

Infection Control Audit Tool

AUDIT : 1ST 2019

Dental Center Name:	
Numbe of Dental Clinics:	
City Name:	
Surveyor Name:	
Mobile Number:	
Email:	
Date of Visit:	
Participants present (e.g. Director of the center Infection Control Head, etc)	

Scores:	Definition:
2	Fully compliant
1	Partially Compliant
0	Non- Compliant
N/A	Not Applicable

Weight:	Defintion:
Critical	Immediate threat to patient or staff safety
High	Highly Affect the integrity and the function of the Infection Control program
Medium	Affecting the integrity or function of IPC program

Activities	Meaning
O	Observation
SI	Staff Interview
D	Documents Review
PF	Personal File
MR	Medical Records

0 to 50 / 50 to 75 / 75 to 100

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	Standards	Sub-Standard		Weight	Activities			Scoring	Recommendation
1	Administration	1.1	There is a hard copy / electronic access of the MOH manual of infection prevention and control in dental settings in the center.	High	O				NO N/A
		1.2	Dental staff members have access to the manual and are familiar with the content of the manual and its use.	High	SI				NO N/A
		1.3	At least one individual staff trained in infection control in the center is assigned for implementing the infection control program.	High	O	SI			NO N/A
2	Education and Training	2.1	Dental staff members have been educated and trained on the necessary infection control procedures, and the training was provided: - At the time of initial employment. - When new tasks or procedures are assigned. - At least annually.	High	SI	D			NO N/A
		2.2	The records for infection control training and education are maintained for at least two years.	Medium	D				NO N/A
3	3. Employee Health	3.1	There is assigned clinic / staff for coordinating the employees' health program.	High	O	D			NO N/A
		3.2	The dental facility has a written mechanism for prearranged referral arrangements to a healthcare facility professional to receive all appropriate immunizations.	Critical	D				NO N/A
		3.3	All employees have baseline screening for: - Hepatitis B, - Hepatitis C, - HIV, - Tuberculosis (PPD testing).	Critical	PF	MR			NO N/A
		3.4	The immune status of newly hired staff is determined by serological testing against: - Hepatitis B, - Measles, - Mumps, - Rubella, - Varicella.	Critical	PF	MR			NO N/A
		3.5	The following vaccine are available at no cost to all employees who are susceptible: - Hepatitis B, - Measles, - Mumps, - Rubella, - Varicella. - Influenza. - Meningitis.	Critical	PF	MR			NO N/A

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		3.6	The dental facility has a written mechanism for referral arrangements to qualified health care professionals to ensure prompt and appropriate provision of post exposure management with medical follow-up.	Critical	D				NO N/A
		3.7	When an occupational exposure occurs, an exposure incident report is filled and sent to the infection control / employee health coordinator.	Critical	D				NO N/A
		3.8	Dental staff members are familiar with the process of reporting an occupational exposure incident.	Critical	SI				NO N/A
		3.9	A log of needle sticks, sharps injuries, and other employee exposure incidents is maintained.	Critical	D				NO N/A
		3.1	The dental facility has a clear system to maintain confidential medical records (e.g., immunization records and documentation of tests received as a result of occupational exposure) for all dental staff.	Critical	D				NO N/A
4.	Hand Hygiene	4.1	Alcohol based hand rub dispensers are available and easily accessible (at least one dispenser in each clinic).	Critical	O				NO N/A
		4.2	Supplies necessary for performing hand washing procedures (sinks, soap, water, paper towels, antimicrobial soap,) are available and easily accessible.	Critical	O	SI			NO N/A
		4.3	Hand washing sinks are dedicated only for hand washing procedure (not used to clean instruments).	Critical	O	SI			NO N/A
		4.4	Dental staff members comply with hand hygiene recommendations can display appropriate hand hygiene techniques according to WHO guidelines (appropriate technique and recommended duration).	Critical	O	SI			NO N/A
		4.5	There are enough number of hand hygiene posters beside hand rub dispensers and sinks.	Medium	O				NO N/A
5.	Personal Protective Equipment	5.1	Sufficient and appropriate personal protective equipment are available and accessible in a variety of types and sizes. (e.g., examination gloves, surgical face masks, protective clothing, protective eyewear/ face shields, utility gloves, sterile surgeon's gloves for surgical procedures).	Critical	O	SI			NO N/A
		5.2	Surgical mask and eye protection with solid side shields or a face shield are worn when performing procedures likely to cause splash or spatter.	Critical	O	SI			NO N/A
		5.3	Masks are changed between patients or during patient treatment if they become wet.	Critical	O	SI			NO N/A
		5.4	Protective clothing (Gown) is worn over street clothes or uniforms to protect against splash or spatter.	Critical	O	SI			NO N/A
		5.5	Protective clothing (Gown) is changed between patients or when it is visibly soiled or penetrated by blood or other potentially infectious fluids.	Critical	O	SI			NO N/A

