

SHFN 30: HAI-SCRIBE

Questionsets and checklists

Introduction

Scottish Health Facilities Note (SHFN) 30 in its 2014 published form comprises two parts:

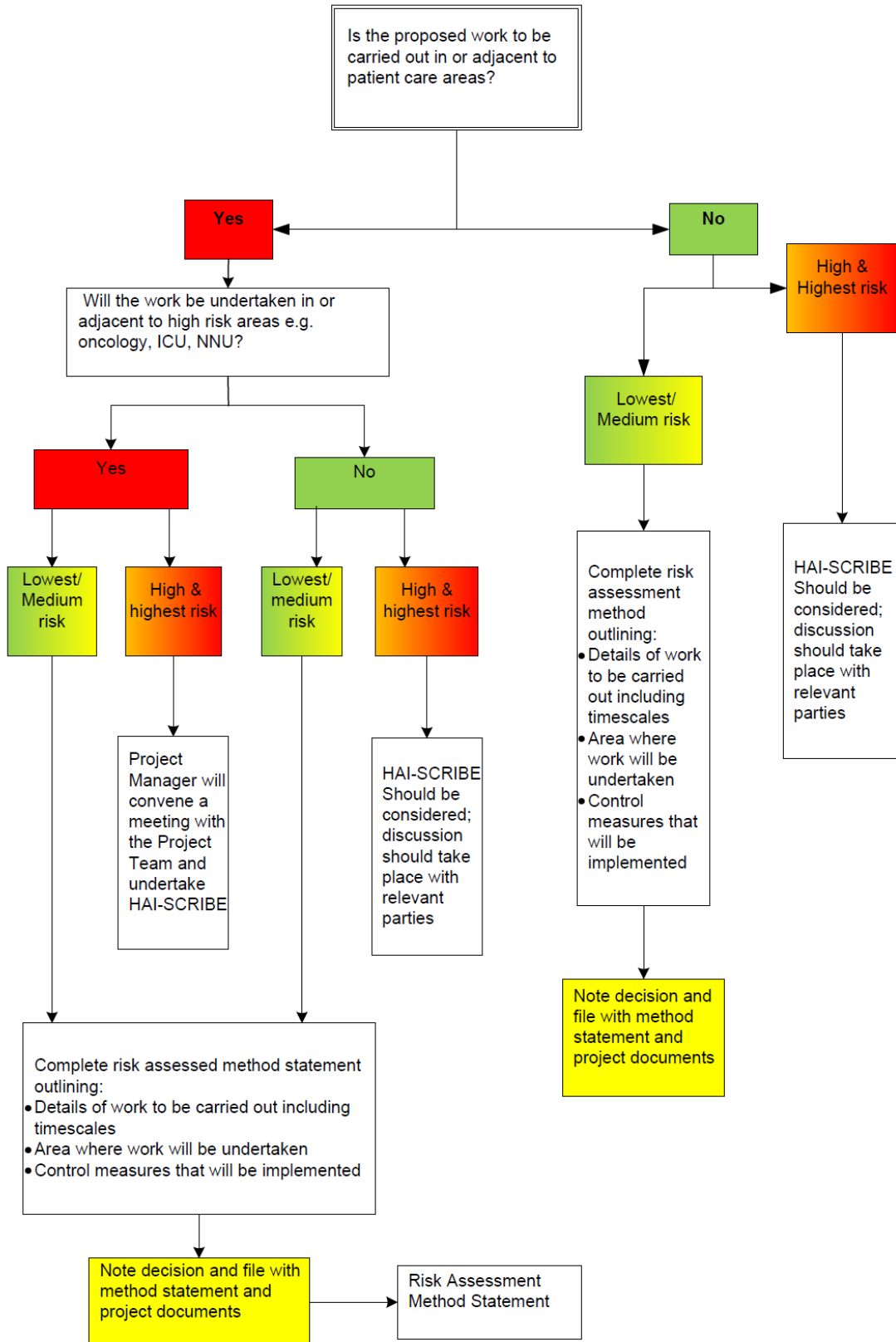
- **Part A:** Manual: Information for Design Teams, Construction Teams, Estates & Facilities and Infection Prevention & Control Teams.
- **Part B:** HAI-SCRIBE Implementation Strategy and Assessment Process.

Both have been published in book form.

It is appreciated that, as familiarity with the use of the procedures grows there will be progressively less need to rely on printed text, eventually leading to situations where questionsets and checklists will themselves be sufficient. Photocopying from published books is a ponderous and time-consuming process with a tendency to produce distorted images and/or damage binding. To facilitate the process, therefore, questionsets and checklists for each of the four project development stages have been produced in the form of an information pack ready for photocopying and distributing to project teams to assist in the HAI-SCRIBE review procedures as each new Project requires assessment. This pack is only available electronically.

The various proformas, comprising questionsets, checklists and certifications, are provided for the following:

- **Development Stage 1:** Initial briefing and proposed site for development:
- **Development Stage 2:** Design and planning:
- **Development Stage 3:** Construction and refurbishment work:
- **Development Stage 4:** Pre-handover check, ongoing maintenance and feed-back.



Type	Construction/Refurbishment Activity
Type 1	<p>Inspection and non-invasive activities. Includes, but is not limited to, removal of ceiling tiles or access hatches for visual inspection, painting which does not include sanding, wall covering, electrical trim work, minor plumbing and activities which do not generate dust or require cutting of walls or access to ceilings other than for visual inspection.</p>
Type 2	<p>Small scale, short duration activities which create minimal dust. Includes, but is not limited to, installation of telephone and computer cabling, access to chase spaces, cutting of walls or ceiling where dust migration can be controlled.</p>
Type 3	<p>Any work which generates a moderate to high level of dust, aerosols and other contaminants or requires demolition or removal of any fixed building components or assemblies. Includes, but is not limited to, sanding of walls for painting or wall covering, removal of floor coverings, ceiling tiles and casework, new wall construction, minor duct work or electrical work above ceilings, major cabling activities, and any activity which cannot be completed within a single work shift.</p>
Type 4	<p>Major demolition and construction projects. Includes, but it not limited to, activities which require consecutive work shifts, requires heavy demolition or removal of a complete cabling system, and new construction.</p>

