

Non-Hospital Medical and Surgical
Facilities Accreditation Program

ACCREDITATION STANDARDS

Environmental Cleaning
of Operating/Procedure
Rooms and Sterile Core

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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 operating/procedure rooms and sterile core

No.	Description	Reference	Risk	Change
ECO1.0	ENVIRONMENTAL CLEANING OF OPERATING/PROCEDURE ROOMS AND STERILE CORE			
ECO1.1	Environmental cleaning staff are appropriately trained and demonstrate best infection prevention and control practices. <i>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.</i>			
ECO1.1.1	M Environmental cleaning staff who clean the operating/procedure room and/or sterile core have completed specific training on the cleaning and disinfection of these specialized areas. <i>Guidance: See the NHMSFAP's Environmental Cleaning Program and Non-Clinical Areas accreditation standard.</i>	2, 4, 5, 6, 7	M	Revised
ECO1.1.2	M Environmental cleaning staff who clean the operating/procedure room and/or sterile core are appropriately attired. <i>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).</i>	2, 6, 7	M	
ECO1.1.3	M Environmental cleaning staff who clean the operating/procedure room and/or sterile core perform hand hygiene at essential moments. <i>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 Best Practices for Hand Hygiene in All Healthcare Settings and Programs, the NHMSFAP's Hand Hygiene Assessment Tool and Infection Prevention and Control (IPAC) Program accreditation standards.</i>	2, 4, 5, 12	M	

No.	Description	Reference	Risk	Change
ECO1.1.4	<p>M Environmental cleaning staff who clean the operating/procedure room and/or sterile core don the appropriate PPE. <i>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 standards.</i></p>	2, 4, 5, 6	H	
<p>ECO1.2 Cleaning and disinfectant products are appropriately selected and prepared.</p>				

No.	Description	Reference	Risk	Change
ECO1.2.1	<p>M The disinfectant used has a Health Canada drug identification number (DIN). <i>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. 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. In consultation with the facility's occupational health and safety program representative(s) and the IPAC lead, the EVS 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.</i></p>	2, 4, 5, 9, 10	H	
ECO1.2.2	<p>M Cleaning and disinfectant products are used in accordance with their manufacturer's instructions for use (MIFU). <i>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.</i></p>	2, 4, 5, 7	H	
ECO1.2.3	<p>M Cleaning and disinfectant products are used within their labelled expiration date.</p>	2	H	

No.	Description	Reference	Risk	Change
ECO1.2.4	M Cleaning and disinfectant products in large-format containers are dispensed into clean, dry, disinfected, appropriately sized bottles.	4	H	
ECO1.2.5	M Cleaning and disinfectant product containers are properly labelled. <i>Guidance: This includes products dispensed into smaller bottles. See the NHMSFAP's Occupational Health and Safety accreditation standard.</i>	2, 4, 5, 10	H	
ECO1.2.6	M Cleaning and disinfectant product containers are not topped up.	4, 5	H	
ECO1.2.7	M The cleaning and disinfectant products used are compatible with the items and equipment being cleaned and disinfected. <i>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.</i>	4, 5, 7	M	
ECO1.3	Cleaning and disinfection practices result in effective reduction of microbial contamination within the environment.			
ECO1.3.1	M Cleaning materials are gathered before entering the room. <i>Guidance: Cleaning materials to be gathered may include chemicals, equipment, supplies and checklists.</i>	4, 5	L	NEW
ECO1.3.2	M Cleaning carts do not enter the operating/procedure room. <i>Guidance: The cleaning cart is left outside the room and environmental cleaning personnel enter with only the necessary supplies and equipment.</i>	2	M	NEW
ECO1.3.3	M There is appropriate and sufficient equipment and supplies to perform effective cleaning and disinfection. <i>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.</i>	2, 4	H	NEW

