SITE survey. APP

SITE SURVEY REPORT

Infection Prevention and Control Audit

Prepared for	Fernlea Healthcare Ltd
Date	22 Sep 2026
Site	Fernlea Nursing Home, Shrewsbury
Prepared by	K. Mensah

FORM

Infection Prevention and Control Audit

1. Details

Project	Fernlea Nursing Home, Shrewsbury: infection control audit (completed example)
Provider	Fernlea Healthcare Ltd
Home or service	Fernlea Nursing Home
Address	41 Abbey Foregate, Shrewsbury SY2 6BX
Date of audit	22 Sep 2026
Auditor	K. Mensah, IPC lead
Areas audited	Both floors, bedrooms, bathrooms, sluices, kitchen, laundry and waste store
Infection prevention and control lead	K. Mensah
Was the auditor independent of the area audited?	No

> In England, the code of practice under the Health and Social Care Act 2008 sets ten criteria that registered providers of health and adult social care must be able to show they meet, and the Care Quality Commission uses it when judging compliance. It expects evidence of a rolling programme of audit. This form is one way to record that audit: it does not list every requirement of the code.

2. Management and training

There is an up to date infection prevention and control policy that staff can find	Yes
A named lead is responsible for infection prevention and control	Yes
The infection prevention and control lead's annual statement on compliance with the code has been produced and reviewed	Yes
Staff have had infection control training in the last year	Partly
There is a programme of audits, and actions from the last one are complete	Yes
Staff know not to work with symptoms of infection, and when they can return	Yes

Residents and visitors are given information about infections when it is needed	Yes
Notes	92% of staff in date for training. Four bank staff overdue.
Management and training score (%)	93

3. Environment and cleaning

Rooms, corridors and communal areas are visibly clean and free of clutter	Yes
Cleaning schedules are in place and signed	Yes
Colour-coded cloths and mops are used and stored correctly	Yes
Bathrooms and toilets are clean, with soap and towels	Yes
Furniture and floor coverings are intact and can be wiped clean	Partly
Kitchenettes and fridges are clean, with food covered and dated	Yes
Notes	Split cover on the lounge armchair by the window, cannot be wiped clean.
Environment and cleaning score (%)	92

4. Hand hygiene and protective equipment

Alcohol handrub is available where care is given	Yes
Handwash sinks have liquid soap, paper towels and a foot-operated bin	Partly
Staff are bare below the elbows when giving care	Yes
Gloves, aprons and masks are available near where they are needed	Yes
Protective equipment is changed between residents and between tasks	Yes
Used protective equipment is disposed of correctly	Yes
Notes	Kitchen hand wash sink out of paper towels, refilled. First floor PPE station had gloves taken out of their boxes and left loose in the rack.
Hand hygiene and protective equipment score (%)	92

5. Sharps, waste and laundry

Sharps bins are assembled correctly, labelled, dated and not filled above the line	Partly
Sharps bins are out of reach of residents and visitors	Yes
Waste is separated into the correct bags and bins	Yes
The waste store is locked and clean	Yes
Clean and used linen are kept and moved separately	Yes
Soiled linen goes into the correct bags and is not sorted by hand	Yes
The laundry has a flow from dirty to clean	Yes
Notes	Treatment room sharps bin filled above the fill line.
Sharps, waste and laundry score (%)	93

6. Equipment and outbreaks

Commodes, bedpans and hoists are clean, including underneath	Yes
Mattresses and cushions are intact and checked	Yes
Single-use items are not reused	Yes
Shared equipment is cleaned between residents	Yes
Staff know what to do, and who to tell, if an outbreak is suspected	Yes
A resident with an infection can be cared for in their own room with their own equipment	Yes
Notes	Mattress checks done monthly and recorded. Commodes clean underneath on all checked.
Equipment and outbreaks score (%)	100

7. Findings and actions

Score

How the score works. Each Yes scores 1, Partly scores a half and No scores 0. Not applicable is left out. The score is the share of the points available, by section and overall. Green meets your target, Amber is up to 15 points below it and Red is further below. These bands are this form's method for comparing audits and homes, not a regulator's rating or a clinical judgement.

Overall score (%)	94
Target for this home or service (%)	90
Result	Green

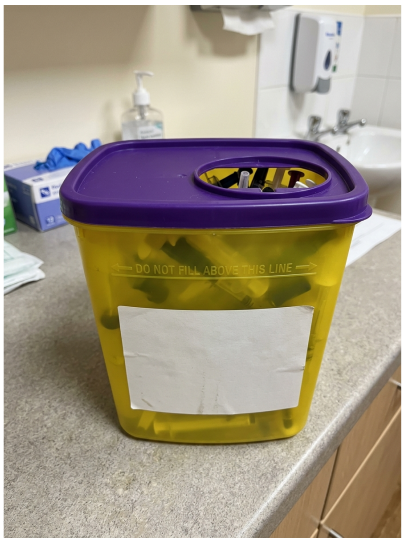
Green. The service's score meets the target in the sample seen. An audit is a sample taken on one day.

Overall score at the last audit (%)	88
Change since the last audit (points)	6
Lowest section score (%)	92
Lowest section	Environment and cleaning
Answered No	0
Answered Partly	4
Are there findings to record?	Yes

Findings 1: Sharps and waste

Area	Sharps and waste
Risk	High
What did you find?	Sharps bin in the first floor treatment room filled above the fill line.
Action	Closed and locked during the audit, new bin assembled and dated. Nurses to check the line at every handover.
Who	Nurse in charge, first floor
By when	22 Sep 2026

Photos



Date completed	22 Sep 2026
Status	Done

Findings 2: Protective equipment

Area	Protective equipment
Risk	Medium
What did you find?	First floor PPE station by room 21: gloves taken out of their boxes and left loose in the open rack, where they can be contaminated.
Action	Loose gloves thrown away. Staff reminded to take gloves from the box only when needed. Housekeeping to check PPE stations twice daily.
Who	M. Doyle, head housekeeper
By when	25 Sep 2026

Photos



Date completed	24 Sep 2026
Status	Done

Findings 3: Hand hygiene

Area	Hand hygiene
Risk	Low
What did you find?	Kitchen hand wash sink paper towel dispenser empty.
Action	Refilled during the audit. Kitchen opening check to include towels.
Who	Head cook
By when	23 Sep 2026

Photos



Date completed	22 Sep 2026
Status	Done

Findings 4: Environment and cleaning

Area	Environment and cleaning
Risk	Low
What did you find?	Lounge armchair cover split, foam exposed.
Action	Chair taken out of use. Replace or recover.
Who	L. Pryce, manager
By when	20 Oct 2026

Photos



Status	Open

Findings 5: Management and training

Area	Management and training
Risk	Low
What did you find?	Four bank staff overdue their annual infection control training.
Action	Book the four onto the October session. Bank staff not booked on shifts once 30 days overdue.
Who	L. Pryce, manager
By when	31 Oct 2026

Status	Open
Findings	5
High risk	1
Medium risk	1
Low risk	3
Still open	2
High risk still open	0
Overall	Needs improvement
Summary	Score 94% against the 90% target (Green), up 6 points on the last audit. The lowest sections are environment and cleaning and the hand hygiene and protective equipment checks, both 92%. The overfilled sharps bin was dealt with on the day; the split armchair and four bank staff's training are still open.
Next audit due	15 Dec 2026
Days to the next audit	85
Auditor name	K. Mensah, IPC lead
Auditor signature	
Manager name	L. Pryce
Manager signature	