

Infection Prevention and Control Assurance - Standard Operating Procedure 7 (IPC SOP 7)

Decontamination (Cleaning, Disinfection and Sterilisation)

Why we have a procedure?

The purpose of this procedure is to ensure a system is in place for effective decontamination of all equipment used before and between each patient and that risks associated with decontamination facilities and processes are properly managed across the Trust. It will also ensure compliance with the Health and Social Care Act 2008: Code of Practice for the NHS for the Prevention and Control of Healthcare Associated Infections (revised January 2015).

What overarching policy the procedure links to?

- This procedure is supported by the Infection Prevention and Control Assurance Policy

Which services of the trust does this apply to? **Where** is it in operation?

Group	Inpatients	Community	Locations
Mental Health Services	✓	✓	all
Learning Disabilities Services	✓	✓	all
Children and Young People Services	x	✓	all

Who does the procedure apply to?

All staff involved in the care of patients should adhere to these standard procedures when decontaminating equipment e.g.

- Matrons, Service Managers, Ward Managers and all clinicians involved in the service and delivery of care
- Facilities staff

When should the procedure be applied?

- In delivering a safe and clean care environment all staff have responsibility for ensuring that cleanliness standards are maintained
- All staff have a responsibility for ensuring that all patient equipment is cleaned between each patient use to standards as outlined within the National Specification for Cleanliness, April 2007

How to carry out this procedure

Additional Information/ Associated Documents

- Infection Prevention and Control Assurance Policy
- Infection Prevention and Control Assurance - Standard Operating Procedure 1 (IPC SOP 1) - Standard Infection Control Precautions
- Hand Hygiene Policy
- Medical Devices Policy and Procedures
- National Specification for Cleanliness, April 2007

Aims

- To prevent the transmission of microorganisms from one patient to other patients, staff and visitors
- To ensure all staff are aware of the correct procedures when decontaminating equipment or the environment

Definitions

Cleaning	A process that removes dirt, dust, large numbers of micro-organisms and the organic matter using detergent and warm water or disposable detergent wipes, such as blood or faeces that protects them. Cleaning is a pre-requisite to disinfection or sterilisation
Disinfection	This is a process of removing or killing most, but not all viable organisms. The aim of disinfection is to reduce the number of micro-organisms to a level at which they are not harmful. Spores are not destroyed
Decontamination	A general term used to describe the destruction or removal of microbial contamination to render an item or the environment safe. The term decontamination includes sterilisation, disinfection and cleaning
Detergent	General Purpose Detergent e.g. Hospec or Clinell Detergent Wipes
Single Patient Use Equipment	As stated by the manufacturer, may be used a number of times for one patient only e.g. hoist slings, disposable blood pressure cuffs. Equipment should be marked with patients name and disposed of when no longer required
Single Use Equipment 	As stated by the manufacturer, must be used once only and NOT re-used. Single use equipment must not be reprocessed under any circumstances. It is marked with the single use symbol
Sterilisation	This is a process of removing or killing all viable organisms including spores. Dead microorganisms and toxins (pyrogens) may remain. Prions will not be effectively destroyed by this process

1,000ppm Chlorine Solution	A disinfectant solution used for decontamination following cleaning with detergent e.g. Haz-Tab one 4.5 tablet diluted with 2.5 litres of tepid water gives 1,000ppm chlorine solution
10,000ppm Chlorine Solution	A disinfectant solution used for decontamination of blood spillages e.g. four Haz-Tab 4.5 tablets diluted with 1 litre of tepid water gives 10,000ppm chlorine solution

The choice of decontamination method should be related to the infection risk associated with the intended use of the equipment (see A-Z of equipment cleaning in **Appendix 1**). Other factors to be taken into consideration when choosing a method of decontamination include the nature of the contamination, the time required for processing, the heat, pressure, moisture and chemical tolerance of the object, the availability of the processing equipment and the quality and risks associated with the decontamination method.

Contamination Risks

Risk	Application of Item	Minimum Standard
Low	<ul style="list-style-type: none"> In contact with healthy skin e.g. furniture, office equipment, mattresses, surfaces, commodes, wash bowls, hoists etc. 	<ul style="list-style-type: none"> Cleaning is usually adequate Appropriate cleaning methods should be followed either through manufacturers' recommendation or following the attached A-Z in Appendix 1
Medium	<ul style="list-style-type: none"> In contact with intact mucous membranes e.g. respiratory equipment Contaminated with virulent or readily transmissible organisms (e.g. body fluids, patients with MRSA/Norovirus) For use on immunocompromised patients 	<ul style="list-style-type: none"> Cleaning and disinfection or sterilization Use single use equipment wherever possible
High	<ul style="list-style-type: none"> In contact with broken skin or mucous membranes e.g. surgical instruments, indwelling devices, intrauterine devices etc. For introduction into sterile body areas 	<ul style="list-style-type: none"> Single use sterile equipment

Factors for Deciding Methods of Decontamination

- Manufacturers guidance should be followed whenever possible
- Ensure the item is intended to be re-used?
- For what purpose is the device used?
- What are the manufacturers' recommendations?
- Can it be disassembled to facilitate cleaning?
- Is decontamination necessary at the point of use?
- Will it withstand an automated cleaning process?
- Can it be immersed in fluid?

- How soon will it be needed?
- Can it be wrapped to protect from contamination?
- How many times can it be re-processed?
- Does processing constitute a hazard to patients and staff?
- What personal protective equipment is required?

