CQC IPC Compliance Checklist

For UK domiciliary care providers — infection prevention and control evidence aligned to the CQC's Safe and Well-led key questions. Print this, work through each section, and note the evidence you can produce on request. Provided by PPE Flo (ppeflo.live) as a preparation aid; it is not CQC guidance and does not replace your own policies or professional judgement.

1. Governance and policy

- ☐ An IPC policy exists, is dated, and was reviewed in the last 12 months
- ☐ A named IPC lead is recorded and known to staff
- ☐ IPC is a standing item at management / governance meetings
- ☐ Staff have signed to confirm they have read the current IPC policy
- ☐ Roles and responsibilities for IPC are written down per job role

2. PPE supply and stock control

- ☐ Current stock levels are recorded for gloves, aprons, masks and sanitiser
- ☐ Minimum stock thresholds are set and monitored
- ☐ Deliveries are logged with date, quantity and batch/supplier
- ☐ A contingency supplier or buffer stock is identified for shortages
- ☐ Expiry dates are checked and out-of-date stock removed

3. PPE use at the point of care

- ☐ PPE used is recorded per visit, per care worker
- ☐ Donning and doffing sequence is displayed or issued to staff
- ☐ Single-use items are confirmed as not reused
- ☐ Hand hygiene products are carried by every care worker
- ☐ Staff know how to report a PPE shortage mid-round

4. Training and competence

- ☐ Every care worker has completed IPC and hand hygiene training
- ☐ Training dates and refresher due dates are recorded centrally
- ☐ Practical competence has been observed, not just e-learning completed
- ☐ New starters complete IPC training before their first unsupervised visit
- ☐ Agency and bank staff are covered by the same checks

5. Audit and monitoring

- ☐ IPC audits are scheduled (at minimum quarterly) and carried out
- ☐ Audits are scored so trends over time are visible
- ☐ Spot checks / observed practice visits are documented

☐	Audit results are shared with the team, not just filed	
☐	Audit coverage includes every branch or locality you operate in	

6. Corrective actions

☐	Every audit shortfall has a written corrective action	
☐	Each action has a named owner and a due date	
☐	Completed actions record what changed and when	
☐	Overdue actions are escalated to the registered manager	
☐	Repeat findings trigger a root-cause review, not a repeat action	

7. Incidents and outbreaks

☐	Infection-related incidents are logged and reviewed	
☐	An outbreak plan names who to notify and when	
☐	Lessons learned from incidents are recorded and acted on	
☐	Sharps / clinical waste handling is documented and compliant	

8. Evidence ready for inspection

☐	You can export PPE usage records for any date range	
☐	You can show audit scores and trends for the last 12 months	
☐	You can show completed corrective actions with dates and owners	
☐	Records show who entered each entry and when (audit trail)	
☐	Access to records is role-based and reviewed periodically	

Notes column: record where the evidence lives (system, folder, report name). PPE Flo can produce sections 2, 3, 5, 6 and 8 automatically as an exportable compliance report. Full guide: ppeflo.live/cqc-compliance-guide