# IPAC ELEMENTS IN EVS, LAUNDRY AND DIETARY AUDIT TOOL

		ITEM	Yes	No	N/A	COMMENT(S)
1.	Educ	ation				
	1.1.	Regular education (including orientation and				
		continuing education) and support is provided to				
		help staff consistently implement appropriate				
		infection prevention and control (IPAC) practices.				
2.	Surfa	ces, Finishes, Furnishings and Equipment				
	2.1.	All surfaces, finishes, furnishings and equipment are				
		cleanable, easy to maintain and repair, must be				
		smooth, nonporous and seamless, and compatible				
		with the facility's approved cleaning/disinfectant				
		products (Except in Homes where the furniture is				
		supplied by the resident).				
	2.2.	There is a documented process to ensure that				
		damaged finishes, furnishings or equipment are				
		identified, repaired, replaced, or removed from the				
		areas, as appropriate.				
	2.3.	Equipment requiring maintenance/repair is visibly				
		clean and labeled.				
3.	Envir	onmental Cleaning				
	3.1.	Environmental cleaning is performed on a routine				
		and consistent basis to provide a safe and sanitary				
		environment.				
	3.2.	Written policies and procedures for cleaning and				
		disinfection of patient/client/resident and staff				
		areas are in place and reviewed on an ongoing basis,				
		as appropriate.				
4.	Staff	Rooms				
	4.1.	Chairs are spaced 6 feet/2 metres apart in staff				
		room(s).				
	4.2.	Signs are posted about wiping microwave buttons,				
		fridge handles, tables, chairs, and other high touch				
		points in the room immediately after use.				
	4.3.	Staff aware that food should not be shared in the				
		breakroom(s), unless individually wrapped.				
	4.4.	Personal Protective Equipment (PPE) is not stored in				
		staff rooms.				
5.		and Drink in Work Areas				
	5.1.	There was no evidence of water bottles in the work				
		area(s).				
	5.2.	These was no evidence of food in the work area(s).				
<u> </u>		Hydration stations are in place in work area(s).				
6.		ning and Disinfectant Products				
	6.1.	There was no evidence of trigger spray bottles in use				
		in the area(s).				
	6.2.	Cloths are being saturated with cleaning and/or				
		disinfectant solution to clean surfaces and				
		equipment, per documented organizational policy				
		and procedures. Note: cloths must not be repeatedly				

