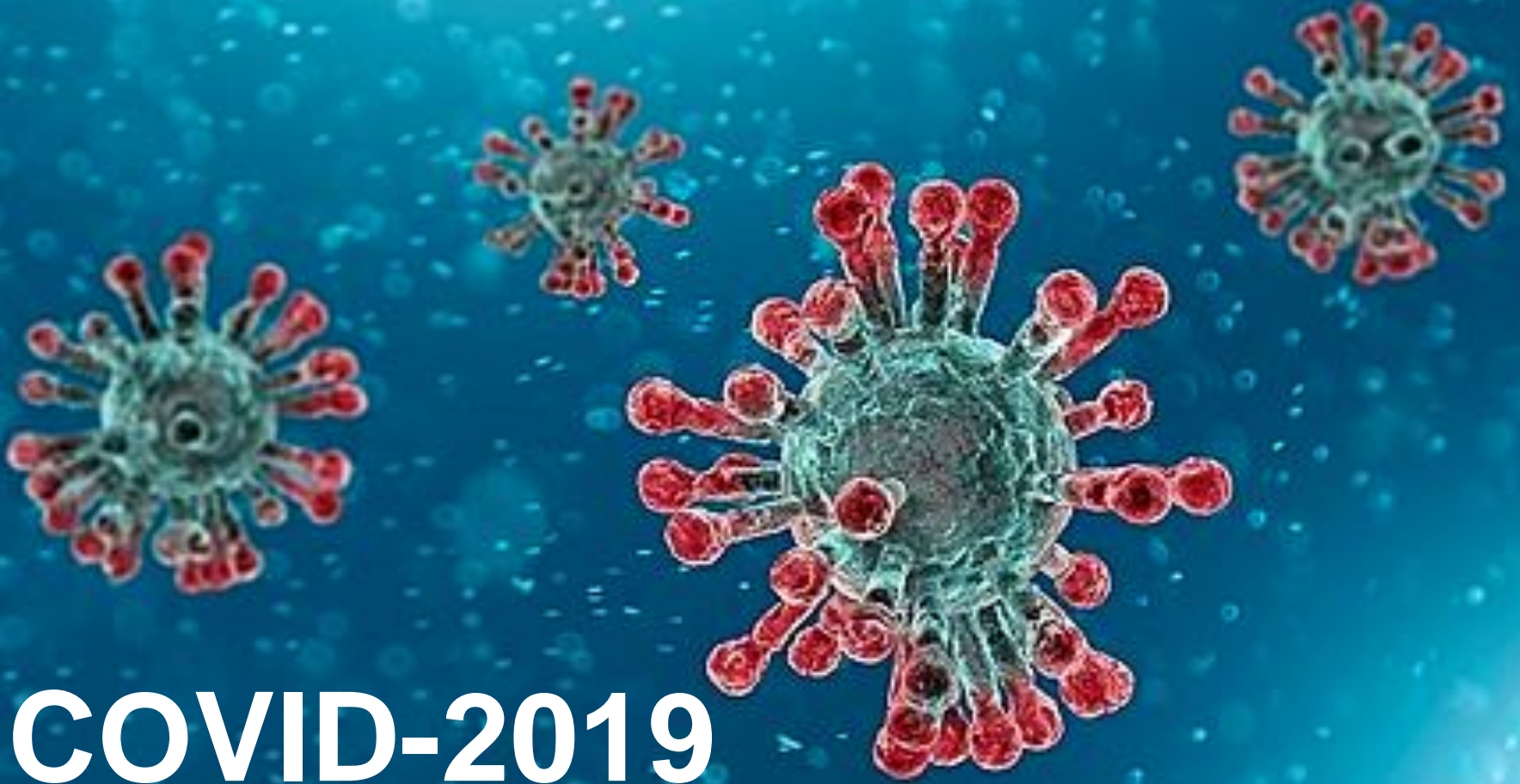


Environmental Cleanliness in Care Homes



COVID-2019

(Previously known as Wuhan Novel Coronavirus)

Why are we here ?



