

Checklist to be completed by the external auditor

| Name of facility: | | | | |
|---|--------------------------------------|------|--|--|
| Address: | | | | |
| Telephone: | | Fax: | | |
| Email Address: | | | | |
| Date of visit: Date of previous audit: | | | | |
| Reason for visit: (first / scheduled / follow-up) | | | | |
| Facility representative: | | | | |
| Auditor name: | | | | |
| Legend | | | | |
| N/A | Not applicable to this facility | | | |
| ✓ | Complies with the requirement | | | |
| × | Does not comply with the requirement | | | |
| | | | | |

\checkmark / \ast The facility generally complies but there is some area of non-compliance.

General Instructions for Auditing

The external audit must be conducted by a person not employed by the healthcare facility or cleaning provider, but can be from another health unit within the same Local Health Network. More details about the specifications for a 'qualified auditor' and recommended audit frequency can be found in section 7 of the SA Health Cleaning Standard for Healthcare Facilities.

The external audit should include a review of all items in this checklist paying particular attention to:

- Governance arrangements (including organisational and cleaning services) for ensuring compliance with cleaning standards.
- > The internal auditing program, including evidence of review dates and actions taken in response to any non-compliances.
- > Adherence to cleaning schedules based on appropriate risk assessment of functional areas within the facility.
- > Visual inspection of one or more functional areas using the internal audit score sheet. Areas to be selected should be based on a risk assessment.

The external auditor is to provide the facility CEO with a summary of findings identifying needed corrective actions.

The facility is to determine time frames for corrective actions with regard to the risk category of the area, the type of non-compliance identified, and the availability of the appropriate staff and equipment to rectify the defect. For example, if the facility is in a remote location and there is no 'on-call' arrangement for cleaning staff, then the acceptable time frame should be determined in discussion with the relevant person with overall responsibility for cleaning management.

Cleaning Standard Audit Tool (external)

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| | | ✓ or × | COMMENTS | | |
|-------|--|-----------|---------------------------------|--|--|
| ORG | ORGANISATION (refer to sections 6.1, 6.2 & 6.7 of Standard) | | | | |
| 1. | Organisational chart & governance structure: • functional reporting lines • organisational reporting lines • relationship between units, including sub-contractors • details of other personnel responsibilities. | | | | |
| 2. | Facility map: detailed floor plan of all functional areas is available functional areas are identified and risk classified. | | | | |
| 3. | Cleaning complaints: details of complaints records of investigation and actions taken to remedy issues. | | | | |
| SITE- | SPECIFIC CLEANING SCHEDULE (refer t | to sectio | ons 6.3, 6.6 & 6.7 of Standard) | | |
| 4. | Site-specific cleaning schedule adopted from the prescribed schedule in the SA Health Cleaning Standard. Cleaning Schedule identifies: • risk status of all functional areas • cleaning frequency • method • responsible person. | | | | |
| 5. | Accessibility & maintenance of cleaning schedule: schedule must be accessible to all areas concerned regularly reviewed and updated where necessary forms part of the contract specifications for external cleaning services. | | | | |
| 6. | Documentation of environmental cleaning techniques: standard Operating Procedures (SOPs) incorporating basic techniques prescribed in 4.3 of the SA Health Cleaning Standard. | | | | |

Checklist to be completed by the external auditor

| | | ✓ or × | COMMENTS |
|------|--|-----------|--------------------|
| 7. | Cleaning Records (if applicable): staff sign-off to verify task completion explanation/corrective action for tasks not completed. | | |
| STAF | F KNOWLEDGE & RESOURCES (refer to | section | s 6.4 of Standard) |
| 8. | Staff education and training records: covering performance of all types of cleaning tasks training is provided prior to staff working unsupervised staff competency is assessed every year or sooner if competency issues are raised training is conducted by a suitably qualified person. | | |
| 9. | Staff resources: arrangements in place to meet peak demand contingency plans in place. | | |
| CHEM | IICALS & EQUIPMENT (refer to sections 6 | 6.5 of St | andard) |
| 10. | List of approved chemicals and equipment: • fit for purpose • risk assessed for worker safety. | | |
| 11. | Safety Data Sheets (SDS) located in each chemical storage area. appropriate personal protective equipment (PPE) is available for staff at point of use. | | |
| 12. | Standard operating procedures (SOPs) showing: directions for chemical & equipment use & appropriate storage monitoring of chemical expiry dates Disposal methods of chemicals or contaminated equipment. | | |
| 13. | Documented maintenance schedule for the upkeep of cleaning & any chemical dosing equipment. | | |

Checklist to be completed by the external auditor

| VERIFICATION & REVIEW (refer to sections 6.8 & 7.1 of Standard) | | | | |
|---|--|--|--|--|
| 14. | Internal verification of cleaning effectiveness: documented internal verification system records & results of methods of verification undertaken regular review of environmental hygiene program records and corrective actions. | | | |
| 15. | Internal audit of compliance: documented systematic internal audit program visual inspection of cleanliness using Appendix 8 - Environmental Cleaning Audit – Score Sheet records of audit results quality improvement plans & outcomes to rectify issues. | | | |
| AUDI | AUDITOR INSPECTION | | | |
| 16. | Visual inspection by external auditor: visual inspection of cleanliness using Appendix 8 - Environmental Cleaning Audit – Score Sheet measure against outcomes expected. | | | |

Report Part A: to be completed by the external auditor

Facility Name: Manager / Key Contact Person: Contact phone no: Type of audit (first / scheduled / follow up): Entry & Exit meeting attendance (facility representative & auditor to sign) Date: Name (print) Position Entry initial Exit initial Initial Initial

| AUDIT SCOPE | | |
|--|--------|----------|
| REQUIREMENTS | ✓ or × | Comments |
| Organisation | | |
| Governance structure | | |
| Facility map & risk classification | | |
| Cleaning complaints | | |
| Cleaning complaints | | |
| Details and records | | |
| Site specific cleaning schedule | | |
| In line with SA Health Cleaning Std | | |
| Accessibility of schedule | | |
| Documentation of cleaning | | |
| techniques Cleaning records (if applicable) | | |
| • • • • • | | |
| Staff knowledge and resources | | |
| Training records Staff resources | | |
| Stan resources | | |
| Chemicals and equipment | | |
| List of approved chemicals | | |
| Equipment fit for purpose | | |
| Chemical SDS available | | |
| SOPs available | | |
| Maintenance schedule | | |
| Verification and review | | |
| Internal verification of effectiveness | | |
| Internal audit of compliance | | |
| Visual inspection | | |

| Frequency & date for next audit | 2 months – | 2 years - |
|---------------------------------|------------|-----------|
|---------------------------------|------------|-----------|

| Facility contact's signature: | Date: |
|-------------------------------|-------|
| Auditor's signature: | Date: |

Areas of non-conformance and corrective action

Report Part B: to be completed by the external auditor in conjunction with the facility representative

| Reference: (standard, audit checklist) | Areas of non-conformance: (non-compliance or inadequacy) Stating reasons | Agreed date for corrective action: | Proposed corrective action: | Evidence of closure: (Auditor to date & sign when evidence of corrective action has been supplied or sighted) |
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| Facility contact's signature: | Date: |
|-------------------------------|-------|
| Auditor's signature: | Date: |

Facility name: