

# **The NHSScotland National Cleaning Services Specification**

Healthcare Associated Infection Task Force

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#### **Disclaimer**

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## Glossary of Terms

<b>A&amp;E</b>	Accident and Emergency
<b>Audit</b>	A process which allows for the systematic and critical analysis of the quality of service
<b>Benchmarking</b>	Use of a standard or point of reference for the purpose of comparison, usually in the context of improving performance
<b>CCU</b>	Coronary Care Unit
<b>CDU</b>	Central Decontamination Unit
<b>Check cleaning</b>	This is a visual check of cleanliness, for spots, spillages, general debris, etc. at a specified frequency throughout the day. Sufficient cleaning should be carried out to restore the area or item to acceptable standard using the agreed cleaning procedures
<b>Cleaning Service Provider</b>	Defined as the organisation co-ordinating and delivering cleaning services within specified locations - applies to in-house team, external contractor or Facilities Management Provider
<b>COSHH</b>	Control of Substances Hazardous to Health. These Regulations require employers to control exposure to hazardous substances to prevent ill health
<b>Clinical Areas</b>	Clinical areas are areas where 'clean' clinical procedures are carried out, e.g. treatment rooms
<b>Dirty Utility</b>	Examples of dirty utility room are sluice rooms, or areas that are used for the decontamination of medical equipment
<b>Discharge Clean</b>	A discharge clean should take place after each patient discharge. Local flexibility is required in order that daily programmed clean can be reprogrammed/reallocated thus avoiding requirement for additional cleaning input
<b>DSR</b>	Domestic Services Room – the room which cleaning operatives work from and store their supplies and equipment
<b>FMT</b>	Facilities Monitoring Tool
<b>HAI</b>	Healthcare Associated Infection
<b>HEI</b>	Healthcare Environment Inspectorate
<b>HEPA</b>	High Efficiency Particulate Arresting. HEPA filters have a high efficiency at arresting, or capturing particles

<b>HDU</b>	High Dependency Unit. This is a clinical area, where patients require a high level of clinical care, but are not ventilated. Examples would be SCBU (Special Care Baby Units), Medical and Surgical High Dependency Units
<b>HFS</b>	Health Facilities Scotland
<b>HPS</b>	Health Protection Scotland
<b>HSDU</b>	Hospital Sterile Disinfection Unit
<b>ICU</b>	Intensive Care Unit or Intensive Therapy Unit (ITU). Also included in this category would be Cardiac Intensive Care Unit (CICU), Neonatal Intensive Care Unit (NICU), Neurology Intensive Care Unit (NICU). . This is a clinical area, where patients require a high level of clinical care, but are not ventilated
<b>IDU</b>	Infectious Disease Unit
<b>IPCN</b>	Infection Prevention and Control Nurse
<b>Isolation Room</b>	A room in which certain categories of patients, particularly those with alert organisms or communicable diseases can be cared for with a minimum of contact with the rest of the patients/clients
<b>Monitoring</b>	The on-going assessment of the outcomes of cleaning processes
<b>NCSS</b>	The NHSScotland National Cleaning Services Specification
<b>PAS</b>	PAS 5748:2014 Specification for the planning, application, measurement and review of cleanliness services in hospitals. Used in England and Wales. (Not used in Scotland)
<b>Peer Review</b>	Review of a service by those with expertise and experience in that service, either as a provider, user or carer but who are not involved in its provision in the area under review
<b>PPE</b>	Personal Protective Equipment (e.g. safety goggles, aprons, gloves, masks as per local policy)
<b>Service User</b>	Defined as patients and visiting public including nursing staff/clinicians.
<b>SICPs</b>	Standard Infection Control Precautions
<b>SOPs</b>	Standard Operating Procedures
<b>SSD</b>	Sterile Services Department
<b>Terminal Clean</b>	The procedure required to ensure that an area has been cleaned/decontaminated after a patient with an alert organism or communicable disease has been nursed in the area, in order to render it safe for the next patient.

## 1. Introduction

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This document is a revised edition of the NHSScotland National Cleaning Services Specification (2009) (NCSS). Within NHSScotland, Boards have been working to and above the NHSScotland National Cleaning Services Specification since it was developed and introduced in 2006. This revision is based on the need to have a cleaning specification that allows NHS Boards to accurately and effectively risk assess specific tasks to determine the frequency of cleaning based upon the risk to the patient and also public perception.

This revision includes generic risk assessments for each task definition, which have been developed by an Expert Working Group, with aligned Standard Operating Procedures (SOPs). The near patient environment is a priority and must be cleaned effectively to reduce the risk of Healthcare Associated Infection (HAI) within Healthcare settings. The revisions within the NCSS and attached risk assessments support NHS Boards in accurately deploying resources to maintain a clean and safe environment for our patients, staff and visitors.

### The National Cleaning Services Specification (NCSS)

- 1.1 During 2009, an update of the original 2006 NCSS was developed to reflect changes in line with the Monitoring Framework Tool (FMT) for NHSScotland National Cleaning Services Specification and the National Education and Training Framework for Domestic Services.

Since 2006, NHS Scotland Boards have been working to and above the minimum standard required as stated in the NCSS. This 2015 revision is based upon an assessment of infection prevention and control risk versus public perception risk to allow Boards to define a specific work schedule in order to respond to varying clinical needs such as outbreaks and activity.

The Boards must refer to standard risk assessments for each cleaning task before amending cleaning schedules, the priority being to reduce Healthcare Associated Infections (HAIs) at the same time as providing a safe, clean environment for patients' recovery.

These are not Health and Safety Risk Assessments but assessments of risk relating to prevention and control of HAIs. Therefore they will be used to inform local frequencies.

Healthcare Associated Infection (HAI) is a priority for NHSScotland and this includes the resource implications of potentially avoidable infections. HAI is equally important for Healthcare in the private, independent and voluntary sectors and this document may be used as good practice guidance.

## Context

- 1.2 Domestic Services staff are an essential part of the multi-disciplinary Healthcare team in improving patient, staff and public safety. For infection prevention and control of infection to work effectively, critical activities such as Standard Infection Prevention and Control Precautions (SIPCS), including cleaning and hand hygiene, must be embedded into everyday practice.

Health Protection Scotland (HPS) published a compendium<sup>1</sup> of current national policy, guidance materials and supporting materials on HAI which were produced from 2001.

The compendium aims to provide NHSScotland staff with an overview of up-to-date guidance and is updated quarterly.

## 2. Roles and Responsibilities

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### Introduction

- 2.1 Governance is an essential part of any system or process and must be clear, concise and structured. Across NHSScotland the structure of Domestic Services within Boards varies as do the roles, titles and even responsibilities. It is impractical to provide detailed governance information within this document, however below is a guide that can be adopted if local governance is not already in place.

### Who is responsible for what?

- 2.2 Locally, within each Board, the responsible person will be the Board Lead for Domestic Services. It is important for all users of this document to be aware of the responsibilities and roles of each staff member within the Domestic Services Team.

Whilst job titles and staffing frameworks vary across Boards the generic job titles listed below capture the essence of HAI responsibilities and any local documentation being produced should reflect the content of this document but using the Boards job titles.

#### Domestic Assistant

Responsible for ensuring the environment is clean by:

- following the Standard Operating Procedures included within this document and the work schedule detailing routines and duties within each clinical ward/department;
- reporting, as an exception, when areas cannot be cleaned due to access issues, for example.

#### Domestic Supervisor

Responsible for:

- day to day supervision of the Domestic Assistants within an area or site;
- regularly auditing the clinical environment ensuring that the Domestic Assistant is fulfilling their duties;
- general supervision of cleaning services on a daily basis;
- regular review of their areas of responsibility using the risk assessments within the NCSS and developing the work schedules;
- reviewing exception reports and identifying any trends to allow review of service provision, e.g. change of timing for cleaning.

## Domestic Manager

Responsible for overseeing the implementation and effective use of the NCSS including:

- provision of advice and support relating to cleaning issues;
- developing and reviewing the work schedules with the Domestic Supervisors and agreeing review processes;
- allocation of resources to ensure that the requirements of the output specification can be achieved.

Work schedules require to be signed off every two years by the Domestic Manager, Infection Prevention and Control Team and the Charge Nurse/Head of Department for each clinical area.

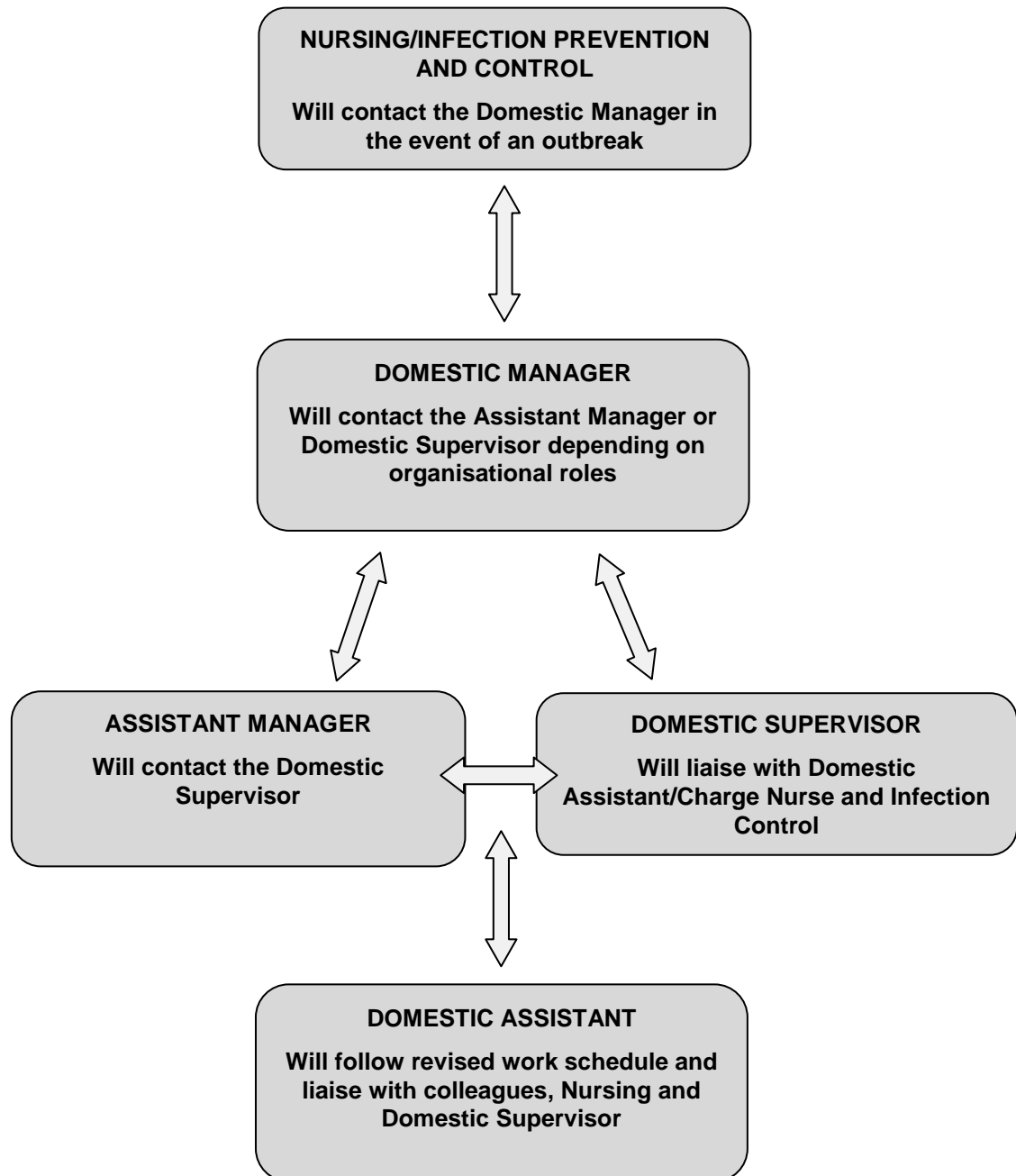
## Escalation process in the event of an outbreak

- 2.3 The procedures required to ensure that an area has been cleaned appropriately during/following an outbreak requires different measures to be taken than that of routine cleaning.

Refer to local policy but consideration should be given to the following:

- when an outbreak has been identified Nursing/Infection Prevention and Control staff should communicate this to the Domestic Manager identifying the type of infection and precautions required to be put into place;
- Domestic Manager will contact the Assistant Manager and/or Domestic Supervisor;
- Domestic Supervisor will liaise with the Nurse in Charge and Domestic Assistant on shift;
- Domestic Supervisor/Managers will review staffing levels and make temporary adjustments to work schedules, including frequencies for use during the period of the outbreak following advice and recommendations from the Infection Prevention and Control team.

## Example of communication and notification of an outbreak



## Record Keeping

- 2.4 Effective record management allows NHS Boards to provide and maintain key documentation that can be requested by external stakeholders at any given time. This also ensures that NHS Boards are acting in accordance with legal requirements, standards, evidence based practices and professional work practice. Locally, specific records that need to be kept are work schedules, log sheets detailing additional tasks, audit results from NHS Scotland Facilities Monitoring Tool and any action plans derived from exception reports.

Refer to local Board policy for the retention of documentation.

## When to use additional Risk Assessments

- 2.5 Included within the NCSS are risk assessments for each task definition based on daily cleaning with additional risk assessments for isolation and terminal cleans. Also included are blank risk assessments for local use on occasions of outbreaks or other changes to routine cleaning within an area. (Appendix 3)

## 3. Performance Management

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### Introduction

- 3.1 Throughout the year, NHS Boards will monitor all of their facilities which deliver Healthcare services.

Compliance is assessed within NHS Boards using the standardised NHSScotland monitoring framework.

There are two components to the monitoring:

- audits carried out on a routine basis by Domestic Services;
- audits carried out by Peer Review teams, i.e. Infection Prevention and Control, Nurse Managers, Estates and Quality Assurance Teams, and should incorporate a Public Involvement element.

Cleanliness is assessed using an observational process in accordance with the technical requirements set out in the NHSScotland National Cleaning Services Specification. The requirements vary depending on the type of area being assessed and the scores are weighted to reflect risk. For example, elements within an operating theatre (i.e. floors, furniture/fittings) will receive a higher weighting than the same elements in a lower risk area such as an office in a non-clinical department.

The rooms within an audit area to be audited are selected at random by the Facilities Monitoring Tool (FMT) in accordance with the Monitoring Framework Guidance.

### Peer and Public Review

- 3.2 The Peer and Public Review Audit process provides an independent systematic approach to the involvement of members of the public and other professionals in the auditing process, supporting confidence in the delivery of the Facilities Monitoring Framework and the Domestic Services provision to a ward/department or site.

Peer Review may include representation from any of the following groups:

- Domestic Services;
- Infection Prevention and Control Professionals;
- Professional Managers, estates representatives and members of the Health Board Quality Team (if applicable).

Peer Review provides an opportunity to involve and engage with colleagues during the monitoring process, strengthening communication between the teams and sharing learning from the process. Results of this review will be fed back to those who have been involved in the process.

Public Involvement Review provides public assurance of the quality of audit activity, and supports the review process. Their role is to observe the monitoring process and provide a communication route to their Public Partnership Forum (PPF) or other recognised accountable forum.

Further information can be found in the National Facilities Monitoring Framework Manual.<sup>2</sup>

## Summary

- 3.3 Performance Management is an integral part of cleaning service provision and best carried out with full involvement of service providers.

Further details on the Performance Management Process can be found in the Monitoring Framework for NHSScotland National Cleaning Services Specification Guide for NHSScotland Managers - Version 2, April 2010<sup>3</sup>

## 4. Staff Training and Development

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### Introduction

- 4.1 The National Education and Training Framework for Domestic Services can be found on the following website. <http://www.hfs.scot.nhs.uk/>

In June 2013, NHS Education for Scotland (NES) and Health Facilities Scotland (HFS) published the Education Pathways for Estates Services and the Education Pathways for Facilities Services<sup>4</sup>. The Pathways are designed to help staff access the learning and qualifications which are most appropriate to their role, their career aspirations and to the service as a whole. They provide national tools to support succession, service and personal development planning in estates and facilities services across NHSScotland.

### Review of Training Programmes

- 4.2 Training programmes for all grades of Domestic Services staff, including Operatives and Supervisors, should be developed along with their Personal Development Plans (PDPs).

A record of all training must be maintained and refresher training provided to all staff on a regular basis.

The content of training programmes must be subject to regular review and updates so that best practice, new developments and any legislative changes are incorporated.

To further promote and underpin consistency in training, it is recommended that there should be national reference materials/packages available throughout NHSScotland, i.e. the NHSScotland National Education and Training Framework for Domestic Services.

### Summary

- 4.3 Staff training and development is a core activity in any department involved in Domestic Services and a structured approach to training should be developed and controlled by an appropriate Service Manager, with direct input from Infection Prevention and Control Teams and other relevant Healthcare Professionals where required.

## 5. General Guidance

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### Infection Prevention and Control

- 5.1 The National Infection Prevention and Control Manual<sup>5</sup> was first published in January 2012 by the Chief Nursing Officer (CNO) and is mandatory for use throughout NHSScotland.

Standard Infection Control Precautions (SICPs), referred to in this document, are intended for use by all staff, in all care settings, at all times, for all patients, whether infection is known to be present or not. This is to ensure the safety of those being cared for and including staff and visitors.

SICPs are the basic infection prevention and control measures necessary to reduce the risk of transmission of micro-organisms from recognised and unrecognised sources of infection. These sources of (potential) infection include blood and other bodily fluids, secretions or excretions (excluding sweat), non-intact skin or mucous membranes and any equipment or items in the Care Environment that are likely to become contaminated.

The application of SICPs during care delivery is determined by the assessment of risk and includes the task/level of interaction and/or the anticipated level of exposure to blood or other body fluids.

The ten elements of SICPs are:

1. Patient Placement/Assessment for infection risk
2. Hand Hygiene
3. Respiratory and Cough Hygiene
4. Personal Protective Equipment (PPE)
5. Safe Management of Care Equipment
6. Safe Management of the Care Environment
7. Safe Management of Linen
8. Safe Management of Blood and Body Fluid Spillages
9. Safe Disposal of Waste (including sharps)
10. Occupational Safety: Prevention and Exposure Management (including sharps)

## Equipment Colour Coding

- 5.2 Health Facilities Scotland reviewed the National Colour Coding Programme in 2012, stated that while colour coding is required for flat or conventional mopping systems, colour coding is not required for micro-fibre mopping systems that are single use systems. The letter also states that colour coding is not required for single use disposable PPE (i.e. aprons, gloves).

**Red:** Bathrooms, washrooms, showers, toilets, basins and bathroom floors

**Blue:** General areas including wards, all clinical departments, offices

**Green:** Ward kitchen areas and patient food service at ward level

**Yellow:** Isolation areas<sup>1,2</sup>

**Note:** The Colour Coding Programme is a mandatory requirement.

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<sup>1</sup> In Ambulance Services, the vehicle interiors are coded under Yellow

<sup>2</sup> In Ambulance Services, a yellow mop is used for cleaning the Ambulance interior

## 6. Guide to the Cleaning Services Specification

### Introduction

- 6.1 This Section provides guidance on the interpretation and local application of the Cleaning Services Specification. It must be read in conjunction with Section 8, Professional Risk Assessments. The Cleaning Services Specification is based upon the accurate deployment of resources in accordance with the level of risk. There is Generic Risk Assessments developed for each task definition, detailed within Section 8.

### Task Definitions

- 6.2 These are arranged by surface/category to be cleaned and include all relevant tasks. Each surface/category is allocated a number indicating the Task Group number from the original 2009 specification and running from Group 1 - Group 16.

