Infection Prevention & Control

(IPC) Audit for Dental

Introduction

Good infection prevention and control is essential to ensure that people who use Primary Care services receive safe and effective care. Effective prevention and control of infection must be part of everyday practice and be applied consistently by everyone. The Care Quality Commission (CQC) will assess a registered provider on how it complies with the infection prevention requirements, including environmental cleanliness.

Purpose

The purpose of this audit is to:

- Ensure an infection prevention and control (IPC) audit is conducted on a six-monthly basis – as a minimum
- Ensure the audit accurately reflects findings, with reference to supportive information as examples of evidence of good practice
- Promote a standardised approach to evidence gathering and supportive documentation when preparing for and undertaking an Infection Prevention & Control Audit
- Ensure responsive action is taken and recorded to demonstrate delivery and progress for all findings recorded as 'No'

Approach

A dedicated inspection date(s) will need to be identified, with named auditors identified to conduct the audit. On the agreed day(s), the allocated auditor(s) will:

- Ensure the auditor(s) answer the questions honestly and objectively
- In the event of answering 'Yes' to any question, the auditor(s) will need to document and collate examples of their findings in the 'Comments' column and/or refer to examples of supportive evidence where appropriate e.g. meeting minutes and date of meeting

This audit template covers the following areas:

1. Prevention of Bloodborne Virus Exposure
2. Decontamination
3. Environmental Design and Cleaning
4. Hand Hygiene
5. Management of Dental Medical Devices
6. Personal Protective Equipment
7. Waste Management
8. Infection Prevention & Control (IPC) Inspection – Action Plan

Feedback

Ensure the completed audit tool is reviewed and the findings shared with the Practice Manager and/or Registered Manager.

Actions

- Draft an action plan in response to all questions answered 'No', to demonstrate improvements, management of risk and delivery of progress
- The action plan must identify:
  - The issue
  - The action(s) taken/to be taken
  - Named individuals responsible for managing and delivering the actions
  - Anticipated delivery timeframes
- Give a copy of the audit findings plus action plan to the Practice Manager and/or Registered Manager
- Ensure the Practice Manager shares the audit findings and actions required with staff, celebrating success, and identifying areas of improvements required

Name of person carrying out the audit	Job role of the person doing the audit	Date Completed	Signature on completion

Section 1: Prevention of Bloodborne Virus Exposure

1. Does the practice have a policy and procedure in place for the prevention of blood borne virus exposure? Does it include the management of spillages, sharps and inoculation incidents in accordance with national guidance?

YES | NO | Comments

2. Have all staff received training on the prevention and management of blood borne virus exposure?

YES | NO | Comments

3. Have all staff at risk from sharps injuries received an occupational health check in relation to risk reduction in blood borne virus transmission and general infection?

YES | NO | Comments

4. Can decontamination and clinical staff demonstrate current immunisation with the hepatitis B vaccine? Can the Practice Manager provide documented proof?

YES | NO | Comments

5. Are chlorine releasing agents available for blood/bodily fluid spillages and used as per the manufacturer's instructions? Is a spillage kit readily available?

YES | NO | Comments

6. Are sharps containers correctly assembled and labelled with the date, location and a signature?

YES | NO | Comments

7. Can you confirm that all sharps containers are not filled beyond the indicator mark? Are they locked shut when filled to the indicator mark?

YES | NO | Comments

8. Are full sharps containers stored in a secure place away from public access ready for collection?

YES | NO | Comments

9. Is there a readily available protocol and flowchart in place providing information on what to do in the event of a sharps injury

YES | NO | Comments

10. Are inoculation injuries recorded?

YES | NO | Comments

11. Can you confirm only the clinician using syringes is fully responsible for disposing of them?

YES | NO | Comments

12. Are safer sharps syringes used?

YES | NO | Comments

13. Are sharps containers available at the point of use and positioned safely? For example, wall mounted near the clinician

YES | NO | Comments

Section 2: Decontamination

1. Does the practice have a policy and procedure in place that includes all aspects of the decontamination process?

YES | NO | Comments

2. Have all clinical and sterilisation team members received training on decontamination processes they are expected to perform?

YES | NO | Comments

3. Do you keep a record of instruments that are single use and therefore cannot be re-processed?

YES | NO | Comments

4. Are all wrapped, sterilised instruments date stamped with the date sterilised, use by date and name and signature of the decontaminator operator?

