

## **Infection Prevention and Control Weekly Monitoring Checklist**

| Construction and Renovation Monitoring Checklist                          |                 |     |     |     |       |         |            |
|---|-----------------|-----|-----|-----|-------|---------|------------|
| Location of work:   | Project number: |     |     |     | Compl | eted by | <i>y</i> : |
|   |                 | Mon | Tue | Wed | Thur  | Fri     | Actions:   |
| 1. Administration   |                 |     |     |     |       |         |            |
| Permit is in place for project, as specified for project class            |                 |     |     |     |       |         |            |
| Signage is in place to restrict public access, for doors to remain closed |                 |     |     |     |       |         |            |
| 2. Construction barriers  |                 |     |     |     |       |         |            |
| Hoarding type is appropriate for project and location                     |                 |     |     |     |       |         |            |
| Hoarding is dust tight and sealed   |                 |     |     |     |       |         |            |
| Dust/Walk off mats present at entry/exit                                  |                 |     |     |     |       |         |            |
| All access doors close and seal properly, and are closed to the public    |                 |     |     |     |       |         |            |
| Ventilation ducts to building site are covered                            |                 |     |     |     |       |         |            |
| 3. Adjacent areas with staff / patient access                             |                 |     |     |     |       |         |            |
| Floor areas cleaned with no dust tracked                                  |                 |     |     |     |       |         |            |
| Sticky mats are cleaned and changed sufficiently                          |                 |     |     |     |       |         |            |
| Walls intact and dry  |                 |     |     |     |       |         |            |
| Horizontal surfaces and vents are dust free                               |                 |     |     |     |       |         |            |
| All ventilation ducts from building site sealed                           |                 |     |     |     |       |         |            |
| No signs of pest infestation  |                 |     |     |     |       |         |            |
| No signs of water leakage   |                 |     |     |     |       |         |            |
| 4. Traffic flow   |                 |     |     |     |       |         |            |
| Building contractors access site through approved non-patient care areas  |                 |     |     |     |       |         |            |
| Waste and debris are covered and contained prior to removal               |                 |     |     |     |       |         |            |
| Routine and timing of waste removal as per agreement                      |                 |     |     |     |       |         |            |



