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**Infection Control Check-list**

Name(s) of practitioner(s) \_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Practice address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Inspector(s) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date of inspection \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Notification number :

***Section 1 - Practice type***

|  |  |  |  |
| --- | --- | --- | --- |
|  | Yes | No | Notes |
| Dentist/dental therapist/dental hygienist/oral health therapist |  |  |  |
| Dental prosthetist – surgery and laboratory |  |  |  |
| Other (specify) |  |  |  |

***Section 2 - Documentation***

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | Yes | No | N/A | Notes |
| 2.1 Is there an up to date Practice Manual detailing Infection Control  procedures as required by DBA guidelines on infection control? |  |  |  |  |
| 2.2 Is there hardcopy/electronic access to the current version of the Australian  Guidelines for the Prevention and Control of Infection in Healthcare published by  the NH&MRC as required by DBA guidelines on infection control? |  |  |  |  |
| 2.3 Is there hardcopy/electronic access to the current version of AS/NZS 4815,  Office-based health care facilities – Reprocessing of reusable medical and surgical instruments and equipment, and maintenance of the associated environment? or AS/NZS 4185 OR 4187 if applicable as required by DBA guidelines on infection control? |  |  |  |  |
| 2.4 Is there hardcopy/electronic access to the current version of the ADA Inc.  guidelines as required by DBA guidelines on infection control |  |  |  |  |
| 2.5 Have all staff of the practice read the Practice manual and been trained in  infection control protocols used in the practice? |  |  |  |  |
| 2.6 Have staff attended an update on infection control in the last 2 years? |  |  |  |  |
| 2.7 Does the practice have a written or electronic record of workplace incidents  and accidents (including sharps injuries), as required by national OH&S  legislation? |  |  |  |  |

***Section 3 - Personal hygiene and hand hygiene***

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | Yes | No | N/A | Notes |
| 3.1 Does each registered dental practitioner involved in clinical work know  their antibody status for hepatitis B, hepatitis C and HIV and practise accordingly? |  |  |  |  |
| 3.2 Is there a vaccination record for each member of the clinical staff? |  |  |  |  |
| 3.3 Is there an allergy record for each member of the clinical staff? |  |  |  |  |
| 3.4 Are the finger nails of clinical staff short, free of jewellery and false nails  and are hands/fingers appropriately covered when they have cuts/abrasions? |  |  |  |  |
| 3.5 Are there established protocols for hand hygiene which comply with  NHMRC 2010 and Hand Hygiene Australia requirements? |  |  |  |  |
| 3.6 Are there established protocols for hand hygiene before gloving and after degloving? |  |  |  |  |
| 3.7 Is an appropriate alcohol-based liquid/gel available for waterless hand- hygiene? |  |  |  |  |
| 3.8 If liquid soap containers are not disposable, are they refilled in an appropriate manner? |  |  |  |  |
| 3.9 Is there disposable paper towel for hand drying? |  |  |  |  |
| 3.10 Are there established protocols for when to wear and how to change gloves? |  |  |  |  |
| 3.11 Are there established protocols for the disposal of gloves? |  |  |  |  |
| 3.12 What kind of *sterile* gloves are available: Latex / Non-Latex (circle) |  |  |  |  |
| 3.13 What kind of *non-sterile* gloves are available: Latex / Non-Latex (circle) |  |  |  |  |
| 3.14 Are there appropriate protocols for wearing and changing protective masks  changed for each patient? |  |  |  |  |
| 3.15 Are disposable gloves ever reused? |  |  |  |  |
| 3.16 Is protective eyewear worn by clinical staff? |  |  |  |  |
| 3.17 Is protective eyewear offered to each patient? |  |  |  |  |

***Section 4 - Surgery***

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | Yes | No | N/A | Notes |
| 4.1 Does the surgery have defined “clean” and” contaminated” zones? |  |  |  |  |
| 4.2 Are there designated hand basins for hand hygiene? |  |  |  |  |
| 4.3 Are there appropriate procedures for surface cleaning and decontamination between patients? |  |  |  |  |
| 4.4 Are plastic barriers being used appropriately? |  |  |  |  |
| 4.5 Are instrument storage areas clean and hygienic? |  |  |  |  |
| 4.7 Are there appropriate protocols in place for the transfer of instruments/materials IN to the dental operatory? |  |  |  |  |
| 4.8 Are there protocols in place for the transfer of instruments/materials OUT  of the dental operatory? |  |  |  |  |
| 4.9 Are damaged items removed from use and reprocessed? |  |  |  |  |
| 4.10 Are non-critical items sorted in a manner which keeps them dust-free, clean and clear of aerosols? |  |  |  |  |
| 4.11 Are any items designated by the manufacturer as single use reprocessed and reused? |  |  |  |  |
| 4.12 Is the storage of packaged instruments in accordance with AS4815? (including open shelves 250mm above floor level; no rubber bands holding packets of instruments together; no over-crowding of instruments in drawers; protection from aerosols) |  |  |  |  |
| 4.13 Are patient notes written up by hand/electronically using an acceptable protocol which prevents environmental contamination of the hard copy notes or computer keyboard? |  |  |  |  |