YES | NO | Comments

5. Does the practice have a nominated lead responsible for infection control and decontamination?

YES | NO | Comments

6. Can you provide evidence that all decontamination equipment (autoclaves, washer disinfectors etc.) are validated and serviced regularly as per the manufacturer's instructions?

YES | NO | Comments

7. Is there a procedure for the transportation of instruments to and from other locations that ensures the segregation of contaminated instruments from clean/sterilised instruments?	YES	NO	Comments
8. Is all documentation (including testing, servicing, maintenance and repair records) retained in the practice for at least two years?	YES	NO	Comments
9. Are reusable instrument trays decontaminated and sterilised after each use?	YES	NO	Comments
10. Are any instruments (used or unused) left on trays at the end of each session sterilised before further use?	YES	NO	Comments
11. Are instruments that are not decontaminated immediately kept moist until they are decontaminated?	YES	NO	Comments
12. Are instruments inspected under illuminated magnification for cleanliness and condition following cleaning?	YES	NO	Comments
13. Are handpieces decontaminated in between each patient in accordance with manufacturers' instructions?	YES	NO	Comments
14. Are separate canisters of lubricant used for unclean, cleaned and sterilised instruments?	YES	NO	Comments
15. Are those handpieces that are manually cleaned, wiped and lubricated with oil before steam sterilisation in accordance with manufacturers' instructions?	YES	NO	Comments
16. Are handpieces decontaminated by an automated washer disinfector lubricated with oil before steam sterilisation in accordance with manufacturers' instructions?	YES	NO	Comments

17. Are handpieces decontaminated by an automated washer-disinfector (with a specific handpiece irrigation system) lubricated with oil before steam?

YES | NO | Comments

18. Are all instruments washed in a washer-disinfector before they are sterilised?

YES | NO | Comments

19. If the practice does not have a washer-disinfector are all instruments cleaned manually before they are sterilised?

YES | NO | Comments

20. When manual cleaning, are two sinks (or two bowls in a single unit) used? One for washing and the other for rinsing?

YES | NO | Comments

21. Are specially formulated detergents used for manually cleaning instruments and is it used at the specified concentration according to the manufacturer's instructions?

YES | NO | Comments

22. When manual cleaning is the water temperature checked and recorded to make sure it is 45°C or lower?

YES | NO | Comments

23. Are instruments fully submerged when manually cleaned? (unless the manufacturer's instructions suggest otherwise)

YES | NO | Comments

24. Are brushes used to manually clean instruments either single use or washed after each use and replaced at the manufacturer's recommended intervals or when damaged?

YES | NO | Comments

25. Are there contractual validation and testing arrangements in place to ensure all autoclaves are routinely maintained and validated in accordance with HTM-01-05 and manufacturers' instructions?

YES | NO | Comments

26. Are daily, weekly, quarterly and annual inspection testing and maintenance records available for autoclaves as described in section 12 of HTM-01-05?

YES | NO | Comments

27. Are fault logs kept for all autoclaves and are they removed from use until the fault has been rectified?

YES | NO | Comments

28. Are there arrangements to ensure all ultrasonic cleaners are maintained and validated in accordance with HTM-01-05 requirements and manufacturers' instructions?

YES | NO | Comments

29. Are daily, weekly, quarterly and annual inspections, testing and maintenance records available for ultrasonic cleaners?

YES | NO | Comments

30. Are there contractual arrangements in place to ensure all automated washer-disinfectors are routinely maintained and validated in line with manufacturers' instructions?

YES | NO | Comments

31. Are daily, weekly, quarterly and annual validation and testing results recorded for automated washer-disinfectors?

YES | NO | Comments

32. When using ultrasonic cleaners, are instruments placed in an instrument basket or cassette and fully immersed ensuring that all surfaces are in contact with the solution?

YES | NO | Comments

33. When using ultrasonic cleaners (and when not in use) is the lid closed to prevent contamination of the ultrasonic cleaning solution?

YES | NO | Comments

34. Is the ultrasonic cleaner solution emptied when visibly contaminated or otherwise at the end of every clinical session?

