

## Genesis Medical Center -Non- Patient Care Services Area Accreditation Readiness Checklist

Unit/Department: \_\_\_\_\_ Campus: \_\_\_\_\_ Date: \_\_\_\_\_ Surveyor: \_\_\_\_\_

Manager (Signature): \_\_\_\_\_ Date of Review: \_\_\_\_\_

		✓ if OK or NA	If not OK, Problems Noted	Action Taken
<b>A</b>	<b>Physical Facility</b>			
1	Doorways/Hallways clear, areas near fire extinguishers, smoke doors, electrical panels, and fire hose cabinets kept clear and doors close properly			
2	Eight-foot clearance width in the hall. (Patient care equipment may be placed <b>temporarily</b> along one wall.)			
3	Ceiling tiles are intact, without holes or gaps between the tile and metal frame. Tiles are free from water stains.			
4	Floor tiles are intact and clean.			
5	Carpeting and office chairs are intact, clean and free from rips and snags, creating tripping hazard.			
6	Exit lights are illuminated.			
7	Walls are without large dents and holes, exposing drywall, chipped paint. Windows are in good condition (windows closed).			
8	Fire doors open, close easily and latch properly. (cross-corridor and stairwell doors)			
9	All storage is at least 20 inches from ceiling (18 inches from sprinkler, allowing 2 inches for sprinkler head).			
10	Items stacked on shelves and cabinets do not present a falling or lifting hazard.			
11	Doors leading to the main hallway (exit corridor) and laundry chutes are latching and self-closing (no door wedges, doors propped open, or latches disabled).			
12	Plumbing: toilet, shower, drain, eyewash station-operate properly. Eyewash station is checked weekly.			
<b>B</b>	<b>Cleanliness/Infection Control</b>			
1	Ceiling vents are clean including heat and air conditioning grills.			
2	All soap dispensers must be wall-mounted.			

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3	Only properly labeled, cleaning solutions stored under sink.			
4	Waiting areas and staff lounges are clean. Furniture not soiled and free from tears.			
5	Areas around and behind ice machines as well as the drip trays are clean and free of deposits.			
<b>C</b>	<b>Sterile Areas ONLY – Cleanliness/Infection Control</b>			
1	Nothing stored on floors – including soap and computer equipment.			
2	Room doors close securely/tightly.			
3	Vents are clean with no visible dust.			
4	All cleanable surfaces are free of damage.			
5	<b>Staff dressed in appropriate attire.</b>			
<b>D</b>	<b>Hazardous Materials</b>			
1	Hazardous waste (chemical waste) properly segregated from general waste (Environmental Services notified.)			
<b>E</b>	<b>Equipment Management</b>			
1	Operator manuals are in department for each piece of equipment and their locations are known by each staff member			
2	Equipment Inspection Sticker is up-to-date.			
3	Equipment alarms are heard in staffed areas with appropriate response.			
<b>F</b>	<b>Personnel/Policy Issues</b>			
1	Uncovered food and drinks in designated areas only.			
2	Only critical equipment is plugged into red outlets.			
3	Food refrigerators are clean, including the doors, crispers, and under the crispers. Food is labeled/dated appropriately. Staff & patient items are separated. Alarms are on and set at appropriate settings such as temperate range. (Staff only refrigerators no longer have to have the temperature log.)			
4	Equipment and key boards are clean and functioning appropriately.			
5	Gurneys, including the bases, are clean, in good condition, no evidence of dirt and grime.			
6	Employees perform hand hygiene.			
7	No expired supplies present. (Randomly check ten dissimilar	/10		
8	Smoke-free policy being followed; no evidence of smoking.			

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<b>G</b>	<b>Safety Hazard Surveillance</b>			
1	All fire extinguishers tagged/checked; evacuation tags/chalk, if applicable			
2	Stairwells are accessible/free of obstruction.			
3	Corridor handrails are intact.			
4	SDS and chemical inventory current and accessible.			
5	Electrical, phone and computer cords are arranged so as not to present a tripping hazard. (Cords are in good physical condition.)			
6	Where unsupervised children may be present, child-protective outlets are in place.			
7	Workstation Assessment			
	<ul style="list-style-type: none"> <li>Adequate space is available under the workstation for legs and feet. (Feet flat on floor.)</li> </ul>			
	<ul style="list-style-type: none"> <li>Monitor is positioned directly in front of worker.</li> </ul>			
	<ul style="list-style-type: none"> <li>Mouse is located at the same height as the keyboard.</li> </ul>			
	<ul style="list-style-type: none"> <li>Chair height is adjustable.</li> </ul>			
	<ul style="list-style-type: none"> <li>Keyboard height is adjustable, if multiple users.</li> </ul>			
	<ul style="list-style-type: none"> <li>Monitor is free of glare.</li> </ul>			
<b>H</b>	<b>Security</b>			
1	Staff knows how to report a security incident.			
2	Personal belongings are secure.			
3	Staff and patient's bathroom have lock; staff inserviced on locks; staff aware of bathroom key location (as applicable).			
4	Security sensitive areas – is department secure and is staff trained for these specific areas (Pharmacy, BirthCenter, Information Technology locations, Behavioral Health, Cashier areas, and Pediatrics)?			
5	Name badge prominently displayed by staff and business partners.			
<b>I</b>	<b>Staff Knowledge</b>			
1	Patient Rights and Responsibilities poster displayed.			
2	Safety is discussed at each huddle.			
3	Staff knows when and how to fill out unusual occurrence (variance) and employee injury reports.			
4	Staff can explain what bariatric equipment is and how to identify it.			
5	Staff is aware of medical gas shut off valves; responsibility to turn them			

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6	<b>Staff knowledgeable on these codes/alerts (Please interview 3 staff members from your department.)</b>			
	• Infant Abduction	/3		
	• Code Blue	/3		
	• Code Green	/3		
	• Code Pink	/3		
	• Fire Alarm ( location)	/3		
	• Code Search	/3		
	• Active Shooter	/3		
	• Missing Patient	/3		
	• Disaster Alert – Mass Casualty	/3		
	• Disaster Alert Gamma	/3		
	• Tornado Watch	/3		
	• Tornado Warning	/3		
7	Staff can explain procedure for utilities system failures.			
<b>J</b>	<b>Health Insurance Portability and Accountability Act</b>			
1	Staff exhibits good security practices as it relates to their HIPAA password. (Unique password, not shared or written down.)			
2	Work area/monitor positioned so that only authorized users can read the monitor screen or medical records.			
3	Methods are available for destruction of Personal Health Information (PHI).			
4	Staff is aware of the proper way to shred PHI. (Cuts are made across the information. PHI not shredded by user, must be secured.)			
5	Printers and faxes used for PHI must be located in a secure area where only authorized users have access.			
6	Precautions are taken as they relate to voice and email. (Use only the minimum necessary PHI – never include patient identifier in subject line – ensure addresses are correct.)			
7	Any documents and binders with patient name and identifiers are secured in locked cabinets/drawers.			

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◆	<b>Department-Specific Expectations</b>			

**Have safety problems noted on the previous survey been corrected? (if not, explain)**