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	Equipment	5.6	Medical gloves are worn when contact with body fluids is expected.	Critical	O	SI			NO N/A
		5.7	Sterile surgeon's gloves are worn when performing or assisting on oral surgical procedures.	Critical	O	SI			NO N/A
		5.8	Gloves are removed immediately after use, and hand hygiene is performed immediately.	Critical	O	SI			NO N/A
		5.9	All types of personal protective equipment are removed before leaving the work area (e.g., dental patient care, instrument processing, or laboratory areas).	Critical	O	SI			NO N/A
		5.10	Dental staff members can display appropriate technique of donning and doffing of personal protective equipment. (corrects sequence and appropriate technique).	Critical	O	SI			NO N/A
6.	Respiratory Hygiene	6.1	Signs are posted at entrances (with instructions to patients with symptoms of respiratory infection to cover their mouths / noses when coughing or sneezing, use and dispose of tissues, and perform hand hygiene after hands have been in contact with respiratory secretions).	Medium	O				NO N/A
		6.2	Tissues and no-touch receptacles for disposal of tissues are provided at patient waiting areas.	Medium	O				NO N/A
		6.3	Supplies are provided for patients to perform hand hygiene in or near waiting areas.	Medium	O				NO N/A
		6.4	Face masks are offered to coughing patients and other symptomatic persons when they enter the setting.	Medium	O				NO N/A
		6.5	Persons with respiratory symptoms are encouraged to sit as far away from others as possible. If possible, a separate waiting area is ideal.	Medium	O				NO N/A
7.	Sharps Safety	7.1	Engineering controls (e.g., self-sheathing anesthetic needles, safety scalpels, needle recapping devices) are used to prevent injuries.	Medium	O	SI			NO N/A
		7.2	Used disposable syringes and needles, scalpel blades, and other sharp items are placed in appropriate puncture-resistant containers.	High	O	SI			NO N/A
		7.3	Sharps containers located as close as possible to the area where the sharps are used.	High	O	SI			NO N/A
		7.4	When needles must be recapped, needle recapping devices or the one-handed scoop technique are used.	Critical	O	SI			NO N/A
8.	Instrument Reprocessing	8.1	No reprocessing of instruments is carried inside the dental clinic.	Critical	O	SI			NO N/A
		8.2	If the sterilization process will be applied after 2 hours or more, a transportation gel/spray is applied.	Medium	O	SI			NO N/A
		8.3	All reusable dental instruments are replaced between patients and sent to central sterilization.	Critical	SI	D			NO N/A