Generic risk assessments have been compiled for each task definition and these can be found in Section 8 of this document.

Task Group	Description
Task Group 1	Floors
Task Group 2	Sanitary Fixtures and Fittings
Task Group 3	Furniture, Fixtures and Fittings
Task Group 4	Low Level Surfaces
Task Group 5	High Level Surfaces
Task Group 6	Telephones and Patient Entertainment Systems (as per local policy) <sup>3</sup>
Task Group 7	Paintwork
Task Group 8	Glass Partitions, Panels and Wall Finishes
Task Group 9	Curtains and Screens
Task Group 10	Window Blinds
Task Group 11	Cleaning Dispensers and Replenishing Consumables
Task Group 12	Waste Collection and Disposal
Task Group 13	Cleaning Equipment
Task Group 14	Ambulances and Other Patient Transport Vehicles
Task Group 15	No longer required
Task Group 16	Ward Kitchen/Pantry Appliances

<sup>3</sup> i.e. televisions

## 7. Cleaning Services Area Guidance

### Introduction

- 7.1 The NHSScotland National Cleaning Services Specification 2009 had areas listed under coding from A - M and the decision to split these was made due to the high level of overlap.

Clinical	Non-Clinical
Ward bed area	Offices
Single patient room	Lecture rooms
Consult/treatment/clean utility room	Corridors
Dirty utility	Stairs
Day rooms/recreation	Lifts
Ward sanitary area	Fire escape stairs
Single room en-suite	Staff rest room/pantry/kitchen
Ward pantry/kitchen (not production kitchen)	Shops/banks
Ward store rooms	Workshops
Ward dining rooms	Residential private areas (bedrooms)
Ward corridors, ward offices	Public toilets/mother and baby rooms/residential bath/shower and WC
Domestic Services Room (DSR)	Residential kitchen
High risk in-patient	On call rooms/relatives rooms
Rehabilitation pools	Residential communal areas
Reception areas	Cafeterias
Staff sanitary facilities	Sanctuary rooms
Staff changing rooms	Entrances to non-patient care area
Therapy workshops, i.e. plaster rooms, orthotics, hairdressers etc	Foyers/public communal areas
Waiting areas	DSR
Theatre/ICU/NICU/CCU/HDU/SCBU	Waiting area
Laboratory/pharmacy including dispensary, aseptic wards	
Sterile services	
Sterile services-wash room	
Ambulances and other patient transport vehicles***	
Isolation room	
Theatre lifts	

\*\*\*Within ambulance stations the majority of areas are considered non-clinical with the exception of: laundry, sluice, consumable storage, staff changing and sanitary facilities.

## Index of Monitoring Codes

7.2

Within this section below, the alphanumeric coding structure has not been removed because of their continued relationship with the NHS Scotland Facilities Monitoring Tool. Each room type has an alphanumeric specification code, e.g. a Domestic Services Room (DSR) has the specification code A12. The listings below shown as Clinical and Non Clinical should simplify the structure for the end user.

### Clinical: In-Patient Acute

Example: Bed Areas, Day Room, Clinical Clean and Dirty Utility Area, Wards, Corridor and Stairs

Alphanumeric Code	Room Type	Area
A1	Bed Area/Day room/Clinical clean and Dirty utility areas/Ward Corridor and Stairs	In-patient Ward
A3	Sanitary Area	In-patient Ward
A5	Ward Pantry/Kitchen	In-patient Ward
A6	Offices	In-patient Ward
A8	Store Room	In-patient Ward
A10	Dining Room	In-patient Wards
D7	Entrance/steps/ramps	Wards/Departments
D9	Staff changing/sanitary areas	Wards/Departments
D17	Fire Escape stairs	In-patient wards
A12	Domestic Services Room (DSR)	All Areas

## Clinical: High Risk Patient Areas

Example: Intensive Care Units (ICU), Cardiac Care Units (CCU), Renal, High Dependency Units (HDU), Oncology, Haematology, Orthopaedics, Cardio Thoracic, Neuro Surgery, Infectious Diseases Unit and A & E, Admission Units and Neonatal and Special Care Baby Units

Alphanumeric Code	Room Type	Area
B1	Bed Area/A&E Treatment Area/Day room/Clinical clean and Dirty utility areas/Ward Corridor and Stairs	In-patient Ward
A3	Sanitary Area	In-patient Ward
A5	Ward Pantry/Kitchen	In-patient Ward
A6	Offices	In-patient Ward
A8	Store Room	In-patient Ward
A10	Dining Room	In-patient Ward
D7	Entrance/steps/ramps	Wards/Departments
D9	Staff changing/sanitary areas	Wards/Departments
D17	Fire Escape stairs	In-patient wards
A12	DSR	All Areas

## Clinical: In-Patient Continuing Care

Example: In-Patient Wards, Continuing Care

Alphanumeric Code	Room Type	Area
C11	Day Room/Day Dining Room/Recreation	In-patient Ward
A1	Bed Area/Day room/Clinical clean and dirty utility areas/Ward Corridor and Stairs	In-patient Ward
A3	Sanitary Area	In-patient Ward
A5	Ward Pantry/Kitchen	In-patient Ward
A6	Offices	In-patient Ward
A8	Store Room	In-patient Ward
A10	Dining Room	In-patient Ward
D7	Entrance/steps/ramps	Wards/Departments
D9	Staff changing/sanitary areas	Wards/Departments
D17	Fire escape stairs	In-patient wards
A12	DSR	All Areas

## Clinical: Departments

Example: Treatment Rooms, Consulting Rooms, Patient Changing, Clinical Clean and Dirty Utility area, Domestic Services Rooms etc.

Alphanumeric Code	Room Type	Area
D1	Treatment Room/Patient Changing/Clinical Clean/Dirty Utility areas	Consulting Room/ Departments
D2	Sanitary Area/rehabilitation pool	Departments
D3	Office/reception area/lecture rooms/meeting rooms/corridors/stairs and lifts	Departments
D7	Entrance/steps and ramps	Wards/Departments
D9	Staff Changing/Sanitary Area	Departments
D14	Clinical Workshop	Departments
D16	Store	Departments
D17	Fire escape stairs	Wards/Departments
E13	Pantry	Departments
A12	DSR	All areas

## Non Clinical: Departments

Example: Offices and Computer Services

Alphanumeric Code	Room Type	Area
E3	Office and computer services non-clinical	Departments
D3	Office/reception area/lecture rooms/meeting rooms/corridors/stairs and lifts	Departments
E10	Staff Dining Room/Coffee Lounge	Departments
E11	Tea Bar/Cafeteria	Departments
E12	Shop/Bank	Departments
E13	Pantry	Departments
E15	Workshop – Works Dept	Departments
D7	Entrance/steps/ramps	Wards/Departments
D9	Staff Changing/Sanitary Area	Departments
D16	Store	Departments
D17	Fire Escape stairs	Departments
A12	DSR	All areas

## Non Clinical: Residential Accommodation

Example: Bedrooms, Bed Sitting Rooms, Private Sitting Rooms and Offices, Sanitary Areas, Utility Areas

Alphanumeric Code	Room Type	Area
F1	Bedroom, Sitting Room, Private Sitting Room, Office, Sanitary, utility	Residential Accommodation
F2	Sanitary Area – Communal	Residential Accommodation
F4	Pantry/Kitchen	Residential Accommodation
F5	On Call Room/Relatives Room	Residential Accommodation
F6	Communal Stairs, Corridor, Entrance, Sitting Room, Recreation Room	Residential Accommodation
A12	DSR	All areas

## Clinical: Clinic and Health Centres

Example: Consulting Rooms, Treatment Rooms, Dirty Utility, Domestic Services Room, Dispensaries, Corridors, Waiting Areas, Entrances, Lifts and Stairs

Alphanumeric Code	Room Type	Area
G1	Consulting Room/Clinic Treatment Room/corridors/waiting areas/entrances/lifts and stairs/Clinically Clean and Dirty Utility Areas/workshops and dispensaries/Day room (for day hospitals)	Clinics/Health Centres
G3	Public and patient changing sanitary areas and staff rest rooms	Clinics/Health Centres
G7	Office	Clinics/Health Centres
G10	High risk Treatment Room	Clinics/Health Centres
D16	Store	Clinics/Health Centres
D17	Fire Escape Stairs	Clinics/Health Centres
E13	Pantry	Clinics/Health Centres
I4	Local Decontamination Room	Clinics/Health Centres
A12	DSR	All areas

## Clinical: Very High Risk Patient Areas

Example: Theatres, Transplant and Bone Marrow Units, Day Surgery

Alphanumeric Code	Room Type	Area
H1	Theatre/associated anterooms, Transplant Unit, Bone Marrow	Very High Risk
H2	Corridors within theatres, Transplant Units and Bone Marrow	Very High Risk
A3	Sanitary	In-Patient ward
A6	Office	In-Patient ward
A5	Ward Pantry/Kitchen	In-Patient ward
E10	Staff lounge	Departments
A12	DSR	All areas

## Clinical: Laboratory, Pharmacy, CDU and Sterile Fluid Preparation, Sterile Services and Aseptic Units

Alphanumeric Code	Room Type	Area
I1	Laboratory, Pharmacy	
I2	Pharmacy sterile fluid preparation, SSD	
D7	Entrance/steps/ramps	Wards/Departments
D9	Staff Changing/Sanitary Area	Departments
E3	Office and computer services	
E10	Staff lounge	Departments
I3	Clean Room	Sterile Preparation Area/CDU
I4	Wash Room	CDU
A12	DSR	All Areas
D2	Sanitary Area	
D3	Office/reception area/lecture rooms/meeting rooms/corridors/stairs and lifts	
D14	Clinical Workshop	Outer Areas
D16	Store	
E13	Staff Kitchen Area	
H2	Changing Accommodation	Clean Room, Changing Area

### Clinical: Ambulances and other patient transport vehicles

Alphanumeric Code	Type	Area
J1	Ambulance and other patient transport vehicles	Vehicle departments

### Clinical: Isolation Clean

Alphanumeric Code	Type	Area
K	Isolation Clean	In-patient area

### Clinical: Discharge Clean

Alphanumeric Code	Type	Area
L	Discharge Clean	In-patient area

### Clinical: Terminal Clean

Alphanumeric Code	Type	Area
M	Terminal Clean	In-patient area

## 8. Professional Risk Assessments

The Risk Assessments are based on the:

- Infection Risk vs. Public Perception Risk and are measured against a 3x3 matrix, taken from the PAS 5748:2014 publication;<sup>6</sup>
- these Risk Assessments DO NOT take over the requirement for NHS Boards to maintain their own Health and Safety Risk Assessments.

The Risk Assessments have been developed for each cleaning task detailed in the NCSS that may be required within NHSScotland In-Patient and Out-Patient Care Facilities. These nationally developed and agreed Risk Assessments enable the organisation to confidently demonstrate, by reference to the Task Risk Assessment, the need to vary the frequency or prioritise tasks in the case of contingency.

These Risk Assessments are measured on two categories which are as follows:

- Infection Prevention and Control;
- Perception and Confidence Risk. (Patients, Staff and Visitors).

Infection risk	3	3	6	9
	2	2	4	6
	1	1	2	3
		1	2	3
Perception risk				

Elements carry a certain risk irrespective of where they are. A toilet for instance carries a high risk for both infection and confidence. A ceiling is a low risk for infection, but a high risk for confidence. Boards are required to assess elements on a three point numeric scale for infection and confidence risk with the combined outcomes expressed as Red, Amber or Green (RAG).

Likewise, for some parts of a site, the risk of poor standards of cleaning is greater than in others. A poorly cleaned main entrance carries a particular risk of damaging confidence. Functional areas are also risk assessed on a similar, three point numeric and then RAG-rated basis.

**Note:** Risk Assessments cannot guarantee a specific standard of cleanliness within any given area as the impact would vary depending on several local contributory factors. It remains the responsibility, locally, to monitor each area on an on-going basis and amend frequency of tasks accordingly to achieve an acceptable quality output.

	Bed area/day room/clinical clean and dirty utility areas/ward corridor and stairs			Sanitary Area			Ward Pantry/Kitchen			Offices			Store room			Dining room			Domestic Service Room (DSR)		
Cleaning Specification Code	A1			A3			A5			A6			A8			A10			A12		
Item Checked	IC	PP	RAG	IC	PP	RAG	IC	PP	RAG	IC	PP	RAG	IC	PP	RAG	IC	PP	RAG	IC	PP	RAG
Floors	1	3	3	1	3	3	1	3	3	1	2	2	1	1	1	1	3	3	1	2	2
Toilet/Wash hand basin/sink	3	3	9	3	3	9	3	3	9	3	3	9	3	3	9	3	3	9	3	3	9
Furniture and Fittings	3	3	9	3	3	9	3	3	9	2	1	2	2	1	2	3	3	9	3	3	9
Low Level	1	3	3	1	3	3	1	2	2	1	1	1	1	1	1	1	2	2	1	3	3
High Level	1	3	3	1	2	2	1	2	2	1	1	1	1	1	1	1	2	2	1	3	3
Telephones	2	3	6							2	2	4	2	1	2	2	3	6			
Paintwork	1	3	3	1	2	2	1	1	1	1	1	1	1	1	1	1	2	2	1	2	2
Glasswork	1	3	3	1	2	2	1	1	1	1	1	1	1	1	1	1	2	2	1	2	2
Curtains and Screens	2	3	6	2	3	6				1	1	1	2	1	2	2	3	6	1	1	1
Window Blinds	1	1	1	1	2	2	1	1	1	1	1	1	1	1	1	1	1	1	1	2	2
Soap/Handtowels	3	3	9	3	3	9	3	3	9	3	3	9	3	3	9	3	3	9	3	3	9
Refuse	2	3	6	2	3	6	2	3	6	1	1	1	2	1	2	2	3	6	2	3	6
Cleaning Equipment																			3	3	9
Appliances							2	2	4												

	Bed area/day room/clinical clean and dirty utility areas/ward corridor and stairs			Day room/day dining room/recreation			Treatment room/patients changing/clinical clean/dirty utility areas			Sanitary area/rehabilitation pool			Office/reception area/lecture rooms/meeting rooms/corridors/stairs and lifts			Entrance/steps/ramps			Staff changing/sanitary area		
Cleaning Specification Code	B1			C11			D1			D2			D3			D7			D9		
Item Checked	IC	PP	RAG	IC	PP	RAG	IC	PP	RAG	IC	PP	RAG	IC	PP	RAG	IC	PP	RAG	IC	PP	RAG
Floors	1	3	3	1	3	3	1	3	3	1	3	3	1	2	2	1	3	3	1	2	2
Toilet/Wash hand basin/sink	3	3	9	3	3	9	3	3	9	3	3	9	3	3	9	3	3	9	3	3	9
Furniture and Fittings	3	3	9	3	3	9	3	3	9	3	3	9	2	1	2	2	3	6	3	1	9
Low Level	1	3	3	1	3	3	1	3	3	1	3	3	1	1	1	1	2	2	1	1	1
High Level	1	3	3	1	3	3	1	3	3	1	3	3	1	1	1	1	2	2	1	1	1
Telephones	2	3	6	2	3	6	2	3	6				2	2	4	2	3	6	2	1	2
Paintwork	1	3	3	1	2	2	1	2	2	1	2	2	1	1	1	1	2	2	1	1	1
Glasswork	1	3	3	1	2	2	1	2	2	1	2	2	1	1	1	1	2	2	1	1	1
Curtains and Screens	2	3	6	2	3	6	2	3	6	2	3	6	1	1	1	1	2	2	2	1	2
Window Blinds	1	2	2	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
Soap/Handtowels	3	3	9	3	3	9	3	3	9	3	3	9	3	3	9	3	3	9	3	3	9
Refuse	2	3	6	2	3	6	2	3	6	2	3	6	1	1	1	2	3	6	2	2	4
Cleaning Equipment																					
Appliances																					

	Clinical workshop			Store			Fire escape stairs			Office and computer services non-clinical			Staff dining room/coffee lounge			Tea bar/cafeteria			Shop/bank		
Cleaning Specification Code	D14			D16			D17			E3			E10			E11			E12		
Item Checked	IC	PP	RAG	IC	PP	RAG	IC	PP	RAG	IC	PP	RAG	IC	PP	RAG	IC	PP	RAG	IC	PP	RAG
Floors	1	2	2	1	1	1	1	2	2	1	1	1	2	2	4	2	2	4	1	2	2
Toilet/Wash hand basin/sink	3	3	9	3	3	9							3	3	9	3	3	9			
Furniture and Fittings	2	1	2	2	1	2	1	2	2	1	1	1	2	2	4	2	2	4			
Low Level	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	2	2	1	2	2
High Level	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	2	2	1	2	2
Telephones	2	1	2	2	1	2				2	1	2	2	1	2	2	2	4			
Paintwork	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	2	2	1	2	2
Glasswork	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	2	2
Curtains and Screens	2	1	2	2	1	2				1	1	1	1	1	1	1	2	2	1	2	2
Window Blinds	1	1	1	1	1	1				1	1	1	1	1	1	1	1	1	1	1	1
Soap/Handtowels	3	3	9	3	3	9							3	3	9	3	3	9			
Refuse	2	1	2	2	1	2				2	1	2	2	2	4	2	2	4	2	2	4
Cleaning Equipment																					
Appliances																					

	Pantry			Workshops works department			Consulting room/clinic treatment room/corridors/ waiting areas/entrances /lifts and stairs/clinically clean and dirty areas/ workshops and dispensaries			Public and patient changing sanitary areas and staff rest rooms			Office			High risk treatment room			Theatre, transplant unit/bone marrow		
Cleaning Specification Code	E13			E15			G1			G3			G7			G10			H1		
Item Checked	IC	PP	RAG	IC	PP	RAG	IC	PP	RAG	IC	PP	RAG	IC	PP	RAG	IC	PP	RAG	IC	PP	RAG
Floors	2	2	4	1	1	1	1	3	3	1	3	3	1	2	2	1	3	3	2	3	6
Toilet/Wash hand basin/sink	3	3	9	2	1	2	3	3	9	3	3	9	3	3	9	3	3	9	3	3	9
Furniture and Fittings	2	2	4	2	1	2	3	3	9	3	3	9	2	1	2	3	3	9	3	3	9
Low Level	1	1	1	1	1	1	1	3	3	1	3	3	1	1	1	1	3	3	2	3	6
High Level	1	1	1	1	1	1	1	3	3	1	2	2	1	1	1	1	3	3	2	3	6

	Pantry			Workshops works department			Consulting room/clinic treatment room/corridors/ waiting areas/entrances /lifts and stairs/clinically clean and dirty areas/workshop s and dispensaries			Public and patient changing sanitary areas and staff rest rooms			Office			High risk treatment room			Theatre, transplant unit/bone marrow		
Cleaning Specification Code	E13			E15			G1			G3			G7			G10			H1		
Item Checked	IC	PP	RAG	IC	PP	RAG	IC	PP	RAG	IC	PP	RAG	IC	PP	RAG	IC	PP	RAG	IC	PP	RAG
Telephones	2	1	2	2	1	2	2	3	6				2	2	4	2	3	6	2	3	6
Paintwork	1	1	1	1	1	1	1	2	2	1	2	2	1	1	1	1	2	2	2	3	6
Glasswork	1	1	1	1	1	1	1	2	2	1	2	2	1	1	1	1	2	2	2	3	6
Curtains and Screens	1	1	1				2	3	6	2	3	6	1	1	1	2	3	6	2	3	6
Window Blinds	1	1	1	1	1	1	1	1	1	1	2	2	1	1	1	1	1	1	1	2	2
Soap/Handtowels	3	3	9	3	3	9	3	3	9	3	3	9	3	3	9	3	3	9	3	3	9
Refuse	2	2	4	2	1	2	2	3	6	2	3	6	1	1	1	2	3	6	2	3	6
Cleaning Equipment																					
Appliances																					

	Changing accommodation and corridors			Laboratory, pharmacy			Pharmacy sterile fluid, aseptic suite preparation/SSD			Clean room			Wash room			Ambulance vehicle		
Cleaning Specification Code	H2			I1			I2			I3			I4			J1		
Item Checked	IC	PP	RAG	IC	PP	RAG	IC	PP	RAG	IC	PP	RAG	IC	PP	RAG	IC	PP	RAG
Floors	2	3	6	2	2	4	3	3	9	2	2	4	2	2	4	1	3	3
Toilet/Wash hand basin/sink	3	3	9	3	3	9	3	3	9	3	3	9	3	3	9			
Furniture and Fittings	3	2	6	3	3	9	3	3	9	3	3	9	3	3	9	3	3	9
Low Level	2	2	4	2	2	4	3	3	9	2	2	4	2	2	4	1	3	3
High Level	2	2	4	2	2	4	3	3	9	2	2	4	2	2	4	1	3	3
Telephones	2	3	6	2	3	6	3	3	9	2	3	6	2	3	6	2	2	4
Paintwork	1	2	2	2	1	2	3	3	9	2	1	2	2	1	2	1	3	3
Glasswork	2	2	4	1	1	1	3	3	9	1	1	1	1	1	1	1	3	3
Curtains and Screens	2	3	6															
Window Blinds	1	1	1	1	1	1	3	3	9	1	1	1	1	1	1	1	1	1
Soap/Handtowels	3	3	9	3	3	9	3	3	9	3	3	9	3	3	9	3	3	9
Refuse	2	3	6	2	2	4	3	3	9	2	2	4	2	2	4	2	2	4
Cleaning Equipment																		
Appliances																		

Generic Risk Assessments have been compiled to be used during the following scenarios to:

- develop a safe system of work to ensure that appropriate resources are deployed;
- change the designated use within a particular area causing need for increased or decreased cleaning frequencies, e.g. theatres, A&E and over-flow wards;
- develop Work Schedules in order to effectively deploy resources;
- to support cases for increasing manpower or to support transferring staffing resources from lower risk areas to higher risk areas/tasks.

