PROCEDURE AND AUDIT CHECKLIST

Infection prevention and control procedure checklist

Source anchors

- CQC Regulation 12, safe care and treatment
- DHSC infection prevention and control Code of Practice
- NHS England National Infection Prevention and Control Manual
- UKHSA health protection guidance
- CQC notifications
- HTM 01-05 dental decontamination guidance
- HSE sharps injuries guidance

How to use this checklist

Use this checklist to audit whether the service can show infection prevention and control in practice: risk assessment, standard precautions, cleaning, decontamination, waste, staff health, outbreak response and governance. It can be used monthly, after an IPC incident, after premises or service change, or before an inspection-readiness review.

IPC requirements vary by service model, premises and procedure type. Check current national, local and sector-specific guidance before relying on local defaults.

For each row, record:

- **Met:** evidence is current and complete.
- **Part met:** evidence exists but has a gap or needs follow-up.
- **Not met:** evidence is absent or the control is not working.
- **Not applicable:** the service does not carry out this activity.

Every `Part met` or `Not met` item should create an action with an owner and due date.

The PDF is designed for printing, or for completing on screen with a PDF viewer's Fill & Sign, Markup or comment tools. Use those tools to tick boxes and type into the lines.

Service details

SERVICE NAME	LOCATION

DATE COMPLETED	COMPLETED BY

REGISTERED MANAGER	IPC LEAD
DECONTAMINATION LEAD, WHERE RELEVANT	PERIOD REVIEWED

1. IPC leadership and risk assessment

CHECK AND EVIDENCE	STATUS	OWNER	DUE
1 **IPC Lead and deputy are named.** **Evidence:** Role list, procedure, rota.	☐ Met ☐ Part met ☐ Not met ☐ N/A		
2 **IPC risk assessment reflects the service model, people, premises and procedures.** **Evidence:** IPC risk assessment, statement of purpose.	☐ Met ☐ Part met ☐ Not met ☐ N/A		
3 **Risk assessment is reviewed after service changes, incidents, outbreaks or new guidance.** **Evidence:** Review history, governance minutes.	☐ Met ☐ Part met ☐ Not met ☐ N/A		
4 **Staff know how to raise IPC concerns.** **Evidence:** Staff interview, induction record.	☐ Met ☐ Part met ☐ Not met ☐ N/A		
5 **IPC responsibilities for contractors, cleaners or shared premises are clear.** **Evidence:** Contract, cleaning specification, landlord or contractor record.	☐ Met ☐ Part met ☐ Not met ☐ N/A		
6 **IPC risks that need governance oversight are on the risk register.** **Evidence:** Risk register, IPC audit link.	☐ Met ☐ Part met ☐ Not met ☐ N/A		

2. Standard precautions and clinical practice

CHECK AND EVIDENCE	STATUS	OWNER	DUE
1 **Hand hygiene facilities and supplies are available.** **Evidence:** Physical check, stock record.	☐ Met ☐ Part met ☐ Not met ☐ N/A		
2 **Hand hygiene practice is observed or audited.** **Evidence:** Audit record, observation.	☐ Met ☐ Part met ☐ Not met ☐ N/A		
3 **PPE is available, appropriate and used correctly.** **Evidence:** Stock check, staff observation, procedure.	☐ Met ☐ Part met ☐ Not met ☐ N/A		
4 **Aseptic technique is used where relevant.** **Evidence:** Competency record, clinical audit.	☐ Met ☐ Part met ☐ Not met ☐ N/A		
5 **Sharps are handled and disposed of safely.** **Evidence:** Sharps bin check, exposure incident record.	☐ Met ☐ Part met ☐ Not met ☐ N/A		

CHECK AND EVIDENCE	STATUS	OWNER	DUE
6 **Transmission-based precautions are used where infection risk is known or suspected.** **Evidence:** Care record, room plan, cleaning record.	☐ Met ☐ Part met ☐ Not met ☐ N/A		

3. Cleaning, environment and equipment

CHECK AND EVIDENCE	STATUS	OWNER	DUE
1 **Cleaning specification states what is cleaned, by whom, how often and with what product.** **Evidence:** Cleaning schedule, specification.	☐ Met ☐ Part met ☐ Not met ☐ N/A		
2 **Cleaning records are completed and checked.** **Evidence:** Cleaning log, supervisor check.	☐ Met ☐ Part met ☐ Not met ☐ N/A		
3 **Enhanced cleaning triggers are defined.** **Evidence:** IPC procedure, incident sample.	☐ Met ☐ Part met ☐ Not met ☐ N/A		
4 **Reusable equipment is cleaned or disinfected between use.** **Evidence:** Equipment log, observation, procedure.	☐ Met ☐ Part met ☐ Not met ☐ N/A		
5 **Damaged, dirty or unsafe equipment is removed from use.** **Evidence:** Equipment quarantine, incident record.	☐ Met ☐ Part met ☐ Not met ☐ N/A		
6 **Water, ventilation or premises risks are reviewed where relevant.** **Evidence:** Premises check, risk assessment, service record.	☐ Met ☐ Part met ☐ Not met ☐ N/A		

