

Non-hospital Medical and Surgical  
Facilities Accreditation Program

**ACCREDITATION STANDARDS**

Environmental Cleaning of  
Pre- and Post-anesthesia  
Care Areas

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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 healthcare 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 pre- and post-anesthesia care areas

No.	Description	Reference	Risk	Change	Asmt.
<b>ECP1.0</b>	<b>ENVIRONMENTAL CLEANING OF PRE- AND POST- ANESTHESIA CARE AREAS</b>				
<b>ECP1.1</b>	<p><b>Environmental cleaning staff are appropriately trained and demonstrate best infection prevention and control practices.</b></p> <p>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.</p>				
ECP1.1.1	<p><b>M</b> Environmental cleaning staff who clean the pre- and post-anesthesia care areas have completed specific training on the cleaning and disinfection of these specialized areas.</p> <p>Guidance: See the NHMSFAP’s Environmental Cleaning Program and Non-Clinical Areas accreditation standard.</p>	2, 4, 5, 6, 7	M	Revised	P, F
ECP1.1.2	<p><b>M</b> Environmental cleaning staff who clean the pre- and post-anesthesia care areas are appropriately attired.</p> <p>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).</p>	2, 6, 7	M		F
ECP1.1.3	<p><b>M</b> Environmental cleaning staff who clean the pre- and post-anesthesia care areas perform hand hygiene at essential moments.</p> <p>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</p>	2, 4, 5, 12	M		F

No.	Description	Reference	Risk	Change	Asmt.
ECP1.1.4	<p><b>M</b> Environmental cleaning staff who clean the pre- and post-anesthesia care areas 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 micro-organisms 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. A gown and eye protection are not usually required for routine cleaning unless indicated by the PCRA. Also see the NHMSFAP’s Routine Practices and Additional Precautions and Occupational Health and Safety accreditation standard.</p>	2, 4, 5, 6	H		F
<b>ECP1.2</b>	<b>Cleaning and disinfectant products are appropriately selected and prepared.</b>				
ECP1.2.1	<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 antiseptics 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</p>	2, 4, 5, 9, 10	H		P, F

No.	Description	Reference	Risk	Change	Asmt.
ECP1.2.2	<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>	2, 4, 5, 7	H		F
ECP1.2.3	<p><b>M</b> Cleaning and disinfectant products are used within their labelled expiration date.</p>	2	H		F
ECP1.2.4	<p><b>M</b> Cleaning and disinfectant products in large-format containers are dispensed into clean, dry, disinfected, appropriately sized bottles.</p>	4	H		F
ECP1.2.5	<p><b>M</b> Cleaning and disinfectant product containers are properly labelled.</p> <p>Guidance: This includes products dispensed into smaller bottles. See the NHMSFAP's Occupational Health and Safety accreditation standard.</p>	2, 4, 5, 10	H		P, F
ECP1.2.6	<p><b>M</b> Cleaning and disinfectant product containers are not topped up.</p>	4, 5	H		F
ECP1.2.7	<p><b>M</b> The cleaning and disinfectant products used are compatible with the items and equipment being cleaned and disinfected.</p> <p>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.</p>	4, 5, 7	M		F

No.	Description	Reference	Risk	Change	Asmt.
<b>ECP1.3</b>	<b>Cleaning and disinfection practices result in effective reduction of microbial contamination within the environment.</b>				
ECP1.3.1	<b>M</b> Cleaning materials are gathered before entering the room.  Guidance: Cleaning materials to be gathered may include chemicals, equipment, supplies and checklists.	4, 5	L	new	F
ECP1.3.2	<b>M</b> Cleaning carts do not enter the bay/room.  Guidance: The cleaning cart is left outside the room and environmental cleaning personnel enter with only the necessary supplies and equipment.	2	M	new	F
ECP1.3.3	<b>M</b> There is appropriate and sufficient equipment and supplies to perform effective cleaning and disinfection.  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). In addition, the cloths and disposable wipes need to be of adequate size.	2, 4	H	new	P, F
ECP1.3.4	<b>M</b> Cleaning equipment and supplies are designed for use in health-care settings.  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.	2	H	new	P, F
ECP1.3.5	<b>M</b> Cleaning cards and/or checklists are used.  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.	2, 4	H		P, F

