Learning Guide

Apply infection knowledge for cleaners

29384 Apply general knowledge of infection prevention and contamination when working as a cleaner  
Level 3  
5 credits

29389 Apply specialised knowledge of infection control and contamination prevention when working as a cleaner  
Level 3  
10 credits

Name:

Workplace:

Careerforce  
te toi pūkenga
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Introduction

As a cleaner, what you do and how you do it makes a difference to cleanliness and hygiene for people working in, living in, or visiting the place you clean. It also makes a difference to other staff members and even to you. This learning guide gives you information about infection control and contamination prevention and the importance of this.

How to use your learning guide

This learning guide supports your learning and prepares you for the unit standard assessment. There are activities to guide your learning.

This guide relates to the following two unit standards:

- 29384 Apply general knowledge of infection prevention and contamination when working as a cleaner (level 3, 5 credits).
- 29389 Apply specialised knowledge of infection control and contamination prevention when working as a cleaner (level 3, 10 credits).

The general knowledge unit 29384 is a prerequisite for 29389.

This learning guide is yours to keep. Make it your own by writing notes that help you remember things, or where you need to find more information.

Follow the tips in the notes column.

You may use highlighter pens to show important information and ideas, and think about how this information applies to your work.

You might find it helpful to talk to your workmates or supervisor.

Complete this learning guide before you start the assessment.

What you will learn

This topic will help you to:

- apply hygienic work practices.
- use single station equipment.
- take precautions to prevent infection and contamination.
- know how infections are passed on and what to do to prevent this.
- follow standard precautions.
- apply stringent infection control procedures.
- control infection outbreaks.
- report incidents, injuries, accidents and infection outbreaks.
Preventing infection and contamination

It is important to clean safely to prevent and control the spread of infections.

Infection prevention is about doing things that will stop germs and infections from being spread (carried) from one person to another.

If you work in a healthcare setting then you will be working with vulnerable people for whom an additional infection could be fatal.

Infection control is about studying and managing outbreaks of infection.

Infections can also be caused by contamination from waste, dirt, hazardous bacteria, a virus, chemicals or poison, making it dangerous for others to be exposed to, touch, breath etc.

For example, in health care situations, contamination can be carried by infected humans and human products. Human products are things that are made in the body as part of our bodily function. The most common human products that cleaners might come across are saliva, blood, urine and faeces. Some other words that mean the same thing as human products are body products, or body fluids.

Blood

Urine

For example a dirty tissue, half-eaten food and a used plaster are all potentially contaminated items. They all have human products on them that can carry germs or infection.

Cross-contamination is spreading germs or infection from one person to another, from one thing to another or from one area to another area.

Key words

<table>
<thead>
<tr>
<th>contamination</th>
<th>something that is dirty, unsafe, unhealthy, poisonous or dangerous</th>
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<tbody>
<tr>
<td>cross-contamination</td>
<td>the spreading of germs or infection from one person to another person, from one thing to another thing, or from one area to another area</td>
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Working safely

Remember to work safely. Someone is going to be staying or working in the area you have just finished cleaning.

Cleaners have a responsibility to make sure that everything they clean is free from contamination and infection.

If you have any important questions about infection prevention or control, you should ask your supervisor or an infection control nurse.

If you have any questions about the cleaning instructions for the day and what precautions you should take, you should ask your supervisor.

Ask if you are not sure:

- what PPE to wear.
- how to handle contaminated waste.
- how to clean up a spill of human products.
- what to do if you find a used syringe.

It is not just cleaning; it’s about a healthy environment.
Essential hygienic work practices

It is very important to clean safely. You don’t want to get sick or make other people sick because you didn’t follow the correct procedure. You are responsible for the health of yourself and other people. Essential hygiene includes personal hygiene, wearing appropriate PPE and washing hands.

Personal hygiene

Personal hygiene includes the things you do to care for your own health and wellbeing through being clean. Attention to personal hygiene in the workplace reduces the spread of germs and disease. There are lots of things we can do to keep ourselves clean and prevent the spread of infection, including:

- keeping your hair tidy – brushed and tied up or out of the way so you do not drop hairs.
- having clean and trimmed nails so you do not carry infection.
- washing hands regularly to prevent the spread of infection.
- wearing clean clothes and/or a uniform.

It is important the clothes you wear are clean and in good order. Remember you are representing your employer and how you look reflects on them and yourself.

Think about

It’s not just cleaning.
It’s about a healthy environment.

Wear your uniform with pride
Personal protective equipment

Protect yourself by wearing personal protective equipment (PPE). PPE creates a barrier between you and any infection. You may have to wear different equipment each time you clean, depending on the situation. If you are not sure what PPE you need to wear, ask your supervisor.

Gloves or disposable gloves

You should always wear gloves when cleaning. Here are some useful things to remember about wearing gloves.

- Always wash your hands with soap before you put on gloves.
- Always check the gloves for cuts or damage before you put them on. Do not use them if they are torn or damaged.
- If you use disposable gloves, they are for one use only. Change them between cleaning tasks and before touching clean items and surfaces.
- Always wash your hands after you remove your old gloves and before you put on clean gloves.

If using disposable gloves, always throw them away after use.

