Is the foot pedal of the offensive waste bin in good working order? (53, 80) | Check the foot pedal opens the lid. | | | | |
| 31 | Is the offensive waste bin visibly clean, including lid and pedal? (23, 85, 86) | Check bins are clean externally and internally. | | | | |
| 32 | Is the offensive waste bin in good condition? (23, 85, 86) | Check for rust i.e. underneath lid. | | | | |

Question Set Comments/Recommendations for General Environment - Bathroom

Question Set: General Environment - Staff Toilet

Observation: 1

Room Function: Toilet

Room No.: 1

Room:

| | Question | Guidance | Yes | No | N/A | Comment |
|---|--|---|-----|----|-----|---------|
| 1 | Is the environment visibly clean? (15, 20, 52, 53, 80, 84, 86) | Check walls, windows, ceilings, fans and light fittings are free from dust/debris/insects etc. | | | | |
| 2 | Is the environment free from any visible damage? (20, 53, 77, 80, 84, 85, 95) | Check for flaking paint, damaged walls/ceilings/window frames and surfaces. Check for evidence of action taken to repair. | | | | |
| 3 | Are all surfaces smooth, impervious (for easy cleaning) and with coved edges? (20, 53, 80, 84) | Check all surfaces. | | | | |
| 4 | Is the floor visibly clean? (20, 52, 84, 85, 86) | Check the edges and corners are clean and free of dust and grit. | | | | |
| 5 | Is the floor covering washable and impervious to moisture? (20, 53, 80, 84) | Is the floor covering appropriate for the room. | | | | |
| 6 | Is the flooring in a good state of repair? (52, 53) | Check for rips and tears. | | | | |
| 7 | Is there a designated hand wash basin? (15, 53, 80, 82, 90) | Visually check. | | | | |

Question Set: General Environment - Staff Toilet

Observation: 1

Room Function: Toilet

Room No.: 1

Room: _____

| | Question | Guidance | Yes | No | N/A | Comment |
|----|---|--|-----|----|-----|---------|
| 8 | Is the hand wash basin accessible? (53, 80, 90) | Check for obstructions e.g. equipment. | | | | |
| 9 | Is the hand wash basin in a good state of repair? (15) | Check there are no cracks or chips. | | | | |
| 10 | Is the hand wash basin visibly clean? (52, 84) | Check plugholes and overflows for cleanliness & build up of limescale. | | | | |
| 11 | Are hand wash basins free from extraneous items? (53) | e.g. mugs, medicine pots etc. | | | | |
| 12 | Is the soap dispensed from a single use cartridge? (53, 80, 90, 92, 94) | Check cartridge, there should be enough soap for the next two uses. | | | | |
| 13 | Is the liquid soap dispenser wall mounted? | Check that the soap dispenser is wall mounted. | | | | |
| 14 | Is the soap dispenser visibly clean? (90) | Check the nozzle for build up of soap and debris. | | | | |
| 15 | Are paper towels available from an enclosed dispenser? (53, 80, 90) | Paper towels should be soft tissue with enough in the dispenser for the next two washes. | | | | |
| 16 | Is the paper towel dispenser visibly clean? (90) | Check underside of dispenser. | | | | |
| 17 | Is there a promotional hand hygiene poster displayed? (90) | Check for poster. It should be laminated, clean and relevant to the room. | | | | |
| 18 | Is there a hands-free domestic waste bin available for the disposal of paper towels? (53, 56, 80) | Visually check. | | | | |
| 19 | Is the foot pedal of the domestic waste bin in good working order? (53, 80) | Check the foot pedal opens the lid. | | | | |
| 20 | Is the domestic waste bin visibly clean, including lid and pedal? (23, 85, 86) | Check bins are clean externally and internally. | | | | |
| 21 | Is the domestic waste bin in good condition? (23, 85, 86) | Check for rust i.e. underneath lid. | | | | |
| 22 | Are toilet(s) visibly clean? (20, 52, 84, 85, 86) | Check underneath the toilet seat. | | | | |
| 23 | Are the toilet(s) in a good state of repair? | Check for damage. | | | | |
| 24 | Are toilets free from inappropriate items? | Check for items that are not used in a toilet. | | | | |
| 25 | Are toilet brushes and holders visibly clean? (20, 84, 85, 86) | Check two for evidence. | | | | |

