Justice Health and
Forensic Mental Health Network

Justice Health NSW Policy

Environmental Cleaning Policy

Issue Date: 01 November 2021

Together for
Healthier Tomorrows

Environmental Cleaning Policy

Policy Number 5.037

Policy Function Safe Practice and Environment

Issue Date 01 November 2021

Next Review Date 01 November 2024

Risk Rating High

Summary This policy highlights relevant procedures which enable staff to comply with cleaning standards outlined in the NSW Ministry of Health Policy Directive PD2020_022 *Cleaning of the Healthcare Environment*.

Responsible Officer General Manager, Primary Care

Applies to
☐ Administration Centres
☐ Community Sites and programs
☒ Health Centres - Adult Correctional Centres or Police Cells
☒ Health Centres - Youth Justice Centres
☒ Long Bay Hospital
☒ Forensic Hospital

CM Reference POLJH/5037

Change summary
- Change from Facilities & Logistics to Business Services
- Change from Environmental Cleaning Audit Tools to QARS

Authorised by Chief Executive, Justice Health and Forensic Mental Health Network

Revision History

#	Issue Date	Number and Name	Change Summary
3	November 2021	5.037 *Environmental Cleaning Policy*	• Change from Facilities & Logistics to Business Services • Change from Environmental Cleaning Audit Tools to QARS
2	July 2018	5.037 *Environmental Cleaning Policy*	• Minor changes to audit requirements • Minor grammatical changes
1	November 2014	5.037 *Environmental Cleaning Policy*	• New policy

PRINT WARNING

Printed copies of this document, or parts thereof, must not be relied on as a current reference document.

Always refer to the electronic copy for the latest version.

Justice Health and Forensic Mental Health Network

PO BOX 150 Matraville NSW 2036

Tel (02) 9700 3000

http://www.justicehealth.nsw.gov.au

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1. Preface

Justice Health and Forensic Mental Health Network (the Network) is committed to providing procedures and training to enable staff to comply with standards as outlined in this Implementation Guide, relevant legislation(s), NSW Ministry of Health (MoH) policy directives (PD) and relevant standards of practice.

It should be noted that most of the adult correctional centres, operated by Corrective Services NSW (CSNSW) or private providers, do not have professional cleaners and rely on the operator to provide an inmate sweeper supervised by a custodial officer.

2. Policy Content

2.1 Mandatory Requirements

It is the responsibility of each health centre Nursing Unit Manager to identify all areas within each healthcare facility that require cleaning and to ensure that the cleaning and auditing of those areas is in accordance with NSW MoH PD2020_022 *Cleaning of the Healthcare Environment*.

2.2 Implementation – Roles & Responsibilities

2.2.1 Chief Executive

Must provide managers with the resources to support compliance with this policy and its associated procedures.

2.2.2 Executive Director Corporate Services

Must review all reported incidents of non-compliance with this policy.

2.2.3 Manager Business Services

Must ensure compliance with this policy and its associated procedures.

2.2.4 Nursing Unit Managers

All staff are responsible for ensuring a safe environment including the identification and reporting of environmental cleaning issues.

It is the Nursing Unit Manager's (NUM) or the Unit Manager's responsibility to;

- ensure the environmental cleaning audits are completed using approved methods: the Environmental Cleaning Audit – Score Sheet – (Appendix 1) or Quality Audit Reporting System (QARS) Cleanliness of the Clinical Environment audit
- ensure environmental cleaning audits are completed as per the schedule set out in section 2.3 of this policy
- ensure an Environmental Cleaning Audit Action Plan (Appendix 3 or QARS) is completed along with actions to improve cleanliness where appropriate and finalised by NUM or Cluster Manager. An audit score of <85% in a correctional centre and <88% in the Forensic and Long Bay Hospitals indicates an unsatisfactory level of compliance and improvement is required

- ensure identified risks i.e. environmental hygiene and/or maintenance deficiencies, are escalated through CSNSW, and/or the private provider or Youth Justice NSW (YJNSW) Governor/Centre Manager and/or Network line management
- ensure completed environmental cleaning audits are saved in excel format in Content Manager container allocated to the health facility

2.3 Network specific requirements

2.3.1 Frequency of cleaning

- All Network health care facilities, this includes satellite health centres have been categorised in the NSW MoH PD2020_022 *Cleaning of the Healthcare Environment* as medium risk with the exception of the Long Bay Hospital and The Forensic Hospital which is categorised as high risk.
- The frequency of cleaning required for high risk areas is as follows:
  - Minimum daily of patient bed, furnishings, fixtures, medical equipment and frequent touch points in patient zone, with capacity for additional cleaning if required
  - Capacity for rapid spot cleaning
  - Clean and disinfect toilets at least daily and check toilets at least twice daily and spot clean
- The frequency of cleaning required for medium risk areas is as follows:
  - Daily clean
  - Spot cleaning as required
  - Clean daily and check toilets at least twice daily and spot clean
- The timeframe for rectifying problems in high risk areas is 48 hours and in medium risk areas 72 hours as mandated by the policy.
- It should be noted that Network Health Facilities within Adult Correctional Centres are primarily cleaned by sweepers and within Youth Justice Centres by contract cleaners. Daily and spot cleaning may therefore not always be possible. If spot cleaning is necessary due to a Work Health and Safety Hazard in a health centres, it is the responsibility of the Network staff.
- Corrective Services NSW (CSNSW) and/or private security providers are responsible for providing inmate sweepers with training in regards to cleaning of health centres. All health centres are to have Safe Work Practices (SWP) displayed in the cleaning rooms and ensure all cleaners are aware of these SWP. Health centres are to ensure a cleaning schedule is displayed and all new inmate sweepers are orientated to this schedule.

2.3.2 Internal Cleaning Audits

- The required frequency of environmental cleaning audits in Network health care facilities is all rooms over a period of three months. The person undertaking the audit must always refer to the previous actions identified in the *Environmental Cleaning Audit Action Plan*. This ensures that the actions are followed as per the environmental cleaning audit monitoring and escalation process Appendix 4.

- The Network has audits for different areas to evaluate the Cleanliness of the Clinical Environment. All facilities within the Custodial Health Centres complete the audit through QARS. The Long Bay Hospital uses the Environmental Cleaning Audit spreadsheet (Appendix 1) and the Forensic Hospital audit is completed by our Public/Private Partners (PPP) Medirest. All audits evaluate the level of cleanliness by providing a compliance score.

  The cleaning auditor is to always refer to the previous cleaning audit to understand what sections were audited, identify any previous actions and ensure that previous non-compliance results have been remedied.

- The audit for the Aged Care Rehabilitation Unit, Mental Health Unit, Mental Sub-Acute Unit and the Forensic Hospital use the Environmental Cleaning Audit Template (Appendix 1) which automatically calculates the level of cleanliness. The acceptable quality level of cleanliness for Long Bay and Forensic hospitals is 88% (high risk). Auditors input a score for the cleanliness of specific element such as walls, flooring, etc., in each identified area. These elements are scored from "1" for satisfactory and "0" for unsatisfactory. When an item is N/A leave the "X" in the box. For an element to achieve a "1" score all parts of that element must be of the same standard. The score achieved against each element is then automatically calculated. The overall percentage score will determine the level of compliance with cleaning standards, see Appendix 2.

2.3.2.1 Quality Audit Reporting System (QARS)

- All Custodial Health Centres including Kevin Waller Unit and Long Bay Hospital 2 (Wards 13 and 14) audit their centres using the Cleanliness of the Clinical Environment audit in QARS. Each facility's minimum requirement for is an 85% compliance rate. This is automatically determined through the system and is based off the Yes or No response rate, with the N/A responses considered and do not skew the results.

- Custodial Health Centres are required to complete the audit once every quarter. The audit is administered by the Corporate and Clinical Governance Unit and can be seen by auditors in the QARS audit calendar for each site.

- QARS allows auditors to make comments that provide context to the audit response. Comments also allow senior Executives to understand what the issue is and what support clinical staff require to improve the cleanliness at sites. It is strongly recommended that auditors provide as much context as possible.

2.3.3 Action Plans

- An audit score less than the required compliance for each identified area indicates an unsatisfactory level of cleanliness and remediation is required within 48 hrs (LBH and FH) or within 72hrs (CH) as per NSW Health PD2020_022 *Cleaning of the Healthcare Environment*. Issues are to be identified on the action plan (Appendix 3) along with actions to improve compliance. The centres that use Appendix 1, must store in the HPRM containers assigned to each health centre. Business Services will monitor the HPRM containers for compliance and provide feedback to the appropriate directorate. For Custodial Health Centres using QARS, an action plan must be completed and finalised by the centres' NUM or cluster/regional manager.

- Results of audits, together with audit improvement or action plans and outcomes, are tabled at the Network Cleaning & Waste Management Committee. Minutes from this Committee are tabled at the Network Infection Prevention and Control Committee. Refer to Appendix 4.
- Internal audits can be undertaken by a person who has an appropriate knowledge of the Environmental Cleaning Policy and the cleaning process required by the healthcare facility. An auditor can be a member of the cleaning service or an employee of the facility not related to the cleaning service. Where possible, an auditor should be accompanied by a staff member of the area being audited to ensure issues are identified, ratified and validated. This may not be possible and/or practical in sole practitioner and satellite health centres. In such instances audits are completed unaccompanied.

3. Definitions

Must

Indicates a mandatory action to be complied with.

Should

Indicates a recommended action to be complied with unless there are sound reasons for taking a different course of action.

Sweeper

This is an inmate who is employed to carry out various duties within a wing/unit/pod. These duties are general in nature and may include cleaning, yard duties or laundry duties among others. They report to the / custodial officer.

