

**ATTACHMENT 1 TO APPENDIX 4E**

**HEALTH CARE FACILITY CLEANING AUDIT REFERENCE GUIDE, V.8A**



cleaning audit systems  
*the standard that makes the difference*

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# ***Health Care Facility Cleaning Audit Reference Guide – V8A***

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*In conjunction with the*

**British Columbia Participating Health Authorities**

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## **Introduction to the Manual:**

This training manual has been written with the primary goal of providing information that will make the process of auditing the cleanliness of hospitals as consistent as possible. The document continues to be updated and revised over time based on input from the different users. In addition to this manual there is a Floor Auditing Addendum that provides more clarity on how to audit floors. There is also a UV Marker Auditing Manual that provides instruction on how to perform UV Marker Audits. To find out where to access these manuals please call the main Westech number 604-630-9715 or 1-888-858-WEST.

## **Auditing Guide: Non Computer Procedures and Protocol**

This section covers the necessary background information required to perform an audit.

### **Facility Cleaning Audit Defined**

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The primary objective of performing a *facility cleaning audit* at a health care facility is to determine the level of cleanliness of **ALL** elements in a facility no matter who is responsible for cleaning them. While the cleanliness of almost all items in a facility is usually the responsibility of the Environmental Services (EVS) department there are items that are the responsibility of other departments such as maintenance, nursing, etc. The responsibility of who cleans different items in a facility often differs from Health Authority to Health Authority as well as down to a particular site. In some cases the same item could be cleaned by different groups within the same facility.

The facility cleaning audit will only cover items that are cleanable. ***Items that require replacing or repairing to bring them back to an acceptable appearance level are not included in the facility cleaning audit.*** Peeling paint, cracked toilet seats, damaged flooring, stained ceiling tiles, damaged washroom fixtures are all examples of items that are not assessed as part of the facility cleaning audit. It should be emphasized that if these items are soiled over and above their damaged appearance then they are still included as part of the audit. Items that would fail a facility cleaning audit that are not always the responsibility of the EVS department include bugs in lights, sprinkler heads, long term residence furniture, some biotech equipment, personal walkers and wheel chairs, etc.

Other items that are included in the facility cleaning audit that are almost always associated with the EVS department include out of stock dispensers such as hand soap, paper towel, toilet paper and waterless hand sanitizer located throughout the facility. Dispensers refer to containers mounted on the wall, cart or other furniture or fixture and do not include a free standing bottle of hand sanitizer or lotion etc.

All rooms inside a facility are part of the facility cleaning audit. External areas are not currently part of the facility cleaning audit. The only exception would be the entrance doors which would include the outside portion of the door.

### **BC Health Authorities Cleaning Outcome Standards Defined**

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The Provincial Health Authorities have developed the following cleaning output specifications that are referred to here as Cleaning Outcome Standards.

It is an expectation that Cleaning Outcome Standards be met at all times.

The Cleaning Outcome Standards are not an exhaustive list, but reflect many typical outcomes that are expected from EVS departments.

Environmental Services (EVS) involves meeting numerous standards that are different from and may be confused with Cleaning Standards:

- Quality Standards.
- Frequency Standards.
- Methods Standards.
- Materials Standards.

- Equipment Standards.
- Response Time Standards.

Cleaning outcome standards are the outcomes which result from balancing many of the above other standards.

The cleaning output specifications listed below are the Participating Health Authority's desired Service Levels and Standards outcome, with respect to Cleaning Standards.

The Cleaning Outcome Standards are designed to meet the following needs:

- The primary focus must remain the protection of the patient and resident. Routine cleaning is usually all that is needed to achieve a clean environment. However, surfaces frequently touched by health care providers, and/or patients, such as call bell lights, medical equipment, knobs, handles, light switches and assist rails have a greater potential as vehicles for infectious agents. Therefore, these items require more frequent cleaning and disinfection.
- Help to minimize the outbreak and spread of microbial infections.
- The standards are understandable and attainable.
- The standards to remain a viable tool they must be reviewed as often as required. Review is necessary to keep abreast of changes in the Health Care environment.

### **Cleaning Outcome Expectations:**

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When performing an audit, the following interpretations of the cleaning expectations should help when deciding whether an inspection element is acceptable or unacceptable. When making that judgment call, we must remember that all of the facilities are being used on a continuous basis throughout the day. For this reason, there will always be a certain amount of dust, removable marks, scuffs, finger marks etc. Minimal amounts of these will be considered acceptable. When there is an accumulation of dust, removable marks, scuffs, finger marks etc. on a surface, this is where an item will receive a failing score because of an unacceptable amount of soiling.

### **INTERPRETATIONS**

#### **FREE OF DUST**

- Minimal dust is acceptable.
- An accumulation of dust is unacceptable.
- If when passing a hand over a vertical surface a visible mark remains in the dust this will be considered as a build-up of dust and marked as unacceptable.
- If when passing a hand or finger over a horizontal surface the amount of dust allows for balling or beading this will be considered as unacceptable.

#### **REMOVABLE SPOTS**

- A spot may be tested with a wet wipe (Huggies Brand that is Scent and Alcohol Free, herein referred to as a wet wipe), if the spot is removable it will be considered as unacceptable.

### **SCUFFS, SCRATCHES and BLACK MARKS**

- Minimal scuffing and scratches is acceptable.
- Minimal amounts of black marks on flooring will be considered to be acceptable.
- Scuffing and scratches that detracts from the appearance of the area will be considered unacceptable.
- An accumulation of scuff marks from shoes or equipment will be considered unacceptable.
- An accumulation of black marks on flooring that detracts from the overall appearance of the floor will be considered as unacceptable.

### **FINGER MARKS**

- A minimal amount of finger marks will be considered acceptable.
- A buildup of finger marks will be considered unacceptable.

### **SOILED**

- Any accumulation of soiling that can be removed by a wet wipe.

### **SOIL/FLUID BUILDUP**

- Any buildup of soil or fluid that has caused discoloration of a surface will be considered unacceptable.
- Any soil buildup that can be removed by scratching the surface will be considered unacceptable.
- Any buildup of soap that causes discoloration or hardening around the sink, dispensers, drain, overflow or the area around where the sink or fixtures attach to the counter will be considered unacceptable.

### **COBWEBS**

- Any accumulation that forms a webbing affect attached to a surface will be considered unacceptable.

### **ADHESIVE RESIDUE**

- A minimal amount of adhesive or tape residue will be considered acceptable.
- An accumulation of adhesive or tape residue in more than one location will indicate neglect and be considered unacceptable.
- Any adhesive residue on a frequently touched surface will be considered unacceptable.

### **DEBRIS**

- Debris - paper, tissue, needle caps, sand, gravel etc.
- Isolated pieces of debris will be considered acceptable.
- An accumulation of debris in more than one location will be considered unacceptable.

### **STRINGS OR WIRE**

- Removable strings or wire that has been attached to walls, ceilings, fixtures that have not been removed will be considered unacceptable.
- This would include strings or wires that have been used to hang seasonal decorations.

### **INCONSISTANT APPEARANCE**

- When assessing the many different types of floor surfaces, you need to consider is if there is a consistent appearance between the traffic and non traffic areas. When there is a noticeable

difference between these two areas (caused by scratches, scuffing, traffic wear etc.), then this will be considered unacceptable.

- When the floor is not properly maintained, soil will accumulate on the surface which will present a soiled surface appearance. This will usually cover the traffic lanes with varying degrees of discoloration.

#### **DUST BALLS**

- Any accumulation of dust balls will be considered as unacceptable.

#### **MINERAL DEPOSITS**

- Any buildup of mineral deposits will be considered unacceptable.

#### **REMOVABLE CLEANING RESIDUE**

- Any noticeable wiping marks caused by inappropriate cleaning technique (soiled mops, cloths, etc) or inappropriate cleaning solution dilution will be considered unacceptable.

#### **REMOVABLE DIRTY RESIDUE**

- Any element not maintained on a routine basis will have a gradual build-up of soil accumulate on their surface which when wiped with a wet wipe will show dirty residue will be considered unacceptable.

**Note:** Any surface that has an obvious residue after being cleaned and disinfected using Virox, or any other cleaning or disinfecting agent, will be considered unacceptable.

### **Important Auditing Considerations**

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When making a decision to pass or fail an item the two most important factors involved in the process are infection control and public perception. Directly related to these two factors are:

- Cleanliness versus repair replace issues.
- Time of Day and Cleaning Outcome Expectations.

#### **Infection Control:**

The primary focus on helping prevent the spread of infection in a health care facility is to ensure that the frequently touched surfaces remain clean. Specifically, more frequent cleaning of high contact surfaces (contact points) helps reduce the chance of transmission of pathogens by human contact. When auditing a room the auditor will focus on all frequently touched surfaces and if soiling is present on any of these contact points the inspection element will fail. Moreover, auditing infection control risks in a room are not limited to frequently touched surfaces. For example, a layer of dust on an exam light or wall mounted light above a patient's bed is also an infection control concern since the dust could harbour dangerous pathogens. Other examples of non contact surfaces where dust could be dislodged could include dust on a vent above a patient's bed, a window covering, etc.

Adhesive residue left on a surface is not considered a clean surface as the disinfectant/sanitizer must be on a smooth surface to work. Therefore any adhesive residue left after usage of adhesive tape will be considered to not be clean. Also the use of adhesive tape over a period of time has the adhesive on the edge of the tape and this is also considered not clean. Any adhesive residue on a contact point will be an automatic fail.



It is extremely important to realize that many of the contact points are underneath the primary surface; for example, underside edge of the bed rails, under the soap dispensers, underside edge of a free standing sink, under the overbed tables, under the paper towel dispenser, as an example.

The following are examples, but not limited to, some of the common frequently touched surfaces as well as areas where dust poses a threat in a room that are subject to being audited.

#### **Doors**

- Handles, lock, door above and below the handle, door edge which someone could use to open the door while standing or in a wheel chair.

#### **Walls**

- Bumper on a wall where anyone might lean and put their fingers underneath, hand rails, partitions, switch plates, elevator buttons, automatic door opener.

#### **Ceilings**

- Heavy dust above a patient bed.

#### **Vents/Registers/Exhaust Hoods**

- Heavy dust above or near a patient bed.

#### **Window Covering**

- Pull cords.

#### **Cubicle Curtains**

- Area where the curtain is held/opened or touched.

#### **Beds/Exam Tables/Stretchers**

- Hand rails all sides, adjust/control buttons, head board, footboard, frame.

#### **Patient Equipment**

- Overbed tables (inside, underneath and on top), bedside table, commode, call bell, sharps, lift/traction bar, wall mounted equipment, IV poles, wheel chair/walker, computerized charting stations.

#### **Furnishing Fixtures**

- Seating, desk/work station, keyboards, counters, appliance, TV/LCD monitor, remote, fridge door, med cart/laundry hamper, chart racks and binders.

#### **Light Fixtures**

- Cover, arm, pull cord.

#### **Phones**

- Handle, base, intercom.

#### **Waste/Recycle**

- Area where you lift the receptacle and the lid.

#### **High Dusting**

- Heavy dust above or near a patient's bed.

#### **Sink/Tub/Shower/Dispenser**

- Fixtures, top and underside of basin.
- Dispensers: waterless, paper towel, soap.

#### **Toilet's Urinals Hoppers**

- Seat, flush handle, bowl,
- Dispensers: toilet paper, toilet seat cover.

### **Public Perception:**

With public perception we are making reference to items in a health care environment such as floors and windows (as an example) that are generally not infection control concerns. If these items are not clean the staff, patient or visitor to the facility might not feel confident about their safety.

"Patients rightly expect hospitals to be clean. Just like a clean hotel, a clean hospital gives a good first impression and can make a difference to how patients feel about the hospital and how they feel they have been treated. It is a physical manifestation of the health of the hospital. The message it gives spreads far beyond infections to say to patients, 'you are in safe hands'."

John Reid Department of Health NHS 2004: UK

As an example, cleaning residue on a window might be an indicator that the window is clean from an infection control perspective but from a public perception stand point the patient might feel that the window is soiled and then lose confidence in their surroundings. The same logic applies to inspection elements such as floors.

### **Cleanliness versus Repair/replace Issues:**

When performing an audit, the auditor must be able to distinguish between whether or not a surface is soiled or requires repairing or replacing. Conditions such as stained or missing ceiling tiles, flaking paint, holes in a wall surface, years of finish build-up on a baseboard, tarnished washroom fixtures, etc are examples of issues where the item needs repairing or replacing. ***These issues found on a clean surface would not cause the item to fail.*** Items that would fail a facility cleaning audit that are not always the responsibility of the EVS department include bugs in lights, sprinkler heads, long term residence furniture, some bio-medical equipment, personal walkers and wheel chairs, etc.

### **Time of the Day and Cleaning Outcome Expectations:**

The ideal time in which to audit an area is after it's been cleaned but it is not always possible for the auditors to accommodate the timing of the cleaning being performed. With this in mind, an auditor must look at the level of soiling on a particular surface and make their judgment based on that alone. No matter how frequently a building is being cleaned, there will always be a certain amount of soiling on a surface. We must be able to look past a day's worth of soil while deciding to pass or fail an item.

For example, when running your hand over a 6"-12" section of a bed frame and you see a very light film of dust on your fingers, this would be an acceptable level of dust on that surface. However, if your fingers are covered in what looks like fuzzy soil then the bed would receive a failing grade.

Another example would be a mirror in a washroom. In a very busy area, this washroom may be used many times a day. If this mirror is located over the sink, which most are, then it's going to receive the splashing of soapy water countless times over the course of a day. When assessing this item, first look at the top half of the glass. This should be free of smearing and smudges. If it is, this will demonstrate that the Housekeeper is doing a thorough job of cleaning this surface and any amount of soiling on the bottom half of the glass would be a time of day issue and this would not cause the item to receive a failing grade.

If a toilet is not flushed and the bathroom has bad odour this item should not fail since it is not the housekeeper's responsibility to flush the toilet. With waste containers, judgment also has to be used since it does not take long for a waste container to fill up. If the waste container has a bad odour and or soil on the outside this is usually a good indication that it has not been emptied in a while. If the waste container

is full and overflowing with paper towels that do not look compacted then it might have been emptied quite recently and the auditor should consider other telltale signs in the room prior to making a decision.

When an auditor encounters a surface that has blood on it the following practices should apply:

- When blood is found, no matter what type of an area it is found in, the surface(s) automatically fails.
- When testing a substance that appears to be blood, be very careful that the blood does not come in contact with your skin. It is always good practice to put a disposable glove on to prevent the blood from wicking through the wet wipe and contacting your skin. The gloves are readily available in most areas at the sites. Always wash your hands after the glove is removed.
- There are certain substances that get splattered on surfaces that look like dried blood but when a flashlight is used this substance will glisten/shine and it's an easy way to identify that this is not blood.

When doing audits on patient rooms, whenever possible, audit rooms that are discharge cleaned first prior to auditing occupied rooms. A discharge cleaned room is when a patient no longer occupies that bed and the EVS staff have thoroughly wiped down all surfaces before making the bed back up for the next patient who is being transferred in. This is when everything should be at its cleanest and it should be much easier to make the decision about whether the item should pass or fail. A discharged room is held to a higher bench mark than an occupied room e.g. Finger prints and or nose and chin prints on a totally clean window should pass in a patient occupied room as a time of day issue but should fail in a room that was discharge/terminal cleaned.

When making a decision on whether to pass or fail a particular inspection element it is important to look at all items in the category. For instance, if there are six or eight items in the same category (i.e., six doors in one room) you must look at all of them. If 85% or more of the item or items are clean to an acceptable level, then a passing score can be given or conversely if 15% or more of the item or items are soiled to an unacceptable level then a failing score can be given (referred to as the 85/15 standard). ***Please keep in mind the 85/15 standard is only a guideline and common sense and experience must prevail. For instance if an item is extremely soiled and/or it poses an infection control risk or a public perception issue then it overrides the 85/15 standard.*** A good example where you would ignore the 85/15 standard is when you are auditing doors. For example, if there are a lot of finger marks or soil near the door handle then a pass or fail decision should not take into consideration the 85/15 standard. This exception is based on the fact that this part of the door is an excellent way to spread infection and therefore requires more attention.

Greater emphasis is being placed on frequently touched surfaces or contact points such as light switches, laundry hamper lids, cupboard and drawer pulls, underside edges of tables, hand and bed rails, patient equipment, children's toys, underside lip of wall mounted bumper guards etc. Soap dispensers and waterless hand sanitizer dispensers (especially the underside) are an area of great concern if they are not properly maintained on a daily basis as these can become ideal breeding grounds for Microbes.

When encountering heavy concentrations of soiling on one item or a portion of an item (i.e. one door of six or a portion of one wall) the auditor should disregard the 85/15 standard and fail the item because of the degree of soiling found.

Another important consideration to make when auditing a room is to not count the same items twice in two different categories or inspection elements. For instance if the top of a cabinet is unacceptable you would (and it warrants a fail) then count this item in the proper category which in this case would be ***furnishing/fixtures***. Do not count the top of the cabinet again in the ***high dusting*** category since if you did this it would be considered "double dipping". The following listing of the different inspection elements defines which category the inventory items in a room belong to.

When encountering soil, film, spots or marks on a surface use a wet wipe to determine if the marks are removable. If you are confident that the marks do not appear to be removable then do not consider them in your determination of whether or not the inspection element should pass or fail.

## Auditing Tools

We have found the following tools extremely useful when auditing:

- A powerful flash light with a push button on/off switch works well for dark areas under beds and corners. A flashlight that has a white light is better than one that has a blue light.
- A telescoping mechanics mirror is extremely helpful to access hard to reach areas such as high dusting, under beds and the flush rims of toilets and urinals.
- Wet wipes - Huggies Brand that is Scent and Alcohol Free - to determine if the soil is removable.

### Note:

- Auditors should not wear protective gloves when auditing because we don't get a good feel of the surfaces and when auditing an occupied patient room the patient may question why we are reluctant to touch any of the surfaces in their room without having a glove on. The only exception to this rule is when labs are being audited, when testing blood or body fluids and if auditing an isolation room (Please check to see if you are authorized to audit isolation rooms). Remember to always wash your hands before and after glove use.
- After each audit it is important to sanitize your hands either by using a waterless hand sanitizer or a soap and water wash in order to reduce the risk of spreading infection.
- All Auditors are expected to follow all Health Authority Policy and Procedures, i.e. Hand Hygiene, Dress Code and Confidentiality.

## Inspection Elements That Have Sub Categories

When inspecting certain inspection elements (walls, carpets/mats, interior windows, patient equipment, furnishings/fixtures, waste containers, sinks or toilets), the auditor is required to document the specific "sub-element" within each of these categories that is unacceptable. Specifically, the auditor can pick one or all of the specific items from a sub category list. As an example, when an item such as patient equipment has failed, the auditor has to pick the specific element in the patient equipment category that has failed such as "commodes" and/or "call bells". The following list provides some **EXAMPLES** of the sub categories that appear in the patient equipment category. Please note that the subcategories are different for each inspection element and some inspection elements do not have any subcategories.

### Example Subcategories

- Commode/Free Standing Shower Seat
- Equipment Attached to Beds
- IV Poles/Pumps/Suction
- Wall Mounted Equipment
- Lifts/Traction Bars
- Over Bed/Bedside Tables
- Wheel Chairs/Walkers
- Fitness Equipment
- Sharp Containers
- Call Bells
- Children's Toys
- Cords
- High Chairs/Playpens
- Underside
- Contact Point

Once the sub category item/s have been chosen, the auditor then chooses from the following fail prompt list which will give further information on why the item/s have failed.

**Example Fail Prompts (different for each inspection element)**

- **Adhesive Residue** - an accumulation will be considered unacceptable.
- **Blood** - any blood will be considered unacceptable.
- **Cobwebs** - an accumulation will be considered unacceptable.
- **Dust** - an accumulation will be considered unacceptable.
- **Feces/Urine**
- **Finger Marks** - an accumulation will be considered unacceptable.
- **Sharps Filled Over the Full Line**
- **Removable Cleaning Residue** - any noticeable wiping marks caused by inappropriate cleaning technique (soiled cloths) and or inappropriate cleaning solution dilution will be considered unacceptable.
- **Removable Dirty Residue** - any gradual build-up of soil accumulate on the surface which when wiped with a wet wipe will show dirty residue will be considered unacceptable.
- **Removable Spots** - anything that can be removed using a wet wipe.
- **Soiled** - an accumulation will be considered unacceptable.
- **Strings or Wire** - used to hang decorations/signs and are clearly not in use anymore.

**Determining Left or Right Hand Side**

To determine the side of the bed or chair or any other equipment or furniture that you are commenting on, note this as if you were, for example, sitting in the chair/lying in the bed. The left hand side would be the user's left hand side etc.

For rooms with multiple beds or Geri chairs without numbers - start at 1 or A from the first bed/geri chair in the room on your left hand side as you enter the room - and then continue clockwise from there till you have completed the count of all chairs or beds..

Determining the left or right side of an item, such as a soap dispenser, a light switch, door handle etc - it would be as you face the item - your left would be the left side of the item. This would be for all items a patient would not be sitting or lying in.

## **Specific Inspection Element Auditing Guidelines:**

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### **1. DOORS**

**Definition** - All types of doors (including door grilles, overhead doors), sills, surrounding frames, door glass, door closers and hardware, tracks if above floor, and moldings.

**Conditions Expected** – Clean means: free of dust, removable marks, soil/fluid build-up, cobwebs, and adhesive residue.

1. The door, sills and tracks appear to be clean as per the conditions expected.
2. Both sides of the door, all the edges, the frame, moldings and door closer mechanism are clean.
3. There are no removable marks on the doors, sills, and kick plates.
4. The door hardware including the handles, knobs, hinges and push bars are clean.

The specific fail prompts for the above item are

**Note:**

- That in this category the first fail prompt (square bullet) is actually sub equipment that helps you to further determine the correct sub category and prompt for that item:
  - Door**
  - Door Frame and Hardware**
  - Door Glass/Mirror**
  - Door Vent**
  - Door Window Covering**
  - Kick Plate**
  - Tracks Above Floor**
  - Contact Point**
  - **Adhesive Residue** - an accumulation will be considered unacceptable.
  - **Blood** – any blood will be considered unacceptable.
  - **Cobwebs** - an accumulation will be considered unacceptable.
  - **Dust** - an accumulation will be considered unacceptable.
  - **Finger Marks** - an accumulation will be considered unacceptable.
  - **Graffiti** – only put this comment in if EVS is able to remove it. If it requires maintenance to remove it then enter a comment and don't fail the item.
  - **Removable Cleaning Residue** - any noticeable wiping marks caused by inappropriate cleaning technique (soiled cloths) and or inappropriate cleaning solution dilution will be considered unacceptable.
  - **Removable Dirty Residue** - any gradual build-up of soil accumulate on the surface which when wiped with a wet wipe will show dirty residue will be considered unacceptable.
  - **Removable Spots** - anything that can be removed using a wet wipe.
  - **Scuff Marks** - an accumulation will be considered unacceptable.
  - **Soiled** - an accumulation of soiling that can be removed by a wet wipe.

**Auditing Note:**

- Audit all doors in the room you are in (both sides) no matter what direction the doors open. If a door inside a room is locked just audit the one side of the door. There is an exception when auditing a corridor or hallway.
- When auditing a hallway (or section of) only audit the fire doors/double doors between corridors (both doors no matter which way they open). If you are auditing both corridors only audit the fire doors between the two hallways once. The door to a stairwell is audited as part of the stairwell room.
- The top frame or sill of the door way should be checked on both sides of the door that you are auditing. Thus if a door opens into a patient room then you would audit the top frame of the door in the hallway and inside the room.
- When auditing doors if there are a lot of finger marks or removable dirty residue near or on the contact areas of the door, then the 85/15 standard will not be taken into consideration to make a pass or fail decision. This exception is based on the fact that this part of the door is an excellent way to spread infection and therefore requires more emphasis.
- Some rooms have one side of the door that is open and the other side is locked and is usually only unlocked when needing to bring something bigger into the room such as a bed. This locked portion of the door should always be unlocked and checked when auditing because there is the possibility of dust accumulation in the frame area.
- Visually look at the door and imagine where the possible contact areas are. Don't overlook the obvious such as the handle area but look further while doing your inspection. Someone in a wheelchair may use the lower part of the door edge to help either pull themselves out of the room or into the room. The upper door edge is also a possible contact point as well.
- Door closers and closing arms should be checked using an inspection mirror.
- If the kick plate on a door has a lot of scuff marks or cleaning residue on it to the point that it takes away from the overall appearance of the door then this should fail the door category.
- The tracks that are above the floor that sliding doors travel back and forth in, are audited as part of the door.
- Vents that are continually blowing air into a room can cause dusting issues with doors so always look where the vent is blowing to determine if there is any noticeable dust issues.
- Large and small partition doors are audited as part of walls. Access doors are audited as part of its location i.e. ceiling or wall.
- Patient room vinyl barrier to prevent a patient from exiting a room will be audited in the door category.
- A vent in a door should be counted in the door category.
- A mirror on a door should be counted in the door category.
- Blinds on a door will be counted in the door category.
- If there is only a door frame, audit as a door element.
- Doors, including half doors in a nursing station, will be counted in the door category.
- Door tracks must be above the floor otherwise audited as part of the floor category.

## 2. WALLS

**Definition** - All types of walls (drywall, concrete, tile,) including hand and chair rails, room dividers including columns, low partition walls, cubicle walls, wall bumper rails, washroom stall partitions (including mounting brackets and door and door hardware), switch plates, panels and outlets. Any vertical piping going up the wall (not counting plumbing fixtures under the sink or toilet) should also be counted in this category. Horizontal piping below five feet would also be counted in the wall category.

**Conditions Expected** - Clean means: free of dust, removable marks, soil/ fluid build-up, cleaning fluid residue, streaking, cobwebs and adhesive residue.

1. The surface of the walls appear to be clean as per the conditions expected.
2. There are no removable marks.
3. Walls requiring polishing are kept in polished state and appear clean, including wall plaques.

**The specific fail prompts for the above item are:**

**Note** - That in this category the first fail prompts (square bullet) are actually sub equipment that helps you to further define what is wrong in this category:

- Stall Partitions** - any type of structure that surrounds a toilet, or is placed between urinals, this will include stall doors, handles and hardware
- Walls**
- Room Dividers**
- Wall bumpers/Hand Rails**
- Piping**
- Switch Plates**
- Underside**
- Contact Point**
- Adhesive residue** - an accumulation will be considered unacceptable.
- Blood** - any blood will be considered unacceptable.
- Cobwebs** - an accumulation will be considered unacceptable.
- Dust** - an accumulation will be considered unacceptable.
- Feces/Urine**
- Finger Marks** - an accumulation will be considered unacceptable.
- Graffiti** – only put this comment in if EVS is able to remove it. If it requires maintenance to remove it then enter a comment and don't fail the item.
- Mineral Deposits** - can be a water line or streaks inside the bowl coming from the jets, deposits under the flush rims or blue/green discoloration of the floor drains.
- Removable Cleaning Residue** - any noticeable wiping marks caused by inappropriate cleaning technique (soiled mops/cloths) and or inappropriate cleaning solution dilution will be considered unacceptable.
- Removable Dirty Residue** - any gradual build-up of soil accumulate on the surface which when wiped with a wet wipe will show dirty residue will be considered unacceptable
- Removable Spots** - anything that can be removed using a wet wipe.
- Scuff Marks** - an accumulation will be considered unacceptable.
- Soiled** - an accumulation of soiling that can be removed by a wet wipe.



- **Strings or Wire** - used to hang decorations/signs and are clearly not in use anymore.