Table 1: Redevelopment and construction activity

Risk to patients of infection from construction work in healthcare premises, by clinical areas	
Risk rating	Area
Group 1 Lowest risk	1. Office areas; 2. Unoccupied wards; 3. Public areas/Reception; 4. Custodial facilities; 5. Mental Health facilities.
Group 2 Medium risk	1. All other patient care areas (unless included in Group 3 or Group 4); 2. Outpatient clinics (unless in Group 3 or Group 4); 3. Admission or discharge units; 4. Community/GP facilities; 5. Social Care or Elderly facilities.
Group 3 High risk	1. A & E (Accident and Emergency); 2. Medical wards; 3. Surgical wards (including Day Surgery) and Surgical outpatients; 4. Obstetric wards and neonatal nurseries; 5. Paediatrics; 6. Acute and long-stay care of the elderly; 7. Patient investigation areas, including; <ul style="list-style-type: none"> • Cardiac catheterisation; • Invasive radiology; • Nuclear medicine; • Endoscopy. Also (indirect risk) 8. Pharmacy preparation areas; 9. Ultra clean room standard laboratories (risk of pseudo-outbreaks and unnecessary treatment); 10. Pharmacy Aseptic suites.
Group 4 Highest Risk	1. Any area caring for immuno-compromised patients*, including; <ul style="list-style-type: none"> • Transplant units and outpatient clinics for patients who have received bone marrow or solid organ transplants; • Oncology Units and outpatient clinics for patients with cancer; • Haematology units • Burns Units. 2. All Intensive Care Units; 3. All operating theatres; Also (indirect risk) 4. CSSUs (Central Sterile Supply Units).

Table 2: Different areas of health care facility and the risk associated with each area.

	Construction Project Type			
Patient Risk Group	TYPE 1	TYPE 2	TYPE 3	TYPE 4
Lowest Risk	Class I	Class II	Class II	Class III/IV
Medium Risk	Class I	Class II	Class III	Class IV
High Risk	Class I	Class II	Class III/IV	Class IV
Highest Risk	Class II	Class III/IV	Class III/IV	Class IV

Table 3: Estimates the overall risk of infection arising and will indicate the class of precaution that should be implemented

Control measures			
	During Construction Work	After Construction Work	By
Class I	<ul style="list-style-type: none"> Execute work by methods to minimise raising dust from construction operations; Immediately replace any ceiling tiles displaced during inspection. 	<ul style="list-style-type: none"> Clean areas by damp dusting with neutral detergent in warm water; Vacuum floor and damp mop. 	<p>Request via domestic supervisor.</p> <p>Request via domestic supervisor.</p>
Class II	<ul style="list-style-type: none"> Provide active means to prevent airborne dust from dispersing into atmosphere; Water mist work surfaces to control dust while cutting; Seal unused doors with duct tape; Block off and seal air vents; Place dust mat at entrance and exit of work area; Remove or isolate HVAC system in areas where work is being performed. 	<ul style="list-style-type: none"> Dampwork surfaces and ledges with neutral detergent solution; Contain construction waste before transport in tightly covered containers; Damp mop and/or vacuum with HEPA filtered vacuum before leaving work area; Remove isolation of HVAC system in areas where work is being performed. 	<p>Request via domestic supervisor.</p> <p>Estates staff.</p> <p>Request via domestic supervisor.</p> <p>Estates staff.</p>
Class III	<ul style="list-style-type: none"> Remove or Isolate HVAC system in area where work is being done to prevent contamination of duct system; Complete all critical barriers eg plasterboard, plywood, plastic, to seal area from non work area or implement control cube method (cart with plastic covering and sealed connection to work site with HEPA vacuum for vacuuming prior to exit) before construction begins; Maintain negative air pressure within work site utilizing HEPA equipped air filtration units; Contain construction waste before transport in tightly covered containers; Cover transport receptacles or carts. Tape covering unless solid lid. 	<ul style="list-style-type: none"> Do not remove barriers from work area until completed project is inspected by the Board's Health & Safety representative and Infection Control Department and thoroughly cleaned by the Board's domestic services staff; Remove barrier materials carefully to minimise spreading of dirt and debris associated with construction; Vacuum work area with HEPA filtered vacuums; Damp mop area with neutral detergent and warm water; Remove isolation of HVAC system in areas where work is being performed. 	<p>Request by Estates Dept.</p> <p>Contractor/Estates Staff.</p> <p>Request via domestic supervisor.</p> <p>Request via domestic supervisor.</p> <p>Contractor/Estates Staff.</p>

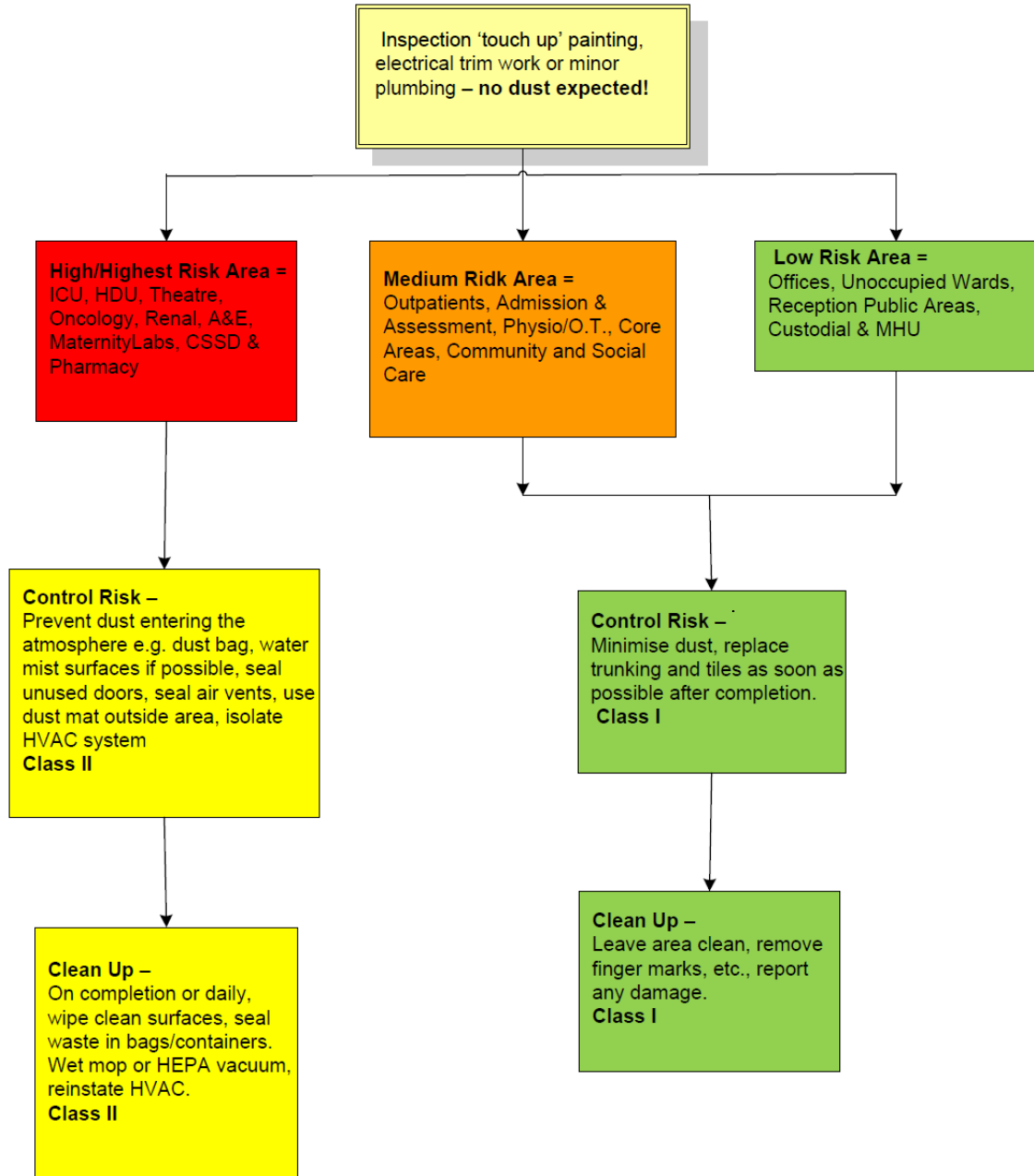
Table 4: Describes the required infection control precautions depending on class of risk

	During Construction Work	After Construction Work	By
Class IV	<ul style="list-style-type: none"> Isolate HVAC system in area where work is being done to prevent contamination of duct system; Complete all critical barriers eg plasterboard, plywood, plastic to seal area from non work area or implement control cube method (cart with plastic covering and sealed connection to work site with HEPA vacuum for vacuuming prior to exit) before construction begins; Maintain negative air pressure within work site utilizing HEPA equipped air filtration units; Seal holes, pipes, conduits, and punctures appropriately; Construct anteroom and require all personnel to pass through this room so they can be vacuumed using a HEPA vacuum cleaner before leaving work site or they can wear cloth or paper coveralls that are removed each time they leave the work site; All personnel entering work site are required to wear shoe covers. Shoe covers must be changed each time the worker exits the work area; Do not remove barriers from work area until completed project is inspected. 	<ul style="list-style-type: none"> Remove barrier material carefully to minimise spreading of dirt and debris associated with construction; Contain construction waste before transport in tightly covered containers;. Cover transport receptacles or carts. Tape covering unless solid lid; Vacuum work area with HEPA filtered vacuums; Damp dust area with neutral detergent and warm water; Scrub floor area with neutral detergent in warm water; Remove isolation of HVAC system in areas where work is being performed. 	<p>Contractor.</p> <p>Contractor.</p> <p>Contractor.</p> <p>Request via domestic supervisor.</p> <p>Request via domestic supervisor.</p> <p>Contractor/Estates Staff.</p>

Table 4 continued: Describes the required infection control precautions depending on class of risk

