

GRICG

Infection Prevention and Control Process Surveillance

Audit Tools

These audit tools can be used in all health care facilities to assist with monitoring compliance with infection prevention and control strategies. The following audit tools are attached:

1. Identification of infection prevention and control knowledge
2. Alcohol based hand rub accessibility to promote hand hygiene
3. Adherence to hand hygiene policy
4. The correct use of personal protective equipment (PPE)
5. Safe storage of sterile stock in wards or clinical areas
6. Appropriate indwelling urinary catheter management
7. Compliance with aseptic technique
8. Safe storage and handling of sharps
9. Adherence to transmission based precautions
10. Appropriate laundry practices (applicable only to those with an in house laundry)
11. Cleaning of patient/consumer care equipment
12. Antimicrobial stewardship knowledge.

Select the appropriate tools to complete for your facility.

A scoring matrix is outlined at the end of each audit to determine the overall score.

Issues and actions identified should be discussed at the relevant committee meeting and be added to your quality improvement plan to ensure these are addressed. High risk issues identified should be added to your organisational risk register.

Objective: To identify healthcare worker knowledge of infection prevention and control principles

Area Assessor..... Date.....

It is recommended that a sample of 5-10 healthcare workers (HCW) are audited using this audit tool.
 Tick answers under each health care worker audited
 ✓ Box if Yes ✗ Box if No

HCW – Healthcare Worker		HCW 1	HCW 2	HCW 3	HCW 4	HCW 5	HCW 6	HCW 7	HCW 8	HCW 9	HCW 10	Result per area
1.	HCW can explain standard and transmission-based precautions. Ask the following questions:											

HCW – Healthcare Worker		HCW 1	HCW 2	HCW 3	HCW 4	HCW 5	HCW 6	HCW 7	HCW 8	HCW 9	HCW 10	Result per area
Question 1 continued: What practices do standard precautions include? At least 4 precautions can be named. 1 point for each correct answer for 4 answers.	<ul style="list-style-type: none"> • Hand hygiene • respiratory hygiene • aseptic technique • equipment cleaning & reprocessing • environmental cleaning • appropriate use of personal protective equipment • safe handling of sharps • appropriate waste disposal • safe handling of linen 	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
What PPE are required for Contact precautions	<ul style="list-style-type: none"> • gloves and gown or apron 	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
What type of mask is used for Droplet precautions	<ul style="list-style-type: none"> • surgical mask 	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
What type of mask is used for Airborne precautions	<ul style="list-style-type: none"> • N95/P2 mask 	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Possible total correct answers		17	17	17	17	17	17	17	17	17	17	1

HCW – Healthcare Worker		HCW 1	HCW 2	HCW 3	HCW 4	HCW 5	HCW 6	HCW 7	HCW 8	HCW 9	HCW 10	Result per area
2.	<p>HCW can explain what is required for the management of multi-resistant organisms</p> <p>1 point for each answer total of 5</p> <ul style="list-style-type: none"> • <i>single room</i> • <i>contact precautions</i> • <i>hand hygiene</i> • <i>extra cleaning of environment</i> • <i>dedicated equipment or cleaning between use</i> 	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Possible total correct answers		/5	/5	/5	/5	/5	/5	/5	/5	/5	/5	/
3.	<p>HCW can explain the importance of immunisation for those working in health:</p> <ul style="list-style-type: none"> • <i>Prevent the spread of infections to susceptible patients/ consumers</i> 	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Possible total correct answers		/1	/1	/1	/1	/1	/1	/1	/1	/1	/1	/
4.	HCW knows where to locate infection prevention and control policies, procedures and general information	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5.	HCW knows how to contact their Infection Prevention and Control Unit / Coordinator/ Manager	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Possible total correct answers		/2	/2	/2	/2	/2	/2	/2	/2	/2	/2	/
Total of correct answers per HCW		/15	/15	/15	/15	/15	/15	/15	/15	/15	/15	/