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		8.4	Contaminated dental instruments are transferred to the central sterilization department in a closed, sealable and puncture resistant container.	Critical	O	SI				NO N/A
		8.5	Single-use devices are discarded after one use and not used for more than one patient.	Critical	O	SI				NO N/A
9.	Environmental Surfaces	9.1	Clinical contact surfaces (e.g., such as light handles, bracket trays, switches on dental units, computer equipment) are either barrier protected or cleaned and disinfected with a hospital disinfectant after each patient.	High	O	SI				NO N/A
		9.2	Housekeeping surfaces (e.g. as floors, walls, and sinks) are routinely cleaned using either a dilute detergent or low-level disinfectant and cleaned and disinfected with an appropriate low-level disinfectant if visibly contaminated with blood saliva or other bodily fluids.	Medium	SI					NO N/A
		9.3	Cleaning materials and disinfectants are used in accordance with manufacturer instructions (e.g., dilution, storage, shelf-life, contact time, PPE).	Medium	SI					NO N/A
		9.4	Staff members engaged in environmental cleaning wear appropriate PPE to prevent exposure to infectious agents or chemicals (PPE can include gloves, gowns, masks, and eye protection)	High	O					NO N/A
		9.5	Mops or cloths used to clean housekeeping surfaces are either cleaned after use and allowed to dry before reuse, or are single- use items.	Medium	SI					NO N/A
		9.6	Fresh cleaning or low-level disinfecting solutions are prepared daily and as instructed by the manufacturer.	Medium	SI					NO N/A
		9.7	There is a spill kit in each clinic and dental staff members are familiar with spill management.	Medium	O	SI				NO N/A
10.	Dental Unit Waterlines	10.1	The products and protocols recommended by dental unit manufacturer to maintain water quality are followed. (if the manufacture instructions are not available, water lines are disinfected daily /weekly with an approved MOH solution and as per the manufacturer's instructions).	High	SI	D				NO N/A
		10.2	In order to ensure that the water used in routine patient treatment meet standards for drinking water (that is, less than 500 CFU/mL of bacteria), water sampling is taken from all water outlets at all the clinics with a minimum frequency of semiannually and sent to the microbiology lab.	High	SI	D				NO N/A
		10.3	Water monitoring records are maintained for at least (2) years.	Medium	SI	D				NO N/A
		10.4	Sterile saline or sterile water is used as a coolant / irrigant when performing surgical procedures.	Medium	SI					NO N/A

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		10.5	For devices that are connected to the dental water system and enter the patient's mouth, water and air are discharged for at least 20-30 seconds after use on each patient. (Such devices include handpieces, ultrasonic scalers, and air/water syringes.)	Medium	SI					NO N/A
11.	Waste Management	11.1	Supplies required for waste segregation are adequate in number and size at points of production. (supplies include: waste containers, colored coded bags, sharp containers).	Critical	O	SI				NO N/A
		11.2	Non-sharp regulated waste is disposed in leak-proof, color-coded/biohazard labeled containers.	Critical	O	SI				NO N/A
		11.3	Non-regulated waste are disposed in regular (black waste container).	Medium	O	SI				NO N/A
		11.4	Sharps containers are being kept wall mounted or on a stand.	Medium	O	SI				NO N/A
		11.5	Sharp boxes are collected after being securely closed when filled to 3/4 of its maximum capacity.	High	O	SI				NO N/A
		11.6	Transportation of medical waste is done by allocated workers wearing appropriate PPE.	High	O	SI				NO N/A
		11.7	Medical waste is transported to the storage room in closed and impervious specific carts with Biohazard logo.	High	O	SI				NO N/A
		11.8	The medical waste store is according to the standards (adequate in space, away from traffic, secured, well ventilated & temperature <18 °C., with water source & drainage, cleanable walls & floors.	Medium	O	D				NO N/A
12.	Dental Radiographs	12.1	Appropriate personal protective equipment are worn by dental workers when exposing radiographs and handling contaminated film packets.	High	O	SI				NO N/A
		12.2	Only heat-tolerant or disposable radiographic devices are used (such as film holders, positioners).	Critical	O	SI				NO N/A
		12.3	Heat-tolerant devices are sent to central sterilization for cleaning and heat-sterilizing between patients.	Critical	O	SI				NO N/A
		12.4	Exposed radiographs films are transported and handled aseptically to prevent contamination.	Medium	O	SI				NO N/A
		12.5	Clinical contact surfaces (e.g., frequently touched surfaces) in radiographic area are either barrier protected or cleaned and disinfected with an after each patient.	High	O	SI				NO N/A

