***Name of MTF***

**Security Tracer Checklist**

**Process: Securing Mission Essential Vulnerable Areas Date:**

**Location: Pharmacy Inspected by:**

|  |  |  |
| --- | --- | --- |
|  | **Check** | **Gaps and Recommendations** |
| **Plan** | – Are any areas within the department identified as an MEVA?– Does staff have access to a written policy, regulation, or SOP? |  |
| **Teach** | – Do records show staff received education and training?– Can staff demonstrate knowledge, skills, ability?  |  |
| **Implement** | – Is restricted access signage posted?– Are access rosters current/posted?– Are appropriate physical controls and alarms (locks, IDS, panic buttons, etc.) installed?– Are the physical controls and alarms functional?– Does staff protect keys/access cards from unauthorized use or loss?– Are SF701s completed daily? |  |
| **Respond** | – Any staff complaints in the past 12 months? – Any problems or false or actual alarms in the past 12 months? |  |
| **Monitor** | – Any problems or deficiencies noted during routine inspections/staff duty security rounds?– Any problems or deficiencies noted as a result of preventive maintenance activities for physical controls and alarms? |  |
| **Improve** | – Any actions taken as a result of planning, teaching, implementing, responding or monitoring activities?– Were the actions effective? |  |