Suspected Contamination with Prions

If equipment is believed to be contaminated with prions then the equipment should not be decontaminated without seeking further advice. Prions are an abnormal protein thought to be the causative agent of Transmissible Spongiform Encephalopathy's (TSE) e.g. Creutzfeldt-Jakob disease. The protein is remarkably resistant to conventional methods of disinfection and sterilisation – always seek advice from the Infection Control Team prior to decontaminating equipment.

Cleaning

Cleaning removes grease, soil and approximately 80% of micro-organisms. It is an important method of decontamination and may be safely used to decontaminate low risk items of equipment such as those coming into contact with intact skin (e.g. washbowls, trolleys and sphygmomanometer cuffs). Medium risk items (e.g. those in contact with mucous membranes or contaminated with blood and body fluids) and high risk items (coming into contact with a break in the skin or entering a sterile body area) must be cleaned thoroughly prior to disinfection or sterilization.

General Principles of Cleaning

In general the following applies for all areas that provide care to service users:

- Wash hands before and after all procedures and after removing gloves
- Cleaning where possible, should take place in a dedicated area away from patient care. Use a designated sink (not a hand wash basin)
- Equipment should be dismantled where necessary in line with the manufacturers' instructions before cleaning
- A clean, disposable cloth should be used and discarded immediately after use
- Use neutral detergent and warm water (maximum 42-43°C) for general cleaning
Rinse thoroughly to remove detergent residue
- Dry thoroughly after cleaning using disposable towels or paper roll (where appropriate)
- If item visibly soiled with blood or body fluids clean first and then disinfect with a chlorine releasing agent (see section below on blood spillages)
- Wear protective clothing as appropriate [see **Infection Prevention and Control Assurance - Standard Operating Procedure 1 (IPC SOP 1) - Standard Infection Control Precautions**]
- Decontaminate any cleaning equipment after use e.g. bowl/bucket/sink
- A written cleaning schedule should be devised specifying the persons responsible for cleaning, the frequency of cleaning, and the expected outcomes. These schedules should be publicly displayed and followed
- Keep mops and buckets clean, dry and store inverted
- Mop heads should be removable for laundering daily or disposable/single use
- Ensure colour coding, in line with the National Cleaning guidelines, is used for equipment used to clean, toilets, kitchens, general areas and isolation rooms
- Store cleaning equipment clean and dry between uses

Surfaces and Finishes

- Carpets are not recommended in care areas because of the risk of body fluid spills. Where carpets are in place, there should be procedures or contracts for regular steam cleaning and dealing with spills
- Work surfaces and floors should be smooth finished, intact, durable of good quality, washable and should not allow pooling of fluids

Products and their Uses

Hospec - General Purpose Detergent	For all general cleaning of equipment and the environment
Clinell Detergent Wipes	Can be used as a substitute for general purpose detergent for cleaning equipment if appropriate
Hand Soap	For cleaning skin only not suitable for cleaning equipment
Hydrex/ Hibiscrub	For skin disinfection only not suitable for cleaning equipment

Domestic Cleaning

In most clinical areas a daily clean with a detergent based fluid is adequate. The aim is to remove organic matter and dust and to reduce the bacterial load in the environment. Cleaning should be carried out in line with National Standards for Cleanliness. Domestic staff should have received training and standards should be monitored by senior staff. Equipment for domestic cleaning is colour coded in accordance with national guidance as outlined in the revised NHS Healthcare Cleaning Manual (**Appendix 2**).

- Domestic cleaning equipment must be stored clean and dry between uses
- Cleaning equipment such as cloths and mop heads must be changed at least daily – disposable cloths/mop heads preferred
- Domestic cleaning agents or detergent should be used
- Always work from clean areas to dirty

High Level Cleaning

- Do not attempt to clean above a height that you can comfortably reach while standing on the floor
- High cleaning should be arranged with the Estates and Facilities Department

Terminal Cleaning

- Terminal cleaning involves very thorough cleaning and disinfection of an area, and will include changing of curtains
- Terminal cleaning is carried out after discharge of a patient who has been identified, or is strongly suspected of being infected / colonised with certain infectious organisms (e.g. Meticillin resistant staphylococcus aureus, Norovirus or Clostridium difficile etc.). This may be applied to a bed area in a bay, a whole bay or a side room
- Terminal cleaning is also carried out throughout a whole ward / department at the end of an outbreak of infection. Rarely but in some circumstances, hydrogen peroxide mist may be used in conjunction with terminal cleaning if advised by the Infection Control Team

Deep Cleaning

- Periodic thorough cleaning of an environment, including fixed and loose equipment using a combination of steam cleaning and domestic cleaning practices
- It is recommended that proactive deep cleaning takes place annually in all clinical areas
- Under certain circumstances, deep cleaning may also be advised by the infection prevention team reactively (e.g. following identification of a number of patients with infection linked by a particular clinical area)

Steam Cleaning

- A dry steam system that can instantly clean and dry surfaces without leaving any unhygienic residue
- Steam cleaning is available from the Facilities Staff on request. Steam cleaning enables the Trust to achieve higher standards of cleanliness and hygiene and the equipment is used as/when required

Disinfection

Disinfection is used as part of the decontamination process for moderate risk items. Disinfection methods include thermal and chemical processes. Moist heat may be used for items such as crockery, linen and bedpans e.g. automated processes in a machine.