**How to remove gloves safely**

1. Turn the first glove inside out as you take it off and crumple it into the other gloved hand.
2. Slide your fingers inside the remaining glove and peel the second glove off over the first one, which bundles them together.
3. All the contaminated surfaces of the gloves are now safe from being touched. Dispose of the gloves into a waste bag.
Protective clothing

Protective clothing helps create a barrier between you and any infection, protecting your skin, reducing exposure to chemicals and reducing chances of developing some skin allergies.

Protective clothing prevents you carrying infections on your clothes from one place to another place. They will also prevent your clothes getting dirty or contaminated when you might be cleaning or at risk of being splashed by fluids or cleaning products.

Gowns, aprons and scrubs

Protective clothing like hospital aprons, gowns and scrubs help create a barrier between you and any infection, protecting your skin. Wear a surgical gown or scrubs:

- if your clothes will be in contact (touching) a client.
- as instructed for a norovirus or scabies or reportable outbreak.
- if you are doing a clean of an isolation room or ward where people with infectious diseases are or have been isolated.
- to protect your clothes from contamination, for example, from infected blood, urine, faeces, saliva.
- to prevent carrying infections on your clothes from one place to another place.

Scrubs

Scrubs include tops, pants and maybe a hat.
Goggles or glasses

Wearing goggles or glasses can protect the mucous membranes of the eyes from dust, splashes of cleaning products and chemicals, and also splashes of blood or other body fluids that could carry infections.

If you use re-useable goggles, clean them thoroughly after use.

Masks

Masks help protect the mucous membranes of the nose and mouth from the fumes from cleaning chemicals or from body fluids. Masks can also provide some protection from passing on or catching airborne infections, for example, a cold or flu.

In a health care environment you may need to wear a surgical face mask or an N-95 respiratory mask.

Wear a surgical face mask if you think you might get splashed by human fluids (blood, urine or saliva) on your face or into your nose or mouth.

- Make sure the surgical mask fits your face well.
- Change the surgical mask if it gets dirty.
- Use the strings at the side of the mask to take it off.
- Be careful not to touch the front of the mask with your hands when you take it off. If you do, you will have to change your gloves.
- Always throw away disposable surgical masks after use.

An N-95 mask is a respiratory mask. You would only wear an N-95 mask as a special precaution where there is a risk of catching a serious disease that can be carried in the air. This includes tuberculosis (Tb), chickenpox, measles, and SARS.

N-95 respiratory mask

You will not have to wear an N-95 mask all the time. It is not a standard precaution.
Hats

Mostly hats are worn in theatres. Hats protect your hair from possible contamination from body fluids or infection by head lice. They will also prevent hair falling on to food or cleaned surfaces.

Footwear

Wear closed footwear that does not slip on wet floors. Closed footwear covers all parts of your feet. You must not wear open footwear like jandals. Strong footwear means your feet will be protected and you will be able to move and balance better.

Ear protection

Wear earmuffs or ear plugs when you are using noisy equipment like polishers.

Specialised PPE

Certain tasks and areas will require you to wear specialised PPE. This includes areas for stringent infection control and infection outbreaks. There is more on this later in this learning guide.

This knowledge is required for the unit standard 29389 on applying specialised infection knowledge.

Hand hygiene is very important

Infection and contamination is often spread on dirty hands or under finger nails.
Hand hygiene

Hand hygiene is very important. Infection and contamination is often spread on dirty hands.

Hand washing or using hand-rub helps to prevent the spread of infection.

For some work tasks, you may be asked to wash your hands. For other work tasks you may be asked to use hand-rub with an alcohol-based cleanser or gel.

Wash your hands if they are visibly dirty. (Visibly dirty means that you can see dirt or soiling on your hands.) If you cannot see dirt, you can use hand-rub.

You can minimise the risk of picking up an infection or passing it on to others by thoroughly washing your hands. Never touch your eyes, mouth or nose with dirty hands or gloves as you may catch an infection.

To prevent spreading infections on your hands:

- wash your hands thoroughly at the start of cleaning using soap and water.
- wash your hands with soap after removing your gloves and before putting on a clean pair.
- wash your hands between tasks.
- wash your hands before you go on a break.
- wash your hands after you finish your break.
- always wash your hands after you go to the toilet.
- wash your hands after coughing or using a tissue.
- wash your hands before and after preparing and eating food or drink, or smoking.
- wash your hands after picking up dirty bed linen.

Dry your hands thoroughly on a towel or paper towel or use a hot air dryer.

Never dry your hands on your clothes as you can carry germs from your clothes onto your hands. Never dry your hands on a hand towel that everyone else uses as it could be contaminated.

Make sure your hands are thoroughly dry as wet hands more easily spread germs.

In some places, you must wash your hands when moving from area to area, for example, when cleaning in a hospital, in the isolation wards or operating theatres. This stops you from spreading germs or infections to other areas.
When hand washing

Take off all jewellery.
Wash your hands thoroughly under running water for 40-60 seconds.
Use liquid soap for normal hand washing.
Wash the front and back of the hands and wrists.
Wash between the fingers, the finger tips and under the nails.
Turn off the tap using a paper towel if possible.
Dry hands thoroughly, preferably using a throw away paper towel or air drier.

