

Pharmaceutical Services Engaged 🛭		ı
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IV Infusion Therapy

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
Inspection Summary Results 1	
Training: Are staff undertaking skin penetration	Infection Control (safety): Are facilities
adequately trained in infection control	provided for safe disposal / cleaning / disinfection / sterilisation of equipment. Are infection control procedures adequate?
Hygiene: Is the premises clean with an	Premises Construction: Is the premises
adequate waste disposal policy.	suitable constructed.
Scoring: 1 = adequate, 2 = not entirely adequate, 3 = i	L nadequate, 4 = critical
Reinspection date://	
v = Satisfactory X = Unsatisfactory C = Critic	cal
Treatment room	
Hand hygiene	
Basin Location: In treatment room/other Soap dispensers/within expiry date	
Joap dispensers, within explity date	
Paper towel	
When – before and after each patient	

1

After glove removal				
Appropriate use of alcohol hand rub / within expiry date				
PPE				
Gloves				
Worn by staff				
Changed between patien	ts			
IV Infusion				
Reconstitution method app	ropriate			
Skin preparation appropria	te			
Equipment within expiry da	ate			
Appropriate set up procedu	ures / aseptic techni	que		
Aftercare instructions prov	ided			
Medical Oversite				
Prescribed by a GP / Nurse	Practitioner via Skyp	pe or similar		
Administered by GP / RN / 0	Other (other discuss)		
Sharps				
Disposed of appropriately	at point of use			
AS sharps container	'			
Appropriate disposal of sh	arps container & cli	nical waste -who/where		
Sharps injury procedure				
Documented/displayed				
Explained/understood				
Appropriate method for cle	eaning up spills			
Spills Kit / appropriate equ	ipment on the prei	mises		
Environmental Cleaning				
Tourniquet cleaning	With?	Frequency		

2

IV Pole	With?	Frequency		
Chair cleaning	With?	Frequency		
Treatment bed	With?	Frequency		
Coverings changed betw	een patients /appropria	tely laundered		
Mobile Kit				
Hand hygiene: liquid soa	p/paper towel/alcohol b	pased hand rub		
Gloves				
Needles within expiry /a	ppropriately stored			
Skin preparation product	t			
Environmental cleaning	product			
Sharps container				
Animal policy				
Spills kit				
Understanding of Standa	ard Precautions			
Hep B Vaccination				
Floor covering imperviou	ıs in treatment area			
Condition of premises				
Satisfactory				
Issues				
			Yes	No
Are the Infection Con				
Infection Control Gui	delines available for	staff?		