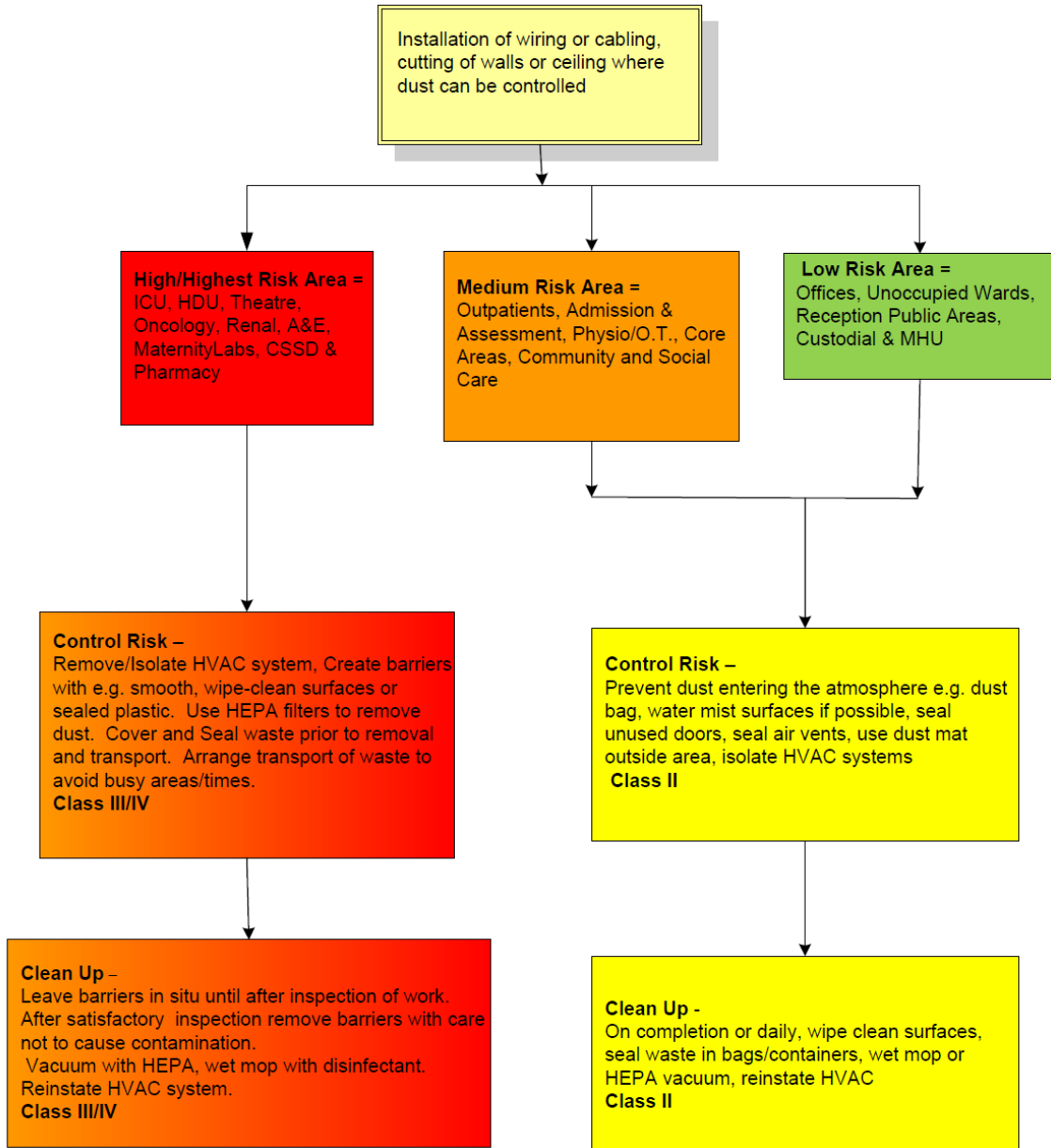
Appendix 4

Minor Works and Small Repairs



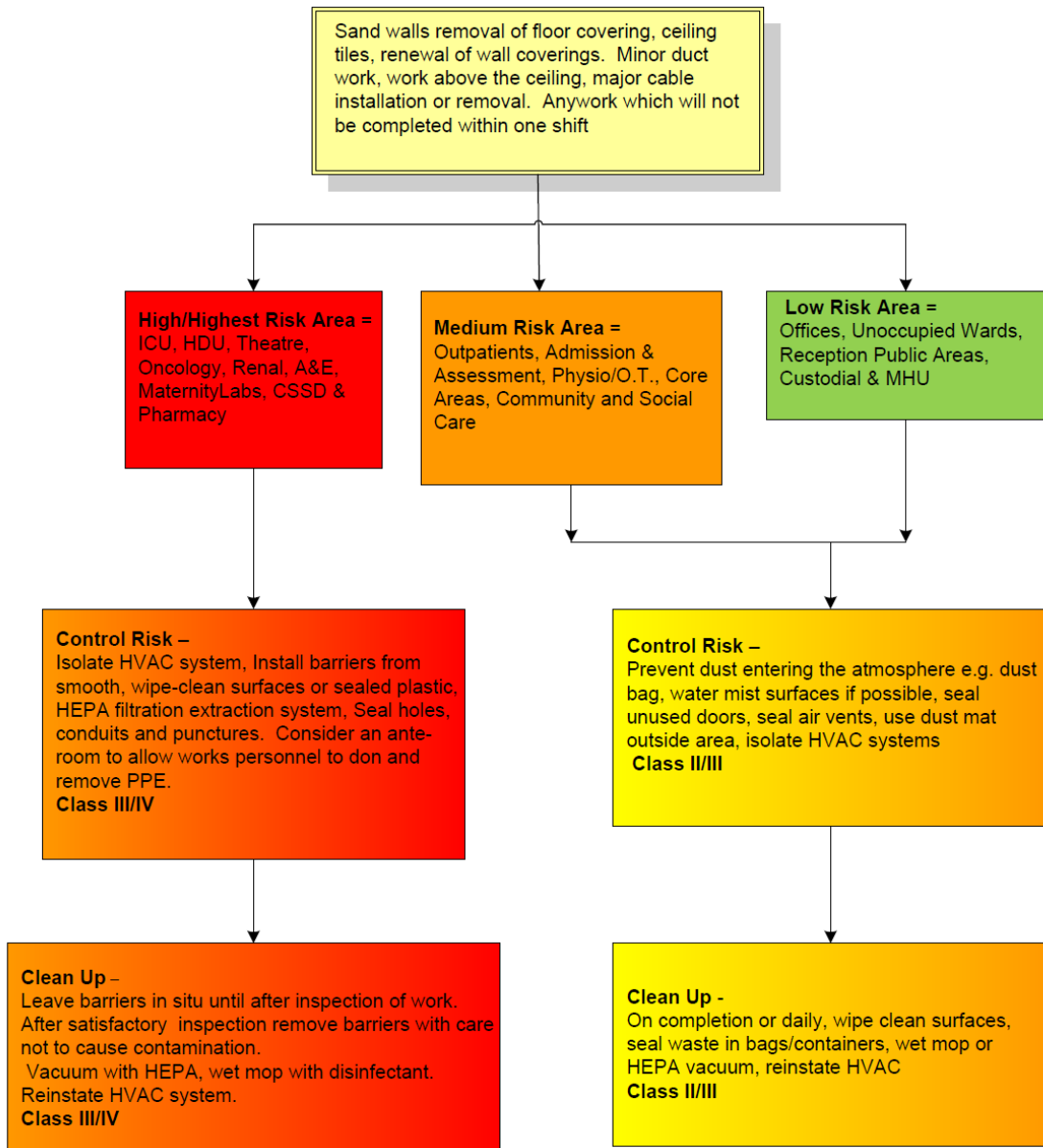
Appendix 5

Small Scale Work



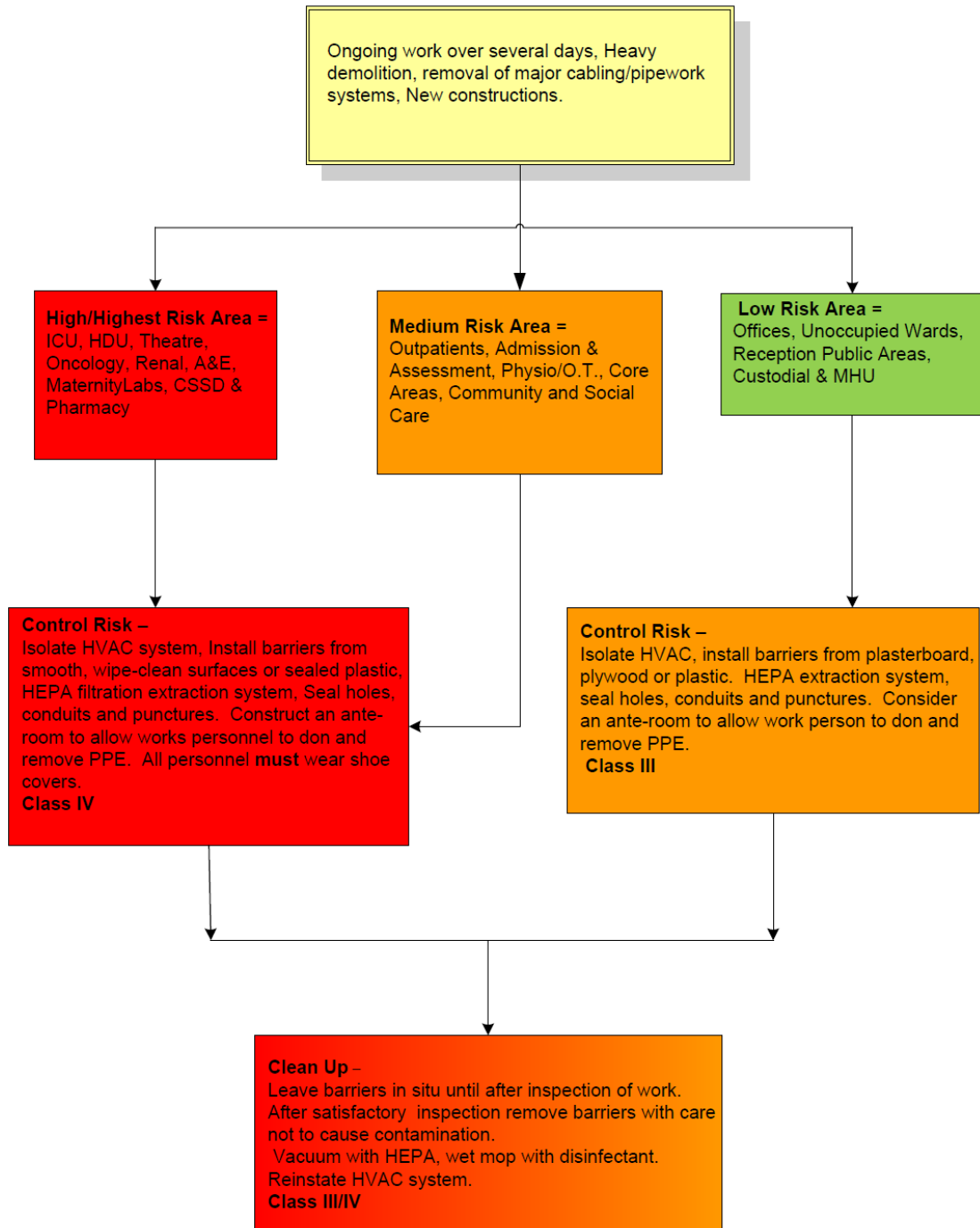
Appendix 6

Demolition work or removal of fixed structures or work where moderate-high level dust expected



Appendix 7

Major demolition work and construction



Initial Briefing Stage

Project particulars and checklists for Development Stage 1

Initial brief and proposed site for development HAI-SCRIBE Sign off	
HAI-SCRIBE Name of Project	
Name of Establishment	National allocated number
HAI-SCRIBE Review Team	
Completed By (Print Name)	Date
Signature(s)	Date
Stage 1:	
Additional Notes:	

Development Stage 1: Initial Brief and proposed Site for development: Identification of hazards, associated risks and control measures	
1.a	Brief description of the proposed development project and the planned development site
1.b	Identify any potential hazards associated with the design and/or proposed site.
1.c	Identify any risk associated with the hazards above
1.d	Outline the control measures that require to be implemented to eliminate or mitigate the identified risks. Ensure these are entered on the project risk register.
	Control Measures
1.e	It has been recognised that control measures identified to address the project risk may have unintended consequences e.g. closure of windows can lead to increased temperatures in some areas. Such issues should be considered at this point, they should be noted and action to address these taken
	Potential Problems
	Control Measures
1.f	Actions to be addressed
By	Deadline

Development Stage 1 Initial Brief and proposed site for development: Checklist to ensure all aspects have been addressed		
1.1	<p>Is contaminated land an issue? e.g. asbestos, oils and heavy metals. (Refer to the Contaminated Land Register)</p> <p>Have these issues and actions to be taken been noted in actions to be addressed section?</p>	<p>Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/></p> <p>Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/></p>
Comments		
1.2	<p>Is there a locally recognised increased risk of contamination or infection e.g. cryptosporidium? If yes give details.</p> <p>Have these issues and actions to be taken been noted in actions to be addressed section?</p>	<p>Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/></p> <p>Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/></p>
Comments		
1.3	<p>Are there industries or other sources in the neighbourhood which may present a risk of infection or pollution e.g. animal by-products processing plant? If yes give details</p> <p>Have these issues and actions to be taken been noted in actions to be addressed section?</p>	<p>Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/></p> <p>Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/></p>
Comments		
1.4	<p>If there are any industries or other sources identified in question 1.3 above, will they affect the designed operation of the healthcare system? Consider the planned function of the design as well as issues such as: Ventilation Opening of doors and windows Water systems etc.</p> <p>Have these issues and actions to be taken been noted in actions to be addressed section?</p>	<p>Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/></p> <p>Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/></p>
Comments		

Development Stage 1: Initial Brief and proposed site for development: Checklist to ensure all aspects have been addressed (continued)		
1.5	<p>Are there construction/demolition works programmed in the neighbourhood which may present a risk of pollution or infection (including fungal infection)?</p> <p>Have these issues and actions to be taken been noted in actions to be addressed section?</p>	<p>Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/></p> <p>Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/></p>
Comments		
1.6	<p>Are there cooling towers in the neighbourhood which may present a risk of <i>Legionella</i> infection? Consider also air handling units, water pipes etc.</p> <p>Have these issues and actions to be taken been noted in actions to be addressed section?</p>	<p>Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/></p> <p>Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/></p>
Comments		
1.7	<p>Does the topography of the site in relation to the surrounding area and the prevailing wind direction present any HAI risk e.g. from entrainment of plumes containing <i>Legionella</i>?</p> <p>Have these issues and actions to be taken been noted in actions to be addressed section?</p>	<p>Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/></p> <p>Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/></p>
Comments		
1.9	<p>Will the proposed development impact on the surrounding area in any way which may present potential for infection risk? Consider possible restrictions being applied to the operation of the proposed facility e.g. Facilities Management routes</p> <p>Have these issues and actions to be taken been noted in actions to be addressed section?</p>	<p>Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/></p> <p>Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/></p>
Comments		

Development Stage 1 Initial Brief and proposed site for development: Checklist to ensure all aspects have been addressed (continued)		
1.10	Will lack of space limit the proposed development and any future expansion or change of use of the facility? Have these issues and actions to be taken been noted in actions to be addressed section?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
Comments		
1.11	Has a demolition/refurbishment asbestos survey been carried out? Have these issues and actions to be taken been noted in actions to be addressed section?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
Comments		
1.12	Has consideration been given to the projected lifespan of the facility and its impact on planning and development?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
Comments		
Additional notes - Stage 1		

Design and Planning Stage

Project particulars and checklists for Development Stage 2

Development stage 2 : Design and planning HAI-SCRIBE Sign-off	
HAI-SCRIBE Name of Project	
Name of Establishment	National allocated number
HAI-SCRIBE Review Team	
HAI – SCRIBE Sign Off	
Completed by (Print name)	Date
Signature(s)	Date
Stage 2	
Additional notes	

Development Stage 2: Design and Planning Checklist to ensure all aspects have been addressed		
2.a	Brief description of the work being undertaken.	
2.b	Identify any potential hazards associated with this work.	
2.c	Identify any risk associated with the hazards identified above	
2.d	Outline the control measures that require to be implemented to eliminate or mitigate the identified risks. Ensure these are entered on the project risk register.	
	Control Measures	
2.e	It has been recognised that control measures identified to address the project risk may have unintended consequences e.g. closure of windows can lead to increased temperatures in some areas. Such issues should be considered at this point, they should be noted and action to address these taken	
	Potential Problems	
	Control Measures	
2.f	Actions to be addressed	
By		Deadline

Development Stage 2: Design and Planning General overview		
2.1	<p>In order to minimise the risk of HAI contamination is there separation of dirty areas from clean areas?</p> <p>Have these issues and actions to be taken been noted in actions to be addressed section?</p>	<p>Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/></p> <p>Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/></p>
Comments		
2.2	<p>Are the food preparation areas (including ward kitchens) and distribution systems fit for purpose and complying with current food safety and hygiene standards?</p> <p>Have these issues and actions to be taken been noted in actions to be addressed section?</p>	<p>Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/></p> <p>Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/></p>
Comments		
2.3	<p>Are waste management facilities and systems robust and fit for purpose and in compliance with the Waste (Scotland) Regulations?</p> <p>Consider: Local and central storage</p> <p>Systems for handling and compaction of waste Systems for segregation and security of waste (especially waste generated from healthcare requiring specialist treatment / disposal) to avoid mixing with other waste and recycles.</p> <p>Have these issues and actions to be taken been noted in actions to be addressed section?</p>	<p>Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/></p> <p>Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/></p> <p>Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/></p> <p>Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/></p> <p>Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/></p>
Comments		

