

Infection Prevention and Control Compliance Audit: Clinical (wards)

ORGANISATION: **WARD/ AREA:** **DATE:**

Scoring Criteria: The sub criteria (with tick boxes) are individually assessed as compliant or not compliant (yes/no)

Full score (2): All three sub criterion are compliant.

Low score (1): Only two sub criterion are compliant.

Zero score (0): Only one or nil sub criteria are compliant.

Not applicable (2): Record the reason if N/A is not an existing option.

Section 1: Hand Hygiene (HH)		Rating
1.1.	The available range of HH products includes: <ul style="list-style-type: none"> <input type="checkbox"/> Alcohol based hand rubs (ABHR) is available at the bedside (<i>Preferably ABHR at the foot of every bed, or within each patient cubicle</i>). ³ (page 13) <input type="checkbox"/> Neutral soap is available at clinical hand basins. ^{1, 4} (Section 820.1.15) <input type="checkbox"/> Antimicrobial soap is available at clinical handbasins. ^{1, 4} (Section 820.1.15) 	/2
1.2.	<ul style="list-style-type: none"> <input type="checkbox"/> All available HH products are chemically compatible. ¹: (B1.1.3) <i>Hint: moisturisers brought in by staff from domestic market may not be compatible with supplied products and should not be evident.</i> <input type="checkbox"/> Hand washing solutions are dispensed in non-refillable containers. ⁴ (page 1043) <input type="checkbox"/> Signs promoting hand hygiene to HCW's and visitors are clearly displayed. ^(3:3.10.1 pg 34) 	/2
1.3.	Clinical hand basins are readily available and conveniently located throughout the ward. ⁴ (page 77) <i>(i.e. generally HCW's should be no more than ten metres from a hand basin).</i> <ul style="list-style-type: none"> <input type="checkbox"/> <i>Not Applicable (this is a residential aged care unit – score 2)</i> <input type="checkbox"/> Each single bed room has a clinical hand basin. ⁴ (pages 64, 77) <input type="checkbox"/> Each 2 bed room has a clinical hand basin. ⁴ (page 67) <input type="checkbox"/> Each 4 bed room has a clinical hand basin. ⁴ (page 68) 	/2
1.4.	<ul style="list-style-type: none"> <input type="checkbox"/> ICU - one clinical hand basin per enclosed room and one per two open bays. ⁴ (page 1045) <i>(Not ICU <input type="checkbox"/> N/A)</i> <input type="checkbox"/> Emergency Department/ Urgent Care - one clinical hand basin per four open bays. ⁴ (page 1045) <i>(Not ED/UC <input type="checkbox"/> N/A)</i> <input type="checkbox"/> Clinical hand basins are separate from patient bathrooms. ¹: (C6.2.2); and ⁵ (page 12) 	/2
1.5.	<ul style="list-style-type: none"> <input type="checkbox"/> Clinical hand basin taps are operated by hands free operating system (elbow, foot, or electronic). ⁴ (page 1043) <input type="checkbox"/> The waterspout in clinical handbasins are positioned so that the water flow hits the surface of the basin adjacent to the outlet (not directly down the drain) to prevent any splashback onto the user. ⁴ (page 1044) and ⁵ (page 18) <input type="checkbox"/> Disposable paper towels or single use cloth towels are available at all clinical hand basins. ¹ and ⁴ (pages 161 & 1042) 	/2
1.6.	<ul style="list-style-type: none"> <input type="checkbox"/> There is no possibility of splash contamination from the hand basin onto any clean, dry goods stored nearby ⁴ (page 293) <input type="checkbox"/> There is no evidence of artificial nails on clinical HCW's (<i>Visual check</i>). ¹: (B1.1.4) <input type="checkbox"/> There is no evidence of clinical HCW's wearing hand or wrist jewellery (e.g. watches, rings, bangles) ¹: (B1.1.4) (<i>Visual check: all clinical HCW's seen during this audit. NB: a single plain band is allowed</i>). 	/2
Total Section 1		/12

2.	Section 2: General (vaccine storage, food services, linen handling, & waste management)	Rating
2.1.	<input type="checkbox"/> Not applicable – Vaccines are not stored in this fridge (score 2). <input type="checkbox"/> Refrigerators used to store vaccines have the temperature (minimum and maximum) recorded twice daily. ¹¹ (page 15) <input type="checkbox"/> Refrigerators storing vaccines have temperature maintained between +2°C to +8°C ¹¹ . (check the temperature records) <input type="checkbox"/> There is a documented procedure for action to be taken when the temperature ranges have been breached. ¹¹	/2
2.2.	<input type="checkbox"/> Non food items are not stored with food or in contact with food (hint: check the freezer for patient hot cold packs). ¹⁴ (3.2.3 clause 15[1] and 15[2]). <input type="checkbox"/> Refrigerators for storing medications are cleaned weekly (and there is a documented schedule). ¹ (page 162) <input type="checkbox"/> Drug refrigerator is dedicated to this purpose. 6: (page 14) (hint: check there is no food or specimens stored in the drug fridge).	/2
2.3.	Refrigerators for hospital supplied food (for patients). <i>NB: this criterion excludes fridges provided for staff use in staff rooms.</i> <input type="checkbox"/> Are monitored and operating below 5°C with documentation (sighted evidence required for full compliance) ¹³ (clause 5[c]) <input type="checkbox"/> There is a weekly documented cleaning schedule for the refrigerator. ¹ (page 162) and ¹³ (clause 5[c]) <input type="checkbox"/> All food in the refrigerator is wrapped to protect it from contamination. ¹² (page 27) and label affixed to the packaging material with preparation or expiry date/time. ¹² (page 77)	/2
2.4.	<input type="checkbox"/> The ice machine has a documented cleaning schedule (as per manufacturer’s instructions). ¹ :(C6.2.4) and ¹⁶ <input type="checkbox"/> The ice machine has a documented maintenance schedule. ¹ :(C6.2.4) and ¹⁶ <input type="checkbox"/> Ice is not handled directly by hand - a smooth-surface ice scoop is used to dispense ice. ¹ :(C6.2.4) and ¹⁶	/2
2.5.	<input type="checkbox"/> The ice scoop is only used for dispensing the ice (no other purpose). ¹ :(C6.2.4) and ¹⁶ <input type="checkbox"/> The scoop is stored either on a chain short enough that it does not touch the floor, or on a clean, hard surface. ¹ :(C6.2.4) and ¹⁶ <input type="checkbox"/> The scoop is NOT stored in the ice bin between uses. ¹ :(C6.2.4) and ¹⁶	/2
2.6.	<input type="checkbox"/> Clean and soiled linen are physically separated. ¹ : (B1.9), and ¹⁰ <input type="checkbox"/> Used linen must not be rinsed or sorted in patient-care areas or washed in domestic washing machines. ¹ : (B1.9) <input type="checkbox"/> Linen that is heavily soiled/wet, is contained in suitable leak-proof bags. ¹⁰ : (section 2.4.1)	/2
2.7.	<input type="checkbox"/> Clean linen is stored to protect it from environmental contaminants such as dust, moisture & vermin. ¹⁰ : (section 2.6.1) <input type="checkbox"/> Clean linen is stored to protect it from excessive handling or traffic. <input type="checkbox"/> Clean linen is not left in patient’s environment.	/2

Total Section 2

/14

3.	Section 3: Occupational Health and Safety (PPE, sharps management – ask available HCW’s about their practices)	Rating
3.1.	Clinical Gloves –are worn as a single use item. ^{1: (B1.2.5 & table B1.7)} (If no procedure ask staff member) <ul style="list-style-type: none"> <input type="checkbox"/> For each invasive procedure. <input type="checkbox"/> For contact with non intact skin or mucous membranes. <input type="checkbox"/> For activities that have been assessed as having a risk of exposure to blood, body substances, secretions and excretions. 	/2
3.2.	<ul style="list-style-type: none"> <input type="checkbox"/> Gloves are removed as soon as the procedure is completed. ^{1: (B1.2.5 pg 54)} <input type="checkbox"/> Clinical gloves are readily available in a range of sizes. <input type="checkbox"/> Sterile gloves are used for contact with key sites and key parts during surgical (complex) aseptic procedures. ^{1: (B1.7.2)} 	/2
3.3.	<ul style="list-style-type: none"> <input type="checkbox"/> Face and eye protection is available and readily accessible to HCW’s in clinical settings. ^{1: (B1.2.4)} <input type="checkbox"/> Face and eye protection (multi use goggles and/or shields) is clean and in working condition (<i>visual check</i>). <input type="checkbox"/> Eye protection is available in the blood and body fluid spill kit (visual check of designated kit). ^{1: (B1.4.3)} 	/2
3.4.	<ul style="list-style-type: none"> <input type="checkbox"/> Surgical masks are available on the ward. <input type="checkbox"/> Surgical masks are dispensed from the original container at point of use. <input type="checkbox"/> N95/P2 mask is available. (<i>NB: that if the ward does not have a negative pressure room; then a centralised storage location at the facility is acceptable. e.g. stores</i>). 	/2
3.5.	<ul style="list-style-type: none"> <input type="checkbox"/> Impervious Gowns/ Aprons are available in the ward. <input type="checkbox"/> Impervious Gowns/ Aprons are used for a single procedure or episode of patient care, and then discarded. <input type="checkbox"/> Impervious Gowns/ Aprons are removed when exiting the patient room / bed zone. 	/2
3.6.	<ul style="list-style-type: none"> <input type="checkbox"/> Sharps are not passed directly from hand to hand between HCW’s. ^{7: (B1.3.1 and B1.3.2)} <input type="checkbox"/> Used disposable sharps are discarded into an approved sharps container at the point of use. ^{7: (B1.3.1 and B1.3.2)} <input type="checkbox"/> The user of the sharp is responsible for its immediate and safe disposal. ^{7: (B1.3.1 and B1.3.2)} (<i>i.e. they are not left on the trolley for other HCW’s to clean up</i>). 	/2
3.7.	<ul style="list-style-type: none"> <input type="checkbox"/> Needles not recapped unless an approved safety system is used. ^{7: (B1.3.1 and B1.3.2)} <input type="checkbox"/> Needles are not bent or broken. ^{7: (B1.3.1 and B1.3.2)} <input type="checkbox"/> Sharps used for cytotoxic therapy are discarded into purple cytotoxic sharps containers only. ⁶ 	/2