**Auditing Note:**

- When encountering cobwebs that are attached to the walls and the ceiling, these must only be failed in one category either the walls or the ceiling. An exception to this rule is if there is an excessive amount of cobwebs found on both the walls and ceilings.
- The entire area of the wall surface is in the wall category (the top portion near the ceiling is not high dusting).
- The top edge of a bathroom stall partition is included in this category and not high dusting.
- The handrails on walls and in stairwells and elevators are included in this category and are major contact points.
- Pictures, bulletin boards, white boards, clocks, fire bells, fixed signage, etc. that are on the wall surface are not part of the wall, these items will fall under the furnishing or high dusting category.
- Shower walls, walls around a tub and the sink will be covered in the sink/tub/shower.
- The wall area behind the toilet from the floor level to (that is the same width as the toilet) the height of the flush handle will be included in the toilet category.
- Horizontal piping above five feet should be counted in the high dusting category.
- Assist bars in the toilet or shower area will be counted as part of the Toilet or Shower inspection items.
- The underside lip of wall mounted bumper guards should be checked for blood, removable dirty residue and spots. This is a contact point that is most often over looked. By elevators or patient rooms it is not uncommon for people to lean against the wall and put their finger tips right on these areas.
- When there is a wall mounted sharps container check the walls around the container for any blood splatter that may be there.
- Use your flashlight to check for dust on the walls.
- A bumper that is more than 1 foot off the floor, will be audited as part of the walls. Where the bottom of the wall bumper is 1 foot or less off the floor then this wall bumper is audited in the Baseboard category.
- Vents that are continually blowing air into a room that are in close proximity to a wall surface can cause dusting issues so always look where the vent is blowing to determine if there is any noticeable dust issues.
- The half door, for example, sometimes found in a nursing station will be counted in the door category.
- Access doors are audited as part of its location i.e. ceiling or wall.

### 3. CEILINGS

**Definition** - All types of ceilings.

**Conditions Expected** - Clean means: free of dust, removable marks, soil build-up, cobwebs, adhesive, strings or wire that is not in use.

1. The ceiling appears to be clean as per the conditions expected.
2. T-Bar/support frames are clean.

**The specific fail prompts for the above item are**

**Note** - That in this category the first fail prompt (square bullet) is actually sub equipment that helps you to further define what is wrong in this category:

- T-Bar**
- Tiles**
- Drywall**
  - **Adhesive Residue** - an accumulation will be considered unacceptable.
  - **Blood** - any blood will be considered unacceptable.
  - **Cobwebs** - an accumulation will be considered unacceptable.
  - **Dust** - an accumulation will be considered unacceptable.
  - **Removable Cleaning Residue** - any noticeable wiping marks caused by inappropriate cleaning technique (soiled mops/cloths) and or inappropriate cleaning solution dilution will be considered unacceptable.
  - **Removable Dirty Residue** - any gradual build-up of soil accumulate on the surface which when wiped with a wet wipe will show dirty residue will be considered unacceptable.
  - **Removable Spots** - anything that can be removed using a wet wipe.
  - **Finger Marks** - an accumulation will be considered unacceptable.
  - **Soiled** - an accumulation of soiling that can be removed by a wet wipe.
  - **Strings or Wire** - used to hang decorations/signs and are clearly not in use anymore.

#### **Auditing Note:**

- When evaluating a ceiling, check around the location of the ceiling vents (remember, the vents have their own category so don't include them in with the Ceiling category). This is usually where the greatest accumulation of dust will be found with this item. Always look in the direction the vent is blowing across the ceiling as dust will accumulate on the edges of the T-Bar and or ceiling tiles.
- The acoustical ceiling tiles used for suspended ceilings are porous and will stain very easily when any liquid comes in contact with them. Once they become stained, they are almost impossible to clean and will usually need replacing. Remember, this is now a maintenance issue, but if these stained tiles have an accumulation of dust from the vents blowing across them then they should fail because of the dust not because they are stained.
- Some suspended ceiling tiles have a very thin vinyl coating that can be easily wiped removing any substance that has been splashed onto it.
- The t-bars holding the ceiling tiles in place are easy to wipe and should be counted in the ceiling category.

- Radiant heating and cooling panels which can be found in the ceiling above exterior windows and also in some washrooms in the ceiling just outside of the shower area should be counted in the vent category.
- Access doors are audited as part of its location i.e. ceiling or wall.

#### 4. VENTS/REGISTERS/EXHAUST HOODS

**Definition** - All types of air vents, heat registers, hood exhausts and ceiling panels whether on a wall or a ceiling. Radiant heating and cooling panels that are mounted on the ceiling. All flush mounted ceiling speakers.

**Conditions Expected** - Clean means: free of dust, removable marks, cobwebs, debris and soil/fluid buildup

1. The vents, hoods and heat registers appear to be clean as per the conditions expected.

**The specific fail prompts for the above item are**

**Note** - That in this category the first fail prompt (square bullet) is actually sub equipment that helps you to further define what is wrong in this category:

- Ceiling Vents**
- Floor or Wall Vents**
- Exhaust Hoods**
- Speakers**
- Registers**
- Heating or cooling panels**
- Adhesive Residue** - an accumulation will be considered unacceptable.
- Blood** - any blood will be considered unacceptable.
- Cobwebs** - an accumulation will be considered unacceptable.
- Debris** – an accumulation of paper, tissue, needle caps, sand, gravel etc.
- Dust** - an accumulation will be considered unacceptable.
- Removable Cleaning Residue** - any noticeable wiping marks caused by inappropriate cleaning technique (soiled mops/cloths) and or inappropriate cleaning solution dilution will be considered unacceptable.
- Removable Dirty Residue** - any gradual build-up of soil accumulate on the surface which when wiped with a wet wipe will show dirty residue will be considered unacceptable.
- Removable Spots** - anything that can be removed using a wet wipe.
- Strings or Wire** - used to hang decorations/signs and are clearly not in use anymore.
- Soiled** - an accumulation of soiling that can be removed by a wet wipe.

**Auditing Note:**

- When inspecting vents and registers concentrate on the front face plate and the edges of the louver that are visible. If a vacuum and a brush or other appropriate housekeeping equipment could remove the dust or soiling then the accumulation would be counted as part of the audit. Areas of the vent, that are not accessible by a vacuum and/or other appropriate housekeeping equipment, that require cleaning will be considered a maintenance item since a tool will be required to access these areas. If the cleaning of the vent is considered a maintenance item then the vent should not fail.
- Ceiling and wall mounted vents that are continually blowing air into an area can cause issues with various inspection elements such as Doors, Walls, Ceilings, Intake Vents, Lights, Furniture, High Dusting so when checking these inspection elements always look in the direction that the vents are blowing, onto these items.

- Exhaust hoods usually have issues on the inside from deposits of cooking grease, bugs and dust.
- A vent in the door should be counted in the door category.
- This category includes flush mounted speakers in the ceiling.
- Radiant heating and cooling panels which can be found in the ceiling above exterior windows and also in some washrooms in the ceiling just outside of the shower area should be counted in this category.

## 5. HARD FLOORING

**Definition** - All types of hard flooring (resilient, stone, concrete and tile) including stairs, risers, and stair treads, stair nose, transition strips, metal thresholds, elevator tracks and floor drains (except in shower area).

**Conditions Expected** - Clean means: free of dust, dust balls, debris, soil/fluid build-up, removable marks and has a consistent overall appearance from the non-traffic areas into the traffic lanes

1. The floor appears to be clean as per the conditions expected.
2. The floor has a consistent appearance from wall to wall.
3. There is no soil build-up including corners and edges.
4. The stair risers, stair nose appear to be clean.
5. There is no accumulation of dust or debris in the tracks of elevators and in the grooves of thresholds.
6. The surface of the floor drain is clean and free of any build-up of bonded soil, mineral deposits, hair, etc.

The specific fail prompts for the above item are

**Note** - This category, the first fail prompt (square bullet) is actually sub equipment that helps you to further define what is wrong in this category:

- Floor**
- Corners and Edges**
- Floor Drain**
- Elevator Tracks**
- Thresholds/Transition Strips**
  
- Blood** - any blood will be considered unacceptable.
- Cobwebs** - an accumulation will be unacceptable.
- Debris** – accumulation of paper, tissue, needle caps, sand, loose soil, gravel etc.
- Dust** – an accumulation will be considered unacceptable.
- Dust Balls** – often called dust bunnies, under beds, stairways, hallways etc.
- Feces/Urine**
- Inconsistent Appearance** – discoloration from lack of proper cleaning.
- Mineral Deposits** – any buildup of mineral deposits will be considered unacceptable.
- Removable Cleaning Residue** - Any noticeable mopping marks or sticky residue caused by inappropriate cleaning technique (soiled mops) and/or inappropriate cleaning solution dilution will be considered unacceptable.
- Removable Dirty Residue** - Floors which are not maintained on a routine basis will have a gradual buildup of soil accumulate on their surface which will give the floor a soiled surface appearance and when wiped with a wet wipe will show dirty residue will be considered unacceptable.
- Removable Spots** – anything that can be removed using a wet wipe.
- Scuff and Scratch Marks** – an accumulation will be considered unacceptable.

**To determine if a floor fails or passes an audit the auditor should be making an assessment on whether or not the following three conditions are present in the following order:**

1. **Condition 1: An unacceptable amount of removable cleaning residue or dirty residue as determined by a wet wipe test**
  - a. A measure of the cleanliness of the floor with regards to whether or not there is an unacceptable amount of removable cleaning residue or dirty residue on a wet wipe after wiping the floor in a specific manner. It should be emphasized that the removable cleaning residue or dirty residue is not always visible when looking at the floor.
2. **Condition 2: An unacceptable amount of removable spots debris, and/or dust**
  - a. A measure of the cleanliness of the floor with regards to the accumulation of removable spots, debris and/or dust.
3. **Condition 3: Inconsistent appearance**
  - a. A measure of the cleanliness of the floor with regards to the overall appearance relating to whether or not the floor looks the same in all areas.

**It should be emphasized that if any one of the above three conditions is present and the other two are not that is still enough to fail the floor.**

**Condition 1: To assess whether or not the floor should fail for removable residue/soil the auditor should do the following:**

- **Note:**
  - See note at the end of this section for specifics on how to prepare your wet wipe and how to wipe the floor for testing
- 1. Using a wet wipe test the floor in three places as follows:
  - a. Traffic area – herein defined as wipe area “Traffic”
  - b. 6 – 8 inches from the wall – herein defined as wipe area “Non Traffic”
  - c. Within 3 inches from the wall – herein defined as wipe area “Edge”
- 2. Compare the wet wipe samples to the photograph samples that immediately follow this section. **Keep in mind that the wet wipe residue samples depend on the room type that you are in. Specifically, if you are in an OR the removable residue permitted on the wet wipe is less than in any other area of the hospital.** If more than two of the three area's tested are darker than the removable residue examples then the floor should fail for removable residue.
- 3. If only one of the three areas is darker than acceptable then take a new wet wipe and test the same area type (traffic, non traffic, edge) but in a different location. For example if "non traffic" was darker than acceptable then using a new wet wipe, test "non traffic" area again. If "traffic" was darker than acceptable then using a new wet wipe, test "traffic" area again.
- 4. If the second test of the area results in wet wipe that is darker than acceptable and the area type is "traffic" or "non traffic" then the floor should fail for removable residue.
- 5. If the second test of the area results in a wet wipe that is darker than acceptable and the area type is "edge" or "3 inches from the wall to be specific" then do the following:
  - a. If the floor passed for inconsistent appearance and there was no loose debris or soil then fail the baseboard for removable residue and any other fail prompts as described in the baseboard auditing section.
  - b. If the floor failed for inconsistent appearance and/or loose debris or soil then also indicate removable residue as a fail prompt and do not fail the baseboard (unless of course the

baseboard fails for unacceptable conditions as described in the baseboard section of the auditing manual).

- **Fail Prompts to apply to condition 1:**
  - Removable Residue/Soil

**Condition 2: To assess whether or not the floor has unacceptable, debris, dust and and/or removable spots such as blood, feces/urine the auditor should do the following:**

- Using your flashlight, walk around the whole room and observe whether or not there is any removable spots, loose soil or debris under the bed, behind the equipment, behind the door and any other areas on the floor. If you are not sure if the spots are removable then use your wet wipe to assess. In making your decision consider the following:
  - a. Time of day issues (except in the case of dried blood)
  - b. Weather outside and proximity of room to the entrance of the building
- **Fail Prompts to apply to condition 2:**
  - Debris
  - Dust
  - Dust Balls
  - Blood
  - Feces/Urine
  - Removable Spots
  - Mineral Deposits

**Condition 3: To assess Inconsistent Appearance the auditor should do the following:**

- When checking the floor for inconsistent appearance it is helpful to do the following: Stand at the door way to the room and look at the perimeter under beds or tables and then compare this to the traffic areas. If there is noticeable differences between the traffic and non-traffic areas this is inconsistent appearance. The following provides some more detail on how to properly assess inconsistent appearance and whether or not is caused by lack of proper floor care by the EVS department. Please note that if the inconsistent appearance is not caused by lack of proper floor care or neglect then the floor should not fail for this condition.
  - ***Inconsistent Appearance by surface soiling*** When a floor is not project cleaned on a regular basis, the surface will gradually become soiled and present a soiled surface appearance. This condition usually does not cover 100% of the floor and may be heaviest in the traffic lanes. A clear indication as to how soiled the floor really is occurs when aggressive spot cleaning has taken place, usually in the removal of black scuff marks using a pad. This action causes very noticeable cleaned lines in the surface soiling. Using a wet wipe to assess inconsistent appearance by surface soiling is not always possible since the soiling will often only come out by scrubbing the floor and/or stripping.
  - ***Inconsistent Appearance caused by traffic wear*** is the responsibility of the EVS department. A floor should have a consistent appearance from wall to wall whether it has a floor finish applied or not. When traffic wear is not repaired on a regular basis, the gradual accumulation of scratches, scuff and black heel marks etc. cause a definite visual difference between the traffic and non traffic areas.
  - ***Inconsistent Appearance caused by staining of the floor*** which will not be the responsibility of the EVS Department. A stain on a floor surface is often irregular in shape and will not cover 100% of the surface. There will be noticeable patches of damage which can be lighter but are usually darker than the original color of the floor. Unlike the surface



soiling and traffic wear, these stains are impossible to remove and therefore the floor should not fail for this reason.