4. Related Documents

Legislations	*Nil*
Justice Health NSW Policies, Guidelines and Procedures	*Nil*
Justice Health NSW Forms	*Nil*
NSW Health Policy Directives and Guidelines	PD2020_022 *Cleaning of the Healthcare Environment*
Other documents and resources	*Nil*

Appendix 1 – Environmental Cleaning Audit Template

Environmental Cleaning Audit – Score Sheet

Health Centre: **Auditor:** **Date:**

	Building							Fixtures				Patient equipment		Comments		
ROOM NAME	External features, fire exits, stairwells	Walls, skirtings, ceilings	Windows	Doors, door frames	Hard floors	Soft floors	Ducts, grills, vents	Electrical fixtures, desk appliances	Furnishings, fixtures	Kitchen fixtures, appliances	Toilets, bathroom fixtures, sinks	Patient bed	Patient furniture		Actual Score	Percentage Attained
	1	1	1	1	1	1	1	1	1	1	1	1	1		13	100%
	x	1	1	1	1	1	1	1	1	1	1	1	1		12	100%
	1	0	1	0	1	1	1	1	1	1	1	1	1		11	85%
	x	1	1	1	1	1	1	1	0	1	1	1	1		11	92%
	x	0	1	0	1	1	1	1	1	1	1	1	1		10	83%
	x	0	1	1	1	1	1	1	1	0	1	1	0		9	75%
															0	
															0	
															0	
															0	
Achievable Score	2	6	6	6	6	6	6	6	6	6	6	6	6		74	
Total Score	2	3	6	4	6	6	6	6	5	5	6	6	5		66	

	Comments: (insert comments here) **(insert comments here)**	**Cleaned by:** **Contract Cleaner** ☐ **Sweeper** ☐ **PSA** ☐ **89.189**

Appendix 2 – Instructions on using the Audit Tool

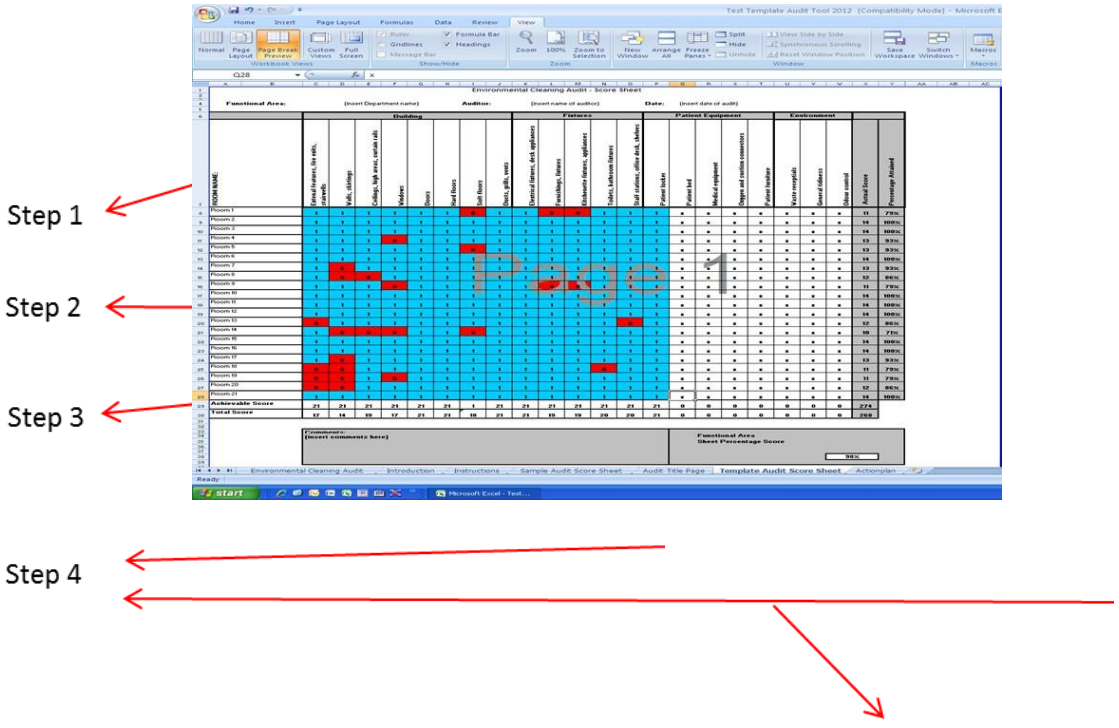
Instructions on using the Audit Tool

Step 1: Insert the name of the Functional Area, auditor and date across the top

Step 2: Insert the names of the rooms or room numbers of the Functional area down the left hand column

Step 3: Insert "1" for satisfactory, "0" for unsatisfactory and "X" for N/A, for each room and under each element that is being inspected. The box will automatically go blue or red depending on the number inseted. The box will only change colour for the number 1 or 0.

Step 4: Achievable Score, Total Score and Overall Percentage Score will be automatically calculated.



Appendix 3 – Environmental Cleaning Audit Action Plan

Site:		Site Manager:		
Date:				
Issue	**Action**	**Responsible Officer**	**Due Date**	**Comments / Outcome**

Appendix 4 – Environmental Cleaning Audit Monitoring & Escalation Process

