# Cleaning of the care environment and care equipment policy and procedures

This policy and related procedures are based on the Antimicrobial Resistance and Healthcare Associated Infection (ARHAI) (Scotland) within NHS National Services Scotland (NHS NSS) Standard Infection Control Precautions (SICPs) located in the [National Infection Prevention and Control Manual](http://www.nipcm.scot.nhs.uk/)).

Hard surfaces within the dental surgery[ies], the local decontamination unit (LDU) and the wider practice area may become directly or indirectly contaminated with blood, saliva and oral secretions containing bacteria, viruses, etc. Thorough cleaning will reduce the risk of infection via the hard surfaces within the practice. Staff are trained in cleaning as part of their Infection Control induction and their continuing professional development. A record is kept of this training. Cleaning is carried out before and after every treatment episode and [at the beginning / end of each session], with the level of surface cleaning required assessed on a case by case basis. Cleaning is also carried out during and after the decontamination process. Suitable PPE is used for all cleaning tasks. Cleaning of all areas of the practice outside the surgery[ies] and local decontamination unit is carried out by [e.g. name of contractors plus contact details, staff member, other] at [insert days of the week/time that cleaning takes place], according to the practice’s procedures and cleaning schedule. Signature sheets are used to document this process.

## Cleaning Procedures

* Risk assess the treatment episode carried out for each patient to decide the level of surface cleaning required.
* For example, surfaces will be contaminated up to a 1m radius if rotary instruments have been used on a patient, whereas an examination only will not create significant aerosol risk. Routes of contamination to be considered at all times are:
  + airborne particles following use of rotary instruments
  + splatter during surgical procedures
  + droplets from coughs and sneezes
  + touching surfaces and objects with contaminated hands.

### Clinical areas and LDU

#### General

* Keep all surfaces in the surgery and LDU as clear and clutter free as possible to give easy access for cleaning.
* Keep as many items as possible in cupboards or covered.
* Ensure clean or dirty areas are clearly defined and maintained.
* Clean all large surfaces, clean and dirty areas, at the end of a session using warm water and general purpose detergent with disposable cloths.

#### Following clinical procedures

* Clean all surfaces that have potentially been contaminated with blood, saliva or by touch.
* Clean the [X-ray machines, light handles, and curing lights etc] with [products used]. Detergent wipes can be used for cleaning small surface areas between patients.
* Remove significant contamination e.g. splatter of saliva, contamination from aerosols, etc with [Name] detergent wipes followed by [Name] disinfectant wipe. [Name] combined wipes which both clean and disinfect may be used. Alcohol wipes alone will not remove protein residues and are not used. Further advice on the [choice of wipes](https://www.nss.nhs.scot/publications/literature-review-and-practice-recommendations-existing-and-emerging-technologies-used-for-decontamination-of-the-healthcare-environment-wipes-v20/)
* Deal with blood spillages by donning appropriate PPE (see PPE policy) and either apply chlorine releasing granules directly to the spill or contain the spillage using disposable paper towels, then saturate with sodium hypochlorite 10 000 ppm. Leave in place as recommended in the manufacturers’ instructions or for at least 3 minutes. Dispose of towels as healthcare waste. Clean the contaminated area with detergent and warm water using disposable paper towels. Discard paper towels and disposable PPE into healthcare waste and carry out hand hygiene.
* For other body fluid spillages (e.g. urine, vomit) refer to ARHAI (Scotland)s NHS NSS Management of Blood and Other Body Fluid Spillages SICP ([National Infection Prevention and Control Manual](http://www.nipcm.scot.nhs.uk/)).

### Non clinical areas

* [Include details of
* the areas to be cleaned and how they should be cleaned
* which products are to be used
* PPE required
* frequency of cleaning]
* Sign the signature sheet to confirm completion of cleaning according to the practice cleaning schedule.

**Version history**

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| **Date** | **Version No.** | **Summary of change(s)** | **Updated by** | **Next review date** |
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The following staff have read and understood this policy [include all team members].

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| **Dental Team Member** | **Position** | **Signature** | **Date** |
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