

## JOINT INSPECTION CHECKLIST

Hospital/Institution: Women and Children Hospital Kuala Lumpur

Document No : \_\_\_\_\_

User Area:

Calendar Week :

[illegible]

Notes:

Inspected by Hospital / Institution	Inspected by Concession Company/ Data Verification Officer 1(DVO1)
Signature: Name:	Signature: Name:
Data Inspected:	

  

Data Verification Officer2(DVO2)	Signature:
	Name:
	Date:

Quality Rating for Items Inspected		
Rating	Total	Deduction Formal Rating
NO(N)		Unsatisfactory
YES(Y)		Satisfactory
STUBBORN STAIN(S)		Unsatisfactory
Grand Total		

NO (N)	Visible any surface Stains, fungus, Litter, Blocked Drains
S	Bad odour
	Stubborn Stain -The condition approval must be produced by the company and shall acceptable by Hospital Directors

Remarks:1)Strain cause codes beside every unsatisfactory rating.2)QAP Cause Code:|QH1 –Surface strain |QH2-Dust,QH3-Litter,QH4-Bad Odour,QH5-Cobweb,QH6-Algae/Fungus,QH7-Blocked Drains,QH8-FEMS Related,QH9-Permanent Strain,QH10-Manpower,QH11-Equipment Tools,QH12-Uncontrolled Environment,QH13-Vendor Related,QH14-Vandalism.