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BMT Network NSW

ENVIRONMENTAL CLEANING PROJECT

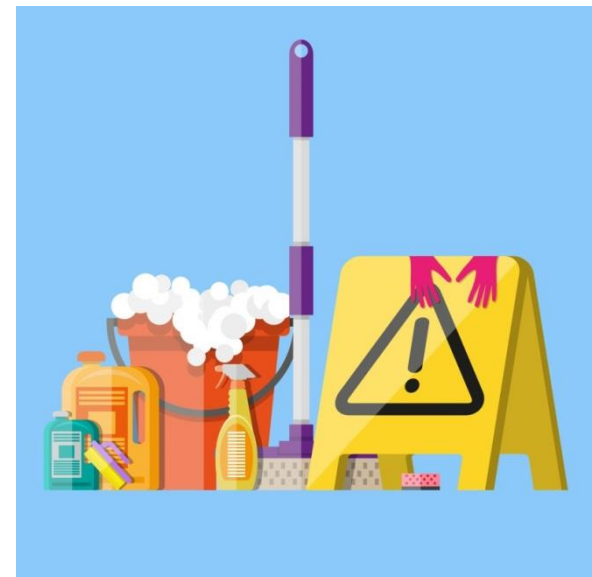
Friday 16 June 2017

Richard Makin, BMT Network and Quality Manager

**Collaboration.
Innovation.
Better Healthcare.**

Introduction

- Look back to what we aimed for in 2013
- What was achieved
- Consolidated reports
- Overall recommendations
- Specific centre - 2016
- Next steps



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WHY BMT?

- Extreme Risk
 - Based on types of patient, transmission risk and types of procedures
 - Immunocompromised (regimens and immunosuppression)
 - Frequent use of in-dwelling vascular devices
 - Complications e.g. diarrhoea
 - Long length of hospital stay and frequent readmission



The 'Environmental Cleaning Project' Aims

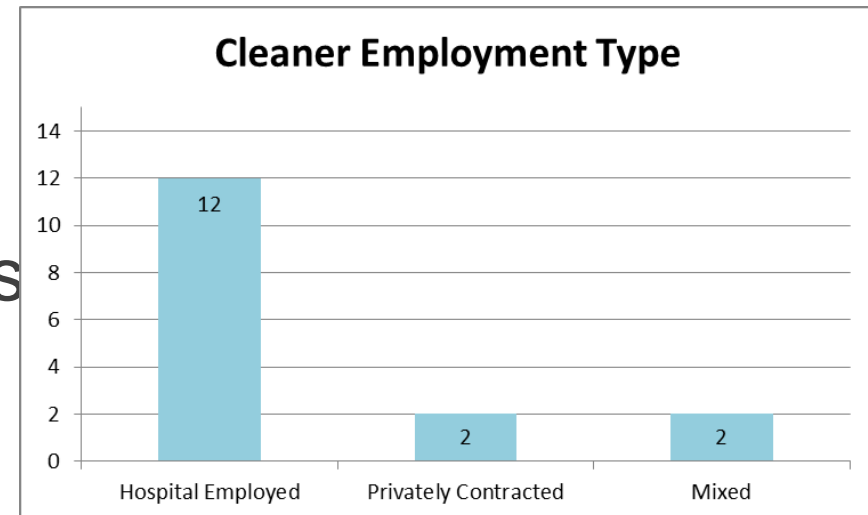
- Implement internal and external auditing standards
- Support cleaners in this 'extreme risk' functional area
- Assist in centres addressing National Safety and Quality Health Service (NSQHS) Standard 3
- Promote the implementation of the NSW Environmental Cleaning policy 2012_061
 - Improving profile of healthcare service/ WH&S and reducing HAIs

How?

1. Establish a baseline level of environmental cleanliness
 - Series of 3 audits external auditor
 - Predominantly outcome.
 - May 2014 reviewed cleaning procedure and records
 - 5 audit rounds

How?

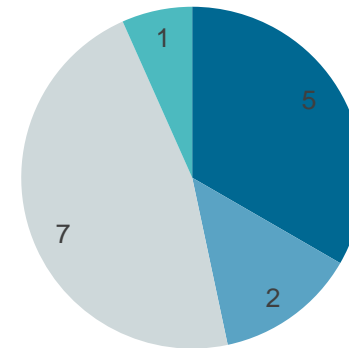
2. Ascertain how BMT units are cleaned and review resourcing, training and education
 - 2013 Survey of BMT NUMS, Environmental Services Managers, Clinical Governance
 - Where cleaners are from
 - Training of cleaners
 - Training coverage
 - Cleaning responsibilities



How?

- Documented cleaning schedules
- Frequency of cleans
- Audit programs and tools
- Needs of the cleaners
- Bed numbers, room types

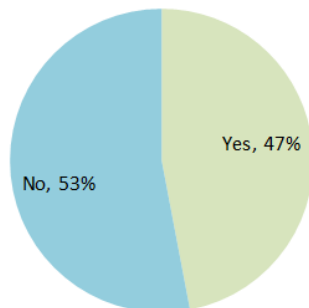
English as a Second Language



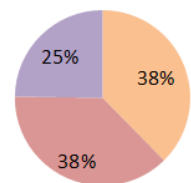
Percentage of cleaning staff that speak English as a second language.

- <20%
- 21-50%
- 51-80%
- >80%

Written Cleaning Schedule



Sign off Responsibility



- NUMs
- Enviro Managers
- Other

How?

