

Date:

ENVIRONMENT		Y	N	NA	COMMENTS
1.	All areas appear clean, tidy and free from clutter and inappropriate items.				
2.	Seating, tables and general furniture are visibly clean and in a good state of repair.				
3.	Floors including edges and corners are intact and 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 for curtain change.				
6.	Fans, air vents and extractors are clean and free from dust.				
7.	Comprehensive cleaning schedules are in place, available and adhered to.				
8.	All shelves beneath a sink 'u' bend are free from items.				
WASTE/SHARPS					
9.	Waste segregation poster/policy is available.				
10.	All bags are tied, labelled and secured before leaving the place of generation.				
11.	All waste bins, including lids, are visibly clean, enclosed, foot operated, lidded, labelled and in good working order.				
12.	Yellow topped sharps bins are in use for disposal of non cytotoxic/cytostatic sharps.				
13.	All sharps bins are assembled correctly, labelled, signed according to Trust policy and safely positioned away from the public.				
14.	The temporary closure mechanism is used when sharps bins are not in use and once full, the bin aperture is locked.				
15.	Staff are aware of the action required following a needle-stick/sharps injury/bite.				
16.	Staff are aware of the need to review for safer sharps options.				
DECONTAMINATION					
17.	Staff can describe the symbol used to indicate single use items.				
18.	Couches are intact and visibly clean.				
19.	Between each patient disposable paper towelling is removed from the couch, the couch cleaned with a multi-surface detergent wipe, dried and new paper towelling applied.				
20.	Staff have access to multi-surface detergent wipes and 70% alcohol hard surface wipes.				
21.	Cleaning schedules are available and adhered to for decontamination of equipment in line with manufacturer guidance/IPC policy.				
22.	Medical equipment is clean, intact, fit for purpose and within its 'service' date.				

DECONTAMINATION		Y	N	N/A	COMMENTS
23.	Clean/sterile items are stored off the floor and in a manner to minimise contamination.				
HAND HYGIENE					
24.	Staff are observed adhering to 'Bare Below the Elbows' when involved in patient activities.				
25.	Liquid soap and soft, white, absorbent paper towels are available at all hand washing sinks.				
26.	Wall mounted or pump dispenser hand cream is available for use.				
27.	Hand wash sinks are appropriate, dedicated for that purpose and are free from lime scale, used equipment and inappropriate items.				
28.	Staff have access to alcohol hand rub at the point of care.				
29.	Staff undertake hand hygiene in line with the 5 moments of hand hygiene, including following removal of gloves.				
30.	Posters promoting hand decontamination are available and displayed.				
PERSONAL PROTECTIVE EQUIPMENT					
31.	Non-sterile gloves (powder free) conforming to European Community (EC) standards, latex/non latex are available.				
32.	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.				
33.	Face/Eye protection is worn where there is a risk of splashing into the face and eyes.				
34.	Staff know where to access respiratory protective equipment should the need arise.				
LINEN HANDLING AND DISPOSAL					
35.	Clean linen is stored in a clean enclosed designated area (i.e. not on a shelf with equipment or exposed on work surface).				
36.	Linen skips or a bag is taken to the area rather than being carried or left on another surface.				
GENERAL PRACTICES					
37.	Staff can state the correct method to deal with a blood/body fluid spillage.				
38.	Staff are aware of the exclusion time of 48 hours for viral gastroenteritis.				
39.	Staff have access to IPC Policies/Procedures including 'De-Bugged', the IPC Newsletter				
40.	There is evidence that clinical staff within the unit update their IPC knowledge annually.				