The aim of this session is :

- To increase awareness about Covid-19 and your role in maintaining a safe environment for our residents, yourselves and fellow colleagues as a team
- To provide staff with information and resources to manage suspected/ confirmed cases of Covid-19 or other infections

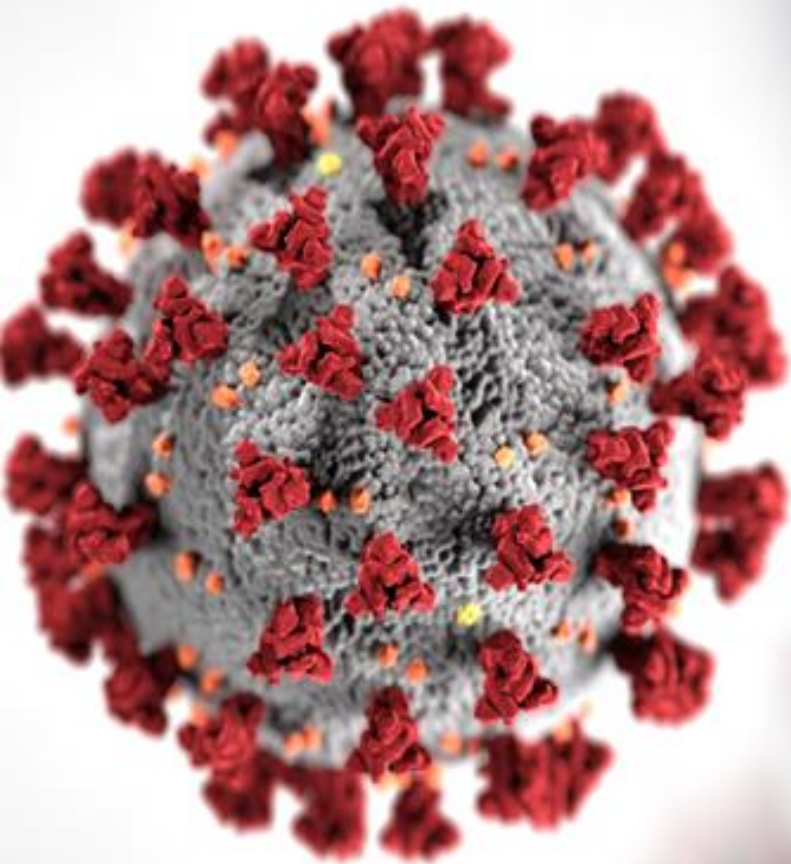
What are our objectives?



- Describe the appropriate PPE (Personal Protective Equipment) that should be used
- Key steps of cleaning
- Understanding environmental cleanliness standards
- Touch point awareness



What is Coronavirus/COVID-19?



COVID-19
CORONAVIRUS DISEASE 2019

Coronaviruses are a large family of viruses - they cause infections ranging from the common cold to Severe Acute Respiratory Syndrome

COVID-19 has the potential to spread widely as lack of immunity means everyone in the population is susceptible

CORONAVIRUS EXPLAINED



CATCH IT.



BIN IT.



KILL IT.

What are the signs & symptoms?

Common signs of infection include:

- Respiratory symptoms
- Fever
- Cough
- Shortness of breath
- loss or change in sense of smell or taste

In more severe cases infection can cause:

- Pneumonia,
- Severe acute respiratory syndrome
- Kidney failure
- Death



Cough



Runny nose



Sore throat



Fever



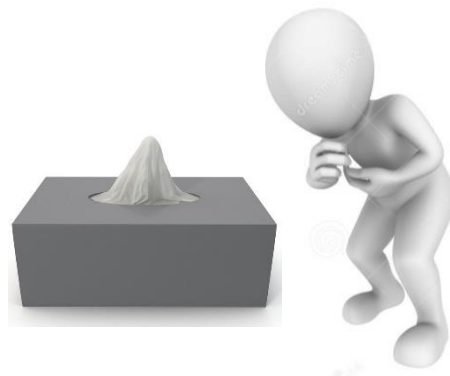
Difficulty breathing

Remember:

The symptoms are similar to other illnesses that are much more common, such as cold and flu

How is Covid 19 Transmitted?

