POLICY ON CLEANING AND DISINFECTION OF EQUIPMENT, SURFACES, ENVIRONMENT AND SKIN

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1. INTRODUCTION

All medical devices, equipment, and the environment in healthcare settings may become contaminated with micro-organisms and thus can present a risk to patients, as well as to those subsequently handling or using equipment. Safe and effective decontamination of all re-useable equipment between uses is an essential part of routine infection prevention and control practice. Inadequate decontamination has been responsible for outbreaks of infection in healthcare establishments. Staff have a duty to ensure that all equipment they use in whatever setting is clean when used and effectively decontaminated between patients/clients.

Similarly skin may also be contaminated with micro-organisms and can develop into a source of infection due to flora transfer both to the patient and others. It is therefore essential to practice and encourage standard principles of infection control (including hand hygiene) at all times and with all patients.

Prior to purchasing equipment staff must ensure that the item can be decontaminated effectively and that the company supplying the equipment offers clear instructions on suitable cleaning, disinfection and sterilization methods. If advice is needed from the Infection Prevention and Control Team, please contact prior to purchasing equipment.

In order to ensure safe systems of work and to prevent transmission of infection, it is essential that decontamination of equipment and the environment is carried out. This is in accordance with the requirements of the Health and Social Care Act 2008.

2. PURPOSE

This policy ensures best practice is met and providers are expected to implement wherever practicable risk assessments must be submitted to the decontamination lead for instances when this policy is not adhered to.

3. SCOPE

This document applies to all staff employed by East Coast Community Healthcare CIC (ECCH).

4. DEFINITIONS

The following definitions are intended to provide a brief explanation of the various terms used within this policy.

| Term | Definition | |
|-----------------|-----------------------------------------------|--|
| Policy | A policy is a formal written statement | |
| | detailing an enforceable set of principles or | |
| | rules. Policies set the boundaries within | |
| | which we operate. They also reflect the | |
| | philosophy of our organisation. | |
| Decontamination | Decontamination is a process that removes | |
| | or destroys contamination and thereby | |
| | prevents micro-organisms or other | |
| | contaminants reaching a susceptible site in | |

| sufficient numbers to initiate infection or |
|---------------------------------------------|
| any other harmful response. |

5. **RESPONSIBILITIES**

- **ECCH Employees** Are responsible for the implementation of this policy and following the requirements of the policy.
- Chief Executive of ECCH Overall responsibility for the enforcement of this policy lies with the Chief Executive of ECCH
- ECCH Managers Are to ensure that staff are aware of this policy, have a suitable
 and adequate supply of cleaning and disinfection products appropriate to the care
 environment and use appropriate dilutions effectively and safely and compatible with
 the manufacturers decontamination guidance. It is the responsibility of managers to
 ensure that no domestic grade cleaning products are bought or used by staff in the
 healthcare environment.
- Infection Prevention & Control Team It is the responsibility of the Infection Prevention and Control Team to ensure this policy is reviewed and amended at the review date or prior to this following new developments in decontamination research.
- ECCH Board The Board has collective responsibility for ensuring assurance that appropriate and effective policies are in place to minimise the risks of health care associated infections.

6. POLICY STATEMENT

This policy ensures best practice is met and providers are expected to implement wherever practicable risk assessments must be submitted to the decontamination lead for instances when this policy is not adhered to.

7. GUIDANCE ON THE USE OF HEALTH CARE DEVICES Single use

The medical device is intended to be used once on an individual patient during a single procedure and then discarded. It is not intended to be re-processed or re-used on another patient. The re-use of single-use medical devices can affect their safety, performance and effectiveness, exposing patients and staff to unnecessary risk. Current Health Service Circulars (HSC's) and MDA guidance clearly state that medical devices designated for single-use must never be re-used.

A European standard symbol is used on packaging for all medical devices intended for single-use only. All staff involved in the decontamination process should be aware of and understand this symbol and its meaning.

Single Patient use

The medical device can be used more than once on one patient only. The device may need to be decontaminated between each use.

Re-usable

The medical device can be used for repeated episodes on different patients but requires appropriate decontamination between each use.

Further examples of symbols commonly used on healthcare devices and their packaging.

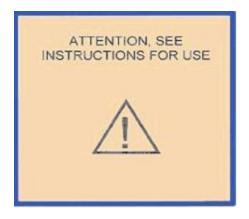
These are explained in more detail in the British and European Standard BS EN 980: 1997 Graphical symbols for use in the labelling of medical devices

If further clarification is required, please refer to the product instructions or user manual.









Appendix 1 below by the Medicines and Healthcare products Regulatory Agency (MHRA) is a useful source of relevant information and explanation.

8. PROCEDURE

Decontamination is a process that removes or destroys contamination and thereby prevents micro-organisms or other contaminants reaching a susceptible site in sufficient numbers to initiate infection or any other harmful response. It includes the processes of:

- Cleaning
- Disinfection
- Sterilisation

Note: Few methods of sterilisation or disinfection in routine use are effective in deactivating prions such as the causative agents of Crutzfield Jakob disease (CJD), scrapie, or Bourne Spongiform Encephalopathy (BSE), preferably by an automated and validated process of instruments is therefore vital to limit transmission of these agents.

8.1 Cleaning

Cleaning is a process that physically removes extraneous matter from devices, but does not destroy all micro-organisms.

8.1.1 Manual Cleaning

This can be achieved manually with detergent and hot water; prepared in clean container and with the use of a disposable cloth. Drying is essential to prevent any remaining bacteria from multiplying.

8.1.2 Mechanical cleaning (these are not currently by used in ECCH)

There are two main types of mechanical cleaning:-

- An Instrument Washing Machine will wash and dry devices. This machine should be used strictly to manufacturer's instructions.
- The preferred method of mechanical cleaning is by Ultrasonic apparatus. This dislodges organic and other matter from surfaces.

8.2 Disinfection

Disinfection is the removal or destruction of micro-organisms but not necessarily bacterial spores and/or some viruses. The ECCHs standard of cleaning for most items using Medipal wipes.

- Disinfection does not sterilise.
- Disinfection of medical devices must be carried out by properly trained and competent staff.
- Disinfection should be carried out to a written procedure, based on a risk assessment and in accordance with manufacturer's instructions.
- Disinfection can be achieved by heat or by chemical means and must always be preceded by cleaning.
- Incorrect concentrations may render a disinfectant ineffective.

8.3 Sterilisation

Sterilisation is a process used to render objects free from viable micro-organisms including bacterial spores and viruses.

8.4 Hand hygiene sinks

Dedicated hand hygiene sinks must never be used for any other purpose other than hand hygiene: this includes cleaning equipment or emptying/cleaning patient wash bowls.

Choosing the appropriate method of decontamination

| Risk | Indication | Recommendation |
|--------|-----------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------|
| High | Items that penetrate skin / mucous membranes or enter sterile body areas. | Cleaning followed by Sterilisation |
| Medium | Items in contact with intact mucous membranes, or contaminated with blood / body fluids | Cleaning followed by Disinfection (Except for instruments used in the vagina or cervix, e.g. speculae which must be sterilised between each use). |
| Low | Items in contact with intact skin or not in direct patient contact. | Cleaning |

| Chlorine releasing agent dilution instructions | Tablet size | 0.5g tablets | 1.7g tablets | 2.5g tablets | 5g tablets |
|------------------------------------------------|---------------------------|-----------------|-----------------|-----------------|---------------|
| Blood spillage | Number of tablets | 18 | 10 | 7 | 4 |
| (10,000ppm) | Amount of water in litres | 0.5 | 1 | 1 | 1 |
| General clinical | Number of tablets | 4 | 1 | 1 | 1 |
| environment (1,000ppm) | Amount of water in litres | 1 | 1 | 1.5 | 3 |

It is essential that fresh batches of the chlorine releasing solutions are made up as required. Made up solutions must be discarded after 24 hours.

Inpatient areas must use So Clor plus for high level cleaning to kill bacteria, viruses and spores, instructions on the label are to be followed. If other brands are used a careful check of the instructions must be made

It is vital that where possible the area is well ventilated when using this product, and PPE is worn when mixing as well as using chlorine releasing products COLD WATER dilution will minimize the odour.

Environmental cleaning following patient discharge or bed movement or during an outbreak

- 1. Patient bed areas (to include beds, table, locker, chair and all other equipment used in that area e.g. drip stands) must be cleaned thoroughly with hot water and detergent following discharge before next patient can be admitted into the vacated bed space.
- 2. Areas occupied by patients with a known infection should be cleaned using hot water and detergent then disinfected using a chlorine releasing agent.
- 3. The Infection Prevention and Control team may be contacted for further advice regarding curtain changes and steam cleaning etc.
- 4. Any contamination of the walls should be cleaned immediately therefore terminal wall washing is not required.

Cleaning of skin

| Procedure | Product |
|-------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Skin Hand Washing | For normal hand washing liquid soap is adequate. Patients at bed side must be offered hand wipes after using the commode and before meals if unable to |
| Skin | access soap and water |
| Hand rubs | Hand sanitiser should be used if hands visibly clean and no contact with patient suffering from diarrhoea. This gel should be available at the point of use and be an approved brand. |
| Skin | |
| Injection Sites | Clean with 70% isopropyl alcohol e.g. steret / mediswab prior to injection unless otherwise contra- indicated by the manufacturers. |
| Venepuncture | Swab the intended site with a swab containing 70% alcohol and allow to dry. |
| Cannulation site | Swab the intended site with a swab containing 70% isopropyl and 2% chlorhexidine gluconate and allow to dry see guidelines in Saving Lives. IT IS NOT SUFFICIENT TO USE AN INJECTION SWAB. VIP scoring must be documented. |
| Wound Cleaning | Wounds with minimal to moderate discharge can be cleaned with warm normal saline 0.9% sterile solution. Tap water of drinking quality can be used to irrigate wounds and to soak leg ulcers prior to dressings. Surgical/acute wounds must be cleaned with a sterile solution. |

Cleaning/Disinfection Chart A - Z

Re-usable medical equipment that has been cleaned or disinfected should be labelled, e.g., with 'I am clean' indicator tape or label giving details of the date of cleaning and signed by the person who performed the decontamination.

| Item | Recommended Method | Comments |
|----------------------------------|----------------------------------------------------------------------|-----------------------------------------------------------------------------------------|
| Acupuncture needles | Single use | Discard into sharps container conforming to British or United Nations current standards |
| Airways | Single use | |
| Ambu-bag / re- breathing bags | Dispose of filter and mask between uses and use disposable ambu-bags | |
| Ampoules | No preparation required | Discard into sharps container conforming to British or United Nations current standards |
| Auroscopes | Detachable earpieces single use item | |

| Item | Recommended Method | Comments |
|-----------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Baby changing mats | Cover with disposable paper roll and change between each baby. Clean with Medipal disinfectant wipes at the end of the session. If contaminated with body fluids mop up excess soiling with paper towels, clean as above then wipe with a chlorine releasing agent | If the plastic cover becomes torn or damaged the mat must be discarded |
| Baby Scales | Line with disposable paper roll and change this between each baby. Clean with Medipal disinfectant wipes at the end of each session. If contaminated with body fluids mop up excess soiling with paper towels, clean as above then wipe a chlorine releasing agent | |
| Baths, bath hoists and seats, wash basins, shower chairs and seats | Clean with hot water and detergent or Medipal disinfectant wipe after each patient | |
| Baby feeding bottles and teats. | Baby feeding equipment must be disinfected between use by either a cold sterilising unit or a steam steriliser following manufacturers guidelines. | Wherever possible encourage parents to bring in pre-made up bottles that once used are rinsed and returned to the parent for cleaning at home. |
| Bed Cradles | In hospital setting Clean with Medipal disinfectant wipes. In patients own homes: It is the user's responsibility to keep equipment dust free. If visibly soiled please clean with warm water and detergent (washing up liquid) When no longer required these should be returned to central equipment stores for cleaning prior to re-issue | In hospital setting Following use / discharge of a patients with a known infection or when contaminated with blood or body fluids clean with detergent and water followed by disinfection using a chlorine releasing agent dilute as per instructions |
| Bed frames Bed sides | In Hospital setting: Clean with Medipal disinfectant wipes In patients own homes: It is the user's responsibility to keep equipment dust free. If visibly soiled please clean with warm water and detergent (washing up liquid). When no longer required these should be returned to central equipment stores for cleaning prior to re-issue | In hospital setting Following use / discharge of a patient with a known infection or when contaminated with blood or body fluids clean with detergent and water followed by disinfection using a chlorine releasing agent |
| Bedside tables | In Hospital setting Clean with Medipal disinfectant wipes If contaminated with blood or body fluids clean with detergent and water followed by disinfection using a chlorine releasing agent (for dilution see page 9) and dry thoroughly. In patients own homes It is the user's responsibility to keep equipment dust free. If visibly soiled please clean with warm water and detergent (washing up liquid) When no longer required these should be returned to central equipment stores for cleaning prior to re-issue | |
| Bed pans | Disposable – disposed of into macerator. In the event of machine failure inform works department immediately and dispose of bedpan contents / urinal into lavatory or sluice then place bedpan / urinal into clinical waste bag for disposal | Inserts must be used in all cases |
| Bed pans | In patients own homes | |

| Item | Recommended Method | Comments |
|------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| | Empty contents down the lavatory, wash with detergent and hot water or Medipal disinfectant wipes and dry. Store to keep dust free. When no longer required these should be returned to central equipment stores for cleaning prior to re-issue | When undertaking these procedures appropriate personal protective equipment must be worn |
| Bedpan holders / slipper pan holders | Clean with Medipal disinfectant wipes. If visibly contaminated with blood or body fluids clean with detergent and water followed by disinfection using a chlorine releasing agent | These items must be replaced if showing signs of degradation |
| Blinds horizontal and vertical | Keep dust free – clean as per manufacturer's instructions All new blinds must be vertical and be able to withstand a hypochlorite clean | Contact Infection Prevention and Control if considering purchasing blinds or replacing existing blinds |
| Blood glucose monitoring | Inpatient wards use Medipal disinfectant wipes after every use Sharps containers must be taken to the point of use and items placed immediately into the container post use | The lancet containing the sharps should be discarded into sharps container conforming to British or United Nations current standards |
| Blood pressure sphygmomanometer and cuff | Clean with Medipal disinfectant wipes after each pat use or sooner if visibly contaminated. If unable to clean following contamination discard. Blood pressure cuff should not be placed next to broken skin if this unavoidable please contact infection prevention and control. For Doppler Cuffs please follow manufacturer's instructions. | Ideally patients in isolation should have their own blood pressure cuff. When purchasing new products avoid cloth where possible to improve the ability to clean the equipment |
| Breast pumps | Only electric breast pumps should be loaned - a supply of disposable milk collection sets should also be provided. Advice to mother is that the pump is cleaned with detergent and hot water then dry thoroughly daily. Advice to staff on return of pump clean as per manufacturers instructions Any demonstration items must be made of a material that can be wiped | Hand breast pumps should not be loaned out as no disposable milk collection sets are available |
| Buckets | Wash with hot water and detergent, rinse and store dry. Following contact with blood or body fluids clean with detergent and water followed by disinfection using a chlorine releasing agent and dry thoroughly | |
| Buckets for Leg Ulcers | Line with a plastic bag (with only one opening and no holes). After each use dispose of the bag, clean the bucket with hot water and detergent, and rinse and dry thoroughly. If plastic bag lining splits clean with detergent and water followed by disinfection using a chlorine releasing agent and dry thoroughly | Store clean and dry |
| Car seats | Follow manufacturers guidance replace when visibly contaminated with blood or body fluids. | |
| Carpets | Vacuum daily. Vacuum cleaners need to comply with standards set in BS5415. Carpets in clinical area require a 6 monthly carpet shampoo. Clean spills immediately. The area should be immediately shampooed. | CARPETS ARE NOT RECOMMENED FOR CLINICAL AREAS as they are impractical to clean. Alternative types of flooring must be considered when replacing |

| Item | Recommended Method | Comments |
|----------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Catheter bag holders Cervical | In Hospital settings Clean with Medipal disinfectant wipes between patients and at least weekly. If contaminated with blood or body fluids immediately clean with detergent and water followed by disinfection using a chlorine releasing agent and dry thoroughly In patients own homes: It is the user's responsibility to keep equipment dust free. If visibly soiled please clean with warm water and detergent (washing up liquid) When no longer required these should be returned to central equipment stores for cleaning prior to re-issue Single patient use only | If using metal plastic coated catheter stands the plastic should be intact. |
| diaphragms and caps (practice caps) | | |
| Cleaning equipment: 1. Wet mops | Disposable items | |
| 2. Mop buckets | Clean with hot water and detergent after each use and dry thoroughly- store inverted. | |
| Chairs | At hospital sites and health centres Clean with detergent and hot water, rinse or use and dry thoroughly, or Medipal disinfectant wipes daily,if soiled or if patient discharged or at the end of each clinic. In patients own homes: It is the users responsibility to keep equipment dust free. If visibly soiled please clean with warm water and detergent (washing up liquid). When no longer required these should be returned to central equipment stores for cleaning prior to re-issue. | Fabric chairs are unsuitable for clinical areas as they are impractical to clean. All chairs must be made of a fire retardant material |
| Combs | Patients must have their own individual comb. When visibly soiled, clean with hot water and detergent and dry thoroughly. | |
| Computers and | At Hospital sites Clean all surfaces with Medipal disinfectant wipes thoroughly between each use. If contaminated with blood or body fluids clean with detergent and water followed by disinfection using a chlorine releasing agent and dry* thoroughly. During an outbreak left to dry naturally*. In patients own homes: It is the responsibility of the user's to ensure the commode pot is emptied into a lavatory then rinsed and dried thoroughly. The pot should be stored in the commode. It is the user's responsibility to keep equipment dust free. If visibly soiled please clean with warm water and detergent (washing up liquid) When no longer required these should be returned to central equipment stores for cleaning prior to re-issue. | Disassemble and clean commode thoroughly at least daily. At the end of each shift is recommended. A record of cleaning must be maintained. If used for patient suffering from diarrhoea disinfect commode following cleaning with 1000ppm chlorine releasing agent. |
| Computers and other IT equipment in clinical areas | Keep dust free. If possible cover keyboard with plastic cover, the keyboard should be wiped with Medipal disinfectant wipes. It is | Decontaminate hands after touching the keyboard either |

