

PHYSICAL ENVIRONMENT SAFETY ROUNDS

Physical Environment Safety Rounds is covered by [Procedure Number S-08-007](#) in accordance with The Joint Commission.

Life Safety

- Are there any Space Heaters? [Procedure Number S-08-009](#).
- Proper Maintenance of Storage Rooms, such as 18 inches of clearance from ceiling/sprinkler heads. [Procedure Number S-08-015](#).
 - Rooms used as storage greater than 50 square feet must have an auto-/self-closer.
- Fire Extinguishers are located in their cabinets, have a tag attached, have not been recently used (and not replaced), and are accessible (not blocked). [Procedure Number LS-08-005](#).
 - Fire extinguishers closest to the MRIs are MRI safe (haven't been moved or switched).
 - Fire Alarm pull station access is not blocked.
- Egress pathways are kept clear to include stairwells. [Procedure Number S-08-043](#).
 - Exit lights are properly marked and illuminated.
 - Fire doors have positive latching
 - Emergency spotlights function
 - Fire doors are unobstructed.
 - There are no paper signs on Fire/Smoke Doors or Walls.
 - Hallways are kept clear.
 - Trash Cans (Size/Quantity) do not exceed Life Safety storage.
- Access to Med Gases is not blocked. Labeling on shut offs clearly identifies rooms. [Procedure Number HM-08-022](#).
- Decorations in Hospital Occupancy and Patient Care areas are in accordance with LSC. [Procedure Number LS-08-007](#).
 - There are no taped items to walls or doors.
 - No items are affixed to fire doors.
 - Paper signs are only in enclosed frames or university-sanctioned bulletin boards.
 - No open flames.
- Inventory of Alcohol-based Hand Sanitizer does not exceed allowable amounts; Dispensing units are mounted away from electrical outlets.
- Doors are not propped open.
- Sprinkler heads are clean and free of dust.
- Ceiling Tiles are in place, and not damaged.
- Fire penetrations have fire stopping in place; only one type of fire stopping material per penetration.

Hazardous Materials

- Eyewashes and Safety Showers are being checked weekly. [Procedure Number S-08-016](#).
- Proper procedures are being used for Sterilization. [Procedure Number HM-08-017](#).
- All Chemical Containers are properly labeled. [Procedure Number HM-08-018](#).
 - When transferred to a different container, the label follows GHS protocols.
 - When not in original container, labels contain appropriate hazard information.
- Gas Cylinders are stored properly/securely and clearly labeled. [Procedure Number HM-08-003](#).
 - No more than 12 small O2 cylinders are in one smoke compartment (unless otherwise rated for compressed gas storage).
 - E-cylinders are segregated "full," "partially full" and "empty."
- Red Biohazard waste is stored in an area only accessible to employees (doors should be locked).
- Waste streams are being utilized (i.e. regular trash in regular trash and biohazard in biohazard).
- Sharps containers are not full.

- Medication is properly disposed of and not left unsecured after use [Policy#3364-133-34](#).

Medical Equipment Management

- Power Strips are approved and used in a safe manner that does not present a fire hazard concern (such as daisy chaining or being used for inappropriate devices like a fridge that exceed the capabilities of the power strip). [Procedure Number S-08-037](#).
- Any broken or malfunctioning equipment is properly tagged. [Procedure Number S-08-039](#).
- Cords on all electrical equipment are in good shape (no fraying or wires showing).
- All medical equipment has been inspected by Biomed and has a dated/initialed inspection sticker.

Infection Control

- Airborne Isolation Cases adhere to the Respiratory Protection Program. To include a PAPR cart outside of room, and only authorized individuals wearing N95s. [Procedure Number S-08-034](#).
- Infection Control Permits are posted where needed. And followed. [Procedure Number LS-08-008](#).
- No food should be around patient care areas, (i.e. nurses station, lab table tops, medication carts).
- Syringes are not left lying around nurse's station, patient rooms, or any area accessible by patients, visitors or staff who do not need access. Needles should be in a locked area.
- Health care workers wear PPE (Personal Protective Equipment) during exposure prone procedures.
- Needles are never recapped after patient use. And are disposed of immediately after use. Clean Needles are locked and secured.
- Refrigerators are clearly labeled as to allowable contents (i.e. patient food only, medications only, etc.).
 - Staff food should be stored separate from patient nutrition supplies.
 - Food and medications are kept in separate refrigerators.
 - Chemicals and food should be stored separately.
 - Food and specimens should be stored separately.
- No items that could ever contact a patient are stored under sinks.

General Safety

- No trip hazards are present
- No slip and fall hazards are present