

SITE SURVEY REPORT

Infection Prevention and Control Audit

Prepared for	Fernlea Healthcare Ltd
Date	22 Sept 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
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Notes	92% of staff in date for training. Four bank staff overdue.
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3. Environment and cleaning

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

Alcohol handrub is available where care is given	Yes
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Handwash sinks have liquid soap, paper towels and a foot-operated bin	Partly
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Staff are bare below the elbows when giving care	Yes
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Gloves, aprons and masks are available near where they are needed	Yes
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Protective equipment is changed between residents and between tasks	Yes
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Used protective equipment is disposed of correctly	Yes
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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.
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5. Sharps, waste and laundry

Sharps bins are assembled correctly, labelled, dated and not filled above the line	Partly
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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.

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.

7. Findings and actions

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
Date completed	22 Sep 2026

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
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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

Date completed 22 Sep 2026

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

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

Findings 5

High risk 1

Overall Needs improvement

Summary Clean home with good practice on the floor. Sharps bin overfilled, loose gloves at a PPE station and a towel restocking gap. Training to complete for bank staff.

Next audit due 15 Dec 2026

Auditor name K. Mensah

Auditor signature

K. Mensah

Manager name

L. Pryce

Manager signature