Total Section 3

/14

4.	Section 4: Transmission Based Precautions	Rating
4.1.	<p><i>Core elements of transmission based precautions.</i> ^{1: (B2)}</p> <ul style="list-style-type: none"> <input type="checkbox"/> HCW's can identify where the PPE for implementing transmission based precautions is stored. (<i>Ask a HCW to show location of PPE</i>). <input type="checkbox"/> Infection Prevention and Control policies are readily accessible on the ward (<i>ask a clinical HCW to open a policy</i>). ^{1: (C1.3.1)} <input type="checkbox"/> Information (advice/ education) using brochures, pamphlets; or information sheets related to specific and general healthcare associated infection prevention is available for patients and families (examples include. <i>MRSA, C. difficile, respiratory etiquette</i>). ^{1: (A3.1 and C1.3.2), 18} 	/2
4.2.	<ul style="list-style-type: none"> <input type="checkbox"/> Transmission based precautions (contact, droplet and airborne) are implemented when infectious agents are known/ suspected. ^{1: (B2.1.2)} <input type="checkbox"/> The room's entry is clearly signed indicating the precautions and PPE required for safe entry (<i>ask HCW to show where signage is stored if no rooms are currently in use for isolation purposes</i>). ^{1: (B2.2.3 and 3.2.2)} <input type="checkbox"/> Patient notes and bedside charts are kept outside the room. ^{1: (B2.2.3)} 	/2
4.3.	<p>Class S Rooms – (standard pressure) single rooms used for contact and droplet precautions have:</p> <ul style="list-style-type: none"> <input type="checkbox"/> A clinical hand basin with hands free operation in the room.⁷ <input type="checkbox"/> An ensuite bathroom that is not shared with another room.⁷ <input type="checkbox"/> A self closing door. ^{1: (A1.2.2) and 7} 	/2
4.4.	<p>Class N rooms – (negative pressure).</p> <ul style="list-style-type: none"> <input type="checkbox"/> <i>Not applicable – there are no class N rooms on this ward (score 2).</i> <input type="checkbox"/> The room has a self closing door.⁷ (The door is kept closed when occupied by a patient requiring airborne precautions). <input type="checkbox"/> N95/P2 high filtration masks are available in the ward. ^{1: (B2.4)} <input type="checkbox"/> Gauges or readouts of the pressures are prominently located outside the room and there is an audible alarm in case of failure.⁷ 	/2
4.5.	<p>Class N rooms – (negative pressure). When occupied; and airborne precautions have been implemented.</p> <ul style="list-style-type: none"> <input type="checkbox"/> <i>Not applicable – there are no negative pressure rooms in this ward (score 2).</i> <input type="checkbox"/> Airborne Precautions: Air pressures are monitored and recorded by nursing staff (at least daily).^{7: (page 23)} <input type="checkbox"/> Airborne Precautions: When entering the patient-care environment HCW's wear a correctly fitted N95/P2 mask. ^{1: (B2.4.3)} <input type="checkbox"/> Airborne Precautions: HCW's demonstrate knowledge and ability to complete a fit check. ^{1: (B2.4.3)} (<i>ask for a demonstration</i>) <p><i>Background: A fit check must be conducted every time a N95/P2 mask is put on.</i></p>	/2
4.6.	<p><i>Use of chemical disinfectants for transmission based precautions.</i> ^{1: (table B1.11 & B5.1) & 8}</p> <ul style="list-style-type: none"> <input type="checkbox"/> The chemical disinfectants are TGA registered as a <i>hospital grade disinfectant</i>. <input type="checkbox"/> The chemical disinfectant has label claims specifying its effectiveness against specific infectious organisms. ^{1: (A1.2.2)} (<i>Hint – check label and safety data sheets for information</i>) ^{1: (B1.11)} <input type="checkbox"/> Chemical disinfectants are used in accordance with manufacturer's instructions. ^{1: (table B1.11)} 	/2

Total Section 4:

/12

5.	Section 5: Environment and Cleaning	Rating
5.1.	<input type="checkbox"/> Floor surfaces in clinical areas are constructed from impervious material, smooth, easy to clean and in good repair. ^{1: (C6.2.2)} <input type="checkbox"/> There is an environmental cleaning schedule in place that has capacity for spot cleaning as required. ¹ <input type="checkbox"/> The most recent cleaning standards audit report indicates a score above the required AQL. <i>Hint: The environmental services manager will have this information.</i>	/2
5.2.	<input type="checkbox"/> Vacuum cleaners are fitted with a High Efficiency Particulate Air (HEPA) filter. ^{1: (B1.4.2)} <input type="checkbox"/> HEPA filters on vacuum cleaners are changed in accordance with the manufacturer's instructions. ^{1: (B1.4.2)} <input type="checkbox"/> The exhaust on vacuum cleaners is directed away from the floor to minimise dust dispersion. ^{1: (B1.4.2)}	/2
5.3.	<input type="checkbox"/> Buckets are emptied after use, washed with detergent and warm water and then stored dry. ^{1: (B1.4.2)} <input type="checkbox"/> Mops and cloths are single use or washed after use and then stored dry. ^{1: (B1.4.2 pg 72)} <input type="checkbox"/> The documented cleaning schedule identifies the products to be used for specific purposes and surfaces.	/2
5.4.	<input type="checkbox"/> Frequently touched surfaces are cleaned at least daily with a detergent solution. ^{1: (B1.4.2)} (<i>Hint: Ask the cleaner about frequency?</i>) <input type="checkbox"/> Surfaces are visibly clean without evidence of soiling. (<i>Visual check of ward surfaces and stored procedure trolleys</i>). ^{1: (B1.4.2)} <input type="checkbox"/> General surfaces are cleaned immediately after spillage or contamination. ^{1: (B1.4.2)} (<i>Ask nurse or cleaner what happens</i>)	/2
5.5.	<i>Blood and body fluid spills</i> are cleaned as soon as practicable. ^{1: (B1.4.3)} <input type="checkbox"/> Blood and body fluid spill kit (commercial or in house) is readily available for use (visual verification). <input type="checkbox"/> Small spills are managed by cleaning with detergent & water solution or detergent wipe. <input type="checkbox"/> Waste with visible blood is disposed of into clinical waste bin.	/2
5.6.	<i>Large spills:</i> ^{1: (B1.4.3)} <input type="checkbox"/> Visible organic matter is removed with an absorbent material (e.g. disposable paper towels). <input type="checkbox"/> Broken glass or sharp material is removed with forceps. <input type="checkbox"/> Excess liquid is soaked up using an absorbent clumping agent (e.g. absorbent granules).	/2
5.7.	<input type="checkbox"/> Separate bins (clearly labelled) are available for clinical waste stream. ⁶ <input type="checkbox"/> Sharps containers are mounted securely (on a wall, surface or trolley) to prevent tipping. ^{1: (B1.3.2)} <input type="checkbox"/> Replacement sharps containers are readily available.	/2
TOTAL SECTION 5		/14

6.	Section 6: Instrument reprocessing and storage of sterile stock	Rating
6.1.	<p><i>Dirty Utility rooms</i> ^{1: (B1.5.3), 4 & 9}</p> <ul style="list-style-type: none"> <input type="checkbox"/> There is a dedicated dirty utility/ pan room for cleaning reusable items and equipment. <input type="checkbox"/> PPE is available: disposable gloves, disposable aprons, face protection, eyewear and mask or face shield. <input type="checkbox"/> The room has a directed workflow pattern from ‘dirty’ to ‘clean’. 	/2
6.2.	<ul style="list-style-type: none"> <input type="checkbox"/> The room has a clinical hand basin (or ABHR is available at the entry/exit of the dirty utility room). ^{4 & 9} <input type="checkbox"/> Instruments are cleaned (gross soil is removed) at the ward before transfer to the sterilising department. ^{1: (B1.5.3) & 9} <input type="checkbox"/> Puncture proof and leak resistant containers with lids are used to transfer soiled (or used) items to the sterilising department. ⁹ 	/2
6.3.	<p><i>Sterile storage areas</i></p> <ul style="list-style-type: none"> <input type="checkbox"/> There is a dedicated sterile storage area, which is controlled to prevent contamination. ⁹ <input type="checkbox"/> Access to the sterile store room is restricted. ⁹ <input type="checkbox"/> All stock is protected from direct sunlight. ⁹ 	/2
6.4.	<ul style="list-style-type: none"> <input type="checkbox"/> There is a system of stock rotation. ⁹ <input type="checkbox"/> Open shelving: All items are stored above floor level by at least 250mm. ⁹ <input type="checkbox"/> Open shelving: All items are stored at least 440mm from ceiling fixtures. ⁹ 	/2
6.5.	<ul style="list-style-type: none"> <input type="checkbox"/> There is regular cleaning schedule for the sterile stock storage area. ⁹ <input type="checkbox"/> The storage area is free of dust, insects and vermin ⁹. <input type="checkbox"/> Hand hygiene is performed prior to entry to the sterile store room ⁹. 	/2
6.6.	<ul style="list-style-type: none"> <input type="checkbox"/> Storage containers, trolleys and cupboards are clean, dry and in good condition. ⁹ <input type="checkbox"/> Commercial dispenser boxes are not topped up or reused. ⁹ <input type="checkbox"/> All surfaces including walls, floors and ceiling lights are easy to clean, non porous and smooth. ⁹ 	/2
Total section 6		/12