Hand-rub/sanitiser

Hand rub/sanitiser is an alcohol based hand cleanser or gel which will significantly reduce the number of germs on your hands. These hand rubs are fast acting and can be used when your hands are not visibly dirty or when soap and water are not available.
Whether using hand rub or hand washing, the steps to clean your hands are similar.

Wash hands thoroughly

Good hand washing technique is one of the most important ways of preventing the spread of infection.
If you wash your hands correctly, you will destroy 99.9% of the germs you may have picked up.
How to handrub?  
WITH ALCOHOL-BASED FORMULATION

1a. Apply a palmful of the product in a cupped hand and cover all surfaces.

1b. Rub hands palm to palm.

2. Backs of fingers to opposing palms with fingers interlocked.

3. Right palm over left dorsum with interlaced fingers and vice versa.

4. Palm to palm with fingers interlaced.

5. Rotational rubbing of left thumb clasped in right palm and vice versa.

6. Rotational rubbing, backwards and forwards with clasped fingers of right hand in left palm and vice versa.

7. Rinse hands with water.

8. Dry thoroughly with a single use towel.

9. Use towel to turn off faucet.

10. 20-30 sec

11. ...once dry, your hands are safe.

How to handwash?  
WITH SOAP AND WATER

0. Wet hands with water.

1. Apply enough soap to cover all hand surfaces.

2. Rub hands palm to palm.

3. Right palm over left dorsum with interlaced fingers and vice versa.

4. Palm to palm with fingers interlaced.

5. Rotational rubbing of left thumb clasped in right palm and vice versa.

6. Rotational rubbing, backwards and forwards with clasped fingers of right hand in left palm and vice versa.

7. Rinse hands with water.

8. Dry thoroughly with a single use towel.

9. Use towel to turn off faucet.

10. 40-60 sec

11. ...and your hands are safe.

World Health Organization

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Cleaning equipment

Equipment needs to be cleaned and dried between uses so it does not bring dirt and/or germs which can contaminate where you are cleaning.

Change the water for cleaning in different areas else you could carry germs from one place to another.

Special cleaning equipment is used in infectious areas to prevent cross-contamination from one area to another.

Single-station equipment

Some health care facilities use a single-station equipment system. This means that all the cleaning equipment stays in one area and must not be used in any other area.

Each operating theatre may have its own cleaning equipment to stop cross-contamination. Single-station equipment is stored in the area it is used in, separately from other equipment, to stop cross-contamination.

HEPA filters

HEPA filters are required for vacuum cleaners and suction polishers in a health care environment. HEPA means high efficiency particle air-filter. A HEPA filter can collect a lot more dust. The filter must meet the standard AS/NZS 3733:1995.

Disposable cleaning equipment

You may be asked to use disposable cleaning equipment. You may have disposable gloves and disposable cloths. When you have finished using them, you must throw them away. They can go in general waste.

Never wash and reuse disposable items.

Colour coded cloths and mops

Some facilities use a colour coded cloth system for cleaning different areas. Each area has different coloured cleaning cloths and mops. The colour of each cloth or mop tells you what you must use it for. It also tells you what you must not use it for.

Never take cleaning cloths home to wash in your washing machine, as the water will not be hot enough to kill germs. You could also bring germs into your house that may make you or your family sick.

Microfibre cloths, dusters and mops can be rinsed in a general purpose cleaner and hung up to dry. In hospitals microfibre equipment is sent away after every use to be cleaned commercially and sterilised at high temperatures. This opens the fibres, which releases the trapped dirt and sterilises the microfibre, reducing the need for chemicals to disinfect it.
Cloths may be colour coded

Colour coding

Colour coding prevents contamination between different working areas.

There are alternative systems to colour coding. Many hospitals in New Zealand have adopted a different system, using disposable one-use white wipes from a roll or dispenser container.

Write

Different places may use different colour coded systems. What system does your workplace use?
Infections

Some of the most common hazards in your workplace are germs, which can cause an infection. An infection happens when germs enter the body and start to multiply. A disease is when the cells in the body are damaged by the infection and the person becomes sick.

Germs are everywhere. They are in the air, on food, plants and animals, in soil and water and even on the surface and inside your own body. Most are too small to see without the aid of a microscope.

Germs become a problem when they are a harmful type or when they are present in numbers that are too much for the body’s immune system to cope with.

Types of germs

There are four main types of germs that can cause infections – viruses, bacteria, fungi and parasites.

Viruses - can be swallowed, inhaled, absorbed through mucous membranes like the eyes, or spread by insect bites or physical contact.

A virus will not survive for long away from living cells. On a hard surface, like a metal handle, a virus might survive for one or two days. If someone coughed on the door handle and the virus is protected by mucus it can survive for much longer.

Bacteria – are tiny single-celled living things. They can be breathed in or swallowed or they may get inside the body through a break in the skin like a cut. They live on things like food or cutlery.

Fungi - like living in damp, warm conditions. They reproduce by spreading tiny spores that can cause infections on or inside the body.

Parasites - can live on the surface of the body or enter the body through the mouth or skin. They live on or inside a host, like a person, causing harm to that host.

