Ask an IP

Learning and Communication Series

Training for Environmental Services (EVS) Staff

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Acute Communicable Disease Control (ACDC) Program

Los Angeles County Department of Public Health

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Website: http://publichealth.lacounty.gov/acd/AskAnIPProgram/index.htm

Disclosures

- There is no commercial support for today's call
- Neither the speakers nor planners of today's call have disclosed any financial interests related to the contents of this meeting
- This call is meant for healthcare facilities and is off the record, reporters should log off now

Objectives

- Ensure effective communication between EVS staff and IP
- Identifying key hand hygiene moments for EVS staff
- Understanding disinfectant labels and proper dilution
- How to effectively set up an EVS cart
- Demonstrate the importance of cleaning and disinfection of residents' rooms

Housekeeping

- **Microphones** are disabled
  - For questions, please use the chat
- **Cameras:** please keep them turned off during the presentation
- **Recording:** the presentation is being recorded and will be posted on the Ask an IP Website within a few weeks following the session
- We will not review COVID-19 guidelines (including CDPH AFLs) during these sessions

Fostering Collaboration:

Partnership between EVS Leadership and the IP

Audience Question

What are some effective strategies or collaborative approaches to enhancing the partnership between EVS and IP?

(Please enter your answers in the chat box)

Answers

Some strategies for effective collaboration include:

1. Regular communication
2. Training and education
3. Feedback and evaluation
4. Joint problem-solving
5. Data sharing

Hand Hygiene for EVS Staff

Audience Question

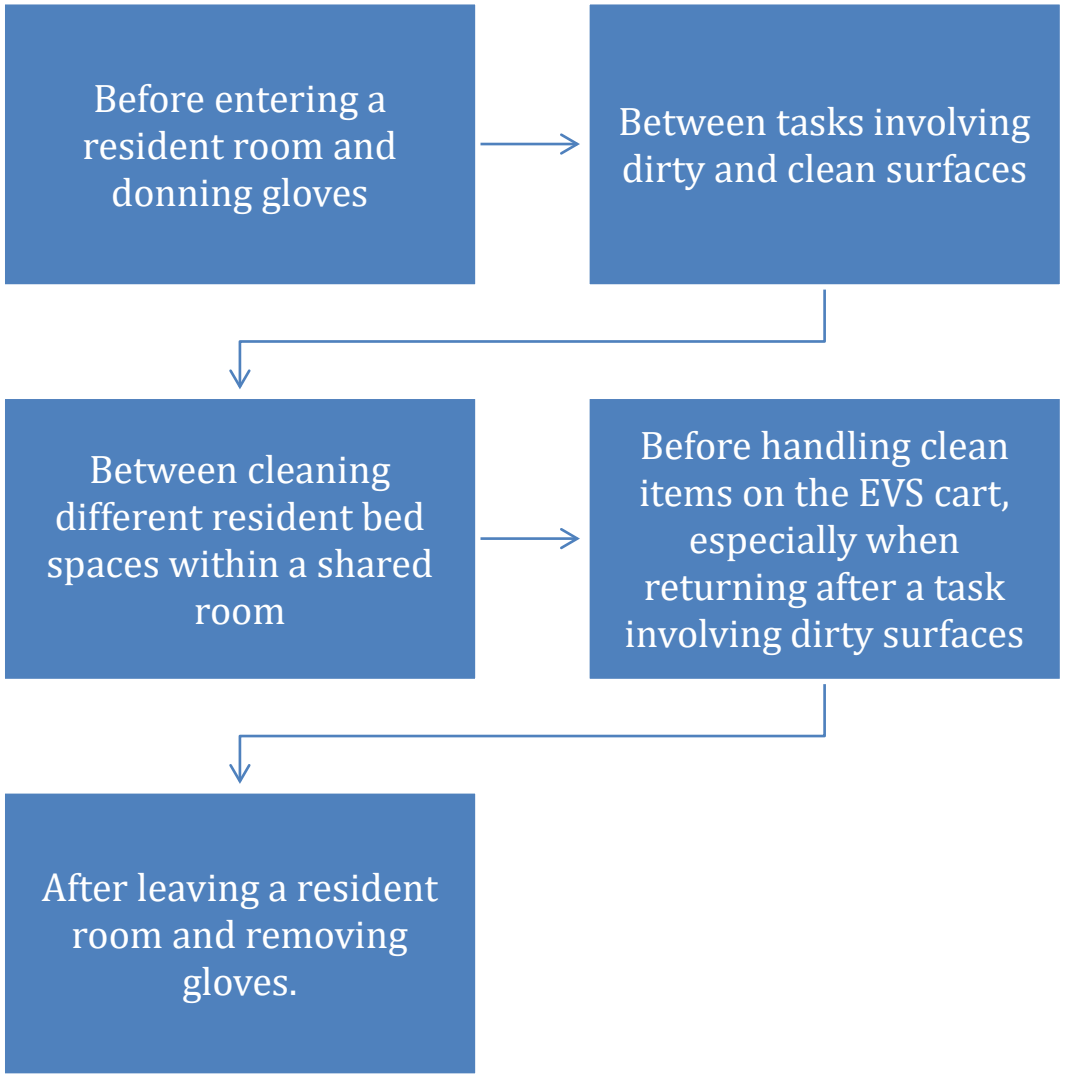
What is an easy action that EVS staff can take to prevent the spread of germs?

(Please enter your answers in the chat box)

Answer

Hand Hygiene

Hand Hygiene Moments for EVS Staff



WHO's *Your 5 Moments for Hand Hygiene*

Maximizing Impact:

- Identifying moments for hand hygiene for EVS Staff
- Highlight the importance of every EVS interaction
  - i.e., cleaning and disinfecting rooms, cleaning high touch surfaces, etc.

WHO's Your 5 Moments for Hand Hygiene

Scenario:
Identifying Gaps in Hand Hygiene

EVS staff does the following:

1. Performed hand hygiene and donned new pair of gloves
2. Cleaned resident bed space 1
3. Removed gloves and donned a new pair of gloves
4. Cleaned resident bed space 2
5. Removed gloves
6. Left the room

Scenario Question

Where is the gap in hand hygiene in this scenario?

(Please enter your answers in the chat box)

Scenario: Identifying Gaps in Hand Hygiene

EVS staff should do the following:

1. Perform hand hygiene and don new pair of gloves
2. Clean resident bed space 1
3. Remove gloves, **perform hand hygiene** and don a new pair of gloves
4. Clean resident bed space 2
5. Remove gloves
6. **Perform hand hygiene** and leave the room

Answer:

There are 2 gaps in this scenario.

1) In step 3: After removing the gloves, **perform hand hygiene** and then don the new pair of gloves prior to cleaning resident bed space 2.
2) In step 6: **perform hand hygiene** before leaving the room.

Hand Hygiene for EVS Staff

Healthcare-Associated Infections Program Adherence Monitoring
Hand Hygiene for EVS Staff

Assessment completed by:
Date:
Unit:

Regular monitoring with feedback of results to staff can improve hand hygiene adherence. Use this tool to identify gaps and opportunities for improvement. Monitoring may be performed in any type of patient care location.

Instructions: Use a single tool to observe 10 hand hygiene (HH) opportunities for an individual staff member. Check the type of hand hygiene opportunity you are observing. Indicate if HH was performed. Record the total number of successful HH opportunities and calculate adherence.

HH Opportunity	What type of HH opportunity was observed? (select/ ☑ 1 per line)	Was HH performed for opportunity observed? ✔ or Ø
Example	☐ before entering room ☐ between tasks ☐ between patients' bedspace ☐ before accessing clean items on cart ☑ upon leaving room **Remember**: Hand hygiene should be performed before and after glove use	✔
HH1.	☐ before entering room ☐ between tasks ☐ between patients' bedspace ☐ before accessing clean items on cart ☐ upon leaving room	
HH2.	☐ before entering room ☐ between tasks ☐ between patients' bedspace ☐ before accessing clean items on cart ☐ upon leaving room	
HH3.	☐ before entering room ☐ between tasks ☐ between patients' bedspace ☐ before accessing clean items on cart ☐ upon leaving room	
HH4.	☐ before entering room ☐ between tasks ☐ between patients' bedspace ☐ before accessing clean items on cart ☐ upon leaving room	
HH5.	☐ before entering room ☐ between tasks ☐ between patients' bedspace ☐ before accessing clean items on cart ☐ upon leaving room	
HH6.	☐ before entering room ☐ between tasks ☐ between patients' bedspace ☐ before accessing clean items on cart ☐ upon leaving room	
HH7.	☐ before entering room ☐ between tasks ☐ between patients' bedspace ☐ before accessing clean items on cart ☐ upon leaving room	
HH8.	☐ before entering room ☐ between tasks ☐ between patients' bedspace ☐ before accessing clean items on cart ☐ upon leaving room	
HH9.	☐ before entering room ☐ between tasks ☐ between patients' bedspace ☐ before accessing clean items on cart ☐ upon leaving room	
HH10.	☐ before entering room ☐ between tasks ☐ between patients' bedspace ☐ before accessing clean items on cart ☐ upon leaving room	

For HH1-HH10:

Total # HH Successful ("# ✔ "): _____	Total # HH Opportunities Observed: _____	Adherence: _____% (Total # HH Successful ÷ Total # HH Opportunities Observed x 100)

https://www.cdph.ca.gov/Programs/CHCQ/HAI/CDPH%20Document%20Library/AdherenceMonitoringHandHygieneForEVS.pdf

Understanding the Use of Disinfectants

Cleaning vs. Disinfection

- **Cleaning:** The physical removal of dirt, debris, and organic material from surfaces using soap or detergent and water. Cleaning removes visible soil and reduces the number of germs present on surfaces.

