	NHS Greater Glasgow & Clyde BOARD INFECTION CONTROL COMMITTEE	Page	1 of 10
		Effective from	May 2024
	Standard Operating Procedure (SOP) CLEANING OF NEAR PATIENT HEALTHCARE EQUIPMENT	Review date	May 2026
		Version	7
The most up-to-date version of this SOP can be viewed at the following web page: www.nhsggc.scot/hospitals-services/services-a-to-z/infection-prevention-and-control			

SOP Objective

NHS Scotland Code of Practice for the Local Management of Healthcare Associated decolonisation (HAI) requires that all near patient equipment is decontaminated before and after it is used. Equipment must be visually inspected for the presence of blood or body fluids prior to routine cleaning. If contaminated, the NHSGGC Decontamination Guidance (NHSGGC Prevention and Control of Infection Manual) must be followed.


This SOP applies to all staff employed by NHS Greater Glasgow & Clyde and locum staff on fixed term contracts and volunteer staff.

KEY CHANGES FROM THE PREVIOUS VERSION OF THIS SOP

Important Note: The version of this policy found on the Infection Prevention & Control (eIPC Manual) on the intranet page is the only version that is controlled. Any other versions either printed or embedded into other documents or web pages should be viewed as uncontrolled and as such may not necessarily contain the latest updates, amendments, or linkages to other documents.


Document Control Summary

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	NHS Greater Glasgow & Clyde BOARD INFECTION CONTROL COMMITTEE	Page	2 of 10
		Effective from	May 2024
	Standard Operating Procedure (SOP) CLEANING OF NEAR PATIENT HEALTHCARE EQUIPMENT	Review date	May 2026
		Version	7
The most up-to-date version of this SOP can be viewed at the following web page: www.nhsggc.scot/hospitals-services/services-a-to-z/infection-prevention-and-control			

Contents

1. Introduction & Background	3
2. Key Principles.....	4
3. Evidence Base	5
Appendix 1 – Reference Guide/Poster: Daily / Weekly Checklist	6
Appendix 2 – Weekly Cleaning Assurance Checklist	8
Appendix 3 – Bed Space Checklist	10

	NHS Greater Glasgow & Clyde BOARD INFECTION CONTROL COMMITTEE	Page	3 of 10
		Effective from	May 2024
	Standard Operating Procedure (SOP) CLEANING OF NEAR PATIENT HEALTHCARE EQUIPMENT	Review date	May 2026
		Version	7
The most up-to-date version of this SOP can be viewed at the following web page: www.nhsggc.scot/hospitals-services/services-a-to-z/infection-prevention-and-control			

1. Introduction & Background

The Code of Practice for the Local Management of Hygiene and Healthcare Associated Infection (HAI): The Code of Practice defines local management responsibilities for delivering safe clinical care, through ensuring high standards of hygiene in clinical settings however the principles underpinning this guidance applies across all healthcare settings. The complete document can be accessed by clicking on the following link: <https://www.gov.scot/publications/nhsscotland-code-practice-local-management-hygiene-healthcare-associated-infection/pages/2/>

It is a requirement of the Scottish Government and NHSGGC that the infection risk of healthcare equipment is managed and that the management measures used are documented, implemented and recorded. Within this SOP is a Reference Guide/Poster: Daily/Weekly Checklist in [Appendix 1](#) which lists commonly used healthcare equipment and the method and frequencies of cleaning.

Each Senior Charge Nurse (SCN) or Senior Allied Health Professional (Senior AHP) will utilise two checklists, i.e. the Weekly Assurance Checklist and the bed space / treatment area checklist to provide evidence and assurance that healthcare equipment is being cleaned in their area.


Weekly Assurance Checklist: A standard template of this checklist can be found in [Appendix 2](#). The SCN / Senior AHP can use this template and add specialist equipment used in their department. The assurance checklist will be completed weekly by the SCN / Senior AHP or the deputy charge nurse/senior staff member in his/her absence. This record must be kept in the ward / department for a minimum of one month.

Bed Space / Treatment Area Checklist: A standard template of this checklist can be found in [Appendix 3](#). This checklist should be completed on transfer or discharge of the patient, or for longer stays, weekly. For frequently used spaces such as clinical rooms, recovery spaces etc it should be completed at the end of the day for each space by a member of staff. This record should be kept in the ward / department for a minimum of one month.

The SCN / Senior AHP should ensure that any items added to their bed space / treatment area checklist are also included in their weekly assurance checklist. NB; checklists are in word document format and items on the template which are not relevant to your area can be removed (there are various checklists available, please choose one appropriate to your area).


Domestic monitoring is now set within a National Monitoring Framework and copies of the cleaning frequencies carried out by Domestic Services should be accessible in every area (copies can be obtained from the Site Facilities Manager). Lead Nurses, SCNs and Department Managers, e.g. AHPs and Facilities Staff, will be responsible for communicating arrangements locally.

The most up-to-date version of this SOP can be viewed at the following web page:
www.nhsggc.scot/hospitals-services/services-a-to-z/infection-prevention-and-control

	NHS Greater Glasgow & Clyde BOARD INFECTION CONTROL COMMITTEE	Page	4 of 10
		Effective from	May 2024
	Standard Operating Procedure (SOP) CLEANING OF NEAR PATIENT HEALTHCARE EQUIPMENT	Review date	May 2026
		Version	7
The most up-to-date version of this SOP can be viewed at the following web page: www.nhsggc.scot/hospitals-services/services-a-to-z/infection-prevention-and-control			

2. Key Principles

- 2.1 The weekly checklist is designed to provide an assurance that all equipment is clean and decontaminated between patients. It is the responsibility of the SCN / Senior AHP or the deputy charge nurse/senior staff member in his/her absence to ensure that this is being done. If on inspection equipment is found to be dirty / contaminated, actions to rectify this must be implemented immediately.
- 2.2 To support public / patient confidence after commodes have been cleaned, they should be dated and signed by the person who cleaned it using an indicator label. **THIS IS THE ONLY ITEM OF PATIENT EQUIPMENT THIS LABEL MUST BE USED ON. COMMODES SHOULD BE CLEANED WITH A CHLORINE BASED DETERGENT AND A LABEL ATTACHED WHERE IT IS VISIBLE.**
- 2.3 Equipment must be visually inspected before commencing any cleaning procedure. Equipment that is contaminated with blood or body fluids **MUST** be decontaminated as per the [NHSGGC Decontamination Guidance](#)
- 2.4 When cleaning equipment, it is important that healthcare workers (HCWs) wear appropriate personal protective equipment (PPE), e.g. gloves, disposable plastic aprons etc.
- 2.5 If patients have a known or suspected transmissible disease requiring isolation, the NHSGGC [Twice Daily Clean of Isolation Rooms SOP](#) and [Terminal Clean of Ward/Isolation Rooms SOP](#) must be followed.
- 2.6 Single-use items must never be re-used.
- 2.7 Clean equipment should be stored appropriately and cleaning should take place in an area away from the clean equipment to reduce the risk of contamination.
- 2.8 Equipment that is damaged or torn should be reported to the SCN or Senior AHP and should be removed and replaced or repaired as soon as possible. Decontamination label should be completed prior to being sent for repair.
- 2.9 When new items are considered for purchase the manufacturers' advice on decontamination must be sought and training if necessary must precede use. Careful consideration should be given to the consequences of the purchase of any item of equipment that is not capable of being decontaminated by chlorine based detergent.

	NHS Greater Glasgow & Clyde BOARD INFECTION CONTROL COMMITTEE	Page	5 of 10
		Effective from	May 2024
	Standard Operating Procedure (SOP) CLEANING OF NEAR PATIENT HEALTHCARE EQUIPMENT	Review date	May 2026
		Version	7
The most up-to-date version of this SOP can be viewed at the following web page: www.nhsggc.scot/hospitals-services/services-a-to-z/infection-prevention-and-control			

3. Evidence Base

DOH Saving Lives. High Impact Intervention No 8. Care bundle to improve the cleaning and decontamination of clinical equipment.

<http://webarchive.nationalarchives.gov.uk/20120118164404/hcai.dh.gov.uk/whatdoido/high-impact-interventions/>

The NHSScotland Code of Practice for the Local Management of Hygiene and Healthcare Associated Infection. This document can be viewed at:

<https://www.gov.scot/publications/nhsscotland-code-practice-local-management-hygiene-healthcare-associated-infection/pages/2/>

Control of Substances Hazardous to Health. Departments of Health. 2002.

<http://www.hse.gov.uk/coshh/>

MHRA (2014) (Updated 25 February 2021) Managing Medical Devices: Guidance for healthcare and social services organisations

<https://www.gov.uk/government/publications/managing-medical-devices#history>

NHSGGC Control of Substances and Hazards to Health Policy (December 2021)

[NHSGGC: Control of Substances Hazardous to Health \(COSHH\)](#)


Health Facilities Scotland. The NHSScotland National Cleaning Services Specification. 2016

<https://www.gov.scot/publications/nhs-scotland-national-cleaning-services-specification-healthcare-associated-infection-task-force/pages/3/>

www.nipcm.hps.scot.nhs.uk/media/1672/2021-02-sicp-tbp-lr-equipment-v1.pdf

The most up-to-date version of this SOP can be viewed at the following web page:

www.nhsggc.scot/hospitals-services/services-a-to-z/infection-prevention-and-control