- Coronaviruses are mainly transmitted by large respiratory droplets and direct or indirect contact with infected secretions e.g. coughing, sneezing at close contact (2 metres)
- Contact with respiratory secretions e.g. tissues/surfaces contaminated with respiratory secretions i.e. touch points
- It is NOT transmitted in air except if patient undergoing a procedure that generates aerosols e.g. airway suction



What are touchpoints?



- A few examples of touch points are; light switches, tv remotes, computer keyboards, door knobs, handles and plates, lift call buttons, call bells, number pads, microwave buttons, handle of kettles, dispensers, bin lids, chair backs and arms, table edges, toilet lids and handles etc.
- These are considered high risk areas to come in contact with disease, viruses, and germs. Touch points are the most important areas to address when cleaning.
- Touch Point Cleaning is a system of cleaning that focuses on high-traffic areas specifically “touch points”

Touch point cleaning is paramount to control the spread of Covid 19 or other infections and must be cleaned a minimum of **twice daily**, in **every area**, using a solution of Actichlor or another sodium hypochlorite



Common Touch Points





Common Touch Points



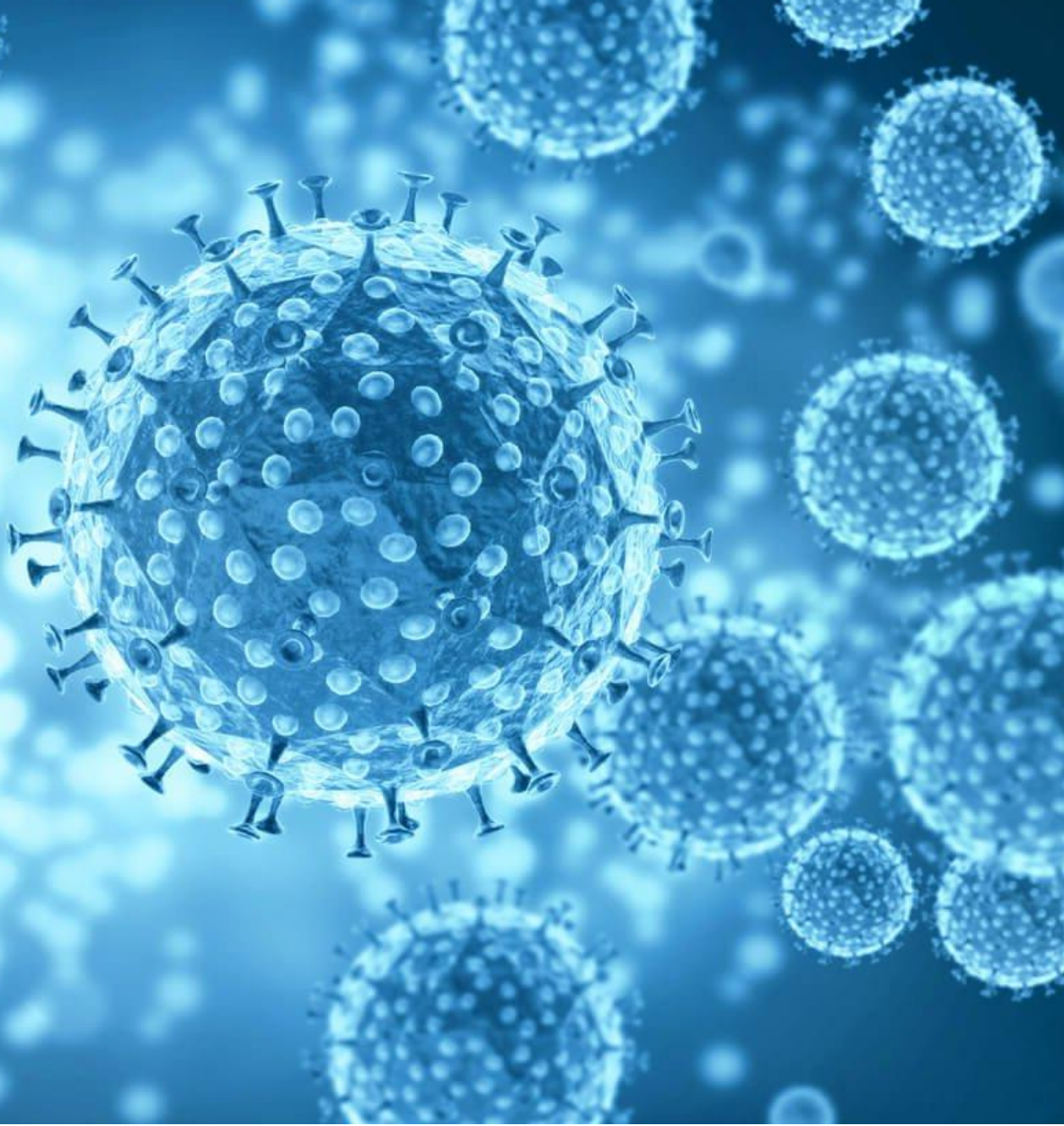
What is cleaning?



