| island health care                    | island hospice         | THAGro       | up ind      | ependent life a | t home       | ideal aging |
|---------------------------------------|------------------------|--------------|-------------|-----------------|--------------|-------------|
| Environ                               | MENTAL SAFET           | y / Infectio | ON CONTRO   | DL INSPEC       | TION SUR     | /EY         |
| Office: Beaufort                      | ] Bluffton 🗌 Perry     | Street Skie  | daway 🗌 Sta | atesboro        | ] W Savannah |             |
| Person Conducting Inspe               | ction:                 |              |             | Date of Inspe   | ection:      |             |
| Scoring:<br>P = PASSED (status of sur | vey item is acceptable | e)           |             |                 |              |             |

\_\_\_\_\_

**X** = FAIL (failure to meet criteria)

**N/A** = NOT APPLICABLE (does not apply to this environment)

If an item fails to meet criteria, please make specific comments regarding the deficit. Save a copy of this completed form in the <u>G:\Community Office Compliance</u> folder and send copies to the THA Group Executive Administrative Assistant and VP of Performance Excellence.

The VP of Performance Excellence should initiate corrective action for items that are not compliant with safety and infection control practices. The Coordinating Council will address problem issues.

| Survey Item   |  | Comments |
|---|--|----------|
| Aisles and hallways are uncluttered and easily accessible   |  |          |
| Physical facilities are in good repair and present no safety hazards, including stairs and steps. Ceiling tiles and walls intact. |  |          |
| Furniture and equipment are stored appropriately and in good repair.  |  |          |
| Desk and file drawers operate easily and are kept closed when not in use.   |  |          |
| Adequate lighting in all areas.   |  |          |
| Floors are free of foreign material/spills.   |  |          |
| All spills are cleaned up immediately, per policy.  |  |          |
| Use of extension cards is prohibited, unless properly grounded cords have been authorized.  |  |          |
| All electrical cords are in good repair.  |  |          |
| All electrical equipment is turned off when not in use.   |  |          |
| Scissors and other sharp objects are safety stored and used.  |  |          |
| Storage areas are kept clean and orderly. Supplies are 6" off floor and 18" from sprinkler heads.                                 |  |          |
| Doors to storage rooms are kept closed. Only appropriate items are stored in each room.   |  |          |
| Items with heating elements (coffee maker, etc.) that do not have a UL tag are checked and authorized for use.                    |  |          |
| Staff use proper equipment (appropriate stools/ladders) when reaching high shelves.   |  |          |
| Staff observed during survey are using good body mechanics.   |  |          |

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THA

independent life at home

ideal aging

| Survey Item  | Score | Comments | N/A |
|--|-------|----------|-----|
| Chemicals are safety stored and used. A spray bottle with approved disinfectant is available.  |       |          |     |
| Staff are aware of how to obtain MSDS information.   |       |          |     |
| All equipment is visibly clean and defective equipment is reported to the vendor immediately upon discover.  |       |          |     |
| Universal precautions are practiced at all times. Personal Protective Equipment (PPE) is available for staff use as appropriate.                               |       |          |     |
| Sharps are disposed of in sharps containers. Sharps containers are disposed of when full.  |       |          |     |
| Biohazardous materials are disposed of in appropriately labeled bags.  |       |          |     |
| Telemonitors are transported and stored properly.  |       |          |     |
| Staff can correctly describe emergency action in case of fire (PASS and RACE).   |       |          |     |
| Staff are watchful for staff or visitor negligence in fire safety.   |       |          |     |
| Fire exits are free of obstruction.  |       |          |     |
| Fire extinguishers are available.  |       |          |     |
| Fire extinguishers are checked monthly to ensure that they are current.  |       |          |     |
| Fire extinguisher tags reflect current status.   |       |          |     |
| Staff can indicate location of fire extinguishers and alarm pulls.   |       |          |     |
| "No Smoking" policy strictly enforced.   |       |          |     |
| Wet mopped areas are identified and barricaded.  |       |          |     |
| Carpet is secure and intact on walking surfaces and stairs as appropriate.   |       |          |     |
| Elevator is maintained by service vendor at regular intervals (if applicable).   |       |          |     |
| Staff refrigerator contains only staff food; containers are labeled and dated.   |       |          |     |
| Refrigerator and freezer including ice machines are cleaned once a month or more frequently as needed. Temperature is checked, logged, and initialed each day. |       |          |     |
| Microwaves and sinks are clean.  |       |          |     |
| Nothing is stored under sinks except cleaning products.  |       |          |     |
| Hand washing facilities are readily available and stocked (soap or waterless soap, paper towels).  |       |          |     |
| Staff are aware of the procedure for reporting an on-the-job accident.   |       |          |     |
| Staff understand where to access Policies and Procedures online.   |       |          |     |

| island health care       | island hospice | THAGroup | independent life at home | ideal aging |
|--------------------------|----------------|----------|--------------------------|-------------|
| Corrective Action:       |                |          |                          |             |
|                          |                |          |                          |             |
|                          |                |          |                          |             |
| Follow Up:               |                |          |                          |             |
|                          |                |          |                          |             |
|                          |                |          |                          |             |
| Coordinating Council Act | tion:          |          |                          |             |
|                          |                |          |                          |             |
|                          |                |          |                          |             |
| Next Survey Due:         |                |          |                          |             |

Refer to the <u>Management of Environmental Safety policy</u> for more information.