

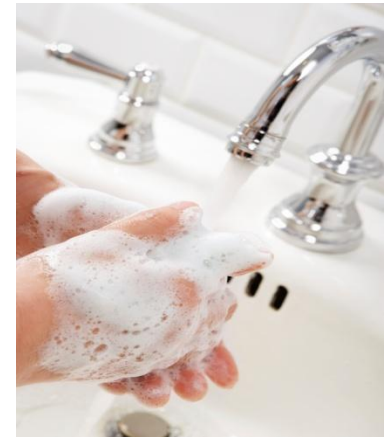


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Building Partnerships For Better Health Care

FIGHT MRSA ALLIANCE

Hospital Environmental Cleaning Survey

Southeastern Pennsylvania Results: April 2009





36 Participating Hospitals

36 Participating Hospitals (75% response rate)			
		# of hospitals	% of hospitals
Hospital Type	Acute	29	81%
	Acute Specialty	3	8%
	Rehab	3	8%
	LTAC	1	3%
Hospital Bed Size	Less than 100	5	14%
	101 to 250	20	56%
	251 to 400	3	8%
	400+	8	22%
Teaching Status	Teaching	26	72%
	Non-Teaching	10	28%

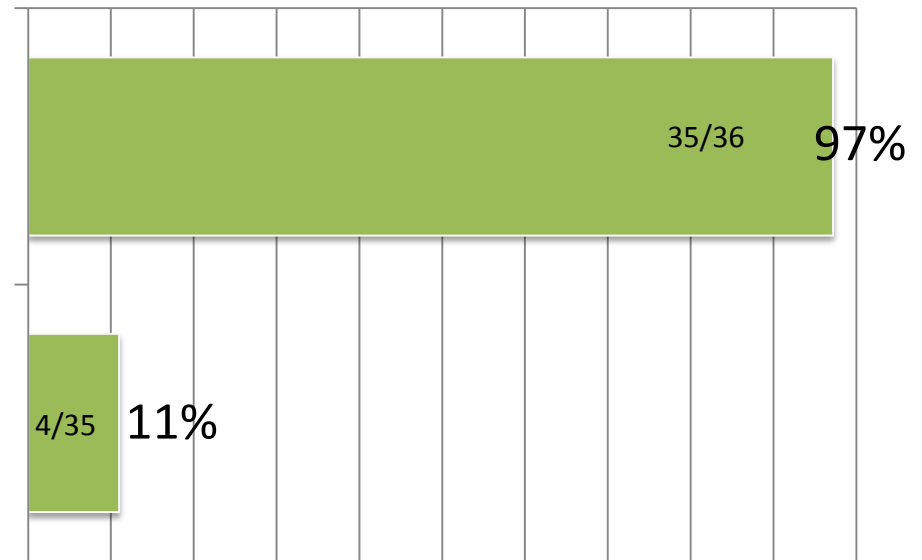


Cleaning Procedures: daily cleaning vs. discharge cleaning

% of hospitals that replied "yes"

0% 10% 20% 30% 40% 50% 60% 70% 80% 90% 100%

#1. Hospital has separate cleaning procedures for daily cleaning vs. discharge cleaning of a patient room



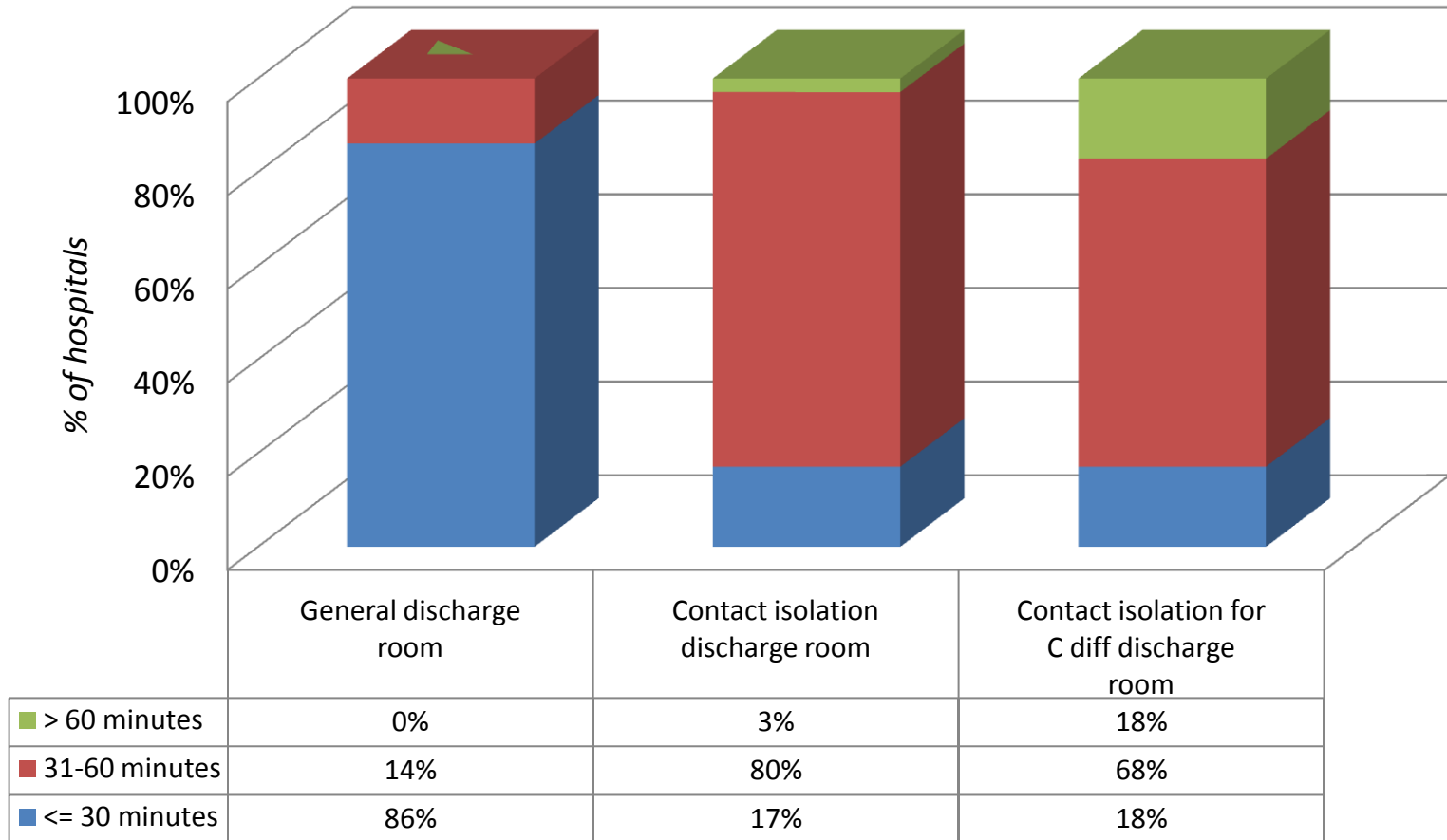
If yes, different cleaning staff are assigned

Source: Hospital Environmental Cleaning Survey,
Fight MRSA Alliance, April 2009



Cleaning Timeframes (Survey Questions #2,3,4)

N=36

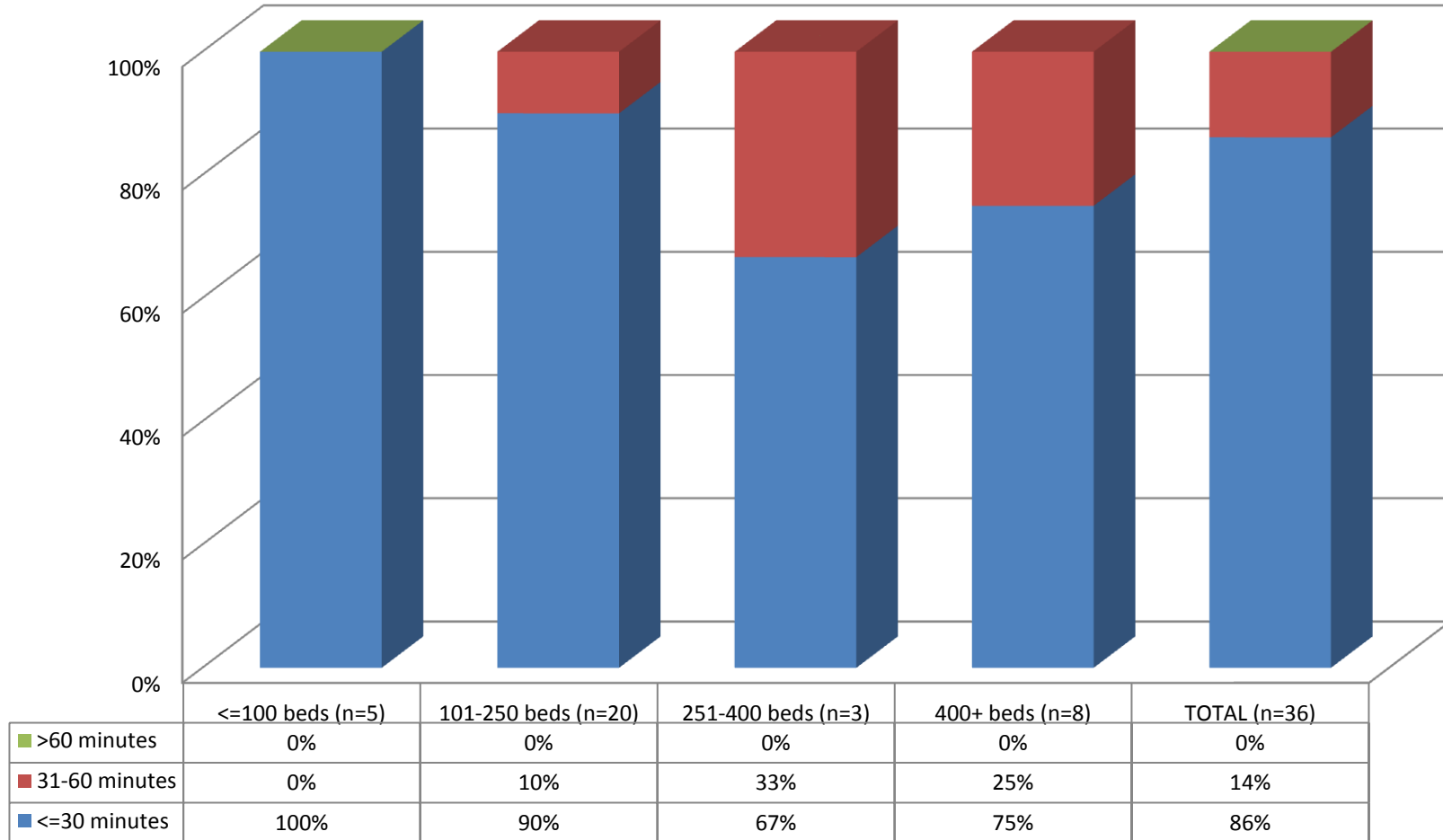


Source: Hospital Environmental Cleaning Survey,
Fight MRSA Alliance, April 2009



Cleaning Timeframes by Hospital Bedsize

General Discharge Room

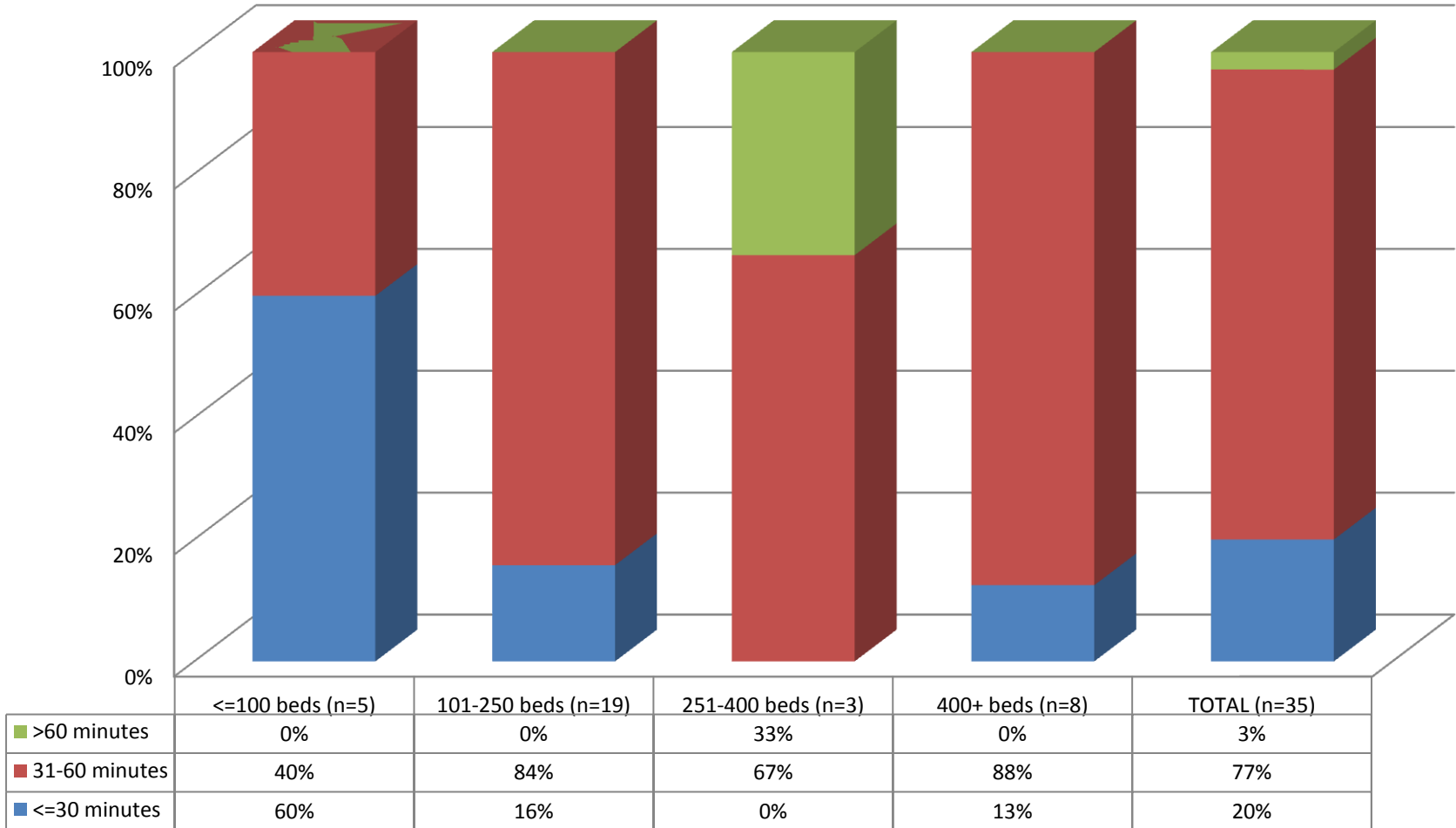


Source: Hospital Environmental Cleaning Survey,
Fight MRSA Alliance, April 2009



Cleaning Timeframes by Hospital Bedsize

Contact Isolation Room

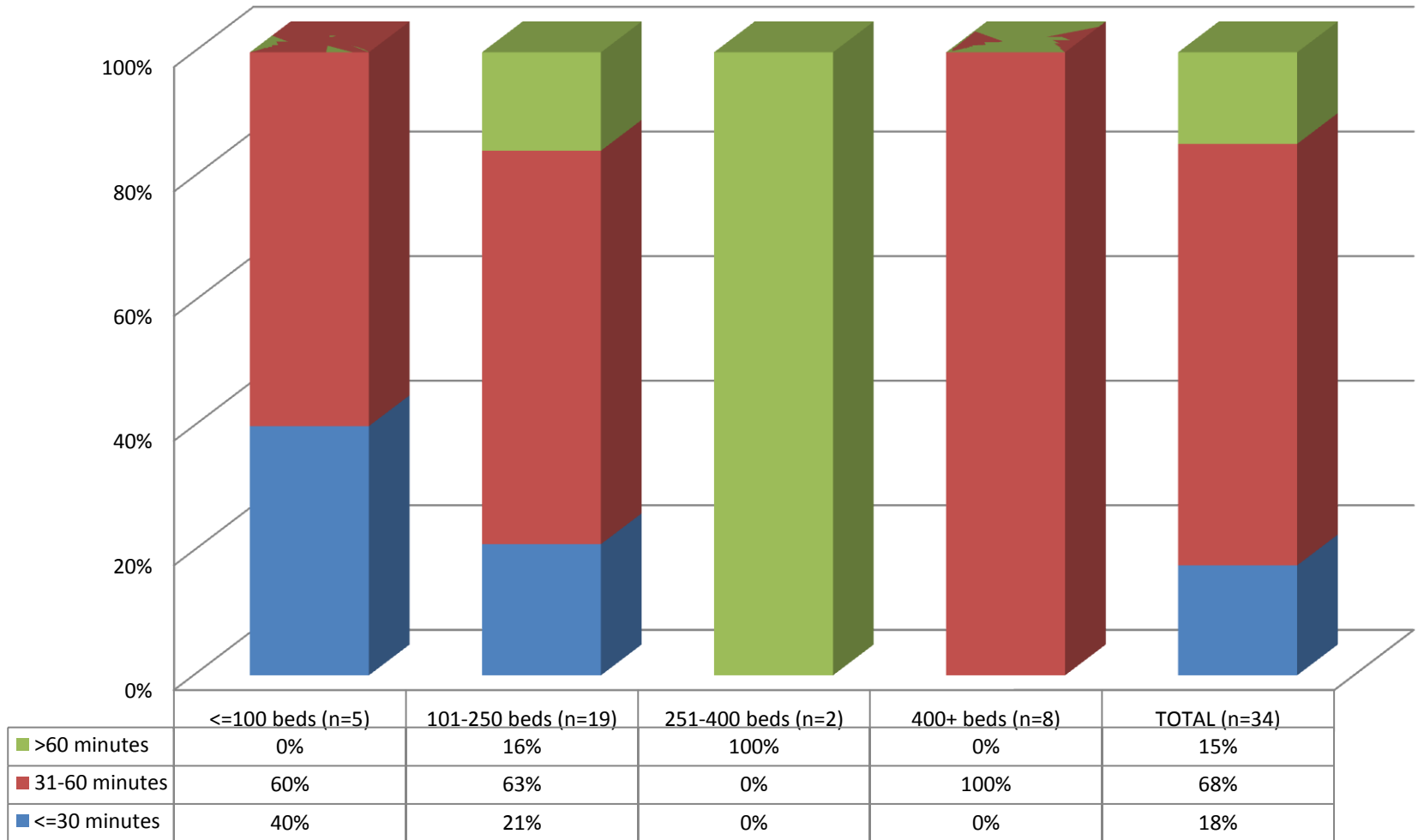


Source: Hospital Environmental Cleaning Survey,
Fight MRSA Alliance, April 2009



Cleaning Timeframes by Hospital Bedsize

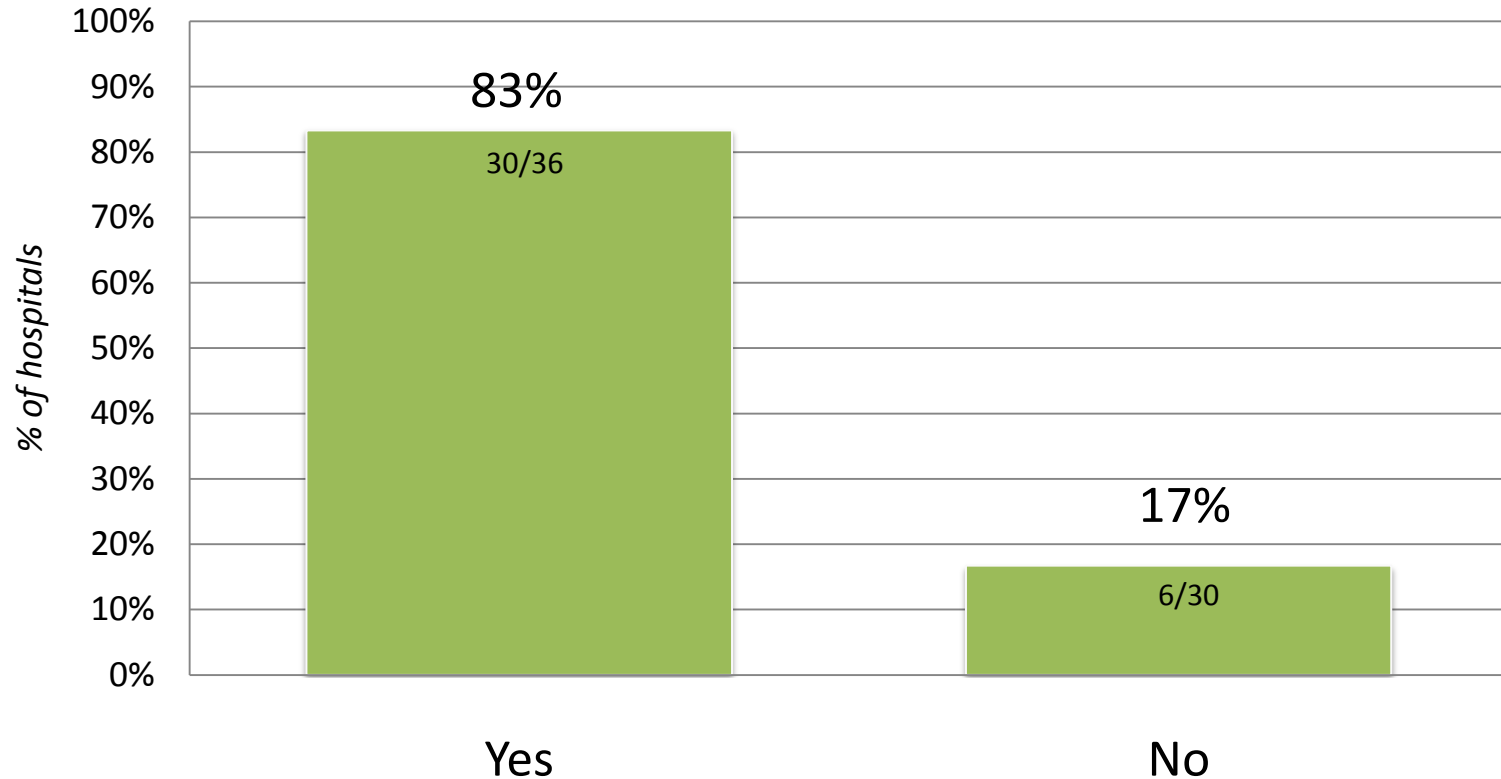
Contact Isolation Room for C diff



Source: Hospital Environmental Cleaning Survey,
Fight MRSA Alliance, April 2009



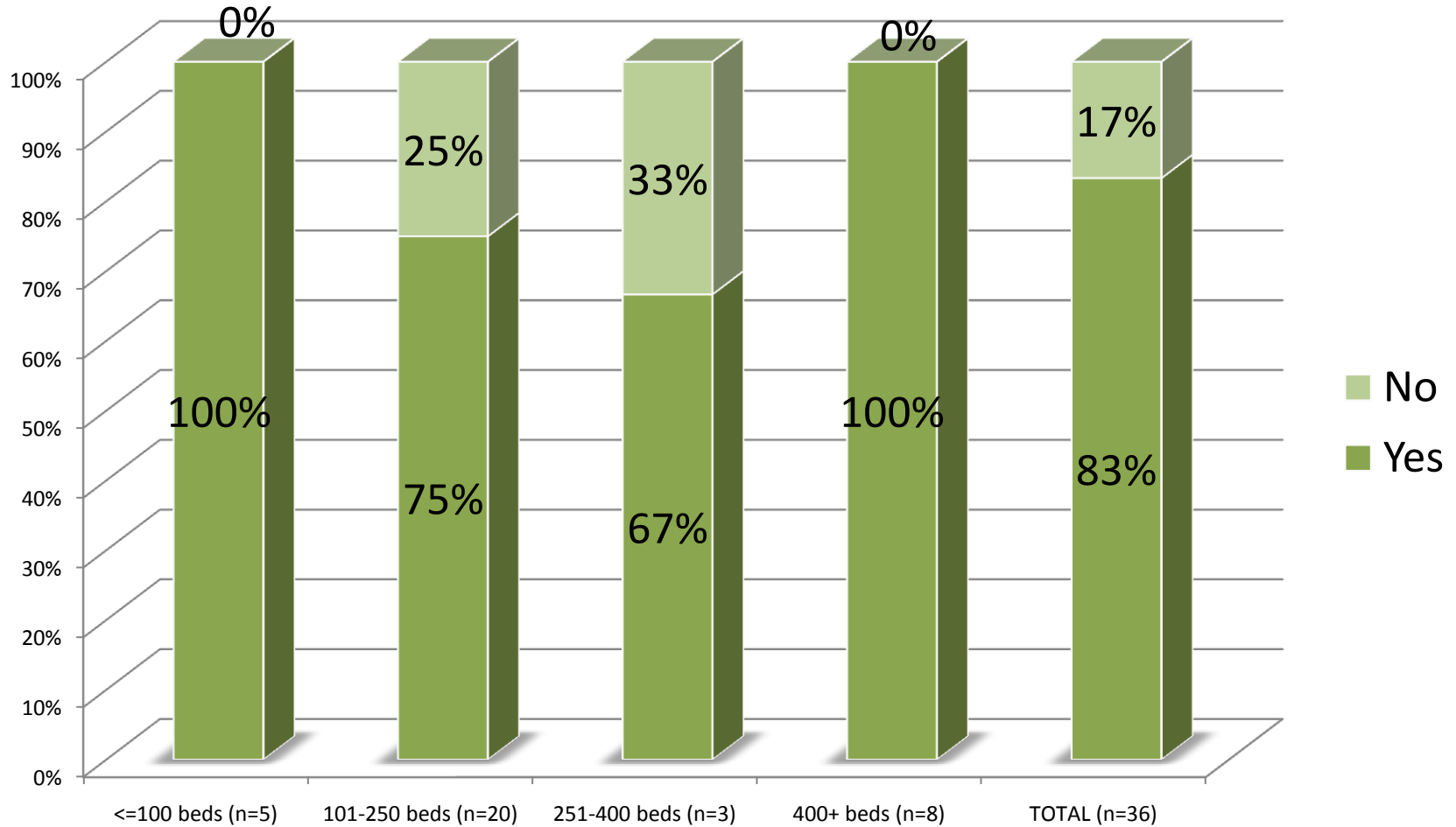
#5. Environmental Services is regularly pressured to hasten the cleaning process and turn rooms over more quickly