Development Stage 2: Design and Planning General overview (continued)		
2.4	Are there satisfactory arrangements for effective management of laundry facilities? Consider: Local and central storage Systems for movement of laundry to central storage Systems for handling laundry Have these issues and actions to be taken been noted in actions to be addressed section?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
Comments		
2.5	Are there sufficient facilities and space for the cleaning and storage of equipment used by hotel services staff? Have these issues and actions to be taken been noted in actions to be addressed section?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
Comments		
2.6	Are staff changing and showering facilities suitably sited and readily accessible for use, particularly in the event of contamination incidents? Have these issues and actions to be taken been noted in actions to be addressed section?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
Comments		
2.7	Is the space around beds for inpatients, day case and recovery spaces in accordance with current relevant NHSScotland guidance?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
Comments		

Development Stage 2: Design and Planning General overview (continued)		
2.8	Are there sufficient single rooms to accommodate patients known to be an infection or potential infection risk?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
Comments		
2.9	Are all surfaces, fittings, fixtures and furnishings designed for easy cleaning?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
Comments		
2.10	Are soft furnishings covered in an impervious material in all clinical and associated areas, and are curtains able to withstand washing at disinfection temperatures?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
Comments		
2.11 P	Is the bathroom / shower / toilet accommodation sufficient and conveniently accessible, with toilet facilities no more than 12m from the bed area?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
Comments		
2.12 D	Are the bathroom/shower/toilet facilities easy to clean?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
Comments		
2.13	Where required are there sufficient en-suite single rooms with negative/positive pressure ventilation to minimise risk of infection spread from patients who are a known or potential infection risk?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
Comments		

NB: In the above and following Table “D” refers to “Design” and “P” refers to “Planning”

Development Stage 2: Design and Planning: Provision of hand-wash basins, liquid soap dispensers, paper towels and alcohol rub dispensers		
2.14	Does each single room have clinical hand-wash basin, liquid soap dispenser, paper towels, and alcohol rub dispenser in addition to the hand-wash basin in the en-suite facility?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
Comments		
2.15	Do intensive care and high dependency units have sufficient clinical hand-wash basins, liquid soap dispensers, paper towels, and alcohol rub dispensers conveniently accessible to ensure the practice of good hand hygiene? <i>An assessment should be made, however, to ensure that there is not an over-provision of hand-wash basins resulting in under-use.</i>	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
Comments		
2.16	Is there provision of clinical hand-wash basins, liquid soap dispensers, paper towels, and alcohol rub dispensers in lower dependency settings like mental health units, acute, elderly and long term care settings appropriate to the situation with a ratio of 1 basin/dispenser to 4–6 beds?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
Comments		
2.17	Do out-patient areas and primary care settings have a clinical hand-wash basin close to where clinical procedures are carried out?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
Comments		
2.18	Do all toilets have a hand-wash basin, liquid soap dispenser and paper towels?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
Comments		
2.19	Are all clinical hand-wash basins exclusively for hand hygiene purposes?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
Comments		

Development Stage 2: Design and Planning: Provision of hand-wash basins, liquid soap dispensers, paper towels and alcohol rub dispensers (continued)		
2.20	Does each clinical hand-wash basin have wall mounted liquid soap dispenser, paper towel dispenser?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
Comments		
2.21 D	Does each clinical hand-wash basin satisfy the requirement not to be fitted with a plug?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
Comments		
2.22 D	Are elbow-operated or other non-touch mixer taps provided in clinical areas?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
Comments		
2.23 D	Does each hand-wash basin have a waterproof splash back surface?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
Comments		
2.24 D	Is each hand-wash basin provided with an appropriate waste bin for used hand towels?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
Comments		
Provision of facilities for Decontamination LDU		
2.25 D	Are separate, appropriately sized sinks provided locally, where required, for decontamination? (The sinks should be large enough to immerse the largest piece of equipment and there should be twin sinks, one for washing and one for rinsing. A clinical hand-wash basin should be provided close to the twin sinks).	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
Comments		

Development Stage 2: Design and Planning: Provision of facilities for Decontamination LDU (continued)		
2.26 P	Are appropriate decontamination facilities provided centrally for sterilisation of specialist equipment?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
Comments		
2.27 P	Is there adequate provision in terms of transport, storage, etc. to ensure separation of clean and used equipment and to prevent any risk of contamination of cleaned equipment?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
Comments		
2.28 P	Does the system in operation comply with the current guidance on decontamination facilities and procedures?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
Comments		
Storage		
2.29 P	Is there suitable and sufficient storage provided in each area of the healthcare facility for the following if required patients' clothes and possessions, domestic cleaning equipment and laundry, large pieces of equipment e.g. beds, mattresses, hoists, wheelchairs, trolleys, and other equipment including medical devices, wound care, and intravenous infusion equipment, consumables etc?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
Comments		
2.30 P	Is there separate, suitable storage for contaminated material and clean material to prevent risk of contamination?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
Comments		

Development Stage 2: Design and Planning: Engineering services (Ventilation)		
2.31 P	Are heat emitters, including low surface temperature radiators, designed, installed and maintained in a manner that prevents build up of dust and contaminants and are they easy to clean?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
Comments		
2.32 D	Is the ventilation system designed in accordance with the requirements of SHTM 03-01 'Ventilation in Healthcare Premises'?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
Comments		
2.33 D	Is the ventilation system designed so that it does not contribute to the spread of infection within the healthcare facility? <i>(Ventilation should dilute airborne contamination by removing contaminated air from the room or immediate patient vicinity and replacing it with clean air from the outside or from low-risk areas within the healthcare facility.)</i>	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
Comments		
2.34 D	Are ventilation system components e.g. air handling, ventilation ductwork, grilles and diffusers designed to allow them to be easily cleaned?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
Comments		
2.35 P & D	Are ventilation discharges located a suitable distance from intakes to prevent risk of contamination?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
Comments		
2.36 P	Does the design and operation of re-circulation of air systems take account of dilution of contaminants and the space to be served? <i>(NB: Recirculation would only arise in UCV theatres)</i>	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
Comments		