	NHS Greater Glasgow & Clyde BOARD INFECTION CONTROL COMMITTEE	Page	6 of 10
		Effective from	May 2024
	Standard Operating Procedure (SOP) CLEANING OF NEAR PATIENT HEALTHCARE EQUIPMENT	Review date	May 2026
		Version	7
The most up-to-date version of this SOP can be viewed at the following web page: www.nhsggc.scot/hospitals-services/services-a-to-z/infection-prevention-and-control			

Appendix 1 – Reference Guide/Poster: Daily / Weekly Checklist (✓)


Unless otherwise stated, general purpose detergent and water or detergent wipes should be used for all routine cleaning.

Equipment that is contaminated with blood or body fluids **MUST** be decontaminated as per the NHSGGC Decontamination Guidance.


This list is not exhaustive but gives a guide to commonly used equipment within clinical areas.

Item	Between Patients	Daily	Weekly	Method of cleaning		Comments
				Water and detergent/detergent wipes	Chlorine based detergent	
Baths	✓	✓			✓	
Bath Aids	✓		✓		✓	
Bed base (top & bottom)	✓		✓	✓		
Bed rails	✓	✓		✓		
Bed End/Head Plate	✓		✓	✓		
Bed overhead lamp	✓		✓	✓		
Bed pan holders	✓		✓		✓	
Bed tables	✓	✓		✓		
Bidets	✓	✓			✓	
Blood pressure stands & monitor cuffs	✓	✓		✓		
Bowls/washing basins	✓*		✓	✓		*Only clean between patients if multi-patient use
Case note trolley			✓	✓		
Chairs - Bedside	✓	✓	✓	✓		
Chairs – Waiting Areas	✓*	✓	✓	✓		*At the end of the clinic unless visibly contaminated with blood/body fluid
Commodes	✓		✓		✓	Apply label after cleaning
Computers/ keyboards		✓		✓		After use
Cots						
Dispensers (Gloves/Apron/ Alcohol gel/Hand towel/Soap)	✓*	✓	✓	✓		If in single inpatient room
Duvets (wipe clean type)	✓			✓		
ECG equipment	✓		✓	✓		
Enteral feeding pumps	✓		✓	✓		
Bladed Fans	✓		✓	✓		Bladeless fans should not be used
Fridge (patient only)		✓	✓	✓		
Hoists	✓		✓	✓		
Infusion pumps	✓		✓	✓		
Infusion Stands	✓		✓	✓		
Incubators	As per cleaning SOP					
Locker	✓	✓		✓		

The most up-to-date version of this SOP can be viewed at the following web page:
www.nhsggc.scot/hospitals-services/services-a-to-z/infection-prevention-and-control

	NHS Greater Glasgow & Clyde BOARD INFECTION CONTROL COMMITTEE		Page	7 of 10
			Effective from	May 2024
	Standard Operating Procedure (SOP) CLEANING OF NEAR PATIENT HEALTHCARE EQUIPMENT		Review date	May 2026
			Version	7
The most up-to-date version of this SOP can be viewed at the following web page: www.nhsggc.scot/hospitals-services/services-a-to-z/infection-prevention-and-control				

Item	Between Patients	Daily	Weekly	Method of cleaning		Comments
				Water and detergent/detergent wipes	Chlorine based detergent	
top/sides/back						
Locker internal	✓		✓	✓		
Macerator		✓		✓		
Mattress	✓		✓	✓		
Medical gas cylinders & stands	✓		✓	✓		No alcohol based solutions
Monitors - mobile	✓		✓	✓		
Monitors - wall mounted	✓	✓		✓		
Nurse call system	✓		✓	✓	✓	
Nurse call system – Sanitary Area		✓		✓		
Patient Trolley	✓		✓	✓		
Pillows	✓		✓	✓		
Scales	✓		✓	✓		
Shower chairs	✓		✓		✓	
Suction equipment	✓		✓	✓		
Telephone (desk and deck phones)		✓		✓		Before and after each use
Trolley – beverage		✓*		✓		*And before each use
Trolley - dressing				✓		Before and after each use
Trolley – medicine			✓	✓		
Trolley - patient	✓			✓		
Trolley – resuscitation	✓		✓	✓		
Walking aids	✓		✓	✓		
Wheelchairs	✓		✓	✓		

	NHS Greater Glasgow & Clyde BOARD INFECTION CONTROL COMMITTEE	Page	8 of 10
		Effective from	May 2024
	Standard Operating Procedure (SOP) CLEANING OF NEAR PATIENT HEALTHCARE EQUIPMENT	Review date	May 2026
		Version	7
The most up-to-date version of this SOP can be viewed at the following web page: www.nhsggc.scot/hospitals-services/services-a-to-z/infection-prevention-and-control			

Appendix 2 – Weekly Cleaning Assurance Checklist to be used by SCN

NB; Where the items below exist in your area, they must remain on this checklist.


