

**JCAHO MOCK SURVEY**

**DATE:** \_\_\_\_\_

**DEPARTMENT:**

<b>STANDARD</b>	<b>COMMENTS/ISSUES</b>	<b>RECOMMENDATIONS</b>	<b>FOLLOW-UP ACTIONS</b>
Manuals: Policy and Procedure			
Educational records			
Infection control			
MSDS			
Staff mtg. Min./communication			
Logs: Code cart checks			
Defibrillator checks			
Pharm. Refrig, checks			
Point of care testing			
Waived testing			
Narcotic counts			
Staffing schedules			
Security/Confidentiality: med rm locked			
Code cart lock integrity			
Needles/sharps/supplies			
Med carts locked			
Staff ID badge worn/visible			
Patient records secure			
Patient info not posted/visible			
Computer screens not visible			
Computer accessed w/staff in attendance-not left unattended			
Staff response to security/Confidentiality questions			
Patient Rights/privacy: white board info			
Patient visibly identified?			
How do you know pt. has adv.dir?			
Doors shut/privacy curtains			
?Discussion pt. info in hallways			
Posted patient rights/responsibilities			

STANDARD	COMMENTS/ISSUES	RECOMMENDATIONS	FOLLOW-UP ACTIONS
Infection control: Available PPE			
Observation of staff practice-gloves/handwashing			
Hazardous waste containers			
Needle boxes			
Linen			
Staff refrigerators			
No food in pharm. refrigerator			
Pt. food in nourishment refig, bagged and labeled with name/date			
General cleanliness-storage, work areas, pt. rooms, lounges			
No expired meds/supplies			
Multi-dose vial policy/practice			
How is equipment cleanliness assured?			
How do you prevent spread of infection?			
Safety: Exits routes, known by staff			
Exits clearly marked			
Fire doors/smoke compartments?			
Location medical gas/O2 shut offs			
Location of fire alarm pull			
Location of fire extinguishers			
How to initiate call for CODE, fire, infant abduction			
How to handle chemical spills			
Doors close, tight closure, no doors propped open			
Sprinkler clearance			
How do you know equip is safe?			
What to do with equip failure?			
Safety officer? Radiation safety officer?			
Supplies not on floors or in boxes			

STANDARD	COMMENTS/ISSUES	RECOMMENDATIONS	FOLLOW-UP ACTIONS
Employee general questions:			
What is xH's mission statement?			
How does your work/your dept's contribute to mission?			
What PI activities have you/your dept. been involved in?			
What is one thing about your work at xH for which you are most proud?			
How do you get information about changes in policies, procedures, etc.?			
What do you do if you have: ---policy/procedure question/concern?			
--- an ethical question or concern?			
How were you oriented to your dept?			
How does your manager know you are competent?			
How often are you evaluated? How did you participate in this process?			
How is it assured that only the "right" person has access to patient information?			
How do you help prevent the spread of infection?			
What type of educ. opportunities are there for you at xH?			

STANDARD	COMMENTS/ISSUES	RECOMMENDATIONS	FOLLOW-UP ACTIONS
Provision of care/open chart review/patient			
Interview: recent admission			
Pt. on unit longest (min 5 da.)			
Any patient in restraints? Review of orders, documentation. xH philosophy re: use of restraints?			
Assessment policy-who does? time frames met? Other disciplines involved?			
Advanced directives-how do you know pt. has one? Follow-up if not present?			
How is care assigned?			
How do you document care given?			
How is care interdisciplinary and collaborative?			
How do you identify educational needs of your patients? How do you follow-thru ?			
How is care for your pt. individualized?			
How is d/c plan decided/communicated?			
How is care "transferred" between care-givers, between depts/areas?			
Verbal orders-who takes? Signatures?			
Telephone orders? policy			
OR: chart review in holding for: H & P within 7 days, docum. If no chg. Anesthesia assess., plan, reassess. immediately prior to procedure			
OR: How is plan of care identified?			
Post-op: Immediate post-op note PACU-d/c after seen by anesthesia			

Participants:

Surveyors:

General issues for follow-up?