

# Environmental Services

Infection Prevention and Control Competency 2020



## Reflection: Positive Attitude

“A positive attitude causes a chain reaction of positive thoughts, events and outcomes. It is a catalyst and it sparks extraordinary results”

- Wade Boggs

“Remember, happiness does not depend upon who you are or what you have, it depends solely upon what you think”.

- Dale Carnegie



**1**  
Palm to palm



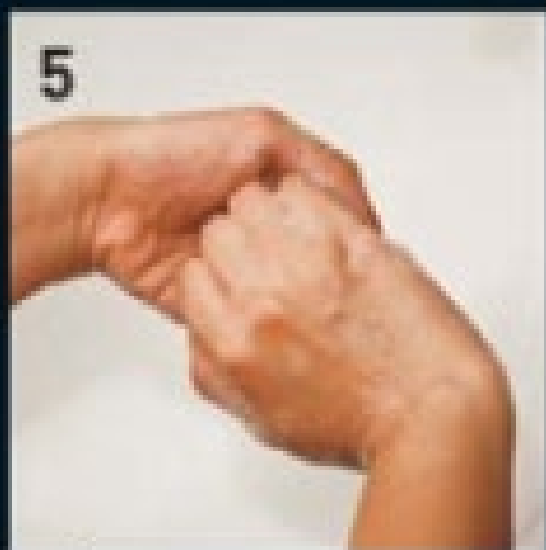
**2**  
Between fingers



**3**  
Back of hands



**4**  
Base of thumbs



**5**  
Back of fingers



**6**  
Fingernails



**7**  
Wrists

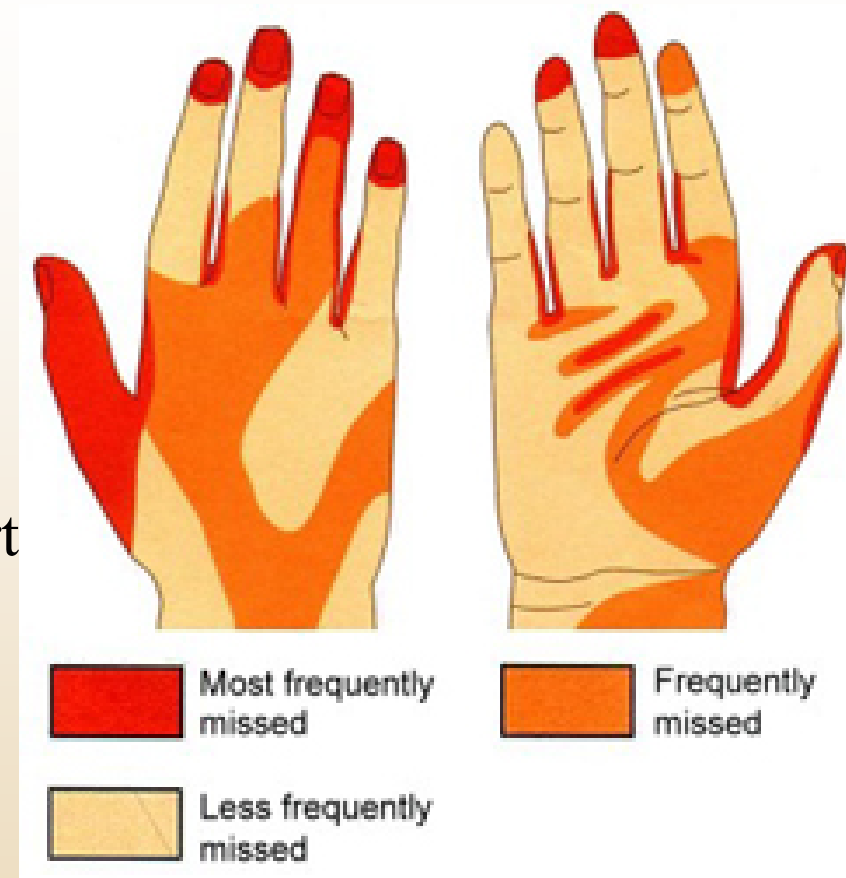


**8**  
Rinse and wipe dry



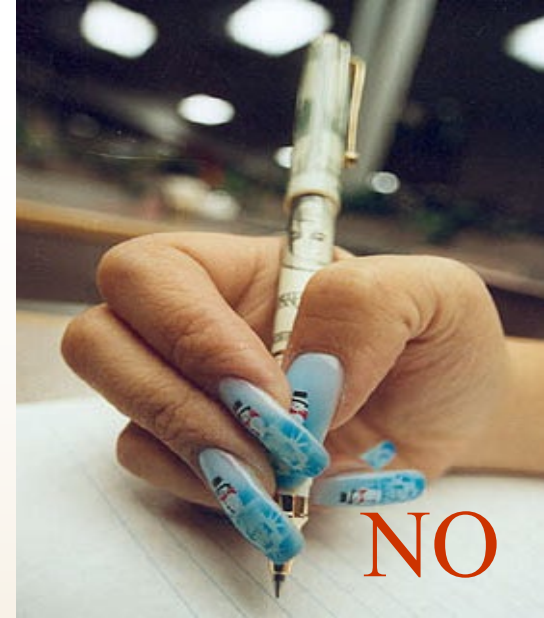
# Indications for Hand Hygiene

- Before gloving and entering a patient's room to clean
- After cleaning a patient's room and gloves are removed
- Before handling clean lining
- After bagging soiled linen and placing it in the linen cart
- After collecting and bagging trash and placing it in trash cart
- After handling soiled cleaning equipment( mops, cloths, bucket)
- After using the bathroom
- Before and after eating or going on a break
- **Isolation precautions:** The need for gowning, gloving and masking will depend on the isolation category



# Fingernail Hygiene

- **Natural nails are to be less than  $\frac{1}{4}$  inch past the finger tip.**
- **Nail polish may be worn but must be intact with no chips or cracks**

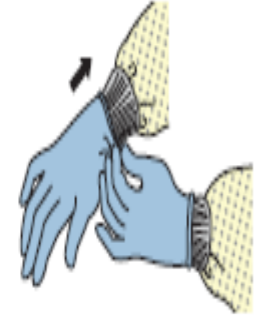


# Proper Usage of Gloves

- ➔ Don't substitute glove use for hand hygiene
- ➔ Don't use gloves if they are damaged or visibly soiled
- ➔ Don't wear gloves in the hallway
- ➔ Don't forget to remove and dispose of gloves properly

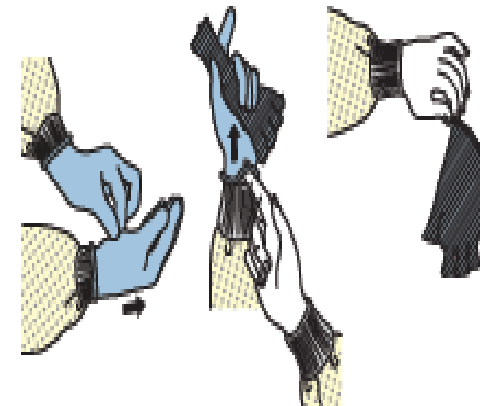