Source: Hospital Environmental Cleaning Survey,
Fight MRSA Alliance, April 2009



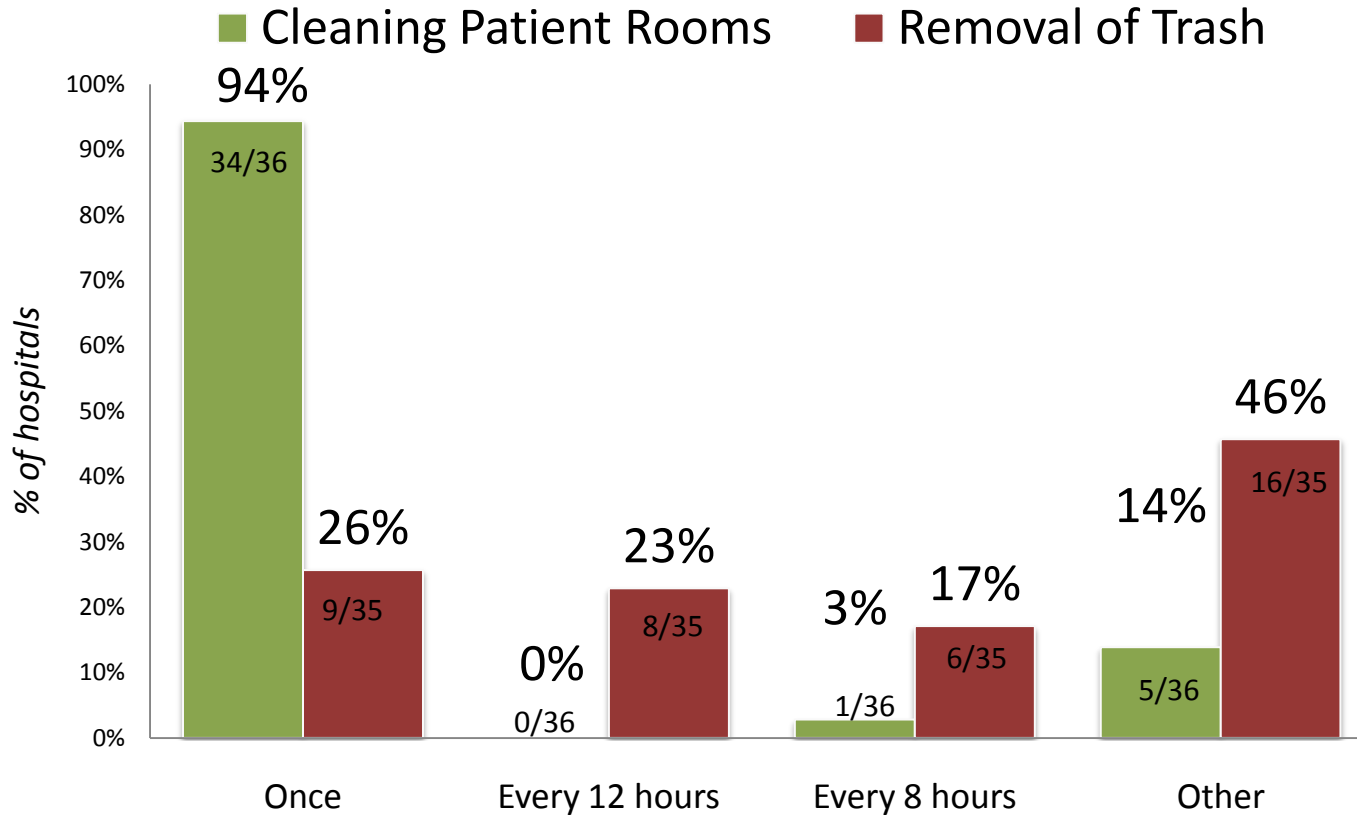
#5 by Hospital Bedsize



Source: Hospital Environmental Cleaning Survey,
Fight MRSA Alliance, April 2009



Frequency of room cleaning (#6) and removal of trash (#11)



Note: multiple answers given for this question

■ Other:

- Upon request
- As needed
- 3x/day
- Second check in evening
- Spot check with an evening freshening

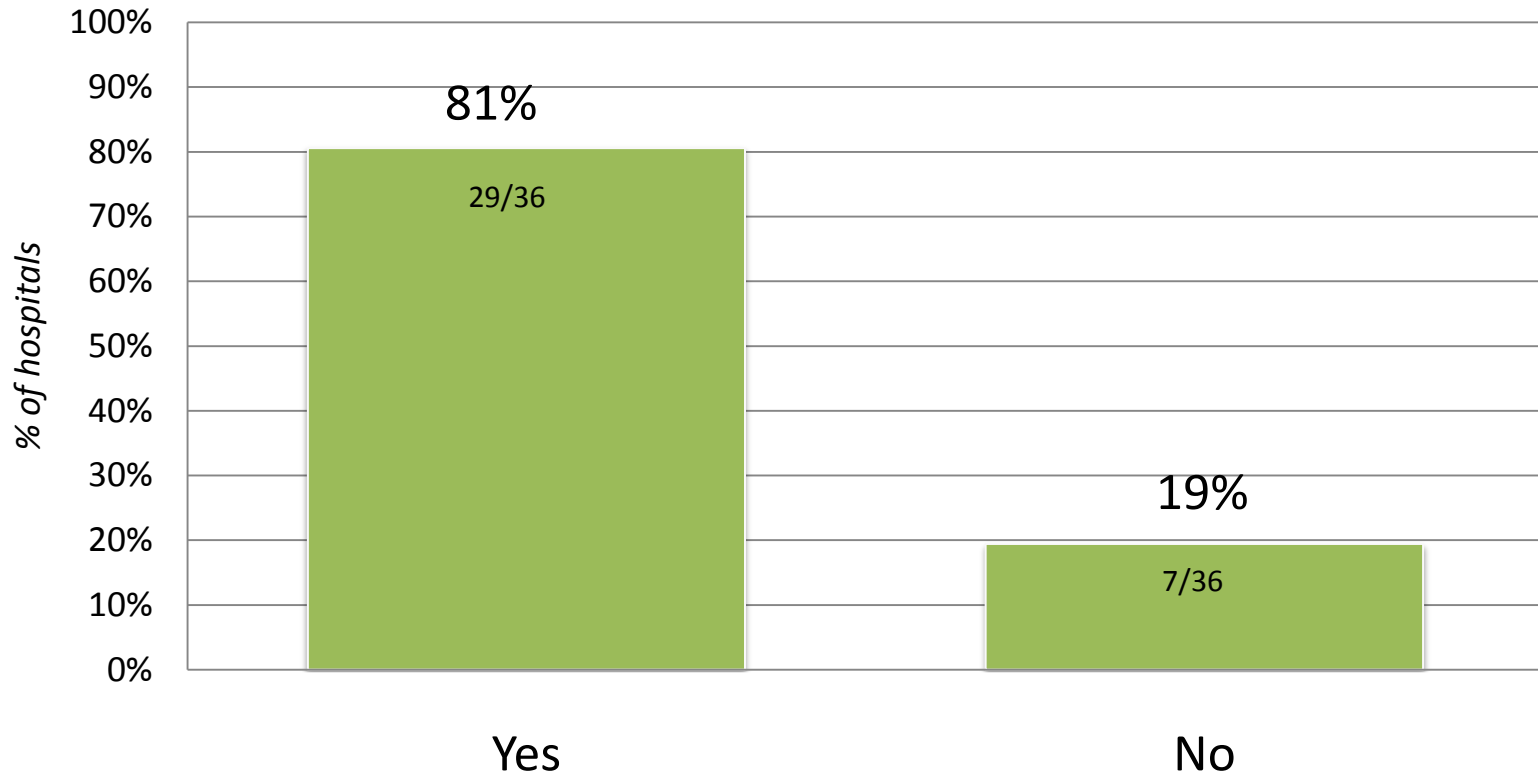
■ Other:

- As needed
- 3x/day
- 4x/day
- 2x on day shift
- ICU 5x/24hr, all other rooms 4x/24 hr
- Once by EVS and each shift /prn by Nsg
- EVSx2, Nurse Tech PRN

Source: Hospital Environmental Cleaning Survey,
Fight MRSA Alliance, April 2009



#8. Do you have a different process for cleaning contact isolation and non-isolation rooms at discharge?