- **Disinfection**: The process of using chemical agents or disinfectants to kill or inactivate disease-causing microorganisms (pathogens) on surfaces. Disinfection reduces the risk of infection by destroying or reducing the number of pathogens to a level considered safe by public health standards.

Selecting the Right Disinfectant for the Task

Key Considerations:

- **Environmental Protection Agency (EPA) Registration:** Verify that the disinfectant is EPA registered and labeled as a hospital-grade disinfectant.
- **Kill claims:** Determine which types of germs the disinfectant is effective against.
- **Contact/Wet time:** Understand the required wet time for the disinfectant to work effectively.
- **Safety:** Familiarize yourself with the toxicity of the disinfectant and the necessary personal protective equipment (PPE) requirements.
- **Consultation:** If unsure, always seek guidance from your EVS leadership.

Interpreting Disinfectant Labels: Key Suggestions

- Active Ingredients
- Concentration
- Directions for Use
- Safety Precautions
- Storage Requirements
- EPA Registration Number
- Contact Time
- Compatibility
- Expiration Date

https://www.cdc.gov/hai/pdfs/HowToReadALabel-Infographic-508.pdf

Preparing the EVS Cart

Things to Avoid

- “Eyeballing” mixtures
- Mixing different chemicals/ disinfectants/ cleaners
- Using too many different disinfectants that do the same job
- Overusing bleach
- Using disinfectant wipes without gloves
- Bringing cleaning items from home

Preparing Environmental Solutions: Types

- Manual preparation: Solutions prepared by hand
- Pre-mixed: Solutions that come ready-to-use without additional mixing
- Automatic mixing station: Solutions mixed using automated equipment

https://www.cdph.ca.gov/Programs/CHCQ/HAI/Pages/ProjectFirstlineEVSToolkit.aspx

Preparing Environmental Solutions: Manual Preparation

Key Considerations:

- Always prepare solutions in a designated area following manufacturer's instructions.
- Use precise measuring tools, such as a measuring cup, to ensure accurate solution concentrations.
- Discard solutions according to facility policy and label instructions to maintain safety and effectiveness.

Preparing the EVS Cart: Must DOs

- Ensure familiarity with solutions and tools used for efficient and effective cart preparation.
- Identify the necessary supplies needed and their placement on the cart to maximize efficiency.
- Promote safety by using solutions appropriately and adhering to safety guidelines.
- Clean your hands and don new gloves prior to touching items on your cart.

Preparing the EVS Cart: Supplies

Top of the Cart:

- Alcohol-based hand rub (ABHR) and soap refills
- Enclosed bin containing clean microfiber cloths presoaked in facility approved disinfectant solution
- Resident room supplies
- Necessary PPE

https://www.cdph.ca.gov/Programs/CHCQ/HAI/Pages/ProjectFirstlineEVSToolkit.aspx

Preparing the EVS Cart: Supplies *continued*

Outside/Front of the Cart:

- Microfiber cloths for mopping, sweeping and dusting
- Buckets
- Wet floor caution signs
- Soiled linen bag
- Trash bag

https://www.cdph.ca.gov/Programs/CHCQ/HAI/Pages/ProjectFirstlineEVSToolkit.aspx

Preparing the EVS Cart: Supplies *continued*

Inside of the Cart:

- Microfiber cleaning cloths
- Cleaning solutions and disinfectants
- Solution containers
- Bags or bins for soiled linen

https://www.cdph.ca.gov/Programs/CHCQ/HAI/Pages/ProjectFirstlineEVSToolkit.aspx

Audience Question

Please identify what is wrong with this image.

(Please enter your answers in the chat box)

https://www.cdph.ca.gov/Programs/CHCQ/HAI/Pages/ProjectFirstlineEVSToolkit.aspx

Answer

There are several alarming things with this image.

https://www.cdph.ca.gov/Programs/CHCQ/HAI/Pages/ProjectFirstlineEVSToolkit.aspx

Things to Avoid

- Unlabeled bottles
- Personal items on the cart
- Non-approved products or those that are not part of the facility policy or protocol
- Empty bottles on the cart
- Food on the cart

Good Example of an EVS Cart

https://www.cdph.ca.gov/Programs/CHCQ/HAI/Pages/ProjectFirstlineEVSToolkit.aspx

EVS Carts: Suggestions

- Have adequate supplies
- Have easy access to ABHR
- Separate clean and soiled items
- Clean and disinfect reusable equipment regularly
- Know the contact times for all disinfectants used
- Equip carts with lockable compartments
- Store carts in designated areas

Resident Room Cleaning and Disinfection Protocols

Audience Question

Where do you think germs are more likely to hang out in a resident's room?

(Please enter your answers in the chat box)

Answer

There are various areas in a resident's room where germs are more likely to hang out.

Standard Cleaning Process

- Identify cleaning process workflow that includes the following:
  - Start with the cleaner areas and work towards the dirtier areas
  - Clean from top to bottom
  - Avoid cross-contamination

Preparing to Clean a Room: Considerations

- What kind of room is it? (one person or more, ventilated)
- Any special cleaning needs? (transmission-based precautions, ventilated)
- Are there things in the way?
- What supplies does the room need?

Audience Question

When cleaning a resident's room, which area would you clean first?

A) The area closest to them

B) The area furthest away from them

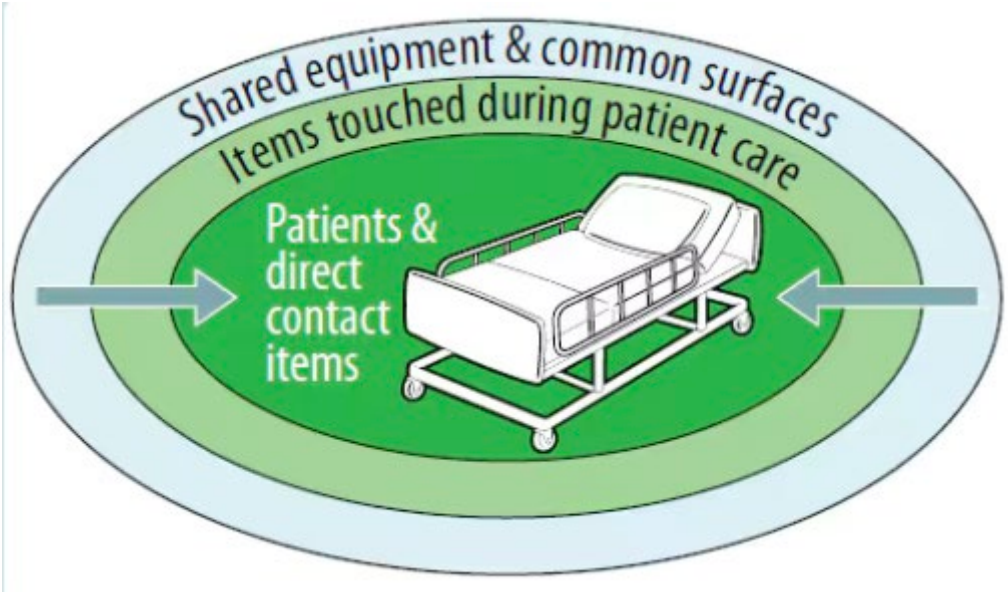
(Please enter either "A" or "B" in the chat box)

Answer:

B.

Clean the area furthest away from them first.

Standard Cleaning Process: Resident Room



https://www.cdph.ca.gov/Programs/CHCQ/HAI/CDPH%20Document%20Library/PFL_Module4CleaningDisinfection_CurriculumSlides.pdf

Room Cleaning: Hand Hygiene

- Gloves don't replace hand hygiene.
- Change gloves and perform hand hygiene when going from dirty to clean tasks, like after cleaning a toilet and before using a mop.
- Perform hand hygiene every time before new gloves are donned.
- Never reuse gloves once they have been doffed/taken off.

Daily Room Cleaning: Steps

1. Take out the trash and anything else that shouldn't be in the room.
2. Perform hand hygiene when going from dirty to clean.
3. Use new cloths for different cleaning tasks or when going from dirty to clean.
4. Clean floors with facility approved products.
5. Clean and disinfect supplies before putting them back on the cart.

Terminal Room Cleaning: Steps

Along with everything we do for a daily room cleaning:

1. Remove the resident's belongings before cleaning.
2. Take off any tape or papers on the walls.
3. Throw away items like bedpans; used or not.
4. Remove reusable equipment to be cleaned and stored for reuse.
5. Clean the walls, blinds and curtains.

Example:

CDC Environmental Checklist for Monitoring Terminal Cleaning

CDC Environmental Checklist for Monitoring Terminal Cleaning[1]

Date:	
Unit:	
Room Number:	
Initials of ES staff (optional):[2]	

Evaluate the following priority sites for each patient room:

High-touch Room Surfaces[3]	Cleaned	Not Cleaned	Not Present in Room
Bed rails / controls			
Tray table			
IV pole (grab area)			
Call box / button			
Telephone			
Bedside table handle			
Chair			
Room sink			
Room light switch			
Room inner door knob			
Bathroom inner door knob / plate			
Bathroom light switch			
Bathroom handrails by toilet			
Bathroom sink			
Toilet seat			
Toilet flush handle			
Toilet bedpan cleaner			

Evaluate the following additional sites if these equipment are present in the room:

High-touch Room Surfaces[3]	Cleaned	Not Cleaned	Not Present in Room
IV pump control			
Multi-module monitor controls			
Multi-module monitor touch screen			
Multi-module monitor cables			
Ventilator control panel			

Mark the monitoring method used:

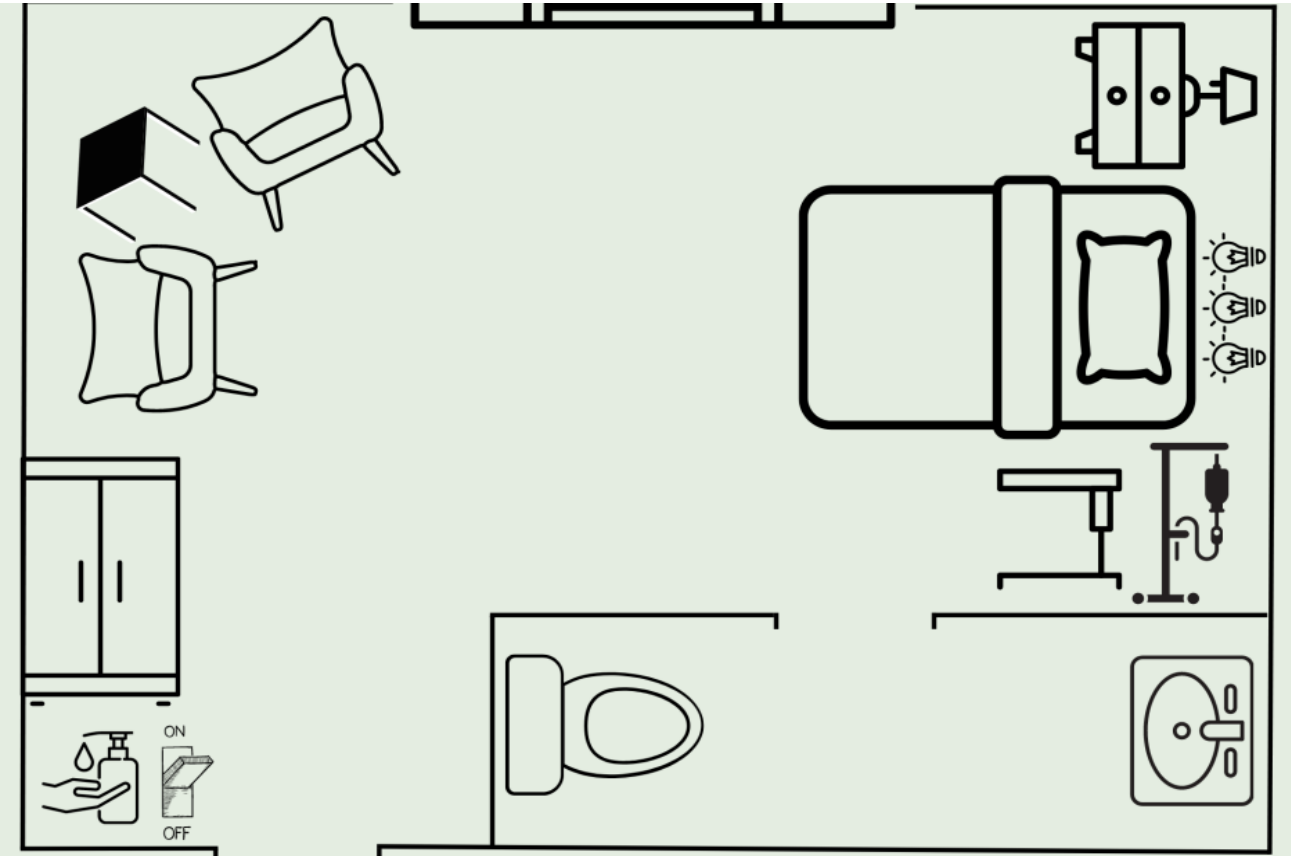
☐ Direct observation ☐ Fluorescent gel
☐ Swab cultures ☐ ATP system ☐ Agar slide cultures

[1]Selection of detergents and disinfectants should be according to institutional policies and procedures
[2]Hospitals may choose to include identifiers of individual environmental services staff for feedback purposes.
[3]Sites most frequently contaminated and touched by patients and/or healthcare workers

National Center for Emerging and Zoonotic Infectious Diseases
Division of Healthcare Quality Promotion

https://www.cdc.gov/hai/pdfs/toolkits/environmental-cleaning-checklist-10-6-2010.pdf

Cleaning a Single-Bed Room



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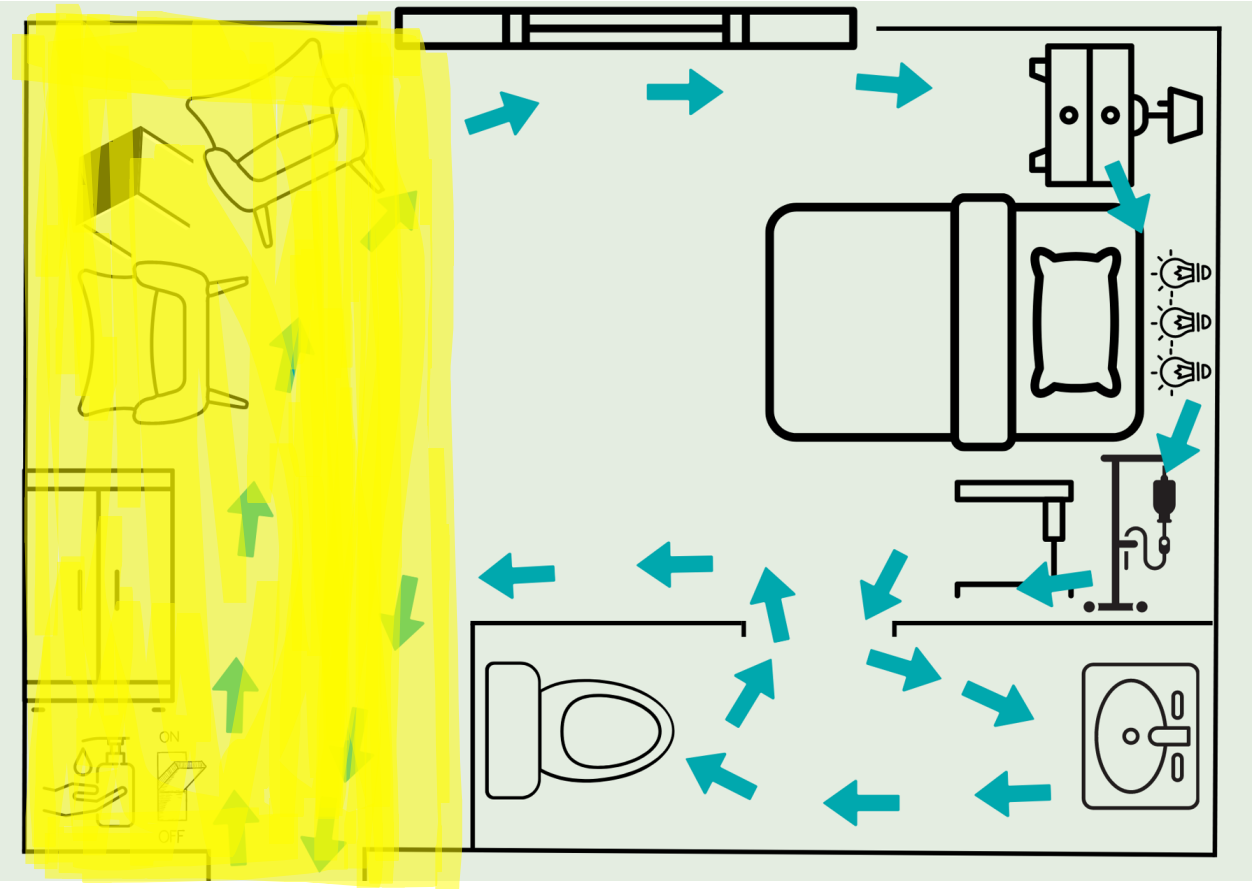
Cleaning a Single-Bed-Room