***Section 5 – Surgery Equipment***

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | Yes | No | N/A | Notes |
| 5.1 Are there protocols for dental unit waterline management? |  |  |  |  |
| 5.2 Are there protocols for suction line management? |  |  |  |  |
| 5.3 Are there protocols for sterile procedures? |  |  |  |  |
| 5.4 Are there protocols for handling aerosols from air abrasion procedures? |  |  |  |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| 5.5 Are there protocols for handling plume from electro surgery or laser surgical procedures? |  |  |  |  |
| 5.6 Are there appropriate protocols for surface management of radiographic equipment? |  |  |  |  |
| 5.7 Are there appropriate protocols in place for surface management of X-ray film or sensors? |  |  |  |  |
| 5.8 Are instruments used in critical sites sterile at the point of use? |  |  |  |  |
| 5.9 Are extracted teeth disposed of in accordance with local authority guidelines? |  |  |  |  |

***Section 6 - Sharps and waste disposal***

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | Yes | No | N/A | Notes |
| 6.1 Is there an established protocol for dealing with needlestick, other sharps injuries and splash exposures? |  |  |  |  |
| 6.2 Do suitable waste disposal arrangements exist for sharps? |  |  |  |  |
| 6.3 Do sharps containers meet Australian standards and are they located appropriately? |  |  |  |  |
| 6.4 Do clinicians manage sharps appropriately as soon as practicable after use in the surgery? |  |  |  |  |
| 6.5 Are used sharps passed to the dental assistant by the clinician? |  |  |  |  |
| 6.6 Do suitable waste disposal arrangements exist for contaminated material,  such as blood-soaked gauze? |  |  |  |  |
| 6.7 Are SS endodontic files/reamers sterile at point of use and single use? |  |  |  |  |
| 6.8 Are protocols in place to check for appropriate re-use or disposal of SS burs after single use? |  |  |  |  |
| 6.9 Are NiTi endodontic files reprocessed according to accepted protocols? |  |  |  |  |

***Section 7 – Medicaments***

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | Yes | No | N/A | Notes |
| 7.1 Are LA cartridges stored appropriately prior to use to prevent  environmental contamination? |  |  |  |  |
| 7.2 Are LA cartridges ever re-used on additional patients? |  |  |  |  |
| 7.3 Are medicatment in tubes or jars kept free of environmental  contamination? |  |  |  |  |

***Section 8 - Reprocessing area***

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | Yes | No | N/A | Notes |
| 8.1 Is the reprocessing room appropriate in layout and size for the volume of instruments being reprocessed? |  |  |  |  |
| 8.2 Does the instrument processing area have defined “clean” and“  contaminated” zones? |  |  |  |  |
| 8.3 Is there a clear work flow from dirty to clean? |  |  |  |  |
| 8.4 Are there separate sinks for washing hands and instruments? |  |  |  |  |
| 8.5 Are instruments stored appropriately prior to being cleaned? |  |  |  |  |
| 8.6 *Manual washing* Are instruments washed in a deep sink or under water? |  |  |  |  |
| 8.7 *Manual washing* - – Is appropriate personal protective equipment worn by staff undertaking manual cleaning of items? E.g. Are heavy-duty utility gloves, , masks and eye protection available and worn? |  |  |  |  |
|  | Yes | No | N/A | Notes |
| 8.8 *Manual washing* - Is the detergent solution used appropriate for the purposes of instrument cleaning (e.g. not a domestic dishwashing product)? |  |  |  |  |
| 8.9 *Mechanical instrument washing* - Are there protocols and documentation in place for the use and maintenance of instrument washers? |  |  |  |  |
| 8.10 *Mechanical instrument washing –* Are cassettes used to hold instruments in the instrument washer? |  |  |  |  |
| 8.11 *Ultrasonic cleaners* - Are there protocols and documentation in place for the use and maintenance of ultrasonic cleaners? Is the chamber left dry overnight? Is the lid kept on when in use? |  |  |  |  |
| 8.12 *Ultrasonic cleaners* – are the detergents or additives used suitable? |  |  |  |  |
| 8.13 *Ultrasonic cleaners* - is the water degassed? |  |  |  |  |
| 8.14 *Ultrasonic cleaners* - is the performance of the transducers tested? What is  the frequency and type of testing? |  |  |  |  |
| 8.15 After rinsing, are the instruments from the ultrasonic cleaner free of visible debris? |  |  |  |  |
| 8.16 Is there an appropriate means for ensuring instruments are dry after  cleaning? ? |  |  |  |  |
| 8.17 Is handpiece maintenance satisfactory? |  |  |  |  |
| 8.18 Are critical instruments appropriately wrapped or bagged? |  |  |  |  |
| 8.19 Are bagged/wrapped items loaded properly in the autoclave chamber ? |  |  |  |  |
| 8.20 Do bagged/wrapped instruments come dry out from the autoclave? |  |  |  |  |
| 8.21 Are there protocols for batch control identification for bagged/wrapped critical instruments? |  |  |  |  |
| 8.22 Is the protocol for handling dropped bags or instruments adequate? |  |  |  |  |