No.	Description	Reference	Risk	Change	Asmt.
ECP1.3.6	<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.</p> <p><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>	2, 4, 5, 7	H		F
ECP1.3.7	<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>	2, 4, 5, 6, 7	H		F
ECP1.3.8	<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
ECP1.3.9	<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>	2, 4, 5, 6, 7	H		F

No.	Description	Reference	Risk	Change	Asmt.
ECP1.3.10	<p><b>M</b> Fresh cloths are used for cleaning and disinfecting each bay or room.</p> <p>Guidance: If there is more than one patient in the care area, use fresh cloth(s) for each bay/room and complete the cleaning in one bay/room before moving to the next bay/room.</p>	4, 5	H		F
ECP1.3.11	<p><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.</p>	4, 5, 6, 7	H		F
ECP1.3.12	<p><b>M</b> Turbulent cleaning techniques are not used.</p> <p>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.</p>	2, 4, 5, 6, 7	H		F
ECP1.3.13	<p><b>M</b> Chemical solutions are appropriately applied.</p>	2, 4, 5, 7	H		F
ECP1.3.14	<p><b>M</b> Only clean cloths are dipped into the chemical solution.</p> <p>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.</p>	2, 4, 5, 7	H		F
ECP1.3.15	<p><b>M</b> Only reusable cloths are dipped into the chemical solution.</p> <p>Guidance: Disposable, single use wipes are not re-wet by dipping them in the chemical solution.</p>	2	H		F

No.	Description	Reference	Risk	Change	Asmt.
ECP1.3.16	<p><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.</p> <p>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.</p>	2, 4, 5	H		F
ECP1.3.17	<p><b>M</b> Reusable cleaning cloths and disposable, single-use wipes are changed when moving from a dirty to a clean area.</p>	4, 5	H		F
ECP1.3.18	<p><b>M</b> Reusable cloths are changed and disposable, single use wipes discarded when visibly soiled.</p>	2	H		F
ECP1.3.19	<p><b>M</b> A clean side of a reusable cleaning cloth is used for each different surface.</p> <p>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. bed). The second side of a reusable cloth is used to continue to clean the same item/surface (e.g. bed). 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. bed then blood pressure cuff).</p>	4, 5	H		F
ECP1.3.20	<p><b>M</b> Disposable, single use cleaning materials are discarded when they leave a surface and replaced with a new wipe if needed.</p> <p>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.</p>	2, 4, 5, 7	H		F

No.	Description	Reference	Risk	Change	Asmt.
ECP1.3.21	<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>	2, 4, 5, 7	H		F
ECP1.3.22	<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
ECP1.3.23	<p><b>M</b> Soiled reusable cleaning materials are clearly segregated from clean 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 <b>soiled</b>).</p>	2, 4, 5	H		F

No.	Description	Reference	Risk	Change	Asmt.
ECP1.3.24	<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>	2, 4, 5, 7	H		F
ECP1.3.25	<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>	2	H		F
ECP1.3.26	<p><b>M</b> Reusable mop heads are changed and disposable, single use mop heads discarded when visibly soiled.</p>	2	H		F
ECP1.3.27	<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
ECP1.3.28	<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.
ECP1.3.29	<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 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>	2, 4, 5, 7	H		F
ECP1.3.30	<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
ECP1.3.31	<p><b>M</b> Mop heads are changed after each use.</p> <p>Guidance: Mop heads are changed after each clean. Mop heads are changed between each room or space being cleaned.</p>	4, 5, 6	H		F
ECP1.3.32	<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>	4, 5	H		F
<b>ECP1.4</b>	<b>Discharge cleaning provides a safe, functional and visibly clean care environment for the patient.</b>				