Total Number of HCW Observed	
HCW knowledge of infection prevention and control	<p>% score for knowledge -</p> $\frac{\text{total number of correct answers}}{\text{total number of correct \& incorrect answers}} \times 100 = \%$ <div style="border: 1px solid black; width: 50px; height: 50px; background-color: #f4b084; margin-left: 100px;"></div>
<p>Feedback (add actions identified to your quality improvement plan)</p>	

Objective: To identify accessibility of Alcohol Based Hand Rub (ABHR) at point of care to promote hand hygiene

Area Assessor Date

Audit key areas and each room/bed to identify whether ABHR is available at point of care to promote hand hygiene
Complete boxes below

Area/ Bed Number	ABHR is accessible at point of care	
	✓ Yes	× No
1.		
2.		
3.		
4.		
5.		
6.		
7.		
8.		
9.		
10.		
Total Score		
ABHR is accessible at point of care to promote hand hygiene	% score for accessibility - $\frac{\text{total number of yes answers}}{\text{total number of yes and no answers}} \times 100 = \%$ <div style="border: 1px solid black; width: 80px; height: 40px; display: inline-block; vertical-align: middle;"></div>	
Feedback (add actions identified to your quality improvement plan)		

Objective: To identify the number of HCWs who comply with the local Hand Hygiene Policy

Area.....Assessor.....Date.....

It is recommended that a sample of between 5 – 10 health care workers (HCW) are audited using this audit tool.
 Complete the boxes under each HCW
 ✓ Yes * No

	HCW – Healthcare worker	HCW 1	HCW 2	HCW 3	HCW 4	HCW 5	HCW 6	HCW 7	HCW 8	HCW 9	HCW 10	Result per criteria
1.	HCW has short, clean fingernails											/
2.	HCW does not wear acrylic (false) nails											/
3.	HCW does not wear nail polish											/
4.	HCW is not wearing a wrist watch											/
5.	HCW is not wearing a bracelet (medical alert may need to be worn elsewhere other than wrist)											/
6.	HCW is not wearing rings (1 plain band acceptable)											/
7.	The HCW has completed a recent hand hygiene competency for the use of ABHR											/
8.	The HCW has completed a recent hand hygiene competency using soap and water											/

HCW – Healthcare worker	HCW 1	HCW 2	HCW 3	HCW 4	HCW 5	HCW 6	HCW 7	HCW 8	HCW 9	HCW 10	Result per criteria
Total of correct answers per HCW	/8	/8	/8	/8	/8	/8	/8	/8	/8	/8	/

Total Number of HCW Observed	
HCW Compliance with local Hand Hygiene Policy	<p>% score for compliance -</p> $\frac{\text{total number of yes answers}}{\text{total number of yes and no answers}} \times 100 = \%$ <div style="border: 1px solid black; width: 50px; height: 50px; margin-left: 100px;"></div>
Feedback (add actions identified to your quality improvement plan)	

Objective: To identify the correct use of personal protective equipment (PPE)

Area..... Assessor..... Date.....

It is recommended that a sample of between 5 – 10 healthcare workers (HCW) are audited using this audit tool.
 PPE may be used in different combinations. Where a PPE item is not required for the task about to be performed mark as NA
 Complete the boxes under each HCW
 ✓ Yes ✗ No or NA - non applicable

HCW – Healthcare worker			HCW 1	HCW 2	HCW 3	HCW 4	HCW 5	HCW 6	HCW 7	HCW 8	HCW 9	HCW 10	Result per criteria
Putting on PPE													
1.	Perform hand hygiene	Alcohol-based hand rub / hand wash											/
2.	Put on gown	Both ties at the back of the gown have been secured											/
3.	Put on mask	Surgical/ P2 mask – fitted correctly, fit check performed											/

