

Infection Prevention Control (IPC) Hygiene Audit Beacon Hospital		Yes	No	N/A	LOCATION:	DATE:
<b>I</b>	<b>Auditor:</b>				<b>Validator:</b>	
<b>(a)</b>	<b>General environment</b>	<b>Yes</b>	<b>No</b>	<b>N/A</b>	<b>Comments</b>	
<b>1</b>	Adequate facilities for hand hygiene are available in accordance with national guidance (refer to hand hygiene audit tool for details)					
<b>2</b>	Bed frames are clean and free from dust					
	<b>The following are free of splashes, soil, film, dust, fingerprints, and spillage:</b>	<b>Yes</b>	<b>No</b>	<b>N/A</b>	<b>Comments</b>	
<b>3a</b>	Lockers					
<b>3b</b>	Chairs and stools					
<b>3c</b>	Tables					
	<b>The following pieces of equipment are in a good state of repair:</b>	<b>Yes</b>	<b>No</b>	<b>N/A</b>	<b>Comments</b>	
<b>4a</b>	Lockers					
<b>4b</b>	Chairs					
<b>4c</b>	Tables					
<b>5</b>	All chairs and stools in clinical areas are covered in an impermeable material e.g. vinyl					
<b>6</b>	Floors including edges and corners are free of dust and grit.					
<b>7</b>	All high and low surfaces are free from dust and cobwebs					
<b>8</b>	Curtains and blinds are free from stains, dust and cobwebs					
<b>9</b>	There is evidence of an effective pre-planned programme for curtain changes					
<b>10</b>	Fans are clean and free from dust					
<b>11</b>	Air vents are clean and free from excessive dust					
	<b>The following pieces of equipment are in a good state of repair:</b>	<b>Yes</b>	<b>No</b>	<b>N/A</b>	<b>Comments</b>	
<b>12</b>	Patient call bells are clean and free from debris					
<b>13</b>	Ear phone pads are single use and changed between patients					
	<b>Ward environment cont.</b>	<b>Yes</b>	<b>No</b>	<b>N/A</b>	<b>Comments</b>	
<b>14</b>	Reusable ear phones are cleaned between patients					
<b>15</b>	Patient audio visual systems are clean and free of dust and marks					
<b>16</b>	Work station equipment in clinical areas are visibly clean e.g. phones, computer keyboards					
<b>(b)</b>	<b>clean store</b>	<b>Yes</b>	<b>No</b>	<b>N/A</b>	<b>Comments</b>	
<b>17</b>	There is an identified area for the storage of clean and sterile equipment					
<b>18</b>	The area is clean and there are no inappropriate items of equipment					
<b>19</b>	Hand hygiene facilities are available in the clinical room/clean store					
<b>20</b>	Floors including edges and corners are free of dust and grit.					
<b>21</b>	All high and low surfaces are free from dust and cobwebs					
<b>22</b>	Shelves, bench tops and cupboards are clean inside and out, and are free of dust and spillage					

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23	All products are stored above floor level					
(c)	<b>Bathrooms/washrooms</b>	Yes	No	N/A	Comments	
24	Bathrooms/washrooms are clean					
25	There is no evidence of inappropriate storage of communal items e.g. single use creams, talcum powder					
26	Bathrooms are not used for equipment storage					
27	Baths, sinks and accessories are clean					
28	Wall tiles and wall fixtures (including soap dispensers and towel holders) are clean and free from mould					
29	Shower curtains and bath mats are free from mould, clean and dry					
30	There is evidence that baths, showers and sinks taken out of use have planned provision for running the water weekly					
31	Appropriate cleaning materials are available for staff to clean the bath between use (and there is information regarding its whereabouts)					
32	Floors including edges and corners are free of dust and grit.					
(d)	<b>Toilets</b>	Yes	No	N/A	Comments	
33	The toilet, hand wash sink, handrails and surrounding area is clean and free from extraneous items					
34	Floors including edges and corners are free of dust and grit					
35	Hand washing facilities are available including soap and paper towels					
36	There is a facility for sanitary waste disposal					
(e)	<b>Dirty utility</b>	Yes	No	N/A	Comments	
37	A dirty utility is available					
38	A separate sink is available for decontamination of patient equipment					
39	A sluice hopper is available for the disposal of body fluids					
40	The integrity of fixtures and fittings are intact					
41	Separate hand washing facilities are available including soap and paper towels					
42	The room is clean and free from inappropriate items					
43	The floor is clean and free from spillage					
44	bed pan washer is clean and in working order					
45	Shelves are clean inside and out and free of dust, litter or stains					
(f)	<b>Housekeepers room</b>	Yes	No	N/A	Comments	
46	Floors including edges and corners are free of dust and grit					
47	Equipment used by the domestic staff is clean, well maintained and stored in a locked area					
48	Machines used for floor cleaning are clean and dry					
49	No inappropriate materials or equipment are stored in the domestic's room					