No.	Description	Reference	Risk	Change
ECO1.3.4	<p>M Cleaning equipment and supplies are designed for use in health-care settings.</p> <p><i>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.</i></p>	2	H	NEW
ECO1.3.5	<p>M Cleaning cards and/or checklists are used.</p> <p><i>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.</i></p>	2, 5	H	
ECO1.3.6	<p>M Cleaning is performed before disinfection.</p> <p><i>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.</i></p> <p>Disinfectants are not to be used for general cleaning unless the product label claims it can be used as a cleaner/disinfectant.</p> <p><i>When items or surfaces are visibly soiled, a cleaning wipe is used to remove soil, followed by a second (new) wipe for disinfection, even when a one-step product is used. One-step cleaning and disinfection is performed ONLY on visibly clean surfaces.</i></p>	2, 4, 5, 7	H	
ECO1.3.7	<p>M Cleaning and disinfection proceeds from clean to dirty areas.</p> <p><i>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.</i></p>	2, 4, 5, 6, 7	H	
ECO1.3.8	<p>M Cleaning and disinfection proceeds from low-frequency touch to high-frequency touch surfaces.</p> <p><i>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.</i></p>	2	H	

No.	Description	Reference	Risk	Change
ECO1.3.9	M Cleaning and disinfection proceeds from the high to the low areas. <i>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.</i>	2, 4, 5, 6, 7	H	
ECO1.3.10	M Fresh cloths are used for cleaning and disinfecting each room.	4, 5	H	
ECO1.3.11	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	
ECO1.3.12	M Turbulent cleaning techniques are not used. <i>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 respirator/eye protection is required). A pour bottle can be used to apply chemical solutions.</i>	2, 4, 5, 6, 7	H	
ECO1.3.13	M Chemical solutions are appropriately applied.	2, 4, 5, 7	H	
ECO1.3.14	M Only clean cloths are dipped into the chemical solution. <i>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.</i>	2, 4, 5, 7	H	
ECO1.3.15	M Only reusable cloths are dipped into the chemical solution. <i>Guidance: Disposable, single use wipes are not re-wet by dipping them in the chemical solution.</i>	2	H	

No.	Description	Reference	Risk	Change
ECO1.3.16	<p>M 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><i>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.</i></p>	2, 4, 5	H	
ECO1.3.17	<p>M Reusable cleaning cloths and disposable, single-use wipes are changed when moving from a dirty to a clean area.</p>	4, 5	H	
ECO1.3.18	<p>M Reusable cloths are changed and disposable, single use wipes discarded when visibly soiled.</p>	2		
ECO1.3.19	<p>M A clean side of a reusable cleaning cloth is used for each different surface.</p> <p><i>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).</i></p>	4, 5	H	
ECO1.3.20	<p>M Disposable, single use cleaning materials are discarded when they leave a surface and replaced with a new wipe if needed.</p> <p><i>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.</i></p>	2, 4, 5, 7	H	

No.	Description	Reference	Risk	Change
ECO1.3.21	<p>M The surface being disinfected remains wet for the contact time specified on the disinfectant label.</p> <p><i>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. 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.</i></p>	2, 4, 5, 7	H	
ECO1.3.22	<p>M The surface being disinfected is allowed to air dry.</p> <p><i>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).</i></p>	4, 7	H	
ECO1.3.23	<p>M Soiled reusable cleaning materials are clearly segregated from clean cleaning materials.</p> <p><i>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').</i></p>	2, 4, 5	H	
ECO1.3.24	<p>M Only damp mopping is used.</p> <p><i>Guidance: Dry mopping is never used. Damp mopping can be performed with chemically treated mop heads.</i></p>	6, 7		

No.	Description	Reference	Risk	Change
ECO1.3.25	M Only clean mop heads are dipped into the chemical solution. <i>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.</i>	2, 4, 5, 7	H	
ECO1.3.26	M Only reusable mop heads are dipped into the chemical solution. <i>Guidance: Disposable, single use mop heads are not re-wet by dipping them in the chemical solution.</i>	2	H	
ECO1.3.27	M Reusable mop heads are changed and disposable, single use mop heads discarded when visibly soiled.	2	H	
ECO1.3.28	M Disposable, single use mop heads are discarded when they leave the floor and replaced with a new wipe if needed. <i>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.</i>	2, 4, 5	H	
ECO1.3.29	M Reusable mop heads and disposable, single-use mop heads are changed when moving from a dirty to a clean area.	4, 5	H	
ECO1.3.30	M The floor being disinfected remains wet for the contact time specified on the disinfectant label. <i>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. 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.</i>	2, 4, 5, 7	H	