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13.	Dental Lab	13.1	The dental laboratory is divided into the following areas: a) Receiving area. b) Production area. c) Shipping area.	High	O				
		13.2	Supplies required to perform hand hygiene are available in the lab. (hand rub dispensers, sinks, water, soaps, paper towels).	Critical	O	SI			
		13.3	Dental lab staff comply with hand hygiene recommendations and can display the appropriate technique.	Critical	O	SI			
		13.4	Sufficient amount with different types and sizes of personal protective equipment are available in the lab (gloves, masks, gowns, utility gloves).	Critical	O	SI			
		13.5	Dental lab staff wear appropriate PPE when handling contaminated items.	Critical	O	SI			
		13.6	No reprocessing of instruments is carried inside the dental lab.	Critical	O	SI			
		13.7	Single-use devices are discarded after one use.	Critical	O	SI			
		13.8	All reusable dental instruments are replaced between patients and sent to central sterilization.	Critical	O	SI			
		13.9	If the sterilization process will be applied after 2 hours or more, a transportation gel/spray is applied.	Medium	O	SI			
		13.10	Contaminated dental instruments are transferred to the central sterilization department in a closed, sealable and puncture resistant container.	Critical	O	SI			
		13.11	Items that will come in contact with mucous membranes, but which are not used between patients are cleaned and disinfected. (e.g., prostheses, and orthodontic appliances).	High	O	SI			
		13.12	Heat tolerant items used in the mouth and on contaminated laboratory items and materials are set to central sterilization before being used for another patient or another laboratory case (e.g.: Metal impression trays, Burs, Hand pieces, Metal rulers, Metal spatulas, Orthodontic pliers).	Critical	O	SI			
		13.13	Items that do not normally contact the mucous membranes but frequently become contaminated and cannot withstand heat-sterilization are cleaned and disinfected between patients and according to the manufacturer's instructions. (e.g.: articulators, face-bows, lathes, case pans, shade guide, wooden-handled spatulas, rubber mixing bowls and torch).	High	O	SI			

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14.	Storage Room	14.1	Medical storage areas are adequate capacity, cleaned, and secured.	Medium	O					NO N/A	
		14.2	Storage shelves are 40 cm from the ceiling at least, 20 cm from the floor, and 5 cm from the wall.	Medium	O					NO N/A	
		14.3	Storage shelves are made of easily cleanable material, e.g., fenestrated stainless steel, Aluminum or hard plastic.	Medium	O					NO N/A	
		14.4	Medical items are completely separated from other non-medical items.	Medium	O					NO N/A	
		14.5	No Items are kept in the original shipping boxes.	Medium	O					NO N/A	
		15.1	The dental center provides central sterilization services and none of the sterilization activities are carried out by individual departments outside CSSD.	Critical	D	SI	O			NO N/A	
		15.2	Staff is qualified (by certification, education, or training) and able to explain all procedures of instruments reprocessing. They have Job Description.	Critical	PF	SI	O			NO N/A	
		15.3	There are implemented policies and procedures for sterilization service reviewed and approved by the head of IC committee.	High	D	O	SI			NO N/A	
		4	There is complete physical separation between the clean areas (packaging and storing areas) and decontamination area (2 or 3 zones).	High	O					NO N/A	
		5	Work flow is an unidirectional flow from dirty to clean areas with traffic control signs..	Critical	O					NO N/A	
		6	Personal protective equipment is available and used properly (heavy duty gloves, face mask, gown, and head cover)	Critical	O	SI				NO N/A	
		7	All surfaces, walls & floors are solid, non-porous, easy to clean and withstand frequent cleaning and disinfection.	Medium	O					NO N/A	NO N/A
		8	Emergency eyewash safety station is available in decontamination area and accessible within 30 meters or 10 seconds of potential chemical exposure.	Medium	O					NO N/A	
		9	The decontamination area is maintained at negative pressure (- 5 Pascal) ± 5%, with 10 air changes per hour at least, temperature ranges from 18 to 20 and relative humidity from 35% to 60% with at least quarterly report (checked with the utility & maintenance department).	High	D	O				NO N/A	
		10	Closed containers or designated transportation bags are used to collect contaminated items in such a way that prevents spills and spread of infection & it should be decontaminated after each use, different containers should be used for transportation of sterilized instruments.	Critical	O	SI				NO N/A	
		11	For manual cleaning at least two deep sinks are available with measured indicator. Items are submerged and cleaned using heavy duty gloves under water level to prevent aerosolization.	Medium	O	SI				NO N/A	
		12	Hand washing facilities and/or hand sanitizer units are available in all CSSD areas and staff strictly comply with hand hygiene.	Critical	O	SI				NO N/A	
		13	Cleaning supplies are available (e.g., brushes with various shapes and sizes, detergents that are used as per policies & procedures, ... etc.) and MSDS are available and easily accessible according to MOH standards.	High	D	O				NO N/A	

