

## **ARCHIVED DOCUMENT**

This archived content is being made available for historical research and reference purposes only. The content is no longer being updated and it may not reflect current evidence or guidance.

## Coronavirus Disease 2019 (COVID-19)

# (ARCHIVED) Key Elements of Environmental Cleaning in Healthcare Settings

This fact sheet provides a summary of the most important elements of environmental cleaning for environmental services workers. For more information, please see [Best Practices for Environmental Cleaning for Prevention and Control of Infections](#).

## Safe work practices

- No food or drink should be kept on cleaning carts or in housekeeping closets.
- Perform hand hygiene regularly with alcohol-based hand rub or wash hands with soap and water if hands are visibly soiled. Do not substitute gloves for hand hygiene.
- Wear appropriate personal protective equipment (PPE) as indicated by product instructions, type of additional precautions and/or organizational policy and procedures.

## Disinfectants

- Clean surfaces before you disinfect them and use only hospital disinfectants that have a Drug Identification Number (DIN). A DIN is an 8-digit number given by Health Canada that confirms it is approved for use in Canada. Do not use household products in healthcare settings.
- Read and refer to the manufacturer's instructions, the product's Safety Data Sheet and your organizational policies for how to safely use disinfectants. If using more than one product, make sure they are safe to use together (e.g., it is dangerous to mix a quaternary ammonium product and bleach).
- Products are available that perform cleaning and disinfection in one step, and these should be chosen where possible.
- Do not use spray or trigger bottles for cleaning products or disinfectants.
- Know the contact time for the disinfectant being used. The surface should remain wet for the required contact time (e.g., for a 3 minute contact time, the surface stays wet for 3 minutes). Let air dry and do not wipe off.



## High touch surfaces

- Clean and disinfect high touch or frequently touched surfaces at least once per day and more frequently in outbreak areas. Examples of these surfaces include doorknobs, call bells, bedrails, light switches, toilet handles, hand rails, and keypads.



## Workflow

- When cleaning surfaces and equipment, start at one end or side and clean in one direction: from clean to dirty. Do not go back and forth between clean and dirty sections to avoid contaminating the cloth or wipe.
- Clean patient/resident bathrooms last after completing room cleaning.



## No “double-dipping”

- When cleaning with a cloth and a disinfectant solution, soak the cloth in the solution and then clean the surface/equipment from a clean to dirty direction.
- Discard the cloth into a separate container for disposal or laundering and use a fresh cloth to continue.
- Do not repeatedly immerse or dip (“double-dip”) a used cloth back into the clean solution as it will contaminate the solution.



## Waste

- Know the different types of waste (biomedical, sharps and general) and the organizational policies for safe handling and disposal.
- Biomedical waste, including sharps, requires special handling and disposal, while general waste such as used PPE from isolation rooms and that from offices, kitchens, washrooms and public areas does not.



## Laundry

- Bag or otherwise contain soiled laundry at the point-of-care.
- Routine practices for handling and laundering are sufficient, regardless of the source of the linen or if it is soiled with blood, body fluids, secretions or excretions.
- Special handling of linen for patients/residents on Additional Precautions is not routinely required.



## Learn about the virus

To learn more and access up-to-date information on COVID-19, visit the Ontario Ministry of Health’s website at [ontario.ca/coronavirus](https://ontario.ca/coronavirus).

The information in this document is current as of July 16, 2021

Archived: December 2023