

Review ID:	Audit tool:	Environmental Assessment (Acute)	CoC:	
Care Setting:	Facility:		Unit	
Review Date:	Response Date:		Reviewer(s):	
Participant(s):	Review Type:	Environmental Assessment		

# Total Compliance

Compliance Score	
Total number of 'Yes'	
Total number of 'No'	
Total number of 'Partial'	
Total number of items ('Yes', 'No' and 'Partial', exclude 'N/A')	
Compliance	

#### Overview

Section	Yes	No	N/A	Partial	Compliance
General					
Hallways/Public Spaces					
Nursing Station					
Medication Preparations Areas					
Clean Utility Room					
Soiled Utility Room					
Patient Rooms					
Respiratory Equipment					
Kitchens (Patient Kitchens, Staff Break Rooms and Cafeterias)					



#### Action Item table

Priority Level		Element	Compliance	Recommended	Photo	Completed	Notes
	Standard			actions or			
				Comments			

Genero	al					
1.0Ger	neral					
	Element	Compliance	Canned comme	nts Recommend actions/com		
1.1	White magnetic boards and/or rubber boards only (no corkboards).					
1.2	<i>If signage is to be posted greater than 30 days it should be laminated, placed in plastic sleeves or printed on wipeable "polyester paper".</i>					
1.3	There is a policy and procedure for cleaning and disinfection of environmental surfaces and shared equipment (e.g., commodes, wheelchairs, electronic thermometers).					
1.4	Dedicated hand washing sinks have controls that minimize contamination of hands (e.g., knee/foot-operated, "winged" taps, electronic eye) or correct procedures are used to minimized contamination of hands (e.g., turning off taps with paper towels).					
1.5	There is a hands-free waste container in every room					
1.6	Waste containers are not overfilled.					
1.7	Puncture-resistant sharps containers are accessible at points-of-use.					
1.8	All cords should be washable/wipeable Sanipull plastic cords.					
1.9	Hand hygiene education is provided to team members and volunteers.					
	Number of 'Yes' Number	r of 'No' Nu	- ·	Number of Partial'	Compliance	



Hallw	ays/Public Spaces				
2.0 H	allways/Public Spaces			-	
	Element	Compliance	Canned comments	Recommended actions/comments	Photos
2.1	Corridors, counters, window-sills, conference, meeting, utility, equipment, storage, & patient rooms are neat & tidy with no evidence of clutter.				
2.2	Furnishings are in good repair. Tape is not to be used for repairs. Torn, broken and/or heavily soiled furniture is repaired, replaced or cleaned as required.				
2.3	Broken equipment is tagged & removed off Unit to a designated locked area to prevent risk from inadvertent use.				
2.4	ABHR is to be mounted at all entrances and exits.				
2.5	Cleaning/Disinfectant wipes are strategically mounted & caps are kept closed. Wipes are also attached to mobile equipment to force function.				
2.6	Egress free & clear (e.g. Fire Exits, Pull Stations, and Doorway).				
2.7	Blanket warmer exterior is cleaned & disinfected daily by EVS. Interior is cleaned & disinfected quarterly (Unit staff need to arrange with EVS).				
2.8	Locker exterior is cleaned & disinfected daily by EVS. Interior is cleaned & disinfected quarterly (staff need to arrange with EVS).				

Number of 'Yes'	Number of 'No'	Number of 'N/A'	Number of 'Partial'	Compliance

Nursing	Nursing Station							
3.0 Nursing Station								
	Element	Compliance	Canned comments	Recommended actions/comments	Photos			
3.1	There is alcohol-based hand rub (ABHR) at the nursing station.							

