



EOC Rounds Checklist

The Premier Medical Group Safety Officer or designee conducts environmental tours every month in patient care areas at each of our locations to evaluate the effectiveness of previously implemented activities intended to minimize or eliminate environment of care risks. The Safety Officer /designee uses this checklist as a basis for their review, but is not limited to just these items.

Department managers will maintain a copy of this checklist at their site locations to do a self-assessment of their location prior to the Safety Officers monthly inspection. On the day of the Safety Officers survey, the manager will present the checklist to the safety officer/designee. This gives the manager an opportunity to identify and correct issues prior to the monthly inspection, and bring any issues forward so the safety officer can work on the manager's behalf to address them.

The department manager will receive a report of the surveyor's findings within days of the inspection. Upon receipt of the report the manager has 7 business days to respond in writing to items identified as not meeting standards that is not flagged as being addressed by another department; i.e. building maintenance etc. However, the manager needs to monitor the situation to make sure that it is fixed by that other department or vendor.

The manager/designee is invited to accompany the survey team as they do rounds. This process is designed for maximum collaboration between the manager and the inspection team so they can learn from each other to enhance our efforts to be perpetually Joint Commission, Department of Health and OSHA ready.

Date: _____ Location: _____ Surveyor(s): _____					
Topic		Yes	No	N/A	Comments
1.	Hallway Clearance – No equipment not in active use is permitted in the hallway. Permitted items must be staged only on one side.				(Patient transport equipment is permitted so long as they are on one side and not blocking emergency exits and fire equipment.)
2.	Hallway Clearance – All authorized equipment will be staged to one side.				(This is important so that in the event of an emergency the path to safety is unobstructed.)
3.	Hallway Clearance – soiled linen hampers are not in the hallways unless in active use.				Hampers should not be staged in hallways at any time. If empty, they can be in patient rooms, if full; they should be transported to the Soiled Utility room and full bags emptied into a bin.)
4.	Wet-Floor signs used and removed in a timely manner?				(Staff should know the location of wet floor signs for when they are needed. It is also important to remove the sign when the floor is dry so as not to have another obstacle in the hallway or room.)

5.	Floors free of trip hazards, well maintained and clean.				(Floor surfaces are even, in good shape and clean. No cords or tubing should be laid across floors so as to create a trip hazard.) (Carpet not frayed or torn.)
6.	Items/supplies are not stored directly on the floor.				(This includes storerooms, under work stations and passage ways. Items approved for storage should be on a pallet.) or shelving.
7.	Clinical staff wears no-slip shoes?				(Consult with Human Resources as to the appropriate foot wear.)
8.	Emergency exits clear of any obstructions.				(Staff should know where these exits are located)
9.	Fire Equipment present & clear of any obstructions.				(There is no exception to this rule; fire extinguishers, and fire pulls can never be blocked.)
10.	Fire Equipment inspected.				(The Safety Officer / designee inspects them monthly.)
11.	Emergency lights have been inspected within the month due.				(The Safety Officer inspects them monthly.)
12.	Exit lights are working.				(The Safety Officer / designee inspects them monthly.)
13.	Receptacles and light switches have covers.				(Any covers that are cracked or damaged should be replaced.)
14.	No use of electrical extension cords unless approved by the Safety Officer/ Designee.				(Using the wrong extension cord can possibly damage the equipment in use and may be a fire hazard. When using an extension cord make sure it doesn't become a trip hazard.)
15.	Approved power strips are not piggybacked.				(One power strip should never be plugged into another.)
16.	No portable heaters in patient care areas.				(Portable heaters are not permitted in patient care areas.)
17.	Medical Equipment should be inventoried & tagged accordingly. "Due date" on equipment which qualifies for inspection should be current.				Bio-Med is responsible for medical equipment repair and maintenance. Supervisors should notify vendor when equipment is in need of repair / inspection and note the location of equipment.)
18.	Staff understands the importance of SDS (Safety Data Sheets) how to access it and use it.				(Staff should know the location of the SDS in their respective site locations and how to use them.)
19.	Evacuation signs are in-place.				(Staff should know their locations and the direction of evacuations.)
20.	Positive latching on doors and not propped open?				(All doors with latches should close and latch on their own. Doors can only be propped open when a staff member is inside and must close the door upon leaving.)

