| ALCALDÍA MAYOR DE BOGOTÁ D.C. SECRETARÍA DE INTEGRACIÓN SOCIAL | PROCESO PRESTACIÓN DE SERVICIOS SOCIALES<br>FORMATO LISTA DE VERIFICACIÓN DE LIMPIEZA, DESINFECCIÓN Y ACCIONES CORRECTIVAS | Código FOR-PSS-068<br>Versión 1<br>Fecha Memo Int 33907 – 15/06/2018<br>Página 1 de 5 |
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1. NOMBRE DE LA UNIDAD OPERATIVA: Centro Comunidad de Cuidado Caminos de Vida.
MES: Octubre AÑO: 2021
2. Nombre del responsable del diligenciamiento:
Diana Vanessa Ortega Rojas

| 4. Áreas, alimentos, espacios o elementos a considerar *según la unidad operativa* | 3. Semana Uno del 1 al 3 | | | | | | | 3. Semana Dos del 4 al 10 | | | | | | | 3. Semana Tres del 11 al 17 | | | | | | | 3. Semana Cuatro del 18 al 24 | | | | | | | 3. Semana Cinco del 25 al 31 | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| | L | M | M | J | V | S | D | L | M | M | J | V | S | D | L | M | M | J | V | S | D | L | M | M | J | V | S | D | L | M | M | J | V | S | D |
| **COCINA** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Pisos | | | | | 1 | 1 | 1 | 1 | 1 | 2 | 1 | 1 | 1 | 2 | 1 | 1 | 1 | 1 | 1 | 1 | 2 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 2 | 1 |
| Paredes | | | | | 1 | | | | | | | 1 | | | | | | | 1 | | | | | | | 1 | | | | | | | 1 | | |
| Techos | | | | | 1 | | | | | | | 1 | | | | | | | 1 | | | | | | | 1 | | | | | | | 1 | | |
| Ventanas-anjeo | | | | | 1 | | | | | | | 1 | | | | | | | 1 | | | | | | | 1 | | | | | | | 1 | | |
| Puertas | | | | | 1 | | | | | | | 1 | | | | | | | 1 | | | | | | | 1 | | | | | | | 1 | | |
| Mesones | | | | | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 2 | 1 | 1 | 2 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 2 | 1 | 1 | 2 | 1 | 1 | 1 | 1 | 1 | 1 | 2 | 1 | 1 |
| Canecas | | | | | 1 | | 1 | | 1 | | 1 | | 1 | | 1 | | 2 | | 1 | | 1 | | 1 | | 1 | | 1 | | 1 | | 1 | | 1 | | 1 |
| Neveras | | | | | 1 | | 1 | | 1 | | 1 | | 1 | | 1 | | 1 | | 1 | | 1 | | 1 | | 1 | | 1 | | 1 | | 1 | | 1 | | 1 |
| Estufa | | | | | 1 | | 1 | | 1 | | 1 | | 1 | | 1 | | 1 | | 1 | | 1 | | 1 | | 1 | | 1 | | 1 | | 1 | | 1 | | 1 |
| Lavaplatos | | | | | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 |
| Trampa de grasas | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 1 |
| Congelador | | | | | | | | | | 1 | | | | | | | 1 | | | | | | | 1 | | | | | | | 1 | | | | |
| Canastillas | | | | | | | | | | 1 | | | | | | | 1 | | | | | | | 1 | | | | | | | 1 | | | | |
| Licuadora | | | | | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 2 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 2 | 1 | 1 | 1 | 1 | 1 | 1 |
| Menaje | | | | | 1 | 1 | 1 | 1 | 2 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 2 | 1 | 2 | 1 | 1 | 1 | 2 | 1 | 1 | 2 | 1 | 1 | 1 |
| Utensilios | | | | | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 |
| Frutas y verduras | | | | | | | 1 | | | | | | | 1 | | | | | | | 1 | | | | | | | 1 | | | | | | | 1 |