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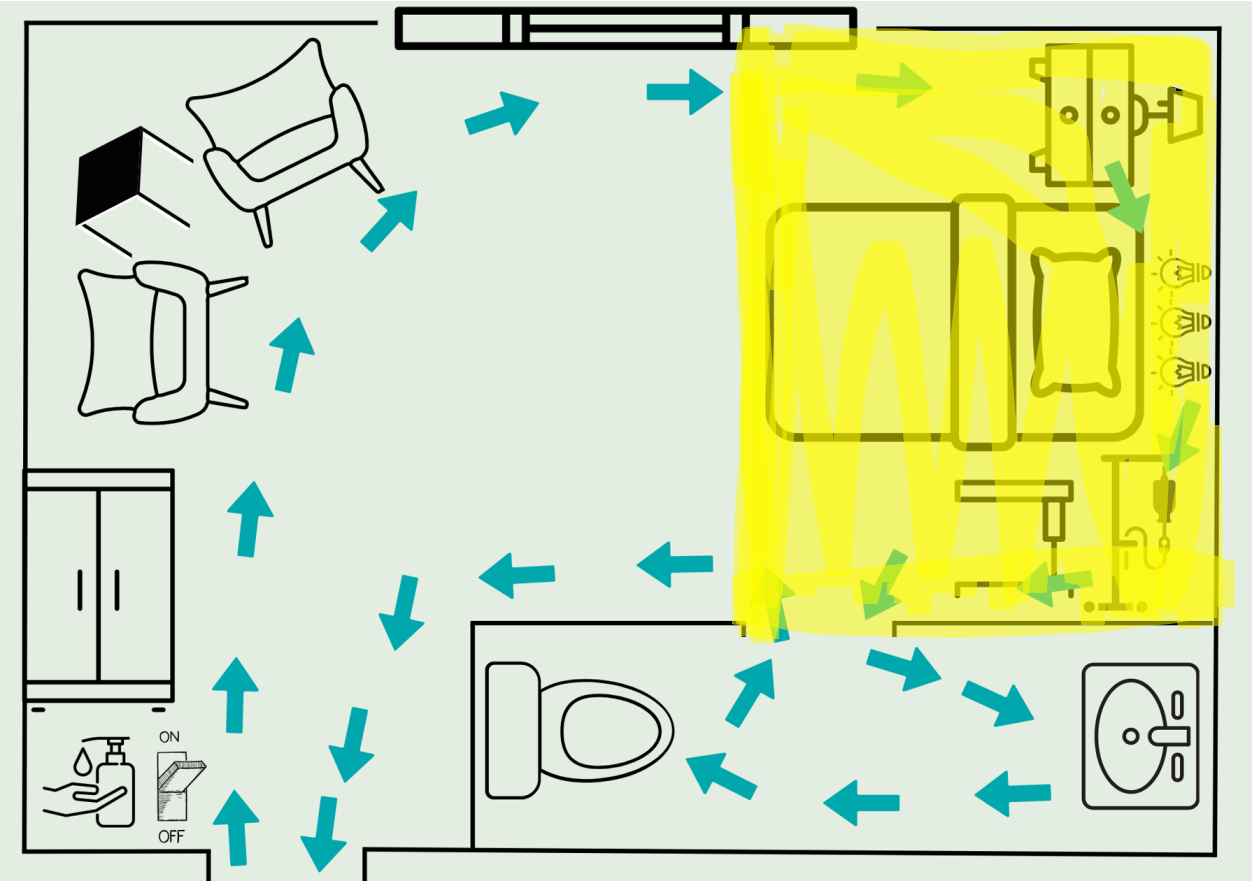

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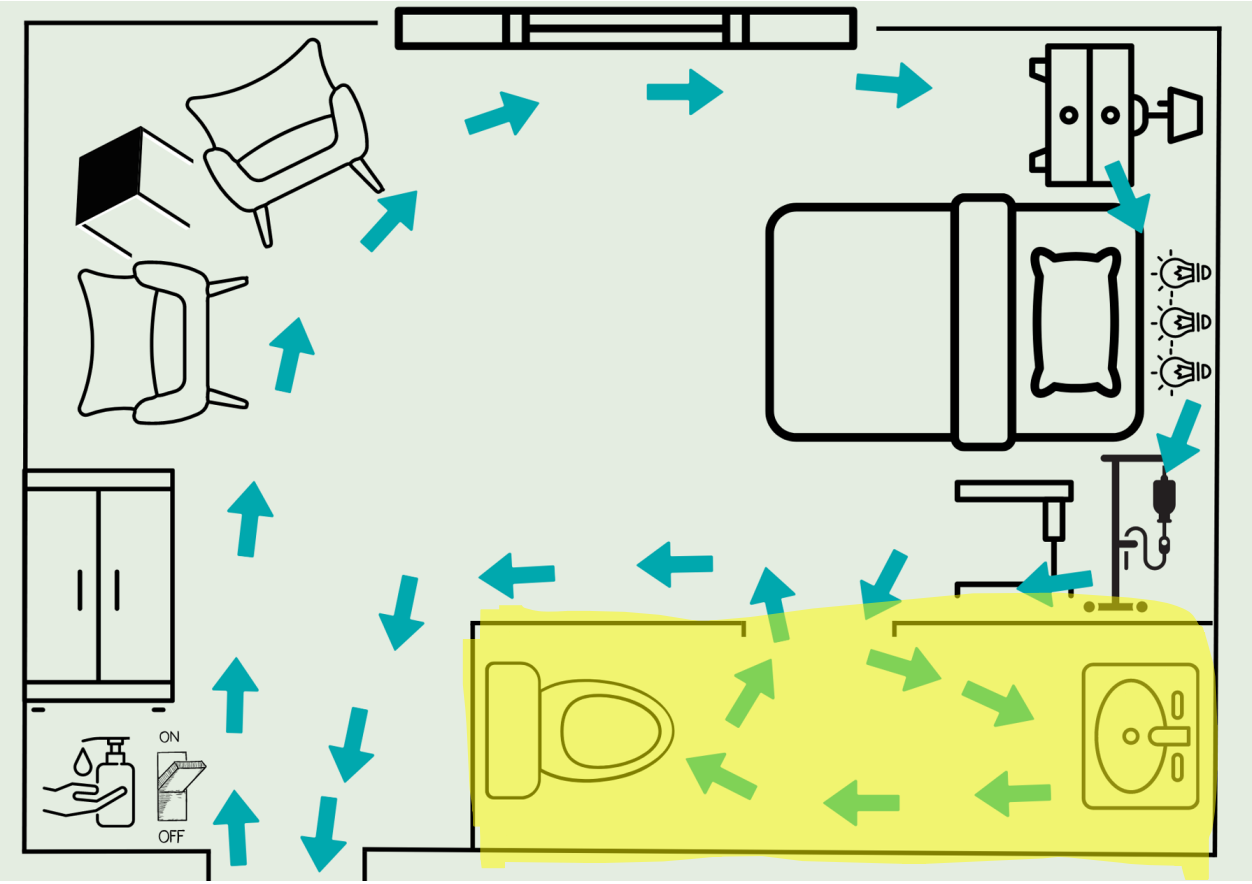