21.	Doors controlled by the proximity access system are in good working order.				(The Safety Officer will test readers during the EOC survey.)
22.	All rooms where medications are stored are properly locked.				(Medication rooms / lockers should be kept locked at all times when not in use.)
23.	Adequate lighting in all areas of operation.				(Report any burnt out lights or fixture/switches not working immediately.)
24.	No unauthorized electrical devices				(All non-issued electrical equipment must be inspected and approved by the safety officer prior to installation and use.)
25.	Wall mounted Hand Sanitizers have no electrical devices within 1" from either side.				(Since the fluids in hand sanitizers can be an ignition source it is important that they are not mounted over or next to an electrical source.)
26.	Electrical Panels free from obstructions. (3 feet clearance)				(Electrical panels need to be accessible in the event power needs to be shut off. Panel doors should be locked and all breakers should be labeled. All equipment controlled by a shut-off should be clearly labeled.)
27.	Firewalls free of penetrations.				(The Safety Officer will ensure that smoke & fire compartments are sealed to prevent the spread of fire/smoke.)
28.	Sink cabinets are secured with nothing stored therein.				(Needs to be secured to prevent storage of items that may become wet and cause unwanted growth.)
29.	Faucets and/or pipes not leaking.				(Report anything leaking as soon as possible to prevent damage, create a safety hazard and/or preserve resources.)
30.	Sinks are clean, soap and hand lotion dispensers full.				(Staff shall have an operating/sanitary sink to wash their hands.)
31.	Items are not stored within 18" of the ceiling?				(In the event of a fire the water from fire sprinkler head's cannot be obstructed.)
32.	Furniture and fixtures are in good repair.				(Unsafe furniture should be removed from service to be fixed or discarded.)
33.	Garbage is not overflowing.				(Sanitation control.)
34.	Patient rooms; no debris on floors.				(Nothing should be on the floor; towels, sheets, medication packaging, alcohol wrappers, syringe caps, tubing, medical tape, etc.)
35.	No dust, debris under furniture, etc. and no high dust, baseboards, window sills.				(This is an infection control issue as well as patient and staff satisfaction.)
35.	Walls are clean.				(Clean request should be submitted when dirty walls are detected. Take note of the walls under hand sanitizers as they are often subject to accumulating dirt.)
37.	Walls: no holes, no damaged corners and paint in good condition. If wall papered;				(Repair order should be submitted when walls need repair.)

	covering in good condition and adhered to the wall.				
38.	Air vents are free of dust.				(Take note of the surface dust, the inspection team will determine if duct work beyond the grill is dusty.)
39.	Ceiling tiles are free of dirt and stains/chipped/missing.				(Dusty ceiling tiles may be as a result of an air flow issue. Stained tiles particularly ones that are dark may be the result of a maintenance issue above the ceiling that may need immediate attention; submit a repair request.)
40.	Portable fans are free of dust.				(This is an infection control issue; submit a clean request when discovered.)
41.	Lighting fixtures are clean and free of dead insects.				(This usually occurs during the autumn when insects are drawn indoors.)
42.	Kitchen is clean and orderly				(Counter tops clear, sink & appliances clean with drawers/cabinets organized.)
43.	Staff food items are not stored in designated patient or medication refrigerators.				(Co-mingling of food is an infection control issue.) (Defrosting / cleaning is important in the event that the refrigerator malfunctions; melting ice could result in water on the floor.)
44.	No open food at nurse's station.				(This is an infection control issue.)
45.	O2 E-cylinders are secured.				(If a full cylinder falls and snaps the valve it could become a projectile.)
46.	O2 E-cylinders are not co-mingled.				(Prevents staff grabbing an empty or near empty cylinder for patient use.)
47.	Needles and other sharps discarded only in designed containers, and containers appropriately disposed of.				(Contracted service will dispose of containers as designed by contract.)
48.	Hazardous substances properly labeled, stored and handled.				(All containers must be labeled concerning contents.)
49.	Red bags used for medical waste at generation points.				(Staff should be educated where the different materials must be disposed. This can be a safety issue and disposal of unregulated waste in regulated containers is expensive.)
50.	Soiled Utility Room is clean and orderly?				(Soiled Utility Room does not contain cleaning supplies, medical equipment, and patient belongings.) . Garbage bins should not be overflowing and nothing should be leaking from them.
51.	Med-Room /Locker clean, orderly and secure.				(Infection control and security issues.)
52.	Medication refrigerator digital thermometer is present and temp checked daily?				(Infection control and security issues.)
	Lab related items blood tubes				(This is an infection control issue.)

53.	and other collection items are not outdated?				
54.	Fire Safety: Question one staff member on their understanding of their role during a fire/drill.				(Staff should be able to recite RACE and PASS.)
55.	Personal Protective Equipment (PPE) Question one staff member on the use of PPE and/or the use of universal precautions?				
56.	Evacuation: Question one staff member on their role in the event of an evacuation				
57.	Injury: Question one staff member on their role in the event of some getting injured.				
58.	Hazardous Chemical: Question one staff member on their role in the event of a hazardous chemical spill.				
59.	Hazardous Chemicals: Question one staff member regarding their knowledge of SDS, and accessing the information.				
60.	Infection Control: Question one staff member on their understanding of hand hygiene.				
61.	Eye wash stations are operational, inspected monthly and free from obstructions?				