

# Social distancing plan template for workplaces checklist

## Health Services

### DIAGNOSTICS

Storage of medicines and administration

Yes

No

Na

Equipment and their functioning status

Yes

No

Na

Provision of reports

Yes

No

Na

### DISPENSARY

Availability of emergency tray

Yes

No

Na

Status of the emergency ward

Yes

No

Na

Availability of sufficient drug stock

Yes

No

Na

Stock book entry, daily expenditure, and entry verification

Yes

No

Na

Drug dispensing procedure

Yes

No

Na

Ambulance availability and functioning

Yes

No

Na

Daily log book verification

Yes

No

Na

## HOUSEKEEPING

Cleanliness of interior, exterior, and restrooms

Yes

No

Na

Waste collection and management

Yes

No

Na

Water supply and drainage clearance

Yes

No

Na

Pests/rodents control

Yes

No

Na

Electrical maintenance and backup

Yes

No

Na

Restroom maintenance and fittings

Yes

No

Na

Functioning of HVAC

Yes

No

Na

Cleanliness of utensils

Yes

No

Na

Timings of food supply

Yes

No

Na

Sanitization of kitchen and meal consumption areas

Yes

No

Na

Additional information

Images

UPLOAD

Images

UPLOAD

Inspectors Name/signature:

SIGNATURE

Inspection Date:

DATE

2017-01-01

## MEDICATION

Pharmacy check

Yes

No

Na

Availability of supportive staff

Yes

No

Na

## OPD

Reception and help desk

Yes

No

Na

Patient guidance, information regarding services, and doctor

Yes

No

Na

Stationary, prescription slips, registration forms

Yes

No

Na

Counters and display

Yes

No

Na

Complaint box and grievance redressal

Yes

No

Na

Chambers of doctors, specialists, patient's sitting arrangement, patient disposal

☐ Yes☐ No☐ Na

Are all patient records properly maintained?

☐ Yes☐ No☐ Na

## OPERATING ROOMS

Sterilization of linens, instruments and equipment

☐ Yes☐ No☐ Na

Availability of staff, drugs, trays

☐ Yes☐ No☐ Na

Cleanliness, dustbins, water supply, etc

☐ Yes☐ No☐ Na

Status of mattress, sheets, linens

☐ Yes☐ No☐ Na

Ensuring regular rounds by a medical specialist

☐ Yes☐ No☐ Na

## WARDS

Maintenance of records

☐ Yes☐ No☐ Na

Adequate supportive staff

Yes

No

Na

Feedback from patients

Yes

No

Na