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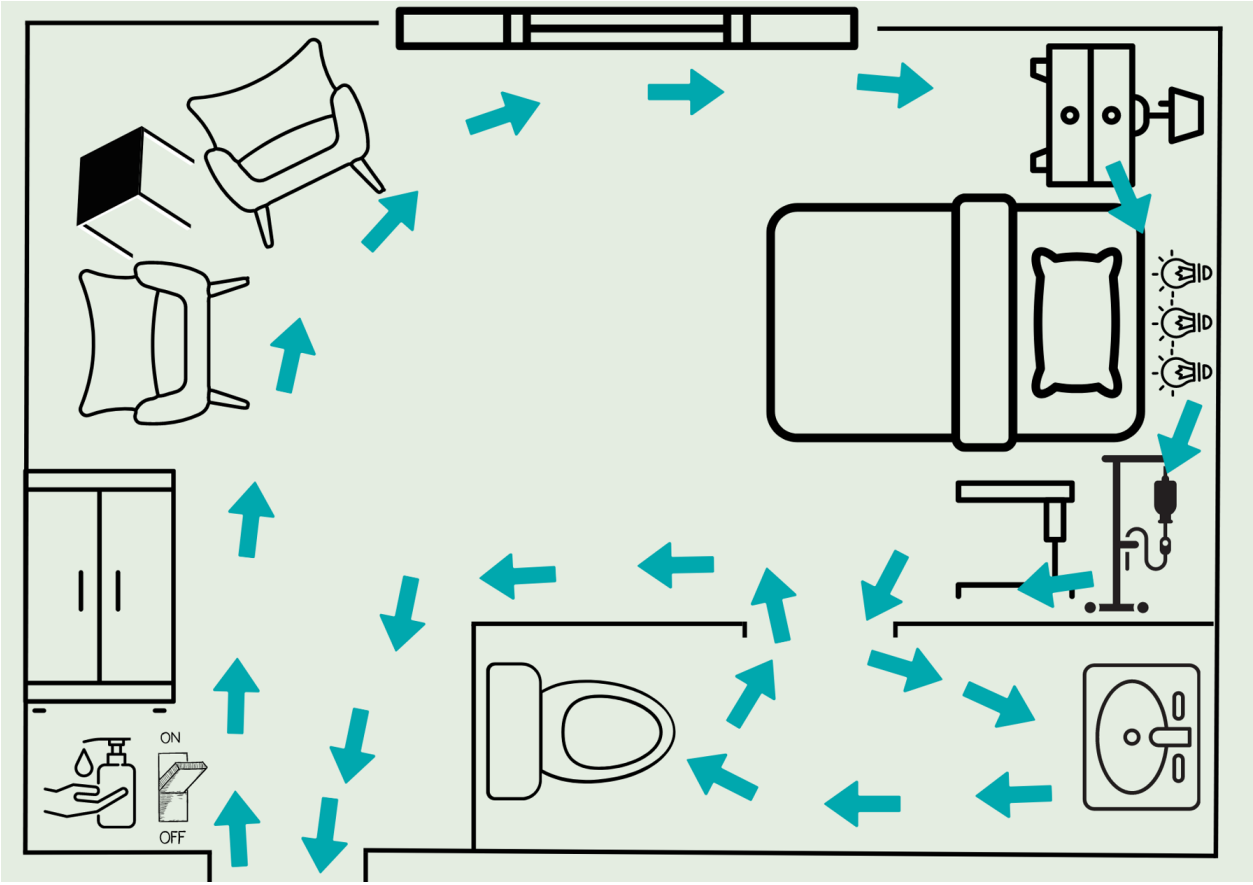

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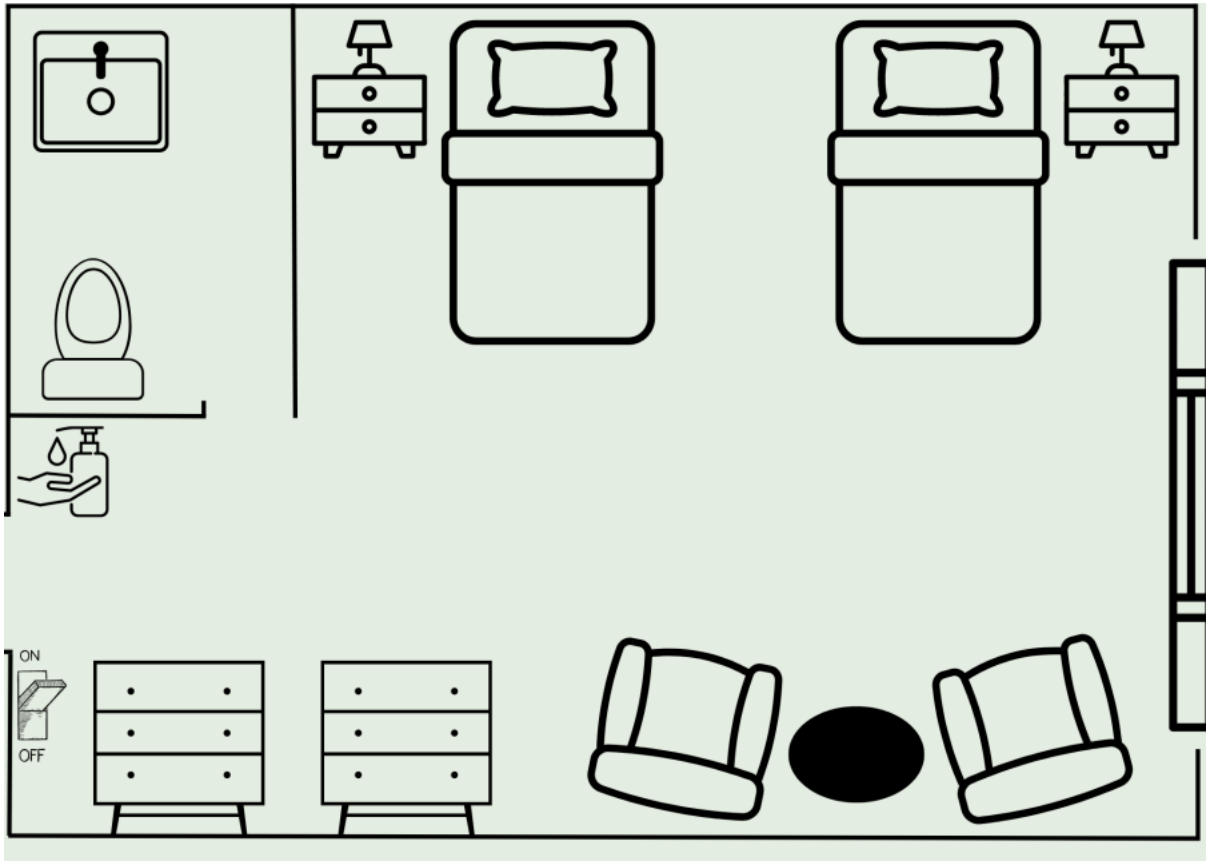
Cleaning a Two-Bed Room



