

Local
Guideline

Health
Hunter New England
Local Health District

Cleaning of clinical areas & equipment in NICU

Sites where Local Guideline applies	Neonatal Intensive Care Unit & Special Care Nursery
This Local Guideline applies to:	
1. Adults	No
2. Children up to 16 years	No
3. Neonates – less than 29 days	Yes
Target audience	All clinical nursing staff, NICU Technical Assistants and Housekeeping staff.
Description	Provides guidance to clinical NICU nursing staff, NICU Technical Assistants and Housekeeping staff around the daily cleaning requirements in NICU of equipment and the environment, and on discharge from NICU.

[Go to Guideline](#)

Keywords	Cleaning, disinfection, equipment, neutral detergent, terminal clean, NICU, JHCH
Document registration number	JHCH_NICU_03.12
Replaces existing document?	No
Related Legislation, Australian Standard, NSW Ministry of Health Policy Directive or Guideline, National Safety and Quality Health Service Standard (NSQHSS) and/or other, HNE Health Document, Professional Guideline, Code of Practice or Ethics:	
<ul style="list-style-type: none"> • NSW PD2012_061 Environmental Cleaning Policy • National Guidelines for the Prevention and Control of Infection in Healthcare (2010) • NSW PD2017_013 Infection Prevention and Control Policy • NSW Health CEC 2016 Infection prevention and control practice handbook. • Cleaning of Non-Critical, Reusable Medical Equipment PD2017_013:PCP 4 • Australian Commission on Safety & Quality in Health Care: Recommendations for the control of carbapenemase-producing Enterobacteriaceae (CPE) 2017 • CEC Environmental Cleaning Standard Operating Procedures 	
Prerequisites (if required)	N/A
Local Guideline note	This document reflects what is currently regarded as safe and appropriate practice. The guideline section does not replace the need for the application of clinical judgment in respect to each individual patient but the procedure/s require mandatory compliance . If staff believe that the procedure/s should not apply in a particular clinical situation they must seek advice from their unit manager/delegate and document the variance in the patient's health record.
Position responsible for the Local Guideline and authorised by	Pat Marks. General Manager / Director of Nursing CYPFS
Contact person	Jenny Ormsby Guideline Development Coordinator NICU JHCH
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This document contains advice on therapeutics	No
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Note: Over time links in this document may cease working. Where this occurs please source the document in the PPG Directory at: <http://ppg.hne.health.nsw.gov.au/>

PURPOSE AND RISKS

This local guideline has been developed to provide guidance to clinical nursing staff, NICU Technical Assistants and Housekeeping staff about all aspects of cleaning within NICU to meet Ministry of Health Directive and standards. The guideline will outline what needs to be cleaned, how frequently, with what specific product, and by whom. This will include routine cleaning of the environment and equipment, as well as cleaning required when a patient is discharged or transferred out of NICU.

These are the risks

- *Breach of MoH Directive*
- *Risk of transmission of microorganisms which could lead to colonization/infection or outbreaks, compromising the patient.*

These risks are minimised by:

1. *Environmental cleaning of patient bed space according to MoH directive*
2. *Cleaning of equipment as per standard*
3. *Standardised approach to all cleaning of equipment and space, with clear delineation of responsibility.*

Risk Category: *Clinical Care & Patient Safety*

GLOSSARY

Acronym or Term	Definition
MoH	Ministry of Health
NICU	Neonatal Intensive Care
TA	Technical assistant
Cleaning	The removal of visible soil, inorganic and organic contamination from devices or a surface, using either the physical action of scrubbing with a surfactant/detergent and water, or with appropriate chemical agents.
Disinfection	Destruction of pathogenic and other kinds of micro-organisms by thermal or chemical means. Disinfection
Terminal clean	2-step cleaning regime using ready-to-use disinfectant cleaner (such as Oxivir)

Guideline

This Guideline does not replace the need for the application of clinical judgment in respect to each individual patient.

According to MoH policy, extreme risk areas represent areas that pose the greatest risk of transmission of infection. Patients in these areas are very susceptible to infection or are undergoing highly invasive procedures. In addition surgical instruments and stock are stored in these areas. Cleaning outcomes must be achieved through the highest level of cleaning intensity and frequency.

Neonatal Intensive care is considered an area of extreme risk according to the MoH. As such, policy dictates the following:

- Minimum daily clean/disinfect with capacity for more

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- Capacity of rapid spot cleaning/disinfection
- Clean and disinfect toilets at least twice daily and check toilets at least twice more daily and spot clean. (MoH PD2012_061)

Cleaning

Daily routine cleaning requires input from several staff members within the NICU. Outlined consists of but not limited to, equipment and environmental cleaning required daily.

Staff must wear appropriate PPE when using cleaning products e.g. gloves, aprons etc.

Patient bed space

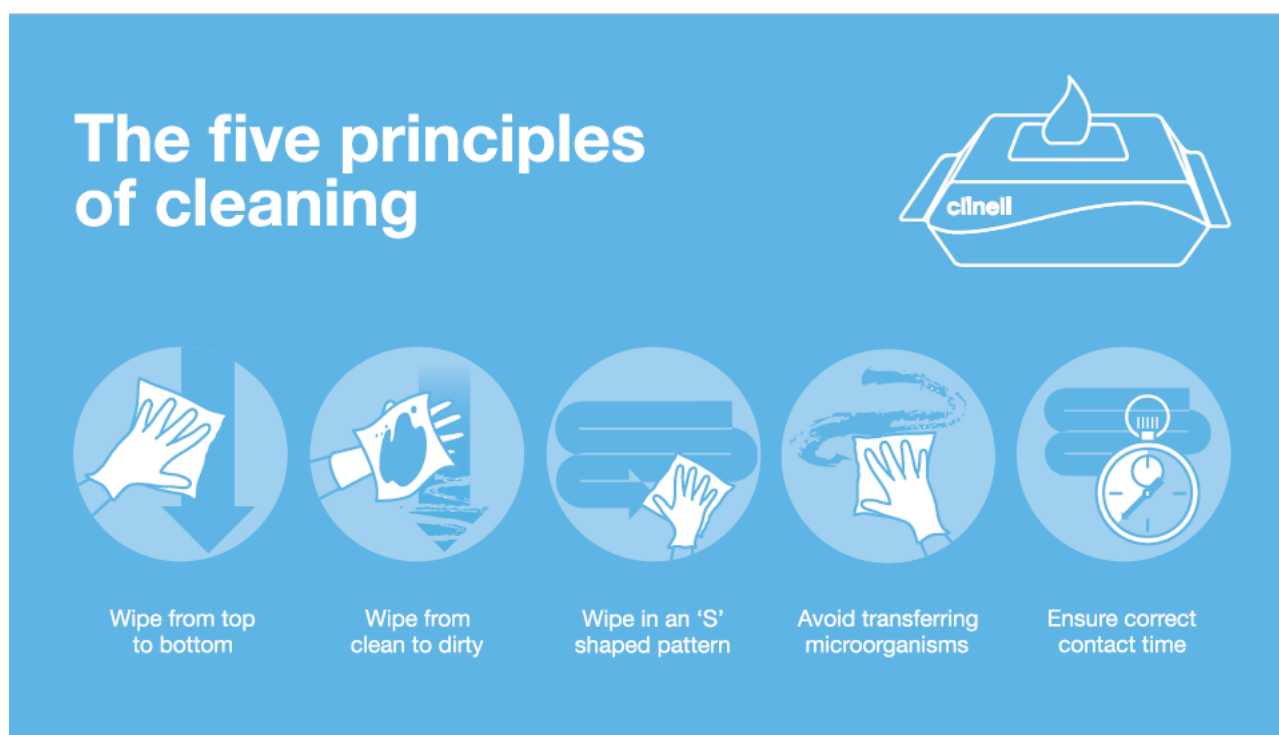
Legend: Neutral detergent = wipes approved by the facility e.g. Clinell wipes or liquid neutral detergent

Disinfection clean = approved disinfectant e.g. Oxivir or Sodium hypochlorite.

Equipment	Frequency	Cleaning Product	Responsibility
Crib (outside and including portholes)	Once per nursing shift	Neutral detergent (Clinell wipes)	Nurse
Monitor/Pendant	Once per nursing shift	Neutral detergent	Nurse
NICVIEW camera	Once per nursing shift	Neutral detergent	Nurse
Examination light	Once per nursing shift	Neutral detergent	Nurse
Long Nursing Bench	Once per nursing shift	Neutral detergent	Nurse
Patient Trolley	Once per nursing shift	Neutral detergent	Nurse
CPAP/Ventilator	Once per nursing shift	Neutral detergent	Nurse
Neopuff	Once per nursing shift	Neutral detergent	Nurse
IV pumps	Once per nursing shift	Neutral detergent	Nurse
Breast pump	After use	Neutral detergent	Parent
Patient Fridge – Exterior/Interior	Once per nursing shift	Neutral detergent	Nurse
Patient Fridge - Seals	Daily	Neutral detergent	Nurse
Milk Warmer	Daily	Neutral detergent	Nurse
Parent bench	Daily	Neutral detergent	Housekeeping
DECT phone	Once per nursing shift	Neutral detergent	Nurse
Recliner	Daily	Neutral detergent	Housekeeping
Parent chair	Daily	Neutral detergent	Housekeeping
Nursing chair	Daily	Neutral detergent	Housekeeping
Bedside computer	Once per nursing shift	Neutral detergent	Nurse
Care Board	Once per nursing shift	Neutral detergent	Nurse

Room Environment

Environment	Frequency	Cleaning Product	Responsibility
Sink	Daily	Cream cleanser	Housekeeping
Floors	Daily	Neutral detergent	Housekeeping
Top of partition wall between beds	Daily	Neutral detergent	Housekeeping
Sharps Bins outside	Daily	Neutral detergent	Housekeeping
Garbage Bin	Daily	Neutral detergent	Housekeeping
Linen Trolley Frame	Daily	Neutral detergent	Housekeeping
Call bell buttons	Daily	Neutral detergent	Housekeeping



Other equipment used in patient care

In the NICU, other equipment is frequently used for patients, for example equipment from allied health staff and visiting personnel for hearing testing etc. It is the responsibility of the person using the equipment to ensure it is cleaned and when required disinfected between patients. Also the use of ultra-sound machines and x-ray in NICU is commonplace. It is essential that again the individual using the equipment is responsible for cleaning and when required disinfecting between patients.

