

Non-hospital Medical and Surgical  
Facilities Accreditation Program

**ACCREDITATION STANDARDS**

Environmental Cleaning of  
the Medical Device  
Reprocessing Department  
(MDRD)

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## Introduction

A comprehensive and effective environmental cleaning program is essential to providing and maintaining a safe, clean and hygienic environment for patients and staff.

The environmental cleaning expectations of non-hospital facilities are set out in the following four accreditation standards:

- *Environmental Cleaning Program and Non-Clinical Areas*
- *Environmental Cleaning of Operating/Procedure Rooms and Sterile Core*
- *Environmental Cleaning of Pre- and Post-anesthesia Care Areas*
- *Environmental Cleaning of the Medical Device Reprocessing Department*

These standards reflect provincial and national standards, guidelines, and best practices for environmental cleaning of health-care settings and were developed in consultation with a qualified infection prevention and control (IPAC) professional and epidemiologist. The cleaning schedules specified in this standard set the minimum requirements for all non-hospital facilities and reflect standards, guidelines and best practice for environmental cleaning of health-care settings and/or the expertise of a qualified IPAC professional utilizing the risk stratification matrix premised on typical non-hospital operations and a less susceptible (i.e., healthy) patient population.

As these standards outline all the steps and considerations for a comprehensive and effective environmental cleaning program, non-hospital facilities should find these standards useful in developing and updating their environmental cleaning program including their policies, procedures and checklists.

Non-hospital facilities are required to be in conformance with all four of the environmental cleaning standards.

## Environmental cleaning of the medical device reprocessing department (MDRD)

No.	Description	Reference	Risk	Change	Asmt.
<b>ECM1.0</b>	<b>ENVIRONMENTAL CLEANING OF THE MEDICAL DEVICE REPROCESSING DEPARTMENT (MDRD)</b>				
<b>ECM1.1</b>	<b>Environmental cleaning staff are appropriately trained and demonstrate best infection prevention and control practices.</b>  Guidance: Correct and consistent use of good infection prevention and control practices minimizes the risk of infectious disease transmission and protect staff, patients and visitors.				
ECM1.1.1	<b>M</b> Environmental cleaning staff who clean the medical device reprocessing department (MDRD) have completed specific training on the cleaning and disinfection of this specialized areas.  Guidance: See the NHMSFAP’s Environmental Cleaning Program and Non-Clinical Areas accreditation standard.	1,2,4,5	M	Revised	P, F
ECM1.1.2	<b>M</b> Environmental cleaning staff who clean the MDRD are appropriately attired.  Guidance: Surgical attire including hair coverings is worn. Shoes are visibly clean and should be dedicated for use within the perioperative area or shoe covers worn. This attire is donned in a designated area before entry into the semi-restricted area(s).	1, 2	H		F
ECM1.1.3	<b>M</b> Environmental cleaning staff who clean the MDRD perform hand hygiene at essential moments.  Guidance: Hand hygiene is performed before initial contact with the patient environment, before donning gloves, after contact with the patient environment and after glove removal. Also see the BC Ministry of Health	1, 2, 4, 5, 12	M		F

No.	Description	Reference	Risk	Change	Asmt.
ECM1.1.4	<p><b>M</b> Environmental cleaning staff who clean the MDRD don the appropriate PPE.</p> <p>Guidance: Cleaning and disinfection products must be used in accordance with safety data sheets. PPE is worn for protection from micro-organisms, for protection from chemicals used in environmental cleaning and for prevention of transmission of microorganisms from one patient environment to another. Gloves are selected based on the task, area and specifications in the safety data sheet for the chemical agent being used. Household utility gloves are not acceptable for cleaning and disinfecting any clinical areas or public washrooms. Gloves are single use, for a single task. When cleaning the decontamination area, PPE worn includes an impervious gown and either an impervious full-face shield or impervious face mask and protective eyewear. When cleaning the preparation and sterile areas, PPE worn includes a cover gown. Also see the NHMSFAP Routine Practices and Additional Precautions and Occupational Health and Safety accreditation standards.</p>	1,2,4,5,6	H		F
<b>ECM1.2</b>	<b>Cleaning and disinfectant products are appropriately selected and prepared.</b>				

No.	Description	Reference	Risk	Change	Asmt.
ECM1.2.1	<p><b>M</b> The disinfectant used has a Health Canada drug identification number (DIN).</p> <p>Guidance: A health-care grade disinfectant must be used. These include but are not limited to, improved hydrogen peroxide, peracetic acid, quaternary ammonium compounds, sodium dichloroisocyanurate (NaDCC) and sodium hypochlorite. Skin antiseptics should never be used as environmental disinfectants (e.g., alcohol-based hand rub or small alcohol pads used for antisepsis prior to vaccine) as they are not designed for this purpose and will not be effective. <b>Green products such as vinegar, lemon juice, baking soda and tea tree oil do not have a DIN number and therefore are not an appropriate disinfectant.</b> In consultation with the facility’s occupational health and safety program representative(s), the IPAC lead is responsible for approving the environmental cleaning products and equipment used. PICNet’s BC Best Practices for Environmental Cleaning for Prevention and Control of Infections in All Healthcare Settings and Programs outlines the advantages and disadvantages of common health-care disinfectants and sporicides used for environmental cleaning. See the NHMSFAP’s Infection, prevention and control (IPAC) Program, Occupational Health and Safety and Environmental Cleaning Program and Non-Clinical Areas accreditation standards.</p>	1,2, 4, 5, 9, 10	H		P, F
ECM1.2.2	<p><b>M</b> Cleaning and disinfectant products are used in accordance with their manufacturer’s instructions for use (MIFU).</p> <p>Guidance: Disinfectants need to be used in accordance with the dilution and contact time specified by the MIFU. Some disinfectants come ready-to-use, while others require dilution and possibly testing with chemical test strips to confirm its concentration before use. If dispensing systems are used, they need to be regularly tested to ensure proper functioning (e.g. test strips, calibration). Automated dispensing systems and ready-to-use (RTU) disinfectants that require no mixing are preferable where appropriate as they mitigate the safety risks of mixing disinfectants.</p>	1, 2, 4, 5, 7	H		F