| Item | Recommended Method | Comments |
|----------------------------------|------------------------------------------------------------------------------------------------------------------|----------------------------------------------|
| | expected that individual staff / clinical staff take responsibility | by washing or use of |
| | for the cleaning of this equipment. | sanitising gel. |
| | | Ensure that electrical supply |
| | | is turned off before cleaning |
| | | do not use large amounts of |
| | | water. |
| Cold / hot pad | Must have a plastic covering to aid cleaning after each use | Do not store in drug or food |
| | with hot water and detergent or detergent wipes then dry thoroughly. | fridge |
| Community | Clean by wiping over the bag with damp cloth containing | If bag machine washable |
| equipment bags | detergent and water / detergent wipe. This should be | follow manufacturers |
| including those used by District | undertaken at least weekly. | instructions regarding temperatures and wash |
| Nurses | | weekly. |
| Couches | Clean with Medipal disinfectant wipes between patients and | If the plastic cover becomes |
| (examination) | at weekly intervals. | torn or damaged the couch |
| | Disposable paper sheeting should be used to cover the | should be re-upholstered or |
| | examination couches. This covering should be single use only and changed between patients. | replaced. |
| | | Alcohol wipes should not be |
| | | used to clean this |
| Crockery, cutlery | Machine wash. Rinse temp above 80C | equipment. |
| Curtains | Routine change every six months +immediately if | Infection Prevention and |
| Curtains | contaminated. | Control team may request |
| | | additional cleaning for some |
| | | specific infections. |
| Damp dusting | Detergent and hot water using appropriate colour coded cloth. | |
| Denture pots | Patients must have their own named denture pot. These | |
| | must remain single patient use. Discard after patient discharge. | |
| Drip stands | At Hospital sites | Store clean and dry and |
| | Clean with Medipal disinfectant wipes between patient use, if | keep dust free when not in |
| | soiled and at least weekly. If contaminated with blood or body fluids clean with detergent and water followed by | use. |
| | disinfection using a chlorine releasing agent and dry | |
| | thoroughly. | |
| | In patients own homes | |
| | It is the user's responsibility to keep equipment dust free. If | |
| | visibly soiled please clean with warm water and detergent | |
| Drogging tralleus | (washing up liquid) and dry thoroughly. | |
| Dressing trolleys | Wash entire trolley with hot water and detergent or use Medipal disinfectant wipes before and after use. If | |
| | contaminated with blood or body fluids clean with detergent | |
| | and water followed by disinfection using a chlorine releasing | |
| | agent and dry thoroughly. | |
| Drainage and | | Store clean and dry and |
| suction jars: | | keep dust free when not in |
| Disposable | Use Vernagel gelling granules. Place in double orange bag | use |
| vacuum containers | for incineration. | |
| Containers | Where possible use disposable. Non disposable i.e. glass | |
| 2. Suction jars | and re-useable empty down sluice, clean with hot detergent | For non disposable suction |
| J | and water and disinfect bottle in 10,000ppm chorine | jars used for one individual |
| | releasing agent then dry thoroughly. | patient the contents of the |

| Item | Recommended Method | Comments |
|--------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Under-water seal bottles | Use disposable | jar should be emptied into a lavatory if a sluice is not available. Then clean the jar with detergent and hot water. It will require disinfection before use on another patient. |
| Ear syringing | Propulse | |
| equipment | Each day before use, the propulse must be disinfected using a chlorine based product to strength 1,000ppm. Fill tank with solution, run the machine to allow the solution to fill the pump and flexible tubing. Leave to stand for 10 minutes. Empty the tank, then rinse the system through with tap water before use At the end of the day disinfect as above. Rinse the machine through with running sterile water and dry thoroughly. Jet tip Applicators Single use disposable to be used. Jobson Horne Probe Return to appropriate sterile services. Speculum for Otoscope Disposable single use item. | |
| | Nootes Ear Tank | |
| ECG Equipment (machine and leads) | Return to appropriate sterile services. Wipe with a dilute detergent solution or clean with Medipal disinfectant wipes at least weekly and if soiled. | Electrodes must be disposable. Store clean and dry and keep dust free when not in use. |
| Eye testing glasses and vision eye patches | Wipe with Medipal disinfectant wipes between patients and store clean and dry. | Eye patches should be made of a wipeable material. |
| Endotracheal tubes | Single use only. | |
| Enteral feeding equipment. | Follow manufactures instructions for each product. At hospital sites The pump must be kept clean and dust free, wipe daily with detergent and water / Medipal disinfectant wipes In patients own homes It is the user's responsibility to keep equipment dust free. If visibly soiled please clean with warm water and detergent (washing up liquid). | When no longer required these should be returned to central equipment stores for cleaning prior to re-issue |
| Examination | | Please see couches |
| Examination lamps | Wipe with Medipal disinfectant wipes. | Ensure that electrical supply is turned off before cleaning. |
| Enuresis mats | Single patient uses –Medipal disinfectant wipes or as manufacturer's instructions. | |
| Enuresis Alarms | As per manufacturers instructions. | |
| Fans- not permitted in clinical areas | Need to be kept dust free. The outside and guard can be cleaned with Medipal disinfectant wipes when not operating. To clean the blades fan must first be dismantled by an appropriately trained person. | When purchasing new or replacing existing fans please contact Infection Prevention and Control for advice. |
| Floors (wet) | Should be cleaned with a detergent solution. Disinfection is not normally required. | |

| Item | Recommended Method | Comments |
|-----------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Floors (dry) | Should be vacuum cleaned or with a dust- attracting dry mop. | Vacuum cleaners need to comply with standards set in BS5415. |
| Flower Vases | Wash with hot water and detergent and dry thoroughly. When in use water must be changed daily. | Store clean and dry and keep dust free when not in use. NOT IN THE SLUICE . |
| Foam Wedges | At hospital sites Clean on patient discharge or when visibly soiled. Clean with Medipal disinfectant wipes. If contaminated with blood or body fluids clean with detergent and water followed by disinfection using a chlorine releasing agent. In patients own homes: It is the user's responsibility to keep equipment dust free. If visibly soiled please clean with warm water and detergent (washing up liquid) When no longer required these should be returned to central equipment stores for cleaning prior to re-issue. | Use only if covered with a plastic waterproof cover. If a hole appears the wedge must be discarded. |
| Glucometer | Clean machine with Medipal disinfectant wipes after every patient unless contaminated with blood or body fluids then clean immediately. Test strips – single use only. | |
| Gym Equipment (used by physio) | Clean all equipment with either hot water and detergent or Medipal disinfectant wipes between patient uses. If contaminated with blood or body fluids clean with detergent and water followed by disinfection using a chlorine releasing agent (for dilution see page 8). | |
| Hair Brushes | Single patient use. | |
| Height stick | Clean using Medipal disinfectant wipes after use at the end of each session and store clean. | |
| Hoists Hoist slings and | At Hospital sites / Clinics Clean between each patient use Medipal disinfectant wipes. Hoists are also subject to a pre-planned maintenance work through the works department. In patients own homes: It is the user's responsibility to keep equipment dust free. If visibly soiled please clean with warm water and detergent (washing up liquid) Hoists are subject to a maintenance programme through central equipment stores. When no longer required these should be returned to central equipment stores for cleaning prior to re-issue. Hoist slings – At hospital sites | Any soiling of fabric items |
| slide sheets (fabric) | Patients must have either their own re-useable hoist sling or disposable sling until discharge from hospital. On discharge it should be sent for laundered or disposal. Hoist slings – In patients own homes Patients must have their own hoist sling. When no longer required these should be returned to central equipment stores for cleaning prior to re-issue Sliding sheets – At hospital sites Patients must have their own sliding sheet if required, which should be laundered on discharge from hospital. Sliding sheets – In patients own homes Patients should have their own sliding sheet. When no longer required these should be returned to central equipment stores for cleaning prior to re-issue. | must be laundered immediately and must not be washed by hand in the department. All hoist slings are subject to maintenance programme either through works department or central equipment stores. |

