Environment of Care Checklist (2002)

Planning & Design	YES	NC
Are existing and newly constructed facilities designed in accordance with the National Fire Protection Association's Life Safety Code?		
Are NFPA LSC standards used in the design process for both new construction and renovation?		
Implementation Are documented management plans in place for the following? Safety Management Security Management Hazardous Materials Hazardous Waste Emergency Preparedness Life Safety Management Medical Equipment Utility Systems		
Evaluation Is all of the following documentation on file? An inventory of all medical equipment. Calibration of all equipment medical equipment before initial use and at least annually thereafter. Preventive maintenance and inspection records. Performance testing data on all sterilizers used. Inspection and testing of critical utility systems.		
Orientation and Training Has the facilities staff, including students and contract employees, been oriented and trained in the policies and procedures in the Safety & Health Manual and also their responsibilities under Environment of Care guidelines?		
All safety policies and procedures. Designated Safety Representative who is the point of contact for the clinic.		
Ensuring departmental/unit compliance with all applicable safety and health policies and procedures. Providing employees the time to participate in orientation and annual		
refreshers. Communicating in a timely manner with employees, students, visitors and contract workers all safety and health issues that have been forwarded for distribution.		

	YES	NO
Notifying supervisor of noncompliance or potential noncompliance issues regarding safety and health policies and procedures. Use of fire extinguishers. Facility fire alarm systems. Primary and alterative emergency exits. Location and use of emergency shutdown switches/controls. Use of the incident reporting system. Hazard Communication Standard.		
Environment Note: Even though traditionally the majority of the requirements listed below come under the Safety and Facility Departments responsibility, the Medical and Environmental Departments should also take an active role (even if its only on an awareness level) to help ensure that their facility is safe.	_	
Building & Grounds Are the grounds neat, clean, functional and well lit? Are buildings accessible to the physically and visually impaired?		
Exiting Are hallways leading from occupied rooms or spaces to exits at least 3'-8" in clear width, with a minimum clear headroom of 7'-6"?	_	
Do stairs used in new construction have a maximum step riser height of 7", and a minimum tread depth of 11"?		
Do stairs used in existing facilities have a maximum riser of 7.5" and a minimum tread of 10"?		
There are no stairs with 3 steps (risers) or less in hallways leading from occupied rooms or spaces to an exit. Note: Such level changes (of 21" or less) are made with ramps.		
The maximum slope of ramps in hallways leading from occupied rooms to an exit is 1 unit vertically for each 10 units horizontally. Also the slope and direction of ramps does not change between landings.		
No door occurring between a patient care area and an exit is narrower than 2'-10" in clear width. No single door leaf is wider than 4'-0".		

	YES	NO
The floor on both sides of doors occurring between an occupied space and an exit is level and at the same elevation for a distance at least equal to the widest single door leaf.		
All doors occurring between occupied spaces and exits are capable of swinging to a full 90 degree opening. (Sliding door with emergency out-swing function are acceptable).		
Doors at or into exits/exit enclosures swing in the direction of exit travel.		
During its swing no door blocks more than one half of the required corridor width (at least 1'-10" clear remains unobstructed), and when fully open blocks no more than 3.5" of a stair landing or 7" of corridor width.	_	
No door can be locked to interfere with exiting occupied spaces or the overall facility. Automatic and/or delayed release devices are permitted (activated by alarm system or occupants) if backed by emergency power and fail open function.		
Doors separating rooms from exit corridors or occurring at dividing walls with the exit corridor itself are equipped with closers, and only held open by means of a device with automatically release and/or close, the door in event of smoke of fire detection by the alarm system Such hold open devices include a release function in event of power failure. NO MANUAL BLOCKING DEVICES OR OBJECTS ARE USED TO OVERRIDE CLOSERS ON DOORS INVOLVED WITH THE EXIT CORRIDOR.		
No required exit requires travel through spaces that contain combustible materials or are subject to locking from either side of door.		
The direction of travel to an exit from all portions of the facility is obvious.		
Exit signs are clearly illuminated at all times.		
Dead end corridors are limited to 20 feet in length (all room doors are within 20 feet of a point from which there are two directions of travel to different exits).		

	YES	NO
There is sufficient lighting at all times (with emergency power back- up) in all exit corridors to make the direction and path of travel safe to traverse (avoid tripping/stumbling/bumping. etc.).		
The emergency lighting in corridors and exits is tested at least semi- annually.		
Emergency Power There are at least two separate sources of power: Regular source supplying all power under normal conditions.		
Emergency source supplying power to life safety related fixtures and devices (exit lighting, life support/monitoring, alarm systems, etc.) only during outages/interruptions in normal power.		
Emergency power is provided by a reliable source (second power company, continuously recharged batteries, fuel powered generator). Where batteries are used, they may be part of a central system or self contained/attached to each fixtures/piece of equipment?		
Emergency power is activated automatically within 10 seconds of power failure, and will last for at least 90 minutes under normal load. Power will automatically transfer back to the regular source when normal power is restored and stabilized.	_	
When generator sets are used as the emergency power source, they are enclosed and/or equipped to assure the engine jacket does not drop below 50 degrees Fahrenheit.		
Generator starting batteries have sufficient capacity for 60 seconds of continuous cranking.		
Generators are not in the same location as components of normal power (transformers, breaker panels).		
An alarm annunciator with audio and visual alert signals is located at a continuously staffed position.		
There is a written test record of all tests and maintenance related to the emergency power system. <i>Generator sets are tested and run under load at least 30 minutes every 30 days (once per month)</i> .		

	YES	NO
Storage batteries are inspected weekly, and maintained in full compliance with manufacturers specifications.		
All defects and problems with generator set and storage batteries are corrected/remedied immediately.		
Medical Gases All medical gases in use or storage are non-flammable.		
If the sole source of medical gas is a system of cylinders attached directly to an administering device, two cylinders of each gas provided must be attached. <i>Cylinders not in service are stored in a vented room dedicated solely for that use.</i>		
<u>Central Medical Gas Supply Systems</u> There is a pressure regulator indicating status of all cylinders attached to the manifold for each gas supplied.		
Medical gas supply systems are located in a room dedicated solely for that use.		
Only full or empty medical gas cylinders are stored in the medical gas supply room (no other materials permitted).		
The door to the medical gas supply room does not open directly on anesthetizing locations.		
Medical gas storage and supply system areas are vented through louvers or a mechanical supply system with 100% exhaust.		
Medical gas cylinder locations are protected to prevent ambient temperatures from exceeding 130 degrees Fahrenheit		
Exterior medical gas supply and storage areas are provided with locked doors or gates.		
The method and fitting for medical gas cylinders and administering devices are gas specific.		
Each inhalation-gas supply system includes two cylinders (or banks of cylinders) each capable of supplying at least one full day's operation which alternate in service.		

	YES	NO
Medical gas supply systems include sensors to monitor the status of each gas provided, and to provide an audible and non-cancelable visual indication of problem conditions. <i>The alarm annunciator panel(s) is located at a position that is continually staffed.</i>	_	
Compressed Medical Air System (if provided) Two or more oil free compressors are provided which are equipped to operate simultaneously or independently with interruption of air supply.	_	
The compressors are located in a designated mechanical equipment area.		
The air compressors are equipped with emergency power.		
The compressor system is equipped with an alarm system monitoring air quality and other pertinent conditions.		
Location and warning signals are provided as required for central medical gas systems.		
The air intake is outdoors at least 10 feet from any door, window, other intake, or opening in the building.		
The air intake is turned down and screened to avoid entrance of airborne contamination.		
Central Medical Vacuum System (if provided) Two or more vacuum pumps are provided which are equipped to operate simultaneously or independently without interruption of medical vacuum.		
The vacuum pump system is equipped with emergency power.		
The exhaust from the vacuum system is discharged outdoors.		
Construction/Detail All areas used for general storage, boiler or furnace rooms, janitor closets, maintenance shops and kitchens are fully enclosed rooms including a rated door assembly with closer. Exception: Areas equipped with automatic fire extinguishing system need not include rated door.		

	YES	NO
All areas used for storage of materials liable to burn rapidly or where poisonous fumes or explosions are possible, must be enclosed with rated construction and be provided with automatic extinguishing system.		
The facility is provided with an alarm system activated by smoke and fire detectors, as well as manual pull fire alarm panels.		
Occupants are notified of smoke and/or fire detection automatically, without delay, with an internal audible alarm.		
The alarm system is arranged to automatically transmit a signal to a fire dispatching authority and supplied with emergency power.		
Portable fire extinguisher are provided and located so that no point in the facility is more than 75 feet from the nearest extinguisher.		
Mounting heights and extinguisher weight are manageable by all employees.		
Portable space heating devices are not used.		
Vertical openings between floors, such as vertical conveyors and rubbish/linen chutes, are separated form other areas at every floor by fire rated swinging doors (or room enclosures with rated doors).		
All supervisory personnel have access to a written plan for protection of all occupants in the event of a fire and for their evacuation to areas of refuge and from the building when necessary.		
A copy of the plan is constantly available from the telephone operator's position.		
A simple floor plan, showing evacuation routes is posted in prominent locations on each floor.		
Gurneys and beds for patients use are equipped with caster/wheels the type and size necessary to allow easy mobility under evacuation conditions.		
Smoking is prohibited in patient care areas or where flammable material or medical gases are stored and/or used. Such areas have "NO SMOKING" signs posted.		

	YES	NO
All areas where smoking is permitted provide non-combustible ashtrays and metal containers with self-closing cover devices.		
Wastebaskets and other waste containers are of non-combustible materials.		
Fire Protection/Life Safety Are latches on all fire doors in good working condition?		
Are there self-closing devices on all smoke barrier doors?		
Are smoke barrier doors in good working condition?		
Are electrical receptacles and plugs hospital grade? (Usually identified by green dot).		
Fire extinguishers are charged and monthly checks are documented on an attached card.		
At least 18" of clearance is maintained between the top self of storage units and the ceiling or sprinkler heads.		
Items that may spill are stored below eye level.		
Heavy items are stored on lower shelves.		
Flammable liquids are stored in approved containers.		
Flammable liquids are stored in approved cabinets not exceeding the storage capacity of the cabinet.		