Risk Assessment number: .....

## Generic Risk Assessment for Cleaning Floors

Unique ID	Associated risks <i>If the hazard is not controlled or removed</i>	Persons affected	What are the current control measures  <i>Provide details of control measures already in place. If measures are detailed in other documents, state where</i>	What, if any, further control measures are required  <i>Note the action required, responsible person and target date</i>	Risk Rating <i>Clinical area</i>	Risk Rating <i>Non-Clinical area</i>
Floor cleaning	<ul style="list-style-type: none"> <li>- slips, trips and falls</li> <li>- HAI and reputational risk</li> <li>- loss of confidence if public see dirty floors (public perception risk)</li> <li>- complaints</li> <li>- poor publicity</li> <li>- negative environmental audits and HEI inspection reports</li> <li>- damaged or poorly maintained floors prohibits effective cleaning</li> <li>- routine cleaning duties are overlooked due to additional ad hoc work</li> </ul>	<ul style="list-style-type: none"> <li>- patients</li> <li>- staff</li> <li>- visitors</li> <li>- contractors</li> </ul>	<ul style="list-style-type: none"> <li>- NHSScotland National Cleaning Services Specification and incorporated SOPs</li> <li>- monitoring</li> <li>- responding to audit results</li> <li>- training and retraining of staff</li> <li>- supervision</li> <li>- appropriately maintained equipment</li> <li>- National Infection Prevention and Control Manual</li> <li>- communication links between facilities and nursing staff</li> </ul>	<ul style="list-style-type: none"> <li>- clear guidance must be available in each ward department to identify where additional tasks are requested to be carried out</li> <li>- continued review of national guidance</li> <li>- review and analyse audit results from NHSScotland Facilities Monitoring Tool</li> <li>- develop generic action plan within the system identifying increased cleaning if required</li> </ul>	Amber	Amber

Risk Assessment number: .....

## Generic Risk Assessment for Low Level Surfaces

Unique ID	Associated risks <i>If the hazard is not controlled or removed</i>	Persons affected	What are the current control measures  <i>Provide details of control measures already in place. If measures are detailed in other documents, state where</i>	What, if any, further control measures are required  <i>Note the action required, responsible person and target date</i>	Risk Rating <i>Clinical area</i>	Risk Rating <i>Non-Clinical area</i>
Low Level	<ul style="list-style-type: none"> <li>- HAI and reputational risk</li> <li>- loss of confidence if public see dirty low level surfaces (public perception risk)</li> <li>- complaints</li> <li>- poor publicity</li> <li>- negative environmental audits and HEI Inspection Reports</li> <li>- inability to clear debris – transfer to equipment and patient contamination</li> <li>- damaged or poorly maintained low level surfaces prohibits effective cleaning</li> <li>- routine cleaning duties are overlooked due to additional ad hoc work</li> </ul>	<ul style="list-style-type: none"> <li>- patients</li> <li>- staff</li> <li>- visitors</li> <li>- contractors</li> </ul>	<ul style="list-style-type: none"> <li>- NHSScotland National Cleaning Services Specification and incorporated SOPs</li> <li>- monitoring</li> <li>- responding to audit results</li> <li>- training and retraining of staff</li> <li>- supervision</li> <li>- appropriately maintained equipment</li> <li>- National Infection Prevention and Control Manual</li> <li>- communication links between facilities and nursing staff</li> </ul>	<ul style="list-style-type: none"> <li>- clear guidance must be available in each ward department to identify where additional tasks are requested to be carried out</li> <li>- continued review of national guidance</li> <li>- review and analyse audit results from NHSScotland Facilities Monitoring Tool</li> <li>- develop generic action plan within the system identifying increased cleaning if required</li> </ul>	Amber	Green

Risk Assessment number: .....

### Generic Risk Assessment for High Level Surfaces

Unique ID	Associated risks <i>If the hazard is not controlled or removed</i>	Persons affected	What are the current control measures  <i>Provide details of control measures already in place. If measures are detailed in other documents, state where</i>	What, if any, further control measures are required  <i>Note the action required, responsible person and target date</i>	Risk Rating <i>Clinical area</i>	Risk Rating <i>Non-Clinical area</i>
High Level	<ul style="list-style-type: none"> <li>- HAI and reputational risk</li> <li>- loss of confidence if public see dirty high level surfaces (public perception risk)</li> <li>- complaints</li> <li>- poor publicity</li> <li>- negative HEI Inspection reports</li> <li>- spillage</li> <li>- damaged or poorly maintained high level surfaces prohibits effective cleaning</li> <li>- falling debris - equipment and patient contamination</li> <li>- routine cleaning duties are overlooked due to additional ad hoc work</li> </ul>	<ul style="list-style-type: none"> <li>- patients</li> <li>- staff</li> <li>- visitors</li> <li>- contractors</li> </ul>	<ul style="list-style-type: none"> <li>- NHSScotland National Cleaning Services Specification and incorporated SOPs</li> <li>- monitoring</li> <li>- responding to audit results</li> <li>- training and retraining of staff</li> <li>- supervision</li> <li>- appropriately maintained equipment</li> <li>- National Infection Prevention and Control Manual</li> <li>- communication links between facilities and nursing staff</li> </ul>	<ul style="list-style-type: none"> <li>- clear guidance must be available in each ward department to identify where additional tasks are requested to be carried out</li> <li>- continued review of national guidance</li> <li>- review and analyse audit results from NHSScotland Facilities Monitoring Tool</li> <li>- develop generic action plan within the system identifying increased cleaning if required</li> </ul>	Amber	Green

Risk Assessment number: .....

## Generic Risk Assessment for Paintwork

Unique ID	Associated risks <i>If the hazard is not controlled or removed</i>	Persons affected	What are the current control measures <i>Provide details of control measures already in place. If measures are detailed in other documents, state where</i>	What, if any, further control measures are required <i>Note the action required, responsible person and target date</i>	Risk Rating <i>Clinical area</i>	Risk Rating <i>Non-Clinical area</i>
Paintwork	<ul style="list-style-type: none"> <li>- HAI and reputational risk</li> <li>- loss of confidence if public see dirty paintwork (public perception risk)</li> <li>- damaged or poorly maintained paintwork prohibits effective cleaning</li> <li>- routine cleaning duties are overlooked due to additional ad hoc work</li> </ul>	<ul style="list-style-type: none"> <li>- patients</li> <li>- staff</li> <li>- visitors</li> <li>- contractors</li> </ul>	<ul style="list-style-type: none"> <li>- NHSScotland National Cleaning Services Specification and incorporated SOPs</li> <li>- monitoring</li> <li>- responding to audit results</li> <li>- training and retraining of staff</li> <li>- supervision</li> <li>- appropriately maintained equipment</li> <li>- National Infection Prevention and Control Manual</li> <li>- communication links between facilities and nursing staff</li> </ul>	<ul style="list-style-type: none"> <li>- clear guidance must be available in each ward department to identify where additional tasks are requested to be carried out</li> <li>- continued review of national guidance</li> <li>- review and analyse audit results from NHSScotland Facilities Monitoring Tool</li> <li>- develop generic action plan within the system identifying increased cleaning if required</li> </ul>	Amber	Green

Risk Assessment number: .....

## Generic Risk Assessment for Internal Glasswork

Unique ID	Associated risks <i>If the hazard is not controlled or removed</i>	Persons affected	What are the current control measures  <i>Provide details of control measures already in place. If measures are detailed in other documents, state where</i>	What, if any, further control measures are required  <i>Note the action required, responsible person and target date</i>	Risk Rating <i>Clinical area</i>	Risk Rating <i>Non-Clinical area</i>
Glasswork	<ul style="list-style-type: none"> <li>- HAI and reputational risk</li> <li>- loss of confidence if public see dirty glasswork (public perception risk)</li> <li>- complaints</li> <li>- poor publicity</li> <li>- negative environmental audits and HEI inspection Reports</li> <li>- damaged or poorly maintained glasswork prohibits effective cleaning</li> <li>- routine cleaning duties are overlooked due to additional ad hoc work</li> </ul>	<ul style="list-style-type: none"> <li>- patients</li> <li>- staff</li> <li>- visitors</li> <li>- contractors</li> </ul>	<ul style="list-style-type: none"> <li>- NHSScotland National Cleaning Services Specification and incorporated SOPs</li> <li>- monitoring</li> <li>- responding to audit results</li> <li>- training and retraining of staff</li> <li>- supervision</li> <li>- appropriately maintained equipment</li> <li>- National Infection Prevention and Control Manual</li> <li>- communication links between facilities and nursing staff</li> </ul>	<ul style="list-style-type: none"> <li>- clear guidance must be available in each ward department to identify where additional tasks are requested to be carried out</li> <li>- continued review of national guidance</li> <li>- review and analyse audit results from NHSScotland Facilities Monitoring Tool</li> <li>- develop generic action plan within the system identifying increased cleaning if required</li> </ul>	Amber	Green

Risk Assessment number: .....

## Generic Risk Assessment for Curtains and Screens

Unique ID	Associated risks <i>If the hazard is not controlled or removed</i>	Persons affected	What are the current control measures <i>Provide details of control measures already in place. If measures are detailed in other documents, state where</i>	What, if any, further control measures are required <i>Note the action required, responsible person and target date</i>	Risk Rating Clinical area	Risk Rating Non-Clinical area
Curtains and Screens	<ul style="list-style-type: none"> <li>- HAI and reputational risk</li> <li>- loss of confidence if public see dirty curtains and screens (public perception risk)</li> <li>- lack of privacy and dignity</li> <li>- general appearance</li> <li>- lack of replacement curtain</li> <li>- damaged or poorly maintained curtains and screens prohibits effective cleaning</li> <li>- routine cleaning duties are overlooked due to additional ad hoc work</li> </ul>	<ul style="list-style-type: none"> <li>- patients</li> <li>- staff</li> <li>- visitors</li> <li>- contractors</li> </ul>	<ul style="list-style-type: none"> <li>- NHSScotland National Cleaning Services Specification and incorporated SOPs</li> <li>- monitoring</li> <li>- responding to audit results</li> <li>- training and retraining of staff</li> <li>- supervision</li> <li>- appropriately maintained equipment</li> <li>- National Infection Prevention and Control Manual</li> <li>- communication links between facilities and nursing staff</li> </ul>	<ul style="list-style-type: none"> <li>- clear guidance must be available in each ward department to identify where additional tasks are requested to be carried out</li> <li>- continued review of national guidance</li> <li>- review and analyse audit results from NHSScotland Facilities Monitoring Tool</li> <li>- develop generic action plan within the system identifying increased cleaning if required</li> </ul>	Amber	Green

Risk Assessment number: .....

## Generic Risk Assessment for Window Blinds

Unique ID	Associated Risks <i>If the hazard is not controlled or removed</i>	Persons affected	What are the current control measures  <i>Provide details of control measures already in place. If measures are detailed in other documents, state where</i>	What, if any, further control measures are required  <i>Note the action required, responsible person and target date</i>	Risk Rating Clinical area	Risk Rating Non-Clinical area
Window Blinds	<ul style="list-style-type: none"> <li>- HAI and reputational risk</li> <li>- loss of confidence if public see stained or marked window blinds (public perception risk)</li> <li>- damaged or poorly maintained window blinds prohibits effective cleaning</li> <li>- routine cleaning duties are overlooked due to additional ad hoc work</li> </ul>	<ul style="list-style-type: none"> <li>- patients</li> <li>- staff</li> <li>- visitors</li> <li>- contractors</li> </ul>	<ul style="list-style-type: none"> <li>- NHSScotland National Cleaning Services Specification and incorporated SOPs</li> <li>- monitoring</li> <li>- responding to audit results</li> <li>- training and retraining of staff</li> <li>- supervision</li> <li>- appropriately maintained equipment</li> <li>- National Infection Prevention and Control Manual</li> <li>- communication links between facilities and nursing staff</li> </ul>	<ul style="list-style-type: none"> <li>- clear guidance must be available in each ward department to identify where additional tasks are requested to be carried out</li> <li>- continued review of national guidance</li> <li>- review and analyse audit results from NHSScotland Facilities Monitoring Tool</li> <li>- develop generic action plan within the system identifying increased cleaning if required</li> </ul>	Amber	Green

Risk Assessment number: .....

## Generic Risk Assessment for Sanitary Fixtures and Fittings

Unique ID	Associated risks <i>If the hazard is not controlled or removed</i>	Persons affected	What are the current control measures <i>Provide details of control measures already in place. If measures are detailed in other documents, state where</i>	What, if any, further control measures are required <i>Note the action required, responsible person and target date</i>	Risk Rating <i>Clinical area</i>	Risk Rating <i>Non-Clinical area</i>
Sanitary Fixtures and Fittings	<ul style="list-style-type: none"> <li>- HAI and reputational risk</li> <li>- loss of confidence if public and patients see dirty/damaged sanitary fixtures and fittings (public perception risk)</li> <li>- Inability to clean therefore risk of infection/cross contamination</li> <li>- damaged or poorly maintained sanitary fixtures and fittings prohibits effective cleaning</li> <li>- routine cleaning duties are overlooked due to additional ad hoc work</li> </ul>	<ul style="list-style-type: none"> <li>- patients</li> <li>- staff</li> <li>- visitors</li> <li>- contractors</li> </ul>	<ul style="list-style-type: none"> <li>- NHSScotland National Cleaning Services Specification and incorporated SOPs</li> <li>- monitoring</li> <li>- responding to audit results</li> <li>- training and retraining of staff</li> <li>- supervision</li> <li>- appropriately maintained equipment</li> <li>- National Infection Prevention and Control Manual</li> <li>- communication links between facilities and nursing staff</li> </ul>	<ul style="list-style-type: none"> <li>- clear guidance must be available in each ward department to identify where additional tasks are requested to be carried out</li> <li>- continued review of national guidance</li> <li>- review and analyse audit results from NHSScotland Facilities Monitoring Tool</li> <li>- develop generic action plan within the system identifying increased cleaning if required</li> </ul>	Red	Red

Risk Assessment number: .....

## Generic Risk Assessment for Furniture, Fixtures and Fittings

Unique ID	Associated risks <i>If the hazard is not controlled or removed</i>	Persons affected	What are the current control measures  <i>Provide details of control measures already in place. If measures are detailed in other documents, state where</i>	What, if any, further control measures are required  <i>Note the action required, responsible person and target date</i>	Risk Rating <i>Clinical area</i>	Risk Rating <i>Non-Clinical area</i>
Furnishings, Fixtures and Fittings	<ul style="list-style-type: none"> <li>- HAI and reputational risk</li> <li>- loss of confidence if public see dirty furniture, fixtures or fittings (public perception risk)</li> <li>- increase in complaints</li> <li>- damaged or poorly maintained furniture, fixtures and fittings prohibits effective cleaning</li> <li>- routine cleaning duties are overlooked due to additional ad hoc work</li> </ul>	<ul style="list-style-type: none"> <li>- patients</li> <li>- staff</li> <li>- visitors</li> <li>- contractors</li> </ul>	<ul style="list-style-type: none"> <li>- NHSScotland National Cleaning Services Specification and incorporated SOPs</li> <li>- monitoring</li> <li>- responding to audit results</li> <li>- training and retraining of staff</li> <li>- supervision</li> <li>- appropriately maintained equipment</li> <li>- National Infection Prevention and Control Manual</li> <li>- communication links between facilities and nursing staff</li> </ul>	<ul style="list-style-type: none"> <li>- clear guidance must be available in each ward department to identify where additional tasks are requested to be carried out</li> <li>- continued review of national guidance</li> <li>- review and analyse audit results from NHSScotland Facilities Monitoring Tool</li> <li>- develop generic action plan within the system identifying increased cleaning if required</li> </ul>	Red	Amber

Risk Assessment number: .....

## Generic Risk Assessment for Telephones and Patient Entertainment Systems

Unique ID	Associated risks <i>If the hazard is not controlled or removed</i>	Persons affected	What are the current control measures  <i>Provide details of control measures already in place. If measures are detailed in other documents, state where</i>	What, if any, further control measures are required  <i>Note the action required, responsible person and target date</i>	Risk Rating <i>Clinical area</i>	Risk Rating <i>Non-Clinical area</i>
Telephones and Patient Entertainment Systems	<ul style="list-style-type: none"> <li>- HAI and reputational risk</li> <li>- loss of confidence if public see dirty telephones and patient entertainment equipment (public perception risk)</li> <li>- damaged or poorly maintained telephones and patient entertainment systems prohibits effective cleaning</li> <li>- routine cleaning duties are overlooked due to additional ad hoc work</li> </ul>	<ul style="list-style-type: none"> <li>- patients</li> <li>- staff</li> <li>- visitors</li> <li>- contractors</li> </ul>	<ul style="list-style-type: none"> <li>- NHSScotland National Cleaning Services Specification and incorporated SOPs</li> <li>- monitoring</li> <li>- responding to audit results</li> <li>- training and retraining of staff</li> <li>- supervision</li> <li>- appropriately maintained equipment</li> <li>- National Infection Prevention and Control Manual</li> <li>- communication links between facilities and nursing staff</li> </ul>	<ul style="list-style-type: none"> <li>- clear guidance must be available in each ward department to identify where additional tasks are requested to be carried out</li> <li>- continued review of national guidance</li> <li>- review and analyse audit results from NHSScotland Facilities Monitoring Tool</li> <li>- develop generic action plan within the system identifying increased cleaning if required</li> </ul>	Red	Amber

Risk Assessment number: .....

