

General Hygiene Checklist

Health Services

CLEAN UTILITY / CENTRAL SUPPLY / STORAGE

Is the covered linen cart clean?

☐ Yes☐ No☐ NA

Is the clean linen cart kept on the solid surface on bottom shelf

☐ Yes☐ No☐ NA

Is the sink storage area well maintained and empty?

☐ Yes☐ No☐ NA

Is the Garbage cans/ waste basket clean and empty?

☐ Yes☐ No☐ NA

Is the Ceiling tiles clean and dry without any stains?

☐ Yes☐ No☐ NA

Is the floor clean?

☐ Yes☐ No☐ NA

Are the supplies stored atleast 6 inches above the floor?

☐ Yes☐ No☐ NA

Is the air intake vents and diffusers maintained clean?

Yes

No

NA

Is the section clean without any other stocks piling up?

Yes

No

NA

COMPLETION

Any other additional comments

textarea

EMPLOYEE GENERAL KNOWLEDGE

Does the employee know the procedure for blood exposure?

Yes

No

NA

Does the Personnel can locate the following?

☐ Their infection Control Manual ☐ Their exposure Control Plan ☐ The blood spill kit ☐ Their spill kit for Cidex

Does the employees state the WHO's 5 moments of Hand hygiene

Yes

No

NA

Is the dust found in high places?

Yes

No

NA

Is the section free without any other stocks piling up?

Yes

No

NA

EMPLOYEE HAND HYGIENE COMPLIANCE

Names of the employees monitored

textarea

Are the sinks well stocked for the hand hygiene?

Yes

No

NA

Are the sinks available in all needed areas?

Yes

No

NA

Is the alcohol hand rubs well stocked?

Yes

No

NA

Is the alcohol hand rubs available in all patients rooms?

Yes

No

NA

Is the alcohol hand rubs placement compliant with safety measures?

Yes

No

NA

Is the hand hygiene/ hand washing performed by all the patients?

Yes

No

NA

Is the hand hygiene posters available in all places

Yes

No

NA

Does all the hand washing stations/ bathrooms have the hand soap?

Yes

No

NA

EMPLOYEE KITCHEN / BREAKROOM

Are the following items kept clean?

☐ Floors ☐ Horizontal and vertical surfaces ☐ Microwave oven ☐ Refrigerator ☐ Sink area

Is all the employee food dated properly and labeled?

Yes

No

NA

When the power is out of range, whether it is documented with corrective actions

Yes

No

NA

Is the section free without any other stocks piling up?

Yes

No

NA

GENERAL UNIT / NURSES STATION / MEDICATION ROOM

Is the whole unit clean without dust, clutter or debris?

Yes

No

NA

Are the following items stored and handled appropriately?

☐ Unsued patient equipments/supplies ☐ Medications ☐ Specimens ☐ Food ☐ Clean linen
☐ Dirty linen

Is the regular trash and biohazard trash kept seperately?

Yes

No

NA

Are the clean linen carts covered?

☐ Yes☐ No☐ NA

Does the linen carts kept in the solid bottom shelf?

☐ Yes☐ No☐ NA

Does the used needles and syringes disposed properly?

☐ Yes☐ No☐ NA

Expiry date supplies are present?

☐ Yes☐ No☐ NA

Is the infectious waste kept seperately in red bag or container

☐ Yes☐ No☐ NA

Are the clean items stored in soiled utility rooms?

☐ Yes☐ No☐ NA

Are the ceiling tiles well maintained?

☐ Yes☐ No☐ NA

Whether the expiry date checked for lab supplies?

☐ Yes☐ No☐ NA

Are the Sinks dry and leak proof?

☐ Yes☐ No☐ NA

Are the halls cluttered?

☐ Yes☐ No☐ NA

Is the respiratory hygiene available?

☐ Yes☐ No☐ NA

Is the restroom clean?

☐ Yes☐ No☐ NA

Is the trash basket overflowing?

☐ Yes☐ No☐ NA

Is the biohazard symbol present on the door of biomedical waste storage room?

☐ Yes☐ No☐ NA

Is the medication cart locked?

☐ Yes☐ No☐ NA

Make sure no artificial/ acrylic nails used. Also nails should not be more than 1/4 inch above finger

☐ Yes☐ No☐ NA

Is the Personal lotions used?

☐ Yes☐ No☐ NA

Is the refrigerator in the medication room clean and without ice?

☐ Yes☐ No☐ NA

Are there any expired products found (IV solutions, medications, reagents, nutritional supplement, sterile items, etc.)

Yes

No

NA

Is the section free without any other stocks piling up?

Yes

No

NA

ISOLATION ROOMS

Is the signage appropriate in all places?

Yes

No

NA

Is the supplies and PPE's available at all times?

Yes

No

NA

Is the trash and linen managed as per the policy?

Yes

No

NA

Is the proper PPE's used by the staff?

Yes

No

NA

Is the door closed as appropriate?

Yes

No

NA

Is the required negative pressure supplied?

Yes

No

NA

Is the patients family and patient advised on the isolation requirements?

Yes

No

NA

Is the patient transported with proper costume?

Yes

No

NA

Is the section free without any other stocks piling up?

Yes

No

NA

PATIENT ROOMS

Are the following items kept clean?

- ☐ Horizontal surfaces ☐ Trash cans/waste baskets ☐ Bathrooms ☐ Patient equipments
☐ Vertical surface ☐ Ceiling tiles ☐ Air intake vents ☐ Diffusers ☐ Furnitures(chairs, sleepers) ☐ Floors
☐ General Area ☐ High places ☐ IV pumps and poles ☐ Feeding pumps

Is the hand hygiene products available at all places?

Yes

No

NA

Are the soaps and paper towels present in every bathrooms

Yes

No

NA

Are the PPE's available as per the requirements?

Yes

No

NA

Does the sharp containers kept full?

Yes

No

NA

Is the foley catheters secured and hanging appropriately?

Yes

No

NA

Is the room pest free?

Yes

No

NA

Is the dirty linen and clean linen handled properly?

Yes

No

NA

Is the needles, syringes, medications kept away from the patients?

Yes

No

NA

Is the section free without any other stocks piling up?

Yes

No

NA

PATIENT SHOWER ROOM

Is the following items clean?

☐

Shower

☐

Shower room

☐

Walls and floors

☐

Ceiling tiles

☐

High places

Is the section free without any other stocks piling up?

Yes

No

NA

SOILED LINEN / DIRTY UTILITY ROOM

Is there a biohazard symbol on door of biomedical waste storage?

Yes

No

NA

Is the boxes stored 6 inches appropriately high off the floor?

☐ Yes☐ No☐ NA

Is the walls/floors cleaned properly?

☐ Yes☐ No☐ NA

Ceiling tiles are dry and without any damages?

☐ Yes☐ No☐ NA

Is the high places clean?

☐ Yes☐ No☐ NA

Is the section free without any other stocks piling up?

☐ Yes☐ No☐ NA