Source: Hospital Environmental Cleaning Survey,
Fight MRSA Alliance, April 2009



#8 (continued) Hospitals were asked to describe the differences in their process for cleaning contact isolation and non-isolation rooms at discharge.

Those differences are as follows:

- Changing/replacing curtains (12 hospitals)
- Use of a bleach product (12 hospitals)
- Wash the walls (5 hospitals)
- Do a more detailed/terminal cleaning (5 hospitals)
- Staff wear appropriate PPE (4 hospitals)
- Change the mop head (3 hospitals)
- Baseboards are wiped (1 hospital)
- Change the cleaning cloth (1 hospital)
- Isolation room cleaning is done at the end of the cleaning schedule to eliminate cross contamination (1 hospital)
- Germicide solution is discarded after use in each isolation room. Paper towels used for cleaning and discarded after use. (1 hospital)
- Floor buffing is not performed in isolation rooms (1 hospital)
- We have altered our isolation categories to allow for Contact C (for C diff) and Contact V (for VRE). Contact C and V call for mandatory gowns and gloves to enter the room. Contact V will be changing to Contact R (for all resistant microbes) in the near future. (1 hospital)

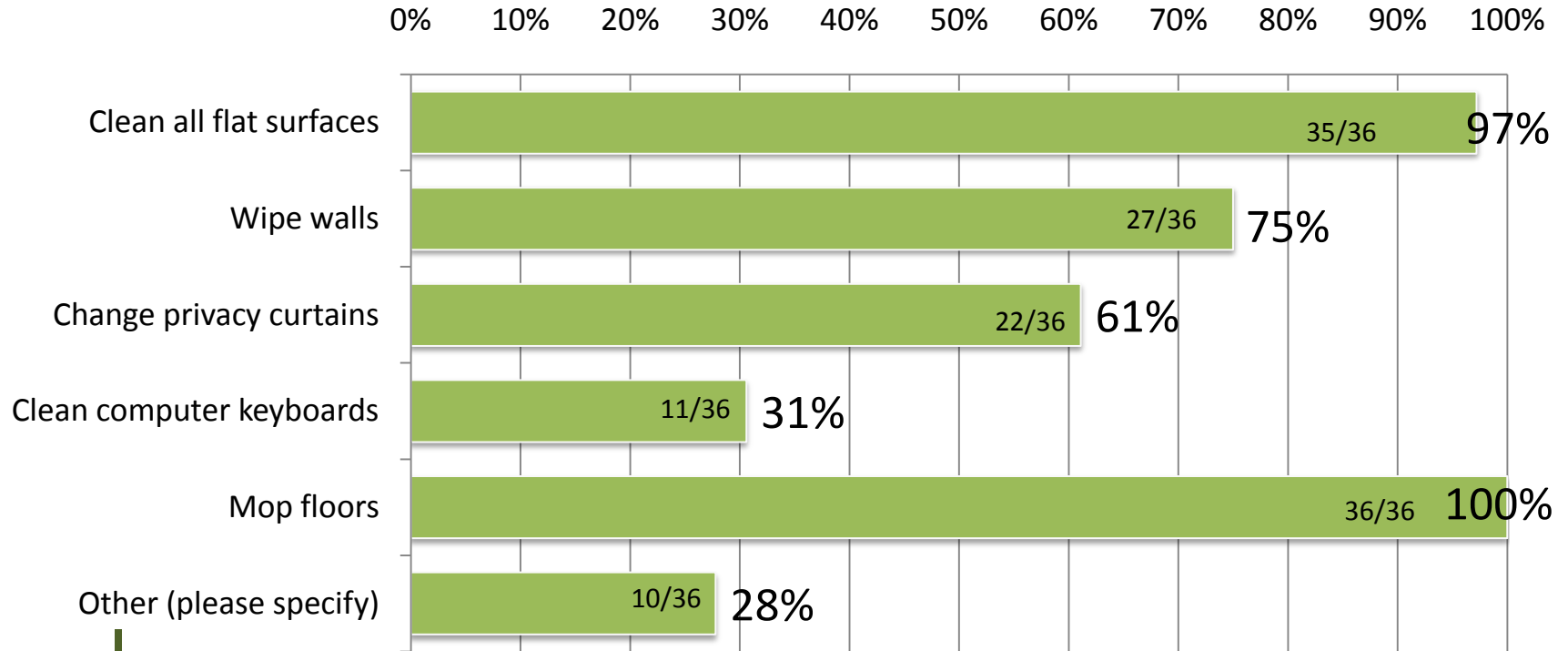
*Source: Hospital Environmental Cleaning Survey,
Fight MRSA Alliance, April 2009*



#9. How do you clean contact isolation rooms?

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% of hospitals

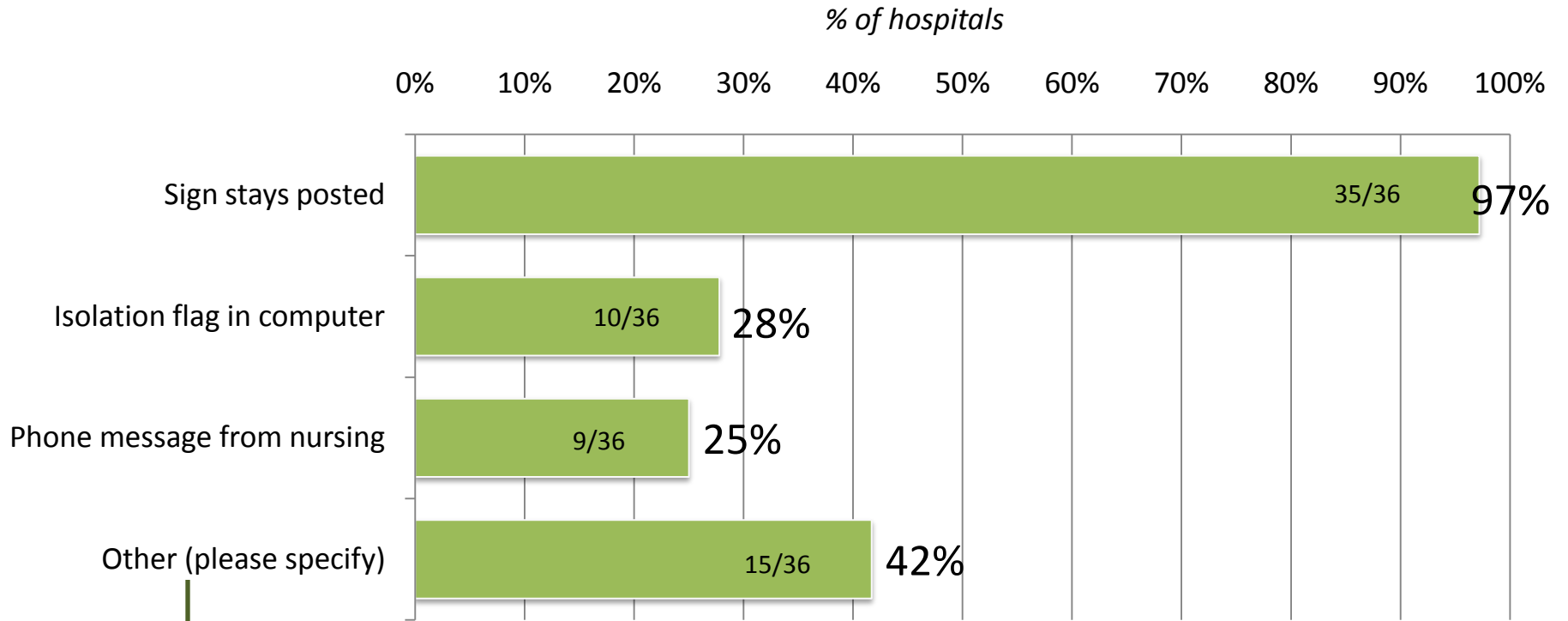


Note: multiple answers given for this question

- 2 hospitals change plastic curtain wraps
- 2 hospitals spot clean walls
- Additional attention to entire room cleaning
- Throw away toilet brush for C diff
- Clean vents
- Clean baseboards
- Clean bathroom fixtures
- Pay particular attention to high touch areas, furniture, etc.



#10. How do you identify contact isolation rooms that require discharge cleaning?

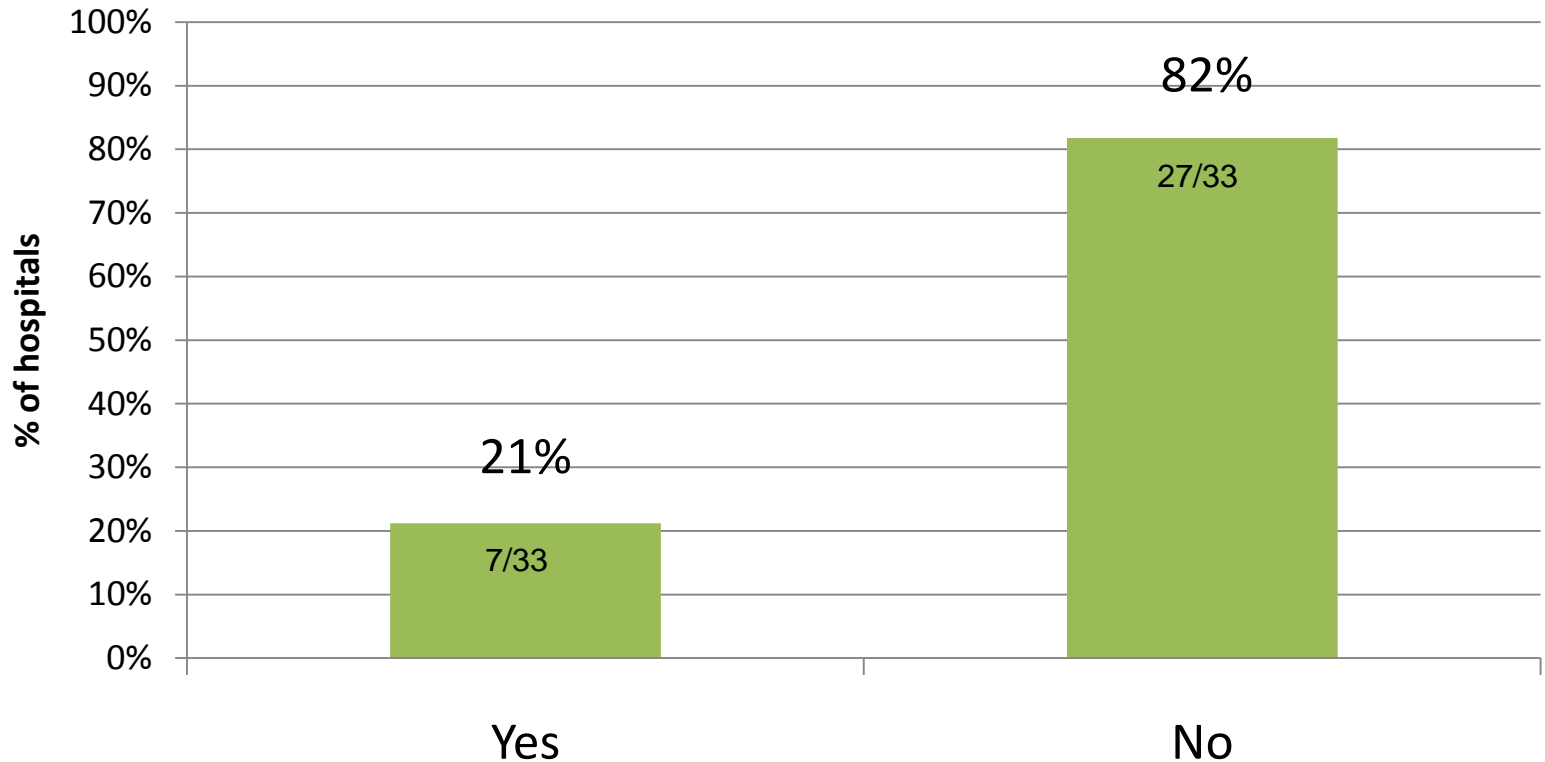


- 6 hospitals use verbal communication (by Nursing, Admissions, Infection Control, Unit Clerk)
- 4 hospitals use an isolation room list
- Bed tracking message
- Electronic bedboard indicates discharge
- For C diff, we use a yellow sign with our contact precautions sign that recommends soap and water washing. Bleach wipes sit on top of isolation cart as another flag to EVS.

Note: multiple answers given for this question



#13. Locked Medications are kept in contact isolation rooms



Yes
↓
2 out of the 4 hospitals replied that pharmacy discards unused meds in between patients

Source: Hospital Environmental Cleaning Survey,
Fight MRSA Alliance, April 2009



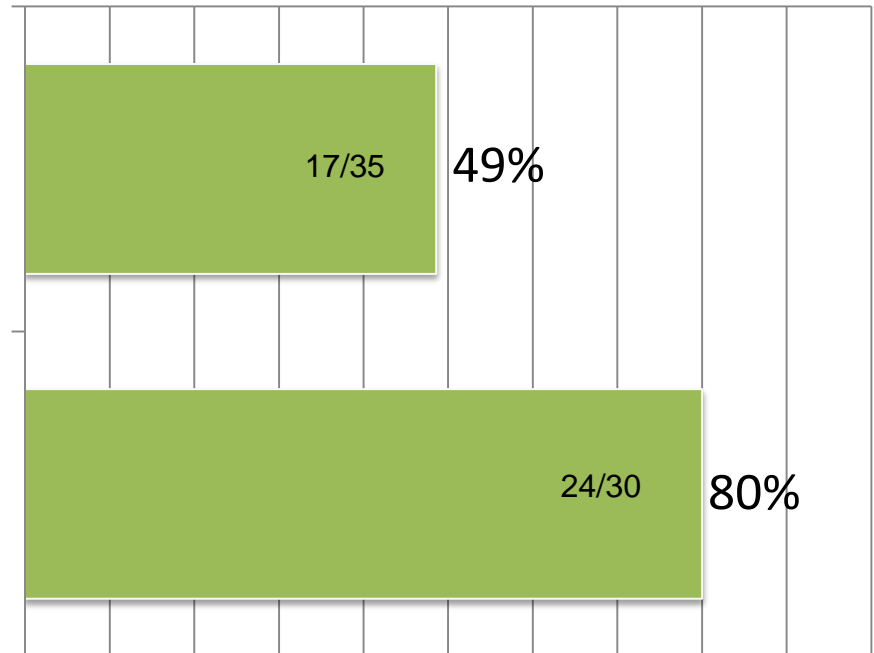
#14 and #15. Cleaning of semi-private rooms

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% of hospitals that replied "yes"

0% 10% 20% 30% 40% 50% 60% 70% 80% 90% 100%

In a semi-private room with just one occupant, hospital re-cleans the empty bed and tables and changes the linen

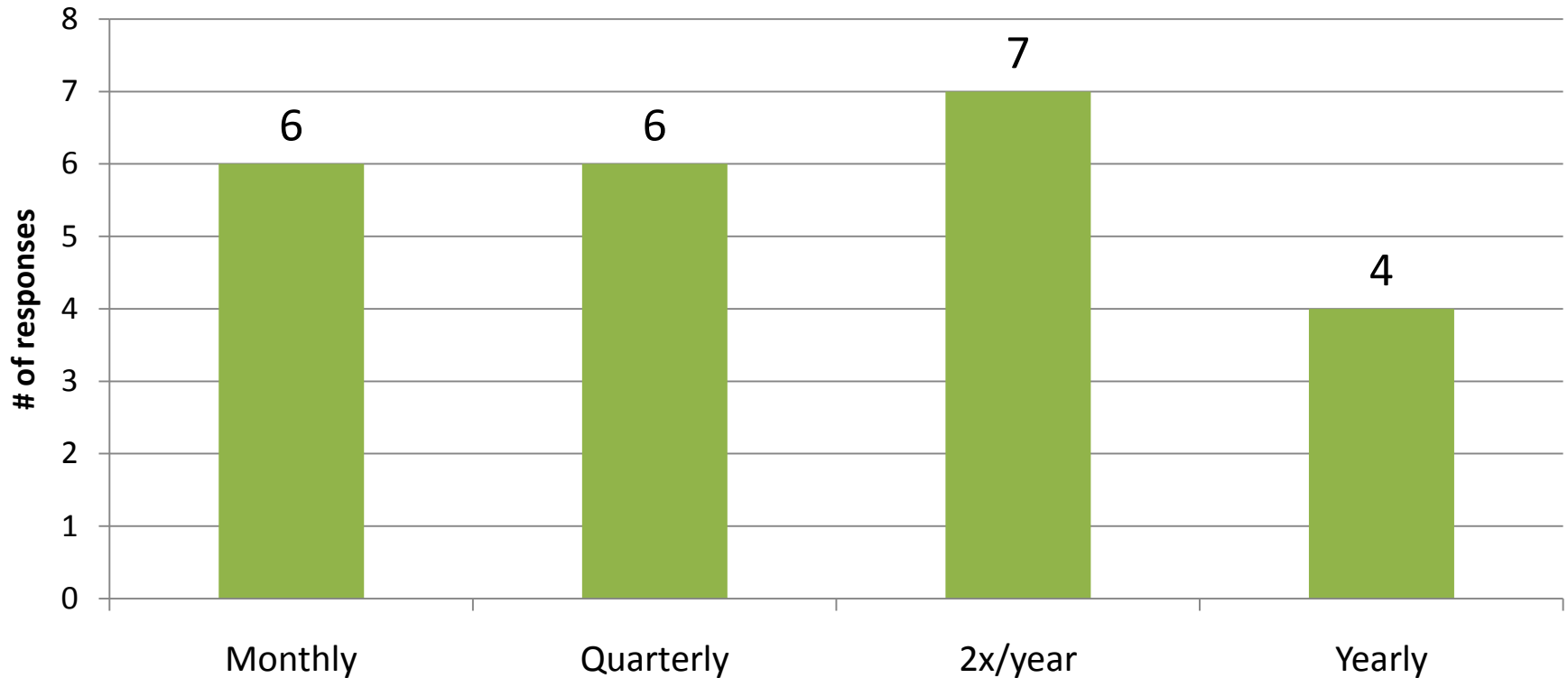


The above procedure is done after a patient on contact isolation is moved out of the room

Source: Hospital Environmental Cleaning Survey,
Fight MRSA Alliance, April 2009



#19. How often do you change privacy curtains?



- 19 hospitals also reported that they changed curtains on an “as needed” basis



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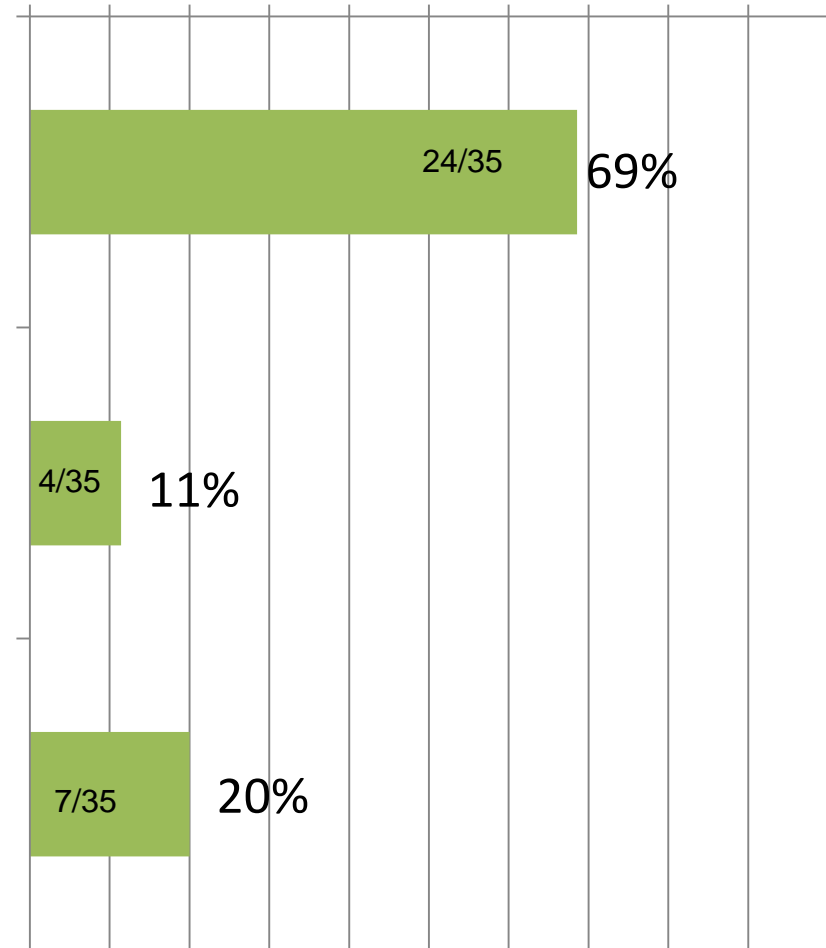
#20. Policy for disinfection of equipment

Hospital has a policy that states that all equipment in a room is disinfected. The policy states when it is disinfected and who is responsible.

Hospital has a policy, but it does not state when equipment is disinfected and who is responsible.