YES | NO | Comments

35. Where instruments are manually cleaned, are they rinsed after removing from the ultrasonic cleaner?

YES | NO | Comments

36. Are the relevant staff aware of the instrument loading procedure for the washer disinfector? (spray arms are free to rotate, cannulated instruments are loaded correctly)

YES | NO | Comments

37. Are washer-disinfector cycle parameters recorded?

YES | NO | Comments

38. For autoclaves, are there daily records available for the past two years of the temperature and pressure achieved on completion of each cycle

YES | NO | Comments

39. Can you confirm that autoclaves are never used if they display faults?

YES | NO | Comments

40. When using autoclaves, can you confirm that only pre-wrapped instruments are used in vacuum type sterilisers?

YES | NO | Comments

41. Is distilled water or RO (reverse osmosis) water used in the autoclave?

YES | NO | Comments

42. Are opened bottles of distilled water discarded at the end of each working day?

YES | NO | Comments

43. Are autoclave reservoirs drained and left clean and dry at the end of each day?

YES | NO | Comments

44. Is there a separate dedicated decontamination room which is restricted to those performing decontamination duties?

YES | NO | Comments

45. Is the decontamination room clearly zoned into clean and dirty areas?

YES | NO | Comments

46. Are decontamination areas and work surfaces clean and uncluttered?

YES | NO | Comments

47. Is there adequate ventilation in the decontamination room?

YES | NO | Comments

48. Where full mechanical ventilation is used in the decontamination room, is the direction of air flowing from the clean to the dirty area?

YES | NO | Comments

49. Where full mechanical ventilation is used in the decontamination room, is the direction of air flowing from the clean to the dirty area?

YES | NO | Comments

50. Are instruments maintained in a moist condition between use and decontamination?

YES | NO | Comments

51. Are instrument transport containers lidded, clean, leak proof and cleaned, disinfected and dried following each use?

YES | NO | Comments

52. Are instruments processed in a non-vacuum (type N) autoclave dried prior to packing using a disposable lint free cloth?

YES | NO | Comments

53. Does the practice have a system in place to ensure that the storage of non-wrapped instruments does not exceed 1 day if stored in a clinical area?

YES | NO | Comments

54. Does the practice have a system in place to ensure that the storage of wrapped instruments does not exceed 1 year?

YES | NO | Comments

55. Is there a system in place to identify instrument storage time, including the date by which they should be used or re-processed?

YES | NO | Comments

56. Are instruments stored in a dedicated secure, dry and cool environment?

YES | NO | Comments

Section 3: Environmental Design and Cleaning

1. Does the practice have a policy and procedure for cleaning and maintaining the environment?

YES | NO | Comments

2. Are daily cleaning and decontamination checklists present and filled in for all clinical areas? Can you provide two years of evidence of this?	YES	NO	Comments
3. Does the practice have a daily checklist for the cleaner?	YES	NO	Comments
4. Does the practice have a COVID-19 Policy and Procedure in place?	YES	NO	Comments
5. Are two metre social distancing markers on the floor in all areas during the pandemic?	YES	NO	Comments
6. Is hand sanitising gel readily available in all rooms?	YES	NO	Comments
7. Is there a clear shield in front of the reception desk to protect staff and patients?	YES	NO	Comments
8. Have staff undertaking cleaning duties been fully trained to undertake such duties?undertake such duties?	YES	NO	Comments
9. Are surgery floors mopped after each session?	YES	NO	Comments
10. Is the overall appearance of the clinical and decontamination environment tidy and uncluttered?	YES	NO	Comments
11. Are all dental chairs free of rips or tears and cleaned in between each patient?	YES	NO	Comments
12. Are all walls, floors, ceilings, fixtures and fittings free from damage?	YES	NO	Comments
13. Are all work surface joints intact, seamless and with no visible damage?	YES	NO	Comments
14. Are all surfaces free from dust and visible dirt?	YES	NO	Comments

15. Are the surfaces of accessible ventilation fittings cleaned weekly? YES NO Comments

16. Are easy clean keyboards used in all clinical areas? YES NO Comments

17. Can you confirm that none of the clinical areas are carpeted? YES NO Comments

18. Do all floor coverings in the clinical and decontamination areas have coved edges that are sealed? YES NO Comments

19. Is cleaning equipment colour coded to determine what area it should be used in? YES NO Comments

20. Is general cleaning equipment stored in a non-clinical area? YES NO Comments

21. Where disposable single-use covers are used are they discarded after each patient contact? YES NO Comments

22. Are surfaces and equipment cleaned in between each patient? (dental chairs, curing lamps, light handles, the dental cart, spittoon etc.) YES NO Comments