HCW – Healthcare worker			HCW 1	HCW 2	HCW 3	HCW 4	HCW 5	HCW 6	HCW 7	HCW 8	HCW 9	HCW 10	Result per criteria
4.	Put on protective eyewear	Protective eyewear put on - glasses or face shield (Note-must be applied in addition to prescription glasses)											/
5.	Put on gloves	Put on gloves ensuring the cuffs are covered by the gloves											/
Removing PPE													
6.	(6a) Remove gloves	One glove is removed & scrunched into other hand. The other glove is then removed by pulling the glove over the other glove, so it is inside out											/
	(6b) Remove gloves	The glove is placed into the bin (not flicked)											/
7.	Perform hand hygiene	Alcohol-based hand rub / Hand Wash											/
8.	Remove eyewear	Removed using the arms of the goggles/ or strap of face shield											/

HCW – Healthcare worker			HCW 1	HCW 2	HCW 3	HCW 4	HCW 5	HCW 6	HCW 7	HCW 8	HCW 9	HCW 10	Result per criteria
9.	(9a) Remove gown	The gown is removed by folding & rolling away from the body with only the clean inner side of the gown being exposed											/
	(9b) Remove gown	Placed in the correct waste bin											/
10.	Perform hand hygiene	Alcohol-based hand rub / Hand Wash											/
11.	Remove mask	Mask is removed by the straps											/
12.	Perform hand hygiene	Alcohol-based hand rub / Hand Wash											/
Total number of correct steps per HCW			/14	/14	/14	/14	/14	/14	/14	/14	/14	/14	/

Objective: To identify the correct storage of sterile stock in wards or clinical areas

Area.....Assessor..... Date.....

This audit tool is designed to be completed for wards or clinical areas where sterile stock is stored.
Complete one sheet per storage area audited

Questions		✓ Yes	✗ No
1.	Storage area is free from dust, insects and vermin		
2.	Storage containers, trolleys and cupboards are clean, dry and in good condition		
3.	Items are stored above floor level (at least 250mm)		
4.	Sterile items are protected from sunlight		
5.	Commercial dispenser boxes are not topped up or reused		
6.	No sterile stock is stored in outer cardboard boxes		
7.	Sterile stock is rotated, check a random selection of stock is in date		
Totals			

Correct storage of sterile stock in wards or clinical areas	% score for compliance -	
	$\frac{\text{total number of yes answers}}{\text{total number of yes and no answers}} \times 100 = \%$	
Feedback (add actions identified to your quality improvement plan)		


Objective: To identify the correct management of indwelling urinary catheters

It is recommended that a sample of between 5 – 10 audits (1 patient/ consumer per audit sheet) are completed using the audit tool. The audit tool is designed to audit healthcare worker (HCW) practices when caring for patients/ consumers with an indwelling urinary device.

Consumer UR Area

Assessor..... Date.....

Urinary device site (circle applicable)	Urethral		Supra-pubic	
	✓ Yes	* No	✓ Yes	* No
Documentation - reason for Insertion is recorded				
Documentation - ease of insertion (i.e. no. of attempts) is recorded				
Documentation – size of catheter inserted is recorded				
Documentation – Long-term/permanent catheter change/ removal “due date” is recorded				
Catheter support in situ e.g. tape, leg bag straps				
Drainage bag less than 3/4 full				
Drainage bag is not touching the floor				
Bag is below patient bladder				
Catheter & bag connections secure				
Catheter & tubing not kinked				
Totals				

HCW compliance with management of indwelling urinary catheters	% score for compliance - $\frac{\text{total number of yes answers}}{\text{total number of yes and no answers}} \times 100 = \%$	
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Feedback (add actions identified to your quality improvement plan)

Empty space for providing feedback and actions identified to the quality improvement plan.

Objective: To identify HCW compliance with aseptic technique

Area name..... Assessor..... Date.....