## 4. GLOVES

- Extend to cover wrist of isolation gown



## 1. GLOVES

- Outside of gloves are contaminated
- If your hands get contaminated during glove removal, immediately wash your hands or use an alcohol-based hand sanitizer
- Using a gloved hand, grasp the palm area of the other gloved hand and peel off first glove
- Hold removed glove in gloved hand
- Slide fingers of ungloved hand under remaining glove at wrist and peel off second glove over first glove
- Discard gloves in a waste container



# Contaminated Gloves: Cross contamination

- ▶ Hand hygiene and changing gloves are important
- ▶ Wearing the same pair of gloves for different tasks
- ▶ Scenario 1: Collecting trash to touching something in the patient room
- ▶ Scenario 2: Finish cleaning a patient room and head down the hallway to dispose of trash with same gloves
- ▶ Scenario 3: Pushing trash cart with dirty gloves and touching elevator button



# *C. diff*: What and HOW

- Antibiotic associated Diarrhea
- **Symptoms:** watery, non-bloody diarrhea, and lower abdominal pain.
- **Transmission:** spread via the fecal-oral route
  - Contaminated environmental surfaces
  - Contaminated hands of healthcare workers
- Transmission via environmental surfaces include: blood pressure cuffs, toilets, bedside commodes, electronic rectal thermometers, bed rails, call buttons, furniture, and improper gloving or glove removal techniques.
- The two major reservoirs of *C. difficile* are
  - Infected humans (symptomatic or asymptomatic)
  - Inanimate objects.



## **CONTACT PLUS PRECAUTIONS**

**IN ADDITION TO STANDARD PRECAUTIONS  
OBSERVE HAND HYGIENE**

**VISITORS: Report to nurse before entering**



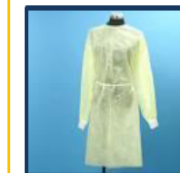
### **Patient Placement**

Private room, if possible. Cohort if private room is not available.



### **Gloves**

Wear gloves when entering patient room.  
Change gloves after having contact with infective material.  
Remove gloves before leaving the room.



### **Gown**

Wear gown when entering patient room if you anticipate that your clothing will have substantial contact with the patient environmental surfaces, or items in patient room. Remove before exiting.



### **Hand Hygiene**

Wash hands with antimicrobial soap and water before and after patient contact. Do not use gel hand sanitizer.



# Expectations of Daily and terminal cleaning *C.diff* rooms

## Daily EVS responsibility

- ▶ Ensure the gel package are out from *C.diff* rooms
- ▶ Daily twice cleaning the high touch surfaces with bleach wipes: 2<sup>nd</sup> cleaning performed by the 2<sup>nd</sup> shift. Logs maintained for both the shift
- ▶ Random inspection and effectiveness monitoring

## Terminal cleaning

- ▶ Disinfection of all high touch surfaces and equipment in room
- ▶ UV disinfection
- ▶ Remove curtains and curtain pulls.
- ▶ Discard the pillows
- ▶ Discard disposable toilet brush.
- ▶ Replacing toilet paper or discarding top layers of toilet paper rolls
- ▶ Discarding gloves, emesis bags, and other “open” supplies

# Cleaning sequence

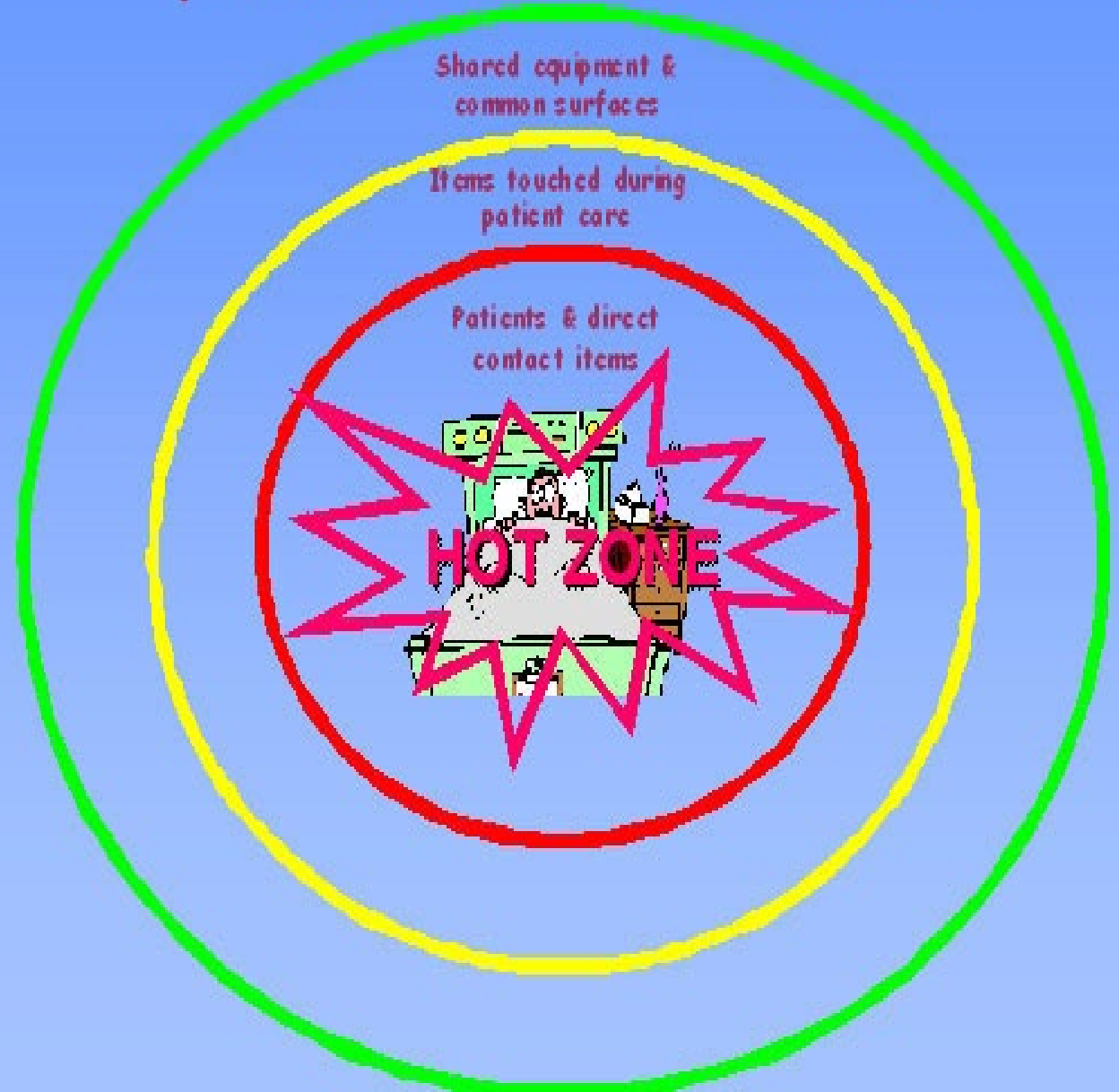
## ▶ 2 zones of care: Patient care and Health care zone