# Environmental Assessment (Acute)

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3.2	with the hand sani	lotion known to be compatible sanitizer available at the n, supplied by the facility.									
3.3	3.3 There is a schedule for cleaning the area, including high-touch surfaces (e.g., keyboards, phones, charts).										
3.4	.4 No food/drinks are to be consumed at/in the nursing station.										
3.5	.5 The nursing station furniture is made of materials which can be cleaned and disinfected.										
		Number of 'Yes'	Number	of 'No'	Nu	mber of 'N/A'	Numl 'Parti	-	Complia	nce	

	in comments :				
Medi	cation Preparations Areas				
4.0 M	ledication Preparations Areas				
	Element	Compliance	Canned comments	Recommended actions/comments	Photos
4.1	The medication preparation areas have a clean and orderly appearance.				
4.2	Food/specimens are not prepared or stored in the medication preparation area.				
4.3	Open containers of sterile solutions are dated and discarded within 24 hours of opening and/or according to manufacturer's instructions.				
4.4	Discard/replace outdated books/medical instructions.				
4.5	If multi-dose vials (excluding vaccines) are used: They are single-patient use				
4.6	If multi-dose vials (excluding vaccines) are used: Hand hygiene and aseptic technique are followed prior to access				
4.7	If multi-dose vials (excluding vaccines) are used: There is a separate, sterile, single-use needle and syringe used for each re-entry				
4.8	If multi-dose vials (excluding vaccines) are used: Manufacturer's instructions for use/disposal are followed; if non, multi-dose vials are dated when opened and discarded within 28 days of opening or sooner if sterility is questioned or compromised				



4.9	There is a dedicate which is clean and										
4.10	Medication waste is disposed of as per facility policy.										
4.12	No food/drinks are medication prepar										
4.13	1.13 Doors are to be kept shut except for entry/exit.										
		Number of 'Yes'	Number	of 'No'	Nu	mber of 'N/A'	Numb 'Partie	-	Complia	nce	

Clean	Utility Room				
5.0Cle	an Utility Room				
	Element	Compliance	Canned comments	Recommended actions/comments	Photos
5.1	There is a schedule for cleaning the room.				
5.2	There is adequate shelving/storage available for clean and sterile supplies.				
5.3	Items are decanted from corrugated cardboard into washable/wipeable containers.				
5.4	Supplies are stored away from public access.				
5.5	Soiled/used items are not stored in the clean utility room.				
5.6	Sterile supplies are stored on washable seismic-proof risers: •25cm (10 inches) from the floor				
	<ul> <li>45cm (18 inches) from the ceiling</li> <li>At least 5cm (2 inches) from outside walls</li> </ul>				
5.7	No items are stored in cupboards under any sinks.				
5.8	Open rack storage has a solid bottom to protect supplies from soiling or contamination from the floor.				
5.9	Supplies and equipment packaging are intact and clean.				
5.10	Doors are to be kept shut except for entry/exit.				



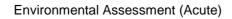
Number of 'Yes'	Number of 'No'	Number of 'N/A'	Number of 'Partial'	Compliance

Soilea	l Utility Room				
6.0 Sc	oiled Utility Room				
	Element	Compliance	Canned comments	Recommended actions/comments	Photos
6.1	There is a schedule for cleaning the room.				
6.2	Cleaned items are marked with "GREEN MEANS CLEAN" tape and placed in the "CLEAN" zone.				
6.3	The room has a clean and orderly appearance.				
6.4	There is a hand hygiene sink and/or ABHR available.				
6.5	There are labelled containers for general, biomedical and anatomical waste and other categories of waste if appropriate (e.g., cytotoxic, recyclable, radioactive).				
6.8	PPE is available in the room.				
6.9	There is regular preventative maintenance scheduled for the hopper/macerator/bedpan washer.				
6.10	The hopper/macerator/bedpan washer, if present, has posted instructions for use.				
6.11	If bedpan washer present, there is detergent and a rinse agent available for replacement when empty.				
6.12	There is an adequately sized garbage container.				
6.13	Work flows from dirty to clean.				
6.14	There is a covered, leak-proof container for the purpose of containment and transportation of used, re-usable medical devices that are to be decontaminated and reprocessed in a centralized or off-site location.				
6.15	Disinfectants are clearly labelled and are used according to manufacturer's instructions.				
6.16	There are no personal care items, sterile supplies for patient use, personal patient items or items stored on the floor.				



