



NHS

England

**PATIENT-LED ASSESSMENTS
OF THE CARE ENVIRONMENT**

**EMERGENCY DEPARTMENTS/
MINOR INJURIES UNITS**

Emergency department/minor injuries unit

EMERGENCY DEPARTMENT/MIU CLEANLINESS

Pass = P

Qualified Pass = Q

Fail = F

Not Applicable = X

Please see page 13 of this assessment form for definitions of Pass, Qualified Pass and Fail

LEAVE SHADED AREAS BLANK

	Reception/ waiting	Treatment areas	Toilet	<i>Notes optional (reasons for failure must be recorded).</i>
Bed frame/trolley/exam table				
Ceilings				
Curtain track				
Curtains – bedside/cubicle				
Curtains/blinds – other				
Dispensers – soap etc				
Doors and frames				
Floor				
Glazing – internal				
Hoists				
Lighting				
Medical gas equipment				
Mirrors				
Pull cords/switches				
Radiators/heating panels and pipework				
Seating				
Sinks/basins				
Stands (drip, medical, other)				
Surfaces – high				
Surfaces – low/visible (incl fire extinguishers)				
Toilet				

	Reception/ waiting	Treatment areas	Toilet	<i>Notes optional (reasons for failure must be recorded).</i>
TV/entertainment equipment				
Ventilation/air-conditioning grilles (visible)				
Waste bins				
Wheelchairs/walking aids				

Other notes

Emergency department/minor injuries unit

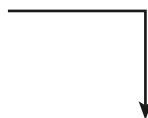
CONDITION/APPEARANCE – 1 of 4

Pass = P

Qualified Pass = Q

Fail = F

Not Applicable = X



Internal decoration	Toilet	Should be bright, co-ordinated and in good condition. Paintwork should be free from chips, scratches and other damage. Wallpaper (if any) should be free from damage – tears etc, and should be appropriate to the patients – e.g. on children’s wards it should not only suit the very young. Artwork should be clean and in good condition.
	Other	

Notes optional (reasons for failure must be recorded).

Internal fixtures and fittings (excluding floors, furnishings and decorations)	Toilet	<p>These should be free from permanent damage and marks (i.e. that cannot be removed by cleaning), and working. There should be clear instructions displayed on how to report broken/malfunctioning items. The list below covers the majority of issues, but others should be recorded as and when they are seen.</p> <ul style="list-style-type: none"> • Free from stains/marks (including water damage and permanent marks caused by adhesive residues) • Free from scuffs, scratches, gouges, tears, holes (including exposed screw-holes), corrosion/rust, limescale or other deposits • Any items which have an action – e.g. automatic doors, taps, lights – should be working correctly • Toilets and bathrooms must have working locks (except in en-suite rooms where the outer door can be locked) • Ceiling tiles – unless there is current maintenance work that requires ceiling tiles to be removed, all should be in place and in good condition • Hand-washing water should not be too hot.
	Other	

Notes optional (reasons for failure must be recorded).

CONDITION/APPEARANCE – 2 of 4

Floors	Toilet	All floors should be even, free from tears, splits, excessive wear, cracks, tape or raised/lifting areas. Any carpeting should be appropriate to the area. Barrier matting in e.g. entrances should be in good condition and firmly fixed in place.
	Other	
<i>Notes optional (reasons for failure must be recorded).</i>		
Seating	Other	<p>Chairs and seating should be made from wipeable/impervious material. Also:</p> <ul style="list-style-type: none"> • It should be in good condition (e.g. free from permanent stains/marks, excessive wear, fraying or tears or, in the case of plastic seating, not cracked or broken) • Where seating is fixed to the floor, fixings should be robust and in good repair so that seating is not loose.
<i>Notes optional (reasons for failure must be recorded).</i>		
Lighting/natural light	Toilet	<p>Natural light should be available wherever possible. Where artificial lighting is used, this should simulate natural light and provide enough light to make areas bright and easy to walk through. Lighting should also be even e.g. without pools of light and / or dark areas, stripes or shadows. Energy-saving/motion-activated lighting is acceptable, but should be designed to respond quickly and to light the area well, particularly in long corridors, lifts or areas where there is no natural light. Bulbs should be working.</p>
	Other	
<i>Notes optional (reasons for failure must be recorded).</i>		

CONDITION/APPEARANCE – 3 of 4

Linen quality and storage (including towels and curtains)		<p>All bed linen, pillows, patient gowns, towels and curtains should:</p> <ul style="list-style-type: none"> • be good-quality, clean, in good condition, bright and free from all but the smallest, professional repairs; • match/be coordinated (bed covers and curtains). • Pillows and duvets should be made of, or covered with, wipeable/impervious materials • Disposable curtains should display the date they were hung • All linen should be appropriately stored in linen rooms or covered cages (open cages are not acceptable) • All linen should be organised so that clean and dirty items cannot come into contact.
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Notes optional (reasons for failure must be recorded).

