

Environment of Care Rounding Tool

Developed by the University of Nebraska Medical Center

Last Updated: December 2023

Location:	Contact Person:				
Date:					
This area preforms:	Y	N	N/A	Comments:	
Device Transport and send to SPD					
High level disinfection					
Sterilization					
Other:					
General patient/visitor areas	Y	N	N/A	Comments:	ACTION PLAN
Area appears clean					
Furniture free from cracks or tears					
Respiratory etiquette (sign posted, masks and sanitizer available)					
No touch waste receptacles and tissues available					
Environment of care-Patient care areas	Y	N	N/A	Comments:	ACTION PLAN
Walls, ceiling, floors, furniture are free from penetrations					
Ceiling tiles free from signs of moisture					
Walls, ceiling, floors, furniture appear clean					
Patient bathroom clean					
Food and drink stored in designated locations.					
Nothing stored within 3 foot sink radius (splash zone)					
Nothing stored beneath the sink					
Nothing stored on windowsills					
Sharps container secured and less than 3/4 full					
All sharps are disposed of in a puncture-resistant sharps container.					
Wall mounted patient care equipment without dust					
Surfaces free from dust					

<https://innovateipc.org/ipc-support-center/>



Environment of care-Patient care areas	Y	N	N/A	Comments:	ACTION PLAN
Clean and used shared medical devices stored separately					
Staff can speak to process for clean vs dirty equipment per policy					
Items are within date					
Refrigerators/Freezer appear clean, and temperature logs up to date					
<u>Incorrect temperatures are documented with actions taken:</u>					
Freezers: > or = to 32° F					
Medications: 36-46° F					
Food and Drink: 36-45° F					
Specimens: 36-46° F					
Blood: 34-43° F					
Correct items in each refrigerator (only food in food refrigerator, only meds in med refrigerator etc.)					
Patient and staff food in stored separate refrigerators					
Patient food labeled					
Hazardous materials labeled/stored correctly (original/typed labels with the contents defined)					
Biohazard trash contained and not overfilled					
Soiled linen contained and not overfilled					
All medications, sharps, or syringes are secured					
Other					
Environment of Care- Non-patient care areas	Y	N	N/A	Comments:	ACTION PLAN
Carpet/flooring clean					
Surfaces free from dust					
Food and drink in designated areas					
Other					

<https://innovateipc.org/ipc-support-center/>



Environment of Care- storage areas	Y	N	N/A	Comments:	ACTION PLAN
Clean storage area free from outer shipping packs (corrugated cardboard)					
Linens covered, stored in limited access area, solid bottom cart					
All items are within date					
Surfaces free from dust					
Clean storage free from used shared medical equipment					
Carts have solid bottoms					
Floors and walls clean					
No supplies stored on the floor or windowsills					
Supplies at least 6" from floor and 18" from ceiling					
Nothing stored beneath the sink					
No supplies stored in bathrooms, soiled utility rooms					
Other					
Soiled Storage	Y	N	N/A	Comments:	ACTION PLAN
Soiled storage room free of patient supplies or sterile supplies					
Soiled linen bagged and labeled appropriately					
Biohazard waste contained appropriately					
Floors and walls appear clean					
Sinks, hoppers, drains appear clean					
Hand hygiene available					
Other					
Standard and Transmission Based Precautions	Y	N	N/A	Comments:	ACTION PLAN
Hand hygiene supplies not expired, readily accessible and hospital approved					
Hand hygiene done appropriately if observed					

<https://innovateipc.org/ipc-support-center/>



Standard and Transmission Based Precautions	Y	N	N/A	Comments:	ACTION PLAN
Gowns, gloves, face masks, and eye protection is available and readily accessible to HCP.					
Gowns and gloves are not used for more than one patient					
Staff can speak to and demonstrate appropriate isolation procedures					
Cleaning	Y	N	N/A	Comments:	ACTION PLAN
Approved disinfectant (i.e., wipes) available and not expired in every patient care area					
Staff can cite disinfectant contact times					
Reusable supplies (Blood pressure cuffs, thermometer...) are wiped between patient use					
Point of Care Items wiped with appropriate disinfectant					
Patient curtains clean, intact, and replaced regularly per policy					
glucometer test strips not expired and dated					
Medication Preparation	Y	N	N/A	Comments:	ACTION PLAN
Medication prep area clean					
All medications, sharps, or syringes are secured					
All medications and solutions are within date					
Multi-dose vials are dated with 28-day expiration date unless the manufacturer specifies a different date					
Injections are prepared using aseptic technique in a clean area free from contamination with blood, body fluids or contaminated equipment.					
Sharps/needles have safety devices (IC 13)					
Single dose medications, needles, syringes, and tubing are used for only one patient					
Meds are entered with a new needle & new syringe, even when obtaining additional doses for the same patient.					

<https://innovateipc.org/ipc-support-center/>



Medication Preparation	Y	N	N/A	Comments:	ACTION PLAN
Multi-dose vials to be used for more than one patient are kept in a centralized medication area and do not enter the immediate patient treatment area (e.g., operating room, patient room/cubicle).					
Additional Comments					

Additional resources:	
CDC environmental guidelines	https://www.cdc.gov/infectioncontrol/pdf/guidelines/environmental-guidelines-P.pdf
Dialysis rounding tool	https://www.cdc.gov/infectioncontrol/pdf/icar/dialysis.pdf
Ultrasound	https://www.ultrasoundinfectionprevention.org/
High Level Disinfection	https://sdapic.org/wp-content/uploads/2015/12/TJC-HLD-BoosterPak-Dec-2015.pdf
Sterilization and HLD toolkit	https://www.ascquality.org/ascqualitycollaboration/advancingascquality/sterilizationhighleveldisinfectiontoolkit
Sterilization and HLD surveyor toolkit	https://higherlogicdownload.s3.amazonaws.com/ASCACONNECT/1b34f1a1-0180-4005-9507-902fdf8f242e/UploadedImages/ASC_Quality_Collaboration/Documents/Sterilization_and_High_Level_Disinfection_-_What_CMS_Surveyors_Are_Looking_For.pdf
SPS sterilization rounding tool	https://higherlogicdownload.s3.amazonaws.com/ASCACONNECT/1b34f1a1-0180-4005-9507-902fdf8f242e/UploadedImages/ASC_Quality_Collaboration/Documents/Sterilization_Audit_Checklist_SPSmedical.pdf
General rounding	https://www.cdc.gov/infectioncontrol/tools/quots.html
Infection Prevention Rounding Presentation	https://www.dhs.wisconsin.gov/non-dhs/dph/lindmair-snell-ip-rounding.pdf
OSHA 1910.1030	Bloodborne Pathogens - Standards Occupational Safety and Health Administration (osha.gov)
Title 42 § 483.80 Infection control	https://ecfr.io/Title-42/Section-483.80#:~:text=%C2%A7%20483.80%20Infection%20control.%20The%20facility%20must%20establish,development%20and%20transmission%20of%20communicable%20diseases%20and%20infections.

<https://innovateipc.org/ipc-support-center/>

