| **Criteria** | **Met** | **Not Met** | **Comments** |
| --- | --- | --- | --- |
| **Fire Safety:** | | | |
| Hallways, stairwells and exits are clear of obstruction. |  |  |  |
| All items are located on one side of the hallway. |  |  |  |
| Locate medical gas shutoff valves, fire extinguishers and alarm pull stations to ensure they are not blocked. |  |  |  |
| Have staff members explain who is responsible for shutting off the med gas in an emergency. |  |  |  |
| Equipment on wheels not stored in hall for > 30 minutes. |  |  |  |
| Doors with automatic closures are not propped open. |  |  |  |
| Evacuation routes/maps are posted. |  |  |  |
| Fire exit signs are fully illuminated. |  |  |  |
| Fire extinguisher is checked monthly and noted on tag. |  |  |  |
| All compressed gas cylinders are secured. |  |  |  |
| Numbers of compressed gas cylinders being maintained/stored are within smoke compartment guidelines. |  |  |  |
| All stored items are within 18” of the ceiling. |  |  |  |
| Holiday decorations are located within policy guidelines |  |  |  |
| **Building/Utility Systems** | | | |
| Walls, doors and flooring are free of physical damage. |  |  |  |
| Painted surfaces are well-maintained and free of chipping or peeling. |  |  |  |
| Sinks are functioning properly. |  |  |  |
| Pipes are free of leaks. |  |  |  |
| Door latches, handles and locks work properly. |  |  |  |
| External doorway closure systems are functioning properly and are secure. |  |  |  |
| Ceiling tiles are not stained, broken, out of alignment or missing. |  |  |  |
| Lights are fully illuminated. |  |  |  |
| All electrical outlets are covered and secure. |  |  |  |
| Unit/Department is clean and well-organized |  |  |  |
| Floors are clean and free of spills. |  |  |  |
| Handrails, counters, windowsills and frames are clean and free of dust, debris and spills. |  |  |  |
| Curtains/blinds are clean and free of dust. |  |  |  |
| Furniture is clean and in good repair. No damage is noted to upholstery. |  |  |  |
| Vents and sprinkler heads are clean and free of dust. |  |  |  |
| Trash containers are conveniently placed and emptied  when full. |  |  |  |
| Supplies are stored at least 18 inches from the ceiling or 6 inches off the floor. |  |  |  |
| Nothing is stored beneath the sinks. |  |  |  |
| Department is free of pests/insects. |  |  |  |
| Plants and floral arrangements are well-maintained and free of pests/insects. |  |  |  |
| Visitor waiting areas and coffee service areas are clean. |  |  |  |
| **Emergency Preparedness** | | | |
| Staff members know correct emergency codes and how to activate the codes in an emergency. |  |  |  |
| Staff members can state their role in a disaster/emergency. |  |  |  |
| Flashlights are available and working properly on each unit. |  |  |  |
| **Security** | | | |
| Designated locked doors are locked as required. |  |  |  |
| Key pad/Badge Access works properly. |  |  |  |
| Non-24 hour departments are secured after hours. |  |  |  |
| Facility is locked after hours with the only access to enter are through the ED or designated area. |  |  |  |
| Staff valuables are properly secured. |  |  |  |
| All employees, students, vendors and contractors wear ID badges in a visible location. |  |  |  |
| Panic buttons are tested monthly and receive appropriate response. |  |  |  |
| Security Officers round frequently. |  |  |  |
| Patient valuables are secured and not left unattended. |  |  |  |
| Staff members know to notify security for any unattended belongings, suspicious activity or disruptive patients/family members. |  |  |  |
| **Equipment** | | | |
| Only critical equipment is plugged into emergency power outlets. |  |  |  |
| Staff members can state the procedure for reporting/securing broken or malfunctioning equipment. |  |  |  |
| All equipment has been inspected by Clinical Engineering and date its inspection is not expired. |  |  |  |
| O2 tanks are secured in holders, in designated locations and contain the number allotted per smoke compartment guidelines. |  |  |  |
| Code cart is locked, clean, accessible and log checked daily (only current month’s log located on cart) |  |  |  |
| Defibrillator is plugged into emergency power outlet. |  |  |  |
| Defibrillator time reflects the current time. |  |  |  |
| Unopened electrode package is available on defibrillator. |  |  |  |
| Clinical alarms are audible |  |  |  |
| Glucometer machine is clean. |  |  |  |
| Glucometer control solutions and strips are dated upon opening and within 90 days of opening. |  |  |  |