## Generic Risk Assessment for Cleaning Dispensers and Replenishing Consumables

Unique ID	Associated risks <i>If the hazard is not controlled or removed</i>	Persons affected	What are the current control measures  <i>Provide details of control measures already in place. If measures are detailed in other documents, state where</i>	What, if any, further control measures are required  <i>Note the action required, responsible person and target date</i>	Risk Rating <i>Clinical area</i>	Risk Rating <i>Non-Clinical area</i>
Cleaning and Replenishing Consumables	<ul style="list-style-type: none"> <li>- HAI and reputational risk</li> <li>- loss of confidence if public are unable to access consumables (public perception risk)</li> <li>- inability to decontaminate hands as per SICPs</li> <li>- damaged or poorly maintained cleaning dispensers prohibits effective cleaning</li> <li>- routine cleaning duties are overlooked due to additional ad hoc work</li> </ul>	<ul style="list-style-type: none"> <li>- patients</li> <li>- staff</li> <li>- visitors</li> <li>- contractors</li> </ul>	<ul style="list-style-type: none"> <li>- effective procurement processes</li> <li>- staff training</li> <li>- monitoring</li> <li>- signage/product labelling</li> <li>- stock control</li> <li>- National Infection Prevention and Control Manual</li> <li>- communication links between facilities and nursing staff</li> </ul>	<ul style="list-style-type: none"> <li>- clear guidance must be available in each ward department to identify where additional tasks are requested to be carried out</li> <li>- checking dates: stock rotation</li> <li>- review and analyse audit results from NHSScotland Facilities Monitoring Tool</li> <li>- develop generic action plan within the system identifying increased cleaning if required</li> </ul>	Red	Red

Risk Assessment number: .....

## Generic Risk Assessment for Waste Collection and Disposal

Unique ID	Associated risks <i>If the hazard is not controlled or removed</i>	Persons affected	What are the current control measures  <i>Provide details of control measures already in place. If measures are detailed in other documents, state where</i>	What, if any, further control measures are required  <i>Note the action required, responsible person and target date</i>	Risk Rating <i>Clinical area</i>	Risk Rating <i>Non-Clinical area</i>
Waste Collection and Disposal	<ul style="list-style-type: none"> <li>- HAI and reputational risk</li> <li>- loss of confidence if public see dirty and overflowing waste receptacles (public perception risk)</li> <li>- Infection risk (potentially resulting in an outbreak of infection) (HAI) causing a risk to patients and staff</li> <li>- higher risk associated to clinical waste stream due to contents of the bag</li> <li>- unable to clean appropriately</li> <li>- damaged or poorly maintained waste bins prohibits effective cleaning</li> <li>- routine cleaning duties are overlooked due to additional ad hoc work</li> </ul>	<ul style="list-style-type: none"> <li>- patients</li> <li>- staff</li> <li>- visitors</li> <li>- contractors</li> </ul>	<ul style="list-style-type: none"> <li>- Work schedules identifying the frequency of refuse collection and disposal and the cleaning of receptacles aligned to the output specification</li> <li>- NHSScotland National Cleaning Specification</li> <li>- National Infection Prevention and Control Manual</li> <li>- communication links between facilities and nursing staff</li> </ul>	<ul style="list-style-type: none"> <li>- clear guidance must be available in each ward department to identify where additional tasks are requested to be carried out</li> <li>- continued review of national guidance</li> <li>- review and analyse audit results from NHSScotland Facilities Monitoring Tool</li> <li>- develop generic action plan within the system identifying increased cleaning if required</li> </ul>	Red	Amber

Risk Assessment number: .....

## Generic Risk Assessment for Cleaning Equipment

Unique ID	Associated risks <i>If the hazard is not controlled or removed</i>	Persons affected	What are the current control measures  <i>Provide details of control measures already in place. If measures are detailed in other documents, state where</i>	What, if any, further control measures are required  <i>Note the action required, responsible person and target date</i>	Risk Rating <i>Clinical</i>	Risk Rating <i>Non-Clinical area</i>
Cleaning Equipment	<ul style="list-style-type: none"> <li>- HAI and reputational risk</li> <li>- loss of confidence if public see dirty cleaning equipment (public perception risk)</li> <li>- high risk of cross contamination</li> <li>- inability to clean</li> <li>- not fit for purpose</li> <li>- damaged or poorly maintained cleaning equipment prohibits effective cleaning</li> <li>- routine cleaning duties are overlooked due to additional ad hoc work</li> </ul>	<ul style="list-style-type: none"> <li>- patients</li> <li>- staff</li> <li>- visitors</li> <li>- contractors</li> </ul>	<ul style="list-style-type: none"> <li>- training</li> <li>- supervision</li> <li>- auditing</li> <li>- information sharing through expert groups</li> <li>- procurement replacement programme of damaged equipment</li> <li>- National Infection Prevention and Control Manual</li> <li>- communication links between facilities and nursing staff</li> </ul>	<ul style="list-style-type: none"> <li>- clear guidance must be available in each ward department to identify where additional tasks are requested to be carried out</li> <li>- standardising NHSScotland equipment</li> <li>- research and innovation</li> <li>- communication strategy</li> <li>- review and analyse audit results from NHSScotland Facilities Monitoring Tool</li> <li>- develop generic action plan within the system identifying increased cleaning if required</li> </ul>	Red	Red

Risk Assessment number: .....

## Generic Risk Assessment for Ambulance Vehicles and Ambulance Stations

Unique ID	Associated risks <i>If the hazard is not controlled or removed</i>	Persons affected	What are the current control measures  <i>Provide details of control measures already in place. If measures are detailed in other documents, state where</i>	What, if any, further control measures are required  <i>Note the action required, responsible person and target date</i>	Risk Rating <i>Clinical</i>	Risk Rating <i>Non-Clinical area</i>
Patient Transport Vehicles	<ul style="list-style-type: none"> <li>- HAI and reputational risk</li> <li>- loss of confidence if public see dirty ambulance vehicles (public perception risk)</li> <li>- complaints</li> <li>- negative HEI and internal inspection reports</li> <li>- prohibits effective cleaning</li> <li>- risk of contamination</li> <li>- slips, trips and falls</li> <li>- injury to self and others</li> <li>- damaged or poorly maintained ambulance vehicles prohibits effective cleaning</li> <li>- routine cleaning duties are overlooked due to additional ad hoc work</li> </ul>	<ul style="list-style-type: none"> <li>- patients</li> <li>- staff</li> <li>- escorts</li> <li>- public</li> <li>- external contractors</li> </ul>	<ul style="list-style-type: none"> <li>- NHSScotland National Cleaning Services Specification and incorporated SOPs</li> <li>- service SOPs</li> <li>- monitoring</li> <li>- training and re-training of staff</li> <li>- supervision</li> <li>- maintenance of equipment (tagging, cleaning records)</li> <li>- responsiveness – incident investigations</li> <li>- National Infection Prevention and Control Manual</li> <li>- communication links between facilities and nursing staff</li> </ul>	<ul style="list-style-type: none"> <li>- clear guidance must be available in each ward department to identify where additional tasks are requested to be carried out</li> <li>- fault reporting</li> <li>- observational awareness</li> <li>- review and analyse audit results from NHSScotland Facilities Monitoring Tool</li> <li>- develop generic action plan within the system identifying increased cleaning if required</li> </ul>	Red	Green

Risk Assessment number: .....

## Generic Risk Assessment for Reusable Colour Coded Equipment

Unique ID	Associated risks <i>If the hazard is not controlled or removed</i>	Persons affected	What are the current control measures  <i>Provide details of control measures already in place. If measures are detailed in other documents, state where</i>	What, if any, further control measures are required  <i>Note the action required, responsible person and target date</i>	Risk Rating <i>Clinical</i>	Risk Rating <i>Non-Clinical area</i>
Colour Coding	<ul style="list-style-type: none"> <li>- HAI and reputational risk</li> <li>- loss of confidence if colour coding is not followed correctly (public perception risk)</li> <li>- incorrect use of colour coded equipment could result in an increase of infection (potentially resulting in an outbreak of infection) (HAI) causing a risk to patients and staff</li> <li>- damaged or poorly maintained colour coded equipment prohibits effective cleaning</li> <li>- routine cleaning duties are overlooked due to additional ad hoc work</li> </ul>	<ul style="list-style-type: none"> <li>- patients</li> <li>- staff</li> <li>- visitors</li> <li>- contractors</li> </ul>	<ul style="list-style-type: none"> <li>- information in the National Cleaning Specification stating where each colour should be used</li> <li>- Information on posters displayed in Domestic Services Rooms</li> <li>- When staff commences employment full training is given ensuring they are aware of the NHS Scotland Colour Coding Policy</li> <li>- National Infection Prevention and Control Manual</li> <li>- communication links between facilities and nursing staff</li> </ul>	<ul style="list-style-type: none"> <li>- clear guidance must be available in each ward department to identify where additional tasks are requested to be carried out</li> <li>- more signage and promotion of the NHSScotland Colour Coding Policy</li> <li>- review and analyse audit results from NHSScotland Facilities Monitoring Tool</li> <li>- develop generic action plan within the system identifying increased cleaning if required</li> </ul>	Red	Red

Risk Assessment number: .....

## Generic Risk Assessment for Appliances

Unique ID	Associated risks <i>If the hazard is not controlled or removed</i>	Persons affected	What are the current control measures <i>Provide details of control measures already in place. If measures are detailed in other documents, state where</i>	What, if any, further control measures are required <i>Note the action required, responsible person and target date</i>	Risk Rating <i>Clinical area</i>	Risk Rating <i>Non-Clinical area</i>
Appliances	<ul style="list-style-type: none"> <li>- HAI and reputational risk</li> <li>- loss of confidence if public see dirty appliances (public perception risk)</li> <li>- damaged or poorly maintained appliances prohibits effective cleaning</li> <li>- routine cleaning duties are overlooked due to additional ad hoc work</li> </ul>	<ul style="list-style-type: none"> <li>- patients</li> <li>- staff</li> <li>- visitors</li> <li>- contractors</li> </ul>	<ul style="list-style-type: none"> <li>- national contract</li> <li>- national equipment specification</li> <li>- information sharing through expert groups</li> <li>- training</li> <li>- supervision</li> <li>- auditing</li> <li>- National Infection Prevention and Control Manual</li> <li>- communication links between facilities and nursing staff</li> </ul>	<ul style="list-style-type: none"> <li>- clear guidance must be available in each ward department to identify where additional tasks are requested to be carried out</li> <li>- continued review of national guidance</li> <li>- communication strategy</li> <li>- review and analyse audit results from NHSScotland Facilities Monitoring Tool</li> <li>- develop generic action plan within the system identifying increased cleaning if required</li> </ul>	Amber	Amber

Risk Assessment number: .....

## Generic Risk Assessment for Isolation Clean

Unique ID	Associated risks <i>If cleaning tasks are not carried out</i>	Persons affected	What are the current control measures  <i>Provide details of control measures already in place. If measures are detailed in other documents, state where</i>	What, if any, further control measures are required  <i>Note the action required, responsible person and target date</i>	Risk Rating <i>Clinical area</i>
Isolation Clean	<ul style="list-style-type: none"> <li>- HAI and reputational risk</li> <li>- loss of confidence if public see dirty areas (public perception risk)</li> <li>- not compliant with output specification within NHSScotland National Cleaning Services Specification</li> <li>- complaints</li> <li>- poor publicity</li> <li>- damaged or poorly maintained isolation clean area prohibits effective cleaning</li> <li>- routine cleaning duties are overlooked due to additional ad hoc work</li> </ul>	<ul style="list-style-type: none"> <li>- patients</li> <li>- staff</li> <li>- visitors</li> </ul>	<ul style="list-style-type: none"> <li>- NHSScotland National Cleaning Services Specification and incorporated SOPs</li> <li>- training and retraining of staff in the process and wearing of appropriate PPE</li> <li>- supervision</li> <li>- compliance with National Guidance e.g. National Infection Prevention and Control Manual and colour coding of re-usable equipment section</li> <li>- staff review room/area against generic risk assessment and SOPs and develop frequency of cleaning documented within local work schedules.</li> <li>- communication links between facilities and nursing staff</li> </ul>	<ul style="list-style-type: none"> <li>- clear guidance must be available in each ward department to identify where additional tasks are requested to be carried out</li> <li>- continued review of national guidance and isolation occasion</li> </ul>	Red

Risk Assessment number: .....

## Generic Risk Assessment for Terminal Clean

Unique ID	Associated risks <i>If cleaning tasks are not carried out</i>	Persons affected	What are the current control measures  <i>Provide details of control measures already in place. If measures are detailed in other documents, state where</i>	What, if any, further control measures are required  <i>Note the action required, responsible person and target date</i>	Risk Rating <i>Clinical area</i>
Terminal Clean	<ul style="list-style-type: none"> <li>- HAI and reputational risk</li> <li>- loss of confidence if public see dirty areas (public perception risk)</li> <li>- not compliant with output specification within NHSScotland National Cleaning Services Specification</li> <li>- complaints</li> <li>- poor publicity</li> <li>- damaged or poorly maintained terminal clean area prohibits effective cleaning</li> <li>- routine cleaning duties are overlooked due to additional ad hoc work</li> </ul>	<ul style="list-style-type: none"> <li>- patients</li> <li>- staff</li> <li>- visitors</li> </ul>	<ul style="list-style-type: none"> <li>- NHSScotland National Cleaning Services Specification and incorporated SOPs</li> <li>- training and retraining of staff in the process and wearing of appropriate PPE</li> <li>- supervision</li> <li>- compliance with national guidance e.g. National Infection Prevention and Control Manual</li> <li>- and colour coding of re-usable equipment section</li> <li>- staff review room/area against generic risk assessment and SOPs and develop frequency of cleaning documented within local work schedules.</li> <li>- communication links between facilities and nursing staff</li> </ul>	<ul style="list-style-type: none"> <li>- clear guidance must be available in each ward department to identify where additional tasks are requested to be carried out</li> <li>- continued review of national guidance</li> </ul>	Red

Risk Assessment number: .....

## Generic Risk Assessment for Discharge Clean

Unique ID	Associated risks <i>If cleaning tasks are not carried out</i>	Persons affected	What are the current control measures  <i>Provide details of control measures already in place. If measures are detailed in other documents, state where</i>	What, if any, further control measures are required  <i>Note the action required, responsible person and target date</i>	Risk Rating <i>Clinical area</i>
Discharge Clean	<ul style="list-style-type: none"> <li>- HAI and reputational risk</li> <li>- loss of confidence if public see dirty areas (public perception risk)</li> <li>- Not compliant with output specification within NHSScotland National Cleaning Services Specification</li> <li>- complaints</li> <li>- poor publicity</li> <li>- damaged or poorly maintained discharge clean area prohibits effective cleaning</li> <li>- routine cleaning duties are overlooked due to additional ad hoc work</li> </ul>	<ul style="list-style-type: none"> <li>- patients</li> <li>- staff</li> <li>- visitors</li> </ul>	<ul style="list-style-type: none"> <li>- NHSScotland National Cleaning Services Specification and incorporated SOPs</li> <li>- training and retraining of staff in the process and wearing of appropriate PPE</li> <li>- supervision</li> <li>- compliance with national guidance e.g. National Infection Prevention and Control Manual</li> <li>- and colour coding of re-usable equipment section</li> <li>- staff review room/area against generic risk assessment and SOPs and develop frequency of cleaning documented within local work schedules.</li> <li>- communication links between facilities and nursing staff</li> </ul>	<ul style="list-style-type: none"> <li>- clear guidance must be available in each ward department to identify where additional tasks are requested to be carried out</li> <li>- continued review of national guidance</li> </ul>	Red

## 9. Standard Operating Procedures (SOPs)

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### Introduction

- 9.1 This section details the procedures specific to the tasks which have been risk assessed and describes each step of the activity that needs to be followed to achieve the standard required. It also details the required outcome to ensure consistency across NHSScotland Boards. It is important to emphasise that the required outcome is only achieved **at the point that the cleaning process has been completed**. Due to the nature of healthcare; environments are busy and can become re-contaminated and untidy quickly.

It is the responsibility of each Board/location to ensure that they have the necessary inputs to ensure that a clean, safe and pleasant environment is provided in clinical and public facing areas.

## Soft and Hard Flooring

### Routine cleaning of soft flooring

Routine cleaning of soft floor generally involves removal of debris and suction cleaning of carpeted flooring.

Collect equipment/materials	Detail	Safety and Hygiene
	<ul style="list-style-type: none"> <li>- wet floor sign</li> <li>- suction cleaner (cylinder/upright) including attachments, filters etc</li> <li>- PPE (i.e. apron, gloves, safety goggles etc) as per local policy</li> </ul>	<p>Ensure all equipment is clean prior to use, PAT tested, cables are in good condition, clean and dried prior to return to store</p>
Method	<ul style="list-style-type: none"> <li>- wear appropriate PPE</li> </ul>	<p>Decontaminate hands, prior to wearing appropriate PPE</p>
	<ul style="list-style-type: none"> <li>- remove larger items of debris from floor and dispose of in an appropriate waste stream</li> </ul>	<p>Ensure to follow local procedure when disposing waste into waste streams</p>
	<ul style="list-style-type: none"> <li>- before cleaning takes place, visually inspect the room or area being cleaned; if large objects or furniture can be moved, remove these safely and place out of the way of traffic</li> </ul>	<p>Ensure to follow local Manual Handling Policy to prevent any injury to you or others</p>
	<ul style="list-style-type: none"> <li>- assemble the suction cleaner and check that bag and filters (HEPA if applicable) are in place and serviceable</li> </ul>	
	<ul style="list-style-type: none"> <li>- unwind cable and run the length of cable through your fingers to ensure that there are no breaks in it</li> </ul>	<p>Check the cable is free from splits and plug is not loose or broken</p>
	<ul style="list-style-type: none"> <li>- plug into the nearest available socket and switch on the power</li> </ul>	<p>NEVER place the cable over shoulder</p>
	<ul style="list-style-type: none"> <li>- when suction cleaning stand upright with feet, shoulder width apart and using even strokes, correctly position wet floor sign to identify cleaning task taking place</li> </ul>	<p>Do not move from room to room or run cable across/through doorways causing trip hazard</p> <p>Wet floor sign to raise awareness to patients, visitors and staff</p>
	<ul style="list-style-type: none"> <li>- adjust position on suction cleaner head to suit flooring height</li> </ul>	<p>Bend at the knees to reach under furniture</p>

	Detail	Safety and Hygiene
	- divide area in sections to ensure the whole floor is covered	Ensure the cable stays behind operator when working
	- suction clean the edges and corners using appropriate attachments	
	- return large objects or furniture which were removed prior to the cleaning process taking place	Ensure to follow local Manual Handling Policy to prevent any injury to you and others
	- remove wet floor signs	
	- remove PPE and dispose of in appropriate waste stream	Ensure to follow local procedure when disposing waste into waste streams Decontaminate hands
	- return suction cleaner to DSR	
	- suction clean filters regularly and replace when required; check if bag needs replaced and change as required	
	- remove hose from body; hang separately so that hose is not bent causing stress and weakening	
	- remove head, wash, and leave to dry on paper	
	- clean and wind cable around body of suction cleaner securing the plug	
	- ensure all equipment used is cleaned and stored correctly	Dispose of PPE appropriately and decontaminate hands

### Required Outcome:

Following the cleaning process the required standards are as follows:

- the floor is free from debris, dust, grit;
- inaccessible areas are free from debris and dust;
- barrier matting is free from ingrained debris, dust, grit, stains and chewing gum;
- stains that cannot be removed by suction cleaning should be spot cleaned or deep cleaned using carpet cleaning kit.

