Best Practice Cleaning and Disinfection Guidelines

In addressing the risks of pathogens that can be transmitted via the environment (i.e., via hands or surfaces/equipment), Diversey Care has compiled a set of standard best practice guidelines to help non-Healthcare facilities address risks associated with environmental transmission.

Standard Elements of an Infection Prevention Program for non-Healthcare Facilities: Shown below is a list of elements to be included in a facility’s Infection Prevention program. This list was developed with non-Healthcare facilities in mind.

A. Preparation/Risk Assessment. The best Infection Prevention programs are developed before a time of crisis. Having a team that meets regularly and is empowered to make decisions for the facility is critical in identifying potential gaps in how the facility would respond to specific challenges, such as an outbreak of Influenza, Ebola, or MERS. After a facility risk assessment, the team should make recommendations, which may include modifications to facilities, such as adding handwashing stations or additional storage for Infection Prevention supplies which may be needed. These modifications take time, thus the need to plan before an outbreak. The recommendations may also include having an extra supply of disinfectants, disinfectant wipes, hand hygiene products, facial tissues, toilet paper, and extra trash cans to be used for outbreaks.

B. Vaccinations. Where possible, providing and/or requiring employee vaccinations helps protect staff and prevent transmission of pathogens to guests/customers. Healthcare facilities in many countries are moving in the direction of requiring their employees to have annual influenza vaccinations. We encourage this in other sectors as well where practical.

C. Communication Materials. If a facility wants their customers/guests to perform certain behaviors such as using hand sanitizers, having prepared signs and other communication materials are helpful in gaining compliance and having a professional appearance to the materials.

D. Stock Supplies. When an outbreak occurs or there is a new pathogen of concern, knowing in advance what supplies will be needed and what the lead time is will help the facility be prepared. This can include cleaners, disinfectants, hand hygiene products, disposable wipers, paper towels, trash bags, toilet paper, extra garbage pickups, bottled water, gloves, gowns, masks, etc. The planning process should identify what is expected to be needed and how much additional stock to order.

E. Hand Hygiene. The simplest most cost effective way to prevent the spread of pathogens is by frequent hand hygiene. Studies done in Healthcare demonstrate that access to hand hygiene is the best predictor of whether people will perform it frequently. Ensure that the hand hygiene products (if antimicrobial) have an acceptable level of efficacy against pathogens of concern.

F. Surface Cleaners/Disinfectants. Since clean hands that touch dirty surfaces negate the value of hand hygiene, having and using regularly a proper range of cleaners, disinfectants, and cleaning tools (cleaning cloths, spray bottles, etc.) is an important part of daily operation and preparation for an outbreak. In the event of an outbreak or a new pathogen of concern, it may be necessary to change cleaning products or increase the amount of cleaning being performed.

G. Cleaning Practices, Standards and Schedules. All facilities should have standard cleaning practices. These practices should detail:
   a. Materials needed.
   b. Methods to use in cleaning.
   c. Surfaces or equipment to be cleaned/disinfected.
   d. In the event of outbreaks or a new pathogen of concern, the planning should identify how much the frequency will be increased or otherwise modified.
   e. Checklists and other work management tools should be prepared in advance for the enhanced cleaning, so there’s no question of what to do – only when to start doing it.
   f. Cleaning should include standard recommendations such as:
      i. Maintain a constant flow in a room to avoid contamination of cleaned surfaces.
      ii. Perform hand hygiene before and after cleaning a room.
      iii. Use PPE both to protect the worker from the chemicals (if appropriate) and to protect the worker from pathogens in the environment.
      iv. Clean from high to low if practical.
      v. Clean from dry to wet when possible.
      vi. Clean from cleanest to dirtiest to minimize the risk of contamination to more hygienic surfaces.
Personal Protective Equipment. Workers may need gloves, gowns, masks, and eye protection depending on the pathogens of concern. As with other elements of the facility plan, this should be considered in advance so that there are no questions around the use of the PPE. Workers will need training in how to use the PPE including correctly donning and taking off the PPE and doing hand hygiene before and after use of the PPE.

Compliance Monitoring. Many Healthcare facilities have programs to monitor hand hygiene, surface cleaning, and PPE usage compliance. In this way, they hold themselves accountable not just for having the policies, but for following them as well. Even in non-Healthcare facilities it may be appropriate to consider the use of enhanced practices as a “bundle”. Non-Healthcare facilities should determine and incorporate bundled approaches during times of concern about pathogen transmission.

Using Disinfectants: Prior to any cleaning or disinfecting task, it is important to have all of the necessary tools, equipment, and chemicals required. This section includes some specific recommendations for use of disinfectants.

A. Use only registered products. In each country, the government will have an approval process to register disinfectants. Using governmental approved disinfectants ensures performance of the product.

B. One Step Cleaner Disinfectants. Some disinfectants were tested in the presence of organic soil to ensure that they will perform as expected even when organic soil is present. While gross soils always require a pre-cleaning step, most surfaces will have minimal soil when cleaning/disinfection is being done. Some disinfectants (2 step products) always require a cleaning step prior to disinfection, but the use of a one-step cleaner disinfectant ensures that workers can clean and disinfect in one pass.

C. Label Directions. All disinfectants must be used in compliance with their label directions. It is a violation of federal law in many countries to do otherwise. This includes following the approved application methods, observing contact time, and using the correct dilution for concentrates.

D. Use Dilution. For dilutable disinfectants, the label instructions for use will specify the acceptable use dilution to ensure the product is effective as a disinfectant. Changing the use dilution can make the product ineffective and increase health and safety risks associated with using the disinfectant.

E. Contact Time. The product label will specify the wet contact time needed to ensure the disinfectant is effective. If the surface dries prior to the wet contact time, there’s no guarantee that the product has killed the pathogens claimed on the label.

F. Health and Safety Considerations. The product label and SDS provide the relevant health and safety information on how to use disinfectants. Both the label and SDS should be read prior to using a product. The use of PPE may be required. If required, it would be listed on the SDS and possibly the product label as well. Always use appropriate PPE if required to avoid the risk of personal injury.

Please contact your Diversey Care representative with any questions.

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