



Environment of Care Department Self-Tour Form

Department Name: _____

Date: _____

Department Head/Managers are responsible for **identifying**, **initiating** correction and **documenting** corrections of EC issues that occur during this audit. Please keep this form accessible and on file in your department for at least one year. If you have any questions, you may contact the Office of Environmental Health & Safety at extension 14019.

General Environment of Care

This section addresses risks in the physical environment, employee knowledge, and policies/procedures.

Q#	Performance	C*	N*	NA*	Comments / Corrective Action	Date of CA
1	Administrative policies are available and communicated to employees.					
2	Employees attend orientation within 30 days of hire.					
3	Employees complete B.L.U.E. Book within 90 days of hire and annually by December 31.					
4	Grounds, buildings, & equipment are maintained.					
5	Employees can describe their roles/responsibilities at and away from a fire's point of origin.					
6	Employees can describe the process for reporting a security incident.					
7	Employees can describe the process for reporting an employee, patient, or visitor injury.					

Emergency Management

This section addresses risks in the physical environment and employee knowledge regarding preparation for emergencies.

Q#	Performance	C	N	NA	Comments / Corrective Action	Date of CA
8	Evacuation plans are current and reviewed annually.					
9	Furniture and décor are firmly fastened to the wall.					

Safety & Security

This section addresses risks in the physical environment, access to security sensitive areas, product recalls, and smoking.

Q#	Performance	C	N	NA	Comments / Corrective Action	Date of CA
10	Employee identification badges are worn according to policy.					
11	Access control mechanisms (e.g., card readers, key pads, locks) are maintained in proper working order.					

Hazardous Materials & Waste

This section addresses risks associated with hazardous chemicals, radioactive materials, hazardous energy sources, hazardous medications, and hazardous gases and vapors.

Q#	Performance	C	N	NA	Comments / Corrective Action	Date of CA
12	Containers of hazardous materials are appropriately labeled.					
13	Medical waste is stored in a lidded container labeled with the symbol or text "Biohazard" on the lid and two sides.					
14	Sharps containers are in place, less than 2/3 full, and the lid remains closed when not in use.					
15	Different types of waste are separated, not combined.					
16	Employees are able to find MSDS for materials in their area.					
17	Employees can describe the process for reporting a spill or exposure of hazardous materials.					

Fire Safety

This section addresses risks from fire, smoke, and other products of combustion; fire response plans; fire drills; management of fire detection, alarm, and suppression equipment and systems; and measures to implement during construction or when the Life Safety Code cannot be met.

Q#	Performance	C	N	NA	Comments / Corrective Action	Date of CA
18	Exit corridors are maintained clear and unobstructed.					
19	Employees participate in fire drills quarterly in buildings where patients are treated and annually in business occupancies. (Fire & Emergency Evacuation Drill Forms are located on the VIP under LLUSS, Environmental Health & Safety.)					



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Q#	Performance	C	N	NA	Comments / Corrective Action	Date of CA
20	Penetrations in ceilings (e.g., escutcheons), walls, & floors in fire/smoke separations are sealed.					
21	Doors are kept clear of anything that could interfere with the free operation of the door (e.g., wedges).					
22	Visibility and access of fire safety devices (e.g., pull stations, extinguishers) are maintained unobstructed.					
23	Decorations are in compliance with applicable guidelines & policies.					
24	Compressed gas cylinders are secured properly and stored at least 5 ft. away from combustible material and electrical outlets and switches.					
25	Items are stored at least 18" below fire sprinkler heads.					

Medical Equipment

This section addresses selection, testing, and maintenance of medical equipment and contingencies when equipment fails.

Q#	Performance	C	N	NA	Comments / Corrective Action	Date of CA
26	Employees know how to report medical equipment failures.					
27	Employees can describe response procedures, including using emergency clinical interventions and backup equipment.					
28	Mechanical equipment (e.g., wheelchair, gurney) is maintained safe and in good repair.					
29	Electrically powered patient care equipment has control (ID) tag and current safety inspection sticker.					
30	Cords and cables have no visible defects.					
31	Alarms for in-use patient monitoring equipment are activated and audible.					

Utilities

This section addresses inspection and testing of operating components, control of airborne contaminants, and management of disruptions.

Q#	Performance	C	N	NA	Comments / Corrective Action	Date of CA
32	Energized electrical equipment (e.g., outlets, panels) is covered.					
33	Medical gas alarms and valves are operable.					
34	Extension cords and surge protectors are used only in accordance with administrative policy (e.g., no daisy-chained outlet strips).					
35	Only essential patient-care equipment is plugged into emergency power (red) outlets.					
36	Patient-owned appliances comply with administrative policy.					
37	Water supply system is functioning properly without leaks.					

Additional Comments/Concerns:

Report:

General EOC, Emergency Management, HazMat, and Fire Safety Concerns: [EH&S Complaint Form](#)

Utilities/Repair Concerns: [MC Engineering Work Order Request](#) or [Campus Engineering Repair Request](#)

Housekeeping Concerns: [EVS Mail](#)

Security Concerns: [Security Email](#) or dial x44320

Medical Equipment Concerns: [Clinical Engineering Medical Equipment Service Request Form](#)