Hospital 5S Audit Checklist Template

Name: _____ **Date:** _____

	Yes	No
Sort		
Have all unnecessary pieces of equipment been removed?		
Have all unnecessary supplies been removed?		
Have all unnecessary items been removed from the area?		
Are the quantities of items appropriate? Enough? Not more than needed?		
Has a 5S Red Tag area been established and properly worked (as applicable)?		
Straighten		
Is the location of equipment, supplies, etc. optimal for flow?		
Does everything clearly have a home?		
Does it appear that everything is stocked/stored where it is supposed to be?		
Does visual management make it simple to know where things go?		
Is it obvious if something is out of place?		
Scrub		
Is the area clean (floors, walls, shelves, equipment, etc.)?		
Have all damaged or broken items been removed?		
Is the lighting sufficient?		
Are all trash bins emptied?		
Are all other environmental factors sufficient?		
Standardize		
Does the 5S board make it clear who does what and when?		
Is visual management used to help standardize our processes?		
Has Standard Work been developed for all 5S tasks?		
Are cleaning supplies readily available?		
Is our current 5S checklist adequate as written?		
Sustain		
Has the 5S board been maintained?		
Has the 5S checklist been ran daily this week so far, and results recorded?		
Are all staff adhering to our 5S Standard Work?		
If daily 5S scores are declining, or not improving, has any action been taken to determine why?		
Do you believe the 5S process has become a part of our culture for all staff?		
Totals:		