

Site:

Program:

No Sections	
1. Are test strips within the expiration date or, when opened, within the revised expiration date per manufacturers' instructions?	<input type="checkbox"/> N/A
Compliant? <input type="radio"/> Yes <input type="radio"/> No	Num: _____ Den: _____
IC.06.01.01 EP 3 - The hospital implements activities for the surveillance, prevention, and control of health care–associated infections and other infectious diseases, including maintaining a clean and sanitary environment to avoid sources and transmission of infection, and addresses any infection control issues identified by public health authorities that could impact the hospital.	
Corrective Action:	
Notes:	
2. Determine if the test strip manufacturer requires a quality control process when initially opening a container of test strips. If quality control is required, does documentation support this process was followed for all open containers of test strips?	<input type="checkbox"/> N/A
Compliant? <input type="radio"/> Yes <input type="radio"/> No	Num: _____ Den: _____
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Corrective Action:	
Notes:	
3. Is there evidence that the process for checking the disinfectant for efficacy is being followed in accordance with the organization's policy and manufacturer's instructions for use?	<input type="checkbox"/> N/A
Compliant? <input type="radio"/> Yes <input type="radio"/> No	Num: _____ Den: _____
IC.06.01.01 EP 3 - The hospital implements activities for the surveillance, prevention, and control of health care–associated infections and other infectious diseases, including maintaining a clean and sanitary environment to avoid sources and transmission of infection, and addresses any infection control issues identified by public health authorities that could impact the hospital.	
Corrective Action:	
Notes:	
4. Ask staff to describe the process to rinse the device after disinfection. Review the policy and manufacturer's instructions for use. Do manufacturer's instructions for use match the process, as described?	<input type="checkbox"/> N/A
Compliant? <input type="radio"/> Yes <input type="radio"/> No	Num: _____ Den: _____
IC.06.01.01 EP 3 - The hospital implements activities for the surveillance, prevention, and control of health care–associated infections and other infectious diseases, including maintaining a clean and sanitary environment to avoid sources and transmission of infection, and addresses any infection control issues identified by public health authorities that could impact the hospital.	
Corrective Action:	
Notes:	
5. After sterilization or high-level disinfection, are items stored to maintain sterility and prevent contamination and damage?	<input type="checkbox"/> N/A

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Compliant? <input type="radio"/> Yes <input type="radio"/> No	Num: _____ Den: _____
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Corrective Action:	
Notes:	
6. Does the organization ensure that the time frame for all devices that have undergone high level disinfection does not exceed the manufacturer’s specified maximum time that can elapse before reprocessing? <input type="checkbox"/> N/A	
Compliant? <input type="radio"/> Yes <input type="radio"/> No	Num: _____ Den: _____
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Corrective Action:	
Notes:	
7. Does reprocessing of single-use devices comply with the organization's policy and manufacturers' instructions for use? <input type="checkbox"/> N/A	
Compliant? <input type="radio"/> Yes <input type="radio"/> No	Num: _____ Den: _____
IC.06.01.01 EP 3 - The hospital implements activities for the surveillance, prevention, and control of health care–associated infections and other infectious diseases, including maintaining a clean and sanitary environment to avoid sources and transmission of infection, and addresses any infection control issues identified by public health authorities that could impact the hospital.	
Corrective Action:	
Notes:	
8. Are sterile supplies stored in a designated clean area? <input type="checkbox"/> N/A	
Compliant? <input type="radio"/> Yes <input type="radio"/> No	Num: _____ Den: _____
IC.06.01.01 EP 3 - The hospital implements activities for the surveillance, prevention, and control of health care–associated infections and other infectious diseases, including maintaining a clean and sanitary environment to avoid sources and transmission of infection, and addresses any infection control issues identified by public health authorities that could impact the hospital.	
Corrective Action:	
Notes:	
9. In areas designed to control airborne contaminants (such as biological agents, gases, fumes, dust), does the ventilation system provide the appropriate pressure relationships, air-exchange rates, and filtration efficiencies? Note: Endoscopy reprocessing rooms must be negative in relationship to adjacent areas. To determine appropriate ventilation, perform a tissue test near the bottom of the door to confirm ventilation is appropriate. Review the last year's air balance test reports for the room to confirm the room meets requirements. <input type="checkbox"/> N/A	
Compliant? <input type="radio"/> Yes <input type="radio"/> No	Num: _____ Den: _____