| Item | Recommended Method | Comments |
|---------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------|
| Infusion pumps | At Hospital sites The pump must be kept clean and dust free, wipe daily with Medipal disinfectant wipes. If contaminated with blood or body fluids clean with detergent and water followed by disinfection using a chlorine releasing agent and dry thoroughly. In patients own homes It remains the responsibility of the nursing staff setting up the infusion pump – as at hospital sites. | Store clean and dry and keep dust free when not in use. |
| Instruments e.g. forceps, clip removers | Single use items must be disposed of after use. Reusable items to be returned to the sterile services department. | |
| Instrument transport container (dental and podiatry) | Once emptied the container can be placed through a washer disinfector if available. If washer disinfector not available clean with detergent and water followed by disinfection using a chlorine releasing agent and dry thoroughly. | |
| Interferential pads Jugs (non-sterile procedures i.e. those used measure urine) | Refer to manufacturer's guidance. Disposable urinals used for emptying catheter bags. Jugs used for the measurement of urine are single use disposable and must not be left in the sluice. | |
| Kidney Dishes | Disposable single use. Discard into macerator if available; if not available dispose of empty receptacle in orange clinical waste bag. | Kidney dishes should not be used as vomit bowls. |
| Laryngoscopes | Blades: disposable single use Handles: wipe with hot water and detergent/ Medipal disinfectant wipes. If contaminated with blood or body fluids clean with detergent and hot water followed by disinfection using a chlorine releasing agent and dry thoroughly. | |
| Lavatories (including raised lavatory seats) | At Hospital sites Cleaning should be undertaken daily and when soiled. Clean both sides of the seat with detergent and hot water. If patients using facilities suffering from diarrhoea clean with detergent and water followed by disinfection using a chlorine releasing and dry thoroughly. | If these items show signs of age or wear and tear they must be taken out of use and disposed of. |
| | In patients own homes It is the user's responsibility to keep equipment dust free. If visibly soiled please clean with warm water and detergent (washing up liquid). When no longer required these should be returned to central equipment stores for cleaning prior to re-issue | |
| Lavatory brushes | Store dry. Rinse thoroughly in toilet in flushing water and leave to dry in open sided holder. This is covered by the contracted cleaning team. The brushes should be changed when visibly soiled and always discarded following an outbreak or if used to clean a lavatory used by patients suffering from <i>Clostridium Difficile</i> . | |
| Linen Trolley Linen Skip | Should be cleaned with hot water a detergent at least weekly. If contamination occurs it should be cleaned immediately. If contaminated with blood or body fluids, | |

| Item | Recommended Method | Comments |
|------------------------|-----------------------------------------------------------------|-------------------------------|
| | clean with detergent and hot water followed by disinfection | |
| | using a chlorine releasing agent and dry thoroughly. | |
| Locker Tops and | At Hospital sites | |
| Tables | Clean with detergent and hot water and dry thoroughly daily, | |
| | and on patient discharge. If contaminated with blood or | |
| | body fluids clean with detergent and water followed by | |
| | disinfection using a chlorine releasing agent and dry | |
| | thoroughly. | |
| | In patients own homes | |
| | It is the user's responsibility to keep equipment dust free. If | |
| | visibly soiled please clean with warm water and detergent | |
| | (washing up liquid). | |
| LumiraDX POCT | Wipe with hot water and detergent/ Medipal disinfectant | |
| INR testing | wipes. If contaminated with blood or body fluids clean with | |
| · · | detergent and hot water followed by disinfection using a | |
| | chlorine releasing agent and dry thoroughly | |
| Mattress | At Hospital sites | Mattress must have plastic |
| | Medipal disinfectant wipes. Cleaning required if soiled and | waterproof cover. |
| | on patient discharge. If contaminated with blood or body | In the event of the outer |
| | fluids clean with detergent and water followed by disinfection | plastic cover becoming |
| | using a chlorine releasing agent and dry thoroughly. | damaged (split) the item |
| | In patients own homes | should be disposed of as |
| | It is the user's responsibility to keep equipment dust free. If | clinical waste. |
| | visibly soiled please clean with warm water and detergent | |
| | (washing up liquid). | Specialist mattresses should |
| | When no longer required these should be returned to central | be cleaned according to |
| | equipment stores for cleaning prior to re-issue. | manufacturers instructions. |
| | | |
| Medicine pots + | These are single use items only. | |
| spoons | | |
| Monkey poles | See bed frame cleaning. | |
| Mop heads | | See Cleaning Equipment |
| Nebulisers, mask | Single patient use. – between use wash chamber and mask | Clean the machine as per |
| and tubing | thoroughly with hot water and detergent, rinse and dry | manufacturers instructions. |
| | thoroughly. Replace weekly or if heavily soiled. When | |
| | patient discharged discard single patient use item. | |
| Needles | Single use only | |
| Oxygen tubing and | Single patient use. Each patient must have their own mask | |
| mask | and tubing masks which should be cleaned with hot water | |
| | and detergent as required if soiled, and change at least | |
| | weekly. Discard on discharge from hospital. | |
| O ₂ machine | Follow manufacturer's instructions damp dust daily clean | |
| | filters weekly when in use or after each patient use. | |
| Peak flow | Use single use disposable mouthpieces. | Wherever possible allocate |
| machines | | patients their own machine. |
| Pillows | Examination couches – pillows must be cleaned between | Pillows must have plastic |
| | patients with Medipal disinfectant wipes. | intact cover. This must be |
| | | regularly checked for holes |
| | Inpatient Services – clean with Medipal disinfectant wipes on | -if when a pillow is 'hugged' |
| | patient discharge and when soiled. | air escapes then the cover |
| | | has a hole in it. |
| | If contaminated with blood or body fluids clean with | In the event of the outer |
| | detergent and water followed by disinfection using a chlorine | plastic cover becoming |
| | releasing agent and dry thoroughly. If contamination has | damaged the item should be |
| | | |
| | leaked onto the fabric then the pillow must be disposed of | disposed of as clinical waste |