- ▶ Least soiled areas to the most soiled (patient zone) /clean to dirty
- ▶ High surfaces to the low ones

The equipment and areas closest to the patient are the most contaminated and considered the “hot zone”

Starting from main door, clean to the right in a 360 degree path

Concentric circles around patient signify levels of potential environmental contamination



# High touch surfaces

- Bed rails / controls
- Tray table
- IV pole (grab area)
- Call box / button
- Telephone
- Bedside table handle
- Chair
- Curtain pulls**
- Room sink
- Room light switch
- Room inner door knob
- Bathroom inner door knob / plate
- Bathroom light switch
- Bathroom handrails by toilet
- Bathroom sink
- Toilet seat
- Toilet flush handle
- Toilet bedpan cleaner



# Hospital approved disinfectants: EVS

## ➤ **Methods to disinfection**

- ✓ Recognize level of bioburden
- ✓ Be familiar with the type and level of contamination
- ✓ Disinfectants must be used according to the manufacture's instruction on the label (dilution, compatibility, contact time, storage, shelf life).
- ✓ Use the correct disinfectant for the object being cleaned
- ✓ Use standard precaution always
- ✓ Be consistent
- ✓ Disinfect environmental surfaces on a regular basis
- ✓ Disinfect, damp wipe, all horizontal, vertical and contact surfaces.
- ✓ Maintain **wipes wetnes**

## Contact time

- Virex plus: 3mins
- Prominence: Floor disinfectant
- Chlorox bleach wipes: 3mins
- Cavicide: 5 mins
  
- Blood and blood fluid spill cleaning kits
  - ✓ Small spillage
  - ✓ Large spillage

# Monitoring the effectiveness of terminal cleaning

- Visual inspection
- Black light
- ATP system

## Components of the SystemSURE Plus ATP Cleaning Verification System

The SystemSURE Plus ATP Cleaning Verification System consists of four parts:



# Bio hazardous Waste Management

- Bio hazardous waste placed in single leak resistant red plastic bag. Avoid multi lining the container.
- No Puncturing the red bag: to prevent leakage or expulsion of the contents
- Biohazard bags shall be tied to prevent leakage or expulsion of contents during all future storage and handling- “Goose neck “
- Do NOT reuse biohazard bags.





# Bio hazardous Waste Management

- ▶ **Cleanliness of Bio hazardous waste container:** Per HSC Section 118295, a person shall thoroughly wash and decontaminate reusable rigid containers for medical waste each time they are emptied, unless the surfaces of the containers have been completely protected from contamination by disposable liners, bags, or other devices removed with the waste. These containers shall be maintained in a clean and sanitary manner.
- ▶ Approved methods of decontamination include, but are not limited to, agitation to remove visible soil combined with one of the following procedures:
  - (a) Exposure to hot water of at least 82 degrees Centigrade (180 degrees Fahrenheit) for a minimum of 15 seconds.
  - (b) Exposure to chemical sanitizer by rinsing with, or immersion in, one of the following for a minimum of three minutes:
    - (1) Hypochlorite solution (500 ppm available chlorine).
    - (2) Phenolic solution (500 ppm active agent).
    - (3) Iodoform solution (100 ppm available iodine).
    - (4) Quaternary ammonium solution (400 ppm active agent).

# Reminders

- Remove sharp container if more than  $\frac{3}{4}$  full. They must be closed before they are overfilled
- Pick-up trash from the top
- Clean linen must be stored in covered carts or enclosed cabinets and kept covered during transport
- Soiled linen be placed in covered containers or bags
- Soiled linen carts should be cleaned and disinfected regularly
- Clean equipment: Cover them with plastic sheet after cleaning and store them clean area
- Securement of EVS closet



# Procedure for Exposure

- In case of exposure
  - Don't panic
  - Immediately wash exposed skin or flush mucous membranes with water
  - Report incident to your manager
- If you consent, you will be provided with
  - Confidential medical evaluation
  - Blood tests, preventive medications