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15.	CSSD	14	Protective clothing is removed and hand washing is performed before leaving decontamination area	High	O	SI			NO N/A	
		15	Washer disinfectors, ultrasonic cleaners are used properly to match approved standards (selection of cycles and parameters, monitoring performance and results as per manufacturer's recommendations) indicators are used . Operating instructions with records for preventive maintenance are available.	Critical	D	O				
		16	The Preparation & Packaging Area is maintained at positive pressure (+ 5 Pascal) ± 5%, with 10 air changes per hour at least, temperature ranges from 20 to 23 and relative humidity from 35% to 60% (checked with the utility & maintenance department).	Medium	D	O			NO N/A	
		17	After cleaning, the items are checked for: • Cleanliness: (inspection of items by magnifying lenses to be returned back to decontamination area if soiled). • Function and lack for defects (to be maintained or replaced if not functioning well).	High	O	SI			NO N/A	
		18	Instruments should be packed individually or as a set, with chemical indicator in each one.	Critical	O /	SI			NO N/A	NO N/A
		19	Handling of packs after sterilization is done correctly (placed in a low traffic areas, away from vents, doors, windows, drafts, and not touched until they become cool). To avoid getting wet packs	High	O	SI			NO N/A	
		20	Operating instructions for sterilizers with records for preventive maintenance are available (Routine maintenance for sterilization equipment is performed as per manufacturer instruction), Proper used for sterilization time and temperture.	Critical	O	D	SI		NO N/A	
		21	For each sterilization load, the following information is documented: • Load contents, lot control number, • Sterilizer used, cycle type, • Critical parameters for the chosen sterilization method, • Operator's name and results of BI, if indicated.	Critical	O	D			NO N/A	
		22	Records for sterilization monitoring are kept for one year including: • Sterilization physical parameters (print out from sterilizer / manual documentation of sterilization parameters by the operator) • Bowie Dick test daily for each steam sterilizer. • Biological indicators: weekly for each steam sterilizer and with any load containing implants. • Chemical Indicator is used in each package or pouch.	Critical	D				NO N/A	
		23	The wrapped and sterilized items are labeled with sterilization date.	Medium	O				NO N/A	
24	The storage Shelves are 20cm from floor, 40cm from ceiling and 5cm from wall. Shelves and bins are cleanable, free of dust Away from sprinklers and air vents, and clearly labeled. Items distribution respects the 1st. in 1st out principle.	High	D	O			NO N/A			