



# Module 2

## Environmental Audit

For use in all services

|                          |  |
|--------------------------|--|
| Trust/Organisation name: |  |
| Ward name:               |  |

**Data collection commences 2 January  
and ends 28 February 2007**



Charity reg. No. 228636



This audit tool has been designed so that it is generic across all services that are taking part in the audit i.e.:

- services for adults of working age;
- older people's services;
- wards in England and Wales.

### How to use the checklist

| Standard   | Prompts   | MET | NOT MET | COVERED BY PEAT   | N/A   | Comments/exceptions   | How could this be improved?   |
|--|---|-----|---------|---|---|---|---|
| This column contains the standard against which the ward is being rated. | Each standard has an associated prompt box which provides points for observation and informs you whether the standard applies in your service area. |     |         | All NHS mental health trusts in England are subject to 'PEAT' inspections which relate to standards of safety, cleanliness, etc. Most (though not all) NHS mental health trusts in Wales do not have an equivalent. There is some overlap between the standards covered by this audit tool. If you are already using PEAT (or an equivalent), these standards should be rated by ticking the box 'Covered by PEAT'. | Some of the standards will not be applicable on the ward you are auditing; in this case the 'not applicable' box can be ticked. | Use this box to explain why the standard was not being met. | Use this box to describe ideas for improvement that could lead to the standard being met. |
|  |   |     |         | <b>Shaded boxes</b><br>These are used to indicate when a standard <u>cannot</u> be rated as 'not applicable'. Where boxes in the 'Covered by PEAT' column are shaded, this standard is not covered by PEAT, therefore this column cannot be ticked.   |   |   |   |

| Standard  | Prompts   | MET | NOT MET | COVERED BY PEAT | N/A | Comments/exceptions | How could this be improved? |
|---|---|-----|---------|-----------------|-----|---------------------|-----------------------------|
| 10. Sight lines are unimpeded                                       | <i>Observe:</i><br>Are measures taken to address blind spots within the facility e.g. the use of CCTV and parabolic mirrors.<br>Is visibility obstructed by the opening of doors?   |     |         |                 |     |                     |                             |
| 27. The ward environment helps patients become and remain oriented. | <b>NOTE: THIS STANDARD IS PARTICULARLY RELEVANT IN WARDS THAT SUPPORT PEOPLE WITH DEMENTIA.</b><br><i>Observe, e.g.:</i><br>• Are there daily newspapers, clocks, names on bedroom doors?<br>• Are various forms of lighting used to reduce glare, or to soften or change the mood of the environment, without leading to disorientation?<br>• Are levels of stimulation moderated? |     |         |                 |     |                     |                             |

## General Environment

A well-planned physical environment is one which allows adequate space, reasonable comfort, privacy and safety. The unnatural environment of a ward should be made more homely. Staff must be aware of a ward's design features so that they can help patients to benefit from the good aspects and minimise the effects of the bad.

| Standard                                | Prompts  | MET | NOT MET | COVERED BY PEAT | N/A | Comments/exceptions | How could this be improved? |
|---|--|-----|---------|-----------------|-----|---------------------|-----------------------------|
| 1. All areas look clean.                | <i>Observe</i>   |     |         |                 |     |                     |                             |
| 2. All areas look friendly.             | <i>Think about:</i> <ul style="list-style-type: none"> <li>• <i>If you were admitted onto this ward for the first time, how might you feel?</i></li> <li>• <i>Does it look 'institutionalised'?</i></li> <li>• <i>Does it reflect the cultures of the local community it serves?</i></li> <li>• <i>Is the decoration homely and welcoming (within confines of meeting clinical needs)?</i></li> <li>• <i>Are the surroundings kept freshly decorated?</i></li> </ul> |     |         |                 |     |                     |                             |
| 3. All areas smell clean.               | <i>Observe</i>   |     |         |                 |     |                     |                             |
| 4. There is access to natural daylight. | <i>Observe the quality of natural daylight</i>   |     |         |                 |     |                     |                             |