## Routine cleaning of hard flooring

Hard floor cleaning applies to all the stages of floor cleaning for all surfaces which might attract dirt, dust and spillages.

- Stage 1:**     *Dust Control Mopping* - applies to the removal of adherent dust and dirt from floor surfaces using Dust Control Mopping equipment.
- Stage 2:**     *Suction Cleaning* - applies to the removal of adherent dust and dirt from floor surfaces using a suction cleaner.
- Stage 3:**     *Damp/Wet Mopping* - removal of floor soil or ingrained dirt using mopping system.
- Stage 4:**     *Scrubbing* - removal of floor soil, ingrained dirt and scuff marks using a floor scrubbing machine.
- Stage 5:**     *Buffing* (where applicable) – provides a uniform, streak free appearance to the floor surface.

## Stage 1: Dust Control Mopping

To ensure the floor is cleaned in a systematic way to reduce the risk of cross infection.

Collect equipment/materials	Detail	Safety and Hygiene
	<ul style="list-style-type: none"> <li>- wet floor sign</li> <li>- mop frame/tool</li> <li>- dust pan and brush if applicable</li> <li>- disposable cloth or reusable or disposable mop head</li> <li>- appropriate bag for soiled mops</li> <li>- PPE (i.e. apron, gloves, safety goggles etc) as per local policy</li> <li>- refuse sack</li> </ul>	Ensure all equipment is clean prior to use and cleaned and dried prior to return to store
Method	- wear appropriate PPE	Decontaminate hands, prior to wearing appropriate PPE
	- remove larger items of debris from floor and dispose of in an appropriate waste stream	Ensure to follow local procedure when disposing waste into waste streams
	- fit appropriate microfibre or disposable mop head to frame	Place wet floor signs where appropriate
	- with frame, width wide in front of you, walk forward round edges of room against skirting board	Do not lift mop head from the floor surface  NEVER brush off debris with bare hands
	- visually divide room into wide strips. Hold mop with narrow end facing you and sweep to one side. At end of side sweep, twist the mop head so that the narrow end is facing towards you and sweep the next line. In this way the dust will be pushed in front of the mop head and not left against edges	NEVER brush off debris in a clinical area as dust must never be allowed to scatter
	- mop the remaining floor using leading edge, working backwards towards the door	

	Detail	Safety and Hygiene
	- remove wet floor signs	
	- remove PPE and dispose of in appropriate waste stream	Ensure and follow local procedure when disposing waste into waste streams  Decontaminate hands
	- return equipment back to DSR, ensure all equipment is cleaned and stored correctly	Dispose of PPE in the appropriate waste stream

### Required Outcome:

Following the cleaning process the required standards are as follows:

- hard surfaces should be free from soil, spots and dust;
- edges and corners are free from soil, dust and film;
- surfaces should be free from tape and sticky residue.

## Stage 2: Suction Cleaning

To ensure the floor is cleaned in a systematic way to reduce the risk of cross infection.

Collect equipment/ materials	Detail	Safety and Hygiene
	<ul style="list-style-type: none"> <li>- wet floor sign</li> <li>- suction cleaner and appropriate attachments</li> <li>- dust pan and brush</li> <li>- filters/bags</li> <li>- refuse sack</li> <li>- PPE (i.e.. apron, gloves, safety goggles etc) as per local policy</li> </ul>	<p>Ensure all equipment is clean prior to use, PAT tested, cables are in good condition, clean and dried prior to return to store</p>
Method	<ul style="list-style-type: none"> <li>- wear appropriate PPE</li> </ul>	<p>Decontaminate hands, prior to wearing appropriate PPE</p>
	<ul style="list-style-type: none"> <li>- remove larger items and obvious debris from floor and dispose of in an appropriate waste stream</li> </ul>	<p>Ensure to follow local procedure when disposing waste into waste streams</p>
	<ul style="list-style-type: none"> <li>- before cleaning takes place, visually inspect the room or area being cleaned; if large objects or furniture can be moved, remove these safely and place out of the way of traffic</li> </ul>	<p>Ensure to follow local Manual Handling Policy to prevent any injury to you or others</p>
	<ul style="list-style-type: none"> <li>- assemble the suction cleaner and check that bag and filters (HEPA if applicable) are in place and serviceable</li> </ul>	
	<ul style="list-style-type: none"> <li>- unwind cable and run the length of cable through your fingers to ensure that there are no breaks in it</li> </ul>	<p>Check the cable is free from splits and plug is not loose or broken</p>
	<ul style="list-style-type: none"> <li>- plug the suction cleaner into the nearest available socket and switch on the power</li> </ul>	<p>Do not move from room to room or run cable across/through doorways as someone may trip over the cable, wires may accidentally be pulled out</p> <p>NEVER place the cable over shoulder</p> <p>Ensure the cable stays behind operator when working. Always leave a clear walkway</p>

	Detail	Safety and Hygiene
	<ul style="list-style-type: none"> <li>- when suction cleaning stand upright with feet shoulder width apart and using even strokes; correctly position wet floor sign to identify cleaning task taking place</li> </ul>	<p>Bend at the knees to reach under furniture. Ensure the cable remains behind when working</p> <p>Wet floor sign to raise awareness to patients, visitors and staff</p>
	<ul style="list-style-type: none"> <li>- adjust position on suction cleaner head to suit flooring height</li> </ul>	<p>Bend at the knees to reach under furniture</p>
	<ul style="list-style-type: none"> <li>- divide area into sections to ensure complete area is covered</li> </ul>	<p><b>NEVER</b> place the cable over your shoulder as this can cause serious injury.</p> <p>Always leave a clear walk way</p>
	<ul style="list-style-type: none"> <li>- suction clean the edges and corner using the hose attachments if available</li> </ul>	<p>Do not transport machine from one area to another by pulling along by the hose</p>
	<ul style="list-style-type: none"> <li>- return large objects or furniture which were removed prior to the cleaning process taking place</li> </ul>	<p>Ensure to follow local Manual Handling Policy to prevent any injury to you and others</p>
	<ul style="list-style-type: none"> <li>- remove wet floor signs</li> </ul>	
	<ul style="list-style-type: none"> <li>- remove PPE and dispose of in appropriate waste stream</li> </ul>	<p>Ensure to follow local procedure when disposing waste into waste streams</p> <p>Decontaminate hands</p>
	<ul style="list-style-type: none"> <li>- return suction cleaner to DSR</li> </ul>	
	<ul style="list-style-type: none"> <li>- suction clean filters regularly and replace when required; check if bag needs replaced and change as required</li> </ul>	
	<ul style="list-style-type: none"> <li>- remove hose from body; hang separately so that hose is not bent causing stress and weakening</li> </ul>	
	<ul style="list-style-type: none"> <li>- remove head, wash, and leave to dry on paper</li> </ul>	

	Detail	Safety and Hygiene
	- clean and wind cable around body of suction cleaner securing the plug	
	- ensure all equipment used is cleaned and stored correctly	Dispose of PPE appropriately and decontaminate hands

### Required Outcome

Following the cleaning process the required standards are as follows:

- hard surfaces should be free from soil, spots and dust;
- edges and corners are free from soil, dust and film;
- surfaces should be free from tape and sticky residue.

### Stage 3: Damp Mopping

To ensure the floor is cleaned in a systematic way to reduce the risk of cross infection.

Collect equipment/materials	Detail	Safety and Hygiene
	<ul style="list-style-type: none"> <li>- wet floor signs</li> <li>- dosing containers</li> <li>- colour coded equipment (buckets, mops, mop frames, microfibre)</li> <li>- mop wringer (traditional mopping system only)</li> <li>- disposable cloth or paper</li> <li>- appropriate bag for soiled mops</li> <li>- PPE (i.e. apron, gloves, safety goggles etc) as per local policy</li> </ul>	<p>Ensure all equipment is clean prior to use and cleaned and dried prior to return to store</p>
Method	<ul style="list-style-type: none"> <li>- wear appropriate PPE</li> </ul>	<p>Decontaminate hands prior to wearing appropriate PPE</p>
	<ul style="list-style-type: none"> <li>- remove larger items of debris from floor and dispose of in an appropriate waste stream</li> </ul>	<p>Ensure to follow local procedure when disposing waste into waste streams</p>
	<ul style="list-style-type: none"> <li>- before cleaning takes place, visually inspect the room or area being cleaned; if large objects or furniture can be moved, remove these safely and place out of the way of traffic</li> </ul>	<p>Ensure to follow local Moving and Handling Policy to prevent any injury to you or others.</p>
	<ul style="list-style-type: none"> <li>- put on safety goggles, prepare a solution of water and make up the cleaning agent in accordance with manufacturer's instructions</li> </ul>	<p>Safety goggles are available and recommended to protect you from solution splashing into your eyes</p>
	<ul style="list-style-type: none"> <li>- fold the mop heads into the dosing container</li> </ul>	
	<ul style="list-style-type: none"> <li>- pour the cleaning agent over the mop heads and leave for a minute to allow the mops to absorb the liquid. The mops should be damp – not wet or follow your local procedure for dampening floor mop prior to use</li> </ul>	
	<ul style="list-style-type: none"> <li>- place the container of mops onto the trolley</li> </ul>	
	<ul style="list-style-type: none"> <li>- standard mopping system use a clean mop head for each room or section of room, wringing the mop head as dry as possible in the cleaning solution prior to mopping</li> </ul>	
	<ul style="list-style-type: none"> <li>- plan the work route by starting at the furthest point from the exit working backwards to avoid standing on cleaned sections</li> </ul>	<p>Wet floor sign to raise awareness to patients, visitors and staff</p>

	Detail	Safety and Hygiene
	- mop the floor edges using a straight stroke to reach corners and skirting. Flip the mop head up to clean the skirting and reach the edge	
	- mop the remaining floor using leading edge, working backwards towards the door	Always leave a clear walk way
	- after each room change the mop head and place it in the clear bag for laundering	
	- remove wet floor signs	
	- remove PPE and dispose of in appropriate waste stream	Ensure to follow local procedure when disposing waste into waste streams
	- return large objects or furniture which were removed prior to the cleaning process taking place	Ensure to follow local Manual Handling Policy to prevent any injury to you and others
	- return equipment to DSR	
	- ensure all equipment is cleaned and stored correctly	Dispose of PPE appropriately and decontaminate hands

### Required Outcome:

Following the cleaning process the required standards are as follows:

- hard surfaces should be free from soil, spots and dust;
- edges, corners are free from soil, dust and film;
- surfaces should be free from tape and sticky residue.

## Stage 4: Machine Scrubbing

To ensure the floor is cleaned in a systematic way to reduce the risk of cross infection.

Collect equipment/materials	Detail	Safety and Hygiene
	<ul style="list-style-type: none"> <li>- wet floor sign</li> <li>- scrubbing machine with disc and scrubbing pad or scrubbing brush</li> <li>- solution tank</li> <li>- wet suction machine</li> <li>- colour coded equipment (buckets, mops, mop frames, microfibre)</li> <li>- mop wringer</li> <li>- appropriate bag for soiled mops</li> <li>- PPE (i.e. apron, gloves, safety goggles etc) as per local policy</li> </ul>	Ensure all equipment is clean prior to use, PAT tested, cables are in good condition, clean and dried prior to return to store
Method	- wear appropriate PPE	Decontaminate hands prior to wearing PPE
	- remove larger items of debris from floor and dispose of in an appropriate waste stream	Ensure to follow local procedure when disposing waste into waste streams
	- before cleaning takes place, visually inspect the room or area being cleaned; if large objects or furniture can be moved, remove these safely and place out of the way of traffic;	Ensure to follow local Moving and Handling Policy to prevent any injury to you or others
	- assemble scrubbing machine and wet suction machine	
	- put on safety goggles, prepare a solution of water and make up the cleaning agent in accordance with manufacturer's instructions; fill solution tank with water and appropriate cleaning agent	Safety goggles are available and recommended to protect you from solution splashing into your eyes
	- assemble mop and pole	
	- correctly position wet floor sign to identify cleaning task taking place	Wet floor sign to raise awareness to patients, visitors and staff
	- starting at the furthest away point scrub floor moving along the wall edge of the floor then going from side to side overlapping whilst doing so. (small sections at a time)	Always leave a clear dry walkway
	- dry floor using wet suction machine	

	Detail	Safety and Hygiene
	- rinse floor area with plain water as per damp mopping stage 3;	
	- when the floor is dry remove wet floor signs	
	- remove PPE and dispose of in appropriate waste stream	Ensure to follow local procedure when disposing waste into waste streams
	- return large objects or furniture which were removed prior to the cleaning process taking place	Ensure to follow local Manual Handling Policy to prevent any injury to you and others
	- return equipment to DSR	
	- ensure to clean and store all used equipment away appropriately	Dispose of PPE appropriately and decontaminate hands

### Required Outcome:

Following the cleaning process the required standards are as follows:

- hard surfaces should be free from soil, spots and dust;
- edges and corners are free from soil, dust and film;
- surfaces should be free from tape and sticky residue.

## Stage 5: Machine Buffing Where Applicable

To ensure the floor is cleaned in a systematic way to reduce the risk of cross infection.

Collect equipment/materials	Detail	Safety and Hygiene
	<ul style="list-style-type: none"> <li>- wet floor signs</li> <li>- scrubbing machine with disc and buffing pad or buffing brush</li> <li>- PPE (i.e. apron, gloves, safety goggles etc) as per local policy</li> </ul>	Ensure all equipment is clean prior to use, PAT tested, cables are in good condition, clean and dried prior to return to store.
Method	- wear appropriate PPE	Decontaminate hands prior to wearing PPE
	- remove larger items of debris from floor and dispose of in an appropriate waste stream	Ensure to follow local procedure when disposing waste into waste streams
	- before cleaning takes place, visually inspect the room or area being cleaned; if large objects or furniture can be moved, remove these safely and place out of the way of traffic	Ensure to follow local Moving and Handling Policy to prevent any injury to you or others
	- assemble machine with attachments	
	- correctly position wet floor sign to identify cleaning task taking place	Wet floor sign to raise awareness to patients, visitors and staff
	- starting at the furthest away point from the door, buff floor moving along wall edges from side to side with a slight overlap	Always leave a clear walk way
	- return large objects or furniture which were removed prior to the cleaning process taking place	Ensure to follow local Moving and Handling Policy to prevent any injury to you and others
	- remove wet floor signs	
	- remove PPE and dispose of in appropriate waste stream	Ensure to follow local procedure when disposing waste into waste streams
	- return equipment to DSR	
	- ensure to clean and store all used equipment away appropriately.	Dispose of PPE appropriately and decontaminate hands

**Required Outcome:**

Following the cleaning process the required standards are as follows:

- hard surfaces should be free from soil, spots and dust;
- edges and corners are free from soil, dust and film;
- surfaces should be free from tape and sticky residue.

## High Level Cleaning

Particular attention should be given to the cleaning of high level surfaces to prevent the build up of dust.

	Detail	Safety and Hygiene
Collect equipment/materials	<ul style="list-style-type: none"> <li>- wet floor signs</li> <li>- colour coded equipment (buckets, microfibre, cloths), disposable cloth or paper</li> <li>- Cleaning agent;</li> <li>- PPE (i.e. apron, gloves, safety goggles etc) as per local policy</li> <li>- safety ladder if cleaning above hand height</li> <li>- high duster frame and head</li> </ul>	<p>Ensure all equipment is clean prior to use</p> <p>Adhere to National Cleaning Specification colour coding</p>
	<ul style="list-style-type: none"> <li>- wear appropriate PPE</li> </ul>	<p>Decontaminate hands prior to wearing PPE</p>
Method	<ul style="list-style-type: none"> <li>- Wear safety goggles and half fill bucket with water and add the cleaning agent in line with manufacturers' instructions; change cleaning solution as appropriate</li> </ul>	<p>Safety goggles are available and recommended to protect you from solution splashing into your eyes</p>
	<ul style="list-style-type: none"> <li>- correctly position wet floor sign to identify cleaning task taking place</li> </ul>	<p>Wet floor sign to raise awareness to patients, visitors and staff</p>
	<ul style="list-style-type: none"> <li>- remove any debris, sticky tape from the surfaces;</li> </ul>	
	<ul style="list-style-type: none"> <li>- dampen and concertina the cloth, which will give you a number of clean cloth surfaces, wipe all high level surfaces with the damp cloth using one swipe, fold a section of the cloth over to reveal a clean unused surface and wipe again. Ensure to always work clean to dirty preventing cross contamination</li> </ul>	
	<ul style="list-style-type: none"> <li>- continue to do this until all the clean surfaces on the cloth have been used then replace the cloth</li> </ul>	
	<ul style="list-style-type: none"> <li>- remove wet floor signs</li> </ul>	
	<ul style="list-style-type: none"> <li>- remove PPE and dispose of in appropriate waste stream</li> </ul>	<p>Ensure to follow local procedure when disposing waste into waste streams</p>
	<ul style="list-style-type: none"> <li>- return equipment to DSR</li> </ul>	
	<ul style="list-style-type: none"> <li>- ensure to clean and store all used equipment away appropriately</li> </ul>	<p>Dispose of PPE appropriately and decontaminate hands</p>

**Required Outcome:**

Following the cleaning process the required standards are as follows:

- each item is cleaned in a systematic way to reduce the risk of cross infection;
- hard surfaces should be free from soil, spots and dust;
- soft surfaces should be free from soil, stains, film and dust;
- edges, corners and wheels are free from soil, dust and film;
- surfaces should be free from tape and sticky residue.

## Low Level Cleaning

Low level cleaning applies to any surface which might attract dust and spillages.

Collect equipment/materials	Detail	Safety and Hygiene
	<ul style="list-style-type: none"> <li>- wet floor signs</li> <li>- colour coded equipment (buckets, microfibre, cloths), disposable cloth or paper</li> <li>- cleaning agent</li> <li>- PPE (i.e. apron, gloves, safety goggles etc) as per local policy</li> <li>- kneeling pad if required.</li> </ul>	<p>Ensure all equipment is clean prior to use</p> <p>Adhere to National Cleaning Specification colour coding</p>
Method	<ul style="list-style-type: none"> <li>- wear appropriate PPE</li> </ul>	Decontaminate hands prior to wearing PPE
	<ul style="list-style-type: none"> <li>- wear safety goggles and half fill bucket with water and add the cleaning agent in line with manufacturers' instructions; change cleaning solution as appropriate</li> <li>- Where possible eliminate the need for using buckets by using fresh running water from the sink in the room.</li> </ul>	Safety goggles are available and recommended to protect you from solution splashing into your eyes whilst mixing the chemical
	<ul style="list-style-type: none"> <li>- correctly position wet floor sign to identify cleaning task taking place</li> </ul>	Wet floor sign to raise awareness to patients, visitors and staff
	<ul style="list-style-type: none"> <li>- remove any debris, sticky tape from the surface</li> </ul>	
	<ul style="list-style-type: none"> <li>- dampen the cloth and clean all low level surfaces</li> </ul>	
	<ul style="list-style-type: none"> <li>- wipe the surface with the damp cloth using one swipe, fold a section of the cloth over to reveal a clean unused surface and wipe again. Ensure to always work clean to dirty</li> </ul>	
	<ul style="list-style-type: none"> <li>- continue to do this until all the clean surfaces on the cloth have been used then replace the cloth</li> </ul>	
	<ul style="list-style-type: none"> <li>- remove wet floor signs</li> </ul>	
	<ul style="list-style-type: none"> <li>- remove PPE and dispose of in appropriate waste stream</li> </ul>	Ensure to follow local procedure when disposing waste into waste streams
	<ul style="list-style-type: none"> <li>- return equipment to DSR</li> </ul>	
	<ul style="list-style-type: none"> <li>- ensure to clean and store all used equipment away appropriately</li> </ul>	Dispose of PPE appropriately and decontaminate hands

**Required Outcome:**

Following the cleaning process the required standards are as follows:

- hard surfaces should be free from soil, spots and dust;
- soft surfaces should be free from soil, stains, film and dust;
- edges, corners and wheels are free from soil, dust and film;
- surfaces should be free from tape and sticky residue.