No.	Description	Reference	Risk	Change	Asmt.
ECP1.4.1	<p><b>M</b> Patient discharge cleaning follows a specific documented process.</p> <p>Guidance: A standardized approach ensures all surfaces are optimally cleaned and disinfected.</p>	4, 5	H	new	P, F
ECP1.4.2	<p><b>M</b> Patient discharge cleaning cards and/or checklists list all the things in the bay/room 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>	2, 5	H	new	P, F
ECP1.4.3	<p><b>M</b> Patient discharge cleaning commences after the patient has left the bay/room.</p>	6, 7	H	new	F
ECP1.4.4	<p><b>M</b> Patient discharge cleaning commences after the linen is stripped from the bed/stretchers/chair.</p>	5	H	new	F
ECP1.4.5	<p><b>M</b> Patient discharge cleaning commences after all contaminated supplies and equipment are removed and discarded from the bay/room.</p> <p>Guidance: This includes used and/or contaminated medical supplies, oxygen therapy equipment, IV bags and suction equipment.</p>	5	H	new	F
ECP1.4.6	<p><b>M</b> Privacy curtains are checked and replaced if visibly soiled, as appropriate.</p>	5	M	new	F
ECP1.4.7	<p><b>M</b> After collecting and placing all contaminated items into the appropriate receptacle, environmental cleaning staff remove gloves, perform hand hygiene and don clean PPE before commencing cleaning and disinfection.</p>	4, 5	H	new	F
ECP1.4.8	<p><b>M</b> Doors, door handles, push plates and touched areas of the door frame are cleaned and disinfected, as appropriate.</p> <p>Guidance: This applies to enclosed pre- and post-anesthesia care rooms including overnight stay rooms.</p>	5	H	new	F

No.	Description	Reference	Risk	Change	Asmt.
ECP1.4.9	<b>M</b> Walls are checked and spot cleaned.	5, 7	H	new	F
ECP1.4.10	<b>M</b> Light switches are cleaned and disinfected.	5	H	new	F
ECP1.4.11	<b>M</b> Wall mounted dispensers and holders are cleaned and disinfected.  Guidance: This includes alcohol-based hand rub dispensers and glove box holders.	5	H	new	F
ECP1.4.12	<b>M</b> All horizontal surfaces are cleaned and disinfected.  Guidance: This includes counter-tops, tables, telephones and computer keyboards. Electronic equipment such as computers and keyboards are difficult to effectively clean and disinfect. Keyboards should be covered with plastic skins to allow for ease of cleaning.	2, 4, 5, 7	H	new	F
ECP1.4.13	<b>M</b> All furnishings are cleaned and disinfected.  Guidance: This includes chairs, stools, overbed table, beside tables etc. Any items on these surfaces are lifted to clean the surface underneath.	2, 5, 7	H	new	F
ECP1.4.14	<b>M</b> Patient monitor(s) including cables, fixed and mobile equipment is cleaned and disinfected.  Guidance: Cardiac monitor and cables, blood pressure cuff, pulse oximeter etc.	2, 5, 7	H	new	F
ECP1.4.15	<b>M</b> Wall equipment including regulators, medical gases, suction containers and blood pressure manometers are cleaned and disinfected.	2, 5, 7	H	new	F
ECP1.4.16	<b>M</b> The patient bedside cupboard is cleaned and disinfected.  Guidance: The patient belongings cupboard or locker is cleaned and disinfected inside and out.	5	H	new	F

No.	Description	Reference	Risk	Change	Asmt.
ECP1.4.17	<p><b>M</b> The bed/stretchers/chair is cleaned and disinfected.</p> <p>Guidance: This includes the top, sides and underside of the mattress/cushions and any exposed frame.</p>	2, 5, 7	H	new	F
ECP1.4.18	<p><b>M</b> The pillow is cleaned and disinfected.</p> <p>Guidance: Health-care grade wipeable pillows are used.</p>	4, 5	H	new	F
ECP1.4.19	<p><b>M</b> The bed/stretchers/chair rails, head and foot boards and controls are cleaned and disinfected.</p>	5	H	new	F
ECP1.4.20	<p><b>M</b> The call bell is cleaned and disinfected.</p>	5, 7	H	new	F
ECP1.4.21	<p><b>M</b> The floor is cleaned and disinfected when visibly soiled and when potentially soiled by a splash, splatter or dropped item.</p>	2, 4, 5, 7	H	new	F
ECP1.4.22	<p><b>M</b> Waste and linen are removed from the bay/room.</p>	5	H	new	F
ECP1.4.23	<p><b>M</b> After completing the patient discharge clean, environmental cleaning staff remove gloves, perform hand hygiene before remaking the bed/stretchers/chair.</p>	4, 5	H	new	F
ECP1.4.24	<p><b>M</b> The bed/stretchers/chair is remade.</p>	5	H	new	F
ECP1.4.25	<p><b>M</b> The bay/room is free of clutter.</p> <p>Guidance: Only minimal supplies, if any, are kept in the pre- and post-anesthesia care bays/rooms including overnight stay. This prevents unnecessary contamination and waste of items/supplies and supports optimal and efficient cleaning practices. An increased number of items, increases the risk of locations for microbial growth.</p>	4, 5	H	new	P, F
<b>TERMINAL/END OF DAY CLEANING</b>					

No.	Description	Reference	Risk	Change	Asmt.
ECP1.4.26	<p><b>M</b> Each pre- and post-anesthesia care bay/room is terminally cleaned at the end of each surgical/procedural day.</p> <p>Guidance: Cleaning cards/checklists on the cleaning cart and/or posted in each area/room, list all the items to be terminally cleaned. Facility policy and procedures also list all the items in each area and room that is to be terminally cleaned at the end of each surgical/procedural day (i.e. facility policy and procedures include a copy of the cleaning cards/checklists).</p>	2, 5, 7	H	new	F
ECP1.4.27	<p><b>M</b> Each overnight stay bay/room is terminally cleaned following next day discharge.</p> <p>Guidance: In facilities accredited to provide overnight stay services, patient length of stay at the facility may be no more than 24 hours following a procedure. See the NHMSFAP's Overnight Stay accreditation standard.</p>	2, 5, 7	H	new	F
ECP1.4.28	<p><b>M</b> Terminal/end of day cleaning cards and/or checklists list all the things in the bay/room 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>	2, 5	H	new	P, F
ECP1.4.29	<p><b>M</b> Terminal cleaning of the pre- and post-anesthesia care bays/rooms includes all of the patient discharge cleaning.</p> <p>Guidance: This includes but is not limited to patient monitor(s) including cables, fixed and mobile equipment, bed/stretchers/chair, call light, medical gas and suction regulators, door handles and push plates, light switches and controls, spot-cleaning of walls, telephones and computer workstations.</p>	2, 4, 5, 6, 7	H	new	P, F

No.	Description	Reference	Risk	Change	Asmt.
ECP1.4.30	<p><b>M</b> Terminal cleaning of the pre- and post-anesthesia care bays/rooms includes supply carts.</p> <p>Guidance: Terminal cleaning includes the wheels and casters.</p>	7	H	new	F
ECP1.4.31	<p><b>M</b> Terminal cleaning of the pre- and post-anesthesia care bays/rooms includes the wheels and casters of all furniture, machines and equipment.</p>	4, 5, 6, 7	H	new	F
ECP1.4.32	<p><b>M</b> Terminal cleaning of the pre- and post-anesthesia care bay/room includes the garbage, recycling and linen bins/frames.</p>	4, 5, 7	H	new	F
ECP1.4.33	<p><b>M</b> Terminal cleaning of the pre- and post-anesthesia care bay/room includes wet-mopping of the entire floor including under the bed/chair and any mobile equipment.</p> <p>Guidance: A wet-loop mop or a microfiber mop may be used. A swivel or figure eight motion is used and strokes overlap. The floor is to remain wet for the required contact time specified by the disinfectant/detergent instructions for use. The mop head is changed after mopping the bay/room.</p>	4, 5	H	new	F
<b>ECP1.5</b>	<b>Patient washrooms undergo a health care cleaning regimen.</b>				
ECP1.5.1	<p><b>M</b> Patient washroom cleaning follows a specific documented process.</p> <p>Guidance: A standardized approach ensures all surfaces are optimally cleaned and disinfected.</p>	4, 5	H	new	P, F
ECP1.5.2	<p><b>M</b> Cleaning cards and/or checklists list all the things in the patient washroom 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>	2, 5	H	new	P, F

No.	Description	Reference	Risk	Change	Asmt.
ECP1.5.3	<b>M</b> Patient washrooms are cleaned and disinfected daily and more frequently as required.	2, 4, 5	H	new	F
ECP1.5.4	<b>M</b> Doors, door handles, push plates and touched areas of the door frame are cleaned and disinfected.	4, 5	H	new	F
ECP1.5.5	<b>M</b> The light switch is cleaned and disinfected.	4, 5	H	new	F
ECP1.5.6	<b>M</b> The sink is cleaned and disinfected.  Guidance: Sinks are cleaned from the least contaminated areas 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.	4, 5	H	new	F
ECP1.5.7	<b>M</b> The sink mirror is cleaned and disinfected.	4, 5	H	new	F
ECP1.5.8	<b>M</b> Soap dispensers and frames are cleaned and disinfected	4, 5	H	new	F
ECP1.5.9	<b>M</b> The call bell is cleaned and disinfected.	4, 5	H	new	F
ECP1.5.10	<b>M</b> The plumbing under the sink is damp dusted.	4, 5	H	new	F
ECP1.5.11	<b>M</b> Support railings are cleaned and disinfected.	4, 5	H	new	F
ECP1.5.12	<b>M</b> Ledges and shelves are cleaned and disinfected.	4, 5	H	new	F
ECP1.5.13	<b>M</b> The shower is cleaned and disinfected, as appropriate.  Guidance: Cleaning and disinfection includes soap dispensers, walls and railings, rinsing and drying.	4, 5	H	new	F

No.	Description	Reference	Risk	Change	Asmt.
ECP1.5.14	<p><b>M</b> The toilet is cleaned and disinfected.</p> <p>Guidance: This includes the entire toilet, the handle and the underside of the flush rim.</p>	4, 5	H	new	F
ECP1.5.15	<p><b>M</b> Disposable toilet swabs are used.</p> <p>Guidance: Toilet brushes are not used.</p>	2	H	new	F
ECP1.5.16	<p><b>M</b> The garbage is removed.</p>	4, 5	H	new	F
ECP1.5.17	<p><b>M</b> The garbage can is cleaned and disinfected.</p>	4, 5	H	new	F
ECP1.5.18	<p><b>M</b> The entire floor is wet-mopped.</p> <p>Guidance: A wet-loop mop or a microfiber mop may be used. A swivel or figure eight motion is used and strokes overlap. The floor is to remain wet for the required contact time specified by the disinfectant/detergent instructions for use. The mop head is changed after mopping a patient washroom.</p>	4, 5	H	new	F
<b>ECP1.6</b>	<b>Regular cleaning and disinfection of support areas and equipment provides a safe, functional and visibly clean care environment.</b>				
ECP1.6.1	<p><b>M</b> Transport equipment is cleaned and disinfected after each patient use.</p> <p>Guidance: This may include wheelchairs, stretchers, walkers and other mobility aids and/or transfer devices.</p>	4, 5	H		F
ECP1.6.2	<p><b>B</b> Following cleaning and disinfection, transport equipment is tagged as clean.</p>	4, 5	B	new	F

