SOP Objective

NHS Scotland Code of Practice for the Local Management of Healthcare Associated Infection (HAI) requires that all near patient equipment is decontaminated before and after it is used. Equipment must be visually inspected for the presence of blood or body fluids prior to routine cleaning. If contaminated, the NHSGGC Decontamination SOP (NHSGGC Prevention and Control of Infection Manual) must be followed.

This SOP applies to all staff employed by NHS Greater Glasgow & Clyde and locum staff on fixed term contracts and volunteer staff.

KEY CHANGES FROM THE PREVIOUS VERSION OF THIS SOP

- Minor wording changes

Document Control Summary

<table>
<thead>
<tr>
<th>Approved by and date</th>
<th>Board Infection Control Committee 20th April 2021</th>
</tr>
</thead>
<tbody>
<tr>
<td>Date of Publication</td>
<td>23rd April 2021</td>
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<tr>
<td>Developed by</td>
<td>Infection Prevention and Control Policy Sub-Group</td>
</tr>
<tr>
<td>Related Documents</td>
<td>NHSGGC Decontamination SOP</td>
</tr>
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<td></td>
<td>National Infection Prevention and Control Manual</td>
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<tr>
<td>Distribution / Availability</td>
<td>NHSGGC Prevention and Control of Infection Manual and the Internet</td>
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<td><a href="http://www.nhsggc.org.uk/infectionpreventionandcontrol">www.nhsggc.org.uk/infectionpreventionandcontrol</a></td>
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<tr>
<td>Lead Manager</td>
<td>Board Infection Control Manager</td>
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<td>Responsible Director</td>
<td>Board Medical Director</td>
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The most up-to-date version of this SOP can be viewed at the following website:
www.nhsggc.org.uk/your-health/infection-prevention-and-control
1. Introduction & Background


It is a requirement of the Scottish Government and NHSGGC that the infection risk of healthcare equipment is managed and that the management measures used are documented, implemented and recorded. Within this SOP is a Reference Guide/Poster: Daily/Weekly Checklist in [Appendix 1](#) which lists commonly used healthcare equipment and the method and frequencies of cleaning.

Each Senior Charge Nurse (SCN) or Senior Allied Health Professional (Senior AHP) will utilise two checklists, i.e. the Weekly Assurance Checklist and the bed space / treatment area checklist to provide evidence and assurance that healthcare equipment is being cleaned in their area.

**Weekly Assurance Checklist:** A standard template of this checklist can be found in [Appendix 2](#). The SCN / Senior AHP can use this template and add specialist equipment used in their department. The assurance checklist will be completed weekly by the SCN / Senior AHP or the deputy charge nurse/senior staff member in his/her absence. This record must be kept in the ward / department for a minimum of one month.

**Bed Space / Treatment Area Checklist:** A standard template of this checklist can be found in [Appendix 3](#). This checklist should be completed on transfer or discharge of the patient, or for longer stays, weekly. For frequently used spaces such as clinical rooms, recovery spaces etc it should be completed at the end of the day for each space by a member of staff. This record should be kept in the ward / department for a minimum of one month.

The SCN / Senior AHP should ensure that any items added to their bed space / treatment area checklist are also included in their weekly assurance checklist. NB; checklists are in word document format and items on the template which are not relevant to your area can be removed (there are various checklists available, please choose one appropriate to your area).

Domestic monitoring is now set within a National Monitoring Framework and copies of the cleaning frequencies carried out by Domestic Services should be displayed in every area (copies can be obtained from the Site Facilities Manager). Lead Nurses, SCNs and Department Managers, e.g. AHPs and Facilities Staff, will be responsible for communicating arrangements locally.

The most up-to-date version of this SOP can be viewed at the following website: [www.nhsggc.org.uk/your-health/infection-prevention-and-control](http://www.nhsggc.org.uk/your-health/infection-prevention-and-control)
2. Key Principles

2.1 The weekly checklist is designed to provide an assurance that all equipment is clean and decontaminated between patients. It is the responsibility of the SCN / Senior AHP or the deputy charge nurse/senior staff member in his/her absence to ensure that this is being done. If on inspection equipment is found to be dirty / contaminated, actions to rectify this must be implemented immediately. Details on the frequency of cleaning are contained in this document. If any member of staff is not adhering to cleaning and decontaminating of equipment after use it will be the responsibility of the SCN / Senior AHP to take immediate action to bring this omission to the attention of the staff involved.

