



Non-Hospital Medical and Surgical Facilities Accreditation Program



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Introduction

A comprehensive and effective environmental cleaning program is essential to providing and maintaining a safe, clean and hygienic environment for patients and staff.

The environmental cleaning expectations of non-hospital facilities are set out in the following four accreditation standards:

Environmental Cleaning Program and Non-Clinical Areas

Environmental Cleaning of Operating/Procedure Rooms and Sterile Core

Environmental Cleaning of Pre- and Post-anesthesia Care Areas

Environmental Cleaning of the Medical Device Reprocessing Department

These standards reflect provincial and national standards, guidelines, and best practices for environmental cleaning of health-care settings and were developed in consultation with a qualified infection prevention and control (IPAC) professional and epidemiologist. The cleaning schedules specified in this standard set the minimum requirements for all non-hospital facilities and reflect standards, guidelines and best practice for environmental cleaning of health-care settings and/or the expertise of a qualified IPAC professional utilizing the risk stratification0802 0 79/F1 11 Tf1 0 0 1 72 349.82 Tm0 g0 G[(Th)5(e)4(se)5(standards r)-3(e)4(8m3(en



Environmental Cleaning Program and Non-Clinical Areas

No.	Description	Reference	Risk	Change
EVS1.0	ENVIRONMENTAL CLEANING PROGRAM AND NON-CLINICAL AREAS			
EVS1.1	<p>Infection prevention and control (IPAC) activities are supported through an established environmental cleaning program.</p> <p><i>Guidance: Optimal environmental and equipment cleaning practices are supported through trained staff and the development of a comprehensive cleaning program which covers who is cleaning (roles and responsibilities), what needs to be cleaned (rooms, equipment), how to clean and disinfect (products to use, methods), when to clean and disinfect (frequency), and resources to track cleaning (checklists, log with name/date). Evaluation of the environmental cleaning program to ensure effective cleaning and currency in practice is also an integral component of an optimal cleaning program.</i></p>			
EVS1.1.1	M	<p>There is a regulated health professional responsible for overseeing the environmental cleaning services (EVS) program.</p> <p><i>Guidance: The person responsible for overseeing the program will depend on the size, scope and complexity of the facility. This role/responsibility is identified on the organizational chart. In facilities where the only regulated health professional is the medical director, then the medical director is responsible.</i></p>		



No.	Description	Reference	Risk	Change
EVS1.2.2	M There are sufficient staff to perform effective cleaning. <i>Guidance: EVS staffing levels must be sufficient for personnel to effectively clean and disinfect the areas they are responsible for and at the required frequencies. Some factors to consider when determining EVS staffing levels include whether personnel have other responsibilities in addition to cleaning (e.g. medical device reprocessing, stocking), case volume, the age, design and size of the facility (i.e. larger and/or older facilities take more time to effectively clean), personnel training and experience and product and equipment factors (i.e. ready-to-use products vs. products that require dilution). In larger facilities and/or facilities with frequent case turnover, a model where there are dedicated environmental cleaning staff is preferred.</i>	4, 5	H	NEW
EVS1.3	Staff have the necessary training, experience and competency to effectively clean. <i>Guidance: Environmental cleaning in health-care training may be developed and provided by the facility; although, formal training through a recognized third-party provider is preferred.</i>			
EVS1.3.1	M Environmental cleaning staff have completed formal training in health-care cleaning. <i>Guidance: The Canadian Hospital Environmental Services Study (CHESS) published in the American Journal of Infection Control demonstrates that training of environmental cleaning personnel is a critical prerequisite to effective cleaning. The training may be developed and provided by the facility although a recognized training program, such as the online national certification course through the Canadian Association of Environmental Management (CAEM) is preferred.</i>			



No.	Description	Reference	Risk	Change
EVS1.3.7	M Individuals with the appropriate education, qualifications and experience conduct the competency assessments. <i>Guidance: The medical director, in collaboration with the EVS in-house lead, is responsible for defining the education, experience and qualifications of the individuals performing competency assessments</i>			