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ALCALDÍA MAYOR DE BOGOTÁ D.C.
SECRETARÍA DE INTEGRACIÓN SOCIAL

PROCESO PRESTACIÓN DE SERVICIOS SOCIALES

FORMATO LISTA DE VERIFICACIÓN DE LIMPIEZA, DESINFECCIÓN Y ACCIONES CORRECTIVAS

| Código: FOR-PSS-068 |
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| 4. Áreas, alimentos, espacios o elementos a considerar *según la unidad operativa* | 3. Semana Uno del 1 al 3 | | | | | | | 3. Semana Dos del 4 al 10 | | | | | | | 3. Semana Tres del 11 al 17 | | | | | | | 3. Semana Cuatro del 18 al 24 | | | | | | | 3. Semana Cinco del 25 al 31 | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| | L | M | M | J | V | S | D | L | M | M | J | V | S | D | L | M | M | J | V | S | D | L | M | M | J | V | S | D | L | M | M | J | V | S | D |
| Abarrotes | | | | | | | 1 | | | | | | | 1 | | | | | | | 1 | | | | | | | 1 | | | | | | | 1 |
| Huevos | | | | | | | 1 | | | | | | | 1 | | | | | | | 2 | | | | | | | 1 | | | | | | | 2 |
| Bolsas de leche | | | | | | | 1 | | | | | | | 1 | | | | | | | 1 | | | | | | | 2 | | | | | | | 1 |
| Empaques de lácteos | | | | | | | 1 | | | | | | | 2 | | | | | | | 1 | | | | | | | 1 | | | | | | | 1 |
| Bolsa de pulpas de frutas | | | | | | | 1 | | | | | | | 1 | | | | | | | 1 | | | | | | | 1 | | | | | | | 1 |
| Estanterías | | | | | | | 2 | | | | | | | 1 | | | | | | | 1 | | | | | | | 2 | | | | | | | 2 |
| **COMEDOR** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Pisos comedor | | | | | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 2 | 1 | 1 | 2 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 2 |
| Paredes | | | | | 1 | 1 | 1 | 1 | 1 | 2 | 1 | 1 | 2 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 |
| Techos | | | | | 1 | | | | | | | 1 | | | | | | | 1 | | | | | | | 1 | | | | | | | 1 | | | |
| **BAÑOS** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Sanitario | | | | | 1 | 2 | 1 | 1 | 1 | 1 | 1 | 1 | 2 | 1 | 1 | 1 | 1 | 1 | 2 | 2 | 1 | 1 | 1 | 1 | 1 | 2 | 1 | 1 | 1 | 1 | 1 | 2 | 1 | 1 | 1 |
| Lavamanos | | | | | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 |
| Espejo | | | | | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 2 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 |
| Pisos | | | | | 1 | 2 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 2 | 1 | 1 | 1 | 2 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 2 | 1 | 1 | 1 |
| Paredes | | | | | | | 1 | | | | | | | 1 | | | | | | | 1 | | | | | | | 1 | | | | | | | 1 |
| Techos | | | | | | | 1 | | | | | | | 1 | | | | | | | 1 | | | | | | | 1 | | | | | | | 1 |
| Ventanas | | | | | 1 | | | 1 | | | | | | 1 | 1 | | | | | | 1 | 1 | | | | | | 1 | 1 | | | | | | 1 |
| Puertas | | | | | 1 | | | 1 | | | | | | 1 | 1 | | | | | | 1 | 1 | | | | | | 1 | 1 | | | | | | 1 |
| Papeleras | | | | | 1 | 1 | 2 | 1 | 1 | 2 | 1 | 1 | 1 | 2 | 1 | 1 | 1 | 1 | 2 | 1 | 1 | 1 | 2 | 2 | 1 | 1 | 1 | 1 | 1 | 1 | 2 | 1 | 1 | 1 | 1 |
| **CUARTO DE ALMACENAMIENTO DE** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