Question Set: General Environment - Staff Toilet

Observation: 1

Room Function: Toilet

Room No.: 1

Room:

| | Question | Guidance | Yes | No | N/A | Comment |
|----|--|---|-----|----|-----|---------|
| 26 | Is toilet paper available from a wall mounted dispenser? | Check the underside of the dispenser for build up of dirt and debris. | | | | |
| 27 | Is the toilet paper dispenser visibly clean? | Check the underside for build up of dirt and debris. | | | | |

Question Set Comments/Recommendations for General Environment - Staff Toilet

Question Set: General Environment - Store Room

Observation: 1

Room Function: Store Room

Room No.: 1

Room:

| | Question | Guidance | Yes | No | N/A | Comment |
|----|---|---|-----|----|-----|---------|
| 1 | Is the environment visibly clean? (15, 20, 52, 53, 80, 84, 86) | Check walls, windows, ceilings, fans and light fittings are free from dust/debris/insects etc. | | | | |
| 2 | Is the environment free from any visible damage? (20, 53, 77, 80, 84, 85, 95) | Check for flaking paint, damaged walls/ceilings/window frames and surfaces. Check for evidence of action taken to repair. | | | | |
| 3 | Are all furnishings and fittings visibly clean? (20, 31, 52, 84, 85, 86) | Check all areas are clean, behind and under surfaces. | | | | |
| 4 | Are all furnishings and fittings in a good state of repair? (84, 85, 95) | Where there is damage, check for evidence of action taken to ensure repair or replacement. | | | | |
| 5 | Is the floor visibly clean? (20, 52, 84, 85, 86) | Check the edges and corners are clean and free of dust and grit. | | | | |
| 6 | Is the floor covering washable and impervious to moisture? (20, 53, 80, 84) | Is the floor covering appropriate for the room. | | | | |
| 7 | Is the flooring in a good state of repair? (52, 53) | Check for rips and tears. | | | | |
| 8 | Are all items of equipment or supplies stored off the floor? (54) | There should be no equipment or supplies stored on the floor. | | | | |
| 9 | Is the environment tidy and uncluttered? | Check all areas are accessible for cleaning. | | | | |
| 10 | Are items stored appropriately? | e.g. Boxes with lids. | | | | |

Question Set Comments/Recommendations for General Environment - Store Room

Question Set: General Environment - Linen

Observation: 1

Room Function: Linen

Room No.: 1

Room:

| | Question | Guidance | Yes | No | N/A | Comment |
|----|--|---|-----|----|-----|---------|
| 1 | Is there a designated area for the storage of clean linen which is separate to used linen? | Check for linen in sluice or bathroom. | | | | |
| 2 | Is the environment visibly clean? (15, 20, 52, 53, 80, 84, 86) | Check walls, windows, ceilings, fans and light fittings are free from dust/debris/insects etc. | | | | |
| 3 | Is the environment free from any visible damage? (20, 53, 77, 80, 84, 85, 95) | Check for flaking paint, damaged walls/ceilings/window frames and surfaces. Check for evidence of action taken to repair. | | | | |
| 4 | Is the floor visibly clean? (20, 52, 84, 85, 86) | Check the edges and corners are clean and free of dust and grit. | | | | |
| 5 | Is the floor covering washable and impervious to moisture? (20, 53, 80, 84) | Is the floor covering appropriate for the room. | | | | |
| 6 | Is the flooring in a good state of repair? (52, 53) | Check for rips and tears. | | | | |
| 7 | Is all linen stored off the floor? | Visually check. | | | | |
| 8 | Is the area / room used to store clean linen free from inappropriate items? (53, 80) | Check linen area store for inappropriate equipment, Christmas trees, hair dressing equipment etc. | | | | |
| 9 | Is used linen placed directly into appropriate colour coded bags/containers at the point of use? (38) | Observe practice or ask a member of staff to describe procedure. | | | | |
| 10 | Are water-soluble bags used for soiled and/or infected linen? (38) | Observe practice or ask a member of staff to describe procedure also check availability of bags. | | | | |
| 11 | Are used linen bags/containers less than 2/3rds full? (38) | Check linen bags/containers can be secured. | | | | |
| 12 | Are re-useable linen bags laundered after use? | Ask laundry staff. | | | | |
| 13 | Are rigid linen containers/trolleys visibly clean? | Check cleanliness. | | | | |
| 14 | Is used linen stored in a designated area until collection, e.g. sluice room, dirty utility room? (38, 53) | Ask a member of staff which room used linen is stored in. | | | | |
| 15 | Do staff wear disposable gloves and aprons when handling soiled linen? (20) | Observe practice or ask a member of staff to describe procedure. | | | | |