It is recommended that a sample of between 5 – 10 healthcare workers (HCW) are audited using this audit tool.
 The audit tool is designed to audit a medical officer, registered nurse, enrolled nurse or other, who perform procedures requiring an aseptic technique.
The audit is conducted while the HCW is performing a procedure.
 Complete the boxes under each HCW
 ✓ Yes × No

HCW – Healthcare worker	HCW 1	HCW 2	HCW 3	HCW 4	HCW 5	HCW 6	HCW 7	HCW 8	HCW 9	HCW 10	Result per criteria
Has the appropriate technique for ANTT® been selected: 1 answer <input type="checkbox"/> Standard ANTT® <input type="checkbox"/> Surgical ANTT®											
Has the appropriate type of aseptic field been selected: 1 answer <input type="checkbox"/> If Standard ANTT® then should use general aseptic field <input type="checkbox"/> If Surgical ANTT® then should use critical aseptic field											

HCW – Healthcare worker	HCW 1	HCW 2	HCW 3	HCW 4	HCW 5	HCW 6	HCW 7	HCW 8	HCW 9	HCW 10	Result per criteria
What should you use in association with a general aseptic field <input type="checkbox"/> Micro-critical aseptic fields											
Can the HCW describe a key part: <input type="checkbox"/> A <u>Key-Part</u> is the part of the equipment that must remain aseptic, such as the syringe hub, and must only contact other Key-Parts or Key-Sites											
Can the HCW describe a key site: <input type="checkbox"/> A <u>Key-Site</u> is the area on the patient/ client such as a wound, or IV insertion site that must be protected from micro-organisms											
Were the correct type of glove selected for the ANTT® used: 1 answer <input type="checkbox"/> Sterile <input type="checkbox"/> Non-sterile											
When a standard ANTT® is selected when would non-sterile gloves be replaced with sterile gloves: <input type="checkbox"/> If it is necessary to touch any key part or key site											

HCW – Healthcare worker	HCW 1	HCW 2	HCW 3	HCW 4	HCW 5	HCW 6	HCW 7	HCW 8	HCW 9	HCW 10	Result per criteria
When do you use a non touch technique: <input type="checkbox"/> A non touch technique is used at all times to protect key parts and key sites											
What procedure should always be performed before and after glove use: <input type="checkbox"/> Hand hygiene											
Total number correct answers	/9	/9	/9	/9	/9	/9	/9	/9	/9	/9	/

Total Number of HCW Observed	
HCW compliance with Aseptic Technique	<p>% score for compliance -</p> $\frac{\text{total number of yes answers}}{\text{total number of yes and no answers}} \times 100 = \%$ <div style="border: 1px solid black; width: 50px; height: 30px; margin-left: 100px;"></div>
Feedback (add actions identified to your quality improvement plan)	

Objective: Compliance with sharps safety measures

AreaAssessor.....Date.....

This audit tool has been designed to audit sharps safety measures in healthcare
Complete all the boxes below

	Questions	✓ Yes ✗ No				
1.	Sharps disposal containers have not been filled above the fill line (are not overflowing)					
2.	Sharps disposal containers are stored safely away from the public when full.					
3.	Sharps disposal containers are secured on the wall, bench or trolley when in use. <small>(AS 3816:2018 states wall mounted containers should be installed so that the height of the lowest point of the opening of the container is between 1.1m and 1.2m from the floor)</small>					
4.	Sharps are disposed of directly into a sharp's disposal container at point of use.					
5.	Engineered safety devices are used whenever possible. Examples: retractable or needless syringes and safety sub cut butterflies.					
6.	Patients/consumers who are independent with their glucose monitoring, insulin administration or other injectables are provided written instructions on safe waste disposal (<i>view instructions</i>)					
7.	HCW is aware of the action required following a needlestick exposure (<i>ask 5 HCW</i>) Examples: immediate first aid, report, counselling and testing, follow-up					
	HCW 1	HCW 2	HCW 3	HCW 4	HCW 5	
8.	HCW can identify where the safe handling of sharps policy/procedure is located (<i>ask 5 HCW</i>)					
	HCW 1	HCW 2	HCW 3	HCW 4	HCW 5	
Total number of correct answers		/16				

Compliance with sharps safety measures	<p>% score for compliance -</p> $\frac{\text{total number of yes answers}}{\text{total number of yes and no answers}} \times 100 = \%$	
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Feedback (add actions identified to your quality improvement plan)

Objective: To identify compliance with transmission based precautions

Area.....Assessor..... Date.....

Select a healthcare worker (HCW) caring for patients/consumers on transmission based precautions for up to a maximum of 5 patients/consumers to audit using this audit tool.
Complete all questions below

HCW – Healthcare worker	Patients/Consumers					Comments
	1	2	3	4	5	
	✓ Yes ✗ No					
Does the HCW know why the patient/consumer is in transmission based precautions. (<i>Ask the HCW for the organism name</i>). Examples: Influenza, Gastroenteritis, MRSA. C. Diff, CPE. Measles						
Has the patient/consumer been placed in a single room or sharing a room with a patient/consumer with the same organism						
For droplet or airborne precautions - is the patient/consumer in a negative pressure room with the door closed, or single room with door closed						
Is the correct transmission-based precaution signage displayed on the door						

HCW – Healthcare worker		Patients/Consumers					Comments
		1	2	3	4	5	
		✓ Yes ✗ No					
Is the relevant PPE available outside the room for HCW use	non-sterile gloves						
	disposable long sleeve gowns/plastic apron						
	mask (surgical for droplet or P2/N95 for airborne)						
Is PPE discarded before leaving the room							
Hand hygiene is performed immediately after removing all PPE							
Is there a current transmission based precautions care plan for the patient/consumer							
The patient/consumer has been given the “Extra Precautions” information booklet							
Total number of correct answers		/11	/11	/11	/11	/11	
Compliance with Transmission-based Precautions		% score for compliance - $\frac{\text{total number of yes answers}}{\text{total number of yes and no responses}} \times 100 = \%$					<input type="text"/>
Feedback (add actions identified to your quality improvement plan)							

Objective: Laundry practices meet Australian/New Zealand Standards

Site.....Assessor.....Date.....

This audit is only applicable to those facilities whose laundry (facility and/or patient/consumer laundry) is undertaken in-house

The purpose of this audit is to monitor the processes and practices of the laundry to ensure Australian/New Zealand Standard 4146: 2000 are met

Answer the questions below

	✓ Yes	✗ No	COMMENTS
Healthcare workers in the laundry have attended annual infection control education (<i>view attendance records</i>)			
Appropriate protective equipment (PPE) is worn by those working in the laundry, i.e. gloves and gowns when handling soiled linen			
Soiled linen is stored in areas separate from the clean linen storage area			
Linen trolleys are regularly cleaned (<i>view cleaning schedule</i>)			
Laundered linen is stored on clean shelves, trolleys or in baskets and covered when applicable			
Records are kept of each wash formula (type of linen washed, maximum wash load, wash program or process, duration of each operation, water level, water temperature, chemicals and their dosage, machine type and other relevant information)			
Total	/6	/6	

Compliance with laundry standards	<p>% score for compliance -</p> $\frac{\text{total number of yes answers}}{\text{total number of yes and no responses}} \times 100 = \%$ <div style="text-align: right; width: 50px; height: 30px; border: 1px solid black; background-color: #f4b084;"></div>
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Feedback (add actions identified to your quality improvement plan)


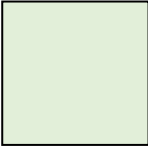
Objective: To identify if cleaning schedules or protocols are in place for the cleaning or patient/consumer care equipment to prevent infection transmission

Area Assessor..... Date.....

Audit key equipment to identify whether cleaning schedules or protocols are in place for this equipment and these have been completed

Complete boxes below

Equipment	There are schedules or protocols for the cleaning of the following patient/consumer care equipment					Comments
	✓ Yes	✗ No	N/A Not applicable	Schedules/Protocols		
				Observed	Completed	
Blood pressure cuffs						
Blood pressure machines						
Pulse oximeters						
Blood glucose monitoring machines						
Portable nebuliser machines						
Syringe drivers						
ECG machines						
Bladder scanners						
Treatment/dressing trolley						
Medication trolley						
Resuscitation trolley						
Lifting equipment						
Slings used for lifting equipment if not single use						
Hoist bathroom						
Pat slides						
Individual use commodes						
Shared commodes						
Reusable urinary catheter stands/brackets						
Individual use wheelchairs						
Shared wheelchairs						
Individual use walking frames						

	✓ Yes	✗ No	N/A Not applicable	Schedules/Protocols		Comments
				Observed	Completed	
Shared walking frames						
IV poles						
Infusion pumps						
Portable fans						
Weigh scales						
Other equipment not listed above						
Total Score						
Schedules or protocols for cleaning patient/consumer care equipment are in place to prevent infection transmission and have been completed	<p>% score for availability -</p> $\frac{\text{total number of yes and NA answers}}{\text{total number of yes, no and NA answers}} \times 100 = \%$ <div style="text-align: right; width: 100px;"></div> <p>% score for completed -</p> $\frac{\text{total number of yes and NA answers}}{\text{total number of yes, no and NA answers}} \times 100 = \%$ <div style="text-align: right; width: 100px;"></div>					
Feedback (add actions identified to your quality improvement plan)						

Objective: To identify healthcare worker knowledge on antimicrobial stewardship

AreaAssessor.....Date.....

This audit tool has been designed to audit healthcare worker (HCW) knowledge on Antimicrobial Stewardship

Complete all the boxes below

	Questions					
		✓ Yes	✗ No			
1.	<p>Does the HCW know if the organisation participates in NAPS - National Antimicrobial Point Prevalence Surveillance Surveys?</p> <div style="border: 1px solid black; padding: 5px; margin: 10px 0;"> This organisation participates in: <ul style="list-style-type: none"> <input type="checkbox"/> Hospital NAPS <input type="checkbox"/> Aged Care NAPS <input type="checkbox"/> Surgical NAPS <input type="checkbox"/> Quality Improvement NAPS </div>					
	HCW 1	HCW 2	HCW 3	HCW 4	HCW 5	
2.	Has the HCW seen a report from at least one those surveys identified above in the last 12 months					
	HCW 1	HCW 2	HCW 3	HCW 4	HCW 5	
3.	The HCW can identify where to access the Australian Therapeutic Guidelines: Antibiotics					
	HCW 1	HCW 2	HCW 3	HCW 4	HCW 5	
4.	The HCW has attended education on antimicrobial stewardship in the last 12 months (separately or within other sessions)					
	HCW 1	HCW 2	HCW 3	HCW 4	HCW 5	
5.	The HCW can locate the information sheet or brochure that is provided to the patient/consumer outlining antimicrobial use					
	HCW 1	HCW 2	HCW 3	HCW 4	HCW 5	

6.	The Incontinence Associated Dermatitis pathway is used to provide accurate information to the prescriber before antimicrobials/antifungals are ordered. Does the HCW know where to access a copy of the pathway				
	HCW 1	HCW 2	HCW 3	HCW 4	HCW 5
7.	Does the HCW know the organisations policy for switch from IV to oral antibiotics				
	HCW 1	HCW 2	HCW 3	HCW 4	HCW 5
Total number of correct answers		/35			

Healthcare worker knowledge on antimicrobial stewardship	% score for knowledge -	
	$\frac{\text{total number of yes answers}}{\text{total number of yes and no answers}} \times 100 = \%$	
Feedback (add actions identified to your quality improvement plan)		