
 <p><b>PHILIPPINE HEART CENTER INCIDENT COMMAND POST</b></p>	Document Type	Document Code: GL-ICP-031
	<b>GUIDELINES</b>	Effective Date: June 2020
	Document Title	Revision Number: 0
	<b>ROUTINE ENVIRONMENTAL CLEANING (COVID-19)</b>	Page: 2 of 3

## I. OBJECTIVE

This guideline shall serve as guidance during the routine environmental cleaning of all units / areas.

## II. GUIDELINES

1. All personnel assigned as cleaners should have an orientation on cleaning and disinfection process.
2. Prescribed Personal Protective Equipment (PPE) shall be worn during cleaning:
  - 2.1 **Non-COVID Areas:** Hairnet, Medical Mask, Rubber Gloves and Boots
  - 2.2 **COVID Areas:** Hairnet, Medical Mask, Face shields, Gown/Apron, Gloves and Boots
3. The assigned personnel must ensure the completeness of his cleaning materials prior to entering the room/area to be cleaned.
4. Hand Hygiene shall be done based on the World Health Organization's (WHO) 5 moments of Hand Hygiene.
5. Personnel should avoid touching face, mouth, nose, and eyes when cleaning.
6. A logical cleaning pattern should be followed such as cleaning from cleanest to dirtiest areas, small to large equipment and top to bottom.
7. Small equipment such as telephones, mobile phones, and the likes should be wiped with 70% alcohol.
8. All frequently touched objects and surfaces such as medical equipment, door/toilet handles and locker tops, patient call bells, over bed tables, table tops, chart holders, light switches, and bed rails must be cleaned at least thrice a day or as frequent as possible, and when known to be contaminated with secretions, excretions or body fluids.
9. The frequency of cleaning and disinfecting shall be:
  - 9.1 Twice daily for **patient care** areas
  - 9.2 Once a day for **non-patient care** areas
  - 9.3 Areas performing invasive procedures: after every patient's procedure
10. Whenever soiling occurs such as blood spills and the likes, the area should be cleaned immediately.

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11. Terminal cleaning should include manual cleaning and disinfection (manual disinfection: use of disinfectant solution / automated disinfection: UVC light or Disinfectant Spray).
  - 11.1 **For COVID-19 Care Areas:** immediately following discharge or transfer of a patient except if the patient occupying the room undergone aerosol-generating procedure. If with aerosol generating procedure, it is advised to wait for an hour before cleaning the room.
  - 11.2 **For Non-COVID 19 Patient Care Areas:** immediately following discharge or transfer of a patient.
  - 11.3 **For OPD, diagnostic and clinic areas:** every afternoon, at the end of the day.
  - 11.4 **For areas doing invasive procedures:** after every patient's procedures and at the end of the day.
12. When using automated disinfection, the personnel in charge of the machine should ensure that the safety guidelines is observe and that the area is cleared for disinfection.
13. Dedicated or disposable equipment (such as mop heads cloths) must be used for environmental decontamination. Reusable equipment (such as mop handles, buckets) must be decontaminated every after use.
14. All infectious waste should be placed in a yellow plastic bag. The outer surface of the bag should be wiped with the hospital's approved disinfectant.
15. Used linen should be placed in a yellow plastic bag. The outer plastic bag should be disinfected and labeled prior to placing it to the linen chute.
16. Terminal cleaning should be facilitated by the unit manager/supervisor as deemed necessary.
17. For pest control services, unit/section head/manager/supervisor shall coordinate with General Services Division for schedule.