Cleaning following Patient Discharge/Transfer

Once a patient is discharged or transferred to another room, the entire bedspace should have a terminal clean, that is cleaned and disinfected. Nursing staff should inform Technical Assistants and Housekeeping staff as soon as possible about the pending move/discharge, to allow workflow management. NICU has cleaning staff available 24/7, which will ensure housekeeping staff are available to clean bed spaces when moves/discharges occur including out of normal hours.

Nursing staff must ensure all patients belongings are moved from the bed space, i.e. check parent cupboards, empty patient milk fridges.

Equipment moved from the bedspace on discharge/transfer may be moved to the Technical Assistants cleaning area and access through 'dirty' room. Nursing staff are required to strip equipment of consumables and dispose of same and remove linen from cribs/bassinettes.

TA staff in NICU are responsible for cleaning bedside trolleys, and all equipment associated with patient admissions, when they are discharged from hospital. This includes giraffe Omni beds, open care centres, Draeger cribs and bassinettes. Also included are respiratory support equipment such as CPAP, ventilators and INOMAX. These equipment items are taken to the TA's 'dirty' room post patient discharge for cleaning.

In the presence of MRO or on discharge the cleaning schedule will be as follows:

Patient bedspace

Equipment	Frequency	Cleaning Product	Responsibility
Monitor Pendant Monitor	Daily for MRO and on discharge	Disinfection/terminal clean Neutral detergent	Nurse
NICVIEW camera	Daily for MRO and on discharge	Disinfection/terminal clean	Nurse
Examination light	Daily for MRO and on discharge	Disinfection/terminal clean	Nurse
Long Nursing Bench	Daily for MRO and on discharge	Disinfection/terminal clean	Housekeeping
IV pumps	Daily for MRO and on discharge	Disinfection/terminal clean	TA
Breast pump	After use and on discharge	Disinfection/terminal clean	Nurse
Patient Fridge – Exterior/Interior	Daily for MRO and on discharge	Disinfection/terminal clean	Housekeeping
Patient Fridge - Seals	Daily for MRO and on discharge	Disinfection/terminal clean	Housekeeping
Milk Warmer	Daily for MRO and on discharge	Disinfection/terminal clean	Nurse

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Parent bench	Daily for MRO and on discharge	Disinfection/terminal clean	Housekeeping
DECT phone	Daily for MRO and on discharge	Disinfection/terminal clean	Nurse
Recliner	Daily for MRO and on discharge	Disinfection/terminal clean	Housekeeping
Parent chair	Daily for MRO and on discharge	Disinfection/terminal clean	Housekeeping
Care board	Daily for MRO and on discharge	Disinfection/terminal clean	Nurse
Nursing chair	Daily for MRO and on discharge	Disinfection/terminal clean	Housekeeping
Bedside computer keyboard	Daily for MRO and on discharge	Disinfection/terminal clean	Nurse

Room environment

Environment	Frequency	Cleaning Product	Responsibility
Sink	Daily for MRO and on discharge	Cream cleanser 9Sodium hypochlorite	Housekeeping
Floors	Daily for MRO and on discharge	Disinfection/terminal clean	Housekeeping
Top of partition wall between beds	Daily for MRO and on discharge	Disinfection/terminal clean	Housekeeping
Sharps Bins (outside)	Daily for MRO and on discharge	Disinfection/terminal clean	Housekeeping
Garbage Bin	Daily for MRO and on discharge	Disinfection/terminal clean	Housekeeping
Linen trolley Frame	Daily for MRO and on discharge	Disinfection/terminal clean	Housekeeping
Call bell buttons	Daily for MRO and on discharge	Disinfection/terminal clean	Housekeeping

Staff Preparation

It is mandatory for staff to follow relevant: "Five moments of hand hygiene", infection control, moving safely/safe manual handling, documentation practices and to use HAIDET for patient/carer communication: **H**and hygiene **A**cknowledge, **I**ntroduce, **D**uration, **E**xplanation, **T**hank you or closing comment.

Implementation, monitoring compliance and audit

1. Approved clinical guideline will be uploaded to the PPG and communication of new 'Cleaning of clinical areas and equipment in NICU' guideline to NICU staff will be via email and message on the HUB.
2. Incident investigations associated with this Guideline and Procedure will include a review of process.
3. Ongoing surveillance of NICU infection rates will be monitored in line with cleaning procedures.
4. The Guideline and Procedure will be amended in line with the recommendations.

References

NSW Ministry of Health:

Environmental Cleaning Standard Operating Procedures -

<http://www.cec.health.nsw.gov.au/programs/hai>

Feedback

Any feedback on this document should be sent to the Contact Officer listed on the front page.

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