NPG.05.02.01 EP 1 - The hospital develops and implements protocols for high-consequence infectious diseases or special pathogens. The protocols are readily available for use at the point of care and address the following: - Identify: Procedures for screening at the points of entry to the hospital for respiratory symptoms, fever, rash, and travel history to identify or initiate evaluation for high-consequence infectious diseases or special pathogens - Isolate: Procedures for transmission-based precautions - Inform: Procedures for informing public health authorities and key hospital staff - Required personal protective equipment and proper donning and doffing techniques - Infection control procedures to support continued and safe provision of care while the patient is in isolation and to reduce exposure among staff, patients, and visitors using the hierarchy of controls - Procedures for managing waste and cleaning and disinfecting patient care spaces, surfaces, and equipment Note 1: Points of entry may include the emergency department, urgent care, and ambulatory clinics. Note 2: See the Glossary for a definition of hierarchy of controls.

Corrective Action:

Notes:

10. In the location where high-level disinfection is performed, are environmental controls implemented in accordance with the manufacturer's instructions for use of the chemical disinfectant (e.g. ventilation, appropriate number of air changes, vapor control hood and filter system)? N/A

Compliant? Yes No Num: _____ Den: _____

PE.02.01.01 EP 4 - The hospital develops and implements policies and procedures to protect patients and staff from exposure to hazardous materials. The policies and procedures address the following: - Minimizing risk when selecting, handling, storing, transporting, using, and disposing of radioactive materials, hazardous chemicals, and hazardous gases and vapors - Disposal of hazardous medications - Minimizing risk when selecting and using hazardous energy sources, including the use of proper shielding - Periodic inspection of radiology equipment and prompt correction of hazards found during inspection - Precautions to follow and personal protective equipment to wear in response to hazardous material and waste spills or exposure Note 1: Hazardous energy is produced by both ionizing equipment (for example, radiation and x-ray equipment) and nonionizing equipment (for example, lasers and MRIs). Note 2: Hazardous gases and vapors include but are not limited to ethylene oxide and nitrous oxide gases; vapors generated by glutaraldehyde; cauterizing equipment, such as lasers; waste anesthetic gas disposal (WAGD); and laboratory rooftop exhaust. (For full text, refer to NFPA 99-2012: 9.3.8; 9.3.9)

Corrective Action:

Notes:

11. If a vapor control filter system is used, review the last year's records for filter replacement. Were filters replaced in accordance with manufacturer's recommendations? N/A

Compliant? Yes No Num: _____ Den: _____

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Corrective Action:

Notes:

Staff Competency

12. Review staff education files of one-four individuals who perform high-level disinfection. Does documentation include education and competence assessment of the high-level disinfection process being performed, including specifics for the item being disinfected and the disinfectant being used? Was competence assessment documented during orientation and once every three years, or more frequently as required by hospital policy? N/A