Hospital does not have a policy

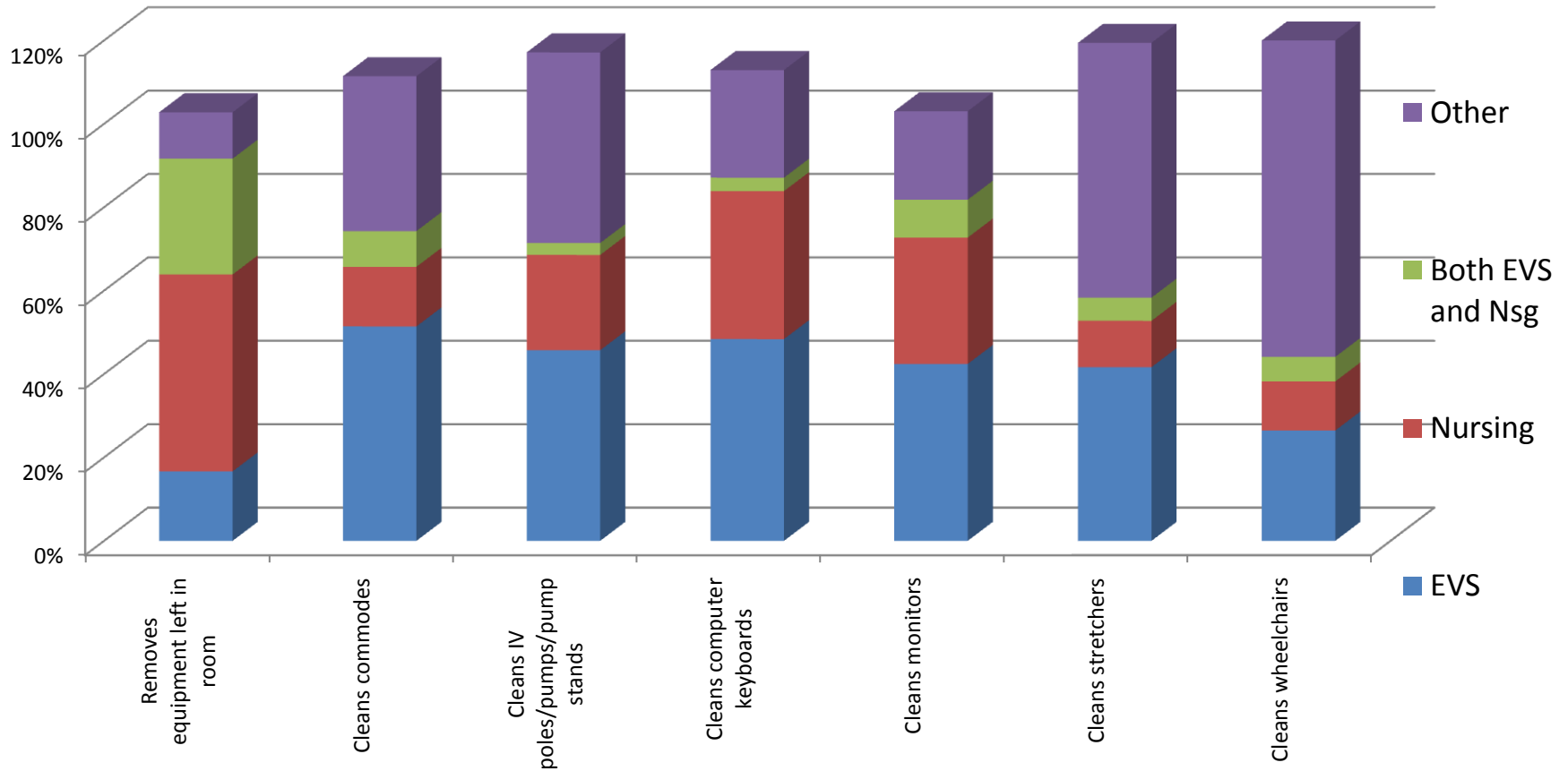
0% 10% 20% 30% 40% 50% 60% 70% 80% 90% 100%



Source: Hospital Environmental Cleaning Survey,
Fight MRSA Alliance, April 2009



Department responsible for removal and cleaning (Survey Questions # 21-27)



Note: multiple answers given for this question

Source: Hospital Environmental Cleaning Survey,
Fight MRSA Alliance, April 2009



Department responsible for removal and cleaning *continued...*

Some hospitals listed the department responsible for cleaning under “other”. “Other” departments included the following:

- 9 hospitals reported that Central Supply cleans commodes
- 9 hospitals reported that Central Supply cleans IV poles/pumps/pump stands
- 20 hospitals reported that Transport cleans stretchers
- 23 hospitals reported that Transport cleans wheelchairs

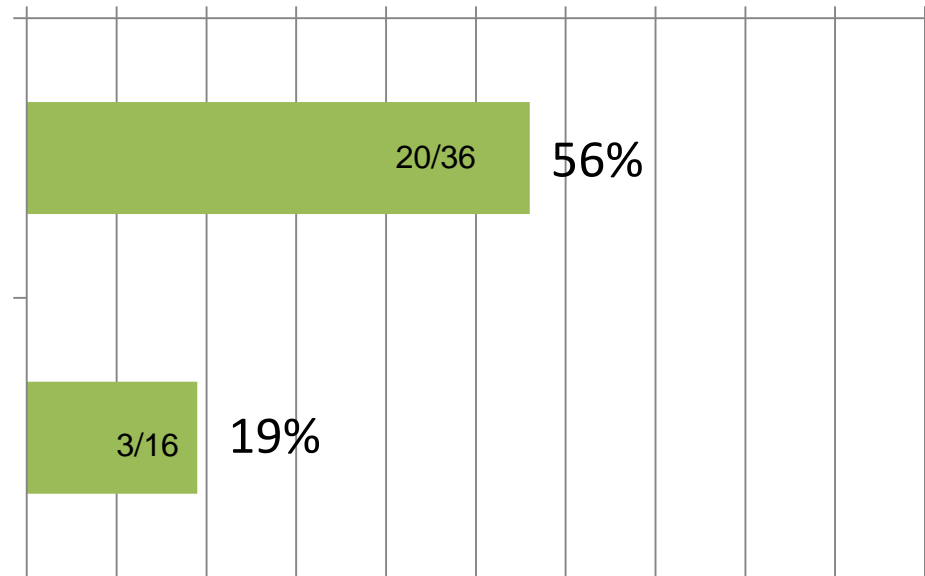


#28. Disposable cleaning cloths

% of hospitals that replied "yes"

0% 10% 20% 30% 40% 50% 60% 70% 80% 90% 100%

Hospital uses disposable cleaning cloths



If yes, for isolation rooms only

Frequency of changing **cleaning cloths**:

- After each room (9 hospitals)
- Every 3 rooms
- Every time they dry
- After each room or more often when soiled
- At least daily or when soiled
- Multiple cloths per room

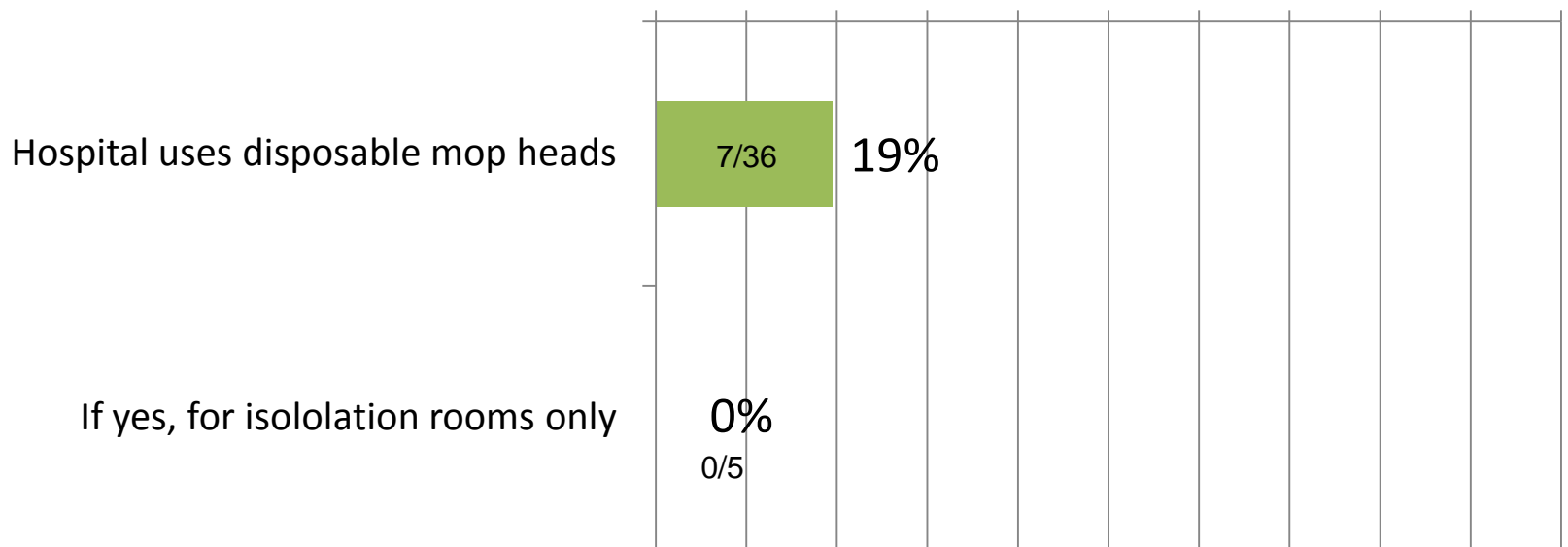
Source: *Hospital Environmental Cleaning Survey,*
Fight MRSA Alliance, April 2009



#29. Disposable mop heads

% of hospitals that replied "yes"

0% 10% 20% 30% 40% 50% 60% 70% 80% 90% 100%



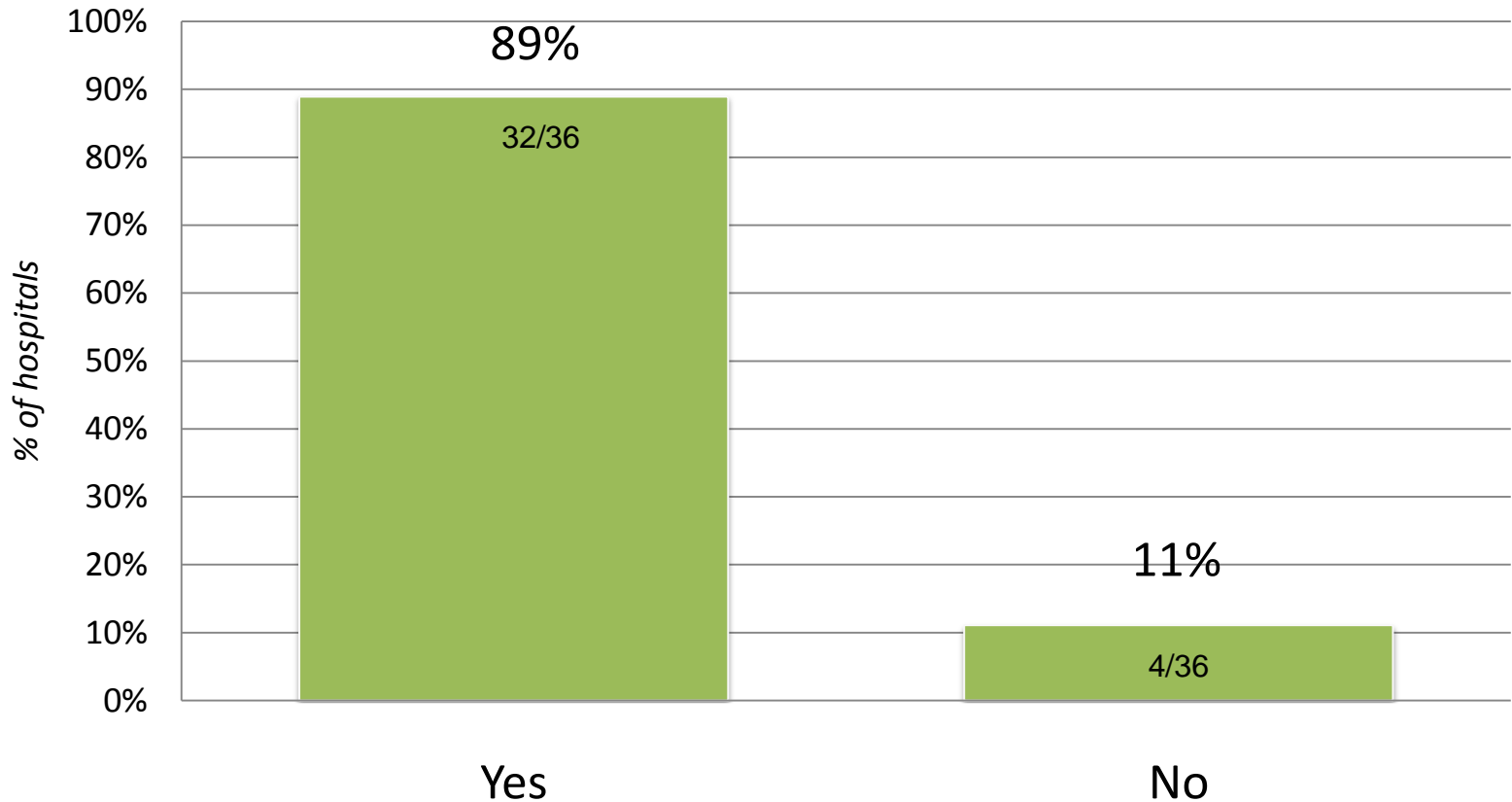
Frequency of changing **mop heads**:

- Every 3 rooms (13 hospitals)
- After every isolation room (8 hospitals)
- After each room (7 hospitals)
- When soiled (5 hospitals)
- Every 1-3 rooms
- Every 4 rooms
- 2x/day

Source: Hospital Environmental Cleaning Survey,
Fight MRSA Alliance, April 2009



#30. For Patients on contact precautions for C diff, do you use a bleach cleaner?



Source: Hospital Environmental Cleaning Survey,
Fight MRSA Alliance, April 2009



Describe what bleach cleaner is used on

All surfaces except floors (14 hospitals)

Items cleaned with bleach include:

- Bathrooms
- Bathroom fixtures
- Shower rooms
- Beds
- Bedside tables
- Chairs
- Equipment
- Doorhandles
- Walls
- Wall switches
- Mattress
- Floors (4 hospitals)

Items NOT cleaned with bleach:

- Face of monitors
- Electronic equipment
- Walls
- Anything with fabric



#31. What type of disinfectants are routinely used?

Quaternary disinfectant (Virex 256, Tor-HB, Sani- Master, Maxima 256, Quat 99):

- All flat surfaces
- High touch general cleaning
- Floors
- Non-isolation rooms
- ER, Pulmonary unit, ICU, Rehab
- Stretchers
- Wheelchairs
- Patient equipment
- Diagnostic areas – surfaces, equip, stretcher/bed

Bleach (Clorox, Dispatch):

- Bathrooms
- Shower rooms
- Blood
- Isolation rooms
- C diff rooms
- C diff floors
- Terminal rooms
- Norovirus rooms

Other products:

- Sani-wipes/PDI wipes (phones, bedrails, bedside tables, keyboards, etc)
- 3M neutral cleaner (all floors)
- Virex TB
- Phenolic TB
- 3M #25 (total hospital disinfectant)
- Butcher's Quest (daily)
- Ecolab A-45611 (daily, every room)

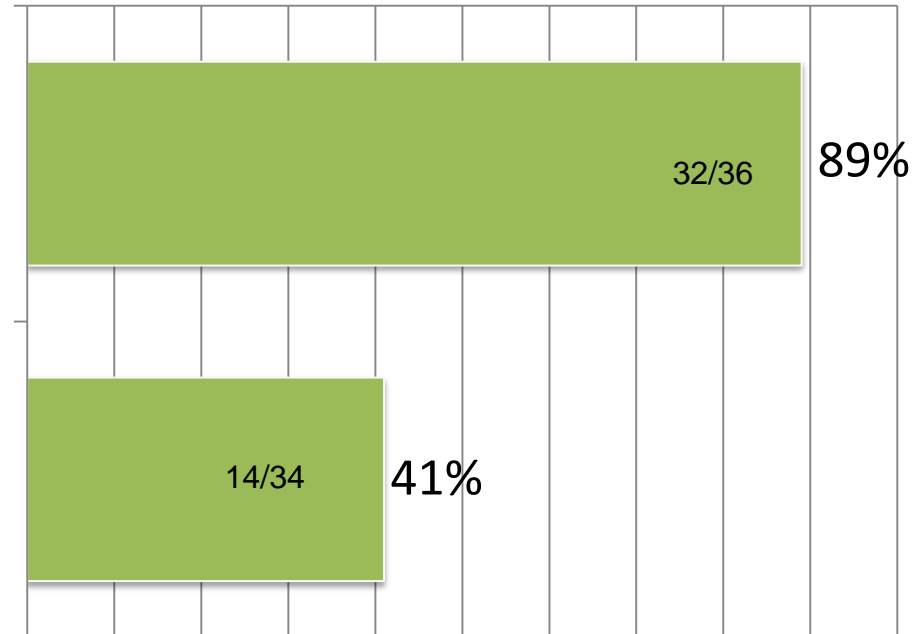


Checklist and Education

% of hospitals that replied "yes"

0% 10% 20% 30% 40% 50% 60% 70% 80% 90% 100%

#32. EVS has a checklist to review thoroughness of the EVS cleaning process



#33. Hospital provides education to EVS in multiple languages

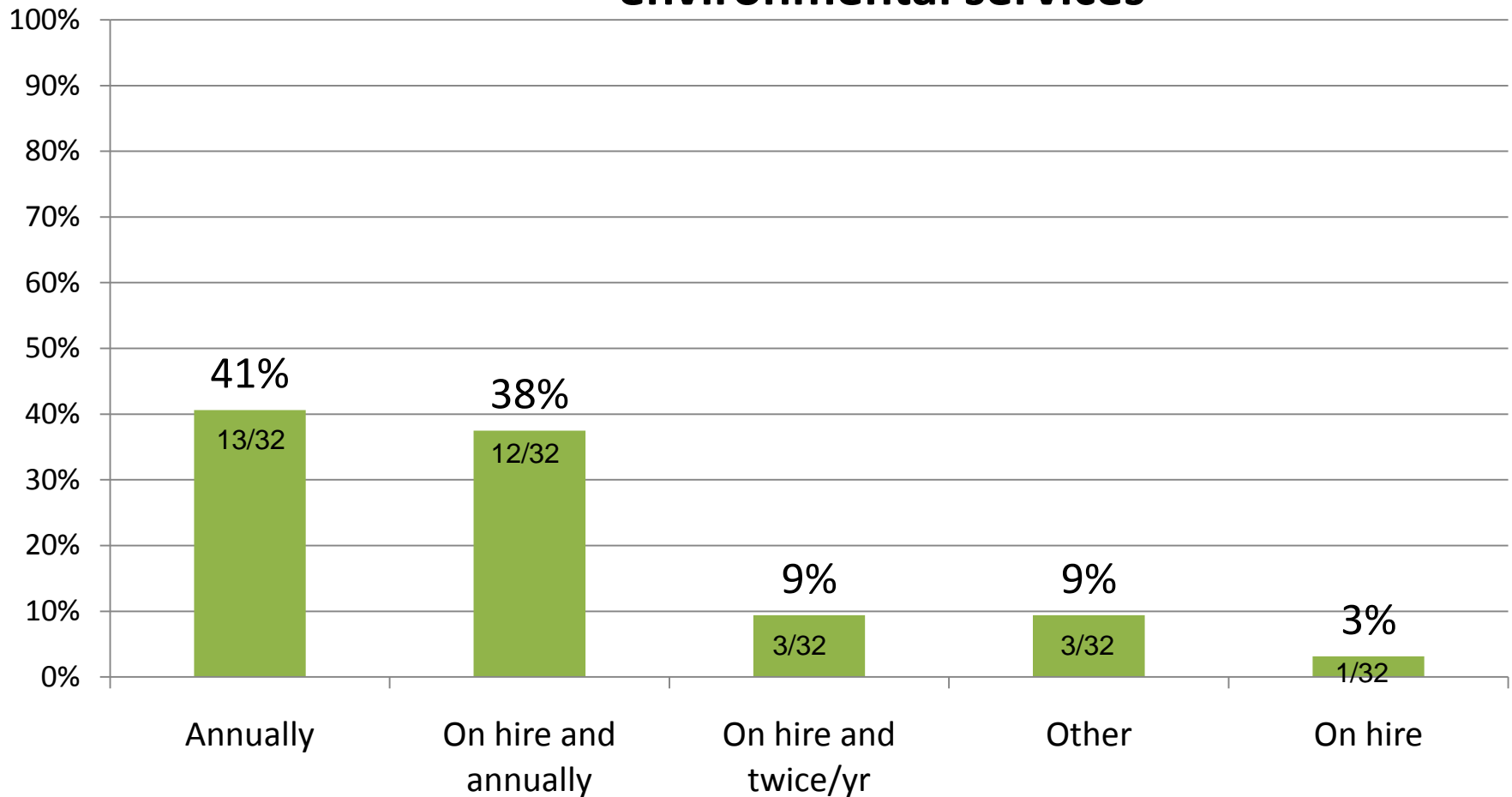
Source: Hospital Environmental Cleaning Survey,
Fight MRSA Alliance, April 2009



#34. When are staff competencies performed?

