

Service Priorities and Programmes Electronic Presentations

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Environmental decontamination in busy wards? Yes, WE CAN

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Introduction

Health care settings are complex environments that contain a large diversity of microbial flora, many of which may constitute a risk to the clients/patients/residents, staff and visitors in the environment. Health care-associated infections are infections that occur as a result of health care interventions in any health care setting where care is delivered. High-touch environmental surfaces of the health care setting hold a greater risk, due to the nature of activity performed in the health care setting, which increases the likelihood of direct and indirect contact with contaminated surfaces. The environment around the patient influences the incidence of infection in hospitals and other health care settings. Reducing the numbers of microorganisms from the health care environment is accomplished by cleaning and disinfection. It's a big challenge for the health care workers to complete the environmental cleaning daily/twice a day for infectious cases in busy wards. (Guideline on Environmental Decontamination in Clinical Areas 2016)

Objectives

To follow the Guideline on Environmental Decontamination in Clinical Areas 2016, accomplish the environmental cleaning daily/twice a day for infectious cases.

Methodology

In order to minimize the infection risk and enhance the standard of environmental cleaning, DTBC collaborated with Support service of Administration department to form a cleansing support team. The team was under supervision by the hospital foreman office and provide cleansing duties in DTBC. An agreed job description was set and briefed to the supporting staff. The supporting staff would follow the checklist to perform the environmental cleansing. The checklist not only served as a guide to the supporting staff, also enhance the monitoring by the supervisors. As the project was run inter-departments, clear lines of communication was also maintained.

<u>Result</u>

The environmental cleansing in DTBC was more enhanced to reduce the numbers of microorganisms in the environment.

Environmental inspection and surprise check were carried out to monitor the performance of supporting staff. It was also evidence by the report on the bacteriological surveillance from Infection Control Nurse.

Patient care was enhanced as the Patient Care Assistants did not engage in the cleansing duties. Staff job satisfaction was increased. There are effective working relationships between the clinical department, infection control team and support service in WTSH.