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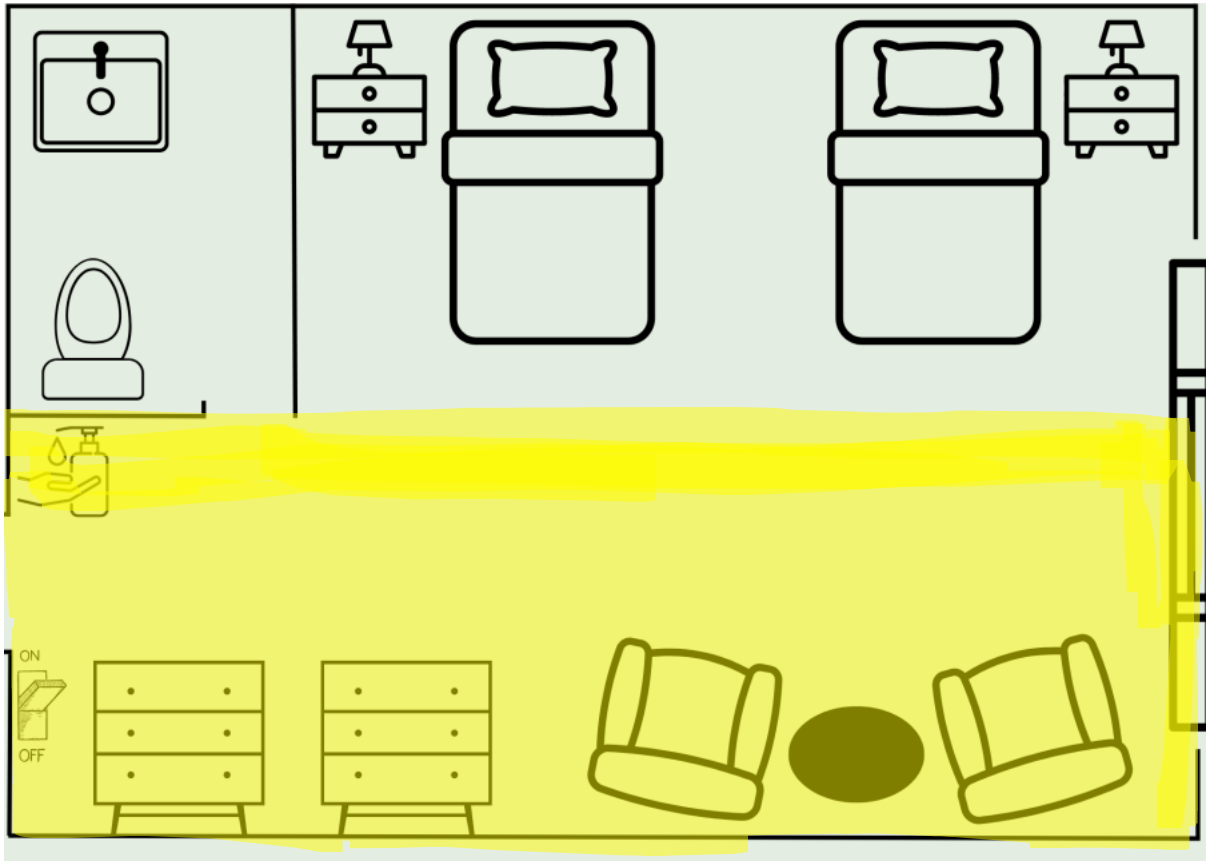

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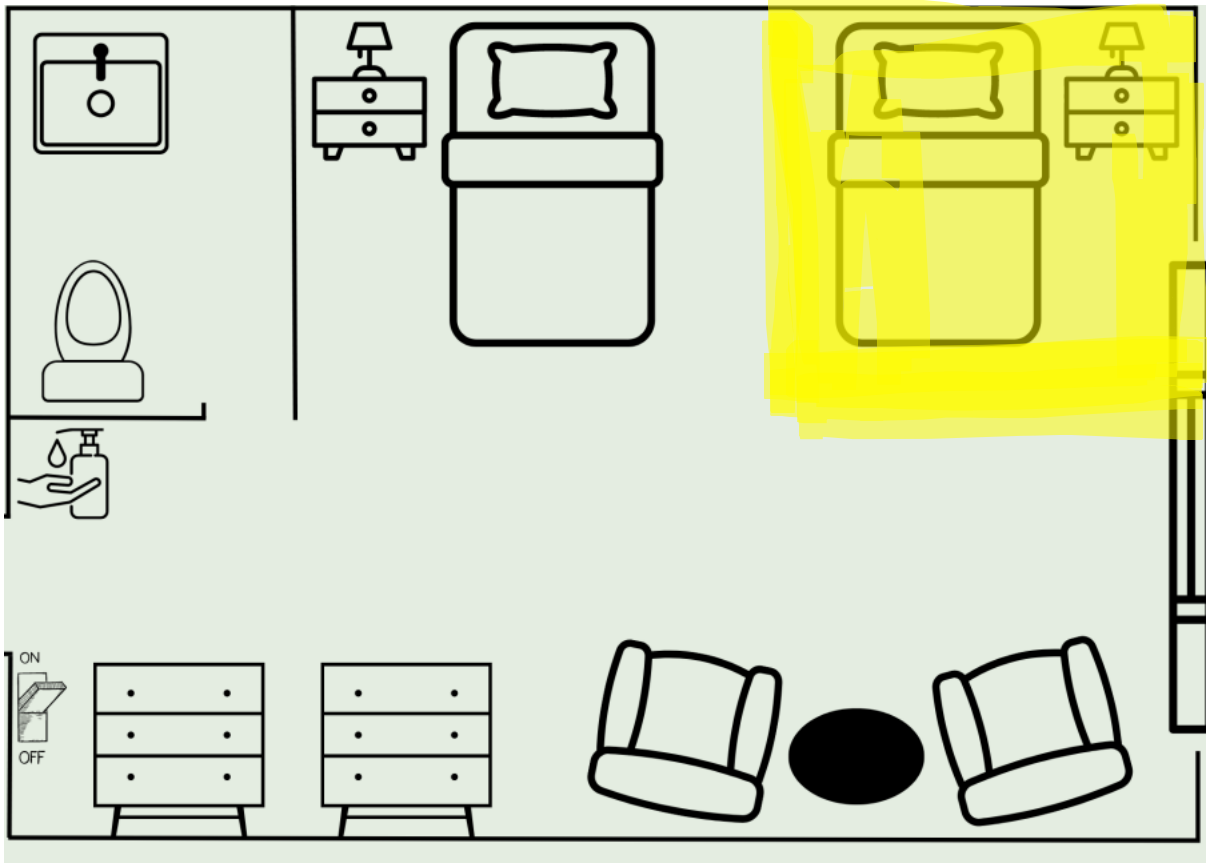

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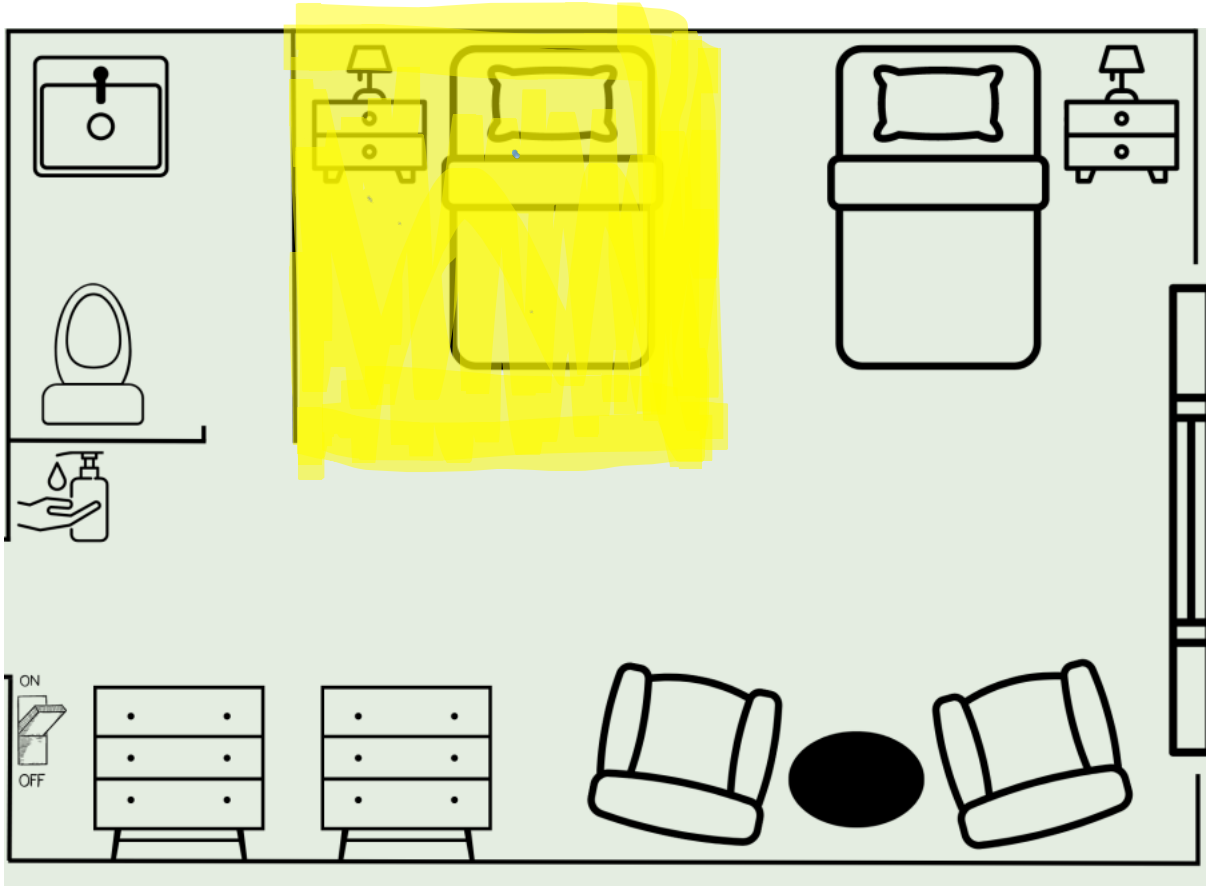

