

## **Podiatry Infection Control Inspection Form**

Licence Expiry Date:	File No:
Premises Business Name:	
Proprietor Name:	
Location Address:	
Inspection Conducted with:	
Health Officer:	Date:/ Time
Purpose: Follow up - Licence - Refurbishment - Re	quest - Routine
<b>Inspection Summary Results 1</b>	
<b>Training:</b> Are staff undertaking skin penetration adequately trained in infection control	Infection Control (safety): Are facilities provided for safe disposal / cleaning / disinfection / sterilisation of equipment. Are infection control procedures adequate?
Hygiene: Is the premises clean with an adequate waste disposal policy.	Premises Construction: Is the premises suitable constructed.
Scoring: $1 = adequate$ , $2 = not entirely adequate$ , $3 = i$	nadequate, 4 = critical
Reinspection date://	
V = Satisfactory $X$ = Unsatisfactory $C$ = Criti	cal
Treatment Room	
Hand hygiene	
<ul> <li>Location of hand washing sink treatment</li> </ul>	room / other
Soap dispensers / within expiry date	
Paper towel	
When – before and after	
<ul> <li>Appropriate use of hand rub</li> </ul>	

Cleani	ng	
•	Chair	
	After each patient	
	<ul> <li>Detergent used</li> </ul>	
•	Detergent used for environmental cleaning	
	o Appropriate	
•	Transport of used instruments to the cleaning room	
	o How	
Handp	ieces	
•	Appropriately cleaned	
•	Drill machine management satisfactory	
Used s	harps	
•	Disposed of at point of use into an appropriately located AS Sharps Container	
Instrui	nents	
•	Packaging OK and entirely sealed at top	
•	Hinged instruments open in packs	,
•	Dry Packs	
•	Date on Packs	1
•	Reprocessed every 6-12 months	1
•	Tracking system in place	
•	Loose instruments autoclaved weekly	1
Draws	clean and tidy	
•	Regular cleaning program in place	
PPE		
•	Worn by staff	
•	Masks changed between patients	
•	Appropriate use of masks	

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Gown/scrubs removed before eating, drinking, taking a break or leaving the practice	
Skin preparation prior to treatment	
Appropriate product	

Mobile Service Kit	
• PPE	
Alcohol hand rub/liquid soap/paper towel	
<ul> <li>Separate, labelled rigid containers for transporting clean &amp; dirty instruments</li> </ul>	
<ul> <li>Appropriately cleaned</li> </ul>	
Sharps container	
Skin preparation product	
Surface cleaning product	

Cleaning/Sterilising Room	
Use of PPE	
<ul> <li>Instruments left soaking for &lt;1hr</li> </ul>	
Scrub, UC, rinse	
Rinse, UC, scrub, rinse	
Rinse, UC, Rinse, Inspect	
Clean/dirty flow OK	
Cleaning of containers for transporting instruments	
Double / single sink (with plastic container)	
Detergent	
o Correct dilution	
Scrubbing instruments submerged	
ID tapes/bands – appropriate use of	
Brushes autoclaved daily	
Ultrasonic Cleaner	
Detergent used	
Used with lid on	

Monitoring: foils/ceramic disc/other testing daily & results recorded	
Emptied and cleaned nightly, stored dry overnight	
Instruments rinsed in warm – hot water	
Instruments dried with low lint cloths	
Towels – changed daily	
Autoclave Brand/model:	
Downward displacement	
• Vacuum	
Packages autoclaved with paper side down/laminate up (reverse for Lisa)/rack	
Class 6 indicator each load/ permanent record documented as pass or fail	
Printout signed	
Data logger    Downloaded regularly and reviewed	
Daily helix	
Vacuum test	
Tests recorded	
Chamber water system ok	
Validation	
Documentation	
Method Ok	
Weekly biological testing	
In date vials	
Documented	
Calibration/service	
Date - Current?	
Report sited	

Other	
Records kept for 7 years (2 years onsite)	
Hand washing where	
Waste disposal company	
Locked storage of waste	
Cleaning/steri procedures documented/displayed	
Sharps injury procedure	
Explained/ understood	
Documented	
Displayed	
Understanding of Standard Precautions	
Hep B Vaccination	
Laundering of towels / linen / uniforms – appropriate	
Condition of premises	
Satisfactory	
• Issues	
	1
Yes N	0
Are the Infection Control Code of Practice and Infection Control Guidelines available for staff?	<b>.</b>