No.	Description	Reference	Risk	Change
EVS1.4.3	<p>M The environmental cleaning contract includes and requires strict adherence to the facility's environmental cleaning plan.</p> <p><i>Guidance: The facility's environmental cleaning plan outlines the who, what, when, where and how to clean and disinfect each distinct area of the non-hospital facility and the non-critical medical equipment within each of these areas.</i></p>	4, 5	H	Change
EVS1.5	<p>Environmental cleaning program audits assess facility cleanliness and ensure cleaning practices are effective and meet current best practices and standards.</p> <p><i>Guidance: Cleaning effectiveness measured by various types of audits is an essential component of a cleaning program to ensure the cleaning program is meeting its goal. Auditing is essential for ensuring hospital-clean standards are maintained</i></p>			



No.	Description	Reference	Risk	Change
EVS1.5.4	M			



No.	Description	Reference	Risk	Change
EVS1.6.7	M The housekeeping closet has a means for hand hygiene. <i>Guidance: At a minimum, there is an alcohol-based hand rub dispenser located at the entrance to the housekeeping closet. Facilities in conformance with CSA Z8000 will have a hand hygiene sink in the housekeeping closet.</i>	2, 3, 4, 5	M	
EVS1.6.8	M The housekeeping closet has shelving to ensure all chemicals and electric chargers are off the floor.	2	M	
EVS1.6.9	M All cleaning solutions in the housekeeping closet are appropriately contained and stored. <i>Guidance: Containers are to be in good condition to securely contain the substance and are stored below eye level and in a manner that ensures they will not readily fall, become dislodged, suffer damage etc. Use of an automated dispensing system or ready-to-use products is preferred. See the NHMSFAP's Occupational Health and Safety accreditation.icals and i2 228.55 240 gT/Fd0 Tf1 0 0 11 0 0 10 82 4.73</i>			



No.	Description	Reference	Risk	Change
EVS1.8.5	Reusable cloths and mop-heads are laundered after each use and thoroughly dried before storing. <i>Guidance: Reusable textiles used for environmental cleaning are appropriately laundered, including separate wash loads, cycles and temperatures.</i>	2, 5	H	
EVS1.8.6	M Cleaning carts are stored in the housekeeping closet when not in use.	2, 4, 5	L	
EVS1.9	Weekly and monthly cleaning augments daily cleaning in ensuring a clean housekeeping closet. <i>Guidance: The frequency of cleaning specified in this standard has been established in consultation with a qualified IPAC professional and sets the minimum requirements for all f125 re0 1 106153 38-2(s)g3 0.5 ref59 45(e)1(a)-(b))TJETQq1393 389 58</i>			



No.	Description	Reference	Risk	Change
EVS1.11.10	M Staff changing areas are free of clutter.	4, 5	H	NEW
EVS1.11.11	M Staff changing area cleaning follows a specific documented process. <i>Guidance: A standardized approach ensures all surfaces are optimally cleaned and disinfected.</i>	4, 5	M	NEW
EVS1.11.12	M Staff changing area cleaning cards and/or checklists list all the things in the bay/room to be cleaned. <i>Guidance: CidarE(on)g(red)-(ed)-(s)-5(13-(a)n(d))-5y/-33(eon)c2(klis(a</i>			



