This SOP applies to all staff employed by NHS Greater Glasgow & Clyde and locum staff on fixed term contracts and volunteer staff.

**SOP Objective**
To minimise the risk of healthcare associated infection (HAI) from the environment.

**KEY CHANGES FROM THE PREVIOUS VERSION OF THIS SOP**
- Updated wording in Procedure section
- Update to procedure section regarding the removal of PPE and cleaning equipment by Domestic Services following isolation room clean – Nov 2017

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**Document Control Summary**

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<tr>
<th>Approved by and date</th>
<th>Board Infection Control Committee 21st March 2016</th>
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<tbody>
<tr>
<td>Date of Publication</td>
<td>21st March 2016</td>
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<tr>
<td>Developed by</td>
<td>Infection Control Policy Sub-Group 0141 201 0326</td>
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<tr>
<td>Related Documents</td>
<td>National Infection Prevention and Control Manual</td>
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<td>NHSGGC Decontamination Policy</td>
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<td>NHSGGC Standard Precautions Policy</td>
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<td>NHSGGC Hand Hygiene Policy</td>
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<td>NHSGGC SOP Cleaning of Near Patient Equipment.</td>
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<td>NHS Scotland National Cleaning Services Specification</td>
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| Distribution/Availability | NHSGGC Infection Prevention and Control Manual and the Internet www.nhsggc.org.uk/infectionpreventionandcontrol |

**Implications of Race Equality and other diversity duties for this document**
This policy must be implemented fairly and without prejudice whether on the grounds of ethnicity, gender, sexual orientation, religion, belief, disability or age.

**Lead Manager**
Board Infection Control Manager

**Responsible Director**
Board Medical Director

The most up-to-date version of this policy can be viewed at the following website: www.nhsggc.org.uk/infectionpreventionandcontrol
Aim
To minimise the risk of healthcare associated infection (HAI) from the environment.

Statement
Patients with certain alert organisms / conditions must be nursed in isolation to prevent the spread of the infection to other patients and staff. This is known as source isolation. In some situations if more than one patient is affected, during an outbreak of vomiting and diarrhoea for example, the restrictions may apply to a whole ward or part of a ward.

Communication
The ward / area will notify the domestic staff when twice daily cleaning is required. An isolation notice will be displayed at the entrance to a single isolation room.

Requirements
The Domestic Supervisor / Team Leader will ensure domestic staff have the necessary equipment and that staff working in the area are fully trained on the correct procedures.

- Disposable or launderable mop (yellow) head
- Appropriately colour coded re-usable items, e.g. bucket and / or small bucket and bowl
- Dust control mop (disposable cover)
- Single-use cloths
- Single-use scourer
- Non-sterile single-use gloves
- Yellow single-use apron
- Clinical waste bag (orange, with exception of mental health
- Chlorine based detergent (1000ppm)

Where possible it is intended that individual cleaning equipment should be used per isolation room unless there are two or more in an individual bay, then the same isolation equipment may be used. Personal Protective Equipment (PPE, i.e. gloves, aprons) must be changed between each room / area.

All re-usable equipment must be cleaned with chlorine based detergent.

The most up-to-date version of this policy can be viewed at the following website: www.nhsggc.org.uk/infectionpreventionandcontrol
**Twice Daily Clean of Isolation Rooms**

If multiple isolation rooms are being cleaned, the solution must be changed between rooms or after 15 minutes, whichever comes first. Cloths used in sanitary areas must be discarded immediately after use and a fresh cloth must be used for the general area.

There should be a minimum of 4 hours between cleans.

**Procedure**

Nursing staff are responsible for cleaning any medical equipment within the room as well as mattresses and patient call buzzer.

**NB:** Please see **SOP Cleaning of Near Patient Equipment**

**Prior to entering a room / area:**
Report to the nurse in charge to ensure that it is convenient for cleaning to start and to receive any special instruction. The number of domestic staff cleaning isolation rooms / areas must be kept to a minimum.

- Collect any equipment and materials required for cleaning inside the room / area as stated above.
- Carry out hand hygiene using alcohol hand gel or liquid soap and water.
- Put on a disposable yellow plastic apron and disposable gloves (check with the nurse in charge if any other protective clothing is required).
- Make up solution of chlorine based detergent (1000ppm).

**Procedure within isolation area:**
The door to the room must remain closed until the following procedure has been completed. PPE should be removed and hand hygiene carried out when leaving the room / area.

- Explain to the patient what you are going to do in the room.
- Check room / area if there is any visible contamination with blood / body fluids inform nursing staff to decontaminate the area with chlorine based detergent (10,000ppm) before commencing cleaning.
- Gather large items of rubbish including locker bag and bin liners and place in a clinical waste bag (orange).
- Clinical waste bags should be sealed in accordance with the NHSGGC
TWICE DAILY CLEAN OF ISOLATION ROOMS

Procedure (cont/ …)

- Waste Policy.
  - Damp dust all horizontal surfaces with a chlorine based detergent (1000ppm) first.
  - If the isolation room has been used for a patient with CDI, then chlorine based detergent must have a minimum contact time of 10 minutes for all surfaces and equipment **NB: please see SOP Cleaning of Near Patient Equipment**

- Replace waste bags.
- Replenish supplies (e.g. paper towels, soap) within the room.
- If there is a hand wash basin or en suite facilities ensure hand wash basin, shower, tiles, all fixtures and fittings, toilet seat and toilet bowl are thoroughly cleaned using a chlorine based detergent (1000ppm). Always clean the toilet last and dispose of cloth immediately into clinical waste bag. Toilets may be pre-cleaned using a sanitiser.
- Dry mop the floor working from furthest point towards the door. The floor should then be damp mopped using dedicated equipment and a solution of chlorine based detergent (1,000ppm available chlorine). Mops used in isolation rooms should be disposed of or laundered after use.
- No buffing should take place in the room
- Once clean is complete, cleaning equipment should be removed as follows:
  - For Vermop: The mop head should be bagged within the room for laundering, the mop handle wiped down and both removed from room
  - For mop and bucket system: The mop bucket should be emptied down the toilet within ensuite, the mop head bagged for laundering, the mop handle wiped and all removed from room.

Remove PPE and dispose as healthcare waste. **WASH HANDS using liquid soap and water.**

**NB: crockery and cutlery – No special requirements.** Crockery and cutlery
<table>
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<tr>
<td>• Storage of equipment should be in accordance with local infection prevention control advice.</td>
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<td>• Where mop heads are laundered this should be done as per local guidance / policy.</td>
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<tr>
<td>• Inform the nurse in charge that the clean has been completed. If unable to complete clean of isolation room, inform the nurse in charge and ensure exception report is completed.</td>
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www.nhsggc.org.uk/infectionpreventionandcontrol