## Paintwork, Walls and Doors

Paintwork, walls and doors are cleaned in a systematic way to reduce the risk of cross infection.

Collect equipment/materials	Detail	Safety and Hygiene
	<ul style="list-style-type: none"> <li>- wet floor;</li> <li>- colour coded equipment (buckets, microfibre, cloths), disposable cloth or paper</li> <li>- cleaning agent</li> <li>- PPE (i.e. apron, gloves, safety goggles etc) as per local policy</li> <li>- safety ladder if cleaning above hand height</li> <li>- high duster frame and head</li> </ul>	<p>Ensure all equipment is clean prior to use</p> <p>Adhere to National Cleaning Specification colour coding</p>
Method	<ul style="list-style-type: none"> <li>- wear appropriate PPE</li> </ul>	Decontaminate hands prior to wearing PPE
	<ul style="list-style-type: none"> <li>- wear safety goggles and half fill bucket with warm water and add the cleaning agent in line with manufacturers' instructions; change cleaning solution as appropriate</li> </ul>	Safety goggles are available and recommended to protect you from solution splashing into your eyes whilst mixing the chemical
	<ul style="list-style-type: none"> <li>- correctly position wet floor sign to identify cleaning task taking place</li> </ul>	Wet floor sign to raise awareness to patients, visitors and staff
	<ul style="list-style-type: none"> <li>- remove all forms of soiling and graffiti from the surface to be cleaned</li> </ul>	
	<ul style="list-style-type: none"> <li>- wipe the surface with the damp cloth using one swipe, fold a section of the cloth over to reveal a clean unused surface and wipe again. Ensure to always work clean to dirty</li> </ul>	
	<ul style="list-style-type: none"> <li>- mop the remaining floor using leading edge, working backwards towards the door</li> </ul>	
	<ul style="list-style-type: none"> <li>- continue to do this until all the clean surfaces on the cloth or paper have been used then replace the cloth</li> </ul>	
	<ul style="list-style-type: none"> <li>- remove wet floor signs</li> </ul>	
Method	<ul style="list-style-type: none"> <li>- remove PPE and dispose of in appropriate waste stream</li> </ul>	Ensure to follow local procedure when disposing waste into waste streams

	Detail	Safety and Hygiene
	- return equipment to DSR	
	- ensure to clean and store all used equipment away appropriately	Dispose of PPE appropriately and decontaminate hands

### Required Outcome:

Following the cleaning process the required standards are as follows:

- all surfaces should be free from soil, spots, dust and fingerprints;
- low level air vents, grilles and any other air outlets are unblocked and free from dust, grit, soil and cobwebs;
- door tracks and jambs are free from grit and other debris;
- all surfaces are free from tape and sticky residue.

## Changing/Hanging Curtains and Bed Screens

Applies when removing and hanging curtains and bed screens in all clinical and non- clinical areas.

	Detail	Safety and Hygiene
Collect equipment/materials	<ul style="list-style-type: none"> <li>- wet floor sign</li> <li>- colour coded equipment (buckets, microfibre, cloths), disposable cloth or paper</li> <li>- cleaning solution</li> <li>- PPE (i.e. apron, gloves, safety goggles etc) as per local policy</li> <li>- laundry bags</li> <li>- curtain hooks and container</li> <li>- suitable safety ladder/platform</li> <li>- clean curtains</li> </ul>	<p>A local *risk assessment should be carried out to determine the number of operatives and type of kit required to undertake the task safely and effectively. This is essential when working at heights, in occupied areas and handling large, heavy curtains</p> <p>Ensure curtains/screens are freshly laundered and in good state of repair</p>
Method	- wear appropriate PPE	Decontaminate hands prior to wearing PPE
	- correctly position wet floor sign to identify cleaning task taking place	Wet floor sign to raise awareness to patients, visitors and staff
	- *using the safety ladder/platform, and in line with outcome of risk assessment, take down the bed screen/curtain	
	- wear safety goggles and half fill bucket with warm water and add the cleaning agent in line with manufacturers' instructions; change cleaning solution as appropriate	Safety goggles are available and recommended to protect you from solution splashing into your eyes
	- remove the curtain hooks and place in the container	
	- bag curtains and label bags, for transfer to laundry as per local policy	Adhere to local policy when packing curtains for transportation

	Detail	Safety and Hygiene
	- dampen cloth/paper and wipe curtain rail and associated fixtures. wipe the surface with the damp cloth using one swipe, fold a section of the cloth over to reveal a clean unused surface and wipe again. Ensure to always work clean to dirty	
	- wash curtain hooks in cleaning solution and dry	
	- fit the curtain hooks to a clean curtain at appropriate, evenly spaced intervals	
	- carry and hang curtain as per recommendations from risk assessment	
	- remove stepladders and wet floor signs	
	- remove PPE and dispose of in appropriate waste stream	Ensure to follow local procedure when disposing waste into waste streams
	- return equipment to DSR	
	- ensure to clean and store all used equipment away appropriately	Dispose of PPE appropriately and decontaminate hands

### Required Outcome:

Following the cleaning process the required standards are as follows:

- bed screens and curtains are in good state of repair and free from stains, soiling and dust;
- bed screens and curtains hang in a uniform manner and have sufficient and appropriate hooks/fasteners;
- rails, fittings and fixtures required for curtains and bed screens should be in good state of repair and free from dust, grit, spillage, residue or any tape or attachments which may compromise cleaning.

## Sanitary Fixtures and Fittings

To effectively reduce the risk of cross infection emphasis requires to be placed on the cleaning of contact surfaces such as taps, dispensers etc.

This process applies to toilets, urinals, bidets, sinks, wash hand basins, baths and showers.

### Fixtures and Fittings (including dispensers)

Collect equipment/materials	Detail	Safety and Hygiene
	<ul style="list-style-type: none"> <li>- PPE (i.e. apron, gloves, safety goggles etc) as per local policy</li> <li>- toilet brush</li> <li>- colour coded equipment (buckets, microfibre, cloths) disposable cloth or paper cleaning agent</li> </ul>	<p>Ensure all equipment is clean prior to use</p> <p>Adhere to NHSScotland National Cleaning Services Specification colour coding</p>
Method	<ul style="list-style-type: none"> <li>- wear appropriate PPE</li> </ul>	Decontaminate hands prior to wearing PPE
	<ul style="list-style-type: none"> <li>- wipe the surface with the damp cloth using one swipe, fold a section of the cloth over to reveal a clean unused surface and wipe again. Ensure to always work clean to dirty, paying particular attention to touch surfaces such as handles and light pulls/switches, dispensers' undersides and nozzles, then dispose of cloth</li> </ul>	<p>All tap and shower outlets must have water run as per local water management policy</p> <p>When refilling clean inside of dispenser</p>
	<ul style="list-style-type: none"> <li>- rinse and dry with a clean cloth</li> </ul>	
	<ul style="list-style-type: none"> <li>- remove refuse from the room, tying and labelling appropriately and clean waste bin</li> </ul>	
	<ul style="list-style-type: none"> <li>- remove PPE and dispose of in appropriate waste stream</li> </ul>	Ensure to follow local procedure when disposing waste into waste streams
	<ul style="list-style-type: none"> <li>- return equipment to DSR</li> </ul>	
	<ul style="list-style-type: none"> <li>- ensure to clean and store all used equipment away appropriately</li> </ul>	Dispose of PPE appropriately and decontaminate hands

## Toilets/Urinals

Collect equipment/materials	Detail	Safety and Hygiene
	<ul style="list-style-type: none"> <li>- PPE (i.e. apron, gloves, safety goggles etc) as per local policy</li> <li>- toilet brush</li> <li>- colour coded equipment (buckets, microfibre, cloths) disposable cloth or paper</li> <li>- cleaning agent</li> </ul>	<p>Ensure all equipment is clean prior to use</p> <p>Adhere to NHSScotland National Cleaning Services Specification colour coding</p>
Method	- wear appropriate PPE	Decontaminate hands prior to wearing PPE
	- flush before cleaning	<b>NEVER</b> put cloth into the waste overflow beyond the strainer
	- push the water in the pan behind the bend with the toilet brush, leaving about an inch and put cleaning agent in bowl giving it time to work, as per manufacturer's instructions	
	- clean inside bowl including the rim with the toilet brush and flush	
	- keep brush in the fresh flushing water to clean	
	- wash pedestal of sanitary ware from the base to the bowl (clean to dirty) towards the rim of the pan and continue cleaning upwards towards the cistern and finally the flush handle. Particular attention should be paid to the toilet seat, hinges and surround. Dispose of cloth	
	- rinse surfaces and dry with a clean cloth	
	- remove PPE and dispose of in appropriate waste stream	Ensure to follow local procedure when disposing waste into waste streams
	- return equipment to DSR	
	- ensure to clean and store all used equipment away appropriately	Dispose of PPE appropriately and decontaminate hands

## Sinks, Wash Hand Basins and Baths

Collect equipment/materials	Detail	Safety and Hygiene
	<ul style="list-style-type: none"> <li>- PPE (i.e.. apron, gloves, safety goggles etc) as per local policy</li> <li>- toilet brush</li> <li>- colour coded equipment (microfibre, cloths) disposable cloth or paper</li> <li>- cleaning agent</li> </ul>	<p>Ensure all equipment is clean prior to use</p> <p>Adhere to NHSScotland National Cleaning Services Specification colour coding</p>
Method	- wear appropriate PPE	Decontaminate hands prior to wearing PPE
	- clear plug and overflow of debris	
	- clean round the inside of the sink/basin from top rim of bowl, then overflow and waste outlet ( <b>do not put cloth into the overflow or waste outlet</b> )	
	- run water outlets as per local policy	
	- clean splash back from top to bottom	
	- clean the underside working from rim downwards	
	- damp clean taps starting at outlet finishing at the base. <b>Do not push the cloth inside the tap outlet or overflow, beyond the strainer</b>	All tap and shower outlets must have water run as per local water management policy
	- clean the tap handles	
	- clean the inside of the basin from the rim using the cleaning agent towards the plughole	
	- rinse and dry the sanitary ware and taps and dispose of the cloth	
	- remove PPE and dispose of in appropriate waste stream	Ensure to follow local procedure when disposing waste into waste streams
	- return equipment to DSR	
	- ensure to clean and store all used equipment away appropriately	Dispose of PPE appropriately and decontaminate hands

## Showers

Collect equipment/materials	Detail	Safety and Hygiene
	<ul style="list-style-type: none"> <li>- PPE (i.e.. apron, gloves, safety goggles etc) as per local policy</li> <li>- toilet brush</li> <li>- colour coded equipment (buckets, microfibre, cloths), disposable cloth or paper</li> <li>- cleaning agent</li> </ul>	<p>Ensure all equipment is clean prior to use</p> <p>Adhere to NHSScotland National Cleaning Services Specification colour coding</p>
Method	- wear appropriate PPE	Decontaminate hands prior to wearing PPE
	- clear plug of debris and run water as per local policy	
	- starting at highest point clean shower walls downward, then clean shower head, hose and taps	All tap and shower outlets must have water run as per local water management policy
	- pay particular attention to shower head and report any mineral deposit build up	
	- if a shower tray is present clean inside and outside, if a wet room mop or mechanically clean floor	Do not push cloth in overflow or waste outlet
	- rinse and dry the area	
	- dispose of cloth	
	- remove PPE and dispose of in appropriate waste stream	Ensure to follow local procedure when disposing waste into waste streams
	- return equipment to DSR	
	- ensure to clean and store all used equipment away appropriately	Dispose of PPE appropriately and decontaminate hands

**Required Outcome:**

Following the cleaning process the required standards are as follows:

- surfaces should be free from smudges, smears, bodily fluids, soap build up and mineral deposits;
- walls, fixtures and fittings should be free from dust, grit, streaks, smudges, mould, soap build up and bodily fluids;
- consumable items are well stocked in appropriate clean, sealed dispensers.

## Furniture, Fixtures and Fittings

To reduce the risk of cross infection emphasis requires to be placed on the cleaning of contact surfaces.

Collect equipment/materials	Detail	Safety and Hygiene
	<ul style="list-style-type: none"> <li>- colour coded equipment (buckets, microfibre, cloths), disposable cloth or paper</li> <li>- cleaning agent</li> <li>- PPE (i.e. apron, gloves, safety goggles etc) as per local policy</li> <li>- safety ladder if cleaning above hand height</li> <li>- high dusting tool (if required)</li> </ul>	<p>Ensure all equipment is clean prior to use and cleaned and dried prior to return to store</p> <p>Adhere to National Cleaning Specification colour coding</p>
Method	- wear appropriate PPE	Decontaminate hands prior to wearing PPE
	- remove any debris, sticky tape from the furnishings and fittings	
	- wear safety goggles and half fill bucket with warm water and add the cleaning agent in line with manufacturers' instructions; change cleaning solution as appropriate	Safety goggles are available and recommended to protect you from solution splashing into your eyes
	- wipe the surface with the damp cloth using one swipe, fold a section of the cloth over to reveal a clean unused surface and wipe again. Ensure to always work clean to dirty; change solution when dirty or at 15 minutes intervals or when moving to new task or location. Particular attention should be given to the touch surfaces such as handles, door plates and switches etc	
	- dry the surface	
	- dispose of cloth or paper	
	- remove PPE and dispose of in appropriate waste stream	Ensure to follow local procedure when disposing waste into waste streams
	- return equipment to DSR	
	- ensure to clean and store all used equipment away appropriately	Dispose of PPE appropriately and decontaminate hands

**Required Outcome:**

Following the cleaning process the required standards are as follows:

- all surfaces should be free from soil, spots, dust and fingerprints;
- edges, corners and wheels are free from soil, dust and film;
- furnishings and fittings should be free from tape and sticky residue.

## Ambulance Cleaning

Process for the cleaning of the ambulance/patient transport vehicle applies to all contact surfaces ensuring no dirt, dust, stains or spillages are visible.

- to reduce the risk of cross infection. Emphasis to be placed on the cleaning of all contact surfaces.

### Contact Surfaces

	Detail	Safety and Hygiene
Collect equipment/materials	<ul style="list-style-type: none"> <li>wet floor signs (if required)</li> <li>coloured coded damp cleaning equipment (yellow mop frame and head, bucket)</li> <li>long handled deck scrubber</li> <li>cleaning agent</li> <li>PPE (i.e. apron, gloves) also consider safety goggles if splashes onto the face/mouth or eyes is anticipated as per local policy</li> <li>surface wipes</li> <li>disposable cloth or paper</li> <li>steam cleaner (if available)</li> </ul>	<p>Wash hands and wear appropriate PPE</p> <p>Ensure all equipment is clean prior to use, PAT tested, cables are in good condition, clean and dried prior to return to either sluice or DSR</p> <p>Adhere to National Cleaning Specification colour coding</p> <p>Steam cleaners only to be used by staff who have received the appropriate training</p>
Method	<ul style="list-style-type: none"> <li>wear appropriate PPE</li> <li>assess the need to wear safety goggles and half fill bucket with warm water and add the cleaning agent in line with manufacturers' instructions; change cleaning solution as appropriate</li> <li>clean all parts of equipment brackets</li> </ul>	<p>Decontaminate hands prior to wearing PPE</p> <p>Safety goggles are available and recommended to protect you from solution splashing into your eyes</p> <p>If any parts are contaminated immediate clean required by Ambulance crew</p> <p>Heavily contaminated ambulance patient equipment may require dismantling and cleaning thoroughly</p>

	Detail	Safety and Hygiene
	- clean all surfaces of fire extinguisher including underneath	
	- clean all surfaces including the lifting mechanism of the floor mounted trolley cot	
	- clean all parts of grab/hand rails	
	- clean all wall surfaces	
	- clean ceiling	
	- clean all surfaces of alcohol hand rub dispenser	
	- clean window surface	
	- clean blinds	
	- clean all work surfaces	
	- clean plastic bin and housing (clinical waste bag should have already been removed) including the lid and inside the recess	Sharps bin changed when no more than $\frac{3}{4}$ full
	- clean cupboards, drawers and shelves	
	- remove PPE and dispose of in appropriate waste stream	Ensure to follow local procedure when disposing waste into waste streams
	- return equipment to DSR	
	- ensure to clean and store all used equipment away appropriately	Dispose of PPE appropriately and decontaminate hands

### Required Outcomes:

Following the cleaning process the required standards are as follows:

- the vehicle interior should be kept clean, tidy, ordered and uncluttered;
- the furniture and equipment should be clean, damage free and well maintained;
- cleaning frequency for equipment as per service schedule;
- requirement for daily and weekly recording of vehicle cleaning.

## Floors

Collect equipment/materials	Detail	Safety and Hygiene
	<ul style="list-style-type: none"> <li>- wet floor signs (if required)</li> <li>- coloured coded damp cleaning equipment (yellow mop frame and head, bucket)</li> <li>- cleaning agent</li> <li>- PPE (i.e. apron, gloves) also consider safety goggles if splashes onto the face/mouth or eyes is anticipated as per local policy</li> <li>- surface wipes</li> <li>- disposable cloth or paper</li> <li>- steam cleaner (if available)</li> </ul>	
Method	<ul style="list-style-type: none"> <li>- wear appropriate PPE</li> </ul>	Decontaminate hands prior to wearing PPE
	<ul style="list-style-type: none"> <li>- remove debris</li> </ul>	
	<ul style="list-style-type: none"> <li>- Assess the need to wear safety goggles and half fill bucket with warm water and add the cleaning agent in line with manufacturers' instructions; change cleaning solution as appropriate</li> </ul>	Safety goggles are available and recommended to protect you from solution splashing into your eyes whilst mixing the chemical
	<ul style="list-style-type: none"> <li>- mop whole area including ramp</li> </ul>	Mop heads laundered after each use. Unless contaminated with blood or body fluids whereby must be disposed of  Mop buckets cleaned, dried and stored inverted
	<ul style="list-style-type: none"> <li>- ensure corners and edges are clean</li> </ul>	
	<ul style="list-style-type: none"> <li>- ensure clamping track is clean</li> </ul>	
	<ul style="list-style-type: none"> <li>- steam cleaner can also be used if available</li> </ul>	
	<ul style="list-style-type: none"> <li>- remove PPE and dispose of in appropriate waste stream</li> </ul>	Ensure to follow local procedure when disposing waste into waste streams

	Detail	Safety and Hygiene
	- return equipment to DSR	
	- ensure to clean and store all used equipment away appropriately	Dispose of PPE appropriately and decontaminate hands

### Required Outcomes:

Following the cleaning process the required standards are as follows:

- the vehicle interior should be kept clean, tidy, ordered and uncluttered;
- the furniture and equipment should be clean, damage free and well maintained;
- cleaning frequency for equipment as per service schedule;
- requirement for daily and weekly recording of vehicle cleaning.