Development Stage 2: Design and Planning: Engineering services (Ventilation) (continued)		
2.37	Is the ventilation of theatres and isolation rooms in accordance with current guidance?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
Comments		
2.38	Do means of control of pathogens consider whether dilution or entrainment is the more appropriate for particular situations?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
Comments		
2.39	Where ventilation systems are used for removal of pathogens, does their design and operation take account of infection risk associated with maintenance of the system?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
Comments		
2.40	Are specialised ventilation systems such as fume cupboards installed and maintained in accordance with manufacturers' instructions?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
Comments		
Engineering services (Lighting)		
2.41 D	Is the lighting designed so that lamps can be easily cleaned with minimal opportunity for dust to collect?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
Comments		
Engineering services (Water services)		
2.42 D	Are water systems designed, installed and maintained in accordance with current guidance?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
Comments		

Development Stage 2: Design and Planning: Engineering services (Water Services) (continued)		
2.43	Are facilities available to enable special interventions for <i>Legionella</i> ?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
Comments		
2.44	Is the drainage system design, especially within the healthcare facility building, fit for purpose with access points for maintenance carefully sited to minimise HAI risk?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
Comments		
2.45	Are surface mounted services avoided and services concealed with sufficient access points appropriately sited to ease maintenance and cleaning? (These services would include water, drainage, heating, medical gas, wiring, alarm system, telecoms, equipment such as light fittings, bedhead services, heat emitters.)	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
Comments		
Estates services (Pest control)		
2.46	Is the concealed service ducting designed, installed and maintained to minimise risk of pest infestation?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
Comments		
Estates services (Maintenance access)		
2.47	Does the design and build of the facility allow programmed maintenance of the fabric to ensure the integrity of the structure and particularly the prevention of water ingress and leaks and prevention of pigeon and other bird access?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
Comments		

Development Stage 2: Design and Planning

Additional notes – Stage 2

Construction and refurbishment Stage

Project particulars and checklists for Development Stage 3

Development stage 3: Construction and refurbishment work: Checklist to ensure all aspects have been addressed		
HAI-SCRIBE Name of Project		
Name of Establishment		
National allocated number		
HAI-SCRIBE Review Team		
HAI-SCRIBE Sign Off		
Completed By (Project Manager) (Print Name)		Date
Signature		Date
Stage 3		
Additional Notes		
<p>*Immuno-compromised patients who are identified as high-risk patients have the greatest risk of infection caused by airborne or waterborne micro-organisms. Patients in this subset include persons who are severely neutropenic for prolonged periods of time (ie an absolute neutrophil count [ANC] of ≤ 500 cells/mL), allogeneic HSCT patients, and those who have received the most intensive chemotherapy (e.g. childhood acute myelogenous leukaemia patients).</p> <p>Immuno-suppressive conditions identified as risk factors for construction-related nosocomial fungal infections include graft-versus-host disease requiring treatment; prolonged neutropenia or granulocytopenia because of cytotoxic chemotherapy; prolonged use of antibiotics; and steroid therapy. Other risk factors for the development of aspergillosis include dialysis and mechanical ventilation, smoking and patient age, the very young and very old being at greater risk Grauhan and colleagues reported that the risk of a fungal infection increases in patients who exhibit three or more risk factors ($p < 0.001$). CCDR (2001)</p>		

Development stage 3: HAI-SCRIBE applied to Construction and refurbishment work Prior to the commencement of work	
3.1.1	Brief description of the work being carried out.
3.1.2	Using the matrix above establish the type and extent of construction and refurbishment /repair work, patients at risk and level of control measures.
	Type of work
	Patient risk group
	Risk class
3.1.3	Identify any potential hazards associated with this work.
3.1.4	Identify any risk associated with the hazards identified above.
3.1.5	Outline the control measures that require to be implemented to eliminate or mitigate the identified risks. Ensure these are entered on the project risk register.
	Control measures
3.1.6	It has been recognised that control measures identified to address the project risk may have unintended consequences e.g. closure of windows can lead to increased temperatures in some areas. Such issues should be considered at this point, they should be noted and action to address these taken.
	Potential problems
	Control measures
3.1.7	Actions to be addressed
By	Deadline

Development stage 3: In terms of infection risk confirmation that the following been addressed		
3.2.1	The population groups most susceptible to infection. Items to be considered: Adjacent rooms, wards and departments Relocation of susceptible patients Have these issues and actions to be taken been noted in actions to be addressed section?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
Comments		
3.2.2	The hours of operation of the construction work and the impact of this on the clinical area. Have these issues and actions to be taken been noted in actions to be addressed section?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
Comments		
3.2.3	Separation of construction and healthcare activities including delivery and supply routes, removal of waste and patient transfers. Have these issues and actions to be taken been noted in actions to be addressed section?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
Comments		
3.2.4	The construction of temporary barriers and/or sealing of doors and windows to minimise contamination of the environment by dust and potentially infectious particles created during the construction works. Have these issues and actions to be taken been noted in actions to be addressed section?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
Comments		

Development stage 3: In terms of infection risk confirmation that the following been addressed (continued)		
3.2.5	Airflow patterns including: Internal and external ventilation systems Exhaust ventilation Sealing of doors and windows Oxygen and Suction points Air handlers, coils, fans and grilles Have these issues and actions to be taken been noted in actions to be addressed section?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
Comments		
3.2.6	Work with sinks or plumbing which could give rise to aerosol water droplets in high risk areas. Have these issues and actions to be taken been noted in actions to be addressed section?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
Comments		
3.2.7	Impact on stock storage areas including: Sterile and non-sterile items Patient care equipment Medications Medical records and documentation Linen and waste facilities including sharps Have these issues and actions to be taken been noted in actions to be addressed section?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
Comments		

Development stage 3: During the construction phase have the following been addressed?		
3.3.1	<p>Where external work is being carried out:</p> <p>Prevention of insect and rodent entry and prevention of weather/water entry to internal areas during the construction phase.</p> <p>Have these issues and actions to be taken been noted in actions to be addressed section?</p>	<p>Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/></p> <p>Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/></p>
Comments		
3.3.2	<p>Cleaning of site and adjacent areas both during the construction phase and prior to handover.</p> <p>Have these issues and actions to be taken been noted in actions to be addressed section?</p>	<p>Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/></p> <p>Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/></p>
Comments		
3.3.3	<p>Enforcement of control and reporting system to ensure compliance with above issues.</p> <p>Have these issues and actions to be taken been noted in actions to be addressed section?</p>	<p>Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/></p> <p>Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/></p>
Comments		
Additional notes - Stage 3		

Pre-handover check, ongoing maintenance & feedback Stage:

Development stage 4 – Review of completed project		
HAI-SCRIBE Name of Project		
Name of Establishment		National allocated number
HAI-SCRIBE Review Team		
HAI – SCRIBE Sign Off		
Completed by (Print name)	Date	
Signature(s)	Date	
Stage 4		
Additional notes		

