

Department Name: _____ Signature: _____ 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. (Access " policytech " from VIP page)					
2	Employees attend orientation within 30 days of hire. (Operating Policy I-70)					
3	Employees complete B.L.U.E. Book within 90 days of hire and annually by December 31. (Operating Policy I-70)					
4	Employees can describe the process for reporting an employee, patient, or visitor injury. (Title 8, Article 2, 8CCR 14300 to 14300.48; Operating Policy I-61 & I-02)					

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*
5	Employees know where to access the Emergency Operations Plan (EM.02.01.01)					
6	In the Emergency Operations Plan it outlines how staff will be communicated with during emergencies. Employees have their contact information updated in the Send Word Now Notification system. (EM.02.02.01)					

Fire / Life 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*
7	Is your Area-Specific Evacuation Plan updated annually. (LS.02.01.10 EP10)					
8	Exit corridors are maintained clear and unobstructed. (LS.02.01.20 EP13)					
9	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 LLUHS Departments, Environmental Health & Safety.) (EC.02.03.03 EP4)					
10	Penetrations in ceilings (e.g., escutcheons), walls, & floors in fire/smoke separations are sealed. (LS.03.01.30 EP6)					
11	Doors are kept clear of anything that could interfere with the free operation of the door (i.e., wedges). (NFPA 101, 2000 ed., 7.1.10.2.1)					
12	Visibility and access of fire safety devices (e.g., pull stations, extinguishers) are maintained unobstructed. (NFPA 101, 2000 ed., 9.6.2.6)					
13	Decorations are in compliance with applicable guidelines & policies. (Operating Policy T-17)					
14	Oxygen cylinders are secured properly and stored at least 5 ft. away from combustible material, electrical outlets and switches. (NFPA 99, 1999 ed., 4-3.1.1.2)					
15	Items are stored at least 18" below fire sprinkler heads. (CFC, 2010 ed., 315.2.1)					

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*
16	Employee identification badges are worn according to Standard Operating Procedures. (EC.01.01.01 EP4)					
17	Employees know where their panic alarm is and how to operate it. (EM.02.02.07 EP7)					
18	Employees can describe the process for reporting a security incident. (EC.02.01.01 EP10)					
19	Access control mechanisms (e.g., card readers, key pads, locks) are maintained in proper working order. (EM.02.02.07 EP7)					

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*
20	Containers of hazardous materials are appropriately labeled. (EC.02.02.01 EP12)					
21	Employees can describe the process for reporting a spill or exposure of hazardous materials. (EC.02.02.01 EP3 & 4)					
22	Employees know how to access to SDS for materials in their area. (EC.02.02.01 EP5)					
23	Hazardous waste, regulated medical waste, sharps and solid waste are all properly segregated and disposed. (EC.02.02.01 EP5 & 8)					

Radiation Safety

This section addresses risks associated with radioactive materials, radiation-generating equipment, and other hazardous energy sources such as MRI and lasers.

Q#	Performance	C*	N*	NA*	Comments / Corrective Action	Date of CA*
24	Patient care personnel, who care for nuclear medicine patients, know where to find radioactive waste containers. (EC.02.02.01 EP6)					
25	Patient care personnel who care for nuclear medicine patients understand how to dispose of radioactive trash and linen. (EC.02.02.01 EP6)					
26	In areas where x-ray equipment is installed, "Operator Instructions" and "Notice to Employees" are posted. (EC.02.02.01 EP7)					
27	In areas where x-ray equipment is installed, "Caution X-ray" signage is posted at room entrances. (EC.02.02.01 EP7)					

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*
28	Mechanical equipment (e.g., wheelchair, gurney) appears to be safe and in good repair. (EC.02.06.01 EP26)					
29	Electrically powered patient care equipment appears to be safe and in good repair including cases, cords, cables, and connectors. (EC.02.04.03 EP2 & 3)					
30	Electrically powered patient care equipment has a control tag (ID) and a current safety inspection sticker. (EC.02.04.03 EP2 & 3)					
31	Alarms for patient monitoring equipment are activated and audible. (NPSG.06.01.01)					

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	Visibility and access of electrical panels are maintained unobstructed. (NEC 110.26)					
33	Visibility and access of emergency medical gas shut-offs are maintained unobstructed. (EC.02.05.09 EP3)					
34	Essential Patient Care equipment should be plugged into emergency power (red) outlets. Employees have access to sufficient emergency power outlets for essential patient care equipment. (EC.02.05.03 EP6)					
35	All water supply systems are functioning properly (i.e., dripping faucets, showers, toilets, or are foot pedals working properly). (EC.02.06.01 EP26)					
36	All electrical outlets / switches cover plates are intact with no cracks or damage. (EC.02.06.01 EP26)					

Additional Comments/Concerns:

Report:

- General EOC, Emergency Management, HazMat, and Fire Safety Concerns: [EH&S Complaint Form](#)
- Utilities/Repair Concerns: [Facilities Management Work Order Request](#) or [Campus Engineering Repair Request](#)
- Housekeeping Concerns: [EVS Mail](#)
- Security Concerns: [Security Email](#) or extension 44320
- Medical Equipment Concerns: [Clinical Engineering Medical Equipment Service Request Form](#)
- Radiation Safety Concerns: radiationsafety@llu.edu or extension 14003