## Vehicle Cab Area

Collect equipment/materials	Detail	Safety and Hygiene
	<ul style="list-style-type: none"> <li>- wet floor signs (if required)</li> <li>- coloured coded damp cleaning equipment (yellow mop frame and head, bucket)</li> <li>- long handled deck scrubber</li> <li>- cleaning agent</li> <li>- PPE (i.e. apron, gloves) also consider safety goggles if splashes onto the face/mouth or eyes is anticipated as per local policy</li> <li>- surface wipes</li> <li>- disposable cloth or paper</li> <li>- steam cleaner (if available)</li> </ul>	
Method	- wear appropriate PPE	Decontaminate hands prior to wearing PPE
	- assess the need to wear safety goggles and half fill bucket with warm water and add the cleaning agent in line with manufacturers' instructions; change cleaning solution as appropriate	Safety goggles are available and recommended to protect you from solution splashing into your eyes
	- remove all debris	
	- clean all surfaces and floor	
	- clean seats if wipeable	
	- clean area around and underneath seat	
	- clean dashboard including steering wheel, radio and satellite navigation	At end of task remove wet floor signs, dispose of PPE appropriately and Decontaminate hands
	- remove PPE and dispose of in appropriate waste stream	Ensure to follow local procedure when disposing waste into waste streams

	Detail	Safety and Hygiene
	- return equipment to DSR	
	- ensure to clean and store all used equipment away appropriately	Dispose of PPE appropriately and decontaminate hands

### Required Outcomes:

Following the cleaning process the required standards are as follows:

- the vehicle interior should be kept clean, tidy, ordered and uncluttered;
- the furniture and equipment should be clean, damage free and well maintained;
- cleaning frequency for equipment as per service schedule;
- requirement for daily and weekly recording of vehicle cleaning.

## Vehicle Equipment

Collect equipment/materials	Detail	Safety and Hygiene
	<ul style="list-style-type: none"> <li>- wet floor signs (if required)</li> <li>- coloured coded damp cleaning equipment (yellow mop frame and head, bucket)</li> <li>- long handled deck scrubber</li> <li>- cleaning agent</li> <li>- PPE (i.e. apron, gloves) also consider safety goggles if splashes onto the face/mouth or eyes is anticipated as per local policy</li> <li>- surface wipes</li> <li>- disposable cloth or paper steam cleaner (if available)</li> </ul>	
Method	- wear appropriate PPE	Decontaminate hands prior to wearing PPE
	- clean equipment storage bags	
	- clean paper work box	
	- clean response carry bags	
	- clean sharps containers	
	- remove PPE and dispose of in appropriate waste stream	Ensure to follow local procedure when disposing waste into waste streams
	- return equipment to DSR	
	- ensure to clean and store all used equipment away appropriately	Dispose of PPE appropriately and decontaminate hands

### Required Outcomes:

Following the cleaning process the required standards are as follows:

- the vehicle interior should be kept clean, tidy, ordered and uncluttered;
- the furniture and equipment should be clean, damage free and well maintained;
- cleaning frequency for equipment as per service schedule;
- requirement for daily and weekly recording of vehicle cleaning.

## Ambulance Patient Care Equipment

Collect equipment/materials	Detail	Safety and Hygiene
	<ul style="list-style-type: none"> <li>- wet floor signs (if required)</li> <li>- coloured coded damp cleaning equipment (yellow mop frame and head, bucket)</li> <li>- long handled deck scrubber</li> <li>- cleaning agent</li> <li>- PPE (i.e. apron, gloves) also consider safety goggles if splashes onto the face/mouth or eyes is anticipated as per local policy</li> <li>- surface wipes</li> <li>- disposable cloth or paper</li> <li>- steam cleaner (if available)</li> </ul>	
Method	- wear appropriate PPE	Decontaminate hands prior to wearing PPE
	- equipment such as B.M. kits, B.P. cuffs and stethoscopes cleaned after every patient use with surface wipes	
	- clean trolley cot/mattress after every patient use and as part of weekly vehicle clean	Torn or damaged trolley cot mattress should be replaced
	- clean all manual handling equipment including the carry chair after every patient use	
	- clean all medical components such as cardiac monitors, defibrillators and resuscitation equipment after every patient use	
	- clean pillows (plastic cover) after every patient use	Pillows should be discarded if plastic cover is torn or damaged
	- clean all contact surfaces on passenger seats including seat belts and areas below seat after every use	<p>Soiled seats may require to be shampooed or steam cleaned</p> <p>Torn or damaged seat covers should be replaced</p> <p>Ensure that seat/restraining belts are discarded appropriately if heavily contaminated or damaged</p>

	Detail	Safety and Hygiene
	- clean any medical gas equipment after every patient use	
	- change blankets/linen after every patient use	Blankets/linen should not be used for more than one patient  Blankets and linen should be stored appropriately in the vehicle
	- remove PPE and dispose of in appropriate waste stream	Ensure to follow local procedure when disposing waste into waste streams
	- return equipment to DSR	
	- ensure to clean and store all used equipment away appropriately	Dispose of PPE appropriately and decontaminate hands

### Required Outcomes:

Following the cleaning process the required standards are as follows:

- the vehicle interior should be kept clean, tidy, ordered and uncluttered;
- the furniture and equipment should be clean, damage free and well maintained;
- cleaning frequency for equipment as per service schedule;
- requirement for daily and weekly recording of vehicle cleaning.

## Isolation Room Clean

Isolation cleaning is the cleaning of a room where patients with known or suspected alert organisms or communicable diseases are cared for with minimal contact with other patients.

Isolation rooms should be cleaned at least daily. IPCN will advise if increased cleaning frequencies are required, in relation to any aspect of environmental cleaning.

- each cleaning task should be carried out as detailed in the specific Standard Operating Procedures (SOPs);
- Senior Charge Nurses or Nurse in Charge should work collaboratively with Domestic Team to highlight the need for isolation cleaning, and any special instructions;
- all rooms used for isolation purposes should be identified using appropriate HPS (Health Protection Scotland) Transmissions Based Precautions Poster or locally agreed poster;
- staff should adhere to the instructions detailed on poster in relation to hand decontamination, PPE, guidance re door closing and waste disposal;
- local policy will dictate the responsibility for cleaning patient equipment;
- all domestic staff undertaking isolation cleaning should be instructed appropriately, and supplied with sufficient and appropriate cleaning equipment to carry out tasks effectively.

## Daily Isolation Clean

	Detail	Safety and Hygiene
Collect equipment/materials	<ul style="list-style-type: none"> <li>- wet floor signs</li> <li>- colour coded equipment (buckets, mop frames, high dusters) must be Yellow</li> <li>- disposable cloth, micro-fibre cloth, paper or mop heads</li> <li>- chlorine releasing agent or as advised by ICPN</li> <li>- PPE (i.e. apron, gloves, safety goggles etc) as per local policy</li> <li>- orange refuse sacks</li> <li>- alginate and appropriate laundry bag</li> </ul>	<p>Ensure all equipment is clean prior to use and cleaned again prior to storage</p> <p>Ensure chlorine releasing agent is made up to the correct dilution. Follow manufacturer's instructions and seek further information from Infection Prevention and Control if required</p> <p>Ensure PPE is worn before entering the room</p> <p>Display wet floor signs</p>
Method	- wear appropriate PPE	Decontaminate hands prior to wearing PPE
	- change curtains when visibly soiled. Place into appropriate colour coded alginate sack for laundering	
	- remove bed linen and place into appropriate colour coded alginate sack for laundering	
	- complete the isolation clean using the correct cleaning solution including all fixtures and fittings. Rinse and dry	
	- clean the refuse container and change the bin liner	
	- place the cleaning equipment into the bathroom	
	- remove any debris from the bedroom floor and damp mop finishing at the bathroom door	
	- place dirty mop head into an alginate bag then clear plastic bag and then place into appropriate colour coded alginate sack for laundering	
	- clean the bathroom/WC (if present) whilst the bedroom floor is drying. Clean the sanitary fixtures and fittings as per standard operating procedures using Chlorine releasing agent to the correct dilution.	Refer to Infection Prevention and Control Manual

	Detail	Safety and Hygiene
	- rinse the agent off with clean tap water and dry	
	- clean the refuse container and change the bin liner	
	- remove/replenish consumables as per local policy	
	- move equipment back into the bedroom	
	- remove any debris from the floor and damp mop using the correct cleaning solution, finishing at the door into the bedroom	
	- remove PPE and dispose of in appropriate waste stream	Ensure to follow local procedure when disposing waste into waste streams
	- return equipment to DSR	
	- ensure to clean and store all used equipment away appropriately	Dispose of PPE appropriately and decontaminate hands

## Discharge Clean

The procedure to be followed on discharge/transfer of a patient prior to re-occupation of the bed space/single room.

Out of hours as per local policy.

To reduce risk of cross infection emphasis requires to be placed on the cleaning of contact surfaces.

	Detail	Safety and Hygiene
Collect equipment/materials	<ul style="list-style-type: none"> <li>- wet floor sign</li> <li>- colour coded equipment (buckets, mops)</li> <li>- disposable cloth, micro-fibre or paper</li> <li>- coloured coded reusable damp cleaning equipment</li> <li>- cleaning agent</li> <li>- PPE (i.e. apron, gloves, safety goggles etc) as per local policy</li> <li>- high dusting tool</li> </ul>	<p>Ensure all equipment is clean prior to use</p> <p>Adhere to policy for colour coding</p> <p>Adhere to COSHH and appropriate dilution for cleaning agent being used</p> <p>Wash hands and wear appropriate PPE</p> <p>Display wet floor signs(s)</p>
	- wear appropriate PPE	Decontaminate hands prior to wearing PPE
Method	<ul style="list-style-type: none"> <li>- high dust bed space area throughout including curtain rail, top of cupboards, over bed light and arm, any edges, ledges and where dust may fall</li> </ul>	Dispose of duster head appropriately dependent on system in use i.e. disposable head to household waste or reusable head to local laundering process
	- check curtain – arrange to change if stained	Refer to curtain changing standard operating procedure

	Detail	Safety and Hygiene
	<ul style="list-style-type: none"> <li>- damp clean items listed below, wipe the surface with the damp cloth using one swipe, fold a section of the cloth over to reveal a clean unused surface and wipe again. Ensure to always work clean to dirty</li> <li>- work surfaces</li> <li>- wash hand basin</li> <li>- liquid soap and paper hand towel dispensers</li> <li>- full clean showers</li> <li>- toilets and bidets where applicable check and clean inside soap and paper hand towel dispensers and re-stock as required</li> </ul>	
	<ul style="list-style-type: none"> <li>- damp clean bedside chair, visitors chair, over bed trolley and outside of bedside locker where applicable</li> </ul>	<p>Particular attention must be given to touch surfaces e.g. handles, door plates, light switches</p> <p>Adhere to COSHH and use appropriate dilution of sanitiser</p>
	<ul style="list-style-type: none"> <li>- remove household waste to uplift point</li> </ul>	<p>Damp wipe from outside to inside and include hinges, foot pedal and behind foot pedal</p>
	<ul style="list-style-type: none"> <li>- damp wipe outside of waste bins including household and clinical</li> </ul>	
	<ul style="list-style-type: none"> <li>- replace bin liners where required</li> </ul>	
	<ul style="list-style-type: none"> <li>- remove debris and damp mop floor paying particular attention to edges and corners</li> </ul>	<p>Ensure floor is completely dry before removing wet floor sign(s)</p> <p>Dispose of mop head appropriately</p>
	<ul style="list-style-type: none"> <li>- dispose of all cloths, disposable paper used for task to appropriate waste stream</li> </ul>	
	<ul style="list-style-type: none"> <li>- remove PPE and dispose of in appropriate waste stream</li> </ul>	<p>Ensure to follow local procedure when disposing waste into waste streams</p>
	<ul style="list-style-type: none"> <li>- return equipment to DSR</li> </ul>	
	<ul style="list-style-type: none"> <li>- ensure to clean and store all used equipment away appropriately</li> </ul>	<p>Dispose of PPE appropriately and decontaminate hands</p>

## **Required Outcomes**

Following the cleaning process the required standards are as follows:

- the room/bed space should be left clean, dry, restocked and ready for occupation by next patient.

## Terminal Clean

The procedure to be followed on discharge/transfer of a patient prior to re-occupation of the bed space/single room.

Out of hours as per local policy.

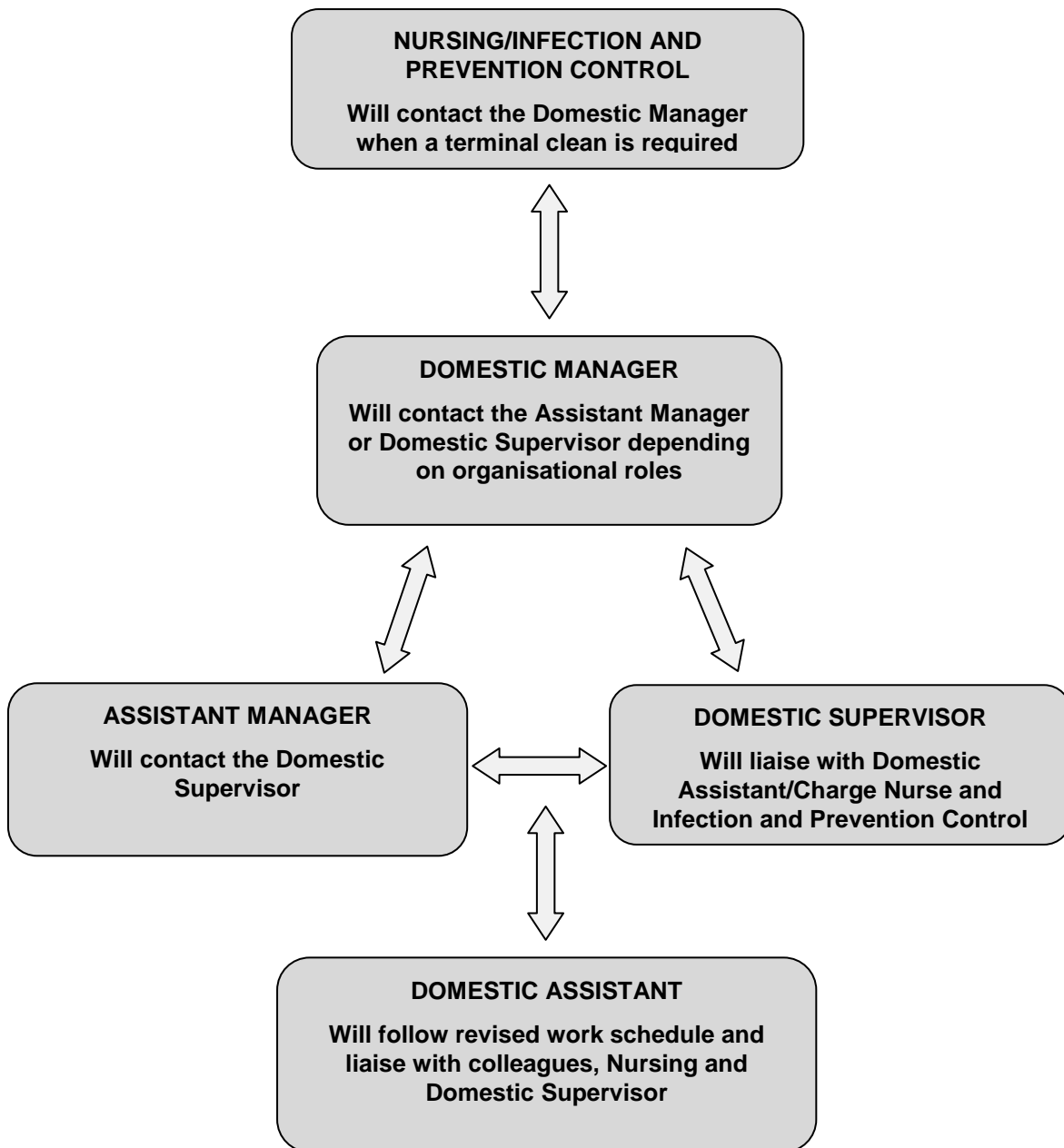
	Detail	Safety and Hygiene
Collect equipment/materials	<ul style="list-style-type: none"> <li>- wet floor sign</li> <li>- colour coded equipment (buckets, mops)</li> <li>- disposable cloth, or paper</li> <li>- colour coded reusable damp cleaning equipment</li> <li>- cleaning agent</li> <li>- chlorine releasing agent</li> <li>- PPE (i.e. apron, gloves, safety goggles etc) as per local policy</li> <li>- high dusting tool</li> <li>- laundry sack and water soluble bag</li> <li>- scrubbing machine</li> <li>- wet pick up machine</li> <li>- step ladders, if required for changing curtains and screens</li> </ul>	<p>Ensure all equipment is clean prior to use, PAT tested, cables are in good condition,</p> <p>Adhere to policy for colour coding</p> <p>Adhere to COSHH and appropriate dilution for cleaning agent being used</p>
	- wear appropriate PPE	Decontaminate hands prior to wearing PPE
Method	- before cleaning takes place visually inspect the room and ensure all removable items of debris is discarded in the appropriate waste stream	
	- ensure that nursing staff have removed all previous patients' belongings out of the room and it is ready for the terminal clean to take place	
	- remove curtains/screens including shower curtain and place into water soluble bag then place into large clear bag and finally into the appropriate laundry sack holder following your local linen bagging procedure	
	- place all curtain hooks/rings in chlorine releasing agent	Refer to curtain changing standard operating procedure
	- take a damp cloth and immerse in the pre-made solution of chlorine releasing agent, ring out, fold twice over which will give you four clean cloth surfaces, Clean blind cords with damp cloth using one swipe, fold a section of the cloth over to reveal a clean unused surface and wipe again. Ensure to always work clean to dirty preventing cross contamination	
	- if blinds are washable wipe these following the same process	

	Detail	Safety and Hygiene
	<ul style="list-style-type: none"> <li>- take a damp cloth and immerse in the pre-made solution of chorine releasing agent, ring out, fold twice over which will give you four clean cloth surfaces, wipe all high level surfaces which can be reached with the damp cloth using one swipe, fold a section of the cloth over to reveal a clean unused surface and wipe again. Ensure to always work clean to dirty preventing cross contamination</li> </ul>	
	<ul style="list-style-type: none"> <li>- take a disposable cloth and immerse in the pre-made solution of chorine releasing agent, ring out, fold twice over which will give you four clean cloth surfaces, wipe all low level surfaces with the damp cloth using one swipe, fold a section of the cloth over to reveal a clean unused surface and wipe again. Ensure to always work clean to dirty preventing cross contamination</li> </ul>	
	<ul style="list-style-type: none"> <li>- high dust bed space area throughout including curtain rail, top of cupboards, over bed light and arm, any edges, ledges and where dust may fall using high duster equipment. Dispose of duster head appropriately dependent on system in use i.e. disposable head to household waste or reusable head to local laundering process</li> </ul>	
	<ul style="list-style-type: none"> <li>- periodically check the pre-made solution and change if required</li> </ul>	
	<ul style="list-style-type: none"> <li>- follow local procedures for cleaning patient's bed mattress. If locally this is a task you do, take a disposable cloth and immerse in the pre-made solution of chorine releasing agent, ring out, fold twice over which will give you four clean cloth surfaces, wipe the surface of the mattress surfaces with the damp cloth using one swipe at a time, fold the cloth to reveal a clean side and follow the same process. Use more than one cloth if required.</li> </ul>	
	<ul style="list-style-type: none"> <li>- <u>Note:</u> Ward bed mattress should also be washed with <b>Actichlor Plus</b> then rinsed with clear water and dried to avoid damage to mattress</li> </ul>	
	<ul style="list-style-type: none"> <li>- take a disposable cloth and immerse in the pre-made solution of chorine releasing agent, ring out, fold twice over which will give you four clean cloth surfaces. Wash all bed frame using one swipe, fold a section of the cloth over to reveal a clean unused surface and wipe again. Ensure to always work clean to dirty preventing cross contamination</li> </ul>	
	<ul style="list-style-type: none"> <li>- take a disposable cloth and immerse in the pre-made solution of chorine releasing agent, ring out, fold twice over which will give you four clean cloth surfaces. Wash all furniture within the bedroom area including furniture within the sanitary room. Fold a section of the cloth over to reveal a clean unused surface and wipe again. Ensure to always work clean to dirty preventing cross contamination</li> </ul>	

