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Establishing a new standard method to assess the effectiveness and improve the environmental cleaning and disinfection in an acute district general hospital

Michael Mark Dalavidao

King's College Hospital NHS Foundation Trust, UK

Abstract:

Introduction

Environmental cleaning and disinfection is paramount in minimising and preventing hospital acquired infections. One of the most important responsibilities of healthcare facilities is to ensure high standards of the environmental cleaning and disinfection. However, there is a lack of standard process to check and assess cleaning effectiveness.

Methods

A quality improvement model based on Plan Do Study Act (PDSA) Cycle approach was utilised for this project. Process mapping, stakeholder analysis and a driver diagram were undertaken to understand the current practice. A questionnaire was developed for cleaning staff in the hospital in order to understand and establish their current knowledge and practice. This survey helped to identify gaps and establish the focus of the intervention. An invisible fluorescent marker gel was used as the method of assessment in conjunction with the traditional visual inspection, feedback and education. Ten high touch areas around the patient's bed space were identified where the fluorescent gel was applied and these were checked using a portable ultraviolet light by the author and later on the project he was joined by the zonal managers from the cleaning team at a weekly to twice weekly intervals. The expectation is that the gel must be either partially (at least three quarters of the gel) or completely removed for the surface to be considered clean.

Results

The survey showed that there is a need for further training among the cleaning staff and they feel that their role is not valued in the clinical area, hence morale is quite low. At the initiation of the new assessment method in February 2021, compliance with the cleaning and disinfection standard was 27%. Weekly to twice weekly assessment, education and feedback was commenced. At the end of the implementation phase, the compliance had increased to 91%. In addition, the cleaning staff morale had increased and they now feel more valued and appreciated. This is demonstrated by the improvement in quality of cleaning they have consistently delivered throughout the duration of the project.

Conclusion

The introduction of the fluorescent marker gel and the portable UV light, in conjunction with visual inspection, training and feedback has improved and sustained the quality of environmental cleaning and disinfection.

Biography:

Mark is currently working as a Band 8a Modern Matron in Infection Prevention and Control at King's College hospital NHS Foundation Trust. He is a member of the Scientific programme Committee of the Infection Prevention Society UK. He is also one of the current Regional Board of Director for London Region for the Filipino Nurses Association -UK (FNAUK). The Association was founded on the 2nd July 2020 in the midst of the COVID-19 pandemic to provide a forum for Filipino nurses in the UK to network and discuss issues of collective interest that have an effect on all of us, including signposting individual members to the right place if they have specific issues that need to be addressed. As an IPC Nurse Specialist he was given a once in a lifetime opportunity to contribute in a national level during the COVID 19 pandemic. Together with the other IPC specialists they managed the London Nightingale Hospital during the 1st and 2nd wave of the pandemic.

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