| Item | Recommended Method | Comments |
|-----------------------|--------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------|
| Podiatry chair | Clean with Medipal disinfectant wipes before and after each | |
| - | session. Use paper couch roll for each patient. | |
| Podiatry | Clean entire trolley with Medipal disinfectant wipes at the | Ensure no items are left on |
| workstation / trolley | beginning of the session and when visibly soiled. Wipe work | the trolley when not in use. |
| 5 | area with Medipal disinfectant wipes between each use. | |
| Pulse oximeter | Clean with detergent wipes between patients and at least | |
| Pressure relieving | weekly. At Hospital sites | If contaminated with hady |
| aids e.g. | Must be allocated to an individual patient, cleaned when | If contaminated with body fluids refer to manufacturers |
| mattresses, | soiled and on discharge using Medipal disinfectant wipes. | instructions |
| cushion | Tooliou and on alconarge doing mealpar alconitotiant impoor | men denone |
| | In patients own homes | |
| | It is the user's responsibility to keep equipment dust free. If | |
| | visibly soiled please clean with warm water and detergent | |
| | (washing up liquid). | |
| | When no longer required these should be returned to central | |
| | equipment stores for cleaning prior to re-issue. | |
| Razors (wet shave) | Use disposable single use or patients own. | Do not allow sharing of |
| . | | razors |
| Razors electric | Patients own only clean as per manufacturer's instructions. | Do not allow sharing of |
| Scales | Clean with Medinal disinfectant wines after each use | razors |
| Scissors | Clean with Medipal disinfectant wipes after each use. Use sterile scissors for aseptic procedures (discard single | |
| 30133013 | use into 'sharps' container – return reusable scissors to | |
| | HSDU for reprocessing). | |
| Speculae (vaginal) | Single use items. | |
| Sputum pots | Single use items – change daily. | |
| Sphygmomanometers | , | See blood pressure cuffs |
| Stethoscopes | Wipe the bell and diaphragm (the ends) with Medipal | Infection Control |
| | disinfectant wipes between patient contact. | recommends that each |
| | Earpieces should be removed and cleaned with Medipal | member of staff has their |
| | disinfectant wipes | own Stethoscope. |
| Sticks, frames and | At Hospital sites and clinics | |
| crutches | Clean with Medipal disinfectant wipes | |
| | In patients own homes It is the user's responsibility to keep equipment dust free. If | |
| | visibly soiled please clean with warm water and detergent | |
| | (washing up liquid). | |
| | When no longer required these should be returned to central | |
| | equipment stores for cleaning prior to re-issue. | |
| Suction equipment | All new suction machines purchased must be of a type with | Also see Drainage & |
| | disposable collection bottle liners. | Suction Jars |
| | At Hospital sites | |
| | Change liner daily when in use. | |
| | Accessories | |
| | Suction catheters – single use. Use once and discard. | |
| | Filters – disposable – change every three months or when | |
| | wet or visibly soiled or as otherwise instructed by manufacturers. | |
| | Tubing must be single patient use. | |
| | Machines – wipe weekly or when soiled with hot water and | |
| | detergent / detergent wipes. Dry thoroughly. | |
| | In patients own homes | |
| | Bottles - If disposable available change liner daily. If non | |
| | disposable collection jars used the contents should be | |
| | emptied down a lavatory and then cleaned with hot water | |
| | and detergent and dried thoroughly. | |

| Item | Recommended Method | Comments |
|-------------------|------------------------------------------------------------------|-----------------------------|
| | Suction catheters – single use only | |
| | Tubing – Single patient use, flush through after each use | |
| | and change every seven days unless copious amounts of | |
| | secretions are present – if this is the case change daily. | |
| | Machine - It is the user's responsibility to keep equipment | |
| | dust free. If visibly soiled please clean with warm water and | |
| | | |
| | detergent (washing up liquid). | |
| | Filter changes and maintenance – carried out by central | |
| | equipment services on long term loans as necessary. | |
| | When no longer required these should be returned to central | |
| | equipment stores for cleaning prior to re-issue. | |
| Tens machine | Pads – must be disposable single use items. | If contaminated with blood |
| | Leads and machine - wipe with Medipal disinfectant wipes | or body fluids refer to |
| | between uses by different patients, at least weekly or if dirty. | manufactures instruction. |
| Telephones | Keep dust free. | |
| | Phones should be wiped with Medipal disinfectant wipes. It | |
| | is expected that clinical staff take responsibility for the | |
| | cleaning of this equipment. | |
| Tomometer Heads | Follow manufacturer's guidance. | |
| Thermometers | Use disposable thermometers or those with a disposable | Mercury thermometers are |
| | sleeve. Digital – use a new sleeve cover for each use. | NOT recommended. |
| | Wipe thermometer with Medipal disinfectant wipes between | |
| | patients. | |
| Toothbrushes | Single patient use only. | |
| Tourniquets | Disposal tourniquets must be available. | Fabric Tourniquets are not |
| Tourniquets | Disposal tourniquets must be available. | |
| | | recommended as they are |
| Ta. /a | Tour must be also and with het water and determent / | impractical to clean. |
| Toys | Toys must be cleaned with hot water and detergent / | Soft toys and those made of |
| | Medipal disinfectant wipes at least weekly and when soiled. | wood are not |
| | | recommended, as they are |
| | | impractical to clean. |
| | | Toy cleaning schedule |
| | | should be available and |
| | | records kept. |
| Urinals | At Hospital sites | |
| | Disposable – disposed of into macerator. In the event of | |
| | machine failure inform works Department immediately and | |
| | dispose of bedpan contents / urinal into a lavatory or sluice | |
| | then place bedpan / urinal into clinical waste bag for | |
| | disposable. | |
| | In patients own homes | |
| | It is the user's responsibility to empty contents down a toilet, | |
| | rinse thoroughly and dry. Store to keep dust free. When no | |
| | longer required these should be returned to central | |
| | equipment stores for cleaning prior to re-issue. | |
| Ultrasound probes | To be used only on intact skin. | |
| Ziliacoana probos | For Leg Doppler | |
| | Remove gel from probe after each use with disposable | |
| | paper towel. Then wipe the probe with a Medipal | |
| | disinfectant wipes | |
| | Abdominal Bladder Scans | |
| | | |
| | Remove gel from probe after each use with disposable | |
| | paper towel. Then wipe the probe with a Medipal | |
| | disinfectant wipes . | |
| | Vaginal Probes | |
| | Single patient use. | |

| Item | Recommended Method | Comments |
|--------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------|
| Vacutainer (needle | Single use, discard after each procedure. | |
| holders) | | |
| Vaginal Cones | Single patient use | |
| Volumatic | Single patient use | |
| Vomit bowls | Disposable - single use discard into macerator or dispose of contents into a lavatory and then dispose of receptacle in orange clinical waste bag. | |
| Wax baths | Wax should be processed between patients at 70°C for at least 3 minutes. | Only use on patients with intact skin and without skin condition. |
| Wheelchairs | At Hospital sites Clean weekly and when visibly soiled with hot water and detergent /Medipal disinfectant wipes. If contaminated with blood or body fluids clean with detergent and water followed by disinfection using a chlorine releasing agent and dry thoroughly. In patients own homes It is the users responsibility to keep equipment dust free. If visibly soiled please clean with warm water and detergent (washing up liquid). | |
| Weighing scales (seated adult) | Line with disposable paper towels. Clean with hot water and detergent/ Medipal disinfectant wipes. If contaminated with blood or body fluids clean with detergent and hot water followed by disinfection using a chlorine releasing agent and dry thoroughly. | |
| Work Surfaces | Clean daily with hot water and detergent / detergent wipes. | |

If there is a particular item not stated above, please contact the Infection Prevention and Control Department for further details (01502 445361).