| Standard   | Prompts   | MET | NOT MET | COVERED BY PEAT | N/A | Comments/exceptions | How could this be improved? |
|--|---|-----|---------|-----------------|-----|---------------------|-----------------------------|
| 5. There is access to natural fresh air.   | <i>Observe</i>  |     |         |                 |     |                     |                             |
| 6. There is a perception of space and overcrowding is avoided.                             | <i>Observe</i> <ul style="list-style-type: none"> <li>• <i>The number of people sharing a table at mealtimes.</i></li> <li>• <i>The number of people sharing sitting space in lounge.</i></li> <li>• <i>The amount of space devoted to movement within the building.</i></li> <li>• <i>Access to external views.</i></li> <li>• <i>There is space for people to be alone during the day if they choose.</i></li> <li>• <i>There are safe areas are provided for people to wander in.</i></li> </ul>   |     |         |                 |     |                     |                             |
| 7. Noise levels are adjusted to meet the needs of the people living/ residing on the ward. | <i>Think about the particular needs of the patients.</i> <ul style="list-style-type: none"> <li>• <i>Observe: bedroom areas; quiet areas; activity areas; dining areas; bathroom areas; lounge areas.</i></li> <li>• <i>Look for evidence of soundproofing. Do floor coverings minimise noise (e.g. are floors carpeted?).</i></li> <li>• <i>Are quiet, self-closing doors used?</i></li> <li>• <i>Are there any obvious extraneous noises e.g. noisy extractor fans in kitchens and smoke rooms that may be near sleeping areas, alarms that 'peep', bells that 'ring', hinges that 'squeak'?</i></li> <li>• <i>Is there loud blaring music, radio, televisions or competing noises e.g. radio with vacuum cleaner in the background?</i></li> </ul> |     |         |                 |     |                     |                             |
| 8. Ambient temperatures and ventilation are adequately controlled.                         | <ul style="list-style-type: none"> <li>• <i>Observe: bedroom areas; quiet areas; activity areas; dining areas; bathroom areas; lounge areas.</i></li> <li>• <i>Can radiators be turned on and off as needed? Can patients control the temperature in their sleeping areas?</i></li> </ul>   |     |         |                 |     |                     |                             |

| Standard  | Prompts   | MET | NOT MET | COVERED BY PEAT | N/A | Comments/exceptions | How could this be improved? |
|---|---|-----|---------|-----------------|-----|---------------------|-----------------------------|
| 9. Sight lines are unimpeded.   | <p><i>Observe</i></p> <p><i>Are measures taken to address blind spots within the facility e.g. the use of CCTV and parabolic mirrors?</i></p> <p><i>Is visibility obstructed by the opening of doors?</i></p>   |     |         |                 |     |                     |                             |
| 10. There are good routes of entry and exit in the event of an emergency e.g. fire, disturbed/ violent behaviour. | <p><i>Observe</i></p>   |     |         |                 |     |                     |                             |
| 11. A crash bag is available within 3 minutes.  | <p><i>NOTE: THIS WOULD APPLY IN SETTINGS WHERE RAPID TRANQUILLISATION, PHYSICAL INTERVENTION AND SECLUSION MIGHT BE USED.</i></p> <p><i>Observe equipment. This should include: an automatic external defibrillator; a bag valve mask; oxygen; cannulas; fluids; suction, and first line resuscitation medications.</i></p> |     |         |                 |     |                     |                             |
| 12. Crash bag equipment is maintained and checked weekly.   | <p><i>NOTE: THIS WOULD APPLY IN SETTINGS WHERE RAPID TRANQUILLISATION, PHYSICAL INTERVENTION AND SECLUSION MIGHT BE USED.</i></p> <p><i>Observe records</i></p>   |     |         |                 |     |                     |                             |

## Provision of specific areas

| Standard  | Prompts        | MET | NOT MET | COVERED BY PEAT | N/A | Comments/exceptions | How could this be improved? |
|---|----------------|-----|---------|-----------------|-----|---------------------|-----------------------------|
| 13. Provision is made for children visiting the ward.                             | <i>Observe</i> |     |         |                 |     |                     |                             |
| 14. There are single sex toilets.   | <i>Observe</i> |     |         |                 |     |                     |                             |
| 15. There are single sex washing facilities.                                      | <i>Observe</i> |     |         |                 |     |                     |                             |
| 16. There are single sex day areas.   | <i>Observe</i> |     |         |                 |     |                     |                             |
| 17. There is single sex sleeping accommodation.                                   | <i>Observe</i> |     |         |                 |     |                     |                             |
| 18. There is a separate area to receive patients with police escorts.             | <i>Observe</i> |     |         |                 |     |                     |                             |
| 19. There are adequate quiet spaces for patients for prayer and quiet reflection. | <i>Observe</i> |     |         |                 |     |                     |                             |

| Standard   | Prompts  | MET | NOT MET | COVERED BY PEAT | N/A | Comments/exceptions | How could this be improved? |
|--|--|-----|---------|-----------------|-----|---------------------|-----------------------------|
| 20. Long narrow corridors, numerous doors or corridors that lead to locked doors and dead ends, are avoided.         | <p><i>NOTE: THIS STANDARD IS PARTICULARLY RELEVANT IN WARDS THAT SUPPORT PEOPLE WITH DEMENTIA.</i></p> <p><i>A corridor may be considered too long when it is more than 50 feet in length.</i></p> |     |         |                 |     |                     |                             |
| 21. Doors are colour-coded to help patients to identify rooms. There are clear and simple signs at a visible height. | <p><i>NOTE: THIS STANDARD IS PARTICULARLY RELEVANT IN WARDS THAT SUPPORT PEOPLE WITH DEMENTIA.</i></p> <p><i>Observe</i></p>   |     |         |                 |     |                     |                             |
| 22. The ward provides suitable access and facilities for people who have special needs.                              | <p><i>Observe</i></p>  |     |         |                 |     |                     |                             |
| 23. Internal smoking areas/rooms have powerful ventilation <u>and</u> are fitted with a smoke-stop door(s).          | <p><i>Observe</i></p> <p><i>Note proximity to sleeping areas.</i></p>  |     |         |                 |     |                     |                             |

| Standard  | Prompts  | MET | NOT MET | COVERED BY PEAT | N/A | Comments/exceptions | How could this be improved? |
|---|--|-----|---------|-----------------|-----|---------------------|-----------------------------|
| 24. Patients have access to an outside area which is adequately fenced to ensure privacy and security.  | <i>Observe</i>   |     |         |                 |     |                     |                             |
| 25. There is an activity room on the ward.  | <i>Observe</i>   |     |         |                 |     |                     |                             |
| 26. The ward environment helps patients become and remain oriented.   | <p><i>NOTE: THIS STANDARD IS PARTICULARLY RELEVANT IN WARDS THAT SUPPORT PEOPLE WITH DEMENTIA.</i></p> <p><i>Observe, e.g.:</i></p> <ul style="list-style-type: none"> <li>• <i>Are there daily newspapers, clocks, names on bedroom doors?</i></li> <li>• <i>Are various forms of lighting used to reduce glare, or to soften or change the mood of the environment, without leading to disorientation?</i></li> <li>• <i>Are levels of stimulation moderated?</i></li> </ul> |     |         |                 |     |                     |                             |
| 27. There is a day room with a television.  | <i>Observe</i>   |     |         |                 |     |                     |                             |
| 28. There is a safe designated area or room specifically for the purpose of reducing arousal and/or agitation. This is in addition to a seclusion room. | <i>Observe</i>   |     |         |                 |     |                     |                             |

| Standard  | Prompts  | MET | NOT MET | COVERED BY PEAT | N/A | Comments/exceptions | How could this be improved? |
|---|--|-----|---------|-----------------|-----|---------------------|-----------------------------|
| 29. There is a designated seclusion room which is 'fit for purpose'.        | <p><i>NOTE: THIS STANDARD ONLY APPLIES TO SERVICES THAT USE SECLUSION.</i></p> <p><i>Observe whether it meets the following criteria:</i></p> <ul style="list-style-type: none"> <li>• <i>it allows for clear observation;</i></li> <li>• <i>it is well insulated;</i></li> <li>• <i>it is well ventilated;</i></li> <li>• <i>it has access to toilet/washing facilities, and;</i></li> <li>• <i>it is able to withstand attack/damage.</i></li> </ul> |     |         |                 |     |                     |                             |
| 30. Patients can lock their bedroom doors (with external staff override).   | <i>Observe</i>   |     |         |                 |     |                     |                             |
| 31. Patients can lock <u>bathroom doors</u> (with external staff override). | <i>Observe</i>   |     |         |                 |     |                     |                             |
| 32. Patients can lock <u>toilets</u> doors (with external staff override).  | <i>Observe</i>   |     |         |                 |     |                     |                             |

## Features that the ward offers

| Standard  | Prompts   | MET | NOT MET | COVERED BY PEAT | N/A | Comments/exceptions | How could this be improved? |
|---|---|-----|---------|-----------------|-----|---------------------|-----------------------------|
| 33. Personal effects are safe and accessible.   | <i>Observe: in bedroom area; in living area i.e. lockable cupboards.</i>  |     |         |                 |     |                     |                             |
| 34. Furniture is arranged so that alarms can be reached and doors are not obstructed.   | <i>Observe</i> <ul style="list-style-type: none"> <li>• <i>Positioning of alarm buttons;</i></li> <li>• <i>Accessibility;</i></li> <li>• <i>Availability of personal alarms bearing in mind the possible reduced mobility of patients.</i></li> </ul> |     |         |                 |     |                     |                             |
| 35. There are accessible alarms in interview rooms, reception areas and other areas where one patient and one staff member work together.     | <i>Observe</i>  |     |         |                 |     |                     |                             |
| 36. There is a system that ensures that all alarms (for example panic buttons and personal alarms) are well maintained and checked regularly. | <i>Observe</i>  |     |         |                 |     |                     |                             |

| Standard   | Prompts  | MET | NOT MET | COVERED BY PEAT | N/A | Comments/exceptions | How could this be improved? |
|--|--|-----|---------|-----------------|-----|---------------------|-----------------------------|
| 37. A copy of the policy for preventing and dealing with all forms of harassment and abuse is displayed prominently. | <i>Observe</i>   |     |         |                 |     |                     |                             |
| 38. Meals or other foods (finger foods) are available outside of mealtimes.  | <p><i>NOTE: THIS STANDARD IS PARTICULARLY RELEVANT IN WARDS THAT SUPPORT PEOPLE WITH DEMENTIA.</i></p> <p><i>Observe</i></p> |     |         |                 |     |                     |                             |