

Bol Get Original



Commode Cleaning – audit

Audit tool - Commodes			
Outcome criteria:	Commode decontamination: All parts of the commode are visibly clean including the underneath with no blood, body fluids substances, dust, dirt, debris or spillages.	Commode location: ☐ Sluice ☐ Resident's room ☐ Other Comments:	
Statement:	1) The following areas are visibly	Yes No Comments; discussed with appropriate staff; learning outcomes:	
"All commodes are effectively and appropriately decontaminated after every use"	clean (check the commode): Back rest Arm rests Top of seat Underneath of seat Frame Foot rest Wheels *All areas must be clean to indicate		
	infection control compliance		
	2) The following areas are visibly intact and in good condition	Compliant (please tick):	
	(check the commode):	Yes	No
	□ Back rest □ Arm rests □ Top of seat □ Underneath of seat □ Frame □ Foot rest □ Wheels *All areas must be intact and in good condition to indicate infection control compliance	Comments (e.g. item to be fixed or replaced); discussed with appropriate staff; learning outcomes:	
	3) A system has been used to identify that the commode is clean	Compliant (please tick):	
		Yes	No
	What system is in place: ☐ Green tape ☐ Seat up ☐ Other — please specify:	Comments; discussed with appropriate staff; learning outcomes:	

References:

NHS National Patient Safety Agency (2010): The National Specifications for Cleanliness: Guidance on setting and measuring performance outcomes in **care homes**:

- Commodes are a number 1 'key element' in terms of cleaning/audit.
- Commodes are 'high risk' items of equipment which must be cleaned with regular frequency
- Contact points of the commode including underside must be visibly clean with no blood and body substances, dust, dirt, debris or spillages. This is standard.
- Contact points must be cleaned after each use with one full clean daily: Care assistants must clean commodes after each use; Cleaners must clean commodes 1 x daily
- · Colour coded items should be used for cleaning
- Key elements such as commode cleaning form the basis of audit. Routine audits should be carried out regularly (daily or decided locally) with clear allocation of responsibility; managerial audit should be carried out weekly

<u>DOH (2013):</u> Prevention and Control of Infection in Care Homes – an information resource. Cleaning method for commodes:

• Clean with warm water and detergent and dry after each use. During outbreaks of infection commodes should be allocated to a single resident and should be decontaminated regularly with 1000ppm chlorine releasing agent.

Bucior, H; Cochrane, J (2010): Lifting the lid: a clinical audit on commode cleaning.

Available at: https://core.ac.uk/download/files/162/4149098.pdf