No.	Description	Reference	Risk	Change	Asmt.
ECM1.2.3	<b>M</b> Cleaning and disinfectant products are used within their labelled expiration date.	1, 2	H		F
ECM1.2.4	<b>M</b> Cleaning and disinfectant products in large-format containers are dispensed into clean, dry, disinfected, appropriately sized bottles.	4	H		F
ECM1.2.5	<b>M</b> Cleaning and disinfectant product containers are properly labelled.  Guidance: This includes products dispensed into smaller bottles. See the NHMSFAP's Occupational Health and Safety accreditation standard.	2, 4, 5, 10	H		P, F
ECM1.2.6	<b>M</b> Cleaning and disinfectant product containers are not topped up.	4, 5	H		F
ECM1.2.7	<b>M</b> The cleaning and disinfectant products used are compatible with the items and equipment being cleaned and disinfected.  Guidance: The MIFU of the disinfectant provides a description of its recommended use (i.e. hard non-porous surfaces in medical facilities, operating room tables and lights, external surfaces of glucose meters). If the equipment MIFU does not specify a Health Canada approved health-care grade disinfectant, then the equipment manufacturer is contacted to provide written direction.	1, 4, 5, 7	M		P, F
<b>ECM1.3</b>	<b>Cleaning and disinfection practices result in effective reduction of microbial contamination within the environment.</b>				
ECM1.3.1	<b>M</b> Cleaning equipment used in the dirty MDRD room is dedicated to the dirty MDRD room.	1	H	NEW	P, F
ECM1.3.2	<b>M</b> Cleaning equipment used for the cleaning and disinfection of the MDRD is not used in other areas of the facility.  Guidance: There should be a housekeeping closet dedicated to the MDRD (best practice).	1	H	NEW	F

No.	Description	Reference	Risk	Change	Asmt.
ECM1.3.3	<p><b>M</b> Cleaning materials are gathered before entering the room.</p> <p>Guidance: Cleaning materials to be gathered may include chemicals, equipment, supplies and checklists.</p>	4, 5	L	NEW	F
ECM1.3.4	<p><b>M</b> Cleaning carts do not enter the various rooms of the MDRD.</p> <p>Guidance: The cleaning cart is left outside the room and environmental cleaning personnel enter with only the necessary supplies and equipment.</p>	2	M	NEW	F
ECM1.3.5	<p><b>M</b> There is appropriate and sufficient equipment and supplies to perform effective cleaning and disinfection.</p> <p>Guidance: The environmental cleaning equipment and supplies (e.g. mops, cloths) used must be compatible with the disinfectant used (e.g. equipment MIFU recommended disinfectant). Some reusable cloth materials are incompatible with quaternary ammonium compounds, where the active ingredient binds to the cloth "quat binding." Reusable cloths are low-tinting and all cloths and wipes (reusable and disposable, single-use) used are large enough to provide sufficient fluid transfer to meet MIFU contact time.</p>	1, 4	H	NEW	P, F
ECM1.3.6	<p><b>M</b> Cleaning equipment and supplies are designed for use in health-care settings.</p> <p>Guidance: Equipment and supplies designed for residential use are not used. Cleaning equipment, including microfiber cloths and mop heads, is designed for professional, health-care use and sourced through a health-care vendor.</p>	2	H	NEW	P, F
ECM1.3.7	<p><b>M</b> Cleaning cards and/or checklists are used.</p> <p>Guidance: Cleaning cards and/or checklists can either be carried on the cleaning cart and/or posted in each room/area. The cards/checklists are laminated.</p>	1, 2, 5	H		P, F

No.	Description	Reference	Risk	Change	Asmt.
ECM1.3.8	<p><b>M</b> Cleaning is performed before disinfection.</p> <p>Guidance: The item or surface must be free of visible soil as organic or other matter (e.g. adhesive) interferes with the effectiveness of the disinfectant. Several new wipes or clean cloths may be needed to clean heavily soiled areas before proceeding with disinfection. <b>Disinfectants are not to be used for general cleaning unless the product label claims it can be used as a cleaner/disinfectant.</b> When items or surfaces are visibly soiled, a cleaning wipe is used to remove soil, followed by a second (new) wipe for disinfection, <b>even when a one-step product is used. One-step cleaning and disinfection is performed ONLY on visibly clean surfaces.</b></p>	1, 2, 4, 5, 7	H		F
ECM1.3.9	<p><b>M</b> Cleaning and disinfection proceeds from clean to dirty areas.</p> <p>Guidance: The room/area is cleaned working from clean to dirty areas. Cleaning from the cleanest to dirtiest area prevents spread of contaminants and mitigates the risk of cross-contamination. Clean and disinfect the floor last.</p>	1, 2, 4, 5, 6, 7	H		F
ECM1.3.10	<p><b>M</b> Cleaning and disinfection proceeds from low-frequency touch to high-frequency touch surfaces.</p> <p>Guidance: The room/area is cleaned working from low-frequency touch to high-frequency touch surfaces. Cleaning from the low-frequency to high-frequency touch surfaces prevents spread of contaminants and mitigates the risk of cross-contamination</p>	2	H	NEW	F
ECM1.3.11	<p><b>M</b> Cleaning and disinfection proceeds from the high to the low areas.</p> <p>Guidance: The room/area is cleaned working from high to low areas. Cleaning from high to low areas allows for cleaning of contaminants that may fall from high to low surfaces and mitigates the risk of cross-contamination.</p>	1, 2, 4, 5, 6, 7	H		F
ECM1.3.12	<p><b>M</b> Fresh cloths are used for cleaning and disinfecting each room.</p>	4, 5	H		F

No.	Description	Reference	Risk	Change	Asmt.
ECM1.3.13	<b>M</b> Cleaning solutions are changed frequently in accordance with manufacturer's instructions for use, when visibly soiled and immediately after cleaning blood and body fluids.	4, 5, 6, 7	H		F
ECM1.3.14	<b>M</b> Turbulent cleaning techniques are not used.  Guidance: Activities that create turbulence spread micro-organisms in the environment. Turbulent techniques include practices such as shaking a mop/cloth or using a spray delivery system. Applying chemicals by aerosol or trigger sprays can also result in eye injuries or induce or compound respiratory problems or illness (therefore respiratory/eye protection is required). A pour bottle can be used to apply chemical solutions.	1, 2, 4, 5, 6, 7	H		F
ECM1.3.15	<b>M</b> Chemical solutions are appropriately applied.	1, 2, 4, 5, 7	H		F
ECM1.3.16	<b>M</b> Only clean cloths are dipped into the chemical solution.  Guidance: Double dipping a cloth into a cleaning or disinfectant solution can introduce contaminants which attach to the cloth and spread throughout the environment being cleaned.	1, 2, 4, 5, 7	H		F
ECM1.3.17	<b>M</b> Only reusable cloths are dipped into the chemical solution.  Guidance: Disposable, single use wipes are not re-wet by dipping them in the chemical solution.	2	H		F
ECM1.3.18	<b>M</b> Reusable cloths are changed and disposable, single-use wipes discarded when they are no longer wet enough to allow for appropriate contact time.  Guidance: Contact time (also known as dwell or wet time) is the time a disinfectant should remain wet on a surface to kill that micro-organisms that are in the claim label. If the contact time is not met, the surface has not been effectively disinfected. Contact times can be found on the disinfectant label and can vary widely between disinfectants.	2, 4, 5	H		F

No.	Description	Reference	Risk	Change	Asmt.
ECM1.3.19	<b>M</b> Reusable cleaning cloths and disposable, single-use wipes are changed when moving from a dirty to a clean area.	4, 5	H		F
ECM1.3.20	<b>M</b> Reusable cloths are changed and disposable, single use wipes discarded when visibly soiled.	2	H		F
ECM1.3.21	<b>M</b> A clean side of a reusable cleaning cloth is used for each different surface.  Guidance: Cloths/wipes are changed when they are visibly soiled and when they have been used to clean an item/surface (i.e. when they have left the surface). One side of a reusable cloth is used to clean an item/surface (e.g. counter). The second side of a reusable cloth is used to continue to clean the same item/surface (e.g. counter). Once both sides have been used and/or the cloth is visibly dirty, the cloth is changed. The same cloth cannot be used to clean two different items/surfaces (e.g. counter then sink).	4, 5	H		F
ECM1.3.22	<b>M</b> Disposable, single use cleaning materials are discarded when they leave a surface and replaced with a new wipe if needed.  Guidance: Disposable, single use wipes are discarded after they leave a surface or when they are no longer wet enough to meet the contact (wet) time on the instructions.	2, 4, 5, 7	H		F

No.	Description	Reference	Risk	Change	Asmt.
ECM1.3.23	<p><b>M</b> The surface being disinfected remains wet for the contact time specified on the disinfectant label.</p> <p>Guidance: Contact time (also known as dwell or wet time) is the time a disinfectant should continuously remain wet on a surface to kill the micro-organisms that are on the claim label. If the contact time is not met, the surface has not been effectively disinfected. Several wipes may be required to meet the contact time. Contact times can be found on the disinfectant label and can vary widely between disinfectants. <b>Facility policy and procedures should specify the number of wipes per surface area needed to ensure surface wetness for the duration of the contact time specified by the disinfectant MIFU.</b></p>	1, 2, 4, 5, 7	H		F
ECM1.3.24	<p><b>M</b> The surface being disinfected is allowed to air dry.</p> <p>Guidance: Wiping off a disinfectant may negate its effectiveness. If the MIFUs specify rinsing, then the surface is rinsed following the required continuous surface contact time (i.e. wet or dwell time).</p>	4, 7	H		F
ECM1.3.25	<p><b>M</b> Soiled reusable cleaning materials are clearly segregated from unsoiled cleaning materials.</p> <p>Guidance: Cleaning carts have a clear separation between clean (unused) and soiled (used) cleaning materials. Used cleaning items are considered contaminated and cannot be placed in a location where they could cross-contaminate the environment, or clean cleaning cloths/tools. Soiled reusable cleaning materials are placed in a designated container (i.e. a cleanable container with lid that is clearly marked as “soiled”).</p>	1, 2, 4, 5	H		F
ECM1.3.26	<p><b>M</b> Only damp mopping is used.</p> <p>Guidance: Dry mopping is never used. Damp mopping can be performed with chemically treated mop heads.</p>	1	H		F

No.	Description	Reference	Risk	Change	Asmt.
ECM1.3.27	<p><b>M</b> Only clean mop heads are dipped into the chemical solution.</p> <p>Guidance: Soiled and/or disposable, single-use mop heads are not dipped into the disinfectant solution (i.e. no "double-dipping"). Disinfection options that mitigate risks of contamination include cloths with prepared disinfectant or commercially pre-prepared (ready-to-use) wipes saturated with an appropriate disinfectant product which are discarded after use.</p>	1, 2, 4, 5, 7	H		F
ECM1.3.28	<p><b>M</b> Only reusable mop heads are dipped into the chemical solution.</p> <p>Guidance: Disposable, single use mop heads are not re-wet by dipping them in the chemical solution.</p>	1, 2	H		F
ECM1.3.29	<p><b>M</b> Reusable mop heads are changed and disposable, single use mop heads discarded when visibly soiled.</p>	1, 2	H		F
ECM1.3.30	<p><b>M</b> Disposable, single use mop heads are discarded when they leave the floor and replaced with a new wipe if needed.</p> <p>Guidance: Disposable, single use mop heads are discarded after they leave the floor or when they are no longer wet enough to meet the contact (wet) time on the instructions. Mop heads are used in a single room or patient bay and then discarded or replaced before moving to another room or patient bay.</p>	2, 4, 5	H		F
ECM1.3.31	<p><b>M</b> Reusable mop heads and disposable, single-use mop heads are changed when moving from a dirty to a clean area.</p>	4, 5	H		F

No.	Description	Reference	Risk	Change	Asmt.
ECM1.3.32	<p><b>M</b> The floor being disinfected remains wet for the contact time specified on the disinfectant label.</p> <p>Guidance: Contact time (also known as dwell or wet time) is the time a disinfectant should continuously remain wet on a surface to kill the microorganisms that are on the claim label. If the contact time is not met, the surface has not been effectively disinfected. Several wipes may be required to meet the contact time. Contact times can be found on the disinfectant label and can vary widely between disinfectants. <b>Facility policy and procedures should specify the number of wipes per surface area needed to ensure surface wetness for the duration of the contact time specified by the disinfectant MIFU.</b></p>	1, 2, 4, 5, 7	H		F
ECM1.3.33	<p><b>M</b> The floor being disinfected is allowed to air dry.</p> <p>Guidance: Wiping off a disinfectant may negate its effectiveness. If the MIFUs specify rinsing, then the surface is rinsed following the required continuous surface contact time (i.e. wet or dwell time).</p>	4, 7	H		F
ECM1.3.34	<p><b>M</b> Mop heads are changed after each use in each MDRD area.</p> <p>Guidance: Mop heads are changed after each clean. Mop heads are changed between each room or space being cleaned.</p>	1, 4, 5, 6	H		F
ECM1.3.35	<p><b>M</b> Cleaning solutions are appropriately disposed of.</p> <p>Guidance: Cleaning solutions should be disposed in accordance with their safety data sheet using the housekeeping closet utility/floor sink. <b>Hand hygiene sinks are not used to dispose of cleaning solutions.</b></p>	1, 4, 5	H		F
<b>ECM1.4</b>	<b>A safe, functional and visibly clean environment is provided for medical device reprocessing</b>				
	<b>GENERAL</b>				

No.	Description	Reference	Risk	Change	Asmt.
ECM1.4.1	<p><b>M</b> Medical device reprocessing department (MDRD) cleaning follows a specific documented process.</p> <p>Guidance: A standardized approach ensures all surfaces are optimally cleaned and disinfected.</p>	1, 4, 5, 6	H		P, F
ECM1.4.2	<p><b>M</b> Cleaning cards and/or checklists list all the things in the MDRD to be cleaned.</p> <p>Guidance: Cleaning cards and/or checklists can either be carried on the cleaning cart and/or posted in each room/area. The cards/checklists are laminated.</p>	1, 2, 5	H		P, F
ECM1.4.3	<p><b>M</b> The clean work areas are cleaned and disinfected before the dirty work areas.</p> <p>Guidance: Clean work areas include preparation and packaging, sterilization and clean and sterile storage areas. Dirty work areas include decontamination and case cart areas.</p>	1, 7	H		F
ECM1.4.4	<p><b>M</b> Counters and workstations in all areas of the MDRD are visibly clean.</p> <p>Guidance: The MDRD is free of all visible soil including dust. In addition to daily cleaning, the MDRD is cleaned when visible soiled and immediately following a spill.</p>	1	H		P, F
ECM1.4.5	<p><b>M</b> All areas of the MDRD are free of clutter.</p>	4, 5	H	NEW	P, F
ECM1.4.6	<p><b>M</b> MDRD equipment surfaces in the MDRD are visibly clean.</p>	4, 5	H	NEW	P, F
ECM1.4.7	<p><b>M</b> All horizontal surfaces in the clean room are damp dusted at the start of each procedural day.</p>	7	H	NEW	P, F

No.	Description	Reference	Risk	Change	Asmt.
ECM1.4.8	<p><b>M</b> The daily cleaning schedule is followed.</p> <p>Guidance: Daily cleaning is performed as outlined in facility policy and procedures and documented in a log.</p>	1	H	NEW	P, F
ECM1.4.9	<p><b>M</b> Daily cleaning is documented.</p> <p>Guidance: Daily cleaning is performed as outlined in facility policy and procedures and documented in a log.</p>	1	M	NEW	P, F
<b>CLEAN MDRD ROOM</b>					
ECM1.4.10	<p><b>M</b> Terminal/end of day cleaning commences after all garbage is removed from the clean MDRD room.</p> <p>Guidance: Waste is removed in accordance with the NHMSFAP’s Waste Management accreditation standard, and facility policy and procedures.</p>	4, 5, 6, 7, 8	H	NEW	F
ECM1.4.11	<p><b>M</b> Terminal/end of day cleaning commences after all recyclables are removed from the clean MDRD room.</p>	4, 5, 6, 7, 8	H	NEW	F
ECM1.4.12	<p><b>M</b> After collecting and removing all waste, recycling and contaminated linen from the clean MDRD room, environmental cleaning staff remove gloves, perform hand hygiene and don clean PPE before commencing cleaning and disinfection.</p>	1, 4, 5	H		F
ECM1.4.13	<p><b>M</b> Terminal/end of day cleaning of the clean MDRD room includes counters and workstations.</p>	1, 7	H		F
ECM1.4.14	<p><b>M</b> Terminal/end of day cleaning of the clean MDRD room includes the pass-through window.</p>	7	H	NEW	F
ECM1.4.15	<p><b>M</b> Terminal/end of day cleaning of the clean MDRD room includes task and magnification lighting.</p>	7	H	NEW	F

No.	Description	Reference	Risk	Change	Asmt.
ECM1.4.16	<b>M</b> Terminal/end of day cleaning of the clean MDRD room includes the instrument air and outlet.	7	H	NEW	F
ECM1.4.17	<b>M</b> Terminal/end of day cleaning of the clean MDRD room includes the cooling racks/carts.	1	H	NEW	F
ECM1.4.18	<b>M</b> Terminal/end of day cleaning of the clean MDRD room includes the hand hygiene sink.  Guidance: This is in addition to any regular cleaning performed throughout the day. Sinks are cleaned from the least contaminated area to the most contaminated area. Taps are to be cleaned first. It is recommended that three different cloths be used: 1) to clean the tap, 2) to clean the sink and 3) to clean the area around the tap and sink.	1, 5	H		F
ECM1.4.19	<b>M</b> Terminal/end of day cleaning of the clean MDRD room includes waste containers.	1	H	NEW	F
ECM1.4.20	<b>M</b> Terminal/end of day cleaning of the clean MDRD room includes recycling containers.	1	H	NEW	F
ECM1.4.21	<b>M</b> Terminal/end of day cleaning of the clean MDRD room includes anti-fatigue mats.  Guidance: The mats are lifted and cleaned daily and when fluid accumulates under or around the mat.	1, 4, 5	H	NEW	F
ECM1.4.22	<b>M</b> Terminal/end of day cleaning of the clean MDRD room includes the floor.  Guidance: Floors are cleaned daily and more frequently if visibly soiled and immediately following a spill.	1, 7	H		F
<b>DIRTY MDRD ROOM</b>					

No.	Description	Reference	Risk	Change	Asmt.
ECM1.4.23	<p><b>M</b> Terminal/end of day cleaning commences after all garbage is removed from the dirty MDRD room.</p> <p>Guidance: Waste is removed in accordance with the NHMSFAP's Waste Management accreditation standard, and facility policy and procedures.</p>	4, 5, 6, 7, 8	H	NEW	F
ECM1.4.24	<p><b>M</b> Terminal/end of day cleaning commences after all recyclables are removed from the dirty MDRD room.</p>	4, 5, 6, 7, 8	H	NEW	F
ECM1.4.25	<p><b>M</b> Terminal/end of day cleaning commences after all contaminated linen is removed from the dirty MDRD room.</p>	4, 5, 6, 7, 8	H	NEW	F
ECM1.4.26	<p><b>M</b> After collecting and removing all waste, recycling and contaminated linen from the dirty MDRD room, environmental cleaning staff remove gloves, perform hand hygiene and don clean PPE before commencing cleaning and disinfection.</p>	1, 4, 5	H		F
ECM1.4.27	<p><b>M</b> Terminal/end of day cleaning of the dirty MDRD room includes counters and workstations.</p>	1, 4, 6, 7, 8	H		F
ECM1.4.28	<p><b>M</b> Terminal/end of day cleaning of the dirty MDRD room includes the pass-through window.</p>	7	H	NEW	F
ECM1.4.29	<p><b>M</b> Terminal/end of day cleaning of the dirty MDRD room includes the hand hygiene sink.</p> <p>Guidance: This is in addition to any regular cleaning performed throughout the day. Sinks are cleaned from the least contaminated area to the most contaminated area. Taps are to be cleaned first. It is recommended that three different cloths be used: 1) to clean the tap, 2) to clean the sink and 3) to clean the area around the tap and sink.</p>	1, 5	H		F

No.	Description	Reference	Risk	Change	Asmt.
ECM1.4.30	<p><b>M</b> Terminal/end of day cleaning of the dirty MDRD room includes the decontamination sinks.</p> <p>Guidance: This is in addition to any regular cleaning performed throughout the day. Sinks are cleaned from the least contaminated area to the most contaminated area. Taps are to be cleaned first. It is recommended that three different cloths be used: 1) to clean the tap, 2) to clean the sink and 3) to clean the area around the tap and sink.</p>	1, 5	H		F
ECM1.4.31	<p><b>M</b> Terminal/end of cleaning of the dirty MDRD room includes case carts.</p>	1	H	NEW	F
ECM1.4.32	<p><b>M</b> Terminal/end of day cleaning of the dirty MDRD room includes waste containers.</p>	1	H	NEW	F
ECM1.4.33	<p><b>M</b> Terminal/end of day cleaning of the dirty MDRD room includes recycling containers.</p>	1	H	NEW	F
ECM1.4.34	<p><b>M</b> Terminal/end of day cleaning of the dirty MDRD room include laundry containers.</p>	1	H	NEW	F
ECM1.4.35	<p><b>M</b> Terminal/end of day cleaning of the dirty MDRD room includes anti-fatigue mats.</p> <p>Guidance: The mats are lifted and cleaned daily and when fluid accumulates under or around the mat.</p>	1,4,5	H	NEW	F
ECM1.4.36	<p><b>M</b> Terminal/end of day cleaning of the dirty MDRD room includes the floors.</p> <p>Guidance: Floors are cleaned daily and more frequently if visibly soiled and immediately following a spill.</p>	1, 7	H		F
<b>ECM1.5</b>	<b>Sterile and clean storage areas undergo a health care cleaning regimen.</b>				

No.	Description	Reference	Risk	Change	Asmt.
ECM1.5.1	<p><b>M</b> Terminal/end of day cleaning cards and/or checklists list all the things in the sterile and clean storage areas to be cleaned.</p> <p>Guidance: Cleaning cards and/or checklists can either be carried on the cleaning cart and/or posted in each room/area. The cards/checklists are laminated.</p>	1, 2, 5	H		P, F
ECM1.5.2	<p><b>M</b> Terminal/end of day cleaning of the sterile and clean storage areas includes counters and workstations.</p>	1	H		F
ECM1.5.3	<p><b>M</b> Terminal/end of day cleaning of the sterile and clean storage areas includes waste containers.</p>	1	H	NEW	F
ECM1.5.4	<p><b>M</b> Terminal/end of day cleaning of the sterile and clean storage areas includes recycling containers.</p>	1	H	NEW	F
ECM1.5.5	<p><b>M</b> Terminal/end of day cleaning of the sterile and clean storage areas includes the floor.</p>	1	H	NEW	F
<b>ECM1.6</b>	<p><b>Weekly and monthly cleaning augments daily cleaning in providing a clean MDRD environment.</b></p> <p>Guidance: Cleaning cards/checklists on the cleaning cart and/or posted in each area/room, list all the items that are subject to weekly and monthly cleaning. Facility policy and procedures also list all the items in each area and room that is subject to weekly and monthly cleaning (i.e. facility policy and procedures include a copy of the cleaning cards/checklists).</p>				
ECM1.6.1	<p><b>M</b> Weekly/Monthly cleaning cards and/or checklists list all the things in the MDRD to be cleaned.</p> <p>Guidance: Cleaning cards and/or checklists can either be carried on the cleaning cart and/or posted in each room/area. The cards/checklists are laminated.</p>	1, 2, 5	H		P, F

No.	Description	Reference	Risk	Change	Asmt.
ECM1.6.2	<b>M</b> Endoscope storage cabinets are cleaned and disinfected weekly and when visibly soiled.	1	H	NEW	F
ECM1.6.3	<b>M</b> Shelves in the dirty MDRD room are cleaned and disinfected weekly and when visibly soiled.	1	H		F
ECM1.6.4	<b>M</b> Cabinets in the dirty MDRD room are cleaned and disinfected weekly and when visibly soiled.	1	H		F
ECM1.6.5	<b>M</b> Containers in the clean MDRD room are cleaned and disinfected weekly and when visibly soiled.	1	H		F
ECM1.6.6	<b>M</b> Shelves in the clean MDRD room are cleaned and disinfected every three months and when visibly soiled.	1	H		F
ECM1.6.7	<b>M</b> Cabinets in the clean MDRD room are cleaned and disinfected every three months and when visibly soiled.	1	H		F
ECM1.6.8	<b>M</b> Containers in the clean MDRD room are cleaned and disinfected every three months and when visibly soiled.	1	H		F
ECM1.6.9	<b>M</b> Walls are cleaned and disinfected every six months and when visibly soiled.	1	H		F
ECM1.6.10	<b>M</b> Light fixtures are cleaned and disinfected every six months and when visibly soiled.	1	H		F
ECM1.6.11	<b>M</b> Sprinkler heads are cleaned and disinfected every six months and when visibly soiled.  Guidance: A professional fire sprinkler service provider should be consulted on how to clean the sprinkler heads to prevent their damage or accidentally triggering them.	1	H		F

No.	Description	Reference	Risk	Change	Asmt.
ECM1.6.12	<b>M</b> Vents are cleaned and disinfected every six months and when visibly soiled.	1	H		F
ECM1.6.13	<b>M</b> Ceilings are cleaned every six months and when visibly soiled.	1	H		F
ECM1.6.14	<b>M</b> There is a schedule for the cleaning, disinfection and maintenance of sink drains.  Guidance: Plumbing can act as reservoirs of bacteria; that bacteria can be transmitted by splash back from drains.	2	H	NEW	P, F
ECM1.6.15	<b>M</b> The weekly cleaning schedule is followed.  Guidance: Weekly cleaning is performed as outlined in facility policy and procedures and documented in a log.	1	H		F
ECM1.6.16	<b>M</b> Weekly cleaning is documented.	1	M		F
ECM1.6.17	<b>M</b> The monthly cleaning schedule is followed.  Guidance: Monthly cleaning (i.e. monthly, every three months, every six months) is performed as outlined in facility policy and procedures and documented in a log.	1	H		F
ECM1.6.18	<b>M</b> Monthly cleaning is documented.	1, 2	M		F
ECM1.6.19	<b>M</b> The sink drain maintenance schedule is followed.  Guidance: Sink drain maintenance is performed at the frequency determined by a qualified infection, prevention and control (IPAC) professional and documented.	2	M	NEW	F
ECM1.6.20	<b>M</b> Sink drain maintenance is documented.	1, 2	M	NEW	F

No.	Description	Reference	Risk	Change	Asmt.
<b>ECM1.7</b>	<p><b>Monthly cleaning augments daily cleaning in providing a clean environment for the storage of clean and sterile single-use and reprocessed medical devices (Tier 1 storage).</b></p> <p>Guidance: Cleaning cards/checklists on the cleaning cart and/or posted in each area/room, list all the items that are subject to weekly and monthly cleaning. Facility policy and procedures also list all the items in each area and room that is subject to weekly and monthly cleaning (i.e. facility policy and procedures include a copy of the cleaning cards/checklists).</p>				
ECM1.7.1	<p><b>M</b> Monthly cleaning cards and/or checklists list all the things in the clean and sterile storage areas to be cleaned.</p> <p>Guidance: Cleaning cards and/or checklists can either be carried on the cleaning cart and/or posted in each room/area. The cards/checklists are laminated.</p>	1, 2, 5	H		P, F
ECM1.7.2	<p><b>M</b> The sterile and clean storage areas are visibly clean.</p> <p>Guidance: The area is free of visible dust, gross soil, stains, spills, cobwebs and handprints. This includes but is not limited to all furniture, windows and sills, walls, ceiling and flooring.</p>	4, 5	H		P, F
ECM1.7.3	<p><b>M</b> Shelves are cleaned and disinfected <b>monthly</b> if HVAC is not in conformance required parameters <b>or every three months</b> if HVAC is in conformance with required parameters <b>and</b> when visibly soiled.</p> <p>Guidance: If the air exchanges and relative pressurization of the sterile storage area is in conformance with current CSA HVAC parameters, the shelves may be cleaned and disinfected every three months and when visibly soiled.</p>	1	H	REVISED HVAC	F

No.	Description	Reference	Risk	Change	Asmt.
ECM1.7.4	<p><b>M</b> Cabinets are cleaned and disinfected <b>monthly</b> if HVAC is not in conformance required parameters <b>or every three months</b> if HVAC is in conformance with required parameters <b>and</b> when visibly soiled.</p> <p>Guidance: If the air exchanges and relative pressurization of the sterile storage area is in conformance with current CSA HVAC parameters, the shelves may be cleaned and disinfected every three months and when visibly soiled.</p>	1	H	REVISED HVAC	F
ECM1.7.5	<p><b>M</b> Containers are cleaned and disinfected <b>monthly</b> if HVAC is not in conformance required parameters <b>or every three months</b> if HVAC is in conformance with required parameters <b>and</b> when visibly soiled.</p> <p>Guidance: If the air exchanges and relative pressurization of the sterile storage area is in conformance with current CSA HVAC parameters, the shelves may be cleaned and disinfected every three months and when visibly soiled.</p>	1	H	REVISED HVAC	F
ECM1.7.6	<p><b>M</b> Walls are cleaned and disinfected every six months and when visibly soiled.</p>	1	H		F
ECM1.7.7	<p><b>M</b> Light fixtures are cleaned and disinfected every six months and when visibly soiled.</p>	1	H		F
ECM1.7.8	<p><b>M</b> Sprinkler heads are cleaned and disinfected every six months and when visibly soiled.</p> <p>Guidance: A professional fire sprinkler service provider should be consulted on how to clean the sprinkler heads to prevent their damage or accidentally triggering them.</p>	1	H		F
ECM1.7.9	<p><b>M</b> Vents are cleaned and disinfected every six months and when visibly soiled.</p>	1	H		F
ECM1.7.10	<p><b>M</b> Ceilings are cleaned every six months and when visibly soiled.</p>	1	H		F

No.	Description	Reference	Risk	Change	Asmt.
ECM1.7.11	<p><b>M</b> The monthly cleaning schedule is followed.</p> <p>Guidance: Monthly cleaning (i.e. monthly, every 3 months, every 6 months) is performed as outlined in facility policy and procedures and documented in a log.</p>	1	H		F
ECM1.7.12	<p><b>M</b> Monthly cleaning is documented.</p>	1	M		F
<b>ECM1.8</b>	<p><b>Surfaces, fixtures, fittings, furnishings and equipment within the MDRD and clean and sterile storage areas are easy to clean and moisture impervious.</b></p> <p>Guidance: Effective cleaning in a health-care setting requires the use of health-care grade cleaning products and Health Canada approved disinfectants. An essential factor in meeting best practices for environmental cleaning, is the selection of fixtures, fittings, furnishings and equipment that can be cleaned with health-care grade products.</p>				
ECM1.8.1	<p><b>M</b> Surfaces, fixtures, fittings, furnishings and equipment are cleanable with a health-care grade disinfectant (i.e. Health Canada DIN).</p> <p>Guidance: Surfaces, fixtures, fittings, furnishings and equipment include but are not limited to shelving, counters, cabinets, OR table, floors, walls, ceilings, lights and doors. They must be kept visibly clean meaning free of visible dust, gross soil and stains. Best practices for cleaning in a health-care environment cannot be met if an item cannot be cleaned and disinfected using a health-care grade disinfectant. The environmental cleaning program should include a component for selection of new, and inspection/retirement of existing items.</p>	4, 5, 6	H		P, F

No.	Description	Reference	Risk	Change	Asmt.
ECM1.8.2	<p><b>M</b> Surfaces, fixtures, fittings, furnishings and equipment are in good repair and working order.</p> <p>Guidance: Surfaces, fixtures, fittings, furnishings and equipment that are broken, worn, torn, cracked, chipped or malfunctioning cannot be cleaned adequately (as pathogens can hide in crevices etc.). Items are assessed for damage on a regular basis and any worn, torn or stained items are replaced as soon as possible. Placing tape over tears is not acceptable and may create an ideal hiding place for pathogens. Also see the NHMSFAP's Infection, Prevention and Control (IPAC) Program accreditation standard.</p>	4, 5, 6, 7	H		P, F
ECM1.8.3	<p><b>M</b> Storage containers are in good repair.</p>	1	M		P, F
ECM1.8.4	<p><b>M</b> Doors and doors frames are constructed of smooth, non-porous material.</p>	3	M		P, F
ECM1.8.5	<p><b>M</b> All conduits, piping, duct work and open construction systems are covered by a finished ceiling.</p>	3	M		P, F
ECM1.8.6	<p><b>M</b> The ceiling is monolithic.</p> <p>Guidance: The ceiling is a single large surface that is solid, unbroken or seamless, non-porous, washable and not removable. Porous, particulate or fibre-shedding tiles or materials are not acceptable. An integrated pre-engineered ceiling system can be used within areas of monolithic ceiling such as a heavy-duty tee grid system with framed openings for diffusers, lights, equipment mounting panels, clipped down access panels and continuous gasketing. The monolithic ceiling must also be sealed.</p>	3	M		P, F
ECM1.8.7	<p><b>M</b> The walls are smooth, free of fissures, open joints or crevices.</p> <p>Guidance: Walls are painted with an appropriate interior paint for health-care facilities such as an epoxy coating in semi- or high-gloss finish. Flat finish paint is not appropriate as it may retain dirt on its surface. Wall and corner protection, if used, must be moisture impervious, non-cellulose, smooth, seamless and durable. Wall tile (any type) is not appropriate.</p>	3	M		P, F

No.	Description	Reference	Risk	Change	Asmt.
ECM1.8.8	<p><b>M</b> Wall protection material is non-porous, smooth and free from seams.</p> <p>Guidance: Wall including corner protection, if provided, must be moisture impervious, non-cellulose, smooth, seamless and durable. The walls are protected against damage from carts using materials such as rub railings, wall guards and corner guards.</p>	3	M		P, F
ECM1.8.9	<p><b>M</b> Windows, if present, cannot open and are cleanable.</p> <p>Guidance: Windows that can open create problems with ventilation, cleaning and security. Windows and window frames with tracks or crevices can trap dirt and cannot be adequately cleaned. Windows are made with materials and methods that resist moisture and mold. Window frames are without ledges and joints. Windows are completely sealed and airtight.</p>	3	M		P, F
ECM1.8.10	<p><b>M</b> Floors are monolithic.</p> <p>Guidance: The flooring is a single large surface that is unbroken and free of fissures, cracks, or crevices. Poured in place flooring applications such as fluid applied epoxy and poured epoxy are monolithic. Sheet vinyl and linoleum flooring with heat-welded or chemically bonded seams are also considered monolithic. Tile flooring is not monolithic. No floor drains or electrical receptacles are placed in the floor.</p>	3	M		P, F
ECM1.8.11	<p><b>M</b> Flooring extends up providing an integral covered base at all walls.</p> <p>Guidance: Integral coving is the extension of the monolithic flooring up the wall forming a wall base. It is to extend 150 mm (six inches) up the wall. The back of the floor covering where the floor meets the wall is supported (i.e. constructed without a gap behind, cove stick or support used) to prevent distortion or slipping of the flooring material. The integral covered base is tightly sealed against, or finished flush with, the wall.</p>	3	M		P, F

No.	Description	Reference	Risk	Change	Asmt.
ECM1.8.12	<p><b>M</b> Countertops are constructed of non-porous, <b>solid surface material</b> and free from seams.</p> <p>Guidance: Materials such as wood, granite and laminate products allow ingress of water or chemical solutions. Stainless steel is recommended as it is easy to clean and able to withstand surface- cleaning agents. Laminate-type countertops specified by the manufacturer as being suitable for laboratory use are acceptable.</p>	3	M		P, F
ECM1.8.13	<p><b>M</b> Storage shelves are constructed of smooth, non-porous materials and free from seams.</p> <p>Guidance: Stainless steel, powder coated metal, and phenolic resin are examples of smooth, non-porous materials. Materials such as wood and laminate products allow ingress of water or chemical solutions. Laminate-type shelving and cabinetry specified by the manufacturer as being suitable for laboratory use is acceptable.</p>	3	M		P, F
ECM1.8.14	<p><b>M</b> All materials, finishing and fixtures are easily cleanable and free of burrs and sharp or rough edges.</p>	3	M		P, F
ECM1.8.15	<p><b>M</b> Hand hygiene sinks are wall mounted.</p>	3	M		P, F
ECM1.8.16	<p><b>M</b> Hand hygiene sinks are made of non-porous material (e.g. 18 gauge– or thicker–stainless steel).</p> <p>Guidance: Granite or marble is not acceptable. The sink must not be capable of taking a sink plug and must not have an overflow. There are no aerators/modulators or rose sprays on the spouts and the spouts do not swivel. The water stream hits the basin surface in front of the drain; not directly into the drain. The outside rim of the sink is of minimal width and the surface is angled down towards the inside to prevent pooling of water and placement of objects on the rim.</p>	3	M		P, F

No.	Description	Reference	Risk	Change	Asmt.
ECM1.8.17	<b>M</b> Hand hygiene sinks spouts do not swivel and are free of aerators, modulators and rose sprays.	3	M		P, F
ECM1.8.18	<b>M</b> Hand hygiene sinks are not capable of taking a sink plug.	3	M		P, F
ECM1.8.19	<b>M</b> Hand hygiene sinks do not have an overflow drain or channel.	3	M		P, F
ECM1.8.20	<b>M</b> Walls adjacent to the hand hygiene sink are protected with back- and side-splashes  Guidance: Backsplashes do not need to be integral with the sink; however, backsplashes must be seam free. The backsplash must include the area under the soap and paper towel dispensers and extend at minimum 600 mm (two ft) above sink level and extend to meet the cove base below.	3	M		P, F
ECM1.8.21	<b>M</b> Backsplashes are seam-free, and their edges sealed with a waterproof barrier.  Guidance: The backsplash does not need to be integral with the sink itself; it can be an add-on accessory. The areas under the paper towel dispenser(s) and soap dispenser(s) are also protected with backsplashes.	3	M		P, F

## References

1. CSA Group, Standards Council of Canada. Canadian medical device reprocessing in all health care settings [Internet]. Toronto (ON): CSA Group; 2023 [cited 2023 Aug 28]. Standard number: CSA Z314:23.
2. CSA Group, Standards Council of Canada. Cleaning and disinfection of health care facilities [Internet]. Toronto (ON): CSA Group; 2020 [cited 2023 Aug 28]. Standard number: CSA Z317.12:20.
3. CSA Group, Standards Council of Canada. Canadian health care facilities [Internet]. Toronto (ON): CSA Group; 2018 [cited 2023 Aug 28]. Standard number: CSA Z8000-18.
4. Provincial Infection Control Network of British Columbia. British Columbia best practices for environmental cleaning for prevention and control of infections in all healthcare settings and programs [Internet]. Vancouver (BC): Provincial Infection Control Network of British Columbia (PICNet); 2016 [cited 2023 Aug 28]. 158p.
5. Ontario Agency for Health Protection and Promotion (Public Health Ontario) Provincial Infectious Diseases Advisory Committee. Best practices for environmental cleaning for prevention and control of infections in all health care settings [Internet]. 3rd ed. Toronto (ON): Queen's Printer for Ontario; 2018 [cited 2023 Aug 28]. 250p.
6. Operating Room Nurses Association of Canada. The ORNAC standards, guidelines, and position statements for perioperative registered nurses [Internet]. Bath (ON): Operating Room Nurses Association of Canada; 2023 [cited 2023 Aug 28].
7. AORN. 2023 guidelines for perioperative practice. 2023 ed. Denver (CO): AORN; 2023.
8. Non-Hospital Medical and Surgical Accreditation Program; College of Physicians and Surgeons of British Columbia. Accreditation standards: intraoperative care [Internet]. Vancouver: College of Physicians and Surgeons of British Columbia; 2023 [cited 2023 Aug 28]. 21p.
9. Non-Hospital Medical and Surgical Accreditation Program; College of Physicians and Surgeons of British Columbia. Accreditation standards: infection prevention and control (IPAC) program [Internet]. Vancouver: College of Physicians and Surgeons of British Columbia; 2023 [cited 2023 Aug 28]. 14p.
10. Non-Hospital Medical and Surgical Accreditation Program; College of Physicians and Surgeons of British Columbia. Accreditation standards: occupational health and safety [Internet]. Vancouver: College of Physicians and Surgeons of British Columbia; 2023 [cited 2023 Aug 28]. 14p.
11. Non-Hospital Medical and Surgical Accreditation Program; College of Physicians and Surgeons of British Columbia. Accreditation standards: equipment management [Internet]. Vancouver: College of Physicians and Surgeons of British Columbia; 2023 [cited 2023 Aug 28]. 8p.

12. BC Ministry of Health. Best practices for hand hygiene in all healthcare settings [Internet]. Victoria: BC Ministry of Health; 2012 [cited 2023 Aug 28]. 71p.
13. Government of British Columbia. Public health act: food premises regulation [Internet]. Victoria: Queen's Printer; 2022 [cited 2023 Aug 28].

## Revision history

Date	Revisions
September 8, 2016	<ul style="list-style-type: none"> <li>NHMSFAP <i>Environmental Cleaning</i> standard approved (version 1.0)</li> </ul>
November 30, 2023	<ul style="list-style-type: none"> <li>Substantial content revisions to reflect environmental cleaning best practices (version 2.0) (published March 1, 2024)</li> <li>Environmental cleaning expectations separated into four standard (program and non-clinical areas, operating/procedure room(s) and sterile core, pre- and post-anesthesia care and medical device reprocessing department)</li> <li>New standards template</li> </ul>
April 1, 2026	<ul style="list-style-type: none"> <li>Transcribed to new template (no content changes) (version 2.2)</li> </ul>