Results Table

Section	Actual Score	Possible Score	Compliance rate
1. Hand hygiene		12	%
2. General		14	%
3. Occupational health and safety		14	%
4. Transmission based precautions		12	%
5. Environment and cleaning		14	%
6. Instrument reprocessing and storage of sterile stock		12	%
Total Overall Compliance			
Actual Score:	Possible Score:	78	Compliance %

Reference List

1. Australian Government National Health and Medical Research Council (NHMRC) and Australian Commission on Safety and Quality in Health Care (2010) Australian Guidelines for the Prevention and Control of Infection in Healthcare (<http://www.nhmrc.gov.au/node/30290>)
2. Victorian Government, Hand Hygiene target VICNISS <http://www.vicniss.org.au/HCW/HandHygiene.aspx>
3. Commonwealth of Australia, *Hand Hygiene Australia 5 moments for Hand Hygiene*, April 2013 http://www.hha.org.au/UserFiles/file/Manual/HHAManual_2010-11-23.pdf
4. Australasian Health Infrastructure Alliance (AHIA), *Australasian HFG, Australasian Health Facility Guidelines (HFG) version 4, Revision V4.0, 16-Dec-10*, http://www.healthfacilityguidelines.com.au/AusHFG_Documents/Guidelines/Archive/AusHFG%20Complete%20Version%204.pdf
5. Standards Australia, *HB 260-2003 Handbook Hospital acquired infections- engineering down the risk*
6. EPA Victoria *Industrial Waste Resource Guidelines Clinical and Related Waste – Operational Guidance* <http://www.epa.vic.gov.au/~media/Publications/IWRG612%201.pdf> (retrieved on 27/12/13)
7. Victorian Government (Victorian Advisory Committee on Infection Control VACIC) *Guidelines for the classification and design of Isolation rooms in Healthcare Facilities*. VACIC 2007
8. Therapeutic Goods Administration (TGA) Therapeutic Goods Order No. 54 STANDARD FOR DISINFECTANTS AND STERILANTS February 2009 available at <http://www.tga.gov.au/docs/html/tgo/tgo54.htm>
9. Standards Australia and Standards New Zealand, *AS/NZS 4187:2003 “Cleaning, disinfecting and sterilizing reusable medical and surgical instruments and equipment, and the maintenance of associated environments in health care facilities”*.
10. Standards Australia and Standards New Zealand, *Australian/New Zealand Standard AS/NZS 4146:2000 Laundry Practice*.
11. Australian Government Department of Health and Ageing 2nd Edition (2013) *National vaccine storage guidelines, Strive for Five* [http://www.health.gov.au/internet/immunise/publishing.nsf/Content/59F63C79DAFAFB38CA257B020002C371/\\$File/strive-for-5-guidelines.pdf](http://www.health.gov.au/internet/immunise/publishing.nsf/Content/59F63C79DAFAFB38CA257B020002C371/$File/strive-for-5-guidelines.pdf) last accessed on 27/12/13
12. Australia New Zealand Food Authority *Safe Food Australia 2nd Edition, January 2001 A Guide to the Food Safety Standards* Chapter 3 of the Australia New Zealand Food Standards Code
13. Food Standards Australia New Zealand: *Food safety Programs a guide to Standard 3.2.1 Food Safety Programs* 2007 <http://www.foodstandards.gov.au/>
14. Australia New Zealand Food Standards Code - Standard 3.2.2 - Food Safety Practices and General Requirements (Australia Only) 2012
15. New South Wales Infection Control Resource Centre *Safety of ice machines in health care facilities* Information sheet.
16. Victorian Government Department of Human Services [DHS], *Design guidelines for hospitals and day procedure centres* retrieved from <http://www.healthdesign.com.au/vic.dghdp/guidelines.htm> on 13/3/14.
17. NSQHS: *National Safety and Quality health Service Standards* September 2011 <http://www.safetyandquality.gov.au/wp-content/uploads/2011/01/NSQHS-Standards-Sept2011.pdf>