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| --- | --- | --- | --- |
| **Sl No** | **Assessment Criteria** | **Not Met [Nc =0]**  **Partial Met [Pc=5]**  **Fully Met [C=10]** | **Remarks** |
| 1 | Staff Awareness On Departmental Policies And Procedures |  |  |
| 2 | Staff Awareness On Organogram |  |  |
| 3 | Staff Awareness On Job Description |  |  |
| 4 | Training Records Of Staff Maintained |  |  |
| 5 | Staff Awareness On NABH/Vision/Mission/Quality Policy |  |  |
| 6 | Staff Awareness On Code Red |  |  |
| 7 | Staff Awareness On Code Blue |  |  |
| 8 | Staff Awareness On Code Pink |  |  |
| 9 | Staff Awareness On Safety Precautions Followed During Patient Transfer |  |  |
| 10 | Staff Awareness On Hand Hygiene |  |  |
| 11 | Staff Awareness On Barrier Precautions |  |  |
| 12 | Staff Awareness On Patient Placement |  |  |
| 13 | Staff Awareness On Cleaning And Disinfection Of Environment And Equipment |  |  |
| 14 | Staff Awareness On Waste Management |  |  |
| 15 | Staff Awareness On Management Of Blood & Body Fluid Exposure |  |  |
| 16 | Staff Awareness On Management Of Used Linen |  |  |
| 17 | Staff Awareness On Respiratory Hygiene |  |  |
| 18 | Staff Awareness On Safe Injection & Infusion Practices |  |  |
| 19 | Staff Awareness On Safe Handling Of Sharp Instruments |  |  |
| 20 | Staff Awareness On Routine Cleaning, Decontamination, And Maintenance |  |  |
| 21 | Staff Awareness On Decontamination Of Ambulance Equipment |  |  |
| 22 | Staff Awareness On Transport Of Patients With Communicable Diseases |  |  |
| 23 | Staff Awareness On Categories Of Triage? |  |  |
| 24 | Staff Awareness On Policy On Non Availability Of Beds |  |  |
| 25 | Staff Awareness On Protocol In Treating Patients Which Are Not Included In Hospital Scope Of Services? |  |  |
| 26 | Staff Awareness On Patients’ Rights & Responsibilities? |  |  |
| 27 | Staff Awareness On Employees Rights & Responsibilities? |  |  |
| 28 | Staff Awareness On Spill Management Protocol |  |  |
| 29 | Signage Present Wherever Appropriate |  |  |
| 30 | Fire Exit Signage |  |  |
| 31 | Sufficient Staff Available |  |  |
| 32 | Duty Roster |  |  |
| 33 | All Are BLS Trained Staff |  |  |
| 34 | Hand Hygiene Poster Present |  |  |
| 35 | BMW Poster Present |  |  |
| 36 | IPSG Goals Poster Present |  |  |
| 37 | Clean Surfaces Of Equipment |  |  |
| 38 | Colour Coded Bins Present & Used Appropriately |  |  |
| 39 | Alcohol Rub/ Waste Bins Near The Wash Basin Present |  |  |
| 40 | Bio Hazard Symbols/Poster On BMW? |  |  |
| 41 | Organogram Displayed |  |  |
| 42 | Emergency Manual Is Present In The Emergency |  |  |
| 43 | System Of Triage Is Followed |  |  |
| 44 | Quick References Available(Poster) For Triage |  |  |
| 45 | Any Mock Drill For Triage? |  |  |
| 46 | Scope Of Services Displayed |  |  |
| 47 | 24\*7 Ambulance Facility Available |  |  |
| 48 | Consent Form Explained And Signed Wherever Needed. |  |  |
| 49 | Emergency Stock Maintained Every Shift & Documented |  |  |
| 50 | Disaster Cupboard Checked And Kept Ready |  |  |
| 51 | Fire Extinguisher Available |  |  |
| 52 | Race, Pass Signage Displayed |  |  |
| 53 | High Risk Medications & Lasa Drugs Stored Properly |  |  |
| 54 | Allergy Status Monitored & Documented |  |  |
| 55 | Incidents Are Identified & Reported |  |  |
| 56 | Corrective And Preventive Measures Are Undertaken |  |  |
| 57 | Medication Prescription In Capitals |  |  |
| 58 | Return To The Emergency Department Within 72 Hours With Similar Presenting Complaints Is Identified & Documented |  |  |
| 59 | Staff Awareness On MLC Protocol |  |  |
| 60 | Staff Awareness On Brought-In Dead Protocol |  |  |
| 61 | Initial Assessment Done Within Time Frame |  |  |
| 62 | Reassessment Done Within Timeframe |  |  |
| 63 | Nurse-Patient Ratio Documented |  |  |
| 64 | Staff Attending Training Sessions |  |  |
| 65 | Medical Record Is Signed, Dated And Timed, Named |  |  |
| 66 | Medications Are Stored In A Clean, Safe & Secure Environment |  |  |

Signature Of The Auditor Signature Of The Auditee

Name: Name:

Date & Time: Date & Time: