

INTERNAL AUDIT REPORT

Date & Time of audit: 28.2.25 @11 am Location: Laundry

Positive Observations

- Good Knowledge on linen management.
- HIPC knowledge and practice, satisfactory.
- Staff attitude is good.

Sl. No.	NABH OE No.	Observations	Suggested action	Responsible person	Due date	Status
1	IPC 4 e	No unidirectional entry and Exit.	Need for clean and dirty linen entry	Operations and Management	Long term	
2	IPC 4 e	No pretreatment of linen area and not using hypochlorite solution.	Need pre-treatment area.	Operations and Management	1.3.25	Done
3	IPC 4 e	No designated pathway to laundry.	Need pathway to laundry.	Operations and Management	Long term	
4	FMS 7 a,b	Signage for designated wash. For e.g. BMT linen, soiled linen etc.	Need signage for each area.	In charge and Operations	31.3.25	Done
5	IPC 4 c	HAZMAT storage room is not arranged properly.	Need updated MSDS. Proper cleaning and arrangements of HAZMAT items needed.	In charge HIPC	1.3.25	Done
6	IPC 4 e	Unavailability of long utility glove for pre wash soiled linen.	Designated long utility glove for every staff is necessary.	In charge Purchase dept.	1.3.25	Done
7	FMS 7 a,b	No designated fire exit and egress route signage direction is wrong	Fire exit and route direction need to be implemented. Training required for fire management.	In charge Safety officer (Fire and safety)	31.3.25	
9	IPC 4 e	Laundry manual not updated.	Need to be updated.	In charge Quality Control	31.3.25	
10	IPC 4 e	Daily utilization of linen management register not recorded from past 6 months.	Records to be updated daily.	In charge	31.3.25	Done
11	IPC 4 d	General waste is mixed with plastic waste.	Segregate general waste as per category.	In charge HIPC	1.3.25	Done

IPC 4 c	Walls and ceiling, floors dirty	Painting needed in laundry. Cleaning to be improved.	In charge Maintenance Dept. Operation	31.3.25
13	IPC 4 c	Dust and cobwebs present	Proper cleaning to be ensured.	In charge Housekeeping Dept. Operations.

Name and signature of auditors:

- Dr. Fenil
- Ms. Binu Abraham
- Ms. Varsha Subin
- Ms. Alphonse

Name and signature of addressee:



- Mr. Jaison

N. B: Please refer the objective element (O.E.) from NABH 6th Edition Hospital Standards.

Received

[Signature]

14/3/25

INTERNAL AUDIT REPORT SAMPLE

Betsy

Dr. BETSY THOMAS
 MD, FRCOG, DNB, MICOG
 PRINCIPAL
 AMALA INSTITUTE OF MEDICAL SCIENCES
 AMALA NAGAR, THRISSUR-680 555



INTERNAL AUDIT REPORT

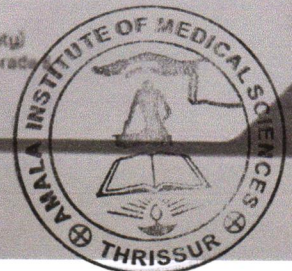
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2. Ms. Binu Abraham
3. Ms. Varsha Subin
4. Ms. Alphonsa

Name and signature of auditees:

1. Mr. Jaison
- 2.

N. B: Please refer the objective element (O.E.) from NABH 6th Edition Hospital Standards.

Reviewed
[Signature]
1/4/25

Dr. BETSY THOMAS
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MD, FRCR, FRCOG

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Betsy