Otherwise, they can be removed and replaced with more relevant equipment.

(there are various checklists available, please choose one appropriate to your area)


HOSPITAL	
WARD	
Date	Time
Weekly Cleaning Assurance Checklist	
Inspect all listed equipment for any blood or body fluids, dust or visible debris and for any signs of damage	
Inspect all commodes & ensure decontamination indicator labels are present	
Unzip and inspect the *mattress on two beds (if unable to unzip they should be checked for any breaks in the cover and seals – examples would be theatre beds, A & E trolleys, trolleys in radiology etc and cot mattresses)	
Inspect two bed tables	
Inspect two patient chairs	
Inspect arrest trolley for dust or contamination	
Inspect two bed frames – under mattress and undercarriage	
Inspect two patient showers – report any mould or contamination to Facilities / Estates	
Inspect all pumps and IV stands	
Inspect two patient nurse call buzzers	
Inspect the top of two bed space reading lights	
Inspect two lockers	
Inspect four hand gel dispensers including dispenser at entrance to ward: ensure there is gel available and nozzles are free from blockage	
Inspect all toilet raised seats / hand rails / shower chairs	
Review 3 bedspace checklists to ensure completed appropriately & up to date	
**	
**	
PLEASE ENSURE ANY FAULTY EQUIPMENT IS REPORTED TO ESTATES OR MEDICAL PHYSICS AS SOON AS IT IS DISCOVERED	
PRINT NAME	
DESIGNATION (SCN, CN, Deputy)	
SIGNATURE	

- * If a mattress is found to be contaminated, remove from use as soon possible, and inform the SCN. The SCN will inform the Lead Nurse or Service Manager.

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www.nhsggc.scot/hospitals-services/services-a-to-z/infection-prevention-and-control

	NHS Greater Glasgow & Clyde BOARD INFECTION CONTROL COMMITTEE	Page	9 of 10
		Effective from	May 2024
	Standard Operating Procedure (SOP) CLEANING OF NEAR PATIENT HEALTHCARE EQUIPMENT	Review date	May 2026
		Version	7
The most up-to-date version of this SOP can be viewed at the following web page: www.nhsggc.scot/hospitals-services/services-a-to-z/infection-prevention-and-control			

** Please list any critical near patient equipment specific to your ward or clinical area that requires weekly inspection.

	NHS Greater Glasgow & Clyde BOARD INFECTION CONTROL COMMITTEE	Page	10 of 10
		Effective from	May 2024
	Standard Operating Procedure (SOP) CLEANING OF NEAR PATIENT HEALTHCARE EQUIPMENT	Review date	May 2026
		Version	7
The most up-to-date version of this SOP can be viewed at the following web page: www.nhsggc.scot/hospitals-services/services-a-to-z/infection-prevention-and-control			

Appendix 3 – Bed Space Checklist to be completed by HCW undertaking bed space clean NB; Where the items below exist in your area, they must remain on this checklist. Otherwise, they can be removed and replaced with more relevant equipment.

HOSPITAL	
WARD	
Date	Time
Room	Bed Space
Tick as completed when patient is discharged or once weekly, whichever comes first	
Clean O2 and Suction (ensure clean tubing and Yankauer suction tube available)	
Empty and clean Bedside Locker	
Clean Bed Table	
Clean Patient/ Visitor Chairs	
Clean Basin	
Clean Buzzer	
Clean Hand Rub Nozzle and replace if required	
*Clean Mattress (unzip mattress cover and inspect mattress on both sides for any contamination). Cot mattress should be checked for any obvious breaks in the fabric.	
Clean Bed Frame including bed rails (if in situ)	
Clean Patient Television	
Clean shelving around the bed space	
Clean inside Wardrobe	
Clean Bedside Lamp and check working	
Wipe clean the Pillows and Duvet if in use	
Infection Prevention Control Leaflets replaced (discard unused leaflets)	
Make Bed with fresh Linen	
**	
PLEASE ENSURE ANY FAULTY EQUIPMENT IS REPORTED TO ESTATES OR MEDICAL PHYSICS AS SOON AS IT IS DISCOVERED	
PRINT NAME	
DESIGNATION	
SIGNATURE	

* If a mattress is found to be contaminated, remove from use and inform the SCN. The SCN will inform the Lead Nurse or Service Manager.

** Please list any critical near patient equipment specific to your ward or clinical area.