



Community Infection Prevention and Control Guidance for Health and Social Care

Environmental Cleanliness

ENVIRONMENTAL CLEANLINESS

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1. Introduction

The Health and Social Care Act 2008 requires that registered providers of health and social care “Provide and maintain a clean and appropriate environment in managed premises that facilitates the prevention and control of infections”.

- All health and social care workers should know and understand the importance of thorough cleaning.
- A clean environment reduces the cumulative risk of transmission of infection posed by micro-organisms in that environment.
- Outbreaks of infection have been associated with environmental contamination.
- Most micro-organisms are found in dust and dirt, so cleaning or vacuuming alone can often cause significant reductions in the amount of organisms in the environment.
- Some micro-organisms, e.g., *Clostridium difficile* spores, are adept at surviving in the environment, and, therefore, enhanced cleaning with disinfectants is required when a service user has a known or suspected infection.
- Hands regularly come into contact with surfaces. If hands are not washed, they will transfer any organisms present. This risk is always present, but will increase if cleaning is neglected.

Cleaning is a process that removes contaminants including dust, soil, large numbers of micro-organisms and the organic matter that shields them, such as faeces, blood, pus, urine and other body fluids. To ensure effective cleaning, the equipment used and the item to be cleaned should be in a good state of repair.

Disinfection is a process that reduces the number of micro-organisms to a level at which they are not harmful and is only effective if the equipment or surface is thoroughly cleaned with a detergent solution beforehand. The use of disinfectants, e.g., household bleach, Milton, or Haz tabs are recommended when dealing with blood/body fluid spillages or where an outbreak of infection has occurred. Dual acting products, e.g., Chlor-Clean, Actichlor plus, will complete the cleaning and disinfecting process in one action.

Numerous agents and cleaning solutions are mentioned within this guidance, as with all substances, COSHH (Care of Substances Hazardous to Health) guidance/manufacturers instructions must be followed, in order to achieve safe practice.

2. Cleaning plan

Each establishment should have a cleaning plan in place. The following examples of what the plan should include are given in the National Specifications of Cleanliness.

- The standards to be achieved.
- The clear allocation of responsibility for cleaning of all areas of, and items within, the premises.
- Care Homes - the person(s) in overall charge of cleaning (usually the registered manager).
- Primary Care Medical and Dental Premises – the members of staff responsible for cleaning.
- Cleaning schedules and frequencies.
- Systems to be used to measure outcomes.
- Care Homes – the reports required and the people who should receive them.
- Primary Care Medical and Dental Premises – the reports required and the member(s) of practice staff who should receive them.
- Operational and training policies and procedures which include how the provider will ensure all staff receive appropriate training prior to being allocated specific cleaning tasks.
- The risk assessment protocols.
- How cleaning services, operations and controls dovetail with arrangements for infection control, including training for all cleaning staff in infection control policies and procedures.

A documented record of cleaning undertaken should also be made as evidence of cleaning.

Where cleaning (regular, periodic or 'one off') is provided by external contractors, cleaning plans should also set out the management arrangements in place to ensure the provider delivers against the contract. Contracting out cleaning services does not mean contracting out responsibility, there should be suitable arrangements in place to monitor standards of cleaning and to deal with poor or unsatisfactory performance.

3. Choice of cleaning product

- Limit the number of products used to avoid inappropriate use.
- Always check manufacturers' instructions.

- Refer to COSHH data sheet.

Detergents

- Warm water and neutral detergent is suitable for many cleaning activities.
- Select and use a good quality neutral detergent.
- Detergents classed as anionic and non-ionic have the best detergent activity.

Disinfectants

- Disinfectants should not be used routinely for cleaning and should only be used on the advice of your local Community Infection Prevention and Control or Public Health England team, e.g., cases of infection, outbreaks of infection, blood/body fluid spills.
- To ensure efficacy, disinfectant solutions must be made up to the manufacturer's instructions, i.e., measure the product and water accurately, no guesses.
- Discard as advised, e.g., hypochlorite solutions 24 hours after making up.