23. Is fallow time used where needed following the latest guidelines during the pandemic? YES NO Comments

24. Are AGP - Do not enter signs placed on doors when being undertaken? YES NO Comments

25. Are all taps, drainage points, splashbacks, sinks, aspirators, drains and spittoons cleaned after every session with a surface disinfectant? YES NO Comments

26. Are floors, cupboard doors and accessible high level surfaces cleaned daily? YES NO Comments

27. Is there a designated area for the disposal of dirty water which is separate to the kitchen, clinical and decontamination areas? YES NO Comments

28. Does the practice have a COSHH Policy and Procedure? YES NO Comments

29. Are frequently touched sites/points, in particular waiting room areas cleaned regularly throughout the day? YES NO Comments

Section 4: Hand Hygiene

1. Does the practice have a policy and procedure for hand hygiene? YES NO Comments

2. Is hand hygiene an integral part of staff induction? YES NO Comments

3. Is hand hygiene training provided periodically throughout the year? YES NO Comments

4. Are hand hygiene audits performed regularly for all staff? YES NO Comments

5. Is hand hygiene carried out before donning gloves and after removing them? YES NO Comments

6. Do all staff involved in any clinical and decontamination procedures have short nails that are clean and free from nail extensions and varnish? YES NO Comments

7. Do all clinical and decontamination staff remove watches and rings with stones during clinical and decontamination procedures? YES NO Comments

8. Are laminated or wipe clean hand hygiene posters on display by all sinks? YES NO Comments

9. Is there a separate dedicated hand basin provided for hand hygiene in each surgery and is it clearly marked? YES NO Comments

10. Are no contact liquid soap dispensers available in all surgeries and decontamination areas? YES NO Comments

11. Are elbow or foot operated electronic mixers or thermostatically controlled taps available at all hand wash sinks in clinical and decontamination areas? YES NO Comments

12. Can you confirm that nail brushes are never used? YES NO Comments

13. Are good quality disposable and absorbent paper towels used when drying hands? YES NO Comments

14. Is hand cream available for all clinical and decontamination staff? YES NO Comments

Section 5: Management of Dental Medical Devices

1. Does the practice's infection control policy include procedures for the use, maintenance, service and repair of all medical devices? YES NO Comments

2. Does the practice have an individual responsible for ensuring that all staff comply with medical device procedures? YES NO Comments

3. Has the practice had a legionella risk assessment of the building carried out? YES NO Comments

4. Does the practice have a legionella policy and procedure? YES NO Comments

5. Are regular temperature checks carried out and recorded according to the risk assessment? YES NO Comments

6. Are all new reusable instruments sterilised prior to use? YES NO Comments

7. Are instruments sent for repair labelled to identify they have been through the decontamination process?	YES	NO	Comments
8. Are contaminated patient devices (dentures, impressions etc.) decontaminated and labelled before being sent to the laboratory?	YES	NO	Comments
9. Are patient devices returned from the laboratory disinfected before being placed in the patient's mouth?	YES	NO	Comments
10. Are single use items always discarded after use?	YES	NO	Comments
11. Can you confirm that single use endodontic instruments are never re-used?	YES	NO	Comments
12. Are contaminated intra-oral x-ray digital sensor wrappers discarded after use, the sensor cleaned according to the manufacturer's instructions then re-wrapped?	YES	NO	Comments
13. Are x-ray film holders sterilised after every use according to the manufacturer's instructions?	YES	NO	Comments
14. Are difficult to clean instruments and devices identified as single use?	YES	NO	Comments
15. Are dental chair filters cleaned and replaced as per the manufacturer's instructions?	YES	NO	Comments
16. Does the dental chair have an independent bottled water system to dispense distilled or reverse osmosis water?	YES	NO	Comments
17. Is the bottle removed, cleaned and dried at the end of each day?	YES	NO	Comments
18. If a bottled water chair system is not used is there a physical air gap separating dental unit water lines from the mains water system?	YES	NO	Comments

19. For surgical procedures involving irrigation, is sterile saline available? YES NO Comments

20. Are dental unit water lines flushed through for a minimum of two minutes at the start of the day and for a minimum of 20-30 seconds between every patient? YES NO Comments