***Section 9 - Sterilisation and disinfection***

*Total number of sterilisers in the practice****s*** *\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*

***STERILISER ID****:* ***TYPE OF STERILISER*** *\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*

*(use one table for each steriliser)*

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| ***9A Steam Sterilisers*** | Yes | No | N/A | Notes |
| 9.1 Is there an operating manual for the autoclave available on the premises? |  |  |  |  |
| 9.2 Are there protocols and documentation in place for the use and maintenance of the steam sterilizer, including: |  |  |  |  |
| - installation qualification? |  |  |  |  |
| - operational qualification? |  |  |  |  |
| - performance qualification? |  |  |  |  |
| - performance qualification report? |  |  |  |  |
| - air removal/steam penetration tests (pre-vacuum units only)? |  |  |  |  |
| - leak rate tests (pre-vacuum units only)? |  |  |  |  |
| - cleaning of the chamber? |  |  |  |  |
| - cleaning of trays? |  |  |  |  |
| - Loading of the chamber? |  |  |  |  |
| - Checking physical indicator data (display, data card of printout at the completion of a cycle? |  |  |  |  |
| - Checking the chemical indicator(s) at the completion of a cycle (including external and inaternal indicators where present in wrapped items)? |  |  |  |  |
| - Recording cycle data in the log book? |  |  |  |  |
| - Authorising load release? |  |  |  |  |
| 9.3 Is the steriliser functioning correctly? |  |  |  |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | Yes | No | N/A | Notes |
| ***9B Thermal disinfection (for prosthetist facilities)*** |  |  |  |  |
| 9.4 What temperature and time is applied for thermal disinfection (boiling)? |  |  |  |  |
| 9.5 Are instruments cleaned before being placed in the boiler? |  |  |  |  |
| 9.6 Are instruments covered with water in the boiler? |  |  |  |  |
| 9.7 Is the cleaning protocol for the boiler adequate? |  |  |  |  |

***Section 10 – Laboratory***

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | Yes | No | N/A | Notes |
| 10.1 Do suitable arrangements exist for the decontamination of impressions? |  |  |  |  |
| 10.2 Do suitable arrangements exist for the pouring up of impressions? |  |  |  |  |
| 10.3 Do suitable arrangements exist for the decontamination of denture stages? |  |  |  |  |
| 10.4 Do suitable arrangements exist for management of buffs, pumice and polishing trays for new dentures? |  |  |  |  |
| 10.5 Do suitable arrangements exist for management of buffs, pumice and polishing trays for relines and denture repairs? |  |  |  |  |
| 10.6 Do suitable arrangements exist for the re-use of acrylic teeth and porcelain teeth? |  |  |  |  |
| 10.7 Are different gowns used for the surgery and the laboratory? |  |  |  |  |
| 10.8 Are the handpieces used for denture adjustments in the laboratory protected by barriers appropriately? |  |  |  |  |
| 10.9 Are burs used for contaminated denture adjustments autoclaved or boiled? |  |  |  |  |
| 10.10 Is laboratory equipment including bowls and spatulas clean? |  |  |  |  |
| 10.11 Are there designated areas for the receipt and dispatch of lab work? |  |  |  |  |

***Section 11 – Practice hygiene and summary of critical points*** *(11.6 and 11.7 are also recorded in earlier sections of the document)*

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | Yes | No | N/A | Notes |
| 11.1 Are the premises in general clean and hygienic? |  |  |  |  |
| 11.2 Are working surfaces in the instrument reprocessing room clean and  hygienic? |  |  |  |  |
| 11.3 Are working surfaces in the dental operatory clean and hygienic? |  |  |  |  |
| 11.4 Are working surfaces in the laboratory clean and hygienic? |  |  |  |  |
| 11.5 Are instrument storage areas clean and hygienic? |  |  |  |  |
| 11.6 Are all sterilisers functioning correctly? |  |  |  |  |
| 11.7 Are disposable gloves ever re-used? |  |  |  |  |

***Other notes or comments:***

***Recommendations by Inspectors subsequent to inspection:***