Cleaning is a process that removes visual dirt and contamination and many micro-organisms from equipment and the environment, using warm water and a detergent



However,
in certain situations
(e.g. during an
outbreak), surfaces
and equipment
require cleaning
and disinfection



What is disinfection?



Disinfection is a process that reduces the number of germs to a level at which they are not harmful. It is only effective if surfaces and equipment are cleaned thoroughly and following manufacturers instructions



What is the role of Environmental Cleanliness?

Support infection prevention and control, help reduce the incidence of healthcare-associated infections and ensure service user confidence

Clean fabrics and furnishings create a happier, healthier and more inviting living space, helping to create a pleasant, home from home feeling

Maintain effective care home environmental cleanliness levels to ensure that all surfaces, floors and equipment are clean

Staff play an important role in maintaining the quality of the environment and improving standards



What are the Key Principals in Environmental Cleanliness?

- ✓ Knowing the National Colour coding scheme
- ✓ Knowing what products to use - chemicals
- ✓ Knowing what to clean - surfaces/equipment
- ✓ Knowing how to clean - process to follow
- ✓ Knowing the frequency of cleaning/decontamination
- ✓ Ensuring there is a record of what has been done





National colour coding scheme

For cleaning materials and equipment in care homes

All care homes are recommended to adapt the colour code below for cleaning materials. All cleaning items, for example, cloths (reusable and disposable), mops, buckets, aprons and gloves, should be colour coded

RED Bathrooms, washrooms, basins, showers, toilets etc	GREEN Catering departments, food areas and food service
BLUE General areas including wards, department offices and basins in public areas	YELLOW Isolation Areas



COSHH - Safe use of Substances

- Wear correct PPE
- Correct chemical for the job
- Read Labels
- Correct dilution
- Never mix or decant chemicals
- Add chemical to water
- Ensure all lids and caps are firmly in place
- **Lock away after use and store safely**
- Only take out what you need to use at that time
- Make sure COSHH folder is accessible
- Only use approved chemicals



What is environmental cleanliness?



- Daily cleaning
- Enhanced cleaning
- Terminal cleaning



What is daily cleaning?



This is routine cleaning of the environment that should be undertaken at least daily within the care facility

What is enhanced cleaning?



During an outbreak of infection enhanced routine cleaning (**minimum twice daily**) is recommended. This is the disinfection of the environment including frequently touched points



Where do
we find
these?





CATCH IT.



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KILL IT.









CATCH IT.



BIN IT.



KILL IT.

What is a terminal clean?



A terminal clean is the disinfection of **all** surfaces including floors and re-usable equipment either within the whole care facility or within a particular part of the facility (e.g. individual residents room), following an outbreak, discharge, transfer or death

How do we do it?



Terminal cleaning procedure

Step 1 Gather Equipment



Terminal cleaning procedure

Step 2 Donning of PPE



Personal Protective Equipment



- For the safety of the residents and those working with them, it is imperative that staff who use PPE familiarise themselves with the type of PPE appropriate for the residential setting and the task and how to don and doff it safely and correctly



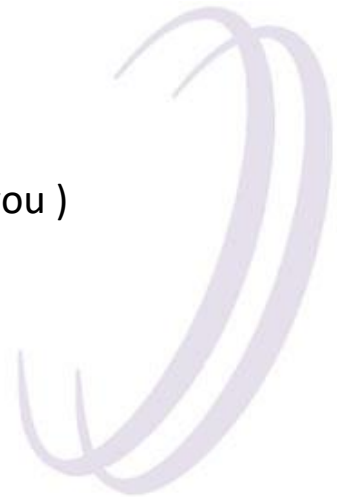
When to use PPE in Care homes ?



PPE is now required in every resident area

Droplet precautions to be used in all resident areas. PPE for droplet precautions are:

- Fluid shield surgical mask
- Disposable gloves
- Apron
- Visor or goggles (risk assess for the likelihood of a resident coughing towards you)



Droplet Precautions Donning of PPE



Ensure hair is tied back securely and off the neck and collar. Remove jewellery, ID badges, pens etc.



You are now ready to enter resident area



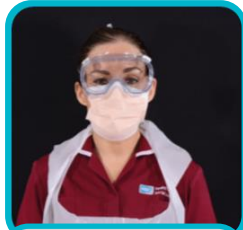
Perform hand hygiene, using soap and water, and/or hand sanitiser, following the 7 step hand hygiene



Put on non sterile nitrile disposable gloves



Apply disposable apron



Visors or goggles if there is a risk of splash



Apply fluid repellent face mask, mould the nose band over the ridge of the nose



Risk assess the need for further PPE



Terminal cleaning procedure

Step 3 Prepare cleaning solutions

Add disposable cloths to the bucket of solution



Put on safety goggles to make up solution



Fill bucket with cold water to correct amount

Add correct dilution of solution to the bucket of cold water



Terminal cleaning procedure

Step 4 Discard all disposables



Terminal cleaning procedure

Step 5 Curtains & Screens

- Curtains & screens must be removed to laundry in a soluble bag, placed inside a red linen bag



- If disposable curtains are used dispose of old curtain into clinical waste bag and replace



- Wash curtain rails using solution



- Steep curtain hooks in solution if non disposable curtains are used



Terminal cleaning procedure

Step 6 High level, Fixtures & Fittings

- Wash doors
- Vents & walls to arm length
- Wash bumper rail
- All light switches
- Pull cords
- All touch surfaces
- Fixtures & fittings
- Locker table (including edges and undersides)
- Chair
- Sockets



Terminal cleaning procedure

Step 7 Bed & Mattress

- Clean bed and mattress. Cleaning must include all hand contact points of the bed frame



Terminal cleaning procedure

Step 8 Sanitary Areas

- Clean all high level areas and walls to arms length
- Clean dispensers
- Cleans hand rails and pull cords
- Clean toilet using 4 cloth minimum (follow a “dirty to clean” regime)
- Clean Sink using 4 cloth minimum
- Clean all sanitary fittings i.e. shower , bath
- Replace toilet brush



Terminal cleaning procedure

Step 9 Floors

- Dust control the floor area using a disposable check sweep or vacuum. Vacuum must contain a HEPA filter
- Place debris from floor and disposable check sweep into orange clinical waste bag
- Vacuum must be decontaminated before leaving area and bag changed
- Clean floor using a disposable mop head and leave to dry



Terminal cleaning procedure

Step 10 waste



- The bin holders that the double orange clinical waste bags are in should be enclosed, lidded and operated by a foot pedal
- Dispose of all disposable equipment into orange clinical waste bag (no more than $\frac{3}{4}$ full)
- Swan neck and dispose of into outside clinical waste Eurobins
- Clean bin and replace bag



Terminal cleaning procedure

Step 11 Doffing of PPE



Carefully remove the gloves by grasping the glove at the wrist from the outside and peel back from hand



Perform hand hygiene, using soap and water, and/or hand sanitiser, following the 7 step hand hygiene



Remove apron by carefully tearing the ties at the neck



Roll apron away from body



Perform hand hygiene, using soap and water, and/or hand sanitiser



Remove mask, carefully untie the mask and remove away from face



Perform hand hygiene, using soap and water and/or hand sanitiser



Once outside resident area remove eye protection if applicable



Perform hand hygiene, using soap and water, and/or hand sanitiser

Staff should change aprons and gloves between each residents room

Face masks and eye protection (if eye protection is required) can be used until staff take a break



Using fluid shield masks safely



Do's



Perform hand hygiene directly prior to putting on the mask and directly after removal



Place mask carefully to cover mouth and nose. Tie securely to minimise any gaps between the face and the mask. Mould the flexible nose band over the bridge of your nose to ensure a good fit



Carefully remove mask by untying the straps. Dispose of immediately as clinical waste & perform hand hygiene

Don'ts



Once the mask is on do not touch/ handle the mask



Masks should not be partially removed and allowed to dangle around the neck, or removed from the face and reapplied

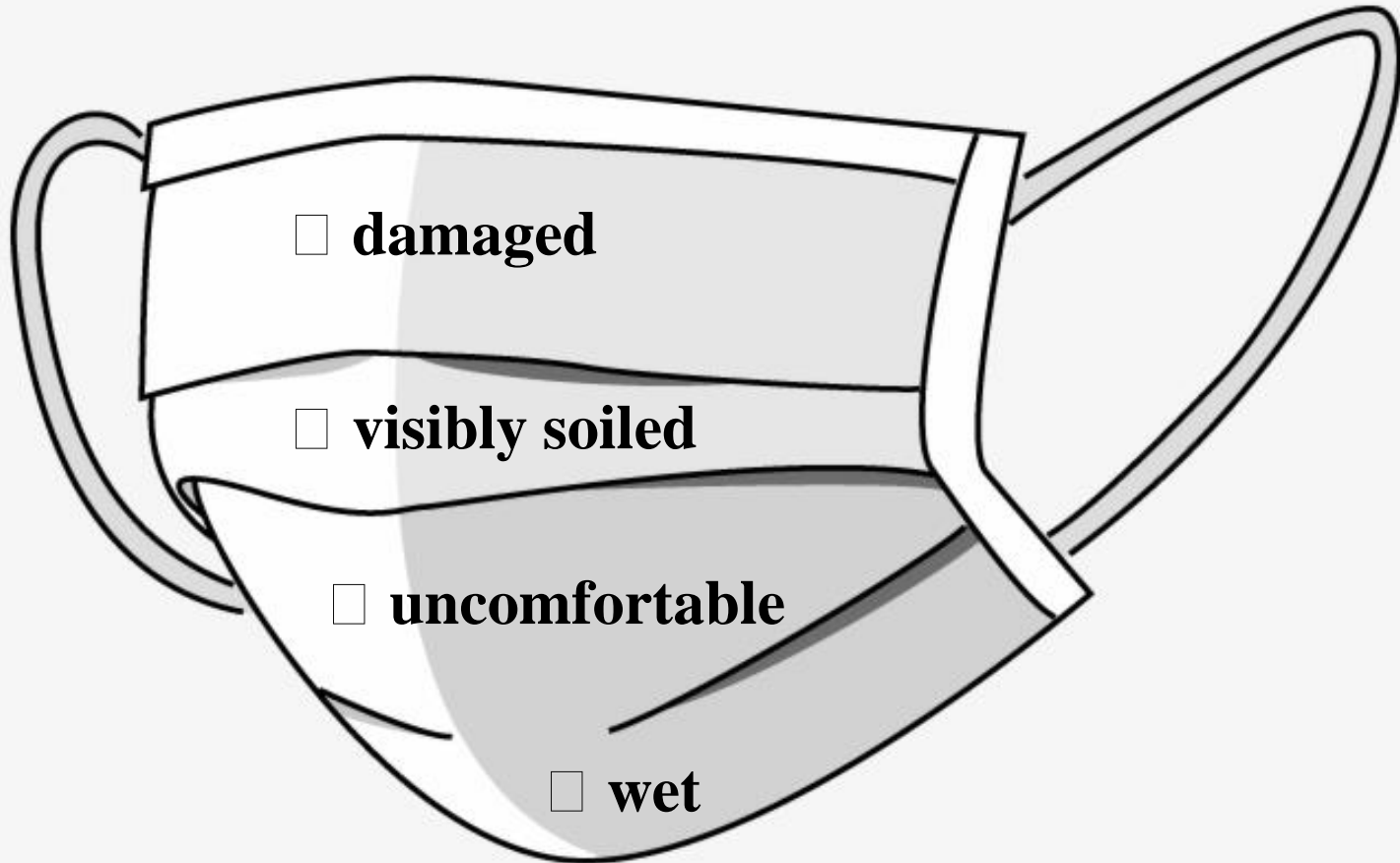


Where possible, avoid using telephones when wearing masks. If this is unavoidable, telephones should be decontaminated following each use

Using fluid shield masks safely



Masks should be changed after each session or earlier if:



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KILL IT.

PPE – Good Practice Points



- Hand hygiene – use soap and water to wash hands using the 7 step technique or an alcohol hand rub if hands are visibly clean, ensuring you include your forearms if exposed
- Staff must be bare below the elbow
- Try to keep hands away from the face
- Hair must be tied up and away from the face
- Adhere to existing uniform policy regarding footwear (closed, wipeable footwear)

How do we operate linen procedures?



- Linen should be managed in accordance with procedures for infectious linen
- Any linen, towels or clothing used by the service user should be treated as infectious and placed in a water soluble bag then placed inside a red linen bag.