- ***Inconsistent Appearance due to traffic damage*** which will not be the responsibility of the EVS Department. Some resilient floor surfaces have had severe traffic damage to the point that the actual pattern of the floor in the traffic lane has been worn out. When looking at this type of damage it is very obvious that the floor is ruined and the only way to fix it is by replacing it and therefore the floor should not fail for this reason.
- **Fail Prompts to apply to condition 3:**
  - Inconsistent appearance – always pick this prompt
  - Scuff and Scratch Marks – pick this prompt if the scuff marks and scratches are one of the reasons why the floor failed for inconsistent appearance

**Note:**

- ***Please refer to some of the photographic examples in the floor audit training addendum manual for a more visual guide on what constitutes an inconsistent appearance.***

**Other Important Notes Relating to Auditing Floors:**

- The floor area directly behind a floor mounted toilet and a 6 inch area around it will be audited as part of the toilet. With a wall mounted toilet, the area directly under the toilet and six inches on all sides of the toilet will be audited as part of the toilet.
- If the floor is already failing in the room then it should not also fail the toilet when the floor is tested around it, but if the floor in the room is already passing and testing the floor around the toilet shows soiling then it's now okay to fail the Toilet/Urinal/Hopper because of this floor soiling issue.
- Metal transition strips found in certain areas of flooring should be included in this category.
- If there is a soiled line (3 inches or less) on the floor around the perimeter of the room and the floor is clean everywhere else, fail the baseboard and not the floor even if the baseboard is clean. The reason for this is when using the 85/15 standard the soiled line around the perimeter of the room is not enough to fail the floor so to be fair the item gets counted in a lower weighted category which in this case is the baseboard.
- If the floor is soiled and there is a soiled line on the floor around the perimeter of the room and the baseboard is clean then only fail the floor.
- The floor drain will be included in this category unless auditing a shower area then include it in the sink/tub/shower category. If the floor drain is more than 75% clogged the floor will fail.
- When there is a sharps container on the floor check the floor around the container for any blood splatter that may be there.
- The non-slip type floors that are used in washrooms, tub rooms and some pantry areas can show lots of soiling using the wet wipe test if they are not scrubbed routinely.
- The grouting in tile floors can show lots of soiling using the wet wipe test if they are not scrubbed routinely.
- Imitation wood floors have a graining pattern running through them and can show lots of soiling using the wet wipe test if they are not scrubbed routinely. When testing these floors using a wet wipe always rub the floor in the same direction as the graining pattern.
- When auditing a floor, check under and behind beds and any other furniture or patient equipment items that may be in the room and also where the baseboard meets the floor to determine if this area has been neglected during the cleaning process. Finding dust, dust balls and debris should cause this category to fail.

- Ensuring a floor is cleaned properly is extremely important so that it does not become damaged prematurely. A floor that looks clean but fails the wet wipe test is an example of a floor that could become damaged prematurely because it is not properly project cleaned. In addition, if someone wipes the floor after spilling something and the tissue comes up black the perception will be that the whole room is soiled.
- Please note the color of the wet wipe when wiping a floor; if it appears to be the color of the floor then keep in mind that it is possible that the floor material itself is coming off and in this case the floor would not fail for removing the color since this is a maintenance issue.

**Notes Relating to Wet Wipe Size & How to Consistently Wipe the Floor:**

- Remove wet wipes from the package in bundles of approximately 10 to 15 (depending how sharp the scissors is) in the same manner folded by the manufacturer.
- The measurement of the wet wipe folded by the manufacturer has a length of approximately 6.75 inches and the width is approximately 4 inches. Take the length and divide in **4 equal sections**. Keep the wet wipes folded as they came out the package and cut the wet wipes on the dotted lines.



**Figure 1 - cut on lines as shown**

- Each test wet wipe is approximately 2" and the length is approximately 4" (still folded in the manner that they were folded by Manufacturer).



**Figure 2 - One cut up test wet wipe still folded by manufacturer**

- Store these bundles in clean ziplock bags. When removing the wet wipe to use in your residue test, pull it out in single ply and fold it. This will give you a measurement of approximately 2" X 4" folded. There is space to do three wet wipe tests, one at the edges, one in the middle and one at

the fold. The wet wipe in Figure 3 on the left is the refolded wet wipe ready to use for testing. The wet wipe on the right is still folded by the manufacturer.



**Figure 3 - Left wet wipe refolded. Right wet wipe still folded by manufacturer.**

- You will test the floor in three different places as described above on one wet wipe.
- Rub the floor with two fingers with four back and forth motions with the same pressure in the same line as if you were cleaning the surface; make sure the swipe area is approximately six inches. Please avoid rubbing in any areas where there is loose dirt.
- Ensure you never fold the wet wipe where the dirt from one test can transfer to the new test.

### Examples of Removable Residue on Wet Wipes

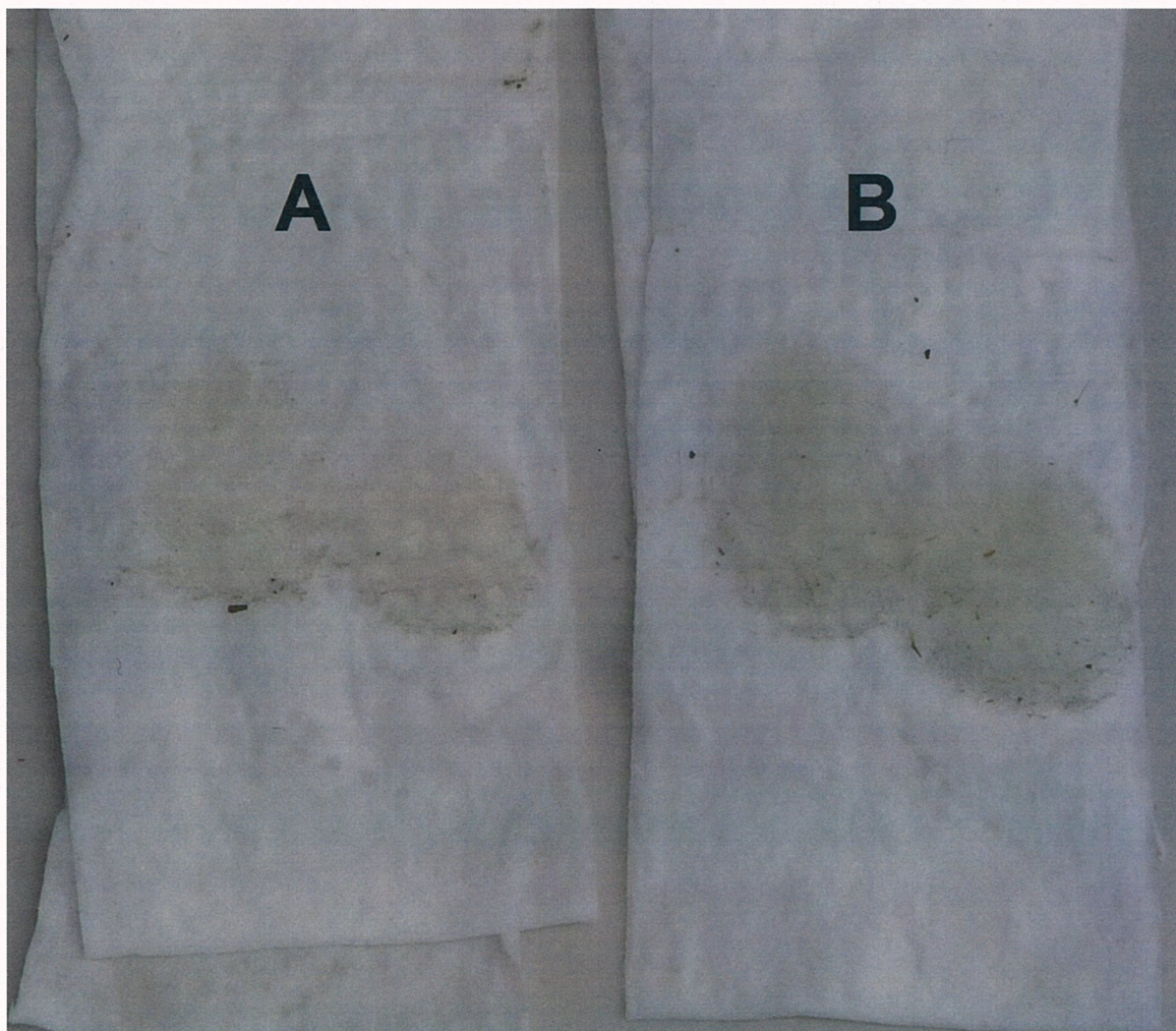
*Please print out the following three page on high gloss photographic paper in color and take with you when auditing:*

#### **Sample A:**

***Sample A is an ACCEPTABLE amount of removable residue in all areas of the facility***

#### **Sample B:**

***Sample B is an ACCEPTABLE amount of removable residue in all areas EXCEPT Operating Theatres & Discharge Patient Rooms***

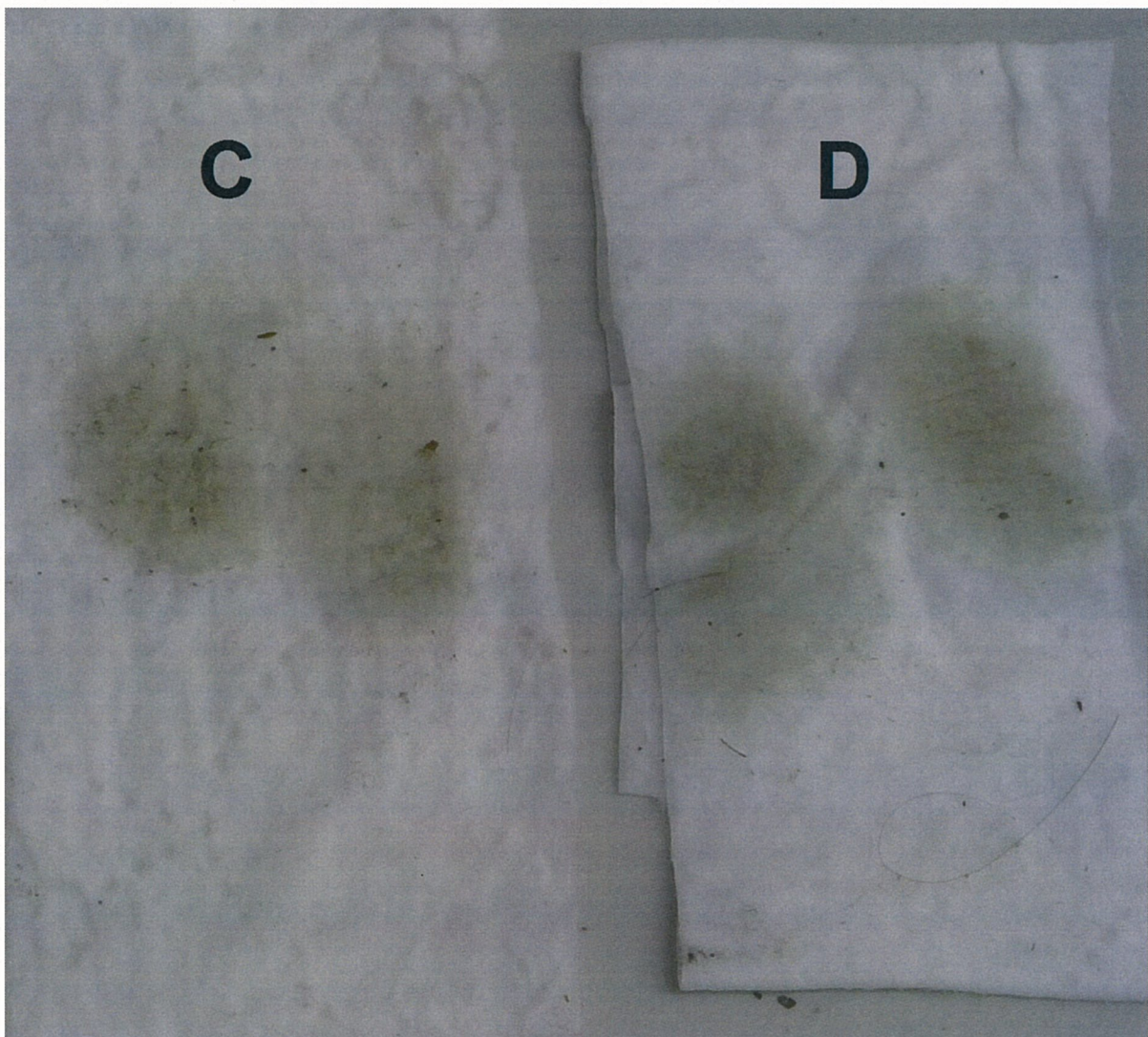


**Sample C:**

***Sample C is an ACCEPTABLE amount of removable residue in all areas of the facility EXCEPT Operating Theatres and Discharged Patient Rooms***

**Sample D:**

***Sample D is an UNACCEPTABLE amount of removable residue in ALL areas of the facility***



## Samples E & F

*Both samples below exhibit UNACCEPTABLE amounts of removable residue.*



## 6. CARPETED FLOORING/MATS

**Definition** – All types of carpet, including matting (no matter what material the mat is made of)

**Conditions Expected** – Clean means: free of dust, debris and soil/fluid buildup.

1. The carpet appears to be clean as per the conditions expected.
2. There is no gum or tar, all spots are removed.
3. Edges, corners and around furniture legs – are free of dust, lint and soil/fluid buildup.
4. If the floor under the mat is “hard floor” then it should be counted in the “hard floor” category and not this category. If the floor under the mat is carpet then both the mat and carpet are counted in this category.

**The specific fail prompts for the above item are**

**Note** - That in this category the first fail prompt (square bullet) is actually sub equipment that helps you to further define what is wrong in this category:

- Mats**
  - Carpets**
  - Corners and Edges**
  - Fall Protection Mats**
- 
- **Blood** - any blood will be considered unacceptable.
  - **Cobwebs** – an accumulation will be considered unacceptable.
  - **Debris** – accumulation of paper, tissue, needle caps, sand, gravel etc.
  - **Dust** – an accumulation will be considered unacceptable.
  - **Dust Balls** – often called dust bunnies, under beds, stairways, hallways etc.
  - **Feces/Urine**
  - **Inconsistent Appearance** – discoloration from lack of proper cleaning.
  - **Removable Dirty Residue** - any gradual build-up of soil accumulate on the surface which when wiped with a wet wipe will show dirty residue will be considered unacceptable.
  - **Removable Spots** – anything that will transfer onto a wet wipe.
  - **Soiled** – an accumulation of soiling that can be removed by a wet wipe.

### **Auditing Note:**

- When trying to determine if that mark on the surface of a carpet or mat is a removable spot or a stain, use a wet wipe. Blot or gently rub the area. If it transfers onto the wet wipe, then this would be classified as a removable spot.
- **Inconsistent Appearance** caused by surface soiling is the responsibility of the EVS Department. When a carpet is not project cleaned on a regular basis, the surface will gradually become soiled and present a soiled surface appearance. This condition usually does not cover 100% of the carpet and may be heaviest in the traffic lanes.
- **Inconsistent Appearance** due to traffic damage which will not be the responsibility of the EVS Department. This will happen with an older carpet that has severe traffic lane damage. With this

condition, the carpet fibre will have a very noticeable difference when comparing the traffic and non traffic areas. With the traffic areas, the fibre can be slightly too severely flattened which will cause the fibre to lie in several different directions as well as having a multitude of surface scratches. These two conditions can make a cleaned carpet look soiled due to the way light reflects off the surface of the fibre. When looking at the non traffic areas, these will appear to be in near new condition. With this type of damage, it is very obvious that the carpet is ruined and the only way to fix it is by replacing it.

- The carpet category includes the hard plastic opaque mats used in offices which are under a desk chair.
- Fall protection mats that are placed on the floor on either side of a patient bed are audited as mats and not patient equipment. However, physio mats are audited as patient equipment.
- Personal rugs and mats are also audited in this category.
- When auditing a carpet, check under and behind any furniture items that may be in the room and also where the baseboard meets the carpet to determine if these areas have been neglected during the cleaning process. Finding dust, dust balls and debris should cause this category to fail.
- Black rubber mats will only have a visual inspection and not tested with a wet wipe.
- Mats or carpets which are not maintained on a routine basis will have a gradual buildup of soil accumulate on their surface which will give the material a soiled surface appearance.

**Note:**

- **Note: please refer to the floor auditing addendum to see photographic examples of inconsistent appearance with carpets.**



## 7. BASEBOARDS

**Definition** - All types of baseboards. In areas where the floor material curves up the wall and becomes vertical, then vertical portion (no higher than approximately a foot) will be counted as baseboard and not the floor. When the bottom edge of a floor bumper is 1 foot or less off the floor this bumper will be included with the baseboard. If there is no physical baseboard then audit the bottom 6" of the wall as baseboard. The 3" perimeter of the room on the floor is audited as Corners and Edges in Baseboards.

**Conditions Expected** - Clean means: free of dust, removable marks, cobwebs and soil/fluid buildup.

1. Baseboards appear to be clean as per the condition expected.
2. The corners and top edges are clean.

**The specific fail prompts for the above item are**

**Note** - That in this category the first fail prompt (square bullet) is actually sub equipment that helps you to further define what is wrong in this category:

- Baseboards**
- Corners and Edges**
- Floor Bumper**
  - **Adhesive Residue** - an accumulation will be considered unacceptable.
  - **Blood** - any blood will be considered unacceptable.
  - **Cobwebs** - an accumulation will be considered unacceptable.
  - **Dust** - an accumulation will be considered unacceptable.
  - **Dust balls** - any dust balls will be considered unacceptable
  - **Feces/Urine**
  - **Removable Cleaning Residue** - Any noticeable wiping marks caused by inappropriate cleaning technique (soiled cloths) and or inappropriate cleaning solution dilution.
  - **Removable Dirty Residue** - any gradual build-up of soil accumulate on the surface which when wiped with a wet wipe will show dirty residue.
  - **Removable Spots** - anything that can be removed using a wet wipe
  - **Scuff and Black Marks** - an accumulation will be considered unacceptable.
  - **Soiled** - an accumulation of soiling that can be removed by a wet wipe

### **Auditing Note:**

- When encountering cobwebs that are attached to the walls and baseboards, these must only be failed in one category so determine which has the most amount attached to it.
- The bottom of a bumper guard that is higher than 1 foot above the floor belongs in the wall category and not the baseboard category.
- If there is build-up in the corner right beside the baseboard on the floor then fail the baseboard and not the floor.
- If there is a soiled line on the floor around the perimeter of the room and the floor is clean everywhere else, fail the baseboard and not the floor.
- The baseboards in a carpeted area have a greater chance of having dust on them because of the vacuum so always run your hand over the baseboard from top to bottom.
- When there is a sharps container on the floor check the baseboards around the container for any blood splatter that may be there.

- A baseboard that has years of old floor finish build-up should not be failed as long as its clean.
- If there is no physical baseboard then audit the bottom 6" of the wall as baseboard. Specifically, all room audits should have baseboard as an inspection element.

## 8. INTERIOR WINDOWS/GLASS/MIRRORS

**Definition** – All types of windows, glass, glass block walls, glass walls, inside surface of double windows, mirrors, including frames, sashes, hardware, sills, interior screens and moldings.

**Conditions Expected** – Clean means: free of dust, removable marks, cobwebs and soil/fluid buildup.

1. The interior surfaces appear clean as per the conditions expected.
2. The interior frames, sills, screens and hardware appears clean and are free of dust, spots, smudges, adhesives and soil/fluid buildup.
3. Audit both sides of the glass in high profile main entrance areas.

**The specific fail prompts for the above item are**

**Note** - That in this category the first fail prompt (square bullet) is actually sub equipment that helps you to further define what is wrong in this category:

- Windows**
- Mirrors**
- Frames/Sills**
- Screens**
- Adhesive Residue** - an accumulation will be considered unacceptable.
- Blood** - any blood will be considered unacceptable.
- Cobwebs** – an accumulation will be considered unacceptable.
- Debris - bugs** – wide window sills can accumulate paper, tissue, coffee cups, dead bugs etc.
- Dust** – an accumulation will be considered unacceptable.
- Finger Marks** - an accumulation will be considered unacceptable.
- Removable Cleaning Residue** - any noticeable wiping marks caused by inappropriate cleaning technique (soiled cloths) and or inappropriate cleaning solution dilution will be considered unacceptable.
- Removable Spots** – anything that can be removed using a wet wipe.
- Soiled** – an accumulation of soiling that can be removed by a wet wipe.

**Auditing Note:**

- You will need to clarify if the residue and/or marks or spots on the glass is on the side of the room you are auditing. If it is on the other side of the room (outside in the elements or outside of the room) then don't count it in the current audit of the room you are in.
- The glass and mirrors on a door is counted in the door category if the glass is only a small insert or the whole door.
- Mirrors inside a dresser and **over bed table** are included in the furnishing and patient equipment categories respectively and not the mirror category.
- Glass, glass walls and glass block walls are counted as glass and not walls.
- Glass doors are counted as doors.
- Smoked or opaque windows are counted in this category.

- Directional mirrors in the corridors are counted in this category.
- Stained glass as décor often found in chapels, will be included in the glass category.
- The inside of double windows should be audited (open the inner window to assess the inner side of the outer window that is closest to the outside).

## 9. WINDOW COVERINGS

**Definition** – All types of window coverings (curtains, vertical and horizontal blinds, wood louvers, enclosed venetian blinds between the glass panes etc.)

**Conditions Expected** – Clean means: free of dust (on appearance and by touch), cobwebs, removable marks and soil/fluid buildup.

1. The window coverings appear to be clean as per the conditions expected.
2. The window coverings are appropriate in size and properly hung (all hooks in place).

### The specific fail prompts for the above item are

- **Adhesive Residue** - an accumulation will be considered unacceptable.
- **Blood** - any blood will be considered unacceptable.
- **Cobwebs** – an accumulation will be considered unacceptable.
- **Dust** – an accumulation will be considered unacceptable.
- **Not Hung Properly**
- **Finger Marks** - an accumulation will be considered unacceptable.
- **Removable Spots** – anything that will transfer onto a wet wipe.
- **Removable Dirty Residue** - any gradual build-up of soil accumulate on the surface which when wiped with a wet wipe will show dirty residue.
- **Soiled** – an accumulation of soiling that **can be removed by** a wet wipe.
- **Strings or Wire** - used to hang decorations/signs and are clearly not in use anymore.
- **Contact Points**

### Auditing Note:

- Look at the top edge of the pleats, this is an area where the dust will build-up more quickly and a gentle tap or shake of the curtain will allow you to see how much dust is released.
- The top of the window curtains is not high-dusting and falls under this category.
- If the window covering does not have a clean feel, test it with a wet wipe.
- To determine if a mark on a fabric window covering is a removable spot or stain look closely to see if any fabric color is showing through the area and if the x-ing pattern of the fibre can also be seen. Finding these two factors will usually mean that the covering has been through the laundry and that mark is now a stain. Blotting the area with a wet wipe and looking for any transfer will be the final determination on whether it's a removable spot or a stain.
- Vents that are continually blowing air into a room and that are in close proximity to the window coverings can cause dusting issues so always look in the direction the vent is blowing to determine if there are any noticeable dust issues.
- Window coverings that don't have pull cords to open and close them will have to be pulled open and closed by hand. These hand contact points must be scrutinized to make sure that they don't have any soiling.
- Window coverings on doors will be in the door category.
- All hooks on the curtain should be used when hanging curtains.
- Curtains should not be too short where there is no privacy for the patient or do not cover the window entirely. They should also not be too long where they drag on the floor.

- Venetian blinds between the glass panes are still audited and passed in this category.

## 10. CUBICLE CURTAINS

**Definition** – All types of cubicle curtains.

**Conditions Expected** – Clean means: free of dust, cobwebs, removable marks and soil/fluid buildup.

1. The curtains appear to be clean as per the conditions expected.
2. The curtains are appropriate in size, in good repair and properly hung.

**The specific fail prompts for the above item are**

- **Adhesive Residue** - an accumulation will be considered unacceptable.
- **Blood** - any blood will be considered unacceptable.
- **Cobwebs** – an accumulation will be considered unacceptable.
- **Dust** – an accumulation will be considered unacceptable.
- **Feces/Urine**
- **Removable Spots** – anything that will transfer onto a wet wipe.
- **Soiled** – an accumulation of soiling that can be removed by a wet wipe.
- **Not Hung Properly**
- **Finger Marks** - an accumulation will be considered unacceptable.
- **Contact Points**

**Auditing Note:**

- There will be a greater possibility of finding body fluids splashed on cubicle curtains because of their proximity to the patient bed.
- Do not fail the curtains if you find pen or marker marks.
- The top of the cubicle curtain track is counted in “high dusting”.
- Use a wet wipe to determine whether a spot or mark is removable.
- To determine if a mark on a cubicle curtain is a removable spot or stain look closely to see if any fabric color is showing through the area and if the x-ing pattern of the fibre can also be seen. Finding these two factors will usually mean that the covering has been through the laundry and that mark is now a stain. Blotting the area with a wet wipe and looking for any transfer will be the final determination on whether it’s a removable spot or a stain.
- Vents that are continually blowing air into a room and that are in close proximity to the cubicle curtains can cause dusting issues so always look where the vent is blowing to determine if there are any noticeable dust issues.
- Cubicle curtains are pulled open and closed by hand and these hand contact points must be scrutinized to make sure that they don’t have any soiling.
- All hooks on the cubicle curtain should be used when hanging cubicle curtains.
- Cubicle curtains should not be too short where there is no privacy for the patient. They should also not be too long where they drag on the floor.

## 11. BEDS/EXAM TABLES/STRETCHERS

**Definition** – All types of patient beds, operating room tables, examination tables, x-ray tables, exam chairs (chemo, renal, blood collection etc), dental chairs, cots, cribs, bassinets, isolettes and stretchers

**Conditions Expected** – Clean means: free of dust, cobwebs, removable marks, adhesive or tape residue and soil/fluid build-up.

1. The bed, tables, cots, cribs and stretchers appear to be clean as per the conditions expected, for example but not limited to
  - frame, hand rails, head and foot boards, control panel, wheels, remote controls.
  - storage space under, pedestal bases, wheels are locked and in proper position.

**The specific fail prompts for the above item are**

**Note** - That in this category the first fail prompt (square bullet) is actually sub equipment that helps you to further define what is wrong in this category:

- Beds/Stretchers**
- Exam Chairs**
- Infant Beds**
- Controls**
- Frame**
- Wheels**
- Contact Point**
- Underside**
- Adhesive residue** - an accumulation will be considered unacceptable.
- Blood** - any blood will be considered unacceptable.
- Cobwebs** - an accumulation will be considered unacceptable.
- Debris** - accumulation of paper, tissue, needle caps etc.
- Dust** - an accumulation will be considered unacceptable.
- Dust Balls**
- Feces/Urine**
- Finger Marks** - an accumulation will be considered unacceptable.
- Removable Cleaning Residue** - any noticeable wiping marks caused by inappropriate cleaning technique (soiled cloths) and or inappropriate cleaning solution dilution.
- Removable Dirty Residue** - any gradual build-up of soil accumulate on the surface which when wiped with a wet wipe will show dirty residue.
- Removable Spots** - anything that will removed using a wet wipe.
- Removable Soil** – an accumulation of soil that can be removed by a wet wipe.
- Soiled** - an accumulation of soiling that can be removed by a wet wipe.
- Strings or Wire** - mop strand or wire that can get lodged in the wheels.

**Auditing Note:**

- When looking under these items, a flashlight will help accent any unacceptable conditions that may be present.



- Check the wheels for mop strands/wire and the underside of the bed and bed frame for any removable spots or residue.
- Items attached to beds and not physically part of the beds should be counted in the patient equipment category (IV poles, Traction bars, arms, etc.)
- If any chair is being used as an exam chair – count in this category and not patient equipment.
- When a chair has drop down arms such as one found in a blood collection or chemo areas etc, check the underside of these for removable spots, blood and accumulation of finger marks.
- The stretchers used to shower patients in residential care facilities are included in this category. Be sure to check under the vinyl coated mattress for any soiling.
- A table in an x-ray room should be counted in this category.
- A mattress on the floor should be counted in this category if used by a patient. If used by a family member - this will be counted in the furniture category.
- Infant beds can be defined as bassinets, isolettes, and cribs and our audited in this category.
- When auditing a patient room that has been discharge cleaned remove the footboard from the bed, look at the bottom edge of the footboard and also check where the footboard attaches to the bed and see if this area has been cleaned.
- Check the mounting holes at the head and foot of the bed that are used for holding IV poles as these can sometimes fill up with food particles, skin and hair follicles and dust.
- On both sides of the bed on the underside of the bed frame close to the edge is a contact point.
- Other contact points are any control buttons for adjusting the bed which can be found on the bed rails, at the foot of the bed as well as hand held controls.
- Chairs that fold out to a bed to be used by family members, are counted in the furniture category as seating.

## 12. PATIENT EQUIPMENT

**Definition** - All types of patient equipment including wall mounted equipment and free standing equipment..

**Conditions Expected** - Clean means: free of dust, cobwebs, debris, adhesive/tape and soil/fluid build-up

1. The patient equipment appears to be clean as per the conditions expected, for example but not limited to
  - Wall mounted equipment-including blood pressure cuffs, suction containers, patient equipment (diagnostic) monitors, cables.
  - Commodes- inside and outside, seat, bowl and frame, wheels.
  - Night/Over bed tables - top, sides, legs, mirrors, shelves, drawers, wheels, (other tables will be captured under the furnishings category).
  - Wheelchairs - seat, back, arms, wheels, attachments, (other chairs will be captured under the furnishings category).
  - Monkey Bar/Traction Bars.
  - Patient scales.
  - IV Poles/Pumps - stand, exterior casing of pumps, wheels.
  - Sharps Containers - clean exterior, not filled to above the black hatched full line.
  - Specialty equipment such as toys, patient lifts and exercise equipment
  - Equipment attached to the beds but not physically part of the bed.
  - Removable bumper pads are counted as patient equipment.
  - Call bell buttons and cords.

**The specific fail prompts for the above item are**

**Note** - That in this category the first fail prompt (square bullet) is actually sub equipment that helps you to further define what is wrong in this category:

- Commode/Free Standing Shower Seat**
- Equipment Attached to Beds**
- IV Poles/Pumps/Suction**
- Wall Mounted Equipment**
- Lifts/Traction Bars**
- Over Bed/Bedside Tables**
- Wheel Chairs/Walkers**
- Fitness Equipment**
- Sharp Containers**
- Call Bells**
- Children's Toys**
- Mayo Stands**
- Free Standing Equipment**
- Lead Aprons**
- Cords**
- High Chairs/Playpens**

- Underside**
- Contact Point**
- **Adhesive Residue** - an accumulation will be considered unacceptable.
- **Blood** - any blood will be considered unacceptable.
- **Cobwebs** - an accumulation will be considered unacceptable.
- **Dust** - an accumulation will be considered unacceptable.
- **Feces/Urine**
- **Finger Marks** - an accumulation will be considered unacceptable.
- **Sharps Filled Over the Full Line**
- **Removable Cleaning Residue** - any noticeable wiping marks caused by inappropriate cleaning technique (soiled cloths) and or inappropriate cleaning solution dilution will be considered unacceptable.
- **Removable Dirty Residue** - any gradual build-up of soil accumulate on the surface which when wiped with a wet wipe will show dirty residue will be considered unacceptable.
- **Removable Spots** - anything that can be removed using a wet wipe.
- **Soiled** - an accumulation of soiling that can be removed by a wet wipe.
- **Strings or Wire** - used to hang decorations/signs and are clearly not in use anymore.

#### **Auditing Note:**

- Geri chairs (high back wheel chair) that are usually found in residential care facilities are part of patient equipment and must not be confused with other high backed styled chairs that would be part of furnishing and fixtures. When a Geri chair is being used for direct patient care such as in a renal and or chemo area it is then audited as a bed.
- A shower seat attached to the shower stall or wall will be audited in the Sink/Shower/Tub category but the free standing shower seat will be audited in Patient Equipment.
- Be careful to not touch the sharps container for safety reasons.
- When auditing over bed tables remember to check inside and underneath for spilled coffee, food, juice etc. Check the mirrors inside the overbed tables for cleaning residue that has not been removed.
- If auditing over bed tables in offices these should be counted in the furnishing category, otherwise they are to be counted in the patient equipment category. The main point is to not count them in two categories or to "double dip".
- If auditing exercise equipment in a staff area, audit it in the Furniture and Fixtures category, but exercise equipment in a patient area, will be Patient Equipment.
- Ceiling Lifts (the ceiling lift track and motor (cassette) and power cord is counted as high dusting and the lifting bar, ribbon and the hand held control unit is treated as patient equipment.
- When auditing a soiled utility room, patient equipment found in this area is there because it's soiled and it should not be included with the room audit. All other inspection elements within the soiled utility room should still be audited.
- Wheel chairs and walkers that are the personal property of the patient should be included with the room audit.
- Physio mats are audited as patient equipment. However fall protection mats that are placed on the floor on either side of a patient bed are audited as mats in the carpet/mat category.
- Always look for the material inside the sharps container to be above the black hatched full line before failing the item for safety concerns.
- Free standing equipment includes, patient scales, medical equipment, lead aprons, etc.

### 13. FURNISHING/FIXTURES

**Definition** - All types of furnishings and fixtures.

**Conditions Expected** - Clean means: free of dust, cobwebs, debris and soil/fluid buildup.

1. The furniture and fixtures appears to be clean as per the conditions expected, for example but not limited to

Chairs	Medication Carts
Stools	Linen Hampers
Computer Monitors	Appliances/all Fans (Ceiling or Floor)
Artificial Plants	Coffee/End Tables
Cabinets	Meeting Room Tables
Lockers	Dining Room Tables
Diaper Decks	Cupboards
Desks/Work Stations	Televisions/Stands/Brackets
Counters/Vanity	
Couches/Love Seats	Black/White/Bulletin boards /Pictures/Wall Hanging
Filing Cabinets	Shelving Units
Patient Closets (including mirrors)	Fixed signage/Glove Box Dispenser on Walls

**The specific fail prompts for the above items are**

**Note** - That in this category the first fail prompt (square bullet) is actually sub equipment that helps you to further define what is wrong in this category:

- Carts/Hampers/Med Carts/Diaper Decks**
- Desk/Tables/Counters/Vanities**
- Computer Monitors/Tower/Keyboard**
- Televisions/Remote Controls**
- Appliances**
- Pictures/Bulletin Boards/Signage**
- Glove box dispenser/Pamphlet Unit**
- Seating**
- Shelving/Cabinet/Locker/Cupboards/Closets**
- Wall Mounted**
- Floor Mounted**
- Cords**
- Fans**
- Contact Point**
- Adhesive Residue** - an accumulation will be considered unacceptable.
- Blood** - any blood will be considered unacceptable.
- Cobwebs** - an accumulation will be considered unacceptable.
- Debris** - accumulation of paper, tissue, needle caps, food etc.
- Dust** - an accumulation will be considered unacceptable.
- Dust Balls** - often called dust bunnies, under beds, stairways, hallways etc.
- Feces/Urine**
- Finger Marks** - an accumulation will be considered unacceptable.
- Graffiti**

- **Removable Cleaning Residue** - Any noticeable wiping marks caused by inappropriate cleaning technique (soiled cloths) and or inappropriate cleaning solution dilution will be considered unacceptable.
- **Removable Dirty Residue** - any gradual build-up of soil accumulate on the surface which when wiped with a wet wipe will show dirty residue will be considered unacceptable
- **Removable Spots** - anything that will transfer onto a wet wipe.
- **Scuff Marks** - an accumulation will be considered unacceptable.
- **Soiled** - an accumulation of soiling that can be removed by a wet wipe.
- **Strings or Wire** - used to hang decorations/signs and are clearly not in use anymore.

**Auditing Note:**

- Remember to include the tops of cabinets, lockers, cupboards, shelving units, book cases etc. in this category and not the high dusting category.
- Room dividers that are part of workstations are included in the wall category.
- Mirrors inside a dresser are in furnishing category and mirrors inside an over bed table are included in the patient equipment category.
- Use discretion when auditing painting and pictures in residential care in that some paintings cannot be cleaned since the cleaning could ruin the art.
- All electrical cords are audited with the appliance that they belong too.
- Furniture that is the personal property of the patient should be included with the room audit.
- Wall mounted intercom speaker boxes which can be found in stairwells and other various areas around the facility will be included in this category and not in the vent category.
- Security cameras will be audited in Furniture and Fixtures, under PC Monitors and appliances. This excludes the dome shape camera on the ceiling, this will be audited in the High Dusting category.
- Wall or self mounted stereo speakers will be audit as part of TV in this category as will radios, stereo receivers, CD player, cable boxes etc.
- When there is a sharps container sitting on a counter check for any blood splatter that may be on the furniture.
- Use your flashlight on the horizontal surfaces of desks, shelves, table tops looking for dust, without doing this it can be difficult to see the dust that may be present on the surfaces.
- If there are dust balls and or a heavy accumulation of dust on the shelving units in patient rooms in and around lots of nick/knacks, this should cause the Furniture category to fail.
- Check the open lower shelves of bookcases and TV stands as these areas can collect lots of dust and dust balls. Vents that are continually blowing air into a room and that are in close proximity to furniture items can cause dusting issues so always look where the vent is blowing to determine if there are any noticeable dust issues.
- Table top and floor based fans are an infection control risk if they have accumulations of dust and should cause this inspection element to fail.
- Chairs that fold out to a bed to be used by family members, are counted in the furniture category.
- Audit the wet floor signs in this category.
- Desk clocks and alarm clocks are in this category and scored under appliance, but wall clocks are in the high dusting category.
- If auditing over bed tables in offices these should be counted in the furnishing category, otherwise when they are in patient areas, they are to be counted in the patient equipment category. The main point is to not count them in two categories or to “double dip”.
- If auditing exercise equipment in a staff area, audit it in the Furniture and Fixtures category, but exercise equipment in a patient area, will be Patient Equipment.

- Laptops are not audited.

## 14. LIGHT FIXTURES

**Definition** - All types of light fixtures including pull cords.

**Conditions Expected** - Clean means: free of dust, cobwebs, debris and soil/fluid buildup.

1. The light fixtures appear to be clean as per the conditions expected, for example but not limited to
  - OR Lights/Arms
  - Exam Lights/arms
  - X-Ray View Boxes
  - Wall Mounted
  - Floor Lamp
  - Desk Lamp
  - Ceiling Light
  - Shades and Covers
  - Emergency and Exit lighting
2. Pull cords are clean.
3. No adhesive tape or strings are on the fixture.

**The specific fail prompts for the above item are**

**Note** - That in this category the first fail prompt (square bullet) is actually sub equipment that helps you to further define what is wrong in this category:

- Ceiling Mounted**
- Arm**
- Base**
- Shade/Cover**
- Wall Mounted**
- Free Standing**
- X-ray Light**
- **Debris/bugs**
- **Adhesive Residue** - an accumulation will be considered unacceptable.
- **Blood** - any blood will be considered unacceptable.
- **Cobwebs** - an accumulation will be considered unacceptable.
- **Dust** - an accumulation will be considered unacceptable.
- **Removable Cleaning Residue** - any noticeable wiping marks caused by inappropriate cleaning technique (soiled cloths) and or inappropriate cleaning solution dilution will be considered unacceptable.
- **Removable Spots** - anything that will transfer onto a wet wipe.
- **Removable Dirty Residue** - any gradual build-up of soil accumulate on the surface which when wiped with a wet wipe will show dirty residue will be considered unacceptable.
- **Soiled** - an accumulation of soiling that can be removed by a wet wipe.
- **Strings or Wire** - used to hang decorations/signs and are clearly not in use anymore.

**Auditing Note:**

- Switch plates and outlet covers are included in the wall category.
- The call bell lights that are mounted above a door in a hallway are included in this section.
- Vents that are continually blowing air into a room and that are in close proximity to flush mounted ceiling lights with the textured lenses, pot lights, egg crate style lenses can cause dusting issues so always look where the vent is blowing to determine if there is any noticeable dust issues. The flush mounted ceiling lights with the textured lenses will collect dust on their surface and there will be fine black lines of dust that can be seen but only when you look in the direction of the blowing vent.
- ***Please be careful when auditing the top of lights above patient beds. In some cases patients hide needles up there (use your mirror).***



## 15. PHONES

**Definition** - All types of telephones, cradle and stalls, excluding cell phones.

**Conditions Expected** – Clean means: free of dust, removable marks and soil/fluid buildup.

1. The body, mouth, cradle, ear piece and dial system of the telephone are clean as per the conditions expected.
2. The cords are clean and free of soil and adhesive residue.
3. The back of the telephone holder is free of dust.
4. The telephone stall appears to be clean.

**The specific fail prompts for the above item are**

- Phone**
- Intercom**
- Base**
- Cord**
- Ear Piece**
- Contact Points**
- Adhesive Residue** - any adhesive residue will be considered unacceptable.
- Blood** - any blood will be considered unacceptable.
- Dust** - an accumulation will be considered unacceptable
- Finger Marks** - an accumulation will be considered unacceptable.
- Removable Cleaning Residue** - any noticeable wiping marks caused by inappropriate cleaning technique (soiled cloths) and or inappropriate cleaning solution dilution will be considered unacceptable.
- Removable Dirty Residue** - any gradual build-up of soil accumulate on the surface which when wiped with a wet wipe will show dirty residue will be considered unacceptable.
- Removable Spots** - anything that can be removed using a wet wipe.
- Soiled** - an accumulation of soiling that can be removed by a wet wipe.
- Make up**

### **Auditing Note:**

- All intercom type phones, table top boardroom phones will be included in this category whether they have a hand set or not.
- Check the front speaker grill of the phone for dust, food debris and anything else that may collect in this area.
- Cell Phones are not audited.

## 16. HIGH DUSTING

**Definition** - Horizontal surfaces above five feet.

**Conditions Expected** - Clean means: free of dust.

1. All of the following horizontal surfaces (certain horizontal surfaces above five feet not counted in previous categories) are free of dust as per the conditions expected, for example but not limited to

- Cubicle Curtain Tracks (regular curtain tracks are counted in "window coverings").
- Ceiling Lifts (the ceiling lift track and motor (cassette) is counted as high dusting and the handle and control unit that come down is treated as patient equipment.
- Fire Bells.
- Wall clocks.
- Free hanging Signage: Defined as any signage that is hanging from the ceiling or protruding from the wall at a 90 degree angle (you can see both sides of the sign). Fixed signage is part of furnishing/fixtures and can be defined as signage that could be fixed or hanging from a wall like a painting where you can only see one side of the sign.
- Electrical and plumbing piping.
- Emergency showers in labs.
- Shower curtain rods.
- Mounted exit signs (only if not lighted. If lighted it falls under the light category).
- Sprinkler heads no matter where they are located.
- Fixed roof access ladders.

**The specific fail prompts for the above item are**

**Note** - That in this category the first fail prompt (square bullet) is actually sub equipment that helps you to further define what is wrong in this category:

- Sprinkler Heads**
- Smoke Detectors**
- Tracks**
- Signage**
- Bells/Clocks**
- Piping**
- **Adhesive Residue** an accumulation will be considered unacceptable.
- **Blood** any blood will be considered unacceptable.
- **Cobwebs** - an accumulation will be considered unacceptable.
- **Dust** - an accumulation will be considered unacceptable.
- **Finger Marks** - an accumulation will be considered unacceptable.
- **Soiled** - an accumulation of soiling that can be removed by a wet wipe.
- **Removable Cleaning Residue** - Any noticeable wiping marks caused by inappropriate cleaning technique (soiled cloths) and or inappropriate cleaning solution dilution will be considered unacceptable.
- **Removable Dirty Residue** - any gradual build-up of soil accumulate on the surface which when wiped with a wet wipe will show dirty residue will be considered unacceptable.
- **Removable Spots** - that can be removed using a wet wipe.

- **Strings or Wire** - used to hang decorations/signs and are clearly not in use anymore.

**Auditing Note:**

- Wall clocks are in the high dusting category, but alarm clocks and desk clocks are in the furnishings category.
- Be careful not to count any of the items in previous categories under high dusting. It's very important that double dipping is eliminated. The items listed in this category are ones that have not been included in any other section. For example, the top ledge of a picture and all other elements of that picture are listed in the Furnishing/Fixtures category.
- As mentioned above hanging signage is counted as high dusting where as signage fixed to a wall is counted in the furnishing/fixtures category.
- Any vertical plumbing going up a wall or horizontal piping below five feet are counted in the wall category.
- Cubicle curtain tracks are counted in the "high dusting" category but regular curtain tracks are counted in "window coverings".
- Smoke detectors should be audited in this category.
- Vents that are continually blowing air into a room and are in close proximity of any high dusting item can cause dusting issues so always look where the vent is blowing to determine if there are any noticeable dust issues.
- Emergency shower in labs are audited in high dusting and not in the Sink category. The Sink category is higher weighted than the High Dusting category and the use of the emergency shower in a lab does not pose the same risk of infection as a Shower in a Shower room.
- Dome shaped security cameras on the ceilings will be audited in the High Dusting category. But other Security cameras will be audited in Furniture and Fixtures, under PC Monitors and appliances.

## 17. WASTE CONTAINERS

**Definition** - All types of waste or recycle containers including ashtrays and used sanitary napkin containers.

**Conditions Expected** - Clean means: free of dust and soil/fluid build-up and emptied as appropriate.

1. All containers and ashtrays appear to be clean inside and out as per the conditions expected.
2. Plastic liners, where required are clean and in place.
3. Emptied as appropriate to the location.

**The specific fail prompts for the above item are**

**Note** - That in this category the first fail prompt (square bullet) is actually sub equipment that helps you to further define what is wrong in this category:

- Recycling Container**
- Waste Container**
- Confidential Container**
- Medical Waste Container**
- Adhesive Residue** - an accumulation will be considered unacceptable.
- Bad Odour** - inside the containers where the bags have leaked.
- Blood** - any blood will be considered unacceptable.
- Dust** - an accumulation will be considered unacceptable.
- Graffiti** – only put this comment in if EVS is able to remove it. If it requires maintenance to remove it then enter a comment and don't fail the item.
- Overflowing** - garbage that is full past the top rim of the container.
- Removable Cleaning Residue** - any noticeable wiping marks caused by inappropriate cleaning technique (soiled cloths) and or inappropriate cleaning solution dilution will be considered unacceptable
- Removable Dirty Residue** - any gradual build-up of soil accumulate on the surface which when wiped with a wet wipe will show dirty residue will be considered unacceptable.
- Removable Spots** - anything that can be removed using a wet wipe.
- Soiled** - an accumulation of soiling that can be removed by a wet wipe.
- Missing Liner**
- Extra liners** - No extra liners to be stored in or hanging over the side, or double bagging of the waste containers - this is will be considered unacceptable.

### Auditing Note:

- Medical waste containers are usually yellow in colour. These are only inspected visually so never touch them.
- Whenever possible, check inside the waste container (the plastic bags can leak) and also have a look at the bottom. These are areas that are sometimes missed.
- If the garbage inside the waste container, or the recycling container is full to the point that it's over the top of the rim, this will be categorized as overflowing, and would be unacceptable.
- No extra liners to be stored in waste containers - specifically, extra liners on the bottom, hanging over the side or double bagged all count as extra liners and this will be a fail.

- If a waste container is empty and the liner was not changed or it's visibly soiled by food, debris, gum and/or liquids this item should fail. The auditor should check with nursing staff to see if a liner is required in the patient's room.
- Auditors should do a visible check on the Biohazard containers and not do any wet wipe tests.
- When the waste container is missing a liner in a psych unit, do not fail the waste container for this reason. However, confirm in comments "no liner due to patient safety".

## 18. SINK/TUB/SHOWER/DISPENSER

**Definition** - All types of sinks, tubs, showers, assist bars (in the shower and sink area only) and soap, paper and sanitary napkin dispensers, floor drains (in the floor of the shower not the tub) and waterless hand sanitizer.

**Conditions Expected** - Clean means: free of dust, debris, mineral deposits, soap or soil/fluid buildup.

1. The sink, tub, or shower, showerhead, pipes and fixtures appear to be clean as per the conditions expected
  - Fixtures and shower heads are free of mineral deposits.
  - All surfaces appear to be clean. Walls in the shower or tub area appear to be clean and are free of soap or mineral build-up.
  - The floors in the shower area appear to be clean and are free of soap or mineral build-up.
  - There is no soil/fluid build-up under or around the outer edges of the sink.
  - No soil/mineral deposits in the drain catch and the drain catch is clean. The overflow trap appears to be clean.
  - There is no evidence of mould or mildew.
  - Bright metal surfaces – taps, handles and fixtures, dispensers and hold bars appear to be clean.
  - Shower curtain (no matter what the material type) – appears to be clean and hung correctly.
  - Glass shower doors – are clean and free of removable residue, streaks and finger marks.
  - Dispensers – are clean and stocked appropriately.
  - The surface of the floor drain is clean and free of any build-up of bonded soil, mineral deposits, hair, etc.
  - Dispensers (paper towel, hand soap, hand lotion, waterless hand sanitizer) are not to be empty at any time.

**The specific fail prompts for the above item are**

**Note** - In this category the first fail prompt (square bullet) is actually sub equipment that helps you to further define what is wrong in this category:

- Sink in Bathroom
- Sink in Main Room
- Tub
- Shower
- Attached Shower Seat
- Dispenser (paper, soap, sanitary napkin)
- Waterless Hand Sanitizer
- Shower Curtain
- Assist Rails
- Floor Drains
- Eye Wash Station
- Water Fountain
- Wall Behind and Around Sink
- Underside
- Contact Point
- Inadequate Supplies
- Adhesive Residue - an accumulation will be considered unacceptable.
- Blood – any blood will be considered unacceptable.
- Cobwebs - an accumulation will be considered unacceptable.

- **Dust** – an accumulation will be considered unacceptable.
- **Mineral Deposits** – leaking water taps, or the walls in shower/tub areas will present a blue/green discoloration on the surface.
- **Removable Cleaning Residue** - any noticeable wiping marks caused by inappropriate cleaning technique (soiled mops/cloths) and or inappropriate cleaning solution dilution will be considered unacceptable.
- **Removable Dirty Residue** - any gradual build-up of soil accumulate on the surface which when wiped with a wet wipe will show dirty residue will be considered unacceptable.
- **Removable Spots** - anything that can be removed using a wet wipe.
- **Soiled/ Fluid Build-up** - accumulation of soil on top of dried soil.
- **No Curtain**

**Auditing Note:**

- Any mounted dispenser (paper towel, hand soap, waterless hand sanitizer and hand lotion) that is found to be empty in this category will be enough to warrant a fail for this inspection element. Remember it's the dispensers that are being audited so it does not matter how much product may be stored in the washroom area.
- If expired waterless hand sanitizer is found in the dispenser this will not cause this element to fail but a comment should be made and this deficiency should be brought to the attention of the EVS department.
- Check the piping under a sink only if its attached to a wall without a cabinet around it for dust and cobwebs.
- Check the underside edge of a sink only if it is attached to a wall without a cabinet around it. This is a possible contact area.
- When a sink has a cabinet around it, do not open up the cabinet doors and inspect any of the piping or the underside of the sink.
- The walls directly around the shower and tub will be part of this category. Usually a three or four foot surrounding area should be sufficient (use common sense).
- Check the underside of all dispensers to make sure they are being cleaned on a daily basis.
- The area around the sink (counter space) is counted in the furnishing/fixtures category.
- The hand soap used in dispensers can be a variety of colors with red or green being the most popular. When dispensed onto the hand, it has a white foamy appearance regardless of what color it is. When inspecting the underside of a dispenser and you encounter a red or green colored buildup, a sticky white foam or crusty white porous substance, this will clearly demonstrate that this area has not been cleaned for some time.
- Waterless hand sanitizers that are located in corridors or other areas where a Sink/Tub/Shower are not present will still be audited in this category. For instance, when these dispensers are found in a pass or fail condition in a corridor or other area where there isn't a sink tub or shower then the room will still receive a score for this category.
- When checking a tub, wipe the inside surface of the tub with your hand checking for any grit that may be present from the liquid abrasive cleaner that may have been used to clean this item.
- Some sink and tub fixtures are damaged beyond repair because of mineral deposits and as long as they are clean should pass.
- Shower doors, tracks, handles and frame all belong to the Sink/Tub/Shower/Dispenser Inspection Category.
- A shower seat attached to the shower stall or wall will be audited in the Sink/Tub/Shower category, but a free standing shower seat will be audited in the Patient Equipment category.
- Emergency showers in lab are counted in the High Dusting category.
- The floor drain in the shower area belongs to the shower but in a large tub room the floor drain outside of the shower area will be audited with the floor.

- After years of use the porcelain surfaces inside some sinks are damaged and stained beyond repair and they can no longer be brought back to their original condition, so as long as they are clean then they should pass.
- Dispensers in need of repairs will not fail this element.



## 19. TOILETS/URINALS/HOPPERS/

**Definition** – All types of toilets (including raised seats), urinals, hoppers/bed pan flushers and assist bars (in the toilet area only). Toilet paper and any other dispensers in the stall area are included in this category. The new automatic bed pan cleaners that are replacing hoppers are included in this category.

**Conditions Expected** – Clean means: free of dust, mineral deposits and soil/fluid buildup.

1. The front, back, sides, seat and bowl interior appear to be clean as per the conditions expected.
2. The flush handle appears to be clean.
3. Mineral deposits are not visible in the bowl, the flush rim and around the jets.
4. Bolt caps and hinges are free of soil.
5. Fastenings to the wall or floor show no soil deposit.
6. Dispensers – are clean and stocked appropriately.
7. Floor area under and behind the toilet is clean.

**The specific fail prompts for the above item are**

**Note** - That in this category the first fail prompt (square bullet) is actually sub equipment that helps you to further define what is wrong in this category:

- Toilets**
- Urinals**
- Hopper**
- Bed Pan Washer**
- Flush Handle**
- Floor Under/Behind Toilet**
- Wall Behind/Beside Toilet**
- Flush Rims**
- Toilet Seat/Seat Riser**
- Toilet Cleaning Tools**
- Assist Rails**
- Dispenser**
- Sprayer & Hose**
- Underside**
- Contact Points**
- Inadequate Supplies**
- Bad Odour** - usually coming from dried urine. A certain amount of odour is acceptable since deodorants are not allowed to be used in most health care facilities.
- Blood** - any blood will be considered unacceptable.
- Cobwebs** - an accumulation will be considered unacceptable.
- Dust** - an accumulation will be considered unacceptable.
- Feces/Urine**
- Mineral Deposits** - an accumulation is unacceptable.
- Removable Cleaning Residue** - any noticeable wiping marks caused by inappropriate cleaning technique (soiled cloths) and or inappropriate cleaning solution dilution will be considered unacceptable.
- Removable Dirty Residue** - any gradual build-up of soil accumulate on the surface which when wiped with a wet wipe will show dirty residue will be considered unacceptable.
- Removable Spots** - anything that will transfer onto a wet wipe.
- Soiled/ Fluid Build-up** - accumulation of soil on top of dried soil.

- **Soiled** - an accumulation of soiling that can be removed by a wet wipe

**Auditing Note:**

- Any mounted dispenser (toilet paper and toilet seat covers) that is found to be empty in this category will be enough to warrant a fail for this inspection element. Remember it's the dispensers we are auditing so it does not matter how much product may be stored in the washroom area.
- The stall partitions are audited in the wall category.
- When checking toilets and urinals, an inspection mirror will be needed to inspect the flush rim and jet areas.
- A certain amount of odour is acceptable in washrooms since most sites in BC abide by a non scent policy and are not permitted to use deodorizers and urinal pucks.
- Check for streaks of urine on the underside of wall mounted urinals and the fronts of toilets.
- The floor area directly behind a floor mounted toilet and a 6 inch area around it will be audited as part of the toilet. With a wall mounted toilet, the area directly under the toilet and six inches on all sides of the toilet will be audited as part of the toilet.
- The wall area behind the toilet from the floor level to (that is the same width as the toilet) to the height of the flush handle) will be included in this category.
- The wall mounted hose located beside a toilet in a patient room or beside a hopper in the soiled utility room that is used for washing out bed pans should be audited as part of the Toilet/Hopper.
- The assist rails around the toilet will be included in the toilet category.
- The conventional hopper (looks like an oversized toilet) found in soiled utility rooms is being replaced with a machine that looks like a dishwasher. This machine should be audited as a hopper when auditing these areas.
- Some toilet and urinal fixtures are damaged beyond repair because of mineral deposits and as long as they are clean should pass.
- After years of use the porcelain surfaces inside some toilets and urinals are damaged and stained beyond repair and they can no longer be brought back to their original condition so as long as they are clean then they should pass.
- Toilet cleaning tools such as brushes, caddies, and plungers are in this category.
- ***When auditing a bathroom in a patient room or office include the bathroom as part of the patient room or office audit. If you have a separate room in your database for a bathroom within a patient room please ignore it or remove it from the database (or assign it a no duty room type). A bathroom off a hallway is treated as a separate room and as such will be audited as its own entity. If the bathroom is shared between two rooms then only audit the bathroom once.***

## Risk Categories

All the functional areas in a hospital will be assigned one of four Risk Areas as defined below. In almost all cases all the rooms within these functional areas will be assigned the same Risk Category. All areas adjoining the different functional areas defined below will receive the same level of cleaning in the specific area. For instance an office located beside an operating room will receive the same high level of cleaning as the operating room and will also be defined as a Risk Category 1 room. Moreover, an office in an administration area would receive a lower level of cleaning. Thus depending where an office is located it could be assigned any of the four risk categories defined below. Rooms such as soiled and clean utility rooms, housekeeping closets and pantries or FS Ward Kitchens will adopt the risk rating of whatever area they are in.

**Note:**

- In addition to the rooms in the four risk categories there are also rooms in a hospital that are not included as part of the facility cleaning audit. These rooms are listed in the table following risk category four.
- Each Risk Category has been assigned a color for purposes of marking these rooms on a floor plan. The color assignments are as follows:
  - R1 – RED, R2 – YELLOW, R3 – GREEN, R4 – BLUE and rooms out of the scope of the facility cleaning audit should be marked in GREY.

<b>Risk Category One</b>		
<b>Description</b>	<i>This will comprise all operating theatres and areas where significant invasive procedures are performed and patients are at high risk of infection</i>	
<b>Areas Included</b>	<b>Acronym</b>	<b>Other Common Names or Related Areas</b>
Operating Suite	OR	Scrub area, Operating Rooms, Sterile Core, Procedure Rooms
Post Anesthetic Recovery	PAR, PACU	Post Anesthetic Recovery, Post Anesthetic Care Unit
Intensive Care Units	ICU	Intensive Care (ICU), Neonatal (NICU), Cardiac (CICU), Psychiatric Intensive Care (PIC), SCN (Special Care Nursery)
Burn Units	BU	
Cardiac Care Units	CCU	Angio Suites (ANG), Cardio Vascular Unit (CVU), Cardiac Short Stay (CSS)
Labor & Delivery Rooms	LDR	
Special Care Nurseries	SCN, NICU	Special Care Nursery, Neonatal Intensive Care
Surgical Day Care	SDC	
Emergency Rooms	ER	Psychiatric Emerg (PES)
Renal Dialysis Units	RDU	Kidney Dialysis Unit (KDU)
Endoscopy	ENDO	Endoscopy procedure rooms
Bone Marrow Transplant	BMT	
Miscellaneous R1 Areas		

<b>Risk Category Two</b>		
<b>Description</b>	<i>This will include the minor accident &amp; treatment areas, inpatient units, sterile support areas and any area used for performing minor invasive procedures</i>	
<b>Areas Included</b>	<b>Acronym</b>	<b>Other Common Names or Related Areas</b>
Minor Procedure Rooms		Ophthalmology clinics, Abortion Clinics
Ambulatory Care	AMB	Medical Day Care (MDU)
Inpatient Units		Medical, Surgical, Pediatric, Maternity, Nurseries, Neurology, Palliative wards
Sterile Supply Rooms	SPD	Sterile processing, Central Supply Rooms. Common acronym's: SPD, CSR, CSD, CSSD, CPS
Cancer Treatment Areas		Radiology, Chemotherapy, Oncology Clinics, Radiation Treatment Areas, Cancer Clinic
Public Areas		Waiting areas, Children's play area, Entrances, Elevators, Chapel, Gift shops, Admitting and Information Desk, Etc. <b><i>For acute sites only not including ECU's.</i></b>
Washrooms		Locker rooms where there is a washroom. Stand alone public and staff washrooms, in an acute site will be Risk 2, this includes washrooms in Risk 3 and 4 areas. Washrooms in Risk 1 areas will remain as Risk 1. Locker rooms without washrooms will adopt the category it is in. <b><i>For acute sites only not including ECU's.</i></b>
Stairwells		Main/high use stairwells. <b><i>For acute sites only not including ECU's.</i></b>
Miscellaneous R2 Areas		Formulary & Milk Bank

<b>Risk Category Three</b>		
<b>Risk Category Three</b>	<i>This will include patient support areas such as laboratories, diagnostic imaging, outpatient clinics, physio, food areas etc. Invasive procedures are not performed.</i>	
<b>Areas Included</b>	<b>Acronym</b>	<b>Other Common Names or Related Areas</b>
Rehabilitation Areas	OT/PT, REHAB	Physical Therapy, Physiotherapy, Occupational Therapy
Residential Care Units	ECU	Extended Care Units. Every space in an ECU is categorized as an R3 (including admin/linen/main entrance areas).
Psychiatric Units	PSYCH	Mental Health, Inpatient units,
Transitional Care Units	TCU	Short stay assessment units, Alternate Level Care(ALC)
Laboratories	LAB	Blood services, Outpatient Labs, Morgue
Electro diagnostic Labs	EDS	Electro Diagnostic Services
Medical Imaging	MI	Diagnostic imaging, X-Ray, Ultrasound, MRI, Cat Scan Room
Pharmacies	PHARM	
Outpatient Clinics		Diabetes Clinics, General Nutrition Clinics, Outpatient Counseling Services
Food Areas		Main Kitchens, Cafeterias, Dining Rooms
Miscellaneous R3 Areas		Special Treatment Areas, Drug & Alcohol, Biomed Medical Areas, Intern residences (if a separate contained area otherwise put in R category of the area it is in), Medical Training Areas

<b>Risk Category Four</b>		
<b>Description</b>	<i>This will comprise all types of Administration areas, non-sterile supply, plant operation rooms and stairwells in Acute sites only</i>	
<b>Areas Included</b>	<b>Acronym</b>	<b>Other Common Names or Related Areas</b>
Linen Areas		Laundry, Linen Receiving & Distribution Areas
Administrative Areas		Offices, Meeting Rooms, Libraries, staff pantries, change rooms and lockers when a washroom is not included. (See Risk 2 for Washroom rating).
Storage Areas		Central Stores, Supply Rooms (non sterile that are not attached to a specific unit), Warehouse, Loading Dock, Health Records Storage
Physical Plant Areas		Workshops, Plant Rooms, Maintenance
Waste Management Areas		Recycling Area, Garbage Area, Hazardous Waste, Loading Dock For Waste Management
Stairwells		Seldom used stairwells Locked or alarmed
Miscellaneous R4 Areas		

<b>Rooms Not Included as Part of Facility Cleaning Audit - GREY</b>		
<b>Description</b>	<i>This area shall include all building support areas that have no public access as well as the parkade &amp; external surrounds</i>	
<b>Areas Included</b>	<b>Acronym</b>	<b>Other Common Names or Related Areas</b>
Interstitial Space		
Parkade Deck		
Telephone Rooms		
Electrical Rooms		
Boiler Rooms		
Mechanical Rooms		
Restricted areas		
External Surrounds		Patio Areas, Front Entrance Areas, Outdoor Playgrounds
Miscellaneous R5 Areas		

## BC HA - Manual Housekeeping Quality Audit Forms

### Manual Audit Form - Short Version:

Health Authority/Site: \_\_\_\_\_ Building Name: \_\_\_\_\_

Risk Category (1, 2, 3 or 4): \_\_\_\_\_ Functional Area: \_\_\_\_\_

Room Name \_\_\_\_\_ Room Number \_\_\_\_\_

	Inspection Element	Pass	Fail	Code	Comment Code
	Put a check mark under the appropriate column, skip if not applicable				If an item "fails" put one of the following numbers corresponding to the comment in the "Code" Column.
1	DOORS				<b>1</b> -Adhesive Residue <b>2</b> - Bad Odour <b>3</b> - Blood <b>4</b> - Cobwebs <b>5</b> - Dust <b>6</b> - Dust Balls <b>7</b> - Debris <b>8</b> - Feces/Urine <b>9</b> -Finger Marks <b>10</b> - Graffiti <b>11</b> - Mineral Deposits <b>12</b> - Inconsistent Appearance <b>13</b> - Overflowing <b>14</b> - Removable Residue <b>15</b> -Removable Spots <b>16</b> -Scuffs Marks <b>17</b> -Sharps over ¾ <b>18</b> -Soiled <b>19</b> -Soiled Build-up <b>20</b> -String or Wire <b>21</b> -Not properly hung
2	WALLS				
3	CEILINGS				
4	VENTS/REGISTERS/HOOD				
5	HARD FLOORING				
6	CARPET/MATS				
7	BASEBOARDS				
8	INT- WINDOW/GLASS/ MIRROR				
9	WINDOW COVERING				
10	CUBICLE CURTAIN				
11	BEDS/EXAM TABLES STRETCHERS				
12	PATIENT EQUIPMENT				
13	FURNISH/FIXTURES				
14	LIGHT FIXTURES				
15	PHONES				
16	HIGH DUSTING				
17	WASTE CONTAINERS				
18	SINK/TUB/SHOWER				
19	TOILET/URINAL/HOPPERS FLOOR DRAINS				

Comments: \_\_\_\_\_

Name of Auditor: \_\_\_\_\_ Date: \_\_\_\_\_

**Manual Audit Form – Long Version**

Name of Auditor: \_\_\_\_\_ Date: \_\_\_\_\_

Health Authority/Site: \_\_\_\_\_ Building Name: \_\_\_\_\_

Risk Category (1, 2, 3 or 4): \_\_\_\_\_ Functional Area: \_\_\_\_\_

Room Name \_\_\_\_\_ Room Number \_\_\_\_\_

	Inspection Element	Pass	Fail	Code	Comment Code
	Put a check mark under the appropriate column, skip if not applicable				If an item "fails" put one of the following numbers corresponding to the comment in the "Code" Column.
1	<b>DOORS</b> <input type="checkbox"/> door <input type="checkbox"/> door frame				1-Adhesive Residue 2- Bad Odour 3- Blood 4- Cobwebs 5- Dust 6- Dust Balls 7- Debris 8- Feces/Urine 9-Finger Marks 10- Graffiti 11- Mineral Deposits 12- Inconsistent Appearance 13- Overflowing 14- Removable Residue 15-Removable Spots 16-Scuffs Marks 17-Sharps over ¾ 18-Soiled 19-Soiled Build-up 20-String or Wire 21-Not properly hung  Comments: _____ _____ _____ _____ _____
2	<b>WALLS</b> <input type="checkbox"/> walls <input type="checkbox"/> room dividers <input type="checkbox"/> stall partitions <input type="checkbox"/> wall bumpers/hand rails				
3	<b>CEILINGS</b> <input type="checkbox"/> t-bar <input type="checkbox"/> tiles <input type="checkbox"/> dry wall <input type="checkbox"/>				
4	<b>VENTS/REGISTERS/HOOD</b> <input type="checkbox"/> vents <input type="checkbox"/> exhaust hoods <input type="checkbox"/> speakers <input type="checkbox"/> registers				
5	<b>HARD FLOORING</b> <input type="checkbox"/> floor <input type="checkbox"/> corners & edges <input type="checkbox"/> floor drain				
6	<b>CARPET/MATS</b> <input type="checkbox"/> mats <input type="checkbox"/> corners & edges <input type="checkbox"/> carpets <input type="checkbox"/>				
7	<b>BASEBOARDS</b> <input type="checkbox"/> baseboards <input type="checkbox"/> corners & edges <input type="checkbox"/> floor bumper <input type="checkbox"/>				
8	<b>INT- WINDOW/GLASS/ MIRROR</b> <input type="checkbox"/> windows <input type="checkbox"/> mirrors <input type="checkbox"/> screens <input type="checkbox"/> frames/sills				
9	<b>WINDOW COVERING</b> <input type="checkbox"/>				
10	<b>CUBICLE CURTAIN</b> <input type="checkbox"/>				



1 1	<b>BEDS/EXAM TABLES                  STRETCHERS</b> <input type="checkbox"/> beds <input type="checkbox"/> stretchers <input type="checkbox"/> infant bed <input type="checkbox"/> dental/geri chairs				_____ _____ _____ _____ _____ _____
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	Inspection Element	Pass	Fail	Code	Comment Code
	Put a check mark under the appropriate column, skip if not applicable				If an item "fails" put one of the following numbers corresponding to the comment in the "Code" Column.
1 2	<b>PATIENT EQUIPMENT</b> <input type="checkbox"/> IV poles/pumps/suction <input type="checkbox"/> wall mounted equipment <input type="checkbox"/> commode <input type="checkbox"/> free standing shower seat <input type="checkbox"/> lifts/traction bars <input type="checkbox"/> over bed/bedside tables <input type="checkbox"/> wheel chairs/walkers/patient scales <input type="checkbox"/> sharps containers <input type="checkbox"/> call bells <input type="checkbox"/> children's toys <input type="checkbox"/> mayo stands				1-Adhesive Residue 2- Bad Odour 3- Blood 4- Cobwebs 5- Dust 6- Dust Balls 7- Debris 8- Feces/Urine 9-Finger Marks 10- Graffiti 11- Mineral Deposits 12- Inconsistent Appearance 13- Overflowing 14- Removable Residue 15-Removable Spots 16-Scuffs Marks 17-Sharps over ¾ 18-Soiled 19-Soiled Build-up 20-String or Wire 21-Not properly hung  Comments: _____ _____ _____ _____
1 3	<b>FURNISH/FIXTURES</b> <input type="checkbox"/> carts/hampers <input type="checkbox"/> med carts/diaper deck <input type="checkbox"/> desk/table/counters/vanities <input type="checkbox"/> computer monitors /T.V <input type="checkbox"/> pictures/bulletin boards <input type="checkbox"/> seating <input type="checkbox"/> shelving/cabinet <input type="checkbox"/> locker/cupboards/closets <input type="checkbox"/> appliances <input type="checkbox"/> all fans (ceiling or floor)				
1 4	<b>LIGHT FIXTURES</b> <input type="checkbox"/> ceiling mounted <input type="checkbox"/> wall mounted <input type="checkbox"/> free standing				
1 5	<b>PHONES</b>				
1 6	<b>HIGH DUSTING</b> <input type="checkbox"/> sprinkler heads <input type="checkbox"/> signage <input type="checkbox"/> bells/clocks <input type="checkbox"/> tracks <input type="checkbox"/> piping				
1 7	<b>WASTE CONTAINERS</b> <input type="checkbox"/> recycling <input type="checkbox"/> regular waste				