Specific chemical disinfectants can be used to decontaminate heat sensitive equipment and the environment. Disinfectants are not cleaning agents as they are generally inactivated by organic material, therefore all items must be cleaned thoroughly prior to disinfection.

Chemical disinfectants are toxic substances, and the user must comply with the Control of Substances Hazardous to Health (COSHH) Regulations 2002. Misuse and overuse of chemical disinfectants may result in damage to the user, service user or equipment and may also result in the development of antimicrobial resistance.

General Principles of Disinfection

- Do not use disinfection as a substitute for sterilisation
- Only use chemical disinfectants if absolutely necessary
- Choose an appropriate disinfectant, compatible with the surface being disinfected and approved by the Infection Prevention and Control Team
- Read the relevant COSHH assessment sheet before using any chemical disinfectant
- Wear protective clothing (and respirators if required)
- Ensure adequate ventilation
- Check the expiry date of the disinfectant
- Ensure that the correct dilution is used (check manufacturer's instructions)
- Never dilute a disinfectant by guesswork
- Never use two disinfectants together, do not add anything to a disinfectant (including detergent) as this may result in a dangerous chemical reaction
- Clean equipment / surfaces thoroughly before disinfection
- Ensure sufficient contact time between disinfectant and equipment being decontaminated (as per product manufacturer's instructions)

- Rinse thoroughly after disinfection (if alcohol is used to disinfect then rinsing is not required)
- Discard disinfectant solution after use
- Do not 'top up' solutions of disinfectant
- Ensure that containers used for disinfection are stored clean, dry and inverted between uses

Disinfection Products

Always follow the manufacturer's instructions for use and do not use on urine spills due to potential chemical reaction

Reason Required	Available concentration	Dilutions	Additional advice
Blood Spillage	1% or 10,000ppm Use Haz-Tab 4.5g Tablets	<ul style="list-style-type: none"> • Four Haz-Tab 4.5g tablets diluted with 1litre of tepid water gives 10.000ppm chlorine solution • Solution must be used within 24hours once prepared. 	<ul style="list-style-type: none"> • Cover the spill with disposable paper towels/roll to absorb first before poring on the chlorine solution • N.B. contact time is 2 minutes before removing then clean with detergent and water
General environment and equipment disinfection	0.1% or 1,000ppm Use Haz-Tab 4.5g Tablets	<ul style="list-style-type: none"> • One Haz-Tab 4.5g tablet diluted with 2.5 litres of tepid water gives 1,000ppm chlorine solution • Solution must be used within 24hours 	<ul style="list-style-type: none"> • Use this solution for general disinfection of equipment and surfaces but remember equipment must be cleaned prior to disinfection. • For use during an outbreak situation in addition to general cleaning
Clinell Universal Sanitizing Disposable Wipes	-	-	<ul style="list-style-type: none"> • For surface disinfection of non-invasive equipment (for routine use)

Environment

- Surfaces that are clean and dry will not support the growth of most bacteria
- Disinfection of the environment, especially frequently touched surfaces may be required more frequently in outbreak situations – the infection prevention and control team will advise
- Blood and body fluid spills should be dealt with as outlined in Section 8 of **Infection Prevention and Control Assurance - Standard Operating Procedure 1 (IPC SOP 1) - Standard Infection Control Precautions**

Specialist Equipment

- Ensure the decontamination procedure complies with national guidance and that the disinfection process is compatible with the equipment
- If written instructions are not available, contact the manufacturer for advice and a list of compatible disinfectants
- Where necessary local guidelines should be written and approved by the Infection Prevention and Control Team
- Failure to use the correct disinfection process may result in damage to the equipment and invalidate any service agreement or warranty
- All re-usable medical devices and equipment to be inspected, serviced, repaired, returned to the lending organisation or equipment library, or to be disposed of, should undergo decontamination. This is necessary to ensure that they are in a condition that makes them safe to be handled by all personnel who may come into contact with them during transit and subsequent handling (See Medical Devices Policy)

N.B. Do not use antiseptic hand washing solutions such as 'Hibiscrub / Hydrex or 'Betadine' for environmental cleaning or the cleaning of equipment – these are for skin prep only, use neutral detergent or detergent wipes.

Sterilisation

All instruments that penetrate skin or mucous membranes or are used in sterile body cavities must be sterilised prior to use. Sterilisation of reusable items of equipment must be carried out in the local acute Hospital's Sterile Services Department (HSSD), local processing of instruments must not be undertaken within the Trust and as far as possible staff must use single use sterile disposable instruments.