No.	Description	Reference	Risk	Change
EVS1.11.23	M Cleaning is documented.	2	L	NEW
EVS1.12	Policies and procedures contain all the information necessary for the safety of patients, staff and visitors. <i>Guidance: Policies and procedures ensure that activities/procedures are performed consistently and accurately by all personnel within the non-hospital facility. They are reviewed regularly and updated when needed to maintain current best practice standards.</i>			
EVS1.12.1	M There is policy and procedures in place for the environmental cleaning of non-clinical areas. <i>Guidance: The policy and procedures include defined responsibility for specific areas and items (i.e. blood pressure cuff cleaned and disinfected by nurse following patient use), routine (e.g. daily) cleaning and disinfection, discharge/transfer cleaning and disinfection, turn-over and terminal cleaning and disinfection of the operating and procedure rooms, cleaning and disinfecting areas under additional precautions (i.e. enhanced disinfection requirements), cleaning standards and frequency and are understandable to frontline environmental cleaning personnel cleaning procedures outline cleaning standards, frequency and accountability for cleaning (i.e. who cleans, what do they clean and when do they clean it); cleaning schedules, procedures, checklists and other tools to ensure that no area or item is missed from routine cleaning.</i>	2, 4	M	
EVS1.12.2	M There is policy and procedures in place for the environmental cleaning of the operating/procedure rooms and sterile core. <i>Guidance: The facility's policy and procedures outline the who, what when, where and how, as well as that tasks to be completed (i.e. includes the cleaning checklist), cleaning and disinfecting process and frequency, products and equipment used.</i>	4	H	
EVS1.12.3	M There is policy and procedures in place for the environmental cleaning of the pre- and post-anesthesia care areas. <i>Guidance: The facility's policy and procedures outline the who, what when, where and how, as well as that tasks to be completed (i.e. includes the cleaning checklist), cleaning and disinfecting process and frequency, products and equipment used.</i>	4	H	



No.	Description	Reference	Risk	Change
EVS1.12.4	M There is policy and procedures in place for the environmental cleaning of the medical device reprocessing department including clean and sterile storage. <i>Guidance: The facility's policy and procedures outline the who, what when, where and how, as well as that tasks to be completed (i.e. includes the cleaning checklist), cleaning and disinfecting process and frequency, products and equipment used.</i>	4	H	
EVS1.12.5	M There is policy and procedures in place for the environmental cleaning of the laboratory, as appropriate. <i>Guidance: This applies to andrology, embryology and Mohs micrographic surgery pathology laboratories. The facility's policy and procedures outline the who, what when, where and how, as well as that tasks to be completed (i.e. includes the cleaning checklist), cleaning and disinfecting process and frequency, products and equipment used.</i>	4	H	
EVS1.12.6	M There is policy and procedures in place for the cleaning of mobile medical equipment and other items. <i>Guidance: The policy and procedures outline the appropriate cleaning of non-critical medical equipment including cleaning frequency, level of cleaning and responsibility for cleaning.</i>	4	H	
EVS1.12.7	M There is policy and procedures in place for the cleaning and disinfection of central communication stations, medication and equipment areas. <i>Guidance: This may include the nursing station, dictation rooms, medication preparation areas and equipment and linen storage areas.</i>	4	M	
EVS1.12.8	M There is policy and procedures in place for pest surveillance and management. <i>Guidance: Pests include but are not limited to insects, mites, fungi and rodents. The policy and procedures include processes for preventing pests (e.g. food storage, waste management, replacing weather stripping around windows and doors), monitoring potential entry points to the facility (e.g. windows, entrances, waste storage areas, building loading docks), identifying and responding to pest problems including working with a third-party pest control company to deal with pests.</i>	4	L	NEW



12. BC Ministry of Health. Best practices for hand hygiene in all healthcare settings [Internet]. Victoria: BC Ministry of Health; 2012 [cited 2023 Aug 28]. 71p.
13. Government of British Columbia. Public health act: food premises regulation [Internet]. Victoria: Queen's Printer; 2022 [cited 2023 Aug 28].



Revision history

Date	Revisions
September 8, 2016	NHMSFAP <i>Environmental Cleaning</i> standard approved (version 1.0)
November 30, 2023	<p>Substantial content revisions to reflect environmental cleaning best practices (version 2.0) (published March 1, 2024)</p> <p>Environmental cleaning expectations separated into four standard (program and non-clinical areas, operating/procedure room(s) and sterile core, pre- and post-anesthesia care and medical device reprocessing department)</p> <p>New standards template</p>