Question Set Comments/Recommendations for General Environment - Linen

Question Set: General Environment - Laundry Room

Observation: 1

Room Function: Laundry

Room No.: 1

Room:

| | Question | Guidance | Yes | No | N/A | Comment |
|----|--|---|-----|----|-----|---------|
| 1 | Is there a designated area for laundering used linen which is sited appropriately? | The room should not be a bathroom or dirty utility room. | | | | |
| 2 | Is there a dirty to clean flow in the room? | Check there is no crossover of dirty and clean areas. | | | | |
| 3 | Is the environment visibly clean? (15, 20, 52, 53, 80, 84, 86) | Check walls, windows, ceilings, fans and light fittings are free from dust/debris/insects etc. | | | | |
| 4 | Is the environment free from any visible damage? (20, 53, 77, 80, 84, 85, 95) | Check for flaking paint, damaged walls/ceilings/window frames and surfaces. Check for evidence of action taken to repair. | | | | |
| 5 | Are all furnishings and fittings visibly clean? (20, 31, 52, 84, 85, 86) | Check all areas are clean, behind and under surfaces. | | | | |
| 6 | Are all furnishings and fittings in a good state of repair? (84, 85, 95) | Where there is damage, check for evidence of action taken to ensure repair or replacement. | | | | |
| 7 | Are all work surfaces smooth, impervious, with coved edges to facilitate easy cleaning? (20, 53, 80, 84) | Check all work surfaces. | | | | |
| 8 | Is the floor visibly clean? (20, 52, 84, 85, 86) | Check the edges and corners are clean and free of dust and grit. | | | | |
| 9 | Is the floor covering washable and impervious to moisture? (20, 53, 80, 84) | Is the floor covering appropriate for the room. | | | | |
| 10 | Is the flooring in a good state of repair? (52, 53) | Check for rips and tears. | | | | |
| 11 | Are all work surfaces visibly clean? (53) | Check all work surfaces throughout the room are dust free, clean and dry. | | | | |
| 12 | Is there a designated hand wash basin? (15, 53, 80, 82, 90) | Visually check. | | | | |
| 13 | Are mixer taps or thermostatically controlled water available? (15) | Test water temperature. | | | | |
| 14 | Is the hand wash basin accessible? (53, 80, 90) | Check for obstructions e.g. equipment. | | | | |
| 15 | Is the hand wash basin in a good state of repair? (15) | Check there are no cracks or chips. | | | | |

Question Set: General Environment - Laundry Room

Observation: 1

Room Function: Laundry

Room No.: 1

Room:

| | Question | Guidance | Yes | No | N/A | Comment |
|----|---|--|-----|----|-----|---------|
| 16 | Is the hand wash basin visibly clean? (52, 84) | Check plugholes and overflows for cleanliness & build up of limescale. | | | | |
| 17 | Is the soap dispensed from a single use cartridge? (53, 80, 90, 92, 94) | Check cartridge, there should be enough soap for the next two uses. | | | | |
| 18 | Is the liquid soap dispenser wall mounted? | Check that the soap dispenser is wall mounted. | | | | |
| 19 | Is the soap dispenser visibly clean? (90) | Check the nozzle for build up of soap and debris. | | | | |
| 20 | Are paper towels available from an enclosed dispenser? (53, 80, 90) | Paper towels should be soft tissue with enough in the dispenser for the next two washes. | | | | |
| 21 | Is the paper towel dispenser visibly clean? (90) | Check underside of dispenser. | | | | |
| 22 | Is there a promotional hand hygiene poster displayed? (90) | Check for poster. It should be laminated, clean and relevant to the room. | | | | |
| 23 | Is there a hands-free domestic waste bin available for the disposal of paper towels? (53, 56, 80) | Visually check. | | | | |
| 24 | Is the foot pedal of the domestic waste bin in good working order? (53, 80) | Check the foot pedal opens the lid. | | | | |
| 25 | Is the domestic waste bin visibly clean, including lid and pedal? (23, 85, 86) | Check bins are clean externally and internally. | | | | |
| 26 | Is the domestic waste bin in good condition? (23, 85, 86) | Check for rust i.e. underneath lid. | | | | |
| 27 | Is all soiled linen initially laundered on a pre-wash (sluice) machine cycle? (38) | Observe practice or ask a member of staff to describe procedure. | | | | |
| 28 | Is the washing machine an industrial machine? (38) | Check that it is not a domestic washing machine. | | | | |
| 29 | Is the tumble dryer an industrial machine? (38) | Check it is not a domestic machine. | | | | |
| 30 | Is the tumble dryer vented to the outside? (38) | Check for pipe. | | | | |
| 31 | Is the washing machine and tumble dryer on a pre-planned maintenance programme? (38) | Check records. | | | | |
| 32 | Is the washing machine on a plinth? (38) | Visually check. | | | | |

Question Set Comments/Recommendations for General Environment - Laundry Room

Question Set: General Environment - Domestic/Cleaners Room

Observation: 1

Room Function: Cleaners/Domestics Room

Room No.: 1

Room:

| | Question | Guidance | Yes | No | N/A | Comment |
|----|--|---|-----|----|-----|---------|
| 1 | Is there a dedicated room for storage of cleaning equipment? (53, 80) | Check that equipment is stored in a dedicated store [separate from other items] e.g. linen, sterile supplies. | | | | |
| 2 | Is the environment visibly clean? (15, 20, 52, 53, 80, 84, 86) | Check walls, windows, ceilings, fans and light fittings are free from dust/debris/insects etc. | | | | |
| 3 | Is the environment free from any visible damage? (20, 53, 77, 80, 84, 85, 95) | Check for flaking paint, damaged walls/ceilings/window frames and surfaces. Check for evidence of action taken to repair. | | | | |
| 4 | Are all furnishings and fittings visibly clean? (20, 31, 52, 84, 85, 86) | Check all areas are clean, behind and under surfaces. | | | | |
| 5 | Are all furnishings and fittings in a good state of repair? (84, 85, 95) | Where there is damage, check for evidence of action taken to ensure repair or replacement. | | | | |
| 6 | Are all surfaces smooth, impervious (for easy cleaning) and with coved edges? (20, 53, 80, 84) | Check all surfaces. | | | | |
| 7 | Is the floor visibly clean? (20, 52, 84, 85, 86) | Check the edges and corners are clean and free of dust and grit. | | | | |
| 8 | Is the floor covering washable and impervious to moisture? (20, 53, 80, 84) | Is the floor covering appropriate for the room. | | | | |
| 9 | Is the flooring in a good state of repair? (52, 53) | Check for rips and tears. | | | | |
| 10 | Is there a designated hand wash basin? (15, 53, 80, 82, 90) | Visually check. | | | | |
| 11 | Are mixer taps or thermostatically controlled water available? (15) | Test water temperature. | | | | |
| 12 | Is the hand wash basin accessible? (53, 80, 90) | Check for obstructions e.g. equipment. | | | | |
| 13 | Is the hand wash basin in a good state of repair? (15) | Check there are no cracks or chips. | | | | |
| 14 | Is the hand wash basin visibly clean? (52, 84) | Check plugholes and overflows for cleanliness & build up of limescale. | | | | |

Question Set: General Environment - Domestic/Cleaners Room

Observation: 1

Room Function: Cleaners/Domestics Room

Room No.: 1

Room:

| | Question | Guidance | Yes | No | N/A | Comment |
|----|---|--|-----|----|-----|---------|
| 15 | Is the soap dispensed from a single use cartridge? (53, 80, 90, 92, 94) | Check cartridge, there should be enough soap for the next two uses. | | | | |
| 16 | Is the liquid soap dispenser wall mounted? | Check that the soap dispenser is wall mounted. | | | | |
| 17 | Is the soap dispenser visibly clean? (90) | Check the nozzle for build up of soap and debris. | | | | |
| 18 | Are paper towels available from an enclosed dispenser? (53, 80, 90) | Paper towels should be soft tissue with enough in the dispenser for the next two washes. | | | | |
| 19 | Is the paper towel dispenser visibly clean? (90) | Check underside of dispenser. | | | | |
| 20 | Is there a promotional hand hygiene poster displayed? (90) | Check for poster. It should be laminated, clean and relevant to the room. | | | | |
| 21 | Is there a hands-free domestic waste bin available for the disposal of paper towels? (53, 56, 80) | Visually check. | | | | |
| 22 | Is the foot pedal of the domestic waste bin in good working order? (53, 80) | Check the foot pedal opens the lid. | | | | |
| 23 | Is the domestic waste bin visibly clean, including lid and pedal? (23, 85, 86) | Check bins are clean externally and internally. | | | | |
| 24 | Is the domestic waste bin in good condition? (23, 85, 86) | Check for rust i.e. underneath lid. | | | | |
| 25 | Is there a disposal unit for the disposal of contaminated waste water? (53, 80) | Check there is a disposal unit. | | | | |
| 26 | Is the unit for the disposal of contaminated waste water visibly clean? (85) | Visually check. | | | | |
| 27 | Are mops and buckets stored clean and dry? (52) | Check storage and cleanliness of mops and buckets. | | | | |
| 28 | Are detachable mop bucket wringers removed and cleaned daily? | Remove and check underneath. | | | | |
| 29 | Are mop heads laundered or disposable? (52) | Check local policy for frequency and that mop heads are in a good state of repair. | | | | |
| 30 | Is there a colour coding system in place for cleaning equipment? (52, 53, 80, 85, 86) | Check equipment is colour coded and posters are displayed and the available equipment is coloured as per poster. | | | | |
| 31 | Is cleaning equipment and machinery left clean and dry after use? (52, 85, 86) | Visually check. | | | | |