Odours	Toilet	Areas should smell fresh and should be well ventilated to ensure there are no lingering unpleasant odours. Smells caused by cleaning products are often reassuring for patients, but should not be so strong that they are offensive.
	Other	

Notes optional (reasons for failure must be recorded).

General storage	Toilet	<p>Tidiness is important since not only does a tidy ward or area create an impression of order and good management, but also an untidy ward/area significantly impacts on the ability to clean. The following are key aspects of providing a tidy environment:</p> <ul style="list-style-type: none"> • Equipment, when not in use, should be stored out of sight in rooms or areas set aside for that purpose • Bathrooms, toilets or other patient areas, e.g. day rooms, should never be used for storage • Boxes should not be stored on the floor or cupboard tops or other level surfaces, since this presents a potential hazard • Nothing should ever be stored in doorways
	Other	

Notes optional (reasons for failure must be recorded).

General tidiness	Other	<ul style="list-style-type: none"> • Reception areas and nursing stations should look neat and tidy • Noticeboards should display only essential information and up-to-date notices • There should be separate noticeboards for patient and staff information. • Temporary signs should be up to date, relevant and of good quality (e.g. printed and laminated)

Notes optional (reasons for failure must be recorded).

Waste management	Toilet	<p>There should be enough waste bins throughout the department to help keep litter to a minimum. Also:</p> <ul style="list-style-type: none"> • They should have liners, be big enough for the area/ purpose, and be emptied regularly and not overflow • They should have 'no touch' or foot-operated and mechanisms, which should be working • They should have a solid outer cover (i.e. no 'free-hanging' bags) • Their purpose should be clearly displayed on a label (e.g. domestic, clinical, hazardous etc) • Clinical waste storage bins should always be locked and should never be so full that they prevent closing.
	Other	

Notes optional (reasons for failure must be recorded).

ACCESS

HANDRAILS		
Are there handrails in corridors within the department? Notes: N/A applies only where there are no corridors within the department. Particular attention should be paid to handrails on the approaches to toilets.	Y/N/ NA	
Is it possible to grasp the handrails properly	Y/N	
Are the handrails in a colour that contrasts with the walls?	Y/N	
RECEPTION/WAITING AREAS		
Does seating provided provide for the range of patient needs including chairs of different heights, chairs both with and without arms and bariatric chairs? (N/A only to be used where there is no reception/waiting area)	Y/N	
Is there space in reception/waiting areas for wheelchairs and for those accompanying patients to sit together?	Y/N	
Is there a hearing loop or other portable assistive system at the reception desk?	Y/N	
Is there an audible appointment/consultation alert system for the visually impaired? NOTE – this is an unscored question	Y/N	
Is there a visual appointment/consultation system for the hearing impaired? NOTE – this is an unscored question	Y/N	
Is there at least one generally available toilet within the department big enough to allow space for a wheelchair and carer (including staff) to assist when the door is closed? N/A only where there are no toilets within the Department	Y/N/ NA	

Ward name/number _____

DEPARTMENT (EMERGENCY, OPD) DEMENTIA ASSESSMENT

This assessment should be completed for all Departments being assessed except in the following circumstances:-

1 Where the organisation can say with absolute certainty that patients with dementia will never be present in the department being assessed. This will not apply to Emergency departments, but may apply to certain Outpatient departments depending on the services being provided (e.g. ante/post natal). However organisations should err on the side of caution and assume that unless such persons are specifically excluded in line with the above, then the assessment should be undertaken bearing in mind also that a diagnosis of dementia may not have been made at the time.