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50	Products used for cleaning and disinfection comply with policy and are used at the correct dilution					
51	Diluted products are discarded after 24 hours					
52	Personal protective clothing is available and appropriately used					
53	Mop head cloths are laundered daily					
54	Information on the colour coding system in use is available in the domestic's room					
55	Cleaning equipment is colour coded					
56	Hand hygiene facilities are available for domestic use					
<b>Totals</b>					<b>TOTAL QUESTIONS HERE 60</b>	
2	<b>Ward/Departmental Kitchens</b>					
	<b>Ward kitchens</b>	<b>Yes</b>	<b>No</b>	<b>N/A</b>	<b>Comments</b>	
1	The floor is free of dust, grit, litter, marks, water or other liquids					
2	Inaccessible areas (edges, corners and around furniture) are free of dust, grit, lint and spots					
3	There are no inappropriate items or equipment in the kitchen					
4	There is no evidence of infestation or animals in the kitchen					
5	Insect zap present					
6	There is a policy regarding patient and visitor access to the kitchen					
7	Cleaning materials used in the kitchen are identifiable (e.g. colour coded) and are stored separately to other ward cleaning equipment and away from food					
8	Hand wash sink, liquid soap and disposable paper towels are available					
9	Hands are decontaminated to serve patient meals and drinks					
10	Fixtures and fittings are in a good state of repair					
11	Fixtures, surfaces and appliances are free of grease, dirt, dust, deposits, marks, stains and cobwebs					
12	Shelves, cupboards and drawers are clean inside and out and are free from damage, dust litter or stains and in a good state of repair					
13	Kitchen trolleys are clean and in a good state of repair					
14	Refrigerators/freezers are clean and free of ice build up					
15	There is a thermometer in the fridge and freezer					
16	There is evidence that daily temperatures are recorded and appropriate action is taken if standards are not met (refrigerator temperature must be less than 8o c or as local policy Freezer temperature –18oc)					

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17	Patient food in the fridge is labelled with name and date					
18	There are no drugs/blood for transfusion or pathology specimens in the fridge					
19	Microwaves are visibly clean					
20	Where local policy allows a microwave to be used to heat patient food a temperature probe is used to ensure correct temperature has been reached					
21	Toasters are visibly clean					
22	Milk coolers are visibly clean					
23	Milk is stored under refrigerator conditions					
24	Bread is stored in a clean bread bin					
25	All food products are within their expiry date					
26	All opened food is covered or stored in containers					
27	Water coolers and ice machines for patient use are mains supplied					
28	Water coolers are visibly clean and on a pre-planned maintenance programme					
29	Ice machines are visibly clean and on a pre-planned maintenance programme and cleaning schedule is in place					
30	There is a satisfactory system for cleaning crockery and cutlery such as central wash-up or dishwasher, achieving disinfection temperatures evidenced by a maintenance programme					
31	Disposable paper roll is available for drying equipment and surfaces					
32	Waste bins are foot operated and in good working order					
33	Waste bins are clean and labelled 'for non-risk waste'					
<b>Totals</b>					<b>TOTAL QUESTIONS HERE 33</b>	
<b>3 Linen</b>						
<b>Ward management of linen</b>		<b>Yes</b>	<b>No</b>	<b>N/A</b>	<b>Comments</b>	
1	Clean linen is stored in a clean designated area separate from used linen (not in the sluice or bathroom)					
2	Clean linen is free from stains (randomly check linen)					
3	Clean linen store is clean and free from dust					
4	Clean linen store is free from inappropriate items					
5	Linen is segregated in appropriate colour coded bags according to policy					
6	Bags are less than 2/3 full and are capable of being secured					
7	Bags are stored correctly prior to disposal					
8	Linen skips and the appropriate bags are taken to the area required. (Staff are not carrying soiled linen or leaving it on the floor)					