| Warmer (Fluid, contrast, blanket) temperatures are checked daily. Temperature range should be noted on warmer. |  |  |  |
| Warmer log-action documented for out of range temperature. |  |  |  |
| **Hazardous Materials & Waste** | | | |
| Personal protective equipment (gloves, masks, etc.) are available in patient care areas. |  |  |  |
| Sharps boxes are secure and not accessible to the patient. |  |  |  |
| Sharp/Needle boxes are not filled past the designated fill line. |  |  |  |
| No items are stored on top of Sharp boxes. |  |  |  |
| Pharmaceutical Waste containers are in a secure area. |  |  |  |
| Red bag waste containers are properly labeled and covered. |  |  |  |
| Trash and red bag waste bags are properly disposed of in soiled utility room. Staff members do not place bags on the floor in hallways. |  |  |  |
| All chemicals and bottles of liquid are appropriately labeled. |  |  |  |
| All EVS carts and cleaning supply chemicals are secure and inaccessible to the public. |  |  |  |
| High level disinfectants are monitored as per the manufacturer’s guidelines. |  |  |  |
| Staff members can state how to access SDS information. |  |  |  |
| **Infection Control** | | | |
| Handwashing reminder stickers are in place. |  |  |  |
| Soap, paper towels and hand sanitizer are available  and stocked. |  |  |  |
| Patient supplies and equipment is stored in clean areas. |  |  |  |
| No expired supplies noted. |  |  |  |
| Isolation precautions are visible in patient care areas. |  |  |  |
| Doors to patients in isolation precautions remain closed. |  |  |  |
| Staff do not have artificial nails when working in patient  care areas. |  |  |  |
| Staff members can state the procedure for reporting a blood/body fluid or chemical exposure, and work-related injury. |  |  |  |
| Eyewash stations are checked weekly and documented  on log. |  |  |  |
| **Staff Food and Drink** | | | |
| Food is limited to staff lounges, conference rooms and private offices. |  |  |  |
| Covered drinks in nursing station are limited to low surfaces. No drinks allowed on high surfaces or where drinks can be contaminated e.g. near specimen pick-up areas. |  |  |  |
| No drinks located near patient’s rooms e.g. patient chart area, WOW’s and any areas near patient rooms. |  |  |  |
| **Nourishment Refrigerator** | | | |
| No staff food located in patient food refrigerators. |  |  |  |
| Patient food is labeled with name, date and not older than  3 days. |  |  |  |
| Refrigerator temp is checked and logged everyday |  |  |  |
| Remedial actions are documented for all out-of-range refrigerator temps |  |  |  |
| **Medication Prep/Administration/Storage Cabinet Rooms/Areas** | | | |
| No medications, IV solutions or syringes are left unsecured  and unattended |  |  |  |
| Pill cutters are individual, labeled and stored in patient-specific bin |  |  |  |
| Dedicated area is identified for medication preparation. |  |  |  |
| No expired vials are in use. |  |  |  |
| Expiration dates are placed on vial for 28 days after opening. |  |  |  |
| **Patient Information** | | | |
| Documents and records with patient information are stored or disposed of correctly to protect privacy. |  |  |  |
| Patient information is not left up on computer screen visible to the public. |  |  |  |
| **Patient Rooms** | | | |
| No overfilled sharps containers. |  |  |  |
| Nothing on the window sills. |  |  |  |
| No syringes/meds left unattended. |  |  |  |
| **Linen and Supplies** | | | |
| Clean linen on linen carts is covered at all times if not stored in clean linen/utility room. |  |  |  |
| No items (e.g., pillows) are stored on top of linen cart. |  |  |  |
| No bags of clean linen/precautions gowns allowed on floor. |  |  |  |
| Soiled linen containers are not overfilled. |  |  |  |
| **Dirty/Soiled Utility Room** | | | |
| Doors are closed and locked. |  |  |  |
| No clean items are stored in dirty utility room. |  |  |  |
| No storage of patient personal belongings. |  |  |  |
| Counters are soil/clutter-free. |  |  |  |
| Floors are clutter-free, allowing access to sink, hopper  and door. |  |  |  |
| No IV fluids hanging. |  |  |  |
| Red biohazard containers are covered. |  |  |  |
| No storage of cleaning equipment and supplies. |  |  |  |
| No storage of vases and flowers. |  |  |  |
| **Clean Utility Room** | | | |
| Doors are closed. |  |  |  |
| Free of dirty items. |  |  |  |
| No storage of patient personal belongings. |  |  |  |
| All bags and boxes are off of the floor. |  |  |  |
| No outside shipping boxes. |  |  |  |
| No loose items under supply carts. |  |  |  |
| No supplies on the floor. |  |  |  |