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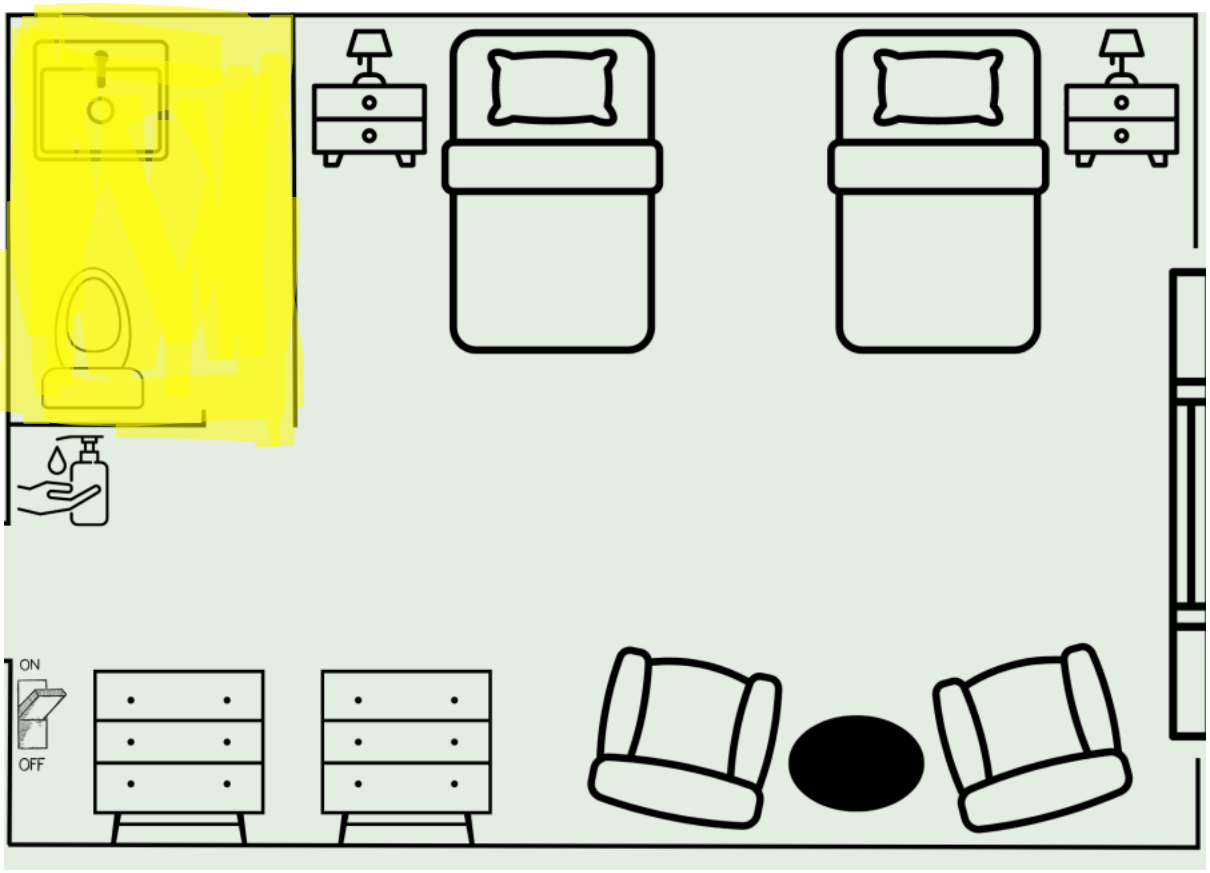

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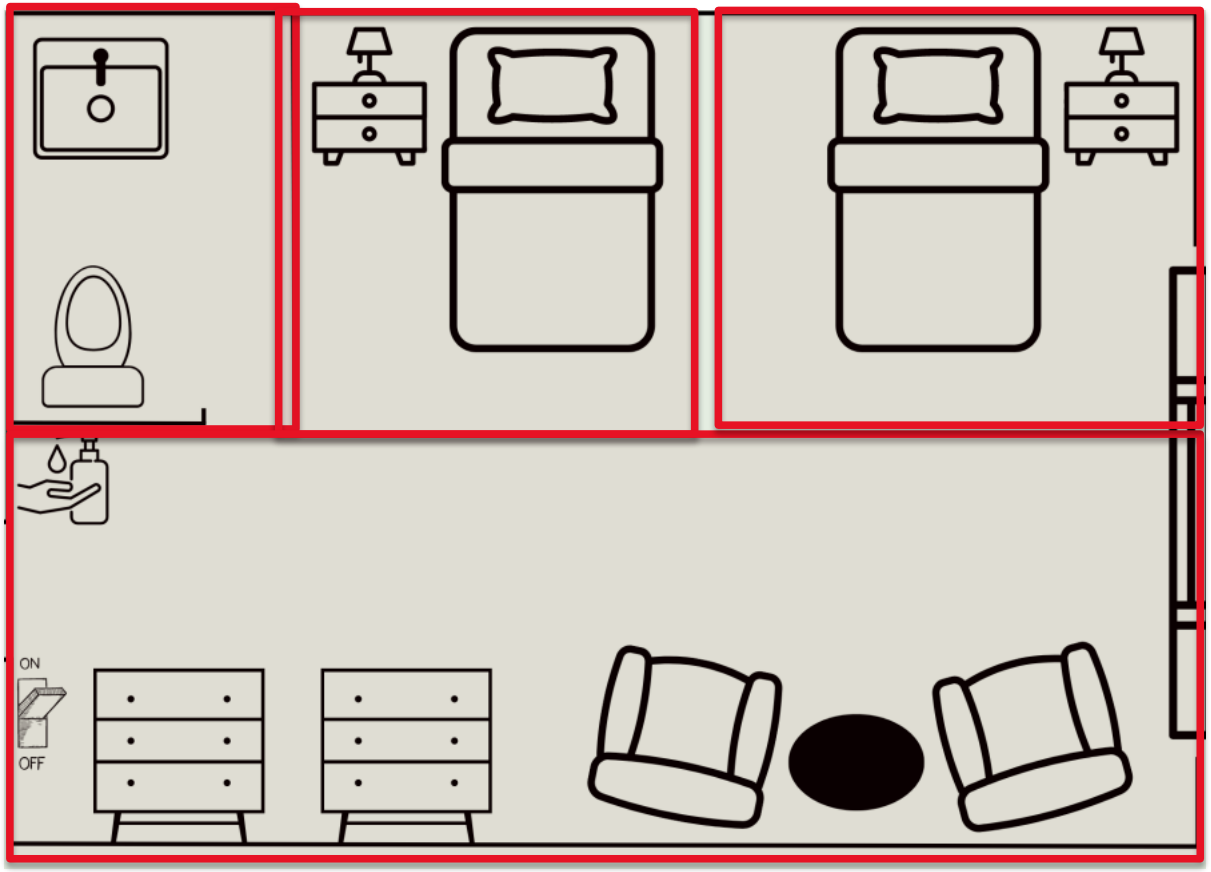
Cleaning a Two-bed Room (Zones)