		ITEM	Yes	No	N/A	COMMENT(S)
		immersed into cleaning or disinfectant solution (i.e.,				
		no double dipping of cloths).				
	6.3.	Cleaning and/or disinfectant products are being				
		used, per manufacturer's instructions for dilution,				
		contact times, and all other manufacturer's				
		recommendations.				
	6.4.	Cleaning and/or disinfectant products are labeled				
		with a drug identification number (DIN) from Health				
		Canada.				
	6.5.	There was no evidence of expired cleaning and/or				
		disinfectant products being used in the area(s).				
	6.6.	Appropriate PPE is worn when using cleaning and/or				
		disinfectant products, per requirements on safety				
		data sheets.				
7.	Enviro	onmental Services Carts				
	7.1.	There are no personal items on the cleaning carts,				
		such as water bottles, coffee cups, hand lotions,				
		personal cell phones, etc.				
	7.2. (	Carts are stocked at the start of the shift.				
	7.3.	Only facility approved cleaning and/or disinfectant				
	,	products are visibly accessible and available.				
	7.4.	Carts are cleaned and disinfected if visibly soiled				
	,	and/or at the end of each shift.				
	7.5.	There are documented schedule/procedures for				
	7.5.	cleaning the carts.				
	7.6.	The trash can(s) have a bag in them – no extra trash				
	7.0.	bags have been placed in the bottom of the can(s)				
		for future use.				
8.	Laund	ry Area(s)				
<u> </u>	8.1.	Staff are provided appropriate PPE to provide				
	0.1.	protection from potential cross-infection and sharps				
		injury when handling soiled linen (i.e., Staff are				
		wearing a water resistant, disposable gown when				
		working with dirty laundry; gloves to protect from				
		exposure, etc.).				
	8.2.	There was a dedicated hand washing sink and				
	0.2.	alcohol-based hand rub s readily available in all				
		laundry areas.				
	8.3.	Single use plastic bags are used for dirty laundry.				
	0.0.	Note: Polyester bags are not liquid permeable and				
		can cause transfer of bacteria, thus they are not				
		recommended for use.				
	8.4.	There was no evidence of staff eating or drinking in				
	J	clean or dirty laundry area(s).				
	8.5.	There was signage posted to say "No Eating or				
		Drinking" in the laundry area(s).				
	8.6.	There is a documented procedure for washing all				
	0.0.	personal linens separately from regular dirty laundry				
		within the facility.				
	8.7.	Linens from isolation spaces are not separated from				
	J.,,	other dirty laundry, per documented organizational				
		policy and procedures.				
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		ITEM	Yes	No	N/A	COMMENT(S)
	8.8.	There was evidence that each				
		patient/client/resident has their own separate linen				
		bag for personal laundry, bedding and towels.				
9.	Dietar	у				
	9.1.	There was evidence of appropriate staff hand				
		hygiene practices before touching food and upon				
		leaving the patient's/client's/resident's room.				
	9.2.	Drinks are poured into a glass prior to leaving the				
		kitchen area, appropriately covered and transported				
		to the patient/client/resident, per documented				
		organizational policy and procedures.				
	9.3.	Snacks are covered or individually wrapped, and				
		delivered on a clean cart.				
	9.4.	Food is appropriately covered when delivered to				
		rooms.				
10.	Hand	Hygiene				
	10.1. E	nvironmental services staff and all other staff were				
	p	performing hand hygiene before entering and on				
		eaving the client/patient/resident area(s).				
		Remember the 4 moments of Hand Hygiene. As EVS				
		taff you will rarely if ever use moment #2				
11.	1. Additional Items, if there is a suspect or declared outbreak					
	11.1.	High touch areas are being cleaned twice daily.				
	11.2.	A patient's/client's/resident's personal belongings				
		accompany them when transferred to another room				
		during an outbreak situation, per documented				
		organizational policy and procedures.				
	11.3.	EVS audits are regularly completed during				
		outbreaks, per documented organizational policy				
		and procedures and/or per direction of the local				
		Public Health Unit.				
	11.4.	Staff are assigned to single work area during				
		outbreak situations, per documented organizational				
		policy and procedures. Note: The only time that staff				
		can worked in multiple areas during an outbreak is				
-		at the direction of the local Public Health Unit.				
	11.5.	Sufficient staffing resources are dedicated to ensure				
-		effective cleaning at all times during outbreaks.				
		TOTALS				

Audit completed by:	 
Audit completion date: _	
Facility:	
Unit (if applicable):	

#### Infection Prevention & Control Environmental Services Audit Instructions

### What you need to know:

- This audit can be done by any staff member.
- This audit is a one time "snap shot".
- This audit takes into consideration all types of care in the community, so there may be one or more categories listed in the audit that do not apply to the area you are auditing.
- The audit results are to be used to help determine areas for improvement. The audit results are not used to lay blame.
- Some improvements can be made immediately and can be done by anyone.
- Some changes will take time and require special project planning by the area. This should be noted in the final report.
- <insert any additional details here>

#### **Auditor's Instructions:**

- Complete the audit, documenting exactly what you see at the time of the audit.
- The categories to be audited have been put in sections. If you do not have the items listed in the category in your work area(s), you can cross them out.
- Check off N/A (not applicable) if just one of the items listed in the category is not applicable to the area you are auditing.
- Provide comments if more detail is needed when there is an issue this provides valuable information regarding what changes need to be made.
- If the item is not included in the audit form, the items can be added to the section marked "other".
- Total the score when the completed audit is received.
- Sign, date and fill in the location of the area being audited.
- Send audit report to area manager, once audit is reviewed.

# **Area Manager's Intructions**

- Ensure this report is shared with audited area's staff.
- Make recommendations in the final report if any improvements are required
- Assess audit reports after one year to determine the frequency of further audits.
- Collaborate with area manager to resolve issues.

Thank you for completing the Infection Prevention & Control Environmental Services Audit.

## References

<u>Provincial Infectious Disease Advisory Committee's PIDAC Best Practices for Environmental Cleaning for Prevention and Control of Infections</u>