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ALCALDÍA MAYOR DE BOGOTÁ D.C.
SECRETARÍA DE INTEGRACIÓN SOCIAL

PROCESO PRESTACIÓN DE SERVICIOS SOCIALES

FORMATO LISTA DE VERIFICACIÓN DE LIMPIEZA, DESINFECCIÓN Y ACCIONES CORRECTIVAS

| Código FOR-PSS-068 |
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| 4. Áreas, alimentos, espacios o elementos a considerar *según la unidad operativa* | 3. Semana Uno del 1 al 5 | | | | | | | 3. Semana Dos del 8 al 12 | | | | | | | 3. Semana Tres del 14 al 19 | | | | | | | 3. Semana Cuatro del 22 al 26 | | | | | | | 3. Semana Cinco del 28 al 31 | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| | L | M | M | J | V | S | D | L | M | M | J | V | S | D | L | M | M | J | V | S | D | L | M | M | J | V | S | D | L | M | M | J | V | S | D |
| **RESIDUOS SÓLIDOS** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Canecas | | | | | | | | | 1 | | | | | | | 1 | | | | | | | 2 | | | | | | 1 | | | | | | |
| Pisos | | | | | 1 | | | 1 | | | | | | 1 | 1 | | | | | | 1 | 1 | | | | 1 | | | 1 | | | | 1 | | |
| Paredes | | | | | 1 | | | 1 | | | | | | 1 | 1 | | | | | | 1 | 1 | | | | 1 | | | 1 | | | | 1 | | |
| Techos | | | | | 2 | | | 1 | | | | | | 1 | 1 | | | | | | 1 | 1 | | | | 2 | | | 1 | | | | 1 | | |
| Puerta | | | | | 1 | | | 2 | | | | | | 1 | 1 | | | | | | 1 | 1 | | | | 1 | | | 1 | | | | 1 | | |
| **OTROS ELEMENTOS** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Colchonetas | | | | | | | 1 | | | | | | | 1 | | | | | | | 1 | | | | | | 1 | | | | | | | 1 |
| Pasillos | | | | | | | | 1 | | | | | | | 1 | | | | | | | 1 | | | | | | | 1 | | | | | | |
| Puntos ecológicos | | | | | 1 | | | | | | | 1 | | | | | | | 1 | | | | | | | 1 | | | | | | 1 | | | |
| Elementos de aseo | | | | | | | | | | | 1 | | | | | | | 1 | | | | | 1 | | | | | | | | 1 | | | | |
| Bodega de Insumos | | | | | | | | | | 1 | | | | | | | 1 | | | | | | 1 | | | | | | | 1 | | | | | |
| **ENFERMERÍA** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Pisos | | | | | 1 | | 1 | | 1 | | 1 | | 1 | | 2 | | 1 | | 1 | | 1 | | 2 | | 1 | | 2 | | 1 | | 1 | | 1 | | 1 |
| Paredes | | | | | 1 | | 1 | | 1 | | 1 | | 1 | | 1 | | 2 | | 2 | | 1 | | 1 | | 1 | | 1 | | 1 | | 1 | | 1 | | 2 |
| sanitarios | | | | | 1 | | 1 | | 1 | | 1 | | 2 | | 1 | | 1 | | 2 | | 1 | | 1 | | 1 | | 2 | | 1 | | 2 | | 1 | | 1 |
| Lavamanos | | | | | 1 | | 1 | | 1 | | 1 | | 1 | | 1 | | 1 | | 1 | | 1 | | 1 | | 1 | | 1 | | 1 | | 1 | | 1 | | 1 |
| Espejo | | | | | 1 | | 1 | | 1 | | 1 | | 1 | | 1 | | 1 | | 1 | | 1 | | 1 | | 1 | | 1 | | 1 | | 1 | | 1 | | 1 |
| Techo | | | | | 1 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Ventanas | | | | | 1 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Puertas | | | | | 1 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Papeleras | | | | | 1 | | 1 | | 1 | | 2 | | 1 | | 1 | | 1 | | 1 | | 1 | | 2 | | 1 | | 1 | | 1 | | 1 | | 1 | | 1 |

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| | PROCESO PRESTACIÓN DE SERVICIOS SOCIALES<br>FORMATO LISTA DE VERIFICACIÓN DE LIMPIEZA, DESINFECCIÓN Y ACCIONES CORRECTIVAS | Código: FOR-PSS-058<br>Versión: 1<br>Fecha: Memo Int 33987 – 15/06/2018<br>Página: 4 de 5 |
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| 4. Áreas, alimentos, espacios o elementos a considerar *según la unidad operativa* | 3. Semana Uno del 1 al 3 | | | | | | | 3. Semana Dos del 4 al 10 | | | | | | | 3. Semana Tres del 11 al 17 | | | | | | | 3. Semana Cuatro del 18 al 24 | | | | | | | 3. Semana Cinco del 25 al 31 | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| | L | M | M | J | V | S | D | L | M | M | J | V | S | D | L | M | M | J | V | S | D | L | M | M | J | V | S | D | L | M | M | J | V | S | D |
| **LAVANDERÍA/ROPERIA** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Pisos | | | | | 1 | 1 | 1 | 1 | 2 | 1 | 1 | 2 | 1 | 1 | 1 | 2 | 1 | 1 | 2 | 1 | 1 | 1 | 2 | 1 | 1 | 2 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 |
| Paredes | | | | | 1 | 1 | 1 | 1 | 1 | 2 | 1 | 1 | 1 | 1 | 1 | 1 | 2 | 1 | 2 | 1 | 1 | 1 | 2 | 1 | 2 | 1 | 2 | 1 | 1 | 1 | 2 | 1 | 2 | 1 | 2 |
| Máquinas | | | | | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 2 | 1 | 1 | 2 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 |

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