6.17	Doors are to be ke entry/exit.	pt shut except for								
		Number of 'Yes'	Number	of 'No'	Nu	mber of 'N/A'	Numb 'Partie	Complia	nce	

Patier	Patient Rooms								
7.0 Patient Rooms									
	Element	Compliance	Canned comments	Recommended actions/comments	Photos				
7.1	There is appropriate spatial separation in multi-bed rooms (e.g., two metres between beds in standard room).								
7.2	There is dedicated hand washing sink in each patient room.								
7.3	Rooms have a clean, orderly appearance with minimal supplies (e.g., no stockpiling).								
7.4	Provide patient with bins(s) for personal items that do not fit in closets/drawers.								
7.5	There is a clear separation between clean and dirty equipment.								
7.6	ABHR is available at point-of care.								
7.7	Personal protective equipment (PPE) is available and accessible in appropriate sizes at point-of care.								
7.8	There is a stocked storage cart/cupboard/cart for PPE located outside of rooms that require Additional Precautions (AP). Empty, clean & disinfect cart when precautions are discontinued and replenish.								
7.9	Ensure there is a clear space on top of the PPE cart for placement of items.								
7.10	Patients on AP should be provided with dedicated equipment and bathroom/commode; post AP signage.								





7.11	Personal care item not shared.	ns (e.g., creams, raz	ors) are								
7.12	7.12 There is dedicated, labelled urine measuring/discard container and a bedpan for each patient if required.										
7.13	7.13 If disposable equipment is used, it is singleuse.										
7.14											
7.15	15 Privacy curtains are visibly clean.										
		Number of 'Yes'	Number	of 'No'	Nu	mber of 'N/A'	Numt 'Parti	-	Complia	nce	

Respiratory Equipment 8.0 Respiratory Equipment							
	Element	Compliance	Canned comments	Recommended actions/comments	Photos		
8.1	Cleaned and disinfected suction equipment is stored in a clean and dry environment.						
8.2	Suction catheter is single-use and is not attached to the suction system until it is used.						
8.3	Disposable suction bottle liners are used and changed between each patient; if suction bottles are reused, they are cleaned and disinfected between each patient.						

Number of 'Yes'	Number of 'No'	Number of 'N/A'	Number of 'Partial'	Compliance

Kitchens (Patient Kitchens, Staff Break Rooms and Cafeterias)							
9.1 Care of Appliances							
	Element	Compliance		Recommended actions/comments	Photos		



9.1.1	The appliances are disinfected.	regularly cleaned &	&								
9.1.2	Microwaves are vis	sibly clean.									
9.1.3	Microwaves are cle between each use.	-	I								
9.1.4	Fridges have poste cleaning and disinf		r								
9.1.5		water cooler and ice ned and disinfected									
9.1.6	Fridges are free of	ice buildup.									
9.1.7	Ice machines have maintenance.		ve								
9.1.8	A preventative mail by FMO with date		ttached								
9.1.9	Scoops are not use the main supply.	d for dispensing ice	from								
9.1.10	Animals are restric preparation area.	ted from the kitche	n/food								
9.1.11	There is a plan in p infestations.	lace to report pests	s and								
9.2Food	Preparation, Stora	ge and Consumptio	n			•				•	
	Element			Complian	ice	Canned comr	nents	Recomment actions/con		Photos	
9.2.1	-	d be discarded if sit longer than 2 hour	-								
9.2.2	Patient's food item cleaned and disinfe labelled with name	ected with AHP wip									
9.2.3	Drugs, blood or spe the food refrigerate	ecimens are not sto or.	red in								
9.2.4	When 个HAIs, clust fridge is immediate	ters, or outbreak de									
		Number of 'Yes'	Number	of 'No'	Nu	mber of 'N/A'	Nun 'Par	nber of tial'	Complia	nce	



General Feedback :