No.	Description	Reference	Risk	Change
ECO1.3.31	M The floor being disinfected is allowed to air dry. <i>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).</i>	4, 7	H	
ECO1.3.32	M Mop heads are changed after each use. <i>Guidance: Mop heads are changed after each clean. Mop heads are changed between each room or space being cleaned.</i>	4, 5, 7	H	
ECO1.3.33	M Cleaning solutions are appropriately disposed of. <i>Guidance: Cleaning solutions should be disposed in accordance with their safety data sheet using the housekeeping closet utility/floor sink. Hand hygiene sinks are not used to dispose of cleaning solutions.</i>	4, 5	H	
ECO1.4	All procedures begin with a clean environment.			
PRELIMINARY CLEANING				
ECO1.4.1	M Prior to the first case of the day all horizontal surfaces of the operating/procedure room are damp dusted. <i>Guidance: Damp dusting is carried out with a clean lint-free cloth using a Health Canada approved health-care grade disinfectant appropriate for the item being cleaned. Horizontal surfaces include, but are not limited to, overhead light fixtures, OR tables, portable/mounted equipment, and countertops. Damp dusting reduces any microbial contamination (from air etc.) that may have settled since the terminal clean.</i>	4, 5, 6, 7	H	
ECO1.4.2	M Preliminary cleaning cards and/or checklists list all the things to be damp dusted. <i>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.</i>	2, 5	H	
ECO1.4.3	M Damp dusting is performed before bringing sterile supplies/case carts/equipment into the operating/procedure room.	4, 5, 6, 7	H	

No.	Description	Reference	Risk	Change
ECO1.4.4	<p>M The perioperative team visually inspects the operating/procedure room for optimal cleanliness prior to each case and before sterile surgical supplies are brought in.</p> <p><i>Guidance: Before the first case of the day and between each case and each patient entering the room, the perioperative nurse inspects to room to ensure is it visibly clean.</i></p>	4, 5, 6	H	
ECO1.4.5	<p>M The operating/procedure room is free of clutter.</p> <p><i>Guidance: Only minimal supplies (clean and sterile) are kept in the operating/procedure room. Supplies are stored in closed cabinets; open shelving is not used. 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.</i></p>	4, 5, 6, 8	H	
ECO1.4.6	<p>M Equipment that is stored outside the operating/procedure room is cleaned and disinfected before it enters the operating/procedure room.</p> <p><i>Guidance: Equipment stored outside of the operating/procedure room may include but is not limited to imaging equipment, laser equipment and compressed gas tanks.</i></p>	4, 5, 6, 7	H	
INTRAOPERATIVE CLEANING				
ECO1.4.7	<p>M Intraoperative cleaning takes place when hazardous events occur.</p> <p><i>Guidance: Blood and body fluid spills or other hazards (such as exposed sharps) that occur during a procedure require prompt containment and cleaning to avoid a hazard to team members (i.e. slip, exposure or sharps injury). Facility policy and procedures should be followed. Items/waste should be placed in the appropriate container and remain in the room until after the patient has been transported from the operating/procedure room.</i></p>	4, 5, 6	H	

No.	Description	Reference	Risk	Change
END OF PROCEDURE/BETWEEN CASE TURNOVER CLEANING				
ECO1.4.8	M End of procedure/between case turnover cleaning follows a specific documented process. <i>Guidance: A standardized approach ensures all surfaces are optimally cleaned and disinfected. Contamination of the operating/procedure room may be more widespread following procedures that result in aerosolization (e.g. dental procedures).</i>	4, 5, 6	H	
ECO1.4.9	M End of procedure/between case turnover cleaning cards and/or checklists list all the things in the room to be cleaned. <i>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.</i>	2, 5	H	
ECO1.4.10	M End of procedure/between case turnover cleaning commences after the patient has left the operating/procedure room.	6, 7	H	
ECO1.4.11	M End of procedure/between case turnover cleaning commences after the surgical scrub team has removed their contaminated PPE and left the operating/procedure room.	6	H	
ECO1.4.12	M End of procedure/between case turnover cleaning commences after all garbage is removed from the operating/procedure room. <i>Guidance: Waste is removed in accordance with the NHMSFAP's Waste Management accreditation standard, and facility policy and procedures. This includes single use anesthesia equipment such as airways, bacterial/viral filters, breathing circuits, breathing bags, suction tubing and suction containers/liners. Suction containers, or liquid waste can be solidified before removal and disposal to mitigate the risk of exposure from splashes.</i>	4, 5, 6, 7, 8	H	
ECO1.4.13	M End of procedure/between case turnover cleaning commences after all recyclables are removed from the operating/procedure room.	4, 5, 6, 7, 8	H	
ECO1.4.14	M End of procedure/between case turnover cleaning commences after all linen is removed from the operating/procedure room.	4, 5, 6, 7, 8	H	