Question Set Comments/Recommendations for General Environment - Domestic/Cleaners Room

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Module: Personal Protective Equipment

Date: Auditors:

Standard: Protective clothing is available and worn for all aspects of care which may involve contact with blood or body fluids or where asepsis is required

Question Set: Personal Protective Equipment - Personal Protective Equipment

Observation: 1

| | Question | Guidance | Yes | No | N/A | Comment |
|----|--|---|-----|----|-----|---------|
| 1 | Are single use plastic aprons available? (20, 79) | Check they are readily available. | | | | |
| 2 | Are single use plastic aprons stored appropriately away from the risk of contamination? (20, 53, 80) | e.g. not stored in the dirty utility room. | | | | |
| 3 | Is a single use apron worn when in contact or anticipated contact with body fluids or contaminated items or significant physical contact? (20, 79) | Observe practice or ask a member of staff to describe procedure. | | | | |
| 4 | Are single use aprons worn as single use items and changed between every episode of care? (20, 79) | Observe practice or ask a member of staff to describe procedure. | | | | |
| 5 | Is there a range of sizes of sterile and non-sterile powder free gloves available? (20, 75, 79) | Check gloves are readily available by obtaining a pair. Check gloves conform to CE mark (European Community standards). | | | | |
| 6 | Are polythene gloves only used for non care activities? (20, 75, 79) | Gloves may be used for food handling. Observe practice or ask a member of staff to describe procedure. | | | | |
| 7 | Are gloves stored appropriately? (20, 53, 80) | Check visually that gloves are stored away from the risk of contamination and heat sources. | | | | |
| 8 | Are gloves worn when in contact or anticipated contact with body fluids or in potential contact with contaminated items? (20, 79) | Observe practice such as handling of contaminated dressings/cleaning equipment. | | | | |
| 9 | Are gloves removed after care activity and hand hygiene performed? (20) | Check gloves are not worn when handling records, answering phone etc. Moment 3 - after body fluid exposure. | | | | |
| 10 | Is eye and face protection worn by staff when anticipating contact with blood and body fluids with a high risk of splashing into the face and eyes? (20) | Observe practice or ask a member of staff to describe procedure. | | | | |

Question Set Comments/Recommendations for Personal Protective Equipment - Personal Protective Equipment

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- 53 Health Facility Note 30 Infection Control in the built environment. Stationary Office, 2003 (soon to be superseded by HBN 00-09)
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- 80 Scottish Health Facility Note 30: Infection Control in the Built Environment: Design and Planning. In: Scotland HF, Editor: NHS National Services Scotland, 2007

Module: Kitchen

Date: Auditors:

Room Function: Kitchen/Pantry Room No.: 1 Room:

Standard: To protect staff and service users from the risk of infection, the kitchen is managed to ensure a clean environment and reduction of microbial contamination.

Question Set: Kitchen - Management

Observation: 1

| | Question | Guidance | Yes | No | N/A | Comment |
|---|--|---|-----|----|-------------------------------------|---------|
| 1 | Do all staff receive appropriate food hygiene training and refresher training? | Check training records. | | | <input checked="" type="checkbox"/> | |
| 2 | Is the food hygiene policy available and current? | Check for paper/electronic copy. | | | | |
| 3 | Is there a written cleaning schedule identifying when and what is cleaned? | Check documentation. | | | | |
| 4 | Is information available to obtain a food history? | Randomly select a service user and request their food history for the previous day. | | | | |

