

## Policy applies to:

All Mercy Staff

## Related Standards:

- Cleaning Standards for Victorian Health Facilities, 2011
- EQulP 6 - Criteria 3.2.2:
- NZS 8143.2021 Ngā paerewa Health and Disability services standard

## Cultural Consideration:

Protocols around cleaning services will be as directed through our Tikaka best practice guidelines.

## Rationale:

Cleanliness of the healthcare environment is one of the key ways to prevent patients, visitors and staff acquiring a healthcare associated infection. A clean healthcare environment is essential to the safety, dignity and comfort of patients.

Mercy is committed to a patient-focused environmental cleaning service standard that promotes best practice in cleaning methodologies.

## Definitions:

### Elements

These refer to the items such as surface, article or fixture to be cleaned.

### Functional area

The area in which cleaning occurs. Functional areas are grouped under four risk categories; very high risk (1), high risk (2), moderate risk (3) and low risk (4). The four risk categories reflect the level of frequency and intensity of cleaning.

### Environmental Cleaning

The removal of all dirt and soiling to ensure the entire area is hygienically cleaned at all times.

### Cross Contamination

The term used to describe the transfer of bacteria from one source to another

### Service Standard

Declarations that dictate the expected outcome of a particular kind of procedure or task.

### Methodology

The methods and principles used for doing a particular kind of procedure/task.

**Objectives:**

- To minimise hospital based infections and cross contamination
- To provide staff with the education required to ensure staff competence in cleaning requirements
- To identify service area functional risk levels and the required cleaning standards
- To ensure the required cleaning and overall presentation standards are met in service areas
- To ensure standardisation of cleaning throughout Mercy Hospital.

**Implementation:**

- Development and maintenance of a quality cycle, refer Appendix 1
- Identify service area functional risk levels and develop cleaning guidelines and standards according to Risk Categories as per table below:

<b>Risk Categories</b>	<b>Areas</b>
<b>Very high risk Category 1:</b> required standard of cleanliness critically important	ICU CSSD Theatres Isolation rooms MCC - Manaaki Theatre Manaaki Cath Lab PACU
<b>High risk Category 2:</b> Required standard of cleanliness-highly important	McAuley ward Coolock DSU Suite 22 Manaaki Kitchen Laundry Marinoto Clinics Mercy Care East
<b>Moderate risk Category 3:</b> Required standard of cleanliness-very important	Waiting areas Public Areas Cafeteria Plantroom Manaaki Medical Stores Record Storage /Archives Administration Areas
<b>Low risk Category 4:</b> Required standard of cleanliness-important	Plant Room/workshop External Surrounds

- Use of cleaning methodologies, refer Appendix 2
- Development and maintenance of service standards, refer Appendix 3
- Completion of Mandatory Annual Environmental Training for House Keeping Staff

- House Keeping Orientation programmes

**Evaluation:**

- Audits
- Incident forms
- Staff feedback
- Patient Feedback - Cemplicity

**ASSOCIATED DOCUMENTS:**

**External –**

- Australian Guidelines for the prevention and control of infection in Healthcare, 2019
- NHS Healthcare Cleaning Manual, 2014
- CDC Guidelines for Environmental Infection Control in Healthcare Facilities, 2003 – update 2019

**Internal –**

- Isolation policy
- MDRO policy
- Standard Precautions policy
- Waste Management policy
- TSA's Work Manual
- Housekeeping Work Manual
- Housekeeping Work Guides
- Service Area Environmental Cleaning Audit tool

**Appendices:**

- Appendix 1 Environment Cleaning Quality Cycle
- Appendix 2 Cleaning Methodologies
- Appendix 3 Cleaning Service Standards
- Appendix 4 Colour Coding