Single Use Items

Single use items may be divided into two groups:

- Single-use: Single-use items should be used once only and discarded
- Single patient use: Single patient use items may be reused for the same service user after appropriate decontamination as per the manufacturer's instructions

Standards for Use for Single Use Items

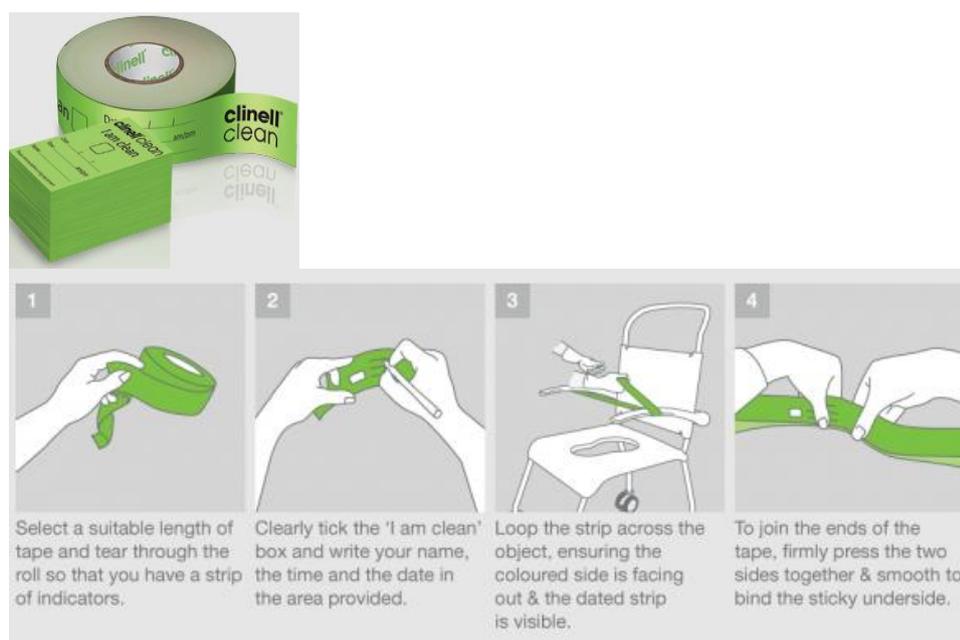
- Devices designated for single-use must not be reused under any circumstances
- The reuse of single-use devices can affect their safety, performance and effectiveness, exposing patients and staff to unnecessary risk
- Reprocessing single use devices may affect the capabilities and/or the materials from which the device is made
- Single-use devices are not designed to allow thorough decontamination and, re sterilisation processes

Single Patient Use Items

- Devices designated single patient use should be used for one patient only
- The device may be used for the duration or number of times specified by the manufacturer
- Single patient use items must be decontaminated after each use according to manufacturer's instructions

Documentation and Recording – following Cleaning/ Decontamination

Local records should be maintained in relation to decontamination of equipment. Indicator tape is useful and ideal for commodes, bed frames, drip stands and other equipment - the tape can be attached after decontamination, to clearly show that the object had been cleaned



Decontamination of Re-usable Medical Devices

See the Medical Devices policy and procedures for further information.

Decontamination Methods

Appendix 1 shows an A-Z list of items of equipment and appropriate decontamination methods. This is intended as additional information, and is not a comprehensive list.

Management of Blood, Bodily Fluids and Other Spillages

It is the responsibility of department/ward/unit staff to ensure that blood and body fluid spillage in their area is cleaned up promptly, safely and appropriately. It is the responsibility of the member of staff reporting the spillage to ensure that the health and safety of others is maintained until the spillage is removed, i.e. place wet floor/spillage sign at the site of the spillage.

Staff should follow the following procedure as outlined in Section 8 of **Infection Prevention and Control Assurance - Standard Operating Procedure 1 (IPC SOP 1) - Standard Infection Control Precautions**

- Treat old and new spillages the same, many organisms can survive for weeks if not months in dried blood/body fluids. In addition body fluids provide nutrients to opportunistic organisms
- Prevent access to the spillage by using floor hazard signs
- Wear appropriate protective clothing. The minimum should be a disposable apron and gloves. Thought should be given to the possible need for facial protection, if there is a possibility that a splash could occur from either the fluid spill or the cleaning agent
- Soak up the spill using either chlorine granules or paper towels. If using chlorine granules leave for 2 minutes
- Do not use chlorine granules on urine as they release chlorine gas on contact.
- Clear granules/spillage into an orange clinical waste bag
- Clean area with a chlorine solution of 10,000ppm using disposable cloths. Ensure all traces of the spillage are removed. Rinse and dry afterwards
- Place all disposable equipment, including PPE into an orange clinical waste bag. Tightly seal and tag the bag and leave in the designated area for collection
- Any non-disposable PPE e.g. goggles should be decontaminated using the chlorine solution, even if not visibly contaminated, and left to dry for the next use

Where do I go for further advice or information?

- Infection Prevention and Control Team
- Your Service Manager, Matron, General Manager, Head of Nursing, Group Director
- Your Group Governance Staff

Training

Staff may receive training in relation to this procedure, where it is identified in their appraisal as part of the specific development needs for their role and responsibilities. Please refer to the Trust's Mandatory and Risk Management Training Needs Analysis for further details on training requirements, target audiences and update frequencies.

Monitoring / Review of this Procedure

In the event of planned change in the process(es) described within this document or an incident involving the described process(es) within the review cycle, this SOP will be reviewed and revised as necessary to maintain its accuracy and effectiveness.

Equality Impact Assessment

Please refer to overarching policy

Data Protection Act and Freedom of Information Act

Please refer to overarching policy

Appendix 1

Colour Coding Hospital Cleaning Materials and Equipment

Colour coding of hospital cleaning materials and equipment ensures that these items are not used in multiple areas, therefore reducing the risk of cross-infection. The National Patient Safety Agency (NPSA) has developed a National Colour Coding Scheme for cleaning materials.