All wards and departments are required to maintain an inventory of equipment with a cleaning schedule and proof of compliance that will be checked at the department's annual infection control audit

Spillages

Procedure for Dealing with Body Fluid Spill on Hard Surface

- All spillages should be considered potentially infectious regardless of the patient's condition.
 Blood and body fluids may carry infectious micro organisms.
- Clinical staff are responsible for cleaning and disinfection of blood and body fluid spillages
 and should do so promptly wearing the correct personal protective equipment (PPE) (see
 standard precautions policy) following one of the two methods described below.
- All waste materials generated when mopping up body fluid spills, should be treated as Hazardous and disposed of accordingly.
- Hands must be washed following removal of PPE.

Method 1:

- Sprinkle absorbent disinfectant granules over the spillage and allow them to absorb the liquid for about 2 minutes.
- Remove waste and dispose of in a orange waste bag (Hazardous waste).

The area must then be cleaned thoroughly using detergent and water and dried.

Method 2:

- The spillage should be covered with disposable paper towel to soak up excess. These should then be gathered up and placed in a orange waste bag (Hazardous waste).
- The area must then be cleaned thoroughly using detergent and hot water and dried.
- The area must then be disinfected using a chlorine releasing agent Urine and vomit spillages:
- Chlorine releasing agents must never be poured directly onto urine or vomit as this causes chlorine gas to be released.
- For urine and vomit spillages follow method 2.

Spills on soft furnishings:

- Clean spills immediately
- Cover with disposable paper towel to soak up excess. These should then be gathered up and placed in a orange waste bag (Hazardous waste).
- The area must then be cleaned thoroughly using detergent and hot water.
- A steam clean should then be carried out by contract cleaners (this will need to be requested)

9. MONITORING AND REVIEW

It is the responsibility of all department heads/professional leads to ensure that the staff they manage adhere to this policy. The ECCH decontamination lead will audit the use of this policy, in conjunction with department heads/professional leads of Community Services, annually and submit to IPACC as part of the annual infection prevention and control report. Team leaders are required to complete all required audits. This policy will be reviewed by the Infection Prevention and Control Team.

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11. ASSOCIATED POLICIES & PROCEDURES

Enteral Feeding

12. AUTHOR

Infection Prevention and Control Team September 2022

13. APPENDICES

- 1. Single use medical devices
- 2. Annual audit tool
- 3. Declaration of decontamination status



Appendix 1

Single-use medical devices



How do I know if a device is for single-use?

It will have this symbol on the packaging or the device:



What does single-use mean?

Do not reuse. A single-use device is used on an individual patient during a single procedure and then discarded. It is not intended to be reprocessed and used again, even on the same patient.

Is single-patient use the same as single-use?

No. Single-patient use means the medical device may be used for more than one episode of use on one patient only; the device may undergo some form of reprocessing between each use.

Why shouldn't they be reused?

The MHRA is aware of serious incidents relating to reuse of single-use devices.

Reuse can be unsafe because of risk of:

- cross-infection inability to clean and decontaminate due to design.
- endotoxin reaction excessive bacterial breakdown products, which cannot be adequately removed by cleaning.
- patient injury device failure from reprocessing or reuse because of fatigue, material alteration and embrittlement.
- chemical burns or sensitisation residues from chemical decontamination agents on materials that can absorb/ adsorb chemicals.

Also, if you reuse a single-use device you may be legally liable for the safe performance of the device.

Can I sterilize a single-use device?

Some single-use devices are marketed as non-sterile. These may require reprocessing, in line with the manufacturer's instructions, to make them sterile and ready for use. Check the manufacturer's instructions for any limit on the number of times the unused device may be reprocessed. Once used on a patient, the device must be discarded.

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Appendix 2 Annual Audit Tool

Please complete table below on an annual basis (October each year) and return to the decontamination lead. Please add any item used that are not on the list to the end of the chart. Please include notes of non-compliance at end of table.

| Location/service: |
|---------------------|
| Date of completion: |
| Auditor: |

| | Does | | |
|--------------------------|---------|--------------------------------|-----------------------------|
| Item | your | Can you prove it is cleaned | Is it on your department |
| Item | service | Yes/No - How is it documented? | inventory |
| | use | | ilivelitory |
| Acupuncture needles | | | |
| Airways | | | |
| Ambu-bag / re-breathing | | | |
| bags | | | |
| Ampoules | | | |
| Auroscopes | | | |
| Baby changing mats | | | |
| Baby Scales | | | |
| Baths, bath hoists and | | | |
| seats, wash basins, | | | |
| shower chairs and seats | | | |
| Baby feeding bottles and | | | |
| teats. | | | |
| Bed cradles | | | |
| Bed frames | | | |
| Bed sides | | | |
| Bedside tables | | | |
| Bed pans | | | |
| Bed pans | | | |
| Bedpan holders / slipper | | | |
| pan holders | | | |
| Blinds horizontal and | | | |
| vertical | | | |
| Blood glucose monitoring | | | |
| pen | | | |
| Blood pressure | | | |
| sphygmomanometer and | | | |
| cuff | | | |
| Breast pumps | | | |
| Bowls (washing) | | | |
| Buckets | | | |
| Buckets for Leg Ulcers | | | |
| Car seats | | | |
| Carpets | | | |
| Catheter bag holders | | | |
| Cervical diaphragms and | | | |
| caps (practice caps) | | | |
| Cleaning equipment: | | | |
| Wet mops | | | |

| | Does | | |
|--------------------------------|-----------------|------------------------------------------------------------|---------------|
| | | Can you prove it is alconed | Is it on your |
| Item | your service | Can you prove it is cleaned Yes/No - How is it documented? | department |
| | | res/No - now is it documented? | inventory |
| Man hugkata | use | | - |
| Mop buckets Chairs | | | |
| Combs | | | |
| Commodes | | | |
| Computers and other IT | | | |
| equipment in clinical | | | |
| areas | | | |
| Cold / hot pad | | | |
| Community equipment | | | |
| bags including those | | | |
| used by District Nurses | | | |
| Couches (examination) | | | |
| Crockery, cutlery | | | |
| Curtains | | | |
| Damp dusting | | | |
| Denture pots | | | |
| Dental chair | | | |
| Drip stands | | | |
| Dressing trolleys | | | |
| Drainage and suction | | | |
| jars: | | | |
| Disposable vacuum | | | |
| containers | | | |
| Suction jars | | | |
| Under-water seal bottles | | | |
| Ear syringing equipment | | | |
| Earphones | | | |
| ECG Equipment | | | |
| (machine and leads) | | | |
| Eye testing glasses and | | | |
| vision eye patches | | | |
| Endotracheal tubes | | | |
| Enteral feeding | | | |
| equipment. | | | |
| Examination couches | | | |
| Examination lamps | | | |
| Enuresis mats | | | |
| Enuresis Alarms | | | |
| Fans | | | <u> </u> |
| Floors (wet) | | | |
| Floors (dry) | | | |
| Flower Vases | | | |
| Foam Wedges Glucometer | | | |
| | + | | |
| Gym Equipment (used by physio) | | | |
| Hair Brushes | | | |
| Height stick | | | |
| Hoists | | | |
| Hoist slings and slide | | | |
| sheets (fabric) | | | |
| Humidifiers | | | |
| Infusion pumps | | | |
| madion pamps | | | 1 |