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9	Gloves and apron are worn when handling contaminated linen					
<b>Totals</b>					<b>TOTAL QUESTIONS HERE 9</b>	
4	<b>Departmental Waste handling</b>					
	<b>Waste handling</b>	<b>Yes</b>	<b>No</b>	<b>N/A</b>	<b>Comments</b>	
1	Healthcare waste posters and/or a waste policy identifying waste segregation are available in all areas					
2	All bags are tied, labelled and secured before leaving the place of generation (e.g. ward)					
3	All waste bins are enclosed to minimise the risk of injury					
4	All waste bins in the area are foot operated, lidded and in good working order					
5	All waste bins are visibly clean					
6	Supplies of bins labelled as "Risk-Waste", "Non-Risk waste" or "Recyclable" are available					
7	Nursing staff are aware of waste segregation procedures (Randomly question a Nurse)					
8	Medical staff are aware of waste segregation procedures (Randomly question a Doctor)					
9	Allied Health Care Professionals (AHP) are aware of waste segregation procedures (Randomly question an AHP)					
10	Ancillary staff are aware of waste segregation procedures (Randomly question an Ancillary Staff member)					
11	Staff are using correct waste bags for household, glass, aerosols, batteries and clinical/hazardous waste (Visibly check bin contents)					
12	All prescription only medicines must be disposed of as hazardous/special waste and the bin labelled accordingly					
13	Glass and aerosol boxes are not used for prescription only medicine bottles					
14	Waste bags are removed at least daily					
15	There is no transfer of waste from one bag to another					
16	There are no overfilled bags. Bags are no more than 2/3 full					
17	Waste bags are not tied onto containers/trolleys					
18	Suction waste must be disposed of in a manner which prevents spillage e.g. canisters/liners are disposed of into rigid leak-proof containers or suction waste has been solidified with a gelling agent					
19	UN approved rigid burn bins are available for disposal of body parts, equipment etc.					

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20	Staff have attended a training session which includes the correct and safe disposal of clinical waste					
21	Internal storage is inaccessible to the public or locked					
22	Bags are not observed in corridors. They are stored in an appropriate holding area					
<b>Totals</b>					<b>TOTAL QUESTIONS HERE 22</b>	
<b>5 Safe handling &amp; disposal of sharps</b>						
<b>(a) All sharps bin</b>		<b>Yes</b>	<b>No</b>	<b>N/A</b>	<b>Comments</b>	
1	The bins in use comply with national standards (UN 3291, BS 7320)					
2	Bins have not been filled above the fill line					
3	Bins are free from protruding sharps					
4	All bins have been assembled correctly					
5	All sharps bins are labelled and signed according to hospital policy					
6	Sharps bins are stored safely, away from the public and out of reach of children					
7	Bins are stored appropriately off the floor					
8	Sharps bins are used in accordance with ergonomic manual handling principles i.e. using brackets					
9	The temporary closure mechanism is used when bins are not in use					
10	Once full the bin aperture is locked					
11	Sealed and locked bins are stored in a locked room, cupboard or container, away from public access					
<b>(b) Safe practice</b>						
12	An empty sharps bin is available on the cardiac arrest trolley					
13	The sharps bin on the cardiac arrest trolley is stored safely					
14	Sharps trays with integral sharps bins are available for use					
15	Sharps trays are compatible with the sharps bins in use					
16	Sharps trays in use are visibly clean					
17	Sharps are disposed of directly into a sharps bin at the point of use (i.e. medicine trolleys and laboratory equipment)					
<b>(b) Safe practice</b>						
18	Inappropriate re-sheathing of needles does not occur. Observe or question a member of staff.					
19	Needles and syringes are discarded into a sharps bin as one unit					
<b>(c) Policy awareness</b>						

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20	Nurse/clinical manager in charge is aware of the action required following an inoculation injury. They should include immediate first aid, informing the manager, occupational health or A&E, completion of an incident form and describe the action for high risk injuries involving blood borne viruses (Question the nurse/clinical manager in charge)							
21	Question a member of the Medical Staff							
22	Allied Health Care Professionals are aware of the first aid action required following an inoculation injury (Question a member of AHP staff)							
23	Ancillary staff are aware of the first aid action required following an inoculation injury (Question a member of Ancillary staff)							
24	Students are aware of the action required following an inoculation injury. (Question a member of staff)							
25	Staff can identify where the safe handling of sharps policy is located							
26	There is a policy and or poster available for the management of an inoculation injury							
	<b>Totals</b>						<b>TOTAL QUESTIONS HERE 26</b>	
<b>6</b>	<b>Management of patient equipment (general)</b>							
	<b>Knowledge of decontamination</b>	<b>Yes</b>	<b>No</b>	<b>N/A</b>	<b>Comments</b>			
1	A written comprehensive decontamination policy, approved by the ICT/ICC is available to all staff							
2	Staff are aware of the need to contact infection control for advice when purchasing new equipment							
3	Manufacturers' instructions are available for the decontamination of newly purchased equipment							
4	Staff can state the procedure for decontamination of commonly used patient care equipment e.g. commodes, mattresses, IV stands							
5	Staff can describe the symbol used to indicate single use items							
6	Staff are aware of the need for decontamination and a certificate before equipment is maintained/serviced/ repaired whether within the area or transferred from the area							
7	Local decontamination of reusable surgical instruments is not undertaken in clinical areas. (Check if bench top autoclaves are used. If they are in use refer to the NHS Estates Decontamination Audit Tools.)							