National Colour Coding Scheme

<p>Red</p> <p>Bathrooms, washrooms, showers, toilets, basins and bathroom floors</p>	<p>Blue</p> <p>General areas including wards, departments, offices and basins in public areas</p>
<p>Green</p> <p>Catering departments, ward kitchen areas and patient food service at ward level</p>	<p>Yellow</p> <p>Isolation areas</p>

Appendix 2

A-Z of Equipment and Decontamination Methods

This is intended as additional information; it is not a comprehensive list. Please read the cleaning, disinfection and sterilization section in this procedure before using this list. Items that require autoclaving should as far as possible be single use instruments. ALWAYS wear PPE (gloves and apron) when decontaminating equipment or the environment and discard immediately after use into orange waste bag.

Item	Decontamination Method	Frequency	Responsibility
Airways and Endotracheal tubes	<ul style="list-style-type: none"> Disposable 	<ul style="list-style-type: none"> Single use only - discard 	Nursing / HCSW / AHP
Airway suctioning	<ul style="list-style-type: none"> Yankeur suckers are single use only (If the packet is opened to attach the suction tube for emergency use, the Yankeur sucker must be left covered) 	<ul style="list-style-type: none"> Single use only - discard 	Nursing/Physio
Alcohol gel dispensers and containers	<ul style="list-style-type: none"> Wipe with disposable detergent wipes Personal bottles - wipe with disposable detergent wipe at start and end of shift never top-up – replace as required 	<ul style="list-style-type: none"> Daily 	All clinical staff Estates and Facilities staff
Ambu bag and face mask	<ul style="list-style-type: none"> Disposable 	<ul style="list-style-type: none"> Single use only 	Nursing/Physio
Auroscope and ear pieces	<ul style="list-style-type: none"> Clean handle with Clinell Disinfectant Wipe. Remove any wax from ear pieces by cleaning with detergent and warm water, rinse and dry – a cotton bud can be used. To disinfect use a disinfectant wipe and pull through the lumen and clean all surfaces 	<ul style="list-style-type: none"> After each use Weekly when not in use 	Nursing/Medical/ AHP / HCSW
Baby Weigh Scales	<ul style="list-style-type: none"> Clean with detergent and warm water, rinse and dry or use disposable detergent wipes 	<ul style="list-style-type: none"> After each use 	Nursing/Health Visitors/ HCSW
Baby changing mats	<ul style="list-style-type: none"> Clean with detergent and warm water, rinse and dry or use disposable detergent wipes 	<ul style="list-style-type: none"> After each use 	Nursing/Health Visitors/ HCSW
Baths	<ul style="list-style-type: none"> Clean with detergent and warm water, rinse and dry. Domestic clean daily as schedule 	<ul style="list-style-type: none"> After each patient use 	Nursing / Facilities / HCSW / AHP

Item	Decontamination Method	Frequency	Responsibility
Bedpans and bedpan formers	<ul style="list-style-type: none"> Use disposable where possible If non-disposable - wearing full PPE flush away contents and clean thoroughly with detergent and warm water, rinse then disinfect using 1,000ppm chlorine releasing solution and leave dry and inverted 	<ul style="list-style-type: none"> After each patient use Weekly when not in use 	Nursing/Medical/AHP
Beds/Bed Frames and Bed Rails	<ul style="list-style-type: none"> Clean with detergent and warm water, rinse and dry or use disposable detergent wipes If disinfection required use a 1,000ppm chlorine releasing agent (after cleaning) 	<ul style="list-style-type: none"> After each patient use Monthly for long stay patients (minimum requirement) 	Nursing / Facilities / HCSW
Blood Glucose monitoring equipment	<ul style="list-style-type: none"> As per manufacturer's instructions - use disposable detergent wipes Use disposable lancets and single use testing strips Blood contamination use chlorine 10,000ppm solution after cleaning 	<ul style="list-style-type: none"> After each patient use Weekly when not in use 	Nursing / Medical / AHP / HCSW
Blood pressure equipment	<ul style="list-style-type: none"> Clean all surfaces with detergent wipes Wipe cuff after each use with detergent/disinfectant wipe Patients with infection dedicated cuff should be used and washed at the end of care episode 	<ul style="list-style-type: none"> After each patient use Weekly when not in use 	Nursing / Medical / HCSW / AHP
Bowls – patient washing	<ul style="list-style-type: none"> Wherever possible use maceratable/disposable <i>or</i> Clean with detergent and warm water, rinse and dry and store inverted. Do not stack re-usable bowls one inside the other 	<ul style="list-style-type: none"> After each patient use 	Nursing / HCSW
Buckets	<ul style="list-style-type: none"> Clean with detergent and warm water, rinse and dry Store dry and inverted 	<ul style="list-style-type: none"> After each use 	Nursing / Facilities / HCSW / AHP
Catheter stands	<ul style="list-style-type: none"> Clean with detergent and warm water, rinse and dry <i>or</i> alternatively use detergent wipes 	<ul style="list-style-type: none"> Daily when in use Weekly when not in use. 	Nursing / HCSW
Catheter drainage bags	<ul style="list-style-type: none"> Single use disposable 	<ul style="list-style-type: none"> Disposable 	Nursing / HCSW
Cleaning cloths	<ul style="list-style-type: none"> Single use disposable 	<ul style="list-style-type: none"> Disposable 	All staff