| | Does | | |
|-----------------------------------------|-----------------|---------------------------------------------------------------|---------------|
| | | Can you prove it is alcaned | Is it on your |
| Item | your service | Can you prove it is cleaned Yes/No - How is it documented? | department |
| | | res/No - now is it documented? | inventory |
| Instruments a g forces | use | | - |
| Instruments e.g. forceps, clip removers | | | |
| Instrument transport | | | |
| container (dental and | | | |
| podiatry) | | | |
| Interferential pads | | | |
| Jugs (non-sterile | | | |
| procedures i.e. those | | | |
| used measure urine) | | | |
| Kidney Dishes | | | |
| Laryngoscopes | | | |
| Lavatories (including | | | |
| raised lavatory seats) | | | |
| Lavatory brushes | | | |
| Linen Trolley | | | |
| Linen Skip | | | |
| Locker Tops and Tables | | | |
| Mattress | | | |
| Medicine pots + spoons | | | |
| Monkey poles | | | |
| Mop heads | | | |
| Nebulisers, mask and | | | |
| tubing | | | |
| Needles | | | |
| Oxygen tubing and mask O2 machine | | | |
| Peak flow machines | | | |
| Pillows | | | |
| Podiatry chair | | | |
| Podiatry workstation / | | | |
| trolley | | | |
| Pulse oximeter | | | |
| Pressure relieving aids | | | |
| e.g. mattresses, cushion | | | |
| Razors (wet shave) | | | |
| Razors electric | | | |
| Scales | | | |
| Scissors | | | |
| Speculae (vaginal) | | | |
| Sputum pots | | | |
| Sphygmomanometers | | | |
| Stethoscopes | | | |
| Sticks, frames and | | | |
| crutches | | | |
| Suction equipment | | | |
| Tens machine | | | |
| Telephones | | | |
| Tomometer Heads | | | |
| Thermometers | | | |
| Toothbrushes | | | |
| Tourniquets | | | |
| Toys | | | |
| Urinals | | | |

| Item | Does your service use | Can you prove it is cleaned Yes/No - How is it documented? | Is it on your department inventory |
|----------------------------------------------------|--------------------------------|---------------------------------------------------------------|------------------------------------|
| Ultrasound probes | | | |
| Vacutainer (needle holders) | | | |
| Vaginal Cones | | | |
| Volumatic | | | |
| Vomit bowls | | | |
| Wax baths | | | |
| Wheelchairs | | | |
| Weighing scales (seated adult) | | | |
| Work Surfaces | | | |
| Any other items used on patients/client/child/baby | | | |
| | | | |

Notes

| Item | Details of non-compliance and action plan |
|------|-------------------------------------------|
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |

Declaration of Decontamination Status

This form must be completed prior to the Inspection, Servicing, Repair or Return of Medical/Laboratory Equipment Tick box A if applicable. Otherwise complete all parts of B. A This Equipment/Item has not been used in any invasive procedure or been in contact with blood, other body fluids, respired gases or pathological samples B This Equipment/Item has been exposed internally or externally to hazardous materials as indicated below (please tick appropriate boxes) **BLOOD BODY FLUID** PATHOLOGICAL SAMPLES This equipment has had appropriate cleaning and decontamination with disinfection and detergent wipes. Type of Equipment: Base: Department: Fault Report: (Full description of problem).

THIS DECONTAMINATION STATEMENT MUST BE SIGNED BELOW

Name: (Print in block capitals)

Signature: Date:

14. EQUALITY & DIVERSITY IMPACT ASSESSMENT

In reviewing this policy, the HR Policy Group considered, as a minimum, the following questions:

- Are the aims of this policy clear?
- 2 Are responsibilities clearly identified?
- ② Has the policy been reviewed to ascertain any potential discrimination?
- Are there any specific groups impacted upon?
- Is this impact positive or negative?
- ② Could any impact constitute unlawful discrimination?
- Are communication proposals adequate?
- Does training need to be given? If so is this planned?

Adverse impact has been considered for age, disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion and belief, sex, sexual orientation.

Blank version of the full Equality & Diversity Impact assessment can be found here:

http://eccho/Home/FormsGuidance.aspx?udt_575_param_index=E&udt_575_param_page=2

15. DOCUMENT CONTROL

| Version Date | Version No. | Author/ Reviewer | Comments |
|---------------------|-------------|---------------------------------------|--------------------|
| Feb 2011 | 4 | Decontamination Lead & IPC Specialist | References updated |
| Dec 2012 | 5 | IPCT | |
| Dec 2014 | 6 | IPCT | Audit tool added |
| Nov 2016 | 7 | IPCT | |
| Sept 2018 | 8 | IPCT | |
| Sept 2020 | 9 | IPCT | |
| Sept 2022 | 10 | IPCT | |

DOCUMENT CONTROL SHEET

| Name of Document: | Policy on Cleaning and Disinfection of Equipment, Surfaces, Environment and Skin |
|---------------------------------------------------|------------------------------------------------------------------------------------|
| Version: | 10 |
| File Location / Document Name: | ЕССНО |
| Date Of This Version: | September 2022 |
| Produced By (Designation): | Infection Prevention & Control Team |
| Reviewed By: | IPACC |
| Synopsis And Outcomes of Consultation Undertaken: | Changes relating to relevant committees/groups involved in ratification processes. |

| Synopsis And Outcomes Of Equality and Diversity Impact Assessment: | No specific issues. National EIA gives more details on measures to reduce HCAI's. |
|--------------------------------------------------------------------|-----------------------------------------------------------------------------------|
| Ratified By (Committee): - | IPACC |
| Date Ratified: | 14 th September 2022 |
| Distribute To: | Clinical Staff |
| Date Due for Review: | September 2024 |
| Enquiries To: | infectionprevention@ecchcic.nhs.uk |
| Approved by Appropriate Group/Committee | □ Date: |
| Approved by Policy Group | □ Date: |
| Presented to IGC for information | □ Date: |