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97% of hospitals assess staff competency for environmental services

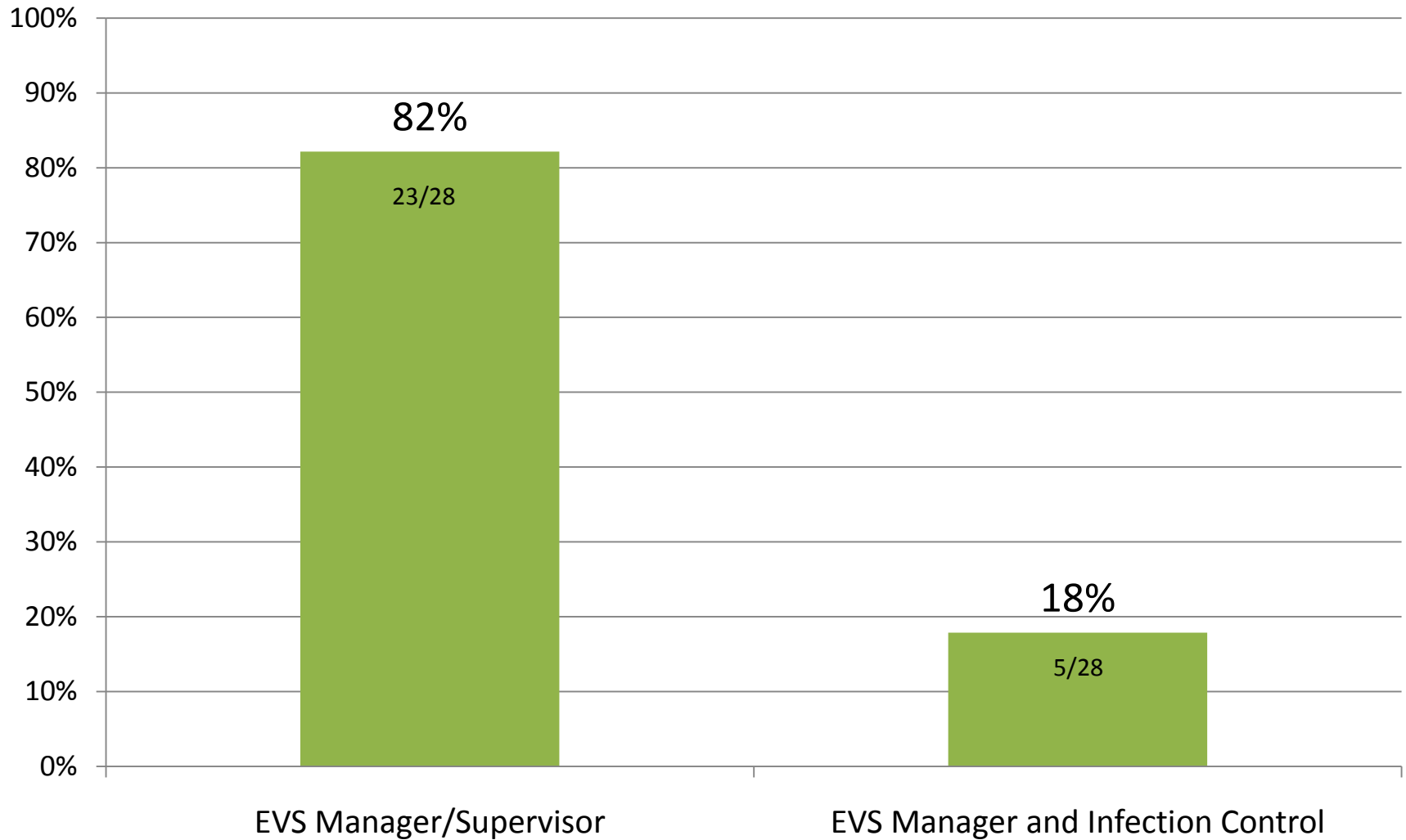


Source: Hospital Environmental Cleaning Survey,
Fight MRSA Alliance, April 2009



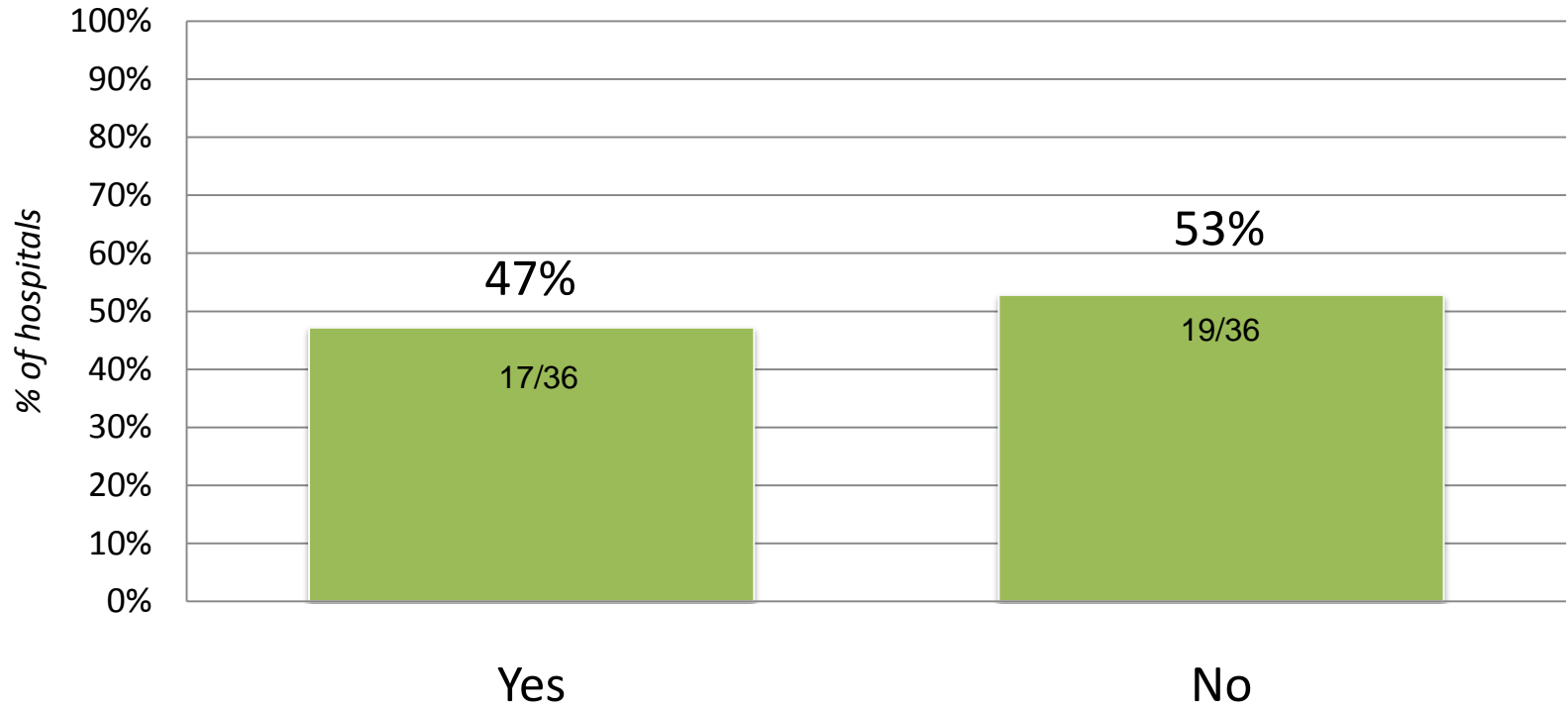
Who administers the competencies?

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#35. Do you outsource any cleaning projects to a private company?



Outsourced projects:

- All cleaning (5 hospitals)
- Window washing (5 hospitals)
- Privacy curtains (4 hospitals)
- Pest control
- Management only
- Cleaning of satellite offices
- Floor stripping and finishing
- Detailing of gyms and cafeteria



Outsourcing *continued...*

% of hospitals that replied "yes" (total respondents = 15)

0% 10% 20% 30% 40% 50% 60% 70% 80% 90% 100%

Outsourced cleaning projects are budgeted

14/15 93%

Safety is written into the contract

10/14 71%

Yellow/safety cones are used

13/15 87%

Hospital staff are alerted that "project cleaning" will be conducted in a designated areas

15/15 100%

Hospital is aware of the chemicals used by the contracted service

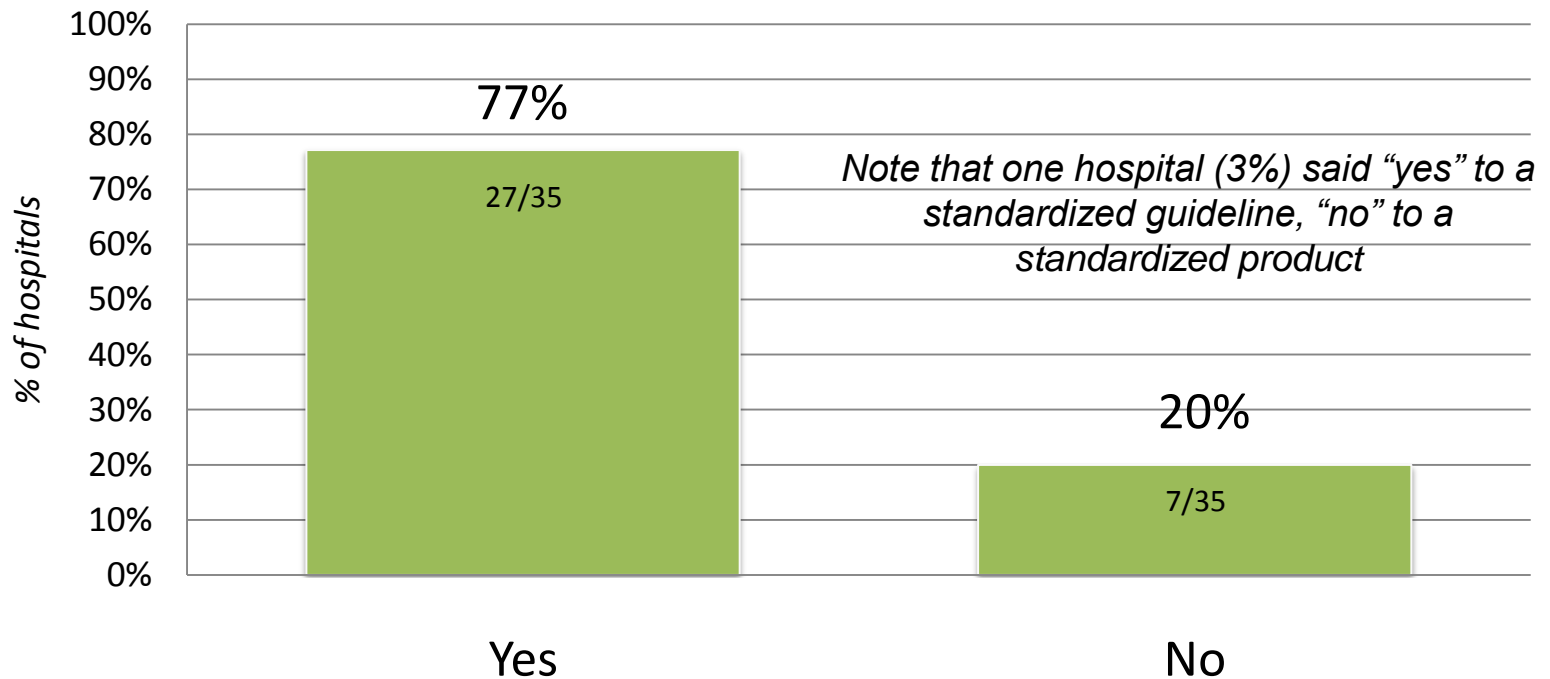
15/15 100%

The chemicals are compatible with the hospital's cleaning agents and flooring

15/15 100%



#36. Would you prefer to have one standardized room cleaning guideline and product for all patient rooms (isolation and non-isolation)?



Source: Hospital Environmental Cleaning Survey,
Fight MRSA Alliance, April 2009



#37. What is the biggest barrier that you and your staff face daily regarding cleaning of the environment?

- Rapid bed turn-over/not enough time (7 hospitals)
- Staffing (6 hospitals)
- Clutter (6 hospitals)
- Isolation requirements (3 hospitals)
- Communication (3 hospitals)
- High census/patient volume (2 hospitals)
- Room access (2 hospitals)
- Frequent patient movement (2 hospitals)
- Call-outs (2 hospitals)
- Condition room is left in (2 hospitals)
- Sensitivity/smell of cleaning products (2 hospitals)

Additional comments:

- High traffic areas
- Not enough private rooms
- Nursing staff
- Hoarding of pumps (so not sent to Central for proper cleaning)
- Finances
- The cleaning of wheelchairs and stretchers
- Outdated fixtures; lack of routine maintenance
- Replacement of cleaning disinfectants with green chemicals
- Failure of clinical staff to adhere to policies and procedures
- Consistency and oversight of staff
- Damage to floors by walkers, wheelchairs, bed movement