Item	Decontamination Method	Frequency	Responsibility
Commodes	<ul style="list-style-type: none"> Clean with detergent and warm water paying attention to the seat, under the seat, arm rests and all surfaces, then rinse and dry Patients with infection use dedicated equipment, after cleaning disinfect with 1,000ppm chlorine releasing agent 	<ul style="list-style-type: none"> After each patient use Weekly when not in use 	Nursing / HCSW / Facilities
Computer monitor and keyboard	<ul style="list-style-type: none"> Clean with detergent wipe (do not use alcohol based product on touch sensitive screens) 	<ul style="list-style-type: none"> Weekly or after use for 'hot desks' 	All staff
Crockery, Cutlery and water jugs	<ul style="list-style-type: none"> Use dishwasher if available or use detergent and hot water, rinse and dry 	<ul style="list-style-type: none"> After each use 	All staff
Curtains	<ul style="list-style-type: none"> Launder or replace disposables every 6 months Launder/replace after use in isolation rooms 	<ul style="list-style-type: none"> Every 6 months as a minimum Immediately if visibly soiled or as requested by ICT 	Facilities staff
Denture pots	<ul style="list-style-type: none"> Patients should have their own (labelled) Only use disposable pots –single patient use 	<ul style="list-style-type: none"> Disposable 	Nursing / AHP / HCSW
Defibrillator	<ul style="list-style-type: none"> Clean with detergent and warm water, rinse and dry or use disposable detergent wipes 	<ul style="list-style-type: none"> After Use Keep in resus bag to protect from dust 	All staff
Dressing Trolley (or procedure tray)	<ul style="list-style-type: none"> Clean with detergent and warm water using disposable paper towels, rinse and dry – ensure surface dry before placing sterile equipment on top 	<ul style="list-style-type: none"> Before and after use Weekly when not in use 	Nursing / Medical / AHP / HCSW
Drip Stands	<ul style="list-style-type: none"> Clean with detergent and warm water using disposable paper towels, rinse and dry 	<ul style="list-style-type: none"> Before and after use Weekly when not in use 	Nursing / Medical / AHP / HCSW
ECG Equipment, electrodes and leads	<ul style="list-style-type: none"> Clean machine with detergent and warm water using disposable paper towels, rinse and dry or disposable detergent wipes Clean straps/leads as above 	<ul style="list-style-type: none"> Before and after use Weekly when not in use Single use electrodes 	Nursing / Medical / HCSW

Item	Decontamination Method	Frequency	Responsibility
Examination / treatment couch	<ul style="list-style-type: none"> Surfaces should be in good state of repair Clean with detergent and warm water using disposable paper towels, rinse and dry Between use - use detergent wipes (e.g. in clinics) Use disposable couch roll for each patient 	<ul style="list-style-type: none"> Before and after use Weekly when not in use 	Nursing / Medical / HCSW / AHP
Examination lamps (in treatment rooms)	<ul style="list-style-type: none"> Clean with detergent and warm water using disposable paper towels, rinse and dry Between use use detergent wipes (e.g. in clinics) 	<ul style="list-style-type: none"> Before and after use Weekly when not in use 	Nursing / Medical / HCSW / AHP
Face masks	<ul style="list-style-type: none"> Disposable 	<ul style="list-style-type: none"> Single use disposable 	All staff
Fans	<ul style="list-style-type: none"> Wipe outer surfaces with disposable detergent wipes Regular maintenance and cleaning of inner blades by Estates Dept. 	<ul style="list-style-type: none"> Weekly At least 6 monthly 	All Staff Estates
Floors (Dry Cleaning)	<ul style="list-style-type: none"> Vacuum clean or use a dust attracting dry mop 	<ul style="list-style-type: none"> As per cleaning schedule 	Facilities
Floors (wet cleaning)	<ul style="list-style-type: none"> Wash with detergent solution – single use mop head – colour coded 	<ul style="list-style-type: none"> As per cleaning schedule or immediately if contaminated 	All Staff Facilities
Flow meters	<ul style="list-style-type: none"> Use disposable mouth pieces 	<ul style="list-style-type: none"> Single use disposable 	Nursing / Medical / HCSW / AHP
Flower vases	<ul style="list-style-type: none"> Wash with detergent and water, rinse and store dry 	<ul style="list-style-type: none"> After use 	All staff
General furniture e.g. tables, chairs, lockers, desks etc.	<ul style="list-style-type: none"> Clean with detergent and warm water, rinse and dry Where contact with possible infectious material/body fluids disinfect with 1,000ppm solution of chlorine releasing agent after cleaning. 	<ul style="list-style-type: none"> Daily as a minimum Between patient use 	All staff
Gym equipment	<ul style="list-style-type: none"> As per manufacturer's instructions 	<ul style="list-style-type: none"> After use Weekly when not in use 	AHP Instructors
Inhalation compliance devices e.g. Volumatic, Nebuhaler etc.	<ul style="list-style-type: none"> Individual patient use only Wash with detergent and warm water, rinse and dry 	<ul style="list-style-type: none"> After use 	Nursing/HCSW