4. Equipment used for cleaning

- Use colour coded equipment (see section 6) for cleaning different areas.
- Cleaning cloths should be single-use.
- Cleaning equipment should be stored clean and dry after use.
- Disposable mop heads are preferable to re-usable.
- Equipment, e.g., mops, should not be stored in disinfectants/disinfectant solutions.
- Re-usable mop heads must be laundered and dried regularly.
- Mop buckets should be cleaned after use and either dried with paper towels or stored inverted to dry on a suitable surface to allow drainage.
- Floor scrubbing machines, steam cleaners and carpet shampoo machines, should be designed to enable tanks to be emptied, cleaned and dried.
- Cleaning products should be stored in a designated lockable area.

5. Furniture, fixtures and fittings

- Surfaces should be smooth, wipeable and non-impervious to facilitate effective cleaning.
- Damaged surfaces should be repaired or replaced.

- When purchasing new furniture, fixtures and fittings, ensure that the item can be easily cleaned (in accordance with manufacturer's instructions).
- Cushions, e.g., seat, scatter, pressure relieving, wheelchair, should be cleaned regularly and have removable covers to allow inspection of the cover inner surface and inner cushion.
- Underneath surfaces, e.g., chairs, tables, should be cleaned and inspected regularly.

6. Colour coding

Colour coding of cleaning materials and equipment ensures that these items are not used in multiple areas, therefore, reducing the risk of transmission of infection from one area to another, e.g., toilet to kitchen.

In accordance with the National Patient Safety Agency, all cleaning materials and equipment, e.g., cloths (disposable), mops, buckets, aprons and gloves, should be colour coded.

Cleaning products such as bleach and disinfectants do not need to be colour coded.

A relevant National Patient Safety Agency colour coded chart should be displayed in the domestic's room and dirty utility room, see Table 1 and Table 2.

Table 1

| National colour coding scheme - For cleaning materials and equipment in care homes | |
|---|---|
| All care homes are recommended to adopt the national colour code for cleaning materials (see below). All cleaning items, e.g., disposable cloths, mops, buckets, aprons and gloves, should be colour coded. | |
| RED | Bathrooms, showers, toilets, basins and bathroom floors. |
| BLUE | General areas, including lounges, offices, corridors and bedrooms. |
| GREEN | Kitchen areas including satellite kitchen area and food storage areas. |
| YELLOW | Bedrooms when someone has an infection and is cared for in their own room (isolated). |

Table 2

| National colour coding scheme - For cleaning materials and equipment in primary care medical and dental premises | |
|--|---|
| All practices are recommended to adopt the national colour code for cleaning materials (see below). All cleaning items, e.g., disposable cloths, mops, buckets, aprons and gloves, should be colour coded. | |
| RED | Sanitary areas including sinks in sanitary areas. |
| BLUE | General areas, e.g., waiting rooms and consulting rooms (including sinks in general areas). |
| GREEN | Kitchens. |
| YELLOW | Treatment and minor operation rooms. |

7. Additional IPC resources

The North Yorkshire and York Community Infection Prevention and Control (IPC) team have produced a wide range of innovative educational and other IPC resources, including support for environmental cleanliness, e.g., National colour coding scheme posters. These resources are designed to assist your organisation in achieving compliance with the Health and Social Care Act 2008 and CQC requirements. Further information on these high quality evidence-based resources is available at www.infectionpreventioncontrol.co.uk

8. References

Department of Health (2010) *The Health and Social Care Act 2008: Code of Practice on the prevention and control of infections and related guidance*

Department of Health and Health Protection Agency (2013) *Prevention and Control of infection in care homes – an information resource*
https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/214929/Care-home-resource-18-February-2013.pdf [Accessed 19 January 2015]

National Patient Safety Agency (2010) *The national specifications for cleanliness in the NHS: Guidance on setting and measuring performance outcomes in care homes*
<http://www.nrls.npsa.nhs.uk/resources/?entryid45=75240>

National Patient Safety Agency (2010) *The national specifications for cleanliness in the NHS Guidance on setting and measuring performance outcomes in primary care medical and dental premises*
<http://www.nrls.npsa.nhs.uk/EasySiteWeb/getresource.axd?AssetID=75245%20>

National Patient Safety Agency (2009) *The Revised Healthcare Cleaning Manual* www.nrls.npsa.nhs.uk/resources/?EntryId45=61830