The organisation confirms that patients with dementia will never be admitted to the department to which this assessment applies. If Yes, do not answer any further questions.	Y/N	NOTES
FLOORING		
Is the flooring matt rather than shiny?	Y/N	
Is flooring noise reducing/noise absorbent?	Y/N	
Is the flooring a consistent colour without speckles, stripes or 'pebble' effects?	Y/N	
Could the lighting, or natural light from windows, make the floor appear to be wet or slippery?	Y/N	
Is the flooring in a colour that contrasts with the walls and furniture?	Y/N	
TOILETS AND TOILET SIGNAGE (staff-only toilets may be excluded)		
Can signs to the toilets be seen from all areas of the department. Note: If there are no toilets, or if any adjacent toilets have been assessed as part of the Communal Areas assessment then N/A may be selected and other questions in this section ignored	Y/N/NA	
Do all toilet doors have clear signage?	Y/N	
Are toilet door signs fixed to the door rather than the adjacent wall?	Y/N	
Do the toilet door signs use both pictures and text?	Y/N	
Where there is more than one toilet, is signage consistent across them all? (N/A where there is only one toilet)	Y/N/NA	
Are all toilet doors painted in, or if unpainted, made of or coated with, a single distinctive colour so as to distinguish them from other doors in the same area?	Y/N	
Are toilet seats, flush handles and rails in a colour that contrasts with the toilet/bathroom walls and floor? A Yes response requires all criteria to be met	Y/N	
Are the toilet flushes, basins and taps of a familiar design? A Yes response requires all criteria to be met	Y/N	
Are taps clearly marked as hot/cold e.g. by using red and blue colours	Y/N	

GENERAL SIGNAGE		
Do all signs use large, easily readable text?	Y/N	
Are signs large enough and use contrasting colours so as to make them easy to see? A Yes response requires both criteria to be met	Y/N	
Are signs hung (or fixed) at a height that makes viewing them easy (recommended height 4 foot/1.21. metres)	Y/N	
Are all room-specific signs (e.g. Sluice Room) fixed to their door rather than the adjacent wall? NA only where there are no such rooms	Y/N/NA	
Is there clear signage, prominently displayed, in the department showing the hospital name and the department name? A Yes response requires both criteria to be met	Y/N	
Is there a large face clock easily visible in all areas?	Y/N	
OTHER		
Have strong patterns been avoided in wall coverings, curtains, furnishings and screens? (A Yes response requires all relevant criteria to be met)	Y/N	
Are doors to exits clearly marked, but doors to 'staff only' areas disguised e.g. by painting the doors and door handles in the same colour as the walls. A Yes response requires both criteria to be met.	Y/N	
Is it possible to cover or remove mirrors if required? N/A only where there are no mirrors in the area. Note: A permanent/fixed cover is not required, but the manner in which the mirror is fixed to the wall should allow for a temporary cover to be applied (e.g. a sufficient gap to allow a cloth to be draped over the mirror).	Y/N/NA	

Note: The assessment criteria included in this section are drawn from environmental assessments produced by The King's Fund (<http://www.kingsfund.org.uk>) and Stirling University (see <http://dementia.stir.ac.uk/design/virtual-environments/virtual-hospital>). They represent only a selection of assessment criteria and organisations are encouraged to independently undertake a full assessment using the tools of either of the organisations mentioned, or any other suitable tool.

Emergency department/minor injuries unit

HAND HYGIENE and equipment cleanliness

Yes = Y
 No = N
 Not Applicable = X

		<i>Areas for action/record reasons and details of why a No has been recorded</i>
Is antibacterial hand-rub available within arm's reach in treatment areas (answer Yes if ALL staff carry personal dispensers)		
Are there hand-washing facilities in treatment areas?		
Are cleaning schedules available in the area?		

SAFETY

Yes = Y
 No = N

		<i>Areas for action/record reasons and details of why a No has been recorded</i>
Are emergency exits clearly identified?		
Are all emergency exits free of obstacles of any kind?		

Other notes

Emergency department/minor injuries unit

STAFF APPEARANCE

Yes = Y

No = N

<p>Are staff appropriately dressed?</p> <p>The list below covers the majority of issues, but others should be recorded as and when they are seen:</p> <ul style="list-style-type: none">• Staff should be wearing name and job title identification• Uniforms or other clothing should comply with the organisation's dress code (teams will need to determine what this is)• Staff should observe 'bare below the elbows'		<p><i>Areas for action/record reasons and details of why a No has been recorded</i></p>
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Other notes

Emergency department/minor injuries unit

PRIVACY, DIGNITY AND WELLBEING

Yes = Y

No = N

Not Applicable = X

		<i>Areas for action/record reasons and details of why a No has been recorded</i>
Are reception areas large enough so that there is sufficient seating even during busy times?		
Is there sufficient space at reception desks so that conversations between staff and patients are not overheard?		
Are toilets designated for single sex use and have appropriate signs? N/A may be used if there is only one toilet		
Do all toilet doors have working locks?		
Are all treatment/changing cubicle curtains long and wide enough so that when closed they provide a private space?		
Can patients/family etc leave consultation/counselling rooms without having to return through the general waiting area?		
Are all patients appropriately dressed to protect their dignity at all times?		

Other notes