Question Set Comments/Recommendations for Kitchen - Management

Question Set: Kitchen - Environment

Observation: 1

| | Question | Guidance | Yes | No | N/A | Comment |
|---|--|--|-----|----|-----|---------|
| 1 | Is the environment visibly clean? (15, 20, 52, 53, 80, 84, 86) | Check walls, windows, ceilings, fans and light fittings are free from dust/debris/insects etc. | | | | |
| 2 | Are all furnishings and fittings visibly clean? (20, 31, 52, 84, 85, 86) | Check all areas are clean, behind and under surfaces. | | | | |
| 3 | Are all furnishings and fittings in a good state of repair? (84, 85, 95) | Where there is damage, check for evidence of action taken to ensure repair or replacement. | | | | |
| 4 | Are all work surfaces smooth, impervious, with coved edges to facilitate easy cleaning? (20, 53, 80, 84) | Check all work surfaces. | | | | |
| 5 | Is the floor visibly clean? (20, 52, 84, 85, 86) | Check the edges and corners are clean and free of dust and grit. | | | | |
| 6 | Is the floor covering washable and impervious to moisture? (20, 53, 80, 84) | Is the floor covering appropriate for the room. | | | | |
| 7 | Is the flooring in a good state of repair? (52, 53) | Check for rips and tears. | | | | |
| 8 | Are all work surfaces visibly clean? (53) | Check all work surfaces throughout the room are dust free, clean and dry. | | | | |
| 9 | Are all products stored above floor level? (84) | Visually check. | | | | |

Question Set: Kitchen - Environment

Observation: 1

| | Question | Guidance | Yes | No | N/A | Comment |
|----|---|--|-----|----|-----|---------|
| 10 | Is the room free from infestation or animals? | Check for evidence i.e. mouse droppings. | | | | |
| 11 | Is the room free from unnecessary equipment? | Visually check. | | | | |
| 12 | Are fly screens in place if required? | Check opening windows/external doors. | | | | |
| 13 | Is there a colour coding system in place for cleaning equipment? (52, 53, 80, 85, 86) | Check equipment is colour coded and posters are displayed and the available equipment is coloured as per poster. | | | | |
| 14 | Is there a designated hand wash basin? (15, 53, 80, 82, 90) | Visually check. | | | | |
| 15 | Are mixer taps or thermostatically controlled water available? (15) | Test water temperature. | | | | |
| 16 | Is the hand wash basin accessible? (53, 80, 90) | Check for obstructions e.g. equipment. | | | | |
| 17 | Is the hand wash basin in a good state of repair? (15) | Check there are no cracks or chips. | | | | |
| 18 | Is the hand wash basin visibly clean? (52, 84) | Check plugholes and overflows for cleanliness & build up of limescale. | | | | |
| 19 | Are hand wash basins free from extraneous items? (53) | e.g. mugs, medicine pots etc. | | | | |
| 20 | Is the soap dispensed from a single use cartridge? (53, 80, 90, 92, 94) | Check cartridge, there should be enough soap for the next two uses. | | | | |
| 21 | Is the liquid soap dispenser wall mounted? | Check that the soap dispenser is wall mounted. | | | | |
| 22 | Is the soap dispenser visibly clean? (90) | Check the nozzle for build up of soap and debris. | | | | |
| 23 | Are paper towels available from an enclosed dispenser? (53, 80, 90) | Paper towels should be soft tissue with enough in the dispenser for the next two washes. | | | | |
| 24 | Is the paper towel dispenser visibly clean? (90) | Check underside of dispenser. | | | | |
| 25 | Is there a promotional hand hygiene poster displayed? (90) | Check for poster. It should be laminated, clean and relevant to the room. | | | | |
| 26 | Is there a hands-free domestic waste bin available for the disposal of paper towels? (53, 56, 80) | Visually check. | | | | |
| 27 | Is the foot pedal of the domestic waste bin in good working order? (53, 80) | Check the foot pedal opens the lid. | | | | |

Question Set: Kitchen - Environment

Observation: 1

| | Question | Guidance | Yes | No | N/A | Comment |
|----|--|---|-----|----|-----|---------|
| 28 | Is the domestic waste bin visibly clean, including lid and pedal? (23, 85, 86) | Check bins are clean externally and internally. | | | | |
| 29 | Is the domestic waste bin in good condition? (23, 85, 86) | Check for rust i.e. underneath lid. | | | | |

Question Set Comments/Recommendations for Kitchen - Environment

Question Set: Kitchen - Protective Clothing

Observation: 1

| | Question | Guidance | Yes | No | N/A | Comment |
|---|---|-----------------------------------|-----|----|-----|---------|
| 1 | Are single use plastic aprons available? (20, 79) | Check they are readily available. | | | | |
| 2 | Are disposable gloves available? | Visually check. | | | | |

Question Set Comments/Recommendations for Kitchen - Protective Clothing

Question Set: Kitchen - Equipment

Observation: 1

| | Question | Guidance | Yes | No | N/A | Comment |
|---|--|--|-----|----|-----|---------|
| 1 | Are refrigerators/freezers visibly clean and free from ice build up? | Visually check. | | | | |
| 2 | Is there evidence that daily temperatures of fridges and freezers are recorded and appropriate action is taken if standards are not met? | Fridges must be less than +8 o C, Freezers -18 o C or as local policy. | | | | |
| 3 | Is there only food in the refrigerator? | Check that there are no medications or specimens. | | | | |
| 4 | Are water coolers/ice machines on a portable supply e.g. mains or treated water supply? (72) | Visually check. | | | | |
| 5 | Is the water cooler/ice making machine cleaned at least once a week according to the manufacturer's instructions? (53, 72, 80) | Ask a member of staff about practice, check local instructions. | | | | |
| 6 | Is the water cooler/ice machine on a planned maintenance programme? (53, 80) | Ask for evidence (written). | | | | |

Question Set: Kitchen - Equipment

Observation: 1

| | Question | Guidance | Yes | No | N/A | Comment |
|----|--|---|-----|----|-----|---------|
| 7 | If used for consumption, does the ice making machine dispense ice from a nozzle directly into a receptacle on demand? (53, 80) | Check that it's not dispensed into a storage container. | | | | |
| 8 | Is there disposable paper roll available for drying equipment and surfaces? | Visually check. | | | | |
| 9 | Is the dishwasher visibly clean and well maintained? | Check inside. | | | | |
| 10 | Is disposable paper roll used to dry kitchen items? | Check there are no fabric tea towels in use. | | | | |
| 11 | Are coloured waterproof dressing available? | Check plasters are colour coded. | | | | |

Question Set Comments/Recommendations for Kitchen - Equipment

Question Set: Kitchen - Storage

Observation: 1

| | Question | Guidance | Yes | No | N/A | Comment |
|---|---|---------------------------|-----|----|-----|---------|
| 1 | Is food labelled and is there a system in place to determine when it was opened and/or when it should be used by? | Check two items. | | | | |
| 2 | Is milk stored in the refrigerator? | Visually check. | | | | |
| 3 | Is bread stored in a clean dry container? | Visually check. | | | | |
| 4 | Are food products within their expiry dates? | Check at least two items. | | | | |
| 5 | Is opened food covered or stored in containers? | Visually check. | | | | |

Question Set Comments/Recommendations for Kitchen - Storage

Care Setting Process Improvement Tool : Day Centre - Mental Health/Learning Disability

- 15 Department of Health (2006) Health Technical Memorandum 64 (HTM 64): Sanitary assemblies. London: TSO
- 20 Pratt RJ, Pellowe C, Wilson JA, Loveday HP, Harper PJ, Jones SRLJ, McDougall CM, Wilcox MH. (2007) Epic2: National Evidence Based Guidelines for preventing Healthcare-Associated Infection in NHS Hospitals in England. *Journal of Hospital Infection*. 65 (1) Supplement 1.
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- 52 The national specifications for cleanliness in the NHS: A framework for setting and measuring performance outcomes April 2007.
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- 72 Regulation (European Commission) number 852/2004 of the European Parliament and of the Council of 29 April 2004 on the hygiene of foodstuffs
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Module: Equipment

Date: Auditors:

Standard: All equipment is cleaned and maintained appropriately to prevent cross infection

Question Set: Equipment - Management of Equipment

Observation: 1

| | Question | Guidance | Yes | No | N/A | Comment |
|---|--|---|-----|----|-----|---------|
| 1 | Is all equipment detailed on a cleaning schedule? (77, 78, 82, 83, 84, 85, 86) | Ask to see cleaning schedule and check it is comprehensive. Is all equipment documented? | | | | |
| 2 | Are schedules completed, signed and up to date with frequencies and responsibilities identified? (77, 78, 82, 84, 85, 86) | Check schedules are completed, signed and up to date. | | | | |
| 3 | Are items sent for service, inspection or repair, appropriately cleaned and/or disinfected, and a label of contamination status attached? (82, 87) | Ask to see labels used to mark items being sent for service, inspection or repair. | | | | |
| 4 | Are cleaning products available for routine cleaning of equipment? (68) | Check against local policy/guidelines. Check availability, for example look in dirty utility rooms. | | | | |
| 5 | Can staff describe the decontamination of commonly used equipment? | Ask staff to describe how they would clean two different items. | | | | |