Development Stage 4

Development Stage 4: Pre-handover check, ongoing maintenance and feed-back: General overview		
4.1	Is the space around beds in accordance with current NHSScotland guidance?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
4.2	Are there sufficient single rooms to accommodate patients known to be an infection of potential infection risk?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
4.3	Are all surfaces, fittings, fixtures and furnishings designed for easy cleaning?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
4.4	Are soft furnishings covered in an impervious material in all clinical and associated areas, and are curtains able to withstand washing at disinfection temperatures?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
4.5	Is the bathroom / shower / toilet accommodation sufficient and conveniently accessible, with toilet facilities no more than 12m from the bed area?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
4.6	Are the bathroom/shower/toilet facilities easy to clean?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
4.7	Where required are there sufficient en-suite single rooms with negative/positive pressure ventilation to minimise risk of infection spread from patients who are a known or potential infection risk?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
Provision of hand-wash basins, liquid soap dispensers, paper towels and alcohol rub dispensers		
4.8	Does each single room have a clinical hand-wash basin, liquid soap dispenser, paper towels, and alcohol rub dispenser over and above the hand-wash basin in the en-suite facility?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
4.9	Do intensive care and high dependency units have sufficient clinical hand wash basins, liquid soap dispensers, paper towels, and alcohol rub dispensers conveniently accessible to ensure the practice of good hand hygiene? An assessment should be made, however, to ensure that there is not an over-provision of hand-wash basins resulting in under-use.	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
4.10	Is there provision of clinical hand-wash basins, liquid soap dispensers, paper towels, and alcohol rub dispensers in lower dependency settings like mental health units, acute, elderly and long term care settings appropriate to the situation with a ratio of 1 basin/dispenser to 4–6 beds?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
4.11	Do out-patient areas and primary care settings have a clinical hand-wash basin close to where clinical procedures are carried out?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>

Development Stage 4: Pre-handover check, ongoing maintenance and feed-back: Provision of hand-wash basins, liquid soap dispensers, paper towels and alcohol rub dispensers (continued)		
4.12	Do all toilets have a hand-wash basin, liquid soap dispenser and paper towels?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
4.13	Are all clinical hand-wash basins exclusively for hand hygiene purposes?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
4.14	Does each clinical hand-wash basin have wall mounted liquid soap dispenser, paper towel dispenser?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
4.15	Does each clinical hand-wash basin satisfy the requirement not to be fitted with a plug?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
4.16	Are elbow-operated or other non-touch mixer taps provided in clinical areas?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
4.17	Does each hand-wash basin have a waterproof splash back surface?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
4.18	Is each hand-wash basin provided with an appropriate waste bin for used hand towels?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
Provision of facilities for Decontamination		
4.19	Are separate, appropriately sized sinks provided locally, where required, for decontamination? <i>(The sinks should be large enough to immerse the largest piece of equipment and there should be twin sinks, one for washing and one for rinsing. A clinical hand-wash basin should be provided close to the twin sinks).</i>	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
4.20	Are appropriate decontamination facilities provided centrally for sterilisation of specialist equipment?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
4.21	Is there adequate provision in terms of transport, storage, etc. to ensure separation of clean and used equipment and to prevent any risk of contamination of cleaned equipment?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
4.22	Does the system in operation comply with the current guidance on decontamination facilities and procedures?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
Storage		
4.23	Is there suitable and sufficient storage provided in each area of the healthcare facility for the following if required patients' clothes and possessions, domestic cleaning equipment and laundry, large pieces of equipment e.g. beds, mattresses, hoists, wheelchairs, trolleys, and other equipment including medical devices, wound care, and intravenous infusion equipment, consumables etc?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>

Development Stage 4: Pre-handover check, ongoing maintenance and feed-back: Storage (continued)		
4.24	Is there separate, suitable storage for contaminated material and clean material to prevent risk of contamination?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
Engineering services (Ventilation)		
4.25	Are heat emitters, including low surface temperature radiators, designed, installed and maintained in a manner that prevents build up of dust and contaminants and are they easy to clean?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
4.26	Is the ventilation system designed in accordance with the requirements of SHTM 03-01 'Ventilation in Healthcare Premises'?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
4.27	Is the ventilation system designed so that it does not contribute to the spread of infection within the healthcare facility? <i>(Ventilation should dilute airborne contamination by removing contaminated air from the room or immediate patient vicinity and replacing it with clean air from the outside or from low-risk areas within the healthcare facility.)</i>	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
4.28	Are the ventilation system components e.g. air handling, ventilation ductwork, grilles and diffusers designed to allow them to be easily cleaned?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
4.29	Are ventilation discharges located a suitable distance from intakes to prevent risk of contamination?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
4.30	Does the design and operation of re-circulation of air systems take account of dilution of contaminants and the space to be served? <i>(NB: Recirculation would only arise in UCV theatres)</i>	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
4.31	Is the ventilation of theatres and isolation rooms in accordance with current guidance SHTM 03-01, SHPN 04-01 Supplement 1 and the Scottish Hospital Infection Manual)?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
4.32	Do means of control of pathogens consider whether dilution or entrainment is the more appropriate for particular situations?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
4.33	Where ventilation systems are used for removal of pathogens, does their design and operation take account of infection risk associated with maintenance of the system?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
4.34	Are specialised ventilation systems such as fume cupboards installed and maintained in accordance with manufacturers' instructions?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>

Development Stage 4: Pre-handover check, ongoing maintenance and feed-back: Engineering services (Lighting)		
4.35	Is the lighting designed so that lamps can be easily cleaned with minimal opportunity for dust to collect?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
Engineering services (Vacuum Units)		
4.36	Are vacuum-controlled units with overflow protection devices for mechanical suction used to avoid contaminating the system with aspirated body fluid?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
Engineering services (Water services)		
4.37	Are water systems designed, installed and maintained in accordance with current guidance? (SHTM 04-01 series – Water safety)	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
4.38	Are facilities available to enable special interventions for <i>Legionella</i> such as chlorination/chlorine dioxide, copper/silver ionisation treatment of water?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
4.39	Is the drainage system design, especially within the healthcare facility building, fit for purpose with access points for maintenance carefully sited to minimise HAI risk?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
4.40	Are surface mounted services avoided and services concealed with sufficient access points appropriately sited to ease maintenance and cleaning? (These services would include water, drainage, heating, medical gas, wiring, alarm system, telecoms, equipment such as light fittings, bedhead services, heat emitters.)	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
Estates services (Pest control)		
4.41	Is the concealed service ducting designed, installed and maintained to minimise risk of pest infestation?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
Estates services (Maintenance access)		
4.42	Does the design and build of the facility allow programmed maintenance of the fabric to ensure the integrity of the structure and particularly the prevention of water ingress and leaks and prevention of pigeon and other bird access?	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
Additional notes - Stage 4		