4. Decontamination, waste and laundry

CHECK AND EVIDENCE	STATUS	OWNER	DUE
1 **Reusable device decontamination follows relevant guidance.** **Evidence:** Decontamination procedure, cycle records.	☐ Met ☐ Part met ☐ Not met ☐ N/A		
2 **Traceability records link instruments or devices to patients where required.** **Evidence:** Traceability record, procedure list.	☐ Met ☐ Part met ☐ Not met ☐ N/A		
3 **Failed cycles, failed tests or decontamination concerns are escalated.** **Evidence:** Incident record, action log.	☐ Met ☐ Part met ☐ Not met ☐ N/A		
4 **Single-use items are not reused.** **Evidence:** Stock check, staff interview.	☐ Met ☐ Part met ☐ Not met ☐ N/A		
5 **Waste is segregated, stored and collected safely.** **Evidence:** Waste audit, contractor record.	☐ Met ☐ Part met ☐ Not met ☐ N/A		

CHECK AND EVIDENCE	STATUS	OWNER	DUE
6 **Laundry, linen or uniforms are handled to reduce cross-infection where relevant.** **Evidence:** Laundry procedure, staff guidance.	☐ Met ☐ Part met ☐ Not met ☐ N/A		

5. Staff health, incidents and outbreaks

CHECK AND EVIDENCE	STATUS	OWNER	DUE
1 **Staff IPC training is current for role.** **Evidence:** Training matrix, induction record.	☐ Met ☐ Part met ☐ Not met ☐ N/A		
2 **Staff know when not to work because of transmissible symptoms.** **Evidence:** Staff interview, procedure.	☐ Met ☐ Part met ☐ Not met ☐ N/A		
3 **Vaccination or immunity checks are recorded where role-relevant.** **Evidence:** Staff health record, occupational health route.	☐ Met ☐ Part met ☐ Not met ☐ N/A		
4 **Sharps injuries, exposure incidents and IPC breaches are reported and reviewed.** **Evidence:** Incident sample, learning record.	☐ Met ☐ Part met ☐ Not met ☐ N/A		
5 **Outbreak response route and advice contacts are current.** **Evidence:** Outbreak procedure, health protection contact route.	☐ Met ☐ Part met ☐ Not met ☐ N/A		
6 **CQC notification, safeguarding or commissioner reporting is considered for significant IPC incidents.** **Evidence:** Decision note, notification record.	☐ Met ☐ Part met ☐ Not met ☐ N/A		

6. Audit and governance

CHECK AND EVIDENCE	STATUS	OWNER	DUE
1 **IPC audits run at a stated cadence.** **Evidence:** Audit schedule, completed audits.	☐ Met ☐ Part met ☐ Not met ☐ N/A		
2 **Audit covers practice, environment, cleaning, waste, decontamination and training where relevant.** **Evidence:** Audit tool, results.	☐ Met ☐ Part met ☐ Not met ☐ N/A		
3 **IPC actions have owners, due dates and completion evidence.** **Evidence:** Action log, evidence.	☐ Met ☐ Part met ☐ Not met ☐ N/A		
4 **Repeated findings are escalated to governance.** **Evidence:** Governance minutes, risk register.	☐ Met ☐ Part met ☐ Not met ☐ N/A		
5 **IPC incidents and outbreaks lead to documented learning.** **Evidence:** Incident review, outbreak log, action evidence.	☐ Met ☐ Part met ☐ Not met ☐ N/A		

CHECK AND EVIDENCE	STATUS		OWNER	DUE
6 **Registered Manager reviews overdue IPC actions.** **Evidence:** Governance report, dashboard.	☐ Met ☐ Not met	☐ Part met ☐ N/A		

7. Summary judgement

Which IPC risk is highest today?

Which cleaning, decontamination or waste control has the weakest evidence?

Which repeated IPC finding needs escalation?

Which IPC action or audit is overdue?

What would a CQC inspector see if they asked for IPC evidence today?

8. Action log

Action	Source check	Owner	Due date	Completion evidence

9. Completion

Sign-off	Name	Date
Completed by		
Reviewed by Registered Manager		

This checklist is a working tool. It does not replace live regulator guidance, health protection advice, occupational health advice, HTM guidance, the service's own IPC policy, legal advice or clinical judgement.

Related reading

- Article: Vaccine storage and cold chain compliance
- Sample policy: Infection prevention and control policy
- Related procedure checklist: Incident reporting and learning checklist
- Related procedure checklist: Risk management and risk register checklist

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An example for guidance, not a ready-to-use checklist. Adapt it to your own service, procedures, roles and local arrangements. It is guidance, not legal advice, and you are responsible for checking that any document you use is current.