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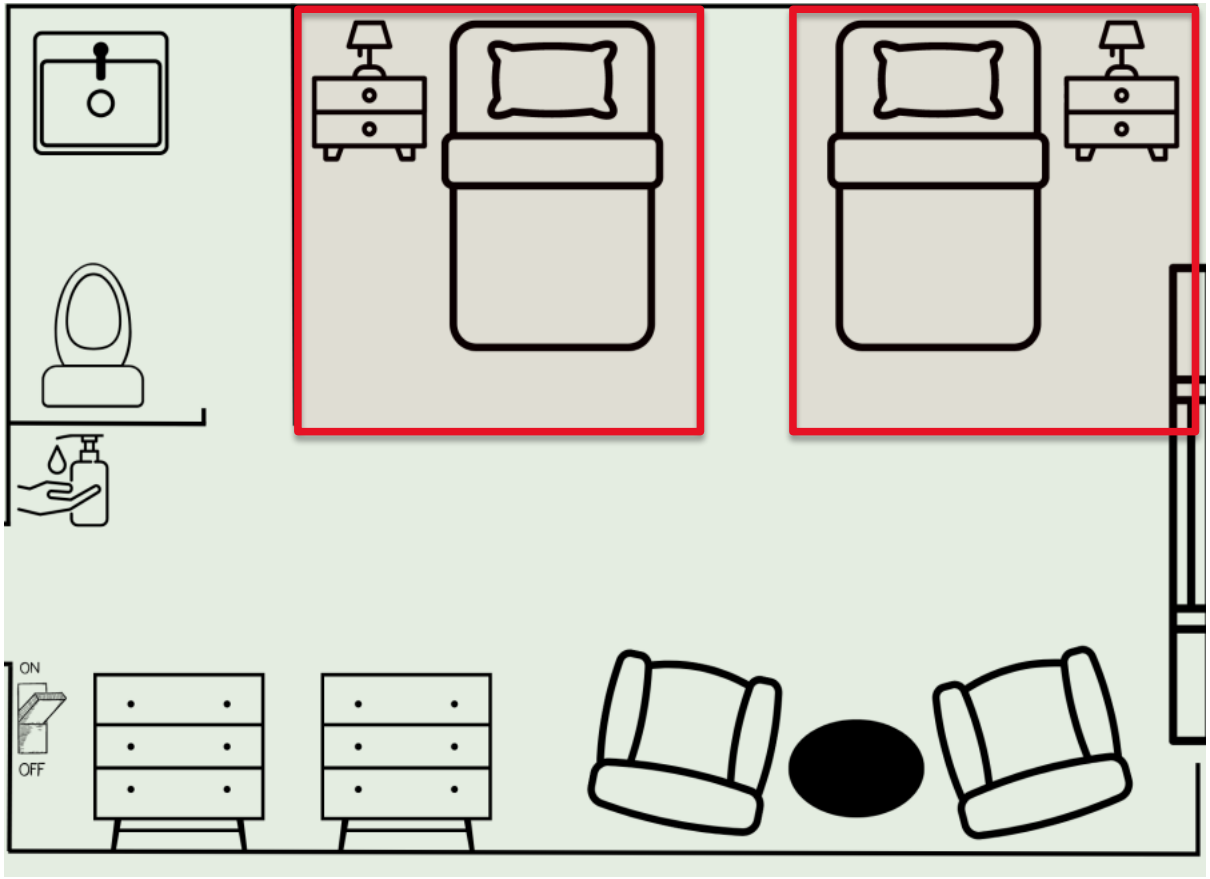
Cleaning a Two-bed Room (Zones)

Resident areas



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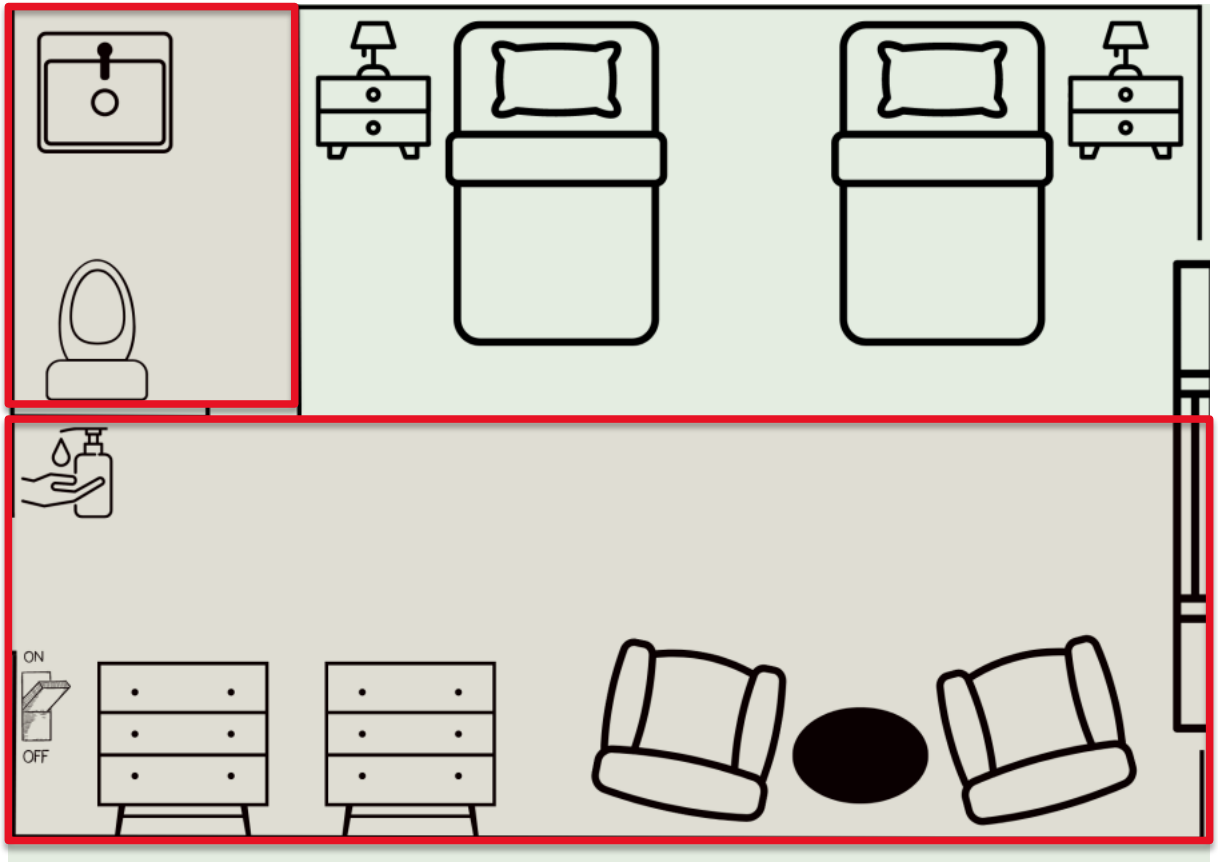
Cleaning a Two-bed Room (Zones)

Healthcare zone



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Resources

- **Project Firstline EVS Toolkit:** https://www.cdph.ca.gov/Programs/CHCQ/HAI/Pages/ProjectFirstlineEVSToolkit.aspx
- **CDC Environmental Checklist for Monitoring Terminal Cleaning**: https://www.cdc.gov/hai/pdfs/toolkits/environmental-cleaning-checklist-10-6-2010.pdf
- **Cleaning and Disinfection Strategies for Non-Critical Surfaces and Equipment, CDC**: https://www.cdc.gov/infectioncontrol/pdf/strive/ec102-508.pdf
- **Environmental Cleaning and Disinfection, CDC**: https://www.cdc.gov/hai/pdfs/resource-limited/environmental-cleaning-RLS-H.pdf

Ask an IP Series

- Today's session is the last one of the Spring series.
- Please monitor our website and keep an eye out for emails on future sessions.
- **Ask an IP Website**: http://publichealth.lacounty.gov/acd/AskAnIPProgram/index.htm

Save the Date!

Los Angeles County Department of Public Health

Skilled Nursing Facilities Honors Program

2024 Core Category Recognition Requirements

Visit: http://publichealth.lacounty.gov/acd/SNFHonorsProgram/index.htm | Contact: LACSNF@ph.lacounty.gov

LAC DPH SNF Honors Program

2024 Core Category Recognition Requirements

Public Health Engagement

Conduct 1 LAC DPH Infection Control Assessment and Response (ICAR) visit
(info/ request to schedule here)

OR

Submit Annual Point of Contact Information Update form

AND

Participate in 1 LAC DPH training/ webinar program* (Jan – Jun 2024) & meet attendance threshold

**Training/webinar programs subject to change*
Program examples:
Project Firstline, Ask an IP, Friday LAC DPH SNF webinars

2024 Core Category Recognition Requirements

Vaccination Coverage

- Resident COVID-19 vaccine coverage 80% or more
- Healthcare personnel (HCP) COVID-19 vaccine coverage 80% or more
- HCP Influenza vaccine coverage 90% or more

*For 2023-2024 Respiratory Virus Season, **2/3** criteria are required*

2024 Core Category Recognition Requirements

Infection Preventions and Control Program Structure

1 IP who is certified*

**Certified is defined as holding a nationally recognized credential in infection control (a-IPC, CIC, LTC-CIP, BCIDP)*

AND

1 IP who has been at the SNF for at least 1 year

Submit required form here

***Note**: The same individual can fulfill both IP requirements, or two individuals sharing the IP role can each meet a requirement*

PFL Self-Paced Courses

1. http://publichealth.lacounty.gov/acd/ncorona2019/healthfacilities/ccf/ProjectFirstline/

Questions

Recording will now be stopped.

Thank you!