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8	Used instruments are safely stored in an appropriate container prior to collection for decontamination in CDU					
9	The responsibility for the cleaning of dedicated patient equipment is clearly defined, e.g., bed frames, IV stands, commodes					
	<b>The following general equipment is visibly clean, check:</b>	<b>Yes</b>	<b>No</b>	<b>N/A</b>	<b>Comments</b>	
10a	IV stands					
10b	IV pumps/syringe drivers					
10c	Cardiac monitors					
	<b>The following general equipment is visibly clean, check:</b>	<b>Yes</b>	<b>No</b>	<b>N/A</b>	<b>Comments</b>	
10d	Near patient testing equipment e.g. blood gas machines					
10e	Dressing trolleys					
10f	Blood pressure cuffs					
10g	Pillows					
10h	Mattresses					
10i	Cot sides					
10j	Wheelchairs and cushions					
10k	Oxygen saturation probes					
11	Patient wash bowls are decontaminated appropriately between patients and are stored clean dry and inverted					
12	Standard mattress covers are in a good state of repair (Select a bed at random and undertake a mattress test1)					
13	Pressure relieving mattresses covers are visibly clean (open mattress cover and observe for any staining with bodily fluids, perform mattress test 1)					
14	Pressure relieving mattresses with removable cells are decontaminated between patient uses according to manufacturers' instructions. Infection control must verify that external companies provide appropriate decontamination					
15	Disposable paper towel on couches/trolleys is changed between each patient use					
	<b>Totals</b>				<b>TOTAL QUESTIONS HERE 25</b>	
7	<b>Hand Hygiene</b>					
	<b>Hand Hygiene Facilities</b>	<b>Yes</b>	<b>No</b>	<b>N/A</b>	<b>Comments</b>	
1	Liquid soap is available at all hand washing sinks					
2	Liquid soap must be single use cartridge dispensers					
3	Dispenser nozzles are visibly clean					
4	Soft absorbent paper towels are available at all hand washing sinks					
5	Wall mounted or pump dispenser hand cream is available for use					



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6	Antibacterial solutions/scrubs are not used for social hand washing					
7	Antibacterial solutions are used for invasive procedures and surgical scrubs					
8	There are no nail brushes on hand wash sinks in clinical areas					
9	The hand wash sinks are free from used equipment and inappropriate items					
10	Hand wash sinks are dedicated for that purpose					
11	Hand wash sinks conform to HBN 95. Check that they do not have plugs, overflows or that the water jet does not flow directly into the plughole					
12	There are sufficient numbers of hand wash sinks available in accordance with national and local guidance					
13	Access to hand wash sinks is clear					
14	Hand washing facilities are clean and intact. (Check sinks, taps, splash backs)					
15	There is appropriate temperature control to provide suitable hand wash water at all sinks					
16	Elbow operated or automated taps are available in hand wash sinks in clinical areas					
<b>Alcohol hand rub is available for use throughout clinical areas, check:</b>		<b>Yes</b>	<b>No</b>	<b>N/A</b>	<b>Comments</b>	
17a	Entrance/exits to wards and departments					
17b	Directly accessible at the point of care					
17c	Portable for clinical procedures					
18	No wrist watches/stoned rings or other wrist jewellery are worn by staff carrying out patient care					
19	Staff nails are short, clean and free from nail varnish					
20	Posters promoting hand decontamination are available and displayed in areas visible to staff before and after patient contact					
21	Staff have received training in hand hygiene procedures within the last year. (Ask a member of medical, nursing, ancillary and AHP staff)					
22	Patients' are offered hand hygiene facilities after using the toilet/commode/bedpan e.g. hand wipe					
23	Patients' are offered hand hygiene facilities prior to meals					
<b>Total=</b>					<b>TOTAL QUESTIONS HERE 25</b>	
<b>Overall result=</b>						