

Medium Risk Pathway Cleaning Process COVID-19

**NHS England and NHS Improvement**

**Publications approval reference: 001**

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| Confirm you have been trained in the safe use of chemicals and equipment and procedures to perform this task. | Sign |
| Date |  |
| Name |  |
| Refresher training date (updated guidance) |  |

**MEDIUM RISK PATHWAY (MRP)** - The local Trust will classify areas under each Pathway, there may be two pathway areas within a ward / department, and these may change on a regular basis. A MRP applies to any emergency/urgent care facility where:

* any facility where triaged/clinically assessed individuals are asymptomatic and are waiting a SARS-CoV-2 (COVID-19) test result and have no known recent COVID-19 contact
* any care facility where testing is not required or feasible on asymptomatic individuals and therefore infectious status is unknown
* asymptomatic individuals who decline testing in any care

**All facilities staff performing environmental decontamination should, where possible, be allocated to specific area(s) and not be moved between different pathways**

**Always Practice social distancing of 2 metres wherever possible both from the patients and between staff members**

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| **Section 1 A**  **PPE - The following PPE must be worn by all persons entering a room / area within a Medium Risk Pathway (Non AGP)** | | **Indicates:**  **Single use or Sessional use** |
| 1 | Disposable plastic apron | Single use |
| 2 | Disposable Gloves | Single use |
| 3 | Fluid resistant surgical mask type IIR Remove mask if becomes wet and replace. | Sessional use- see below |
| 4 | Eye / face protection (Visor) | Single or reusable |
|  | “sessional” use (a session ends when a healthcare worker leaves the care setting) i.e. at break or end of shift. FRSM can be worn sessionally if providing care for COVID-19 cohorted patients/individuals |  |
| **1B**  **PPE - The following PPE must be worn if Aerosol Generating Procedures (AGPS) are taking place within the area and you cannot be completely removed ( eg ITU bays)** | |  |
| 1 | Gown – **Task based (see notes section)** | Single use (Task) |
| 2 | Disposable plastic apron | Single use |
| 3 | Disposable Gloves | Single use |
| 4 | FFP 3 (Face filtering piece)Mask or Hood for AGP’s – **Task based (see notes section)** | Single use (Task) |
| 5 | Eye / face protection (Visor) | Single use |

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| **Section 2 -preparation and cleaning process general areas for all categories of clean** | |
| 1 | Prepare cleaning trolley with disposable cleaning cloths/mops or launderable cleaning cloths and mops transported and laundered according protocol shown below. |
| 2 | If using a combined chlorine and detergent – see note below, Prepare combined chlorine and detergent solution 1000 ppm available chlorine using correct COSHH and Risk assessment if using a chlorine solution WITHOUT a detergent see note below. |
| 3 | Dose disposable cloths and mops according to the correct product and dosage instructions |

**No dry dusting or dry mopping to be carried out in COVID-19 area**

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| **Section 3 - Daily cleaning of occupied COVID 19 Rooms / Bed spaces - High Risk Pathway** | |
| 1 | Clean hands then don appropriate PPE provided correctly as detailed in section 1 |
| 2 | Clean the area according to the sites standard isolation procedure, |
| 3 | Clean all areas following high to low, clean to dirty principles in the patient room and associated toilet facility, finish with cleaning the floor. |
| 4 | The frequency of cleaning the care environment in designated COVID-19 care areas should be at least twice daily including clinical rooms in outpatients areas. |
| 5 | Pay particular attention to touch points which should be cleaned at least twice daily |
| 6 | Replenish, soap, gel, paper towels and toilet rolls as required |
| 7 | Remove all waste bags and replace with a clinical waste bag, all waste should be disposed as category B waste following local guidelines |
| 8 | Remove and dispose of PPE, wash hands including forearms if they have been splashed |

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| **Section 4, Discharge cleaning of all areas following COVID 19 patient** | |
| 1 | Wearing appropriate PPE provided as detailed in section 1 |
| 2 | Ensure bed linen and patients personal belongings have been removed prior to the clean commencing. |
| 3 | Remove disposable curtains and dispose of as category B waste, or for fabric curtains, remove and place for laundry in red alginate stitched bag and outer bag as per the local policy |
| 4 | Clean all areas following high to low, clean to dirty principles in the patient room and associated toilet facility, finish with cleaning the floor |
| 5 | Pay particular attention to touch points |
| 6 | Replenish, soap, gel, paper towels and toilet rolls as required |
| 7 | Rehang curtains either fabric or disposable according to local procedure (date as policy states) |
| 8 | Remove all waste bags and replace with a clinical waste bag, all waste should be disposed as category B waste following local guidelines and equipment, |
| 9 | Remove and dispose of PPE, wash hands including forearms if they have been splashed |

**Notes**

* **AGP’s PPE Section 1B ‘Task’ definition – A ‘Task’ for cleaning will be a whole room or cohort area within the care setting e.g. a bay, a side room, a screened area within ITU etc – A single gown can be used to fully clean the area described however aprons and gloves must be changed after each patient / bed space. When ‘task’ area is completed Doff PPE and Don PPE as Section 1A**
* **FFP3 Filtering face piece class 3 – staff must have been Fit Tested and regularly fit checked to use this equipment**
* **Combined Chlorine solutions are a mixture of chlorine and detergent which include Chlor-Clean, Actichlor-plus and So-Chlor brand of products**
* **Chlorine without detergent include sodium hypochlorite, Milton, Haztabs and Actichlor, if this process is followed areas will need to be pre-cleaned with detergent solution then disinfected with the chlorine solution at 1000ppm**
* **Electronic equipment cleaning should be performed with 70% alcohol-based wipes**
* **Bodily spillages should be cleaned promptly according to local policy**
* **Only cleaning (detergent) and disinfectant products supplied by employers are to be used. Products must be prepared and used according to the manufacturers’ instructions and recommended product "contact times" must be followed. If alternative cleaning agents/disinfectants are to be used, they should only on the advice of the IPC team and conform to EN standard 14476 for viricidal activity**
* **National guidance states that communal toilets in inpatient areas should be cleaned following each use.**

**Reference Documents**

1. Covid 19 guidance for infection prevention and control in heaLthcare settings V 1.1 upDATED PPe GUIDANCE 18th MAY – Now Archived
2. Guidance for the remobilisation of services within health and care settings V1 20TH AUGUST 2020
3. CEM/CMO/2020/043 LETTER DETAILING UPDATES TO CLEANING, TRAINING AND SOCIAL DISTANCING 24.12.2020

**Local guidance:**

* **Follow the COVID-19 FM service guidance document for the relevant area (updated 20/08/20)**
* **There is a page on this document where local arrangements can be specified, within the latest guidance the autonomy has been given to Trusts to adapt the document to fit locally to adjust to their local and regional needs including the local agreement for cleaning toilets after each use**
* **Risk assessment – The management team will provide the Trust Risk assessment for each area; this is to be followed**
* **Local IPC guidance – All local IPC teams will agree the SOP’s and local guidance additions**
* **Pathways – Pathways may change on a daily basis, ensure the management team onsite are linked into the sites updates via email, Silver meetings etc**