Compliant? <input type="radio"/> Yes <input type="radio"/> No	Num: _____ Den: _____
<p>HR.11.03.01 EP 1 - Staff participate in ongoing education and training to maintain or increase their competency and, as needed, when staff responsibilities change. Staff participation is documented.</p> <p>HR.11.04.01 EP 1 - Staff competence is initially assessed and documented as part of orientation and once every three years, or more frequently as required by hospital policy or in accordance with law and regulation.</p>	
Corrective Action:	
Notes:	
Hazardous Materials	
13. Is appropriate personal protective equipment (PPE) used per the organization's policy when cleaning and disinfecting equipment? <input type="checkbox"/> N/A	
<i>Instructions: Ensure that the manufacturers' instructions for use of PPE for the disinfectant are being followed.</i>	
Compliant? <input type="radio"/> Yes <input type="radio"/> No	Num: _____ Den: _____
<p>IC.06.01.01 EP 3 - The hospital implements activities for the surveillance, prevention, and control of health care–associated infections and other infectious diseases, including maintaining a clean and sanitary environment to avoid sources and transmission of infection, and addresses any infection control issues identified by public health authorities that could impact the hospital.</p>	
Corrective Action:	
Notes:	
14. Ask staff to describe the process to follow in the event of a spill. Can staff describe the process to follow immediately post-spill, including whom to notify and how (e.g. notify emergency spill team by calling #5555)? <input type="checkbox"/> N/A	
Compliant? <input type="radio"/> Yes <input type="radio"/> No	Num: _____ Den: _____
<p>NPG.05.02.01 EP 2 - The hospital develops and implements education and training and assesses competencies for staff who will implement protocols for high-consequence infectious diseases or special pathogens.</p>	
Corrective Action:	
Notes:	
15. Ask staff to locate the Safety Data Sheet for the chemical disinfectant in use. Can staff locate this information without difficulty or delay? <input type="checkbox"/> N/A	
Compliant? <input type="radio"/> Yes <input type="radio"/> No	Num: _____ Den: _____
<p>PE.02.01.01 EP 2 - For managing hazardous materials and waste, the hospital has the permits, licenses, manifests, and safety data sheets required by law and regulation.</p>	
Corrective Action:	
Notes:	
16. Ask staff to locate the nearest eyewash station, if required. Can the eyewash be reached within 10 seconds/55 feet, with an unobstructed path? <input type="checkbox"/> N/A	
Compliant? <input type="radio"/> Yes <input type="radio"/> No	Num: _____ Den: _____

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Corrective Action:	
Notes:	
17. Review documentation of eyewash checks for the last month. Does documentation include weekly checks in accordance with policy? <input type="checkbox"/> N/A	
Compliant? <input type="radio"/> Yes <input type="radio"/> No	Num: _____ Den: _____
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Corrective Action:	
Notes:	
18. Observe the use of personal protective equipment (PPE) when staff handles the high-level disinfectant chemical. Is the use of PPE in accordance with the manufacturer's instructions for use? <input type="checkbox"/> N/A	
Compliant? <input type="radio"/> Yes <input type="radio"/> No	Num: _____ Den: _____
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Corrective Action:	
Notes:	
Disinfectant Use	
19. Are disinfectants within the expiration date or, when opened, within the revised expiration date per manufacturers' instructions? <input type="checkbox"/> N/A	
Compliant? <input type="radio"/> Yes <input type="radio"/> No	Num: _____ Den: _____

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Corrective Action:

Notes:

20. Determine if the disinfectant manufacturer has defined a minimal effective temperature or recommended temperature range for the disinfectant. If so, does documentation indicate a process to ensure the disinfectant temperature is appropriate? N/A

Compliant? Yes No

Num: _____ Den: _____

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Corrective Action:

Notes:

21. Ask staff to describe the minimal soak/cycle time for the disinfectant used and the device being disinfected. Review disinfection documentation. Does the discussion and review of documentation indicate the appropriate soak/cycle time is implemented? N/A

Compliant? Yes No

Num: _____ Den: _____

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Corrective Action:

Notes:

22. Are containers for high-level disinfectants properly labeled when removed from the original container? N/A

Instructions: Labels should identify the contents and hazard warnings. Review appropriate policy for additional labeling requirements.

Compliant? Yes No

Num: _____ Den: _____

PE.02.01.01 EP 3 - The hospital labels hazardous materials and waste. Labels identify the contents and hazard warnings. Note: The Occupational Safety and Health Administration’s Bloodborne Pathogens and Hazard Communications Standards and the National Fire Protection Association provide details on labeling requirements.

Corrective Action:

Notes:

23. Is the location and use of the high-level disinfecting system and chemicals safe for patients and staff? N/A

Instructions: Examples: Are the surfaces stable to prevent spillage or tipping; are chemicals located at a height to promote worker safety; is cleaning and disinfection performed outside the immediate proximity to the patient/treatment area; are chemicals located in a secured area and not accessible to patients or visitors?

Compliant? Yes No

Num: _____ Den: _____

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Corrective Action:

Notes: