

Station Implementation Tips -Environmental Cleaning

1. Set-Up
 - a. Gather all:
 - a. Supplies- various sized gloves and gowns, eye protection and masks, alcohol-based hand rub/hand sanitizer (with at least 60% alcohol content), overbed table, various cleaning and disinfecting products
 - b. Teaching materials- PPT presentation, handouts, competency checklists, quiz copies
2. Provide a short overview of why maintaining a clean and safe environment is important
3. Demonstrate the principles of properly cleaning and disinfecting various surfaces
4. Perform cleaning and disinfecting competency validation with each staff member and document results on competency checklist.
 - a. Set up a room simulation – ask staff member to clean and disinfect various surfaces
 - i. Vary the scenarios – say resident has C. diff, norovirus, influenza, COVID-19 which require different disinfectants
 - b. If staff member did not successfully complete the competency:
 - i. Provide and document remedial education
 - ii. Repeat competency validation and document results
 - c. Administer Environmental Cleaning and Disinfection Quiz-keep completed quizzes in education file

Nursing Competency Checklist - Environmental Cleaning and Disinfecting

Required Step	Competent - Yes	Competent - No
States how to clean and decontaminate spills of blood or other potentially infectious material.		
Cleans and disinfects environmental surfaces using friction and appropriate product		
Able to identify key features of disinfectant label.		
States disinfectant contact time either from memory or by identifying it on the disinfectant label.		
States location of policies and procedures for cleaning and disinfection.		
Comments or follow up actions:		

Staff Signature

Validator Signature/Date

Quiz- Cleaning and Disinfection

Name_____

1. What information is important to read when looking at a disinfectant label?
 - A. Manufacturer's instructions for use
 - B. Contact time to follow
 - C. Type of germs the disinfectant can kill, e.g., bacteria, virus, spores
 - D. All of the above
2. When should the frames of transfer lift be cleaned and disinfected?
 - A. At the end of each day
 - B. When visibly soiled
 - C. After use on a resident on transmission-based precautions
 - D. All of the above
3. Which of the following is true regarding cleaning a soiled surface in the resident's room?
 - A. Nursing staff should get Environmental services staff to clean it
 - B. Leave it since EVS staff will get to it during the workday
 - C. Take a wet paper towel to wipe off the surface
 - D. Use friction with an approved cleaner
4. True or False: Nursing staff only need to wear personal protective equipment (PPE) if cleaning the room of a resident on transmission-based precautions
5. True or False: Environmental Services staff may be assigned to clean and disinfect resident care equipment.

Quiz Answer Key- Cleaning and Disinfection

Answer Key:

1. D
2. D
3. A
4. False
5. True

CLEANING

The physical removal of dust, soil, blood and secretions with water and detergents using mechanical action/friction. Cleaning does not kill microorganisms.

DISINFECTION

Chemical process for inactivating microorganisms on inanimate surfaces and objects.

CONTACT TIME

The time that a disinfectant must be in contact with a surface to ensure that disinfection has occurred. For most disinfectants, the surface should remain wet for the required contact time.

Determine cleaning frequency by the level of patient/resident contact and degree of soiling.

See chart below.

Surface	Low-Touch Surface	High-Touch Surface
Description	Surfaces that are minimally touched	Surfaces that are frequently touched
Example	Walls, ceilings, floors	Bedrails, overbed table, doorknobs, handwashing sinks
Cleaning Frequency	At least weekly and when visibly soiled	At least once daily

This material was prepared by Health Quality Innovators (HQI), a Quality Innovation Network-Quality Improvement Organization (QIN-QIO) under contract with the Centers for Medicare & Medicaid Services (CMS), an agency of the U.S. Department of Health and Human Services (HHS). Views expressed in this material do not necessarily reflect the official views or policy of CMS or HHS, and any reference to a specific product or entity herein does not constitute endorsement of that product or entity by CMS or HHS. 1250W/HQI/QIN-QIO-0359-11/15/22

CLEANING

The physical removal of dust, soil, blood and secretions with water and detergents using mechanical action/friction. Cleaning does not kill microorganisms.

DISINFECTION

Chemical process for inactivating microorganisms on inanimate surfaces and objects.