2.2 To support public / patient confidence after commodes have been cleaned, they should be dated and signed by the person who cleaned it using an indicator label. THIS IS NOW THE ONLY ITEM OF PATIENT EQUIPMENT THIS LABEL MUST BE USED ON. THE LABEL SHOULD BE PLACED WHERE IT IS COMPLETELY VISIBLE. COMMODES SHOULD BE CLEANED WITH A CHLORINE BASED DETERGENT AND A LABEL ATTACHED.

2.3 Equipment must be visually inspected before commencing any cleaning procedure. Equipment that is contaminated with blood or body fluids MUST be decontaminated as per the NHSGGC Decontamination SOP.

2.4 When cleaning equipment, it is important that healthcare workers (HCWs) wear appropriate personal protective equipment (PPE), e.g. gloves, disposable plastic aprons etc. Managers must ensure that the appropriate PPE is available; staff are responsible for using the equipment appropriately.

2.5 Staff need to be aware of national guidance in relation to the specific cleaning products they are expected to use.

2.6 If patients have a known or suspected transmissible disease requiring isolation, the NHSGGC SOP on Twice Daily Clean of Isolation Rooms and SOP Terminal Clean of Isolation Rooms must be followed.

2.7 Single-use items must never be re-used.

2.8 Clean equipment should be stored appropriately, away from used equipment and away from areas where cleaning is taking place to reduce the risk of contamination.

2.9 Equipment that is damaged or torn should be reported to the SCN or Senior AHP and should be removed and replaced or repaired as soon as possible.

2.10 When new items are considered for purchase the manufacturers’ advice on decontamination must be sought from the infection prevention and control decontamination group NHSGGC: Decontamination advice request form and training if necessary must precede use. Careful consideration should be given to the consequences of the purchase of any item of equipment that is not capable of being decontaminated by chlorine based detergent.

The most up-to-date version of this SOP can be viewed at the following website: www.nhsggc.org.uk/your-health/infection-prevention-and-control
3. Evidence Base


_The NHSScotland Code of Practice for the Local Management of Hygiene and Healthcare Associated Infection. This document can be viewed at:_

http://www.hse.gov.uk/coshh/


MHRA (2014) Managing Medical Devices: Guidance for healthcare and social services organisations  

NHSGGC Control of Substances and Hazards to Health Policy (December 2013)  
_NHSGGC: Control of Substances Hazardous to Health (COSHH)_


https://hpspubsrepo.blob.core.windows.net/hps-website/nss/2346/documents/1_Roles%20and%20Responsibilities%20Reusable%20Patient%20Care%20Equipment%202017-12-21.pdf

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### Appendix 1 – Reference Guide/Poster: Daily / Weekly Checklist (√)

Unless otherwise stated, general purpose detergent and water or detergent wipes should be used for all routine cleaning. If an item is heavily soiled detergent and water is the preferred method. Equipment that is contaminated with blood or body fluids **MUST** be decontaminated as per the NHSGGC Decontamination SOP.

This list is not exhaustive but gives a guide to commonly used equipment within clinical areas.