Infection by contact

Touching something like a dirty door handle or shaking hands is enough to allow infection to be passed on from one person to another.
**Passing on infection**

There are several ways or routes in which infection can be passed on.

Infections can be passed on by physical contact between people, touching skin-to-skin.

Your skin is your body’s first way of stopping germs getting into your body and giving you an infection. If your skin is broken or cut it is easier for you to get an infection. Using plasters to cover cuts is important. Wearing gloves is the best way to stop germs sticking to your skin and will help prevent you getting or spreading an infection.

Some infections are passed on by contact with objects such as door handles, cups, cutlery, telephones or soiled clothing and bedding.

Infections can be passed on by touching contaminated surfaces or equipment. Keep equipment and surfaces clean and disinfected.

Infections can also be caused by contamination from chemicals or poisons. Some cleaning products are dangerous to touch, be exposed to, or breathe in.

Infections can be carried by infected humans and human products. Human products are made in the body and include saliva, blood, urine and faeces. They may also be called body products, body fluids or human waste. Wear gloves and wash your hands after handling human products.

Damp breeds germs – always dry your hands and dry surfaces you have cleaned. Wash and dry mops and cloths between uses, or replace them with newly laundered mops and cloths.

Infections can be air borne. Infections can be spread through the air with mucus droplets from sneezing or coughing. Always cover your cough or sneeze. Preferably use a disposable tissue, throw it away and wash your hands. Dust may also carry germs so reduce dust showers as you work.

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**Air borne infections**

Measles, chicken pox, Tb and SARS can all be carried in the air.
Illnesses and health conditions

The workplace you are in will have requirements around your being healthy, and conditions which may prevent you from working, and illnesses that you have to report.

In a health environment illnesses that will exclude you from working include flu-like symptoms, shingles, conjunctivitis, whooping cough, mumps, measles, chicken pox, scabies, tuberculosis (Tb), an upset stomach (diarrhoea/vomiting), skin infections such as head lice, rashes, blisters, cold sores, impetigo (school sores).

Illnesses which could exclude a person from working in a food based industry may include hepatitis A, giardia, salmonella, campylobacter, cryptosporidium, shigella, typhoid, cholera, yersinia.

Illnesses which may prevent a person from coming to work in a food area while they are ill could include influenza, any communicable disease (such as mumps, measles, and chicken pox), flu like symptoms, an upset stomach (diarrhoea/vomiting).

Conditions which may prevent a person from coming to work in a food area could include constant coughing, skin infections such as rashes, blisters, boils, cold sores, impetigo (school sores) and injuries such as deep cuts to the hand.

Workplaces are keen on preventative measures to prevent infection and to prevent it passing on. For example, some workplaces offer the flu injection as immunisation against getting the flu.
Infection prevention

Infection prevention is about doing things that will stop germs and infections from being spread (carried) from one person to another person.

Good hygiene procedures helps cleaners to protect themselves (and other people, including their friends and family) from getting ill.

There are common precautions you can take to prevent infection being passed on.

- Frequently wash your hands, especially before touching your face, eyes, mouth or nose.
- Dry your hands well as wet hands more easily spread germs.
- Use gloves when handling anything that may be infected.
- Disinfect items that may be contaminated.
- Don’t share personal items such as cups, cutlery, hair brushes or towels.
- Avoid direct contact with an infected person.
- Use protective clothing such as gloves for contact with infected skin and body fluids.
- Use masks if you, or a person you are working with, has a respiratory illness like a cold or flu.
- Use a disposable tissue for nose blowing and for covering coughs or sneezes. Throw away the tissue and wash your hands.
- Never touch your eyes, mouth or nose with dirty hands or gloves as you may catch an infection.
- Cover broken skin and cuts with an adhesive dressing to prevent infection entering your body.

Remember, if you wash your hands correctly, you will destroy 99.9% of the germs you may have picked up.
Reporting breakdowns in infection control

A breakdown in infection control occurs if you or someone else (patient, staff member, visitor) is at risk of getting an infection because of something that happened while you were cleaning.

You must tell your supervisor or the facility manager. You will need to fill in an incident or accident report form.

Examples would be if you got some body fluids in your eye or you pricked or cut your finger on a used syringe.

All suspected infection outbreaks should be promptly notified to the local public health service who is responsible for disease control activities in partnership with infection control specialists.

Reporting incidents, accidents and injuries

Report incidents, accidents and injuries immediately to your supervisor, and follow your organisation’s policies and procedures which may include going to your doctor.

Fill in an accident, incident or report form, as required by your organisation.

STOP!

This completes the learning material for unit standard 29384 on applying generalised knowledge of infection prevention and contamination.

If you are doing unit standard 29389 on applying specialised knowledge, the rest of this learning guide is for you.
Standard precautions in health care facilities

Standard precautions are safe cleaning procedures that a cleaner must follow when cleaning in a health care facility. Standard precautions are the safest ways of cleaning to prevent spreading germs and infections.

Standard precautions help to keep all staff (cleaners, nurses, and care assistants), patients and visitors safe from catching germs and infections and getting sick.

Sick people, babies and the elderly often have lowered resistance to infection, which means they can get sick much more easily. By taking standard precautions it helps to keep the environment healthy so that patients are less likely to pick up another illness, infection, or disease because they are in hospital or a health care facility.

When outbreaks of infection in hospitals and health care facilities occur, it is often because standard precautions have not been followed.

Every health care facility and cleaning company must make sure that their cleaners use standard precautions when cleaning a health care facility.

Standard precautions include:

- hand hygiene.
- use of personal protective equipment (PPE).
- prevention of injury from sharp instruments and needles.
- cough and sneeze hygiene – covering your mouth and nose.
- covering broken skin.
- safe handling of patient care equipment.
- handling linen safely.
- safe waste disposal.
- cleaning procedures.

Key words

| standard precautions | safe cleaning procedures that a cleaner must follow when cleaning in a health care facility. |
Handling linen safely

If unsure, treat all linen as if it is contaminated.
Always wear gloves. If the linen is really dirty, wear an apron.
Always put dirty linen in the appropriate linen bag. Read the label carefully.
- Dirty linen is put in a white linen bag for washing.
- Contaminated linen is put in a yellow linen bag for washing.
- Infectious linen is linen that has blood on it and should be put in a red linen bag.

In hospitals, red is used to show that something is infectious. Infectious waste bags are usually red. Linen bags for blood soaked linen are red.

Do not mix up contaminated linen bags and contaminated waste bags. Both are usually yellow.

In an operating theatre, contaminated linen may include surgery towels, table sheets, wrappers and drapes.

A lot of theatre linen is disposable. Check with theatre staff what to do with it.

Used theatre clothes are normally put in the linen bag when you have finished cleaning.

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Handling contaminated linen

If unsure, treat all linen as if it is contaminated.

Always wear gloves. If the linen is really dirty, wear an apron.
Safe waste disposal

It is important to dispose of (throw away) certain things, such as rubbish and contaminated items, in an approved way. Always wear your PPE, including gloves. Always change your gloves after handling contaminated waste.

You need to be very careful when handling all rubbish because it and the human products that may be contained in it could be infected with germs that could make you ill.

The disposal methods given here are good general advice. You will also need to check your organisation’s policies and procedures for any more detailed advice or procedures that you are expected to follow.

There is a standard precaution for handling contaminated and hazardous waste.

Contaminated waste is rubbish that has something on it that could make you ill. The rubbish could be contaminated with chemicals or poisons, germs, or infected human products, for example, blood, urine, saliva or faeces.

Examples of contaminated waste include:

- a tissue that someone blew their nose on.
- used toilet paper.
- a used water bottle or half-eaten food.

Contaminated waste is sometimes called ‘hazardous waste’, which includes other waste as well. Hazardous waste examples include:

- sharps, like needles.
- ampoules – glass containers which have had medicine in them.
- broken glass.
- human products like urine, faeces, blood and body fluids.
- used drips and catheters.

Contaminated and hazardous wastes are put in yellow colour-coded bags. These may also be called biohazard bags.

Infectious waste bags are usually red and may be used for blood waste.

Always put the hazardous waste bags out for collection in the correct place. They must not be put in with general waste or rubbish.
Blood or body fluid spills

In most hospitals, nursing staff do the initial clean-up of human products, including blood spills. Cleaners may be asked to do a second clean using a disinfectant, to remove the residue or stain.

If you need to clean up a spill of human products follow this procedure.

- Always wear gloves.
- Wear safety glasses and/or a mask if there is a chance of human products splashing into your mouth or eyes.
- Wipe the area immediately with paper towels or toilet paper.
- Clean with warm water (or cold water in the case of blood) and detergent. Rinse the area with water and then dry the area thoroughly because wet areas attract contamination.

In some workplaces bleach solution may be used on the spill area after cleaning (especially if people are going to touch the area). If bleach is used, it must be rinsed off after 10 minutes and the area dried. This is because bleach can damage metal. Never pour bleach into hot water as the fumes are dangerous.

Dispose of all waste in a hazardous waste (yellow) bag.

If there is a large spill of blood or body fluid, tell your supervisor. Nursing staff are usually responsible for cleaning up larger spills.

Blood or body fluid splash

A splash is where blood or a body fluid makes contact with your skin or gets into your eyes, mouth or nose. If the splash occurs on broken skin, treat this as an injury.

If you are not wearing gloves and you touch a surface that may be contaminated, for example, a toilet seat, treat this as a splash.

1. Immediately rinse the area with running water. (To rinse an eye, hold your face under running water for several minutes, with the affected side down to prevent the water running into the other eye.)
2. Clean your skin with soap and water and/or alcohol-based hand rub.
3. Report the incident to your supervisor.
4. Follow your organisation’s policies and procedures which may include filling in an incident report form.
Handling sharps safely

If you find sharps, for example, needle, syringe with needle, ampoule, when you are cleaning, tell your supervisor or one of the nursing staff immediately. Usually a nurse or orderly will handle sharps.

If you have to handle sharps, put on gloves.

Use something to pick up the sharps, for example, tongs or forceps, or a brush and shovel. Do not use your bare hands.

Do not throw sharps in an ordinary rubbish bin. Place the sharps in the special sharps container, and throw the gloves away in a hazardous waste (yellow) bag.

Report any such hazardous waste to your supervisor.

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**Sharps container**

Anything sharp enough to penetrate skin, for example, a needle, has to be disposed of in a yellow safe ‘sharps’ container.

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If a syringe or a needle breaks your skin it is called a needle stick injury. Needle stick injuries can be serious because you may be in danger of getting an infection if the syringe is contaminated with infected human products.

If you are injured by a needle or other sharp item, you should:

- remove gloves if you are wearing them.
- allow the injury to bleed for a few seconds to remove any contaminants.
- rinse the area thoroughly with running water.
- clean the injury with soap and water, alcohol rub or a skin disinfectant such as iodine if it is available.

If you have a needle stick injury you should report it immediately. Tell your supervisor, the facility manager or an infection control person. Seek medical attention, as you may need a blood test.

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**Key words**

- needle stick
- a syringe or a needle breaks your skin
**Stringent infection control**

When cleaning, you must at the very least follow the standard precautions. However, in some special situations, standard precautions may not be enough to prevent the spread of infections. There are other procedures you may need to follow for stringent (very strict) infection control.

For example, you may need to follow stringent infection control procedures:

- when you are cleaning in an isolation room or ward.
- when you are cleaning the room of a person with an illness that you can catch by breathing the same air.
- when you are cleaning an operating theatre.

**Stringent infection control PPE**

Stringent infection control requires you use more PPE. Always wear gloves, a gown or scrubs, and a surgical mask if you are cleaning the room of a person who has one of these illnesses:

- MRSA (methicillin-resistant staphylococcus aureus).
- VRE (vancomycin-resistant enterococcus).

This is not a full list of illnesses. Check with your supervisor or an infection control nurse if you are not sure what illnesses require you to wear more PPE.

Always follow infection control signs and instructions on the door of the room. This will include what PPE you should wear.

Ask your supervisor or an infection control nurse if you are not sure what extra cleaning procedures you need to follow.

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**Key words**

| stringent infection control | procedures for strict infection control |
Special cleaning procedures

Some special cleaning procedures may be required in stringent cleaning areas.

There are different types of cleaning products. A cleaner should use the correct cleaning product for each job. Two main types of cleaning products are detergents and disinfectants.

A **detergent** breaks down dirt so it can be wiped or washed away easily. A detergent is used to clean dishes. A detergent does not kill germs.

A **disinfectant** is used to kill germs. A disinfectant is the correct cleaning product to use to minimise contamination and infection. Some cleaning products, for example, toilet cleaner, will have disinfectant in them.

Do not use hot or boiling water – it may stop the effectiveness of the product in dealing with germs and the fumes may be dangerous.

When you choose the correct cleaning product, also make sure that you use the correct amount. Follow the manufacturer’s instructions on the product.

If you don’t use enough cleaning product, the area will still be dirty.

If you use too much cleaning product, you may leave chemicals on the things you were cleaning. This could cause a hazard.

If you are not sure which cleaning product to use, check with your supervisor.

Change the water in your bucket regularly. If the water is dirty, the cleaning product may not work very well, and leave the area you have cleaned unsafe. Change the water for cleaning in different areas else you could carry germs from one place to another.

Microfibre cloths and mops are usually only put in the water once, then they are put out to be laundered.

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Always start in the clean areas and finish in the dirty areas. This way you will not carry germs from dirty areas to areas that are clean.
Examples of specialised site cleaning

The following pages are some examples of specialised cleaning for specific sites.

Your workplace may be different – you need to know what is applied for your workplace.

General hospital wards

When cleaning general wards wear your PPE and wash hands between tasks.

Take care with personal items belonging to patients and staff. Some patient property may be in hospital bags on the floor.

Clean and disinfect surfaces as required.

Sluice room

Sluice rooms are for human waste. Generally nursing staff will deal with human waste.

As a cleaner you are expected to clean and disinfect all the surfaces and the floor. Always wear your PPE.

Cleaning an isolation room

People with infectious diseases are generally isolated in single rooms or with other people with the same disease. These rooms are called isolation rooms or isolation wards.

If you are cleaning an isolation room or ward (called a terminal clean), check for instructions from your supervisor, an infection control nurse or the health care facility manager. Some health care facilities have special written instructions on how to clean an isolation room.

Cleaning usually requires all surfaces to be cleaned and any curtains removed for laundering.

When cleaning an isolation room, do not leave it halfway through the cleaning process. You could spread an infection from that room to the rest of the health care facility.

After you have finished cleaning an isolation room/ward always remove your personal protective equipment before you leave the room. Throw away all used disposable personal protective equipment in a hazardous waste bag.
Cleaning an operating theatre

Some hospital cleaners may be required to clean an operating theatre as part of their duties.

You must follow infection control procedures and standard procedures. Use single station equipment.

You must also take extra precautions when working in an operating theatre.

- Wash your hands regularly. Wash your hands between all cleaning tasks. Wash your hands between theatres.
- Change into theatre clothes before you enter operating theatre ‘clean areas’. The clean area may be marked by a red line that you cross.
- Wear disposable PPE.
- Don’t touch your mouth or eyes while you are cleaning.
- Maintain personal hygiene.
- You must wash your hands when moving from one operating theatre to another operating theatre.
- Change PPE between theatres or before cleaning in other areas. This stops you from spreading germs or infection from one area to another.
When cleaning an operating theatre

There is a lot of expensive equipment and furniture in an operating theatre. Clean carefully. Do not clean medical equipment or monitors.

Your workplace may be different – check what is done in your workplace. Check with your supervisor if you are unsure of what to clean or how to clean it.

- Check the operating theatre floor for human products. Nurses should have removed any human waste material, including blood. You will need to clean up the residue – the stain.
- Hazardous waste and sharps should have been removed. If not, report this to your supervisor. Bag and seal hazardous waste and sharps. Always change your gloves after handling hazardous waste.
- Bag contaminated and infectious linen in their correct waste bags.
- Rinse sinks and basins. Use a plughole brush for sink plug holes and overflows. Wipe the inside of the sinks or basin and the taps with a disinfectant solution.
- Wash, rinse, wipe down and dry all wall mounted equipment and horizontal surfaces. Starting from the top, damp wipe the operating lights, shelves, x-ray viewing box, tops of doors, window ledges and the room door, especially around the handle.
- Wash and wipe down non-technical equipment (see next page).
- Wash the floor with a disinfectant solution.
- Set up operating theatre with clean laundry bags and clean waste bags. Put new sharps containers in their holders.

Cleaning the operating table

You will need to clean the whole table. This includes the mattress and other parts used with it, for example, arm rests, stirrups.

Do not clean an item and then place it back on a surface that has not been cleaned.

- Clean a trolley to use to put the mattress on.
- Clean one side of the mattress and place the clean side on the clean trolley.
- Clean the other side of the mattress and complete cleaning the entire mattress.
- Clean the other parts of the operating table.

Replace the mattress and other items on the table when finished.
Cleaning non-technical equipment

Non-technical equipment includes the furniture in the operating theatre.

- Scrub all furniture with disinfectant solution. This includes trolleys, stools and chairs, mayo stands, drip stands and the operating table.
- Clean wheels and castors thoroughly to remove any waste.
- Wipe doors of cabinets, especially around handles and push plates.
- Wipe all kick buckets, racks, and waste bins with disinfectant solution.
- Dry all furniture with a clean dry cloth.

Operating theatre

Behind the operating table are a trolley and a mayo stand. The mayo stand is smaller and higher than a trolley.

Changing theatres

You must wash your hands when moving from one operating theatre to another operating theatre.

When you have finished cleaning one operating theatre change your PPE before moving to the next operating suite. Throw away disposable PPE in the general waste bin.

You should also change out of your clothes if they become contaminated by blood when you are cleaning. Put your used clothes into the contaminated linen bag for laundering.

If you are using disposable cleaning cloths or equipment, throw them away in the appropriate bag.

When you have finished your cleaning shift, remove and bag the used PPE.
Infection outbreaks

Infection outbreak management is an important and skilled role. The manager should hold an initial outbreak meeting, putting in place procedures to minimise the exposure to other residents, patients, staff and visitors. Cleaners need to follow directions from their manager and the infection control team.

Staff and residents or patients have a right to know about any outbreak of infectious disease, what to do to avoid infection and what to do if they display symptoms. Visitors must be told of any outbreak, preferably before they arrive, and signs and information placed at the entry door.

Some infections spread rapidly, especially when there are lots of people in confined surroundings and sharing common spaces and facilities, such as in rest homes and hospitals. Your role as a cleaner is crucial in preventing further spread of infection and controlling the outbreak.

It is important to know what the illness is and act quickly to contain infection. For an illness like flu, good personal hygiene, including hand hygiene, and thorough cleaning can slow the spread.

An example of an infection which requires management is norovirus.

Norovirus

Norovirus can be brought into an institution by a food handler, a staff member, a new resident or patient, or a short-term visitor. It is a dangerous, spreading rapidly. It is highly infectious and hardy, remaining in the environment for days.

Movement of people is restricted and people are confined to smaller areas, with infected people staying in their rooms.

The spread of infection needs to be tracked. For example, all those people who were seated at a common dining table. In cafeterias self-service of food is stopped. Bowls of fruit are removed and only peelable fruit is offered, like bananas and kiwifruit.

Access to the kitchen and food preparation areas is restricted to specific staff only. Food handlers are sent home if ill.

The following information draws heavily on the Ministry of Health’s Guidelines for the Management of Norovirus Outbreaks in Hospitals and Elderly Care Institutions

Published in January 2009 by the Ministry of Health, Wellington, New Zealand available at http://www.moh.govt.nz
Infection transmission

Person-to-person transmission occurs through the faecal–oral route either by manual contact or by exposure during faecal and vomiting accidents and by aerosol spread of germs in the air.

Norovirus requires detailed cleaning of all surfaces, especially those with hand contact such as telephones, handrails, handles of doors, walkers and wheelchairs. Wheelchairs wheels also must be cleaned, and carpets have to be steam cleaned.

Cross-contamination occurs when unhygienic hands move on to touch other things. ‘Risk’ activities resulting in hand contamination include:

- going to the toilet.
- cleaning toilets and bathrooms.
- handling potentially soiled clothes and bed linen.
- cleaning up after emetic (vomit) or faecal accidents.
- handling cleaning accessories such as cloths, buckets and mops.
- removing gloves.
- touching any surface in an isolation room of a norovirus case.
- touching surfaces that are subject to high levels of manual contact by patients, residents, staff and visitors such as rails and door knobs.