CONTACT TIME

The time that a disinfectant must be in contact with a surface to ensure that disinfection has occurred. For most disinfectants, the surface should remain wet for the required contact time.

Determine cleaning frequency by the level of patient/resident contact and degree of soiling.

See chart below.

Surface	Low-Touch Surface	High-Touch Surface
Description	Surfaces that are minimally touched	Surfaces that are frequently touched
Example	Walls, ceilings, floors	Bedrails, overbed table, doorknobs, handwashing sinks
Cleaning Frequency	At least weekly and when visibly soiled	At least once daily

This material was prepared by Health Quality Innovators (HQI), a Quality Innovation Network-Quality Improvement Organization (QIN-QIO) under contract with the Centers for Medicare & Medicaid Services (CMS), an agency of the U.S. Department of Health and Human Services (HHS). Views expressed in this material do not necessarily reflect the official views or policy of CMS or HHS, and any reference to a specific product or entity herein does not constitute endorsement of that product or entity by CMS or HHS. 1250W/HQI/QIN-QIO-0359-11/15/22

LIST YOUR FACILITY'S PRODUCT BELOW:

Disinfectant Product	Contact/Wet/Kill Time
	minutes
	minutes
	minutes

Include multi-use electronic equipment in the cleaning and disinfection schedule, especially those items that are used during delivery of care and mobile devices that are moved in and out of patient/resident rooms frequently (e.g., daily). These items must be cleaned before use on another patient/resident.

Use EPA-registered disinfectants that have microbiocidal (i.e., killing) activity against the pathogens most likely to contaminate the patient/resident-care environment.

Check with equipment/surface manufacturer for cleaning product compatibility.

WEAR PERSONAL PROTECTIVE EQUIPMENT

Wear personal protective equipment (PPE) (e.g., gloves, gown) when handling items that are visibly soiled or may have been in contact with blood or body fluids and per the cleaning/disinfectant product recommendation.

To avoid spreading dirt and microorganisms, clean from cleaner to dirtier areas and top to bottom.



Selected EPA-Registered
Disinfectants | EPA



LIST YOUR FACILITY'S PRODUCT BELOW:

Disinfectant Product	Contact/Wet/Kill Time
	minutes
	minutes
	minutes

Include multi-use electronic equipment in the cleaning and disinfection schedule, especially those items that are used during delivery of care and mobile devices that are moved in and out of patient/resident rooms frequently (e.g., daily). These items must be cleaned before use on another patient/resident.

Use EPA-registered disinfectants that have microbiocidal (i.e., killing) activity against the pathogens most likely to contaminate the patient/resident-care environment.

Check with equipment/surface manufacturer for cleaning product compatibility.

WEAR PERSONAL PROTECTIVE EQUIPMENT

Wear personal protective equipment (PPE) (e.g., gloves, gown) when handling items that are visibly soiled or may have been in contact with blood or body fluids and per the cleaning/disinfectant product recommendation.

To avoid spreading dirt and microorganisms, clean from cleaner to dirtier areas and top to bottom.



Selected EPA-Registered
Disinfectants | EPA



GERMS CAN LIVE ON DRY SURFACES.

WHERE IS THE RISK?

Know where germs live to stop spread and protect patients



- Germs found on the body, in the air, and in stool can often be found on dry surfaces, and some can live for a long time.
- Dry surfaces include “high-touch” surfaces like bed rails, door handles, and light switches. They also include countertops, bed curtains, floors, and things that might not be touched as often.
- Hands can pick up germs from dry surfaces and move them to other surfaces and people.
- Germs from dry surfaces can also get onto devices that are used on or in patients.

Germs That Live On Dry Surfaces

- *Clostridioides difficile* (*C. diff*)
- Methicillin-resistant *Staph aureus* (MRSA)
- *Candida* spp. (including *C. auris*)
- *Acinetobacter* spp.



Healthcare Tasks Involving Dry Surfaces

- Anything involving touch
- Using devices
- Patient transport

Infection Control Actions to Reduce Risk

- Cleaning and disinfection
- Hand hygiene
- Use of personal protective equipment (gloves and gowns)



U.S. Department of
Health and Human Services
Centers for Disease
Control and Prevention



WWW.CDC.GOV/PROJECTFIRSTLINE