

## Checklist for Physician's General Office Environment Infection Prevention and Control Audits

<b>Date:</b>	<b>Office Number:</b>	<b>Inspector:</b>
<b>Physician's Name &amp; Address:</b>		

	1. General	Yes	No	N/A	If "No", Please Comment
1.1	There is a designated individual responsible for Infection Prevention and Control (IPAC) policies and procedures in the office.				
1.2	Office cleaning instructions are written and specify the procedures, frequency of cleaning, and products used.				
1.3	All staff are oriented to the IPAC policies and procedures of the office and this training is documented.				
1.4	All cleaning and disinfection products are labeled, prepared and stored according to manufacturer's instructions				
1.5	Staff are aware of and adhere to OH&S requirements regarding Infection Prevention and Control.				

	2. Reception/Patient Waiting Area				
2.1	There is a telephone and reception patient triage screening protocol for patients presenting with infectious diseases.				
2.2	Instructions on Respiratory Hygiene are posted.				
2.3	Alcohol-based hand rub (ABHR) is available in the reception area with instructions for use on arrival and on exiting the clinic.				
2.4	Tissues and hands-free waste receptacles are available in waiting room.				
2.5	Masks are available and dispensed in a manner which avoids contamination.				
2.6	The reception area is clean and in good repair.				
2.7	Toys, if <b>present</b> , are cleaned and disinfected on a frequent basis. (Recommended - not to provide toys)				

3. Patient Examination and Treatment Areas		Yes	No	N/A	If "No", Please Comment
3.1	All rooms and equipment are clean and in good repair.				
3.2	A hand hygiene station is present in each patient care area, including a dedicated sink and liquid soap and/or alcohol based hand rub.				
3.3	All surface finishes in patient care and reprocessing areas including flooring are washable and good repair. ( <u>carpets are not recommended in these areas.</u> )				
3.4	Medical devices and clean supplies are not stored under or within 30 cm of the sink, or at the foot of the examination table.				
3.5	All containers, cupboards, and drawers for clean supplies are covered and are cleaned periodically.				
3.6	All clinical contact surfaces such as examination tables and pillows are of a smooth and cleanable material. (Paper covers on examination tables are not an acceptable substitute.)				
3.7	If linens are used they are always changed between patients.				
3.8	All upholstery and examination table covers are in good repair, and without rips or cracks. (Tape is not an acceptable method of repair.)				
3.9	A low level disinfectant is labeled, stored, prepared, and used according to manufacturers' instructions to clean and disinfect clinical contact surfaces in patient care/treatment rooms.				
3.10	Reusable containers for all products (soap, ABHR, skin disinfectants, ultrasound gel etc) are labeled, cleaned, rinsed and dried prior to refilling. ( <u>no topping up</u> – single use containers preferred)				
3.11	All non-critical equipment such as stethoscopes, otoscopes, ophthalmoscopes, thermometers, and BP cuffs etc are cleaned and disinfected between patient use or, at a minimum, when visibly contaminated.				
3.12	Waste containers are present in each treatment room and are not overfilled (hands free preferred)				
3.13	Covered wall mounted paper towels are present for drying hands. If cloth towels are used, they are single use only.				

4. Washrooms					
4.1	Public and staff washrooms are clean and in good repair.				
4.2	Hand wash supplies in the washrooms include a sink and liquid soap in a single-use dispenser				
4.3	Paper towels are available in a covered wall mounted dispenser. (hot air dryers not recommended)				
4.4	A hands-free waste receptacle is present.				
4.5	Alcohol-based hand rub (ABHR) is <u>not</u> present.				

5. Personal Protective Equipment (PPE) - (in offices where procedures warrant such equipment)		Yes	No	N/A	If "No", Please Comment
5.1	All required PPE is available: masks, procedure gloves, eye protection, and long-sleeved moisture impervious gowns.				
5.2	Single-use procedure gloves are available for contact with mucous membranes, non-intact skin (e.g. rashes, dermatitis), soiled equipment, and contaminated environmental surfaces.				
5.3	Sterile gloves are available for sterile procedures.				
5.4	Information is available on the proper donning and doffing of PPE.				

6. Sharps Management		Yes	No	N/A	If "No", Please Comment
6.1	Safety-engineered syringes and needles are used. ( <u>mandatory</u> as of July 1, 2010)				
6.2	Biohazard puncture-resistant containers for sharps are available at point of use (locked & wall-mounted recommended)				
6.3	Sharps containers are single use; they are never emptied and refilled.				
6.4	Sharps containers are replaced when less than full				
6.5	Used sharps containers are securely closed and stored prior to pick-up.				

7. Medication Safety					
7.1	All medications are stored securely and according to manufacturers' instructions.				
7.2	All single dose vials are discarded after use.				
7.3	Multi-dose vials are labeled with date of opening and kept for use in accordance with the manufacturer's instructions.				
7.4	All medications (opened or unopened) are within their expiry date and a procedure is in place to regularly check for expiration dates.				

8. Cold Chain (Vaccine) Management		Yes	No	N/A	If "No", Please Comment
8.1	There are written procedures on Cold Chain Management for vaccine storage and handling.				
8.2	There is a written procedure for a response to refrigerator malfunction, power failure, and other breaks in the Cold Chain.				
8.3	All staff handling vaccines are trained in the proper handling of vaccines and are aware of Cold Chain requirements.				
8.4	The vaccine storage refrigerator maintains the required storage temperature. (Bar fridges are not recommended.)				
8.5	No food or beverages are stored in the vaccine storage refrigerator.				
8.6	A $\pm 1^\circ\text{C}$ minimum-maximum thermometer is used to monitor the temperature in the refrigerator.				
8.7	The temperature in the refrigerator is maintained between $+2^\circ\text{C}$ and $+8^\circ\text{C}$ , and is monitored and is logged (office open < 9h x 2; 9 – 12h x 3; >12h x 4/day)				
8.8	Regular maintenance is performed and logged for the refrigerator.				

9. Waste Management		Yes	No	N/A	If "No", please comment
9.1	Biohazardous waste is stored securely and is routinely picked up to prevent stockpiling.				

References:

1. Best Practices for Environmental Cleaning for Prevention and Control of Infections – In All Healthcare Settings: (Provincial Infectious Diseases Advisory Committee of Ontario; December 8, 2009)
2. Infection Prevention and Control Best Practices for Long Term Care, Home and Community Care including Health Care Offices and Ambulatory Clinics : (Canadian Committee on Antibiotic Resistance, June 2007)

Both references are available on the CPSA website under Infection Prevention & Control - Resources.