No.	Description	Reference	Risk	Change	Asmt.
ECP1.6.3	<p><b>M</b> Hand hygiene sinks in the pre- and post-anesthesia care area are cleaned and disinfected at the end of each procedural/surgical day.</p> <p>Guidance: Sinks are cleaned from the least contaminated areas 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	new	F
ECP1.6.4	<p><b>M</b> All horizontal surfaces of the nursing station are cleaned and disinfected at the end of each procedural/surgical day.</p> <p>Guidance: This includes the medication preparation area.</p>	4	H	new	F
ECP1.6.5	<p><b>M</b> The exterior of the fluid and/or blanket warmer is cleaned and disinfected daily and when visibly soiled.</p>	4	H	new	F
ECP1.6.6	<p><b>M</b> The interior of the fluid and/or blanket warmer is cleaned and disinfected weekly and when visibly soiled.</p>	4	H	new	F
ECP1.6.7	<p><b>M</b> Garbage, recycling and soiled linen throughout the PACU is removed and the containers/frames cleaned and disinfected if visibly soiled.</p>	4, 5	H	new	F
ECP1.6.8	<p><b>M</b> The entire floor of the PACU including under any mobile storage or equipment is cleaned and disinfected at the end of each procedural/surgical day.</p>	4, 5	H	new	F
ECP1.6.9	<p><b>M</b> Food storage and preparation areas are cleaned at least daily.</p> <p>Guidance: The facility policy and procedures specify the cleaning and sanitizing requirements for all food storage equipment, food preparation areas and utensils used.</p>	2, 4, 5, 13	H	new	F

No.	Description	Reference	Risk	Change	Asmt.
ECP1.6.10	<p><b>M</b> Ice machines are cleaned at least quarterly.</p> <p>Guidance: Cleaning should include de-scaling and disinfection in accordance with the manufacturer’s instructions for use.</p>	4,5	M		F
ECP1.6.11	<p><b>M</b> Pediatric play areas/rooms are cleaned and disinfected daily, as appropriate.</p>	4, 5	H		F
ECP1.6.12	<p><b>M</b> Toys are cleaned and disinfected between users.</p> <p>Guidance: Play areas used by more than one pediatric patient in a day should have a bin to segregate used toys from clean toys. Soft toys, books, magazines and puzzles should be dedicated to an individual patient and sent home with them on discharge or discarded.</p>	4, 5	H		F
<b>ECP1.7</b>	<p><b>Weekly and monthly cleaning augments daily cleaning in providing a clean perioperative 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>				
ECP1.7.1	<p><b>M</b> Weekly/monthly cleaning cards and/or checklists list all the things in the pre- and post-anesthesia care environment 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>	2, 5	H		P, F

No.	Description	Reference	Risk	Change	Asmt.
ECP1.7.2	<p><b>M</b> The pre- and post-anesthesia care 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
ECP1.7.3	<p><b>M</b> The nursing station is 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
ECP1.7.4	<p><b>M</b> The emergency cart is cleaned and disinfected weekly and after use.</p>	5	M	new	F
ECP1.7.5	<p><b>M</b> The entire pre- and post-anesthesia care area is high damp dusted weekly and when visibly soiled.</p> <p>Guidance: This includes the nursing station and any storage and equipment alcoves. High-damp dusting includes all surfaces and fixtures above shoulder height such as vents, light fixtures and tops of cabinets.</p>	4	M	new	F
ECP1.7.6	<p><b>M</b> Baseboards and corners throughout the pre- and post-anesthesia care area are cleaned and disinfected weekly and when visibly soiled.</p>	4	M	new	F
ECP1.7.7	<p><b>M</b> Windows and windowsills throughout the pre- and post-anesthesia care area are cleaned and disinfected weekly and when visibly soiled.</p>	4, 5	M	new	F
ECP1.7.8	<p><b>M</b> Window blinds throughout the pre- and post-anesthesia care area are damp dusted at least monthly.</p>	4	M	new	F
ECP1.7.9	<p><b>M</b> Privacy curtains are removed and laundered at least quarterly and when visibly soiled.</p>	4	M	new	F
ECP1.7.10	<p><b>M</b> Storage cabinets are high damp dusted, cleaned and disinfected weekly and when visibly soiled.</p>	2	M	new	F

No.	Description	Reference	Risk	Change	Asmt.
ECP1.7.11	<b>M</b> The walls are cleaned monthly and when visibly soiled.	2	M	new	F
ECP1.7.12	<b>M</b> The sprinkler heads are cleaned monthly 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.	4, 5	M		F
ECP1.7.13	<b>M</b> The ceilings are cleaned monthly and when visibly soiled.	2	M	new	F
ECP1.7.14	<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	M	new	P, F
ECP1.7.15	<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.	2	M		F
ECP1.7.16	<b>M</b> Weekly cleaning is documented.	2	L		F
ECP1.7.17	<b>M</b> The monthly cleaning schedule is followed.  Guidance: Monthly cleaning is performed as outlined in facility policy and procedures and documented in a log.	2	M		F
ECP1.7.18	<b>M</b> Monthly cleaning is documented.  Guidance: This includes privacy curtain changes as required (e.g. when visibly soiled and quarterly).	2	L		F

