

# Department Checklist

- For the past couple of surveys, this has been a reminder list to help us clean up our departments to meet a variety of facility requirements with JCAHO.
- Please begin now and keep an on-going effort to maintain your department according to the following standards.
- If you have any questions, please contact a member of the JCAHO Accreditation Team.
- If you need assistance from Engineering, please do not wait until the last minute, but contact them soon. If any type of sign/label is needed, please contact \_\_\_\_\_.

Topic	Okay	Actions Needed
No electrical equipment plugged into corridor outlets. Eg. equipment that has battery chargers.		
No food or drink in medication refrigerators.		
Nothing hung on door hardware, eg. knobs or closures.		
Clinical equipment is clean, eg. Equipment that housekeeping does not touch.		
Food tray carts on the floors have the doors closed at all times.		
Food in patient refrigerators has been checked for expiration dates.		
Service carts in corridors are parked so they do not block corridor. Chemicals on carts must be secured when no in use, not left unattended.		
Personal protective equipment is used when needed, i.e. gloves, masks, gowns, etc. Do staff know where the PPE is located?		
All containers, e.g. spray bottles, secondary containers, are properly labeled. [See _____ for labels if you need them].		
Material on Health & Safety Bulletin Board includes: <ul style="list-style-type: none"> <li>• Organization's shared strategic directions/key objectives</li> <li>• Organization's Mission, Vision and values document</li> <li>• Department Mission Statement or Scope of Services</li> <li>• Emergency Management Flow Chart</li> <li>• Employee Incident Report Forms</li> <li>• Occurrence Report forms</li> </ul>		

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<ul style="list-style-type: none"> <li>MSDS Fact Sheet</li> </ul>		
All exit signs are illuminated (if a bulb is out, notify Engineering). Be sure signs are not blocked by anything.		
Emergency equipment is available, e.g. flash lights and other department specific items.		
No wedges or anything else to prop doors open, i.e. wooden wedges, bags, waste baskets, etc.		
Fire & smoke doors [located in corridors/stairwells] able to close freely. No stretchers or furniture in front of doors that are held open by magnetic holding devices.		
Ceiling tiles are all in place. [Notify Engineering if one is found to be missing]. If ceiling tiles are noticeably stained or have holes, contact Engineering.		
No paper signage. E.g. signs that have a message of permanency, e.g. a sign on a "crash cart" that says "Check batteries daily".		
Proper type of fire extinguishers are available, i.e. CO <sub>2</sub> /ABC for kitchens, water for paper & wood, and dry chemical[ABC] extinguishers for all types of fire.		
<p>The following are not blocked:</p> <ul style="list-style-type: none"> <li>Fire alarm pull stations</li> <li>Extinguisher cabinets</li> <li>Electrical panels [located on corridor walls]--3 foot clearance. Are the panels labeled "keep clear"?</li> <li>Medical gas zone shut off valves—[O<sub>2</sub>, medical air, suction valves]—are the valves labeled correctly?</li> <li>Glass vision panels in doors.</li> </ul>		
Last name only or first name only on all white boards, flow boards or patient room labels. No diagnostic information and not both last & first names.		
Have training records available and easily retrievable.		
<p>Policy manuals readily available as needed, including:</p> <ul style="list-style-type: none"> <li>Infection Control</li> <li>Safety Manual [RED]</li> <li>Emergency Management Plans Manual [GREEN]</li> </ul>		
18" clearance from a sprinkler head to store materials—directly below sprinkler head. Nothing hanging from sprinkler head.		
Storage of materials must be at least 4" off the floor or the shelf that the storage material is on should be		

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sealed to the floor [intent is to be able to clean under material and prevent water damage].		
No extension cords being used [creates electrical safety hazard and possible trip hazard]. If used, must be in accordance with Admin Regulation.		
Check bedside units & stretchers for "blood" stains.		
Check trash/linen for overflow.		
All irrigating solutions, i.e. saline and water in plastic bottles are all closed and sealed [new bottles only]. Discard all opened bottles.		
No food or drink in Nurse's Stations.		
Assure everyone is introducing self to patients & knocking on patient doors or announcing self when entering a closed curtain area.		
All staff wearing photo ID's.		
Everyone should have their code card attached to their photo id or on them somewhere.		
All medication areas are locked and/or secured.		
Proper control of prescription blanks in controlled areas.		
Crash cart logs available and signed.		
All multi-dose medication vials must be labeled when open--none expired over 30 days from time of opening.		
Nothing stored in biohazard bags.		
Utility room doors closed [especially dirty].		
Patient food and staff food kept in separate "Food Only" refrigerators. Need proper labels?		
Shower rooms free of patient specific items, i.e. lotions, soaps, etc.		
Bathrooms [employee/public] free of items stored on the lights [brushes, combs, etc.]		
Linen stored in carts that are covered.		
"Clean" tags are on clean IV poles & pumps in clean utility areas or patient unit setups.		
Check computer screens for visibility from the public.		
Check under PYXIS machines for syringes, dropped meds, etc.		
Check medication refrigerator logs [where appropriate].		
Project improvement information posted in the department. Include your documentation of measurement.		

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Look under sinks and in cabinets for proper storage.		
Remind all staff that they speak quietly in halls, elevators, and nurse's station [to help maintain confidentiality].		
Know what products you use in your department and what requires MSDS sheets and where those are kept. There should be a department MSDS binder right on your unit.		
Eliminate any boxes of recyclable cans, bottles, etc. that are in your areas.		
Maintain "shredding" boxes in a confidential area.		
Clean and dirty supplies must be kept separate.		
Soiled laundry held in closed containers.		
Phones have the _____ emergency number posted on them.		
No portable space heaters present.		
Clinical equipment has a clearly marked and up to date inspection tag.		
Staff is aware of appropriate procedures for removal of unsafe patient care equipment.		
Are fire extinguishers identified by signs?		
Evacuation routes posted in permanent locations.		
All identified fire extinguisher locations contain an extinguisher.		
Floors and walls are free from holes/penetrations.		
Compressed gases [eg. Oxygen tanks] stored in designated areas only and properly secured. [Not in corridors]. Be sure that they are appropriately capped.		
All sharps items safely stored [eg. Scissors, needles, knives, pins, razor blades and other sharps].		
Floor surfaces free of cracks, holes and tripping hazards.		
Handrails kept clear and securely fastened—eg. Patient bathrooms, hallways.		
Emergency generator dome lights are kept visible [the light that is on when we are on emergency power].		