

| HAND HYGIENE    |  | Y | N | NA | COMMENTS |
|-----------------|--|---|---|----|----------|
| 1.              | Hand wash facilities are available in all consulting/clinical rooms.   |   |   |    |          |
| 2.              | Staff carry a supply of skin cleansing wipes.  |   |   |    |          |
| 3.              | Staff carry personal issue alcohol hand gel.   |   |   |    |          |
| 4.              | Gojo hand moisturiser (wall mounted dispenser at base/pump dispenser/flip top) is available.   |   |   |    |          |
| 5.              | Staff are 'Bare Below the Elbows' when involved in patient activities.   |   |   |    |          |
| 6.              | Staff undertake hand hygiene in line with the 5 moments of hand hygiene, including following removal of gloves.  |   |   |    |          |
| WASTE/SHARPS    |  |   |   |    |          |
| 7.              | The waste disposal policy is available.  |   |   |    |          |
| 8.              | Staff can state when a clinical waste collection service is required from a patient's home and the procedure for arranging the collection.   |   |   |    |          |
| 9.              | Patients/carers are advised on the safe storage and disposal of waste generated.   |   |   |    |          |
| 10.             | Staff do not carry waste in their car with the exception of a sharps bin.  |   |   |    |          |
| 11.             | Yellow topped sharps bins are in use for disposal of non cytotoxic/cytostatic sharps and Purple topped sharps bins for disposal of cytotoxic/cytostatic sharps and contaminated items. |   |   |    |          |
| 12.             | All sharps bins are assembled correctly, labelled, signed according to Trust policy and information is given regarding safety within a patient's home.                                 |   |   |    |          |
| 13.             | The temporary closure mechanism is used when sharps bins are not in use and when transported. Once full, the bin aperture is locked.   |   |   |    |          |
| 14.             | Staff are aware of the action required following a needle-stick/sharps injury/bite.  |   |   |    |          |
| 15.             | Nursing staff administering insulin via a pen device are using a safety needle.  |   |   |    |          |
| DECONTAMINATION |  |   |   |    |          |
| 16.             | Staff can describe the symbol used to indicate single use items.   |   |   |    |          |
| 17.             | Cleaning schedules are available and adhered to for decontamination of equipment.  |   |   |    |          |
| 18.             | Staff are aware of the need for a decontamination certificate to be issued before equipment is sent for repair or maintenance.   |   |   |    |          |
| 19.             | Staff have access to multi-surface detergent wipes and 70% alcohol hard surface wipes.   |   |   |    |          |
| 20.             | Medical equipment is clean, intact, fit for purpose and within its 'service' date.   |   |   |    |          |

| PERSONAL PROTECTIVE EQUIPMENT |   | Y | N | NA | COMMENTS |
|-------------------------------|---|---|---|----|----------|
| 21.                           | Sterile and non-sterile gloves (powder free) conforming to European Community (EC) standards, latex/non latex are available.  |   |   |    |          |
| 22.                           | Disposable plastic aprons are worn as single-use items for each clinical procedure and episode of patient care when there is a risk that clothing or uniform may become exposed to body fluids or become wet. |   |   |    |          |
| 23.                           | Face/eye protection is worn where there is a risk of splashing into the face and eyes.  |   |   |    |          |
| 24.                           | PPE is carried for use within the home.   |   |   |    |          |
| INFECTION CONTROL PRACTICES   |   |   |   |    |          |
| 25.                           | A urinary catheter is inserted following assessment of need and the insertion is documented.  |   |   |    |          |
| 26.                           | Indwelling urethral catheters are connected to a sterile closed urinary drainage system (leg/overnight bag).  |   |   |    |          |
| 27.                           | 2% Chlorhexidine Gluconate and 70% Isopropyl Alcohol for skin disinfection is used prior to insertion of/accessing lines .  |   |   |    |          |
| 28.                           | Wound swabs are only sent when clinical signs and symptoms of infection are present.  |   |   |    |          |
| 29.                           | Antimicrobial dressings (e.g. silver, iodine preparations) are only used to treat critically colonised/infected wounds.   |   |   |    |          |
| 30.                           | Specimens are transported in containers that withstand drop testing regulations.  |   |   |    |          |
| 31.                           | Appropriate cool bags are available for the transportation and storage of vaccines.   |   |   |    |          |
| 32.                           | Staff can state the correct method to deal with a blood/body fluid spillage.  |   |   |    |          |
| 33.                           | Staff are aware of the exclusion time of 48 hours for viral gastroenteritis.  |   |   |    |          |
| 34.                           | Staff have access to IPC Policies and Procedures and 'De-Bugged', the IPC Newsletter.   |   |   |    |          |
| 35.                           | There is evidence that clinical staff within the unit update their IPC knowledge annually.  |   |   |    |          |
| 36.                           | Community bags should be wipe-able inside and out, visibly clean with all items stored in a manner to reduce cross contamination.   |   |   |    |          |