21. Are handpieces fitted with anti-retraction valves? YES NO Comments

22. Are dental unit water lines purged using the manufacturer's recommended disinfectants? YES NO Comments

23. Are dental unit water line filters changed according to the manufacturer's guidelines? YES NO Comments

Section 6: Personal Protective Equipment

1. Does the practice have a PPE policy and procedure that includes COVID government guidelines? YES NO Comments

2. Are FFP3 masks/hoods, gloves, disposable aprons and visors worn for all AGPs YES NO Comments

3. Are PPE donning and doffing areas clearly marked? YES NO Comments

4. Are staff trained in the use of PPE as part of their practice induction? YES NO Comments

5. Are powder free and latex free CE marked gloves used? YES NO Comments

6. Are all single use PPE items disposed of after each episode of patient care? YES NO Comments

7. Are heavy duty gloves available for decontamination processes where necessary, and washed with detergent and hot water and left to dry after each use?

YES | NO | Comments

8. Are visors, masks, gloves and disposable aprons worn during all decontamination procedures?

YES | NO | Comments

9. Are single use disposable aprons and masks disposed of as clinical waste after each procedure?

YES | NO | Comments

10. Are uniforms worn by staff changed at the end of each day and when visibly contaminated?

YES | NO | Comments

11. Can you confirm that staff uniforms are never worn outside of the practice?

YES | NO | Comments

12. Are staff uniforms washed separately and at the highest temperature possible for the fabric?

YES | NO | Comments

13. Are all PPE items stored in accordance with the manufacturer's instructions?

YES | NO | Comments

14. Are visors decontaminated after clinical sessions and decontamination procedures?

YES | NO | Comments

15. Is eye protection provided for the patient decontaminated after each use?

YES | NO | Comments

16. Are posters about the need to cover the nose and mouth during the pandemic present in the practice?

YES | NO | Comments

17. Do all patients wear a face mask on entering and exiting the building?

YES | NO | Comments

Section 7: Waste Management

1. Does the practice have a policy and procedure for the management and disposal of waste?

YES | NO | Comments

2. Have all staff been trained at their induction on the process of waste disposal?	YES	NO	Comments
3. Is there evidence that your waste contractors are registered waste carriers?	YES	NO	Comments
4. Is there a contract in place for the removal of clinical waste, sharps, amalgam filled extracted teeth and out of date medicines?	YES	NO	Comments
5. Is the practice registered with the environmental agency if generating over 500KG of hazardous waste per year?	YES	NO	Comments
6. Are orange clinical waste bags used for infectious category B waste such as blood swabs, blood contaminated gloves and teeth without amalgam fillings?	YES	NO	Comments
7. Are yellow (with a black stripe) bags used for offensive/hygiene waste that is not contaminated with saliva, blood, medicines, chemicals or amalgam? for example, tissues and non-contaminated gloves	YES	NO	Comments
8. Are black or clear bags used for domestic waste including paper towels?	YES	NO	Comments
9. Are bins foot operated or sensor controlled, lidded and in good working order?	YES	NO	Comments
10. Are local anaesthetic cartridges disposed of in yellow sharps containers that conform to guidelines?	YES	NO	Comments
11. Are clinical waste bags tied securely and sharps containers clicked shut before they are collected by the waste company?	YES	NO	Comments

12. Are all clinical waste bags and sharps bins labelled with the practice name, address and date before they are collected? YES NO Comments

13. Is waste awaiting collection stored in a safe and secure location away from the public within the practice premises? YES NO Comments

14. Are waste consignment notes available for all hazardous waste for the past 3 years? YES NO Comments

15. Is there evidence that the practice is segregating waste in accordance with HTM-07-01? YES NO Comments

16. Has the practice been assured that a duty of care audit has been carried out and recorded from the producer to the final disposal? YES NO Comments

Audit Results and Action Plan:

The purpose of this audit is to see what you are already doing well and identify areas for improvement. For all questions you should be aiming for a 'yes' answer.

The below table is broken down into sections for you to fill in so you can clearly see which areas need improvement and form an action plan to turn the 'no' answers into 'yes' answers.

Section	Number of questions	Number of questions answered yes	Number of questions answered no	Question numbers with 'no' answers requiring further action	Action plan	Date to be completed by
1	14					
2	56					

3	29					
4	14					
5	23					
6	17					
7	16					

Section	% of yes answers
1	
2	
3	
4	
5	
6	
7	

Total overall % of yes answers	

Next audit review date:_____
(6 months from now)