Reducing the risk

Like any hazard, the principles of elimination, isolation or minimisation apply. Some of these are the implemented by cleaners.

<table>
<thead>
<tr>
<th>Elimination</th>
<th>Isolation</th>
<th>Minimisation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Send staff with symptoms home immediately.</td>
<td>Cordon off vomit or faecal accident sites.</td>
<td>Practise thorough hand hygiene.</td>
</tr>
<tr>
<td>Disinfect high risk areas for environmental contamination.</td>
<td>Place cases in contact isolation.</td>
<td>Wear a gown and gloves to clean up vomit or faeces (and a mask for vomiting cases) and open windows and doors to direct air out of the building.</td>
</tr>
<tr>
<td>Clean and disinfect surfaces or areas contaminated with vomit or faeces.</td>
<td>Limit cases to dedicated toilet/bathroom.</td>
<td>Use aerosol spray after vomit or faecal accidents.</td>
</tr>
<tr>
<td>Steam clean carpets and soft furnishings contaminated by faeces or vomit.</td>
<td>Observe those that shared a room with a symptomatic case, for 72 hours after last contact with the case.</td>
<td>Limit staff contact with soiled clothing and bedding.</td>
</tr>
</tbody>
</table>
Personal protective equipment

Recommended protective equipment for cleaners includes:

- disposable gloves.
- a disposable gown/apron.
- a particulate respirator mask (N95) if in the presence of recent vomit or where aerosols may be generated (e.g., cleaning the toilet bowl).

Laundry workers should wear disposable gown, mask and gloves.

Practise good hand hygiene and wear gloves. Gloves and hands may transfer microbes to other surfaces. Hands must be washed after handling of contaminated items and after removal of gloves.

Dispose of masks, gloves and aprons in biohazard bags.

Cleaning products

Household bleach is a high-level disinfectant which kills norovirus. To work properly, bleach disinfectant needs:

- enough time to kill – at least 30 minutes contact time.
- sufficient strength or concentration.
- a surface free of organic material such as vomit or faeces.

Make up a fresh solution of the bleach each day. The recommended concentration of bleach disinfectant is 1000 ppm (0.1%) sodium hypochlorite.

An alternative is 1% Virkon.

Cleaning equipment and methods

Use disposable cloths for general areas and separate colour-coded clothes for cleaning higher risk areas such as toilets and bathrooms. Discard after use and dispose of them in a biohazard bag.

Soak reusable mops in 0.1% bleach solution and hot launder them.

Do not machine buff contaminated areas or dry vacuum carpets and soft furnishings as vacuuming can suspend the virus in the air.
Cleaning toilets

Use of shared and public facilities like toilets and bathrooms requires extra vigilance. Clean both staff and public toilets every two hours during an outbreak. Pay close attention to toilet seats, bowls, toilet paper dispensers, door handles and latches, taps and handles. Provide paper towels for people to open doors with.

Cleaning up vomit and faeces

Vomiting carries a risk to cleaners as the virus is in the air. Restrict access to the area for at least 30 minutes.
Clean up by removing soiled clothing in yellow coloured linen bag.
If possible, remove soiled furniture to a safe and isolated place for thorough cleaning.
Where there are faeces, first clean the soiled area with detergent and hot water, using a disposable cloth, to remove all organic matter. Then disinfect with bleach.
Disinfect the contaminated and surrounding areas with 0.1% bleach or 1% Virkon.

Cleaning rooms

Clean an ill person’s room thoroughly at least daily.
Clean surfaces using bleach or Virkon and disposable cloths.
Contaminated curtains, soiled linen and soiled clothes should be hot washed. Place the linen in a yellow colour-coded linen bag to warn of contamination.
Replace linen and waste bags at least daily.
Once the person has recovered or been moved from their room, do a thorough clean of soft furnishings and carpets.
Furnishings can be placed outside in the sun to assist disinfection.
Clean contaminated soft chairs and mattresses (that are not bleach resistant) first with hot water and detergent, then steam clean them.
Carpets should be steam cleaned.
## Glossary

### Key words

<table>
<thead>
<tr>
<th>Term</th>
<th>Definition</th>
</tr>
</thead>
<tbody>
<tr>
<td>contaminated waste</td>
<td>rubbish that has something on it that could make you ill</td>
</tr>
<tr>
<td>contamination</td>
<td>something that is dirty, unsafe, unhealthy, poisonous or dangerous</td>
</tr>
<tr>
<td>cross-contamination</td>
<td>the spreading of germs or infection from one person to another person, from one thing to another thing, or from one area to another area</td>
</tr>
<tr>
<td>hazardous waste</td>
<td>includes sharps, broken glass, human products and contaminated waste like used drips</td>
</tr>
<tr>
<td>standard precautions</td>
<td>safe cleaning procedures that a cleaner must follow when cleaning in a health care facility.</td>
</tr>
<tr>
<td>stringent infection control</td>
<td>procedures for strict infection control</td>
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