<table>
<thead>
<tr>
<th>Item</th>
<th>Between Patients</th>
<th>Weekly</th>
<th>Method of cleaning</th>
<th>Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td>Water and detergent/detergent wipes</td>
<td>Chlorine based detergent</td>
</tr>
<tr>
<td>Baths</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td>Bath Aids</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td>Bed base (top &amp; bottom)</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td>Bed/cot sides</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td>Bed End/Head Plate</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td>Bead overhead lamp</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td>Bed pan holders</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td>Bed tables</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td>Bids</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td>Blood pressure stands &amp; monitor cuffs</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td></td>
</tr>
<tr>
<td>Bowls/ washing basins</td>
<td>✓*</td>
<td>✓</td>
<td>✓</td>
<td></td>
</tr>
<tr>
<td>Case note trolley</td>
<td></td>
<td>✓</td>
<td>✓</td>
<td></td>
</tr>
<tr>
<td>Chairs - Bedside</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td>Chairs – Waiting Areas</td>
<td>✓*</td>
<td>✓</td>
<td>✓</td>
<td></td>
</tr>
<tr>
<td>Clean O2 and Suction</td>
<td></td>
<td>✓</td>
<td>✓</td>
<td></td>
</tr>
<tr>
<td>(ensure clean tubing and Yankauer suction tube available)</td>
<td></td>
<td>✓</td>
<td>✓</td>
<td></td>
</tr>
<tr>
<td>Commodes</td>
<td></td>
<td>✓</td>
<td>✓</td>
<td></td>
</tr>
<tr>
<td>Computers/ keyboards</td>
<td></td>
<td>✓</td>
<td>✓</td>
<td>After use</td>
</tr>
<tr>
<td>Crockery and Cutlery</td>
<td>✓</td>
<td></td>
<td></td>
<td>Water and bactericidal detergent/dishwasher</td>
</tr>
<tr>
<td>Dispensers (Gloves/Apron/ Alcohol gel/Hand towel/Soap)</td>
<td>✓*</td>
<td>✓</td>
<td>✓</td>
<td></td>
</tr>
<tr>
<td>Duvets (wipe clean type)</td>
<td>✓</td>
<td></td>
<td></td>
<td>If in single inpatient room</td>
</tr>
<tr>
<td>ECG equipment</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td></td>
</tr>
<tr>
<td>Enteral feeding pumps</td>
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<td>✓</td>
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<td></td>
</tr>
<tr>
<td>Bladed Fans</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td>Bladeless fans should not be used</td>
</tr>
<tr>
<td>Fridge (patient only)</td>
<td></td>
<td>✓</td>
<td>✓</td>
<td></td>
</tr>
</tbody>
</table>
**CLEANING OF NEAR PATIENT HEALTHCARE EQUIPMENT**

**Item** | **Between Patients** | **Daily** | **Weekly** | **Method of cleaning** | **Comments** |
---|---|---|---|---|---|
Hoists | ✓ | ✓ | ✓ | | |
Infusion pumps | ✓ | ✓ | ✓ | | |
Infusion Stands | ✓ | ✓ | ✓ | | |
Locker top/sides/back | ✓ | ✓ | | | |
Locker internal | ✓ | ✓ | ✓ | | |
Macerator | ✓ | ✓ | ✓ | | No alcohol based solutions |
Mattress | ✓ | ✓ | ✓ | | |
Medical gas cylinders & stands | ✓ | ✓ | ✓ | | |
Monitors - mobile | ✓ | ✓ | ✓ | | |
Monitors - wall mounted | ✓ | ✓ | ✓ | | |
Nurse call system | ✓ | ✓ | ✓ | ✓ | |
Nurse call system – Sanitary Area | ✓ | ✓ | | | |
Patient Trolley | ✓ | ✓ | ✓ | | |
Pillows | ✓ | ✓ | ✓ | | |
Scales | ✓ | ✓ | ✓ | | |
Shower chairs | ✓ | ✓ | ✓ | | |
Suction equipment | ✓ | ✓ | ✓ | | |
Telephone (desk and deck phones) | ✓ | ✓ | ✓ | Before and after each use |
Trolley – beverage | ✓ | ✓ | ✓ | *And before each use |
Trolley - dressing | ✓ | ✓ | | Before and after each use |
Trolley – medicine | ✓ | | | |
Trolley - patient | ✓ | ✓ | | |
Trolley – resuscitation | ✓ | ✓ | ✓ | | |
Walking aids | ✓ | ✓ | ✓ | | |
Wheelchairs | ✓ | ✓ | ✓ | | |

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## Appendix 2 – Weekly Cleaning Assurance Checklist to be used by SCN

NB; Where the items below exist in your area, they must remain on this checklist. Otherwise, they can be removed and replaced with more relevant equipment.