No.	Description	Reference	Risk	Change
ECO1.4.15	M End of procedure/between case turnover cleaning commences after all contaminated instruments are removed from the operating/procedure room.	5, 6, 7, 8	H	
ECO1.4.16	M End of procedure/between case turnover cleaning commences after all contaminated anesthesia equipment is removed from the operating/procedure room. <i>Guidance: Examples of contaminated anesthesia equipment includes items such as laryngoscope handles and blades, GlideScope, Xylocaine spray tips, laryngeal masks, stylets, suction canister liners, suction catheters and tubing, airways, bacterial/viral filters and any used/contaminated items left on the anesthesia workstation.</i>	5, 6, 7, 8	H	
ECO1.4.17	M After collecting and removing all waste, recycling, linen and instruments from the operating/procedure room, environmental cleaning staff remove gloves, perform hand hygiene and don clean PPE before commencing cleaning and disinfection.	4, 5	H	
ECO1.4.18	M The operating/procedure room doors remain closed including during cleaning and disinfection. <i>Guidance: When the OR doors are open, positive pressure is lost allowing outside air to enter. This increases the risk of contamination and transmission of infections from surrounding areas.</i>	2, 6	H	
ECO1.4.19	M The anesthesia cart including the top and handle drawers is cleaned and disinfected.	2, 6, 7	H	
ECO1.4.20	M The anesthesia equipment is cleaned and disinfected. <i>Guidance: This includes IV poles and IV pumps.</i>	2, 6, 7	H	
ECO1.4.21	M The anesthesia machine including dials, knobs and valves is cleaned and disinfected.	2, 6, 7	H	

No.	Description	Reference	Risk	Change
ECO1.4.22	M Limited use (reposable) anesthetic circuit tubing is cleaned and disinfected or discarded as appropriate. <i>Guidance: A back and forth swivel hand motion is used to clean and disinfect limited use anesthetic circuit tubing as this motion facilitates the cleaning of its uneven surface. Breathing circuits are discarded in accordance with the manufacturer's instructions for use (e.g. after each patient, when reaching maximum in-use time such as daily or weekly or when reaching maximum number of reuses).</i>	1	H	
ECO1.4.23	M Limited use (reposable) anesthetic breathing bags are cleaned and disinfected or discarded as appropriate. <i>Guidance: Breathing bags are discarded in accordance with the manufacturer's instructions for use (e.g. after each patient, when reaching maximum in-use time such as daily or weekly or when reaching maximum number of reuses).</i>	1	H	
ECO1.4.24	M Patient monitors including cables are cleaned and disinfected. <i>Guidance: Cardiac monitor and cables, blood pressure cuff, pulse oximeter etc.</i>	2, 4, 5, 6, 7		
ECO1.4.25	M The operating/procedure room bed/chair is cleaned and disinfected.	2, 4, 5, 6, 7	H	
ECO1.4.26	M The operating/procedure room bed/chair attachment(s) are cleaned and disinfected.	2, 4, 5, 6, 7	H	
ECO1.4.27	M The reusable safety straps are cleaned and disinfected. <i>Guidance: Depending on the procedure(s) performed and/or level of anesthesia, Class 2 (procedural sedation) and Class 3 (local anesthesia only) facilities may not have safety straps.</i>	2, 6, 7	H	
ECO1.4.28	M The positioning equipment is cleaned and disinfected. <i>Guidance: This includes gel pads and bed attachments such as arm boards, stirrups and head rests.</i>	2, 6, 7	H	
ECO1.4.29	M Equipment that is stored outside the operating/procedure room is cleaned and disinfected before it leaves the operating/procedure room.	2, 4, 5, 6, 7	H	
ECO1.4.30	M Transport equipment is cleaned and disinfected. <i>Guidance: This includes equipment such as slider boards, stretchers and wheelchairs.</i>	2, 6	H	

No.	Description	Reference	Risk	Change
ECO1.4.31	M The overhead lights are cleaned and disinfected.	2, 4, 5, 6, 7	H	
ECO1.4.32	M The tables and mayo stand are cleaned and disinfected.	2, 6, 7	H	
ECO1.4.33	M Countertops are cleaned and disinfected.	2, 6, 7	H	
ECO1.4.34	M The mobile and fixed equipment is cleaned and disinfected. <i>Guidance: This includes stools, suction regulators, medical gas regulators, pneumatic tourniquets, imaging viewers, radiology equipment, electrosurgical units, smoke evacuation system, microscope, lasers etc.)</i>	2, 6, 7	H	
ECO1.4.35	M Walls are checked and spot cleaned as necessary.	4	H	
ECO1.4.36	M The floor surrounding the surgical field is cleaned and disinfected with a one-step process. <i>Guidance: This is usually a 1 to 1.5 meters (3 to 4 feet) perimeter around the operating area. If any areas of the floor are contaminated beyond the surrounding surgical field (e.g. spill, blood, body fluid), these areas are also cleaned and disinfected.</i>	2, 4, 5, 7	H	
TERMINAL/END OF DAY CLEANING				
ECO1.4.37	M Each operating/procedure room is terminally cleaned at the end of each surgical/procedural day. <i>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).</i>	2, 5, 6, 7	H	
ECO1.4.38	M Terminal/end of day cleaning cards and/or checklists list all the things in the room to be cleaned. <i>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.</i>	2, 5	H	

No.	Description	Reference	Risk	Change
ECO1.4.39	M Terminal cleaning includes all of the end of procedure/between case turnover cleaning of the operating/procedure room. <i>Guidance: This includes but is not limited to all fixed and mobile equipment, tables, mayo stand, suction machine, anesthesia workstation, infusers, monitors, stirrups, straps, stools, gel pads, all positioning silicone, operating/procedure table/chair and mattress.</i>	2, 4, 6, 7	H	
ECO1.4.40	M Terminal cleaning of the operating/procedure room also includes the lights and ceiling-mounted tracks.	2, 4, 5, 6, 7	H	
ECO1.4.41	M Terminal cleaning of the operating/procedure room also includes the air ducts and intake grills.	6	H	
ECO1.4.42	M Terminal cleaning of the operating/procedure room also includes spot-cleaning of the ceiling when visibly soiled.	2	H	
ECO1.4.43	M Terminal cleaning of the operating/procedure room also includes the door handles and push plates.	4, 5, 6, 7	H	
ECO1.4.44	M Terminal cleaning of the operating/procedure room also includes the cabinets. <i>Guidance: The exterior of any cabinets and cabinet doors especially around handles.</i>	4, 5, 6, 7	H	
ECO1.4.45	M Terminal cleaning of the operating/procedure room also includes the light switches and controls.	4, 5, 6, 7	H	
ECO1.4.46	M Terminal cleaning of the operating/procedure room also includes the telephone.	4, 5, 6, 7	H	
ECO1.4.47	M Terminal cleaning of the operating/procedure room also includes the computer workstation, including keyboards and screen(s). <i>Guidance: 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.</i>	2, 4, 5, 6, 7	H	
ECO1.4.48	M Terminal cleaning of the operating/procedure room also includes all furniture, machines and equipment including any wheels/casters.	4, 5, 6, 7	H	
ECO1.4.49	M Terminal cleaning of the operating/procedure room also includes all horizontal surfaces.	4, 5, 6	H	

No.	Description	Reference	Risk	Change
ECO1.4.50	M Terminal cleaning of the operating/procedure room also includes the kick bucket(s).	4, 5, 6	H	
ECO1.4.51	M Terminal cleaning of the operating/procedure room also includes the garbage, recycling and linen bins/frames.	4, 5, 6, 7	H	
ECO1.4.52	M Terminal cleaning of the operating/procedure room also includes the entire floor including under the bed/chair and under any mobile equipment. <i>Guidance: The floor is to remain wet for the required contact time specified by the disinfectant/detergent instructions for use.</i>	4, 5, 6, 7	H	
ECO1.5	The sterile core is terminally cleaned at the end of each surgical/procedure day <i>Guidance: The sterile core includes but is not limited to the scrub area(s) and corridors to the operating/procedure rooms, medical device reprocessing and sterile storage areas.</i>			
ECO1.5.1	M Terminal/end of day cleaning cards and/or checklists list all the things in the sterile core to be cleaned. <i>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.</i>	2, 5	H	NEW
ECO1.5.2	M Terminal/end of day cleaning commences after all garbage is removed from the sterile core. <i>Guidance: Waste is removed in accordance with the NHMSFAP's Waste Management accreditation standard and facility policy and procedures.</i>	4, 5, 6, 7, 8	H	NEW
ECO1.5.3	M Terminal/end of day cleaning commences after all recyclables are removed from the sterile core.	4, 5, 6, 7, 8	H	NEW
ECO1.5.4	M Terminal/end of day cleaning commences after all contaminated instruments and/or equipment is removed from the sterile core.	4, 6, 7, 8	H	NEW
ECO1.5.5	M Terminal cleaning of the sterile core includes each scrub sink, including faucets and dispensers. <i>Guidance: 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.</i>	4, 5, 6	H	NEW

No.	Description	Reference	Risk	Change
ECO1.5.6	M Terminal cleaning of the sterile core includes the walls and splash guards surrounding the scrub area(s).	4, 5, 6	H	NEW
ECO1.5.7	M Terminal cleaning of the sterile core includes the door handles and push plates.	4, 5, 6, 7	H	NEW
ECO1.5.8	M Terminal cleaning of the sterile core includes the cabinets. <i>Guidance: The exterior of any cabinets and cabinet doors especially around handles.</i>	4, 5, 6, 7	H	NEW
ECO1.5.9	M Terminal cleaning of the sterile core includes all horizontal surfaces. <i>Guidance: This includes all counters and open shelves.</i>	4, 5, 6	H	NEW
ECO1.5.10	M Terminal cleaning of the sterile core includes the light switches and controls.	4, 5, 6, 7	H	NEW
ECO1.5.11	M Terminal cleaning of the sterile core includes all furniture, machines and equipment including any wheels/casters.	4, 5, 6, 7	H	NEW
ECO1.5.12	M Terminal cleaning of the sterile core includes the telephone, computer workstation, including keyboards and screen(s) as appropriate. <i>Guidance: 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.</i>	4, 5, 6, 7	H	NEW
ECO1.5.13	M Terminal cleaning of the sterile core includes spot-cleaning of walls when visibly soiled.	2, 4, 5, 6	H	NEW
ECO1.5.14	M Terminal cleaning of the sterile core includes the entire floor. <i>Guidance: Floors should be cleaned with a fresh solution and remain wet for the specified contact time on the disinfectant instructions to ensure pathogens on the label have been killed.</i>	4, 5, 6	H	NEW
ECO1.6	Weekly and monthly cleaning augments daily cleaning in providing a clean perioperative environment. <i>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).</i>			

No.	Description	Reference	Risk	Change
ECO1.6.1	M Weekly/monthly cleaning cards and/or checklists list all the things in the perioperative environment to be cleaned. <i>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.</i>	2, 5	H	
ECO1.6.2	M Booms are high damp dusted, cleaned and disinfected weekly and when visibly.	2	H	
ECO1.6.3	M Vents are high damp dusted, cleaned and disinfected weekly and when visibly soiled.	2	H	
ECO1.6.4	M Windows and window coverings are high damp dusted, cleaned and disinfected weekly and when visibly soiled.	2	H	
ECO1.6.5	M Storage cabinets are high damp dusted, cleaned and disinfected weekly and when visibly soiled.	2	H	
ECO1.6.6	M The floor is cleaned monthly with a pH neutral cleaning agent. <i>Guidance: Monthly cleaning with a pH neutral cleaning agent prevents soil build-up.</i>	2	H	
ECO1.6.7	M The walls are cleaned monthly and when visibly soiled. M The sprinkler heads are cleaned monthly and when visibly soiled. <i>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.</i>	2 2	H	
ECO1.6.8	M The ceilings are cleaned monthly and when visibly soiled.	2	H	
ECO1.6.9	M There is a schedule for the cleaning, disinfection and maintenance of sink drains. <i>Guidance: Plumbing can act as reservoirs of bacteria; that bacteria can be transmitted by splash back from drains.</i>	2	M	NEW
ECO1.6.10	M The weekly cleaning schedule is followed. <i>Guidance: Weekly cleaning is performed as outlined in facility policy and procedures and documented in a log.</i>	2	H	
ECO1.6.11	M Weekly cleaning is documented.	2	H	

