

ENVIRONMENT		Y	N	NA	COMMENTS
1.	All areas appear clean, tidy and free from clutter and inappropriate items.				
2.	Seating, tables, furniture/units are visibly clean and in a good state of repair.				
3.	Floors including edges and corners are intact, free from dust, grit, spills and visible stains.				
4.	All high and low surfaces are free from dust and cobwebs.				
5.	Curtains/blinds are intact, free from stains, dust, cobwebs and there is evidence of a pre-planned programme of curtain change.				
6.	Fans, air vents and extractors are clean and dust free.				
7.	Comprehensive cleaning schedules are in place, available and adhered to.				
8.	All shelves beneath a sink 'u' bend are free from items.				
LAUNDRY					
9.	Items requiring laundering e.g. linen, toys, and clothing are processed in a safe manner.				
WASTE					
10.	Waste segregation poster/policy is available.				
11.	All bags are tied, (labelled if offensive/hazardous) and secured before leaving the place of generation.				
12.	All waste bins, including lids, are visibly clean, enclosed, foot operated, lidded, labelled and in good working order.				
13.	Nappies are disposed of as offensive or appropriate waste stream.				
14.	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/contaminated items.				
15.	All sharps bins are assembled correctly, labelled and signed and positioned away from the public.				
16.	The temporary closure mechanism is used when sharps bins are not in use, once full, the bin aperture is locked.				
17.	Staff are aware of the action required following a needle-stick/sharps injury/bite.				
DECONTAMINATION					
18.	Staff can describe the symbol used to indicate single use items.				
19.	Potties are processed correctly between use i.e. emptied into toilet, washed in hot soapy water in a designated sink and dried.				
20.	Staff have access to multi-surface detergent wipes and 70% alcohol hard surface wipes.				

DECONTAMINATION		Y	N	N/A	COMMENTS
21.	Cleaning schedules are available and adhered to for decontamination of toys/equipment in line with manufacturer guidance/IPC policy.				
22.	Activity mats/bean bags are intact, washable and on a regular cleaning schedule.				
23.	Playdough is fresh, clean and hand hygiene is promoted prior to use.				
24.	Sand pits are sieved regularly and changed every 3 months or immediately after contamination.				
25.	Medical equipment is clean, intact, fit for purpose and within its 'service' date.				
HAND HYGIENE					
26.	Staff are observed adhering to 'Bare Below the Elbows' when involved in patient activities.				
27.	Liquid soap and soft, white, absorbent paper towels are available at all hand washing sinks.				
28.	Wall mounted/pump dispenser hand cream is available for use.				
29.	Hand wash sinks are appropriate, dedicated for that purpose, free from lime scale, used equipment and inappropriate items.				
30.	Alcohol hand gel dispensers are locked.				
31.	Staff undertake hand hygiene in line with the 5 moments of hand hygiene, including following removal of gloves.				
32.	Posters promoting hand decontamination are available and displayed.				
33.	Children are taught hand washing technique and are supervised during toilet and hand washing activities.				
PERSONAL PROTECTIVE EQUIPMENT					
34.	Sterile and non-sterile gloves (powder free) conforming to European Community (EC) standards, latex/non latex are available.				
35.	Disposable white plastic aprons are worn for health care activities and green aprons are worn for food preparation, both are single-use items and changed between tasks/children and if visibly soiled.				
36.	Face/Eye protection is worn where there is a risk of splashing into the face and eyes.				
INFECTION CONTROL PRACTICES					
37.	Staff undertaking nappy changing are not involved in food preparation.				
38.	Staff can state the correct method to deal with a blood/body fluid spillage.				
39.	Staff are aware of the exclusion time of 48 hours for viral gastroenteritis.				
40.	Staff have access to IPC Policies/ Procedures and 'De-Bugged' newsletter.				
41.	There is evidence that clinical staff update their IPC knowledge annually.				