	Detail	Safety and Hygiene
	<ul style="list-style-type: none"> <li>- where possible moveable furniture should be removed from the room once they have been cleaned to prevent re-contamination</li> </ul>	
	<ul style="list-style-type: none"> <li>- take a disposable cloth and immerse in the pre-made solution of chorine releasing agent, ring out, fold twice over which will give you four clean cloth surfaces, Wash all radiators down inside and out using one swipe, fold a section of the cloth over to reveal a clean unused surface and wipe again. Ensure to always work clean to dirty preventing cross contamination</li> </ul>	<p>Particular attention must be given to touch surfaces e.g. handles, door plates, light switches</p> <p>Adhere to COSHH and use appropriate dilution of sanitiser</p> <p>Ensure to follow safety measures above for electrical equipment</p>
	<ul style="list-style-type: none"> <li>- take a disposable cloth and immerse in the pre-made solution of chorine releasing agent, ring out, fold twice over which will give you four clean cloth surfaces, Wash all doors, paying attention to handles and hinges, wash all walls and paintwork down using one swipe, fold a section of the cloth over to reveal a clean unused surface and wipe again. Ensure to always work clean to dirty preventing cross contamination</li> </ul>	
	<ul style="list-style-type: none"> <li>- take a disposable cloth and immerse in the pre-made solution of chorine releasing agent, ring out, fold twice over which will give you four clean cloth surfaces, Wash all sanitary fixtures and fittings which may include wash hand basin, toilet, bath and shower area. Locally you may also use a sanitizer to clean these elements but chorine releasing agent must also be used. Pay attention to handles and hinges, wash all walls and paintwork within the sanitary area down using one swipe, fold a section of the cloth over to reveal a clean unused surface and wipe again. Ensure to always work clean to dirty preventing cross contamination</li> </ul>	
	<ul style="list-style-type: none"> <li>- prior to manual scrub of floor ensure all elements that have been cleaned and can be removed from the room provide a safe space to work in</li> </ul>	<p>Damp wipe from outside to inside and include hinges, foot pedal and behind foot pedal</p>
	<ul style="list-style-type: none"> <li>- elements within the room that cannot be removed outside the room, place these to one side of the room so you have a safe and clear area to start the manual scrubbing process</li> </ul>	
	<ul style="list-style-type: none"> <li>- scrub area of the floor using an appropriate manual scrubbing machine with tank and floor scrubbing pad. Ensure the tank has an appropriate amount of chlorine releasing agent mixed to manufacturer's instructions</li> </ul>	

	Detail	Safety and Hygiene
	<ul style="list-style-type: none"> <li>- follow the same process above until all hard floor has been scrubbed, including the sanitary area</li> </ul>	<p>Ensure floor is completely dry before removing wet floor sign(s)</p> <p>Dispose of mop head appropriately</p>
	<ul style="list-style-type: none"> <li>- remove PPE, dispose of in clinical waste bin and wash hands using soap and water</li> </ul>	<p>Return all equipment to DSR and leave clean and dry</p> <p>At end of task remove wet floor signs, dispose of PPE appropriately and decontaminate hands</p>
	<ul style="list-style-type: none"> <li>- return all furniture to the room. Hang clean curtains and shower curtains</li> </ul>	
	<ul style="list-style-type: none"> <li>- use alcohol gel to decontaminate your hands on leaving the room</li> </ul>	
	<ul style="list-style-type: none"> <li>- remove PPE and dispose of in appropriate waste stream</li> </ul>	<p>Ensure to follow local procedure when disposing waste into waste streams</p>
	<ul style="list-style-type: none"> <li>- return equipment to DSR</li> </ul>	
	<ul style="list-style-type: none"> <li>- ensure to clean and store all used equipment away appropriately</li> </ul>	<p>Dispose of PPE appropriately and decontaminate hands</p>

## Example of communication and notification in the event of a Terminal Clean



## Kitchen, Fixtures, Fittings and Appliances

### Microwave Oven (Patient or Regen Kitchen)

Collect equipment/materials	Detail	Safety and Hygiene
	<ul style="list-style-type: none"> <li>- wet floor signs</li> <li>- disposable cloth, micro-fibre or paper</li> <li>- colour coded re-usable equipment (buckets etc)</li> <li>- cleaning agent</li> <li>- PPE (i.e. apron, gloves, safety goggles etc) as per local policy</li> </ul>	<p>Responsibility as per local policy</p> <p>Ensure all equipment is clean prior to use and cleaned and dried prior to return to store</p>
Method	<ul style="list-style-type: none"> <li>- wear appropriate PPE</li> </ul>	Decontaminate hands prior to wearing PPE
	<ul style="list-style-type: none"> <li>- switch off power supply to the appliance</li> </ul>	Place wet floor signs where appropriate
	<ul style="list-style-type: none"> <li>- wear safety goggles and half fill bucket with warm water and add the cleaning agent in line with manufacturers' instructions; change cleaning solution as appropriate</li> </ul>	Safety goggles are available and recommended to protect you from solution splashing into your eyes when mixing chemicals
	<ul style="list-style-type: none"> <li>- immerse the cloth in the solution and wring out as tightly as possible; the cloth should be dampened and not soaking wet</li> </ul>	
	<ul style="list-style-type: none"> <li>- place all removable, non electrical components and place in container of water and correctly measured solution of detergent to soak</li> </ul>	
	<ul style="list-style-type: none"> <li>- wash the internal parts of the oven</li> </ul>	
	<ul style="list-style-type: none"> <li>- do not use green hand pad to remove stubborn deposits and grease as this may damage the internal surface</li> </ul>	
	<ul style="list-style-type: none"> <li>- rinse using fresh water and dry</li> </ul>	
	<ul style="list-style-type: none"> <li>- using a fresh solution of water and neutral detergent repeat this process on all external surfaces of the appliance taking care to avoid water entering vents</li> </ul>	
	<ul style="list-style-type: none"> <li>- rinse and thoroughly dry</li> </ul>	
	<ul style="list-style-type: none"> <li>- thoroughly clean and dry removable components</li> </ul>	Always follow manufacturer's cleaning instructions
	<ul style="list-style-type: none"> <li>- thoroughly clean controls and all other external surfaces</li> </ul>	

	Detail	Safety and Hygiene
	- re-assemble all components of the microwave	Check plug and cable for damage or breaks
	- switch on power only when assured unit is completely dry	Ensure power supply has been switched off prior to clean commencing
	- remove PPE and dispose of in appropriate waste stream	
	- return equipment to DSR	
	- ensure to clean and store all used equipment away appropriately	

### Required Outcomes:

Following the cleaning process the required standards are as follows:

- appliance is free of grease and dirt on inner and outer surfaces.

## Cooker strip and clean

Collect equipment/materials	Detail	Safety and Hygiene
	<ul style="list-style-type: none"> <li>- wet floor signs</li> <li>- disposable cloth, micro-fibre or paper</li> <li>- colour coded re-usable equipment (buckets etc)</li> <li>- cleaning agent</li> <li>- PPE (i.e. apron, gloves, safety goggles etc) as per local policy</li> <li>-</li> </ul>	<p>Ensure all equipment is clean prior to use and cleaned and dried prior to return to store</p>
Method	<ul style="list-style-type: none"> <li>- wear appropriate PPE</li> </ul>	<p>Decontaminate hands prior to wearing PPE</p>
	<ul style="list-style-type: none"> <li>- switch off power supply to the appliance</li> </ul>	<p>Place wet floor signs where appropriate.</p> <p>Ensure power supply has been switched off prior to clean commencing</p>
	<ul style="list-style-type: none"> <li>- wear safety goggles and half fill bucket with warm water and add the cleaning agent in line with manufacturer's instructions; change cleaning solution as appropriate</li> </ul>	<p>Safety goggles are available and recommended to protect you from solution splashing into your eyes when mixing the chemicals</p>
	<ul style="list-style-type: none"> <li>- immerse the cloth in the solution and wring out as tightly as possible; the cloth should be dampened and not soaking wet</li> </ul>	
	<ul style="list-style-type: none"> <li>- remove spillage tray, oven tray, pan rests and other removable parts and place in container of water and correctly measured solution of detergent to soak</li> </ul>	
	<ul style="list-style-type: none"> <li>- wash the internal parts of the oven and the grill</li> </ul>	
	<ul style="list-style-type: none"> <li>- use the green hand pad to remove stubborn deposits and grease</li> </ul>	
	<ul style="list-style-type: none"> <li>- rinse using fresh water and dry</li> </ul>	
	<ul style="list-style-type: none"> <li>- using a fresh solution of water and neutral detergent repeat this process on all external surfaces of the appliance</li> </ul>	
	<ul style="list-style-type: none"> <li>- rinse and thoroughly dry</li> </ul>	
	<ul style="list-style-type: none"> <li>- thoroughly clean spillage tray, oven tray and grill trays using green hand pad to remove stubborn deposits</li> </ul>	

	Detail	Safety and Hygiene
	- rinse with fresh solution of water and detergent and dry	
	- thoroughly clean hob, burners, pan rests, controls and all other external surfaces	
	- re-assemble all components of the cooker	Always check the appliance for damage or cable breaks
	- switch on power	
	- remove PPE and dispose of in appropriate waste stream	Ensure to follow local procedure when disposing waste into waste streams
	- return equipment to DSR	
	- ensure to clean and store all used equipment away appropriately	Dispose of PPE appropriately and decontaminate hands

### Required Outcomes:

Following the cleaning process the required standards are as follows:

- electrical and cooking fixtures and appliances are kept free from signs of use or non- use;
- cooker hoods (interior and exterior) and filters are free of grease and dirt on inner and outer surfaces.

## Defrosting refrigerator/deep freeze and clean

Collect equipment/materials	Detail	Safety and Hygiene
	<ul style="list-style-type: none"> <li>- wet floor signs</li> <li>- disposable cloth, micro-fibre or paper</li> <li>- colour coded re-usable equipment (buckets etc)</li> <li>- cleaning agent</li> <li>- PPE (i.e. apron, gloves, safety goggles etc) as per local policy</li> </ul>	Ensure all equipment is clean prior to use and cleaned and dried prior to return to store
Method	- wear appropriate PPE	Decontaminate hands prior to wearing PPE
	- switch off power supply to the appliance	Place wet floor signs where appropriate
	- wear safety goggles and half fill bucket with warm water and add the cleaning agent in line with manufacturer's instructions change cleaning solution as appropriate	Safety goggles are available and recommended to protect you from solution splashing into your eyes
	- immerse the cloth in the solution and wring out as tightly as possible; the cloth should be dampened and not soaking wet	Ensure power supply has been switched off prior to clean commencing
	- remove all contents and store at appropriate temperature	Check the appliance and cable for damage and breaks
	- remove shelves and ice trays, wash, rinse and dry	Do not use the green hand pad or abrasive pads to remove sticky stubborn marks/spillages as this will damage the surface
	- damp clean the external parts of the fridge/freezer	
	- once completely defrosted empty and clean the drip tray	
	- damp clean the inside compartments and door paying particular attention to the door seals. Rinse and dry	
	- replace shelves and trays	

	Detail	Safety and Hygiene
	- switch on power	
	- when the appropriate temperatures have been achieved replace the stock	
	The minimal temperatures should be as follows: - Fridge -1c – -4c - Freezer -18c – -22c	
	- remove PPE and dispose of in appropriate waste stream	Ensure to follow local procedure when disposing waste into waste streams
	- return equipment to DSR	
	- ensure to clean and store all used equipment away appropriately	Dispose of PPE appropriately and decontaminate hands

### Required Outcome:

Following the cleaning process the required standards are as follows:

- refrigerators/freezers are clean and free of ice build- up.

## 10. Work Schedule

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The NHSScotland Cleaning Services Specification conveys the standards to be maintained within Healthcare premises. These are described in the 'Required Outcome' measures, for the range of tasks applicable in most healthcare settings.

It is the responsibility of the Boards' Representatives to determine the appropriate frequencies for each task across the spectrum of facilities – clinical and non- clinical to enable the required outcomes to be achieved. The Risk Assessments for each of the tasks included in the NHSScotland National Cleaning Services Specification can be used in part to inform the proposed frequency. A schedule of work should be designed for each area to ensure that staff providing the service have clarity with regard to the tasks they are required to perform, and when they should be carried out. This schedule can also be used to inform service users of the details of service provision in their area.

The sample work schedule template:

- details the site, locations, operative/s shift times, date of issue, and provides a field to list the specific rooms/areas of responsibility. Any periodic duties to be undertaken can be noted in this section.

It then goes on to:

- detail the tasks which need to be undertaken, with scope for the Boards' Representatives to detail the frequencies, tailoring them to support the clinical service locally.

## 11. Sample Work Schedule: Clinical Area (content below is a guide to what can be included in a work schedule)

Site							
Location/Ward/Department							
Date of Issue							
Bed Areas/Day Room/Entrances/Steps/Ramps/Clinical Clean/Dirty Utility/Staff Changing Areas/Corridor/Stores/Sanitary Areas/Offices/Stairs/Fire Exits/DSR	Frequency per day						
Refuse	MON	TUE	WED	THUR	FRI	SAT	SUN
Collect and dispose of refuse as per local policy, replace liners.							
Clean inside and outside of a refuse holder.							
Furnishings							
Remove debris							
Door handles, desks, lockers, beds (head & foot), tables (wipe tables after each meal time), over head tables, exam couches, chairs, over chair tables, cabinets, bed lights, exam lights, light switches, light cords, control panels, patient call button, pictures, TVs and HiFi equipment, including remote controls, radiators, pipe work, ledges, fire extinguishers, decorative plants, trees and containers, clocks, patient-line units, desk telephones.							
Clean all wheels and castors	# Per week						
Paintwork/Walls, Doors, Glass Partitions, Laminate and Ceramic Wall Finishes							
Remove all marks, wipe door frames, handles, door signs, kick plates, walls, doors and door vents clean all internal glass, laminate and ceramic wall finishes.	# Full Clean # Checks						
Low Level Surfaces							
Clean all dado rails, window ledges, floors, vents, partition ledges, pipes, skirting and any other surfaces which may attract dust, graffiti or spillage	# Full Clean # Checks						
High Level Surfaces							
Clean wall surfaces, ledges, cabinets, furnishings, pipes, vents, grills, direction signs, curtain rails and bed rails which can be reached utilising high dusting tools.	# Per week						

	MON	TUE	WED	THUR	FRI	SAT	SUN
<b>Sanitary Fittings</b>							
Clean wash hand basins and surrounds, bath, showers, toilet, bidets, urinals, soap, toilet roll and towel dispensers inside and out, toilet brush holders, bath/shower mats, pipes, fixtures & fittings. Dry and buff the mirror, metal and ceramic surfaces. Avoid pushing cloths in tap and waste/overflow outlets Replenish all supplies: liquid soap and paper products.							
<b>Floors Hard/Soft</b>							
Remove debris (Check clean Dining Room after each Meal Time)							
Suction Clean (Mop Sweep)							
Damp Mop							
Spot Mop (Check Clean Dining Room after each Meal Time)							
Buff/Burnish							
Scrub							
<b>Cleaning Equipment</b>							
Clean and dry all equipment, segregate and store safely. Report faults to Supervisor							
<b>Window Curtain/Shower Screens</b>							
Window Blinds, Curtains, Bed Screens and Shower Curtains	As per Curtain Change Plan						
Periodic Duties	As per periodic Plan						
<b>Domestic Manager</b>					<b>Date</b>		
<b>Senior Charge Nurse</b>					<b>Date</b>		

## 12. References

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1. Compendium of Healthcare Associated Infection Guidance  
<http://www.hps.scot.nhs.uk/haic/publicationsdetail.aspx?id=47911>
2. National Facilities Monitoring Framework Manual  
<http://www.hfs.scot.nhs.uk/publications-/>
3. Monitoring Framework for NHSScotland National Cleaning Services  
Specification Guide for NHSScotland Managers Version 2, April 2010  
<http://www.hfs.scot.nhs.uk/online-services/publications/facilities/miscellaneous-facilities-documents>
4. Education Pathways for Estates Services and the Education Pathways for Facilities Services  
<http://www.estatesandfacilities.nes.scot.nhs.uk/learning/estates/education-pathways-for-estates-facilities-staff/>
5. National Infection Prevention and Control Manual,  
<http://www.nipcm.hps.scot.nhs.uk/>
6. PAS 5748: 2014 Specification for the planning, application, measurement and review of cleanliness services in hospitals  
<http://qna.files.parliament.uk/qna-attachments/175888%5Coriginal%5CPAS5748%20Specification%20for%20the%20planning,%20application,%20measurement%20and%20review%20of%20cleanliness%20services%20in%20hospitals.pdf>

## Appendix 1 – Sample Work Schedule

<b>Site:</b>	
<b>Location/Ward/Dept:</b>	
<b>Date of Issue:</b>	
<b>Shift Times</b>	

### Areas of Responsibility

Enter details of rooms to be cleaned in this section

### Weekly/Periodic Duties

Tasks undertaken less frequently than daily may be entered here

## Appendix 2: Membership of Technical Review for the NCSS 2014

<i><b>Name/Surname</b></i>	<i><b>Title</b></i>	<i><b>Organisation</b></i>
Neil Redhead (Chair)	Facilities Support Manager	Health Facilities Scotland
Audrey Bell	Support Services Manager/Lead Role Domestic Services	NHS Grampian
Angela Brown	Area Support Services Manager	NHS Dumfries and Galloway
Pamela Burnett	Housekeeping and Laundry Manager	The State Hospital
Anne Cairns	Customer Support Services Manager	NHS Forth Valley
Margaret Christie	Area Manager for Soft FM	NHS Lothian
Abigail Cork	Facilities Support Manager	Health Facilities Scotland
Michael Everden	Facilities Support Manager	Health Facilities Scotland
Heather Gourlay	Head of Prevention and Control of Infection	Golden Jubilee National Hospital
Alison Jamieson	Contracts Manager PFI/PPP	NHS Lanarkshire
Mary Anne Kane	Associate Director Facilities and Capital Planning Directorate	NHS Greater Glasgow and Clyde
Natalie Macdonald	Facilities Manager	NHS Borders
Annette McCafferty	Facilities Manager – Corporate Services	NHS Greater Glasgow and Clyde
Jackie McIntyre	Senior Nurse Infection Prevention and Control	Health Protection Scotland
Belinda O'Shea	Project Support Officer	Health Facilities Scotland
Neil Purdue	IC Auditor South West & West Central Divisions	Scottish Ambulance Service
Annette Rankin	Nurse Consultant	Health Protection Scotland
Midge Rotheram	Support Services Manager	NHS Fife

## Appendix 3: Template Risk Assessment

Date of Risk Assessment: .....

Review Date: .....

Risk Assessment number: .....

Unique ID	Associated Risks <i>If the hazard is not controlled or removed.</i>	Persons affected	What are the current control measures <i>Provide details of control measures already in place. If measures are detailed in other documents, state where.</i>	What, if any, further control measures are required <i>Note the action required, responsible person and target date.</i>	Risk Rating <i>Clinical area</i>	Risk Rating <i>Non-Clinical area</i>
	Insert Task				RED/AMBER/GREEN	RED/AMBER/GREEN