No.	Description	Reference	Risk	Change	Asmt.
ECP1.7.19	<p><b>M</b> The sink drain maintenance schedule is followed.</p> <p>Guidance: Sink drain maintenance is performed at the frequency determined by a qualified infection, prevention and control (IPAC) professional and documented.</p>	2	M	new	F
ECP1.7.20	<p><b>M</b> Sink drain maintenance is documented.</p>	2	M	new	F
<b>ECP1.8</b>	<p><b>Surfaces, fixtures, fittings, furnishings and equipment within the patient care 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>				
ECP1.8.1	<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. <b>Upholstered furniture is covered with fluid-resistant, nonporous fabric.</b> 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>	2, 4, 5, 6	H		P, F

No.	Description	Reference	Risk	Change	Asmt.
ECP1.8.2	<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
ECP1.8.3	<p><b>M</b> Doors and doors frames are constructed of smooth, non-porous material.</p>	3	M		P, F
ECP1.8.4	<p><b>M</b> All conduits, piping, duct work and open construction systems are covered by a finished ceiling.</p>	3	M		P, F
ECP1.8.5	<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 fiber-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
ECP1.8.6	<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.
ECP1.8.7	<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
ECP1.8.8	<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
ECP1.8.9	<p><b>M</b> Flooring extends up providing an integral coved 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 230 mm (nine 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 coved base is tightly sealed against, or finished flush with, the wall.</p>	3	M		P, F
ECP1.8.10	<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

No.	Description	Reference	Risk	Change	Asmt.
ECP1.8.11	<p><b>M</b> Cabinetry is enclosed, free from seams and constructed of smooth, non-porous material.</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. Stainless steel is recommended as it is easy to clean and able to withstand surface-cleaning agents. Laminate-type shelving and cabinetry specified by the manufacturer as being suitable for laboratory use is acceptable. Upper cabinetry should either extend the full height of the wall to the ceiling or be angled to minimize dust accumulation on top of the unit. In operating/procedure rooms, open shelving is not acceptable and clean and sterile supplies are to be kept to a minimum (i.e. only a few consumables). Clean and sterile supplies in the operating/procedure room are kept to a minimum. Open shelving is not acceptable.</p>	3	M		P, F
ECP1.8.12	<p><b>M</b> Hand hygiene sinks are wall mounted.</p> <p>Guidance: Hand hygiene sinks are not to be installed into a counter or placed immediately adjacent to a counter. There is to be no storage underneath the sink. The edge of the sink is to be at minimum 1 m (3 ft 3 in) away from any fixed work surface or separated by a splash barrier.</p>	3	M		P, F
ECP1.8.13	<p><b>M</b> Hand hygiene sinks are made of non-porous material.</p> <p>Guidance: The sink is made of a non-porous material (e.g. porcelain, enamel, vitreous china or 18 gauge—or thicker—stainless steel). Sinks made of granite or marble are not acceptable.</p>	3	M		P, F
ECP1.8.14	<p><b>M</b> The hand hygiene sink spout does not swivel and is free of aerators, modulators and rose sprays.</p>	3	M		P, F
ECP1.8.15	<p><b>M</b> The hand hygiene sink is not capable of taking a sink plug.</p>	3	M		P, F
ECP1.8.16	<p><b>M</b> The hand hygiene sink does not have an overflow drain or channel.</p>	3	M		P, F

No.	Description	Reference	Risk	Change	Asmt.
ECP1.8.17	<p><b>M</b> Walls adjacent to the hand hygiene sinks are protected with back- and side-splashes.</p> <p>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 (2 ft) above sink level and extend to meet the cove base below.</p>	3	M		P, F

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## 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>