How do we operate linen procedures?



- This should then be removed from the isolation room and placed directly into the laundry hamper/bag. Take the laundry hamper as close to the point of use as possible, but do not take it inside the isolation room. Then proceed straight to laundry area



How do we operate linen procedures?



- Do not take the laundry hamper into the laundry room. Place at door way and remove the red laundry bag from laundry hamper
- Place red linen bag directly into washing machine. This stops the risk of cross contamination of surfaces within the laundry room. Decontaminate laundry hamper
- Washing must be washed in a sluice cycle , (75°C)



When handling linen do not

- Rinse, shake or sort linen on removal from beds
- Place used/infectious linen on the floor or any other surface e.g. table top
- Re-handle used/infectious linen when bagged
- Overfill laundry bags
- Place inappropriate items in the laundry bags



Staff Uniforms



- It is best practice to change into and out of uniforms at work and not wear them when travelling. Change into and out of your uniform in the work place, uniforms should be transported home in a disposable plastic bag. This bag should be disposed of into the household waste stream
- Uniforms should be laundered:
 - separately from other household linen;
 - in a load not more than half the machine capacity;
 - at the maximum temperature the fabric can tolerate, then ironed or tumble-dried
- Showering when changing from uniform is not mandatory. Staff who prefer to do so can avail of existing change/showering facilities

For more information



- Please continue to refer to online resources at <https://www.publichealth.hscni.net/news/covid-19-coronavirus> for the most up to date information
- The Department of Health have produced guidance specifically for Care Homes <https://tinyurl.com/u5jrj3n> and for Domiciliary Care <https://tinyurl.com/rx>
- IPC cleaning manual <https://www.niinfectioncontrolmanual.net/cleaning-disinfection>

Key points to remember



- Hand hygiene and Environmental cleaning
- Systematically follow instructions for donning & doffing PPE
- Keep up to date with current guidance
- Communication between departments, Public Health Authority, Infection Prevention and Control and management teams etc. are on going

Remember.....

The Care of the Home is in Our Hands