Question Set Comments/Recommendations for Equipment - Management of Equipment

Question Set: Equipment - Manual Handling Equipment

Observation: 1

| | Question | Guidance | Yes | No | N/A | Comment |
|---|---|---|-----|----|-----|---------|
| 1 | Is manual handling equipment stored appropriately? (77, 78, 82, 84) | Check there are none stored in an inappropriate areas such as sluice or bathroom. | | | | |
| 2 | Is manual handling equipment visibly clean? (77, 78, 82) | Check for body substances, dust, dirt, debris or adhesive tape. | | | | |
| 3 | Are manual handling slings/sheets single use or laundered after use? (77, 78, 82) | Inspect in use slings/question staff. | | | | |

Question Set Comments/Recommendations for Equipment - Manual Handling Equipment

Question Set: Equipment - Miscellaneous Equipment

Observation: 1

| | Question | Guidance | Yes | No | N/A | Comment |
|--|----------|----------|-----|----|-----|---------|
| | | | | | | |

Question Set: Equipment - Miscellaneous Equipment

Observation: 1

| | Question | Guidance | Yes | No | N/A | Comment |
|---|---|--|-----|----|-----|---------|
| 1 | Is gym equipment e.g. wobble boards, balls, exercise bikes visibly clean and of an easily cleanable design? (77, 78, 82) | Check a selection of equipment. | | | | |
| 2 | Are aids such as walking sticks, Zimmer frames, helping hands visibly clean and stored in a suitable area? (77, 78, 82, 87) | Check two. | | | | |
| 3 | Are wheelchairs visibly clean and in a good state of repair? (77, 78, 82, 87) | Visually check cleanliness and damage. | | | | |

Question Set Comments/Recommendations for Equipment - Miscellaneous Equipment

- 68 AAGBI (2008) Infection control in anaesthesia AAGBI Safety Guideline: Infection Control in Anaesthesia. Anaesthesia, 63;1027-1036
- 77 Standards - March 2008 Healthcare Associated Infection (HAI): Quality Improvement Scotland, 2008.
- 78 Draft Infection Prevention and Control Standards: A Consultation Document: Health Information and Quality Authority, Republic of Ireland 2009
- 82 Department of Health (2009) Code of Practice for the NHS on the prevention and control of healthcare associated infections and related guidance: Department of Health.
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www.mhra.gov.uk/Publications/Safetyguidance/DeviceBulletins/CON2024995

Module: Waste Management

Date: Auditors:

Standard: Waste is managed safely to prevent cross infection

Question Set: Waste Management - Waste Management

Observation: 1

| | Question | Guidance | Yes | No | N/A | Comment |
|----|---|---|-----|----|-----|---------|
| 1 | Are separate waste streams available in accordance with local guidance? (23) | Check that different coloured bags are available e.g. for offensive and infectious/healthcare risk waste. | | | | |
| 2 | Are waste bags capable of being securely tied? (23) | Check bags are no more than two thirds full. | | | | |
| 3 | Are infectious/healthcare risk waste bags labelled before storage and disposal? (23) | Observe practice or ask a member of staff to describe procedure. | | | | |
| 4 | Are offensive waste bags labelled before storage and disposal? (23) | Observe practice or ask a member of staff to describe procedure. | | | | |
| 5 | Is infectious/healthcare risk waste stored separately to domestic waste in a secure designated storage facility/area? (23) | Check waste is stored separately and the area is locked. | | | | |
| 6 | Is offensive waste stored separately to domestic waste in a secure designated storage facility/area? (23) | Check waste is stored separately and the area is locked. | | | | |
| 7 | Is infectious/healthcare risk waste removed by a registered contractor with a valid licence? (23) | Ask to see written evidence. | | | | |
| 8 | Is offensive waste removed by a registered contractor with a valid licence? (23) | Ask to see written evidence. | | | | |
| 9 | Are outside waste containers or storage/waste compound areas secure? (23) | 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. | | | | |
| 10 | Are outside waste containers or storage/waste compound areas kept clean and tidy and without evidence of vermin and/or inappropriate/extraneous items? (23) | Check there are no items on the floor and behind the bin/s. | | | | |

Question Set Comments/Recommendations for Waste Management - Waste Management

- 23 Department of Health (2006) Health Technical Memorandum 07-01: Safe management of healthcare waste. www.dh.gov.uk/prod_consum_dh/groups/dh_digitalassets/documents/digitalasset/dh_073328.pdf