(there are various checklists available, please choose one appropriate to your area)

<table>
<thead>
<tr>
<th>HOSPITAL</th>
</tr>
</thead>
<tbody>
<tr>
<td>WARD</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Date</th>
<th>Time</th>
</tr>
</thead>
</table>

**Weekly Cleaning Assurance Checklist**

**Inspect all listed equipment for any blood or body fluids, dust or visible debris**

- Inspect all commodes & ensure decontamination indicators are present
- Unzip and inspect the *mattress on two beds (if unable to unzip they should be checked for any breaks in the materials – examples would be theatre beds, A & E trolleys, trolleys in radiology etc and cot mattresses)*
- Inspect two bed tables
- Inspect two patient chairs
- Inspect arrest trolley for dust or contamination
- Inspect two bed frames – under mattress and undercarriage
- Inspect two patient showers – report any mould or contamination to Facilities / Estates
- Inspect two patient nurse call buzzers
- Inspect the top of two bed space reading lights
- Inspect two lockers
- Inspect four hand gel dispensers including dispenser at entrance to ward: ensure there is gel available and nozzles are free from blockage
- Inspect all toilet raised seats / hand rails / shower chairs
- Review 3 bedspace checklists to ensure completed appropriately & up to date

**PLEASE ENSURE ANY FAULTY EQUIPMENT IS REPORTED TO ESTATES OR MEDICAL PHYSICS AS SOON AS IT IS DISCOVERED**

**PRINT NAME**

**DESIGNATION (SCN, CN, Deputy)**

**SIGNATURE**
* If a **mattress** is found to be contaminated, remove from use as soon possible, and inform the SCN. The SCN will inform the Lead Nurse or Service Manager.

** Please list any critical near patient equipment specific to your ward or clinical area that requires weekly inspection.
Appendix 3 – Bed Space Checklist to be completed by HCW undertaking bed space clean
NB; Where the items below exist in your area, they must remain on this checklist. Otherwise, they can be removed and replaced with more relevant equipment.

<table>
<thead>
<tr>
<th>HOSPITAL</th>
<th>WARD</th>
</tr>
</thead>
<tbody>
<tr>
<td>Date</td>
<td>Time</td>
</tr>
<tr>
<td>Room</td>
<td>Bed Space</td>
</tr>
</tbody>
</table>

Tick as completed when patient is discharged or once weekly, whichever comes first

- Clean O2 and Suction (ensure clean tubing and Yankauer suction tube available)
- Empty and clean Bedside Locker
- Clean Bed Table
- Clean Patient/ Visitor Chairs not on weekly template
- Clean Basin not on weekly template
- Clean Buzzer
- Clean Hand Rub Nozzle and replace if required
- *Clean Mattress (unzip mattress cover and inspect mattress on both sides for any contamination). Cot mattress should be checked for any obvious breaks in the fabric.
- Clean Bed Frame
- Clean Bed Rails
- Clean Patient Television
- Clean shelving around the bed space
- Change Foam Ear Phone Buds / headphones
- Clean inside Wardrobe
- Clean Bedside Lamp and check working
- Wipe clean the Pillows and Duvet if in use
- Infection Prevention Control Leaflets replaced (discard unused leaflets)
- Make Bed with fresh Linen

**

PLEASE ENSURE ANY FAULTY EQUIPMENT IS REPORTED TO ESTATES OR MEDICAL PHYSICS AS SOON AS IT IS DISCOVERED

<table>
<thead>
<tr>
<th>PRINT NAME</th>
</tr>
</thead>
<tbody>
<tr>
<td>DESIGNATION</td>
</tr>
<tr>
<td>SIGNATURE</td>
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<tr>
<td>Cleaning of Near Patient Healthcare Equipment</td>
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</table>

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* If a mattress is found to be contaminated, remove from use and inform the SCN. The SCN will inform the Lead Nurse or Service Manager.

** Please list any critical near patient equipment specific to your ward or clinical area.