No.	Description	Reference	Risk	Change
ECO1.6.12	M The monthly cleaning schedule is followed. <i>Guidance: Monthly cleaning is performed as outlined in facility policy and procedures and documented in a log.</i>	2	H	
ECO1.6.13	M Monthly cleaning is documented.	2	H	
ECO1.6.14	M The sink drain maintenance schedule is followed. <i>Guidance: Sink drain maintenance is performed at the frequency determined by a qualified infection, prevention and control (IPAC) professional and documented.</i>	2	M	NEW
ECO1.6.15	M Sink drain maintenance is documented.	2	M	NEW
ECO1.7	Surfaces, fixtures, fittings, furnishings and equipment within the operating/procedure room(s) and sterile core are easy to clean and moisture impervious. <i>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.</i>			
ECO1.7.1	M Surfaces, fixtures, fittings, furnishings and equipment are cleanable with a health-care grade disinfectant (i.e. Health Canada DIN). <i>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.</i>	4, 5, 6	H	

No.	Description	Reference	Risk	Change
ECO1.7.2	<p>M Surfaces, fixtures, fittings, furnishings and equipment are in good repair and working order.</p> <p><i>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.</i></p>	4, 5, 6, 7	H	
ECO1.7.3	<p>M Doors and doors frames are constructed of smooth, non-porous material.</p>	3	M	
ECO1.7.4	<p>M All conduits, piping, duct work and open construction systems are covered by a finished ceiling.</p>	3	M	
ECO1.7.5	<p>M The ceiling is monolithic.</p> <p><i>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.</i></p>	3	M	
ECO1.7.6	<p>M The walls are smooth, free of fissures, open joints or crevices.</p> <p><i>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.</i></p>	3	M	

No.	Description	Reference	Risk	Change
ECO1.7.7	<p>M Windows, if present, cannot open and are cleanable.</p> <p><i>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.</i></p>	3	M	
ECO1.7.8	<p>M Floors are monolithic.</p> <p><i>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.</i></p>	3	M	
ECO1.7.9	<p>M Flooring extends up providing an integral coved base at all walls.</p> <p><i>Guidance: Integral coving is the extension of the monolithic flooring up the wall forming a wall base. It is to extend 230 mm (9 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.</i></p>	3	M	
ECO1.7.10	<p>M Countertops are constructed of non-porous, solid surface material and free from seams.</p> <p><i>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.</i></p>	3	M	

No.	Description	Reference	Risk	Change
ECO1.7.11	<p>M Cabinetry is enclosed, free from seams and constructed of smooth, non-porous material.</p> <p><i>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.</i></p>	3	M	
ECO1.7.12	<p>M Scrub sinks are wall mounted.</p>	3	M	
ECO1.7.13	<p>M Scrub sinks are made of non-porous material (e.g. 18 gauge–or thicker–stainless steel).</p> <p><i>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.</i></p>	3	M	
ECO1.7.14	<p>M Walls adjacent to the scrub sinks are protected from water and scrub chemical damage.</p> <p><i>Guidance: Protection is provided through sink design, choice of surface materials or protective shielding (i.e. impermeable back/side splashes). The areas under the paper towel dispenser(s) and soap dispenser(s) are also protected. Backsplashes extend a minimum of 600 mm (two ft) above sink level and extend to meet the cove base below.</i></p>	3	M	

No.	Description	Reference	Risk	Change
ECO1.7.15	<p>M Backsplashes are seam-free, and their edges sealed with a waterproof barrier.</p> <p><i>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.</i></p>	3	M	

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Revision history

Date	Revisions
September 8, 2016	<ul style="list-style-type: none"> NHMSFAP <i>Environmental Cleaning</i> standard approved (version 1.0)
November 30, 2023	<ul style="list-style-type: none"> Substantial content revisions to reflect environmental cleaning best practices (version 2.0) 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) New standards template