Item	Decontamination Method	Frequency	Responsibility
Hairdressing equipment	<ul style="list-style-type: none"> Clean with detergent and warm water, rinse and dry 	<ul style="list-style-type: none"> After each use 	Hairdresser / HCSW / Nursing /AHP
Height Measure	<ul style="list-style-type: none"> Clean with detergent and warm water, rinse and dry or use disposable detergent wipes 	<ul style="list-style-type: none"> Before Use Weekly when not in use 	Nursing / HCSW / AHP
Hoists and slings	<ul style="list-style-type: none"> Clean all surfaces with detergent and warm water, rinse and dry Slings should be single patient use and laundered between service users For patients with infection - slings must be single patient use (disposable) 	<ul style="list-style-type: none"> After each patient use Weekly when not in use Or Disposable (individual patient use) 	Nursing / HCSW / AHP
Infusion Pumps including IV and enteric (machine casings)	<ul style="list-style-type: none"> Follow manufacturer's instructions 	<ul style="list-style-type: none"> Before and After Use Weekly when not in use 	Nursing / HCSW
Jugs (non-sterile)	<ul style="list-style-type: none"> Use disposable for measuring urine, emptying catheter bags etc. 	<ul style="list-style-type: none"> Disposable 	Nursing / HCSW
Linen	<ul style="list-style-type: none"> Clean linen should be stored in designated cupboard Used linen e.g. bedding should be laundered by external laundry service Patient clothing should be laundered as per garment label and each patient's clothing should be laundered on separate cycle 	<ul style="list-style-type: none"> Daily/as and when required 	Nursing / HCSW / AHP / laundry staff
Macerators	<ul style="list-style-type: none"> Clean daily and service as per manufacturer's instructions Ensure machine flushed through daily to reduce risk of legionella 	<ul style="list-style-type: none"> Daily and immediately after spillage 	Nursing / HCSW / Estates and Facilities
Manual Handling equipment – <i>should be for single patient use</i>	<ul style="list-style-type: none"> Moving and handling belts – clean as per manufacturers' instructions – wipe with detergent wipes after use and launder between patients Slide sheets – clean as per manufacturers' instructions wipe with detergent wipes after use and launder between patients 	<ul style="list-style-type: none"> After use 	Nursing / HCSW / AHP / laundry staff

Item	Decontamination Method	Frequency	Responsibility
Mattresses	<ul style="list-style-type: none"> • Clean all surfaces with detergent and warm water, rinse and dry • Specialist mattresses should be cleaned as per manufacturer's instructions • If disinfection required use 1,000ppm chlorine solution – check manufacturer's instructions 	<ul style="list-style-type: none"> • Between each patient use • Monthly for long stay patients (record) • Immediately if visibly soiled 	Nursing / HCSW / AHP / Facilities staff
Medicine tots, spoons and oral syringes	<ul style="list-style-type: none"> • Discard after use if re-useable wash in the dishwasher only 	<ul style="list-style-type: none"> • Single use 	Nursing/HCSW
Nebulisers	<ul style="list-style-type: none"> • Use single patient use nebuliser mask and tubing • On completion of treatment dispose of mask/tubing as clinical waste • Nebuliser compressed air systems must be decontaminated between each patient use using disposable detergent wipes (filters will need periodic replacement – contact EBME) • New consumables used for each patient 	<ul style="list-style-type: none"> • Single patient use disposables • Clean compressor after each use 	Nursing / HCSW / Physio
Oxygen Cylinder	<ul style="list-style-type: none"> • Clean all surfaces with detergent and warm water, rinse and dry 	<ul style="list-style-type: none"> • After use • Weekly when not in use 	Nursing/HCSW
Oxygen tubing and masks	<ul style="list-style-type: none"> • Single patient use 	<ul style="list-style-type: none"> • Discard as clinical waste after use 	Nursing / Medical / AHP / HCSW
Patella Hammer	<ul style="list-style-type: none"> • Wipe device using disposable detergent wipe 	<ul style="list-style-type: none"> • After use • Weekly when not in use 	Nursing / HCSW / Medical
Peak flow meter	<ul style="list-style-type: none"> • Use disposable mouthpieces • Wipe device using disposable detergent wipe 	<ul style="list-style-type: none"> • After use 	Nursing / HCSW / Medical
Pillows	<ul style="list-style-type: none"> • Must be covered with intact water impermeable cover • Between use clean with detergent and warm water, rinse and dry 	<ul style="list-style-type: none"> • After each patient use • Monthly for long stay patients 	Nursing/AHP/ HCSW
Pressure relieving aids e.g. cushions, booties etc.	<ul style="list-style-type: none"> • Must be allocated to one user only • Follow manufacturer's instructions 	<ul style="list-style-type: none"> • After patient use 	Nursing/ AHP/HCSW

Item	Decontamination Method	Frequency	Responsibility
Pulse Oximeter	<ul style="list-style-type: none"> Clean with disposable detergent wipe – follow manufacturers guidance DO NOT use alcohol based products on the probe 	<ul style="list-style-type: none"> After each patient use Weekly when not in use 	Nursing/Medical/HCSW
Raised toilet seats	<ul style="list-style-type: none"> Clean with detergent and warm water, rinse and dry <i>or</i> alternatively use detergent wipes If required disinfect with 1,000ppm chlorine solution Monitor condition of the seat – any cracks and the seat should be condemned/replaced 	<ul style="list-style-type: none"> After each patient use Weekly when not in use 	Nursing / HCSW / AHP / Facilities
Razors	<ul style="list-style-type: none"> Single patient use only disposed of in orange sharps bin NB electric razors – patients own not for communal use 	<ul style="list-style-type: none"> Single patient use disposable 	Nursing/HCSW/AHP
Resus training equipment	<ul style="list-style-type: none"> Wash in detergent and wipe with disinfectant wipe 	<ul style="list-style-type: none"> After use 	Resus trainers
Scales (standing/sitting)	<ul style="list-style-type: none"> Clean with detergent and warm water, rinse and dry <i>or</i> alternatively use detergent wipes 	<ul style="list-style-type: none"> After each patient use Weekly when not in use 	Nursing / HCSW / AHP / Facilities
Scissors (general nursing use)	<ul style="list-style-type: none"> Wash in detergent and wipe with 70% alcohol wipe Use disposable sterile scissors for aseptic technique 	<ul style="list-style-type: none"> Before and After use Disposable 	Nursing / Medical / AHP / HCSW
Toothbrushes	<ul style="list-style-type: none"> Single patient use and disposable 	<ul style="list-style-type: none"> Single patient use/disposable 	Nursing/AHP/HCSW
Sputum pots	<ul style="list-style-type: none"> Disposable 	<ul style="list-style-type: none"> Disposable as clinical waste 	Nursing/AHP/HCSW
Stethoscope	<ul style="list-style-type: none"> Wipe head with disposable detergent wipe between each patient use and whole stethoscope after use 	<ul style="list-style-type: none"> After use Weekly when not in use 	Nursing/AHP/HCSW / Medical
Suction equipment	<ul style="list-style-type: none"> Ideally only disposable suction units – dispose after use Outer carton wash in hot water and detergent solution, rinse and dry with paper towel 	<ul style="list-style-type: none"> After use 	Nursing/AHP/HCSW / Medical
Syringe Drivers	<ul style="list-style-type: none"> Follow manufacturer's instructions 	<ul style="list-style-type: none"> Before and After use 	Nursing
Telephone	<ul style="list-style-type: none"> Clean weekly with disposable detergent wipes or at end of session hot desk users 	<ul style="list-style-type: none"> Weekly or end of sessional use 	All staff

Item	Decontamination Method	Frequency	Responsibility
Therapy equipment	<ul style="list-style-type: none"> Dementia dolls – should be single patient use and laundered according to manufacturer's instructions 	<ul style="list-style-type: none"> Manufacturer's instructions 	Therapy / Nursing and AHPs
Thermometers	<ul style="list-style-type: none"> Digital/tympanic – use disposable sheath/cover Wipe handset with disposable detergent wipe after use 	<ul style="list-style-type: none"> Before and After use 	Nursing / Medical / HCSW
Tourniquet	<ul style="list-style-type: none"> Use disposable 	<ul style="list-style-type: none"> Disposable 	Nursing / Medical / HCSW
Toys and play equipment	<ul style="list-style-type: none"> Soft toys - launder regularly as set schedule and when visibly dirty Hard toys – clean with disposable detergent wipes 	<ul style="list-style-type: none"> Between patients and at the end of each session or at least weekly 	All staff
Tuning forks	<ul style="list-style-type: none"> Wipe with disposable detergent wipe between each patient use 	<ul style="list-style-type: none"> After use Weekly when not in use 	Nursing/AHP/ HCSW / Medical
Vacutainer needle holders	<ul style="list-style-type: none"> Discard after procedure 	<ul style="list-style-type: none"> Single use 	
Vital signs monitors	<ul style="list-style-type: none"> Wipe with disposable detergent wipe between each patient use 	<ul style="list-style-type: none"> After use Weekly when not in use 	Nursing/AHP/ HCSW / Medical
Uniforms and work wear	<ul style="list-style-type: none"> Launder as per manufacturer's instructions – see uniform policy 	<ul style="list-style-type: none"> After each wear 	All staff
Urinals (non - disposable)	<ul style="list-style-type: none"> Use disposable as far as possible or clean as per bedpans – see above) 	<ul style="list-style-type: none"> Discard disposables in macerator 	Nursing / HCSW / AHP
Walking aids (sticks, frames and crutches)	<ul style="list-style-type: none"> Clean with disposable detergent wipes 	<ul style="list-style-type: none"> Between patient use or when visibly soiled 	Nursing / HCSW / AHP
Water coolers	<ul style="list-style-type: none"> Not recommended for use – must have service contract in place 	<ul style="list-style-type: none"> Not to be used 	Check with Facilities Manager
Wheelchairs	<ul style="list-style-type: none"> Clean with detergent and warm water, rinse and dry or use disposable detergent wipes 	<ul style="list-style-type: none"> After use Weekly when not in use 	Nursing / HCSW / AHP
Work surfaces	<ul style="list-style-type: none"> General – clean with detergent and warm water, rinse and dry or use disposable detergent wipe 	<ul style="list-style-type: none"> Daily 	All staff

***This list is not exhaustive**

Standard Operating Procedure Details

Unique Identifier for this SOP is	BCPFT-COI-POL-05-07
State if SOP is New or Revised	New
Policy Category	Control of Infection
Executive Director whose portfolio this SOP comes under	Executive Director of Nursing, AHPs and Governance
Policy Lead/Author Job titles only	Infection Prevention and Control Team
Committee/Group Responsible for Approval of this SOP	Infection Prevention and Control Committee
Month/year consultation process completed	November 2015
Month/year SOP was approved	December 2015
Next review due	December 2018
Disclosure Status	'B' can be disclosed to patients and the public

Review and Amendment History

Version	Date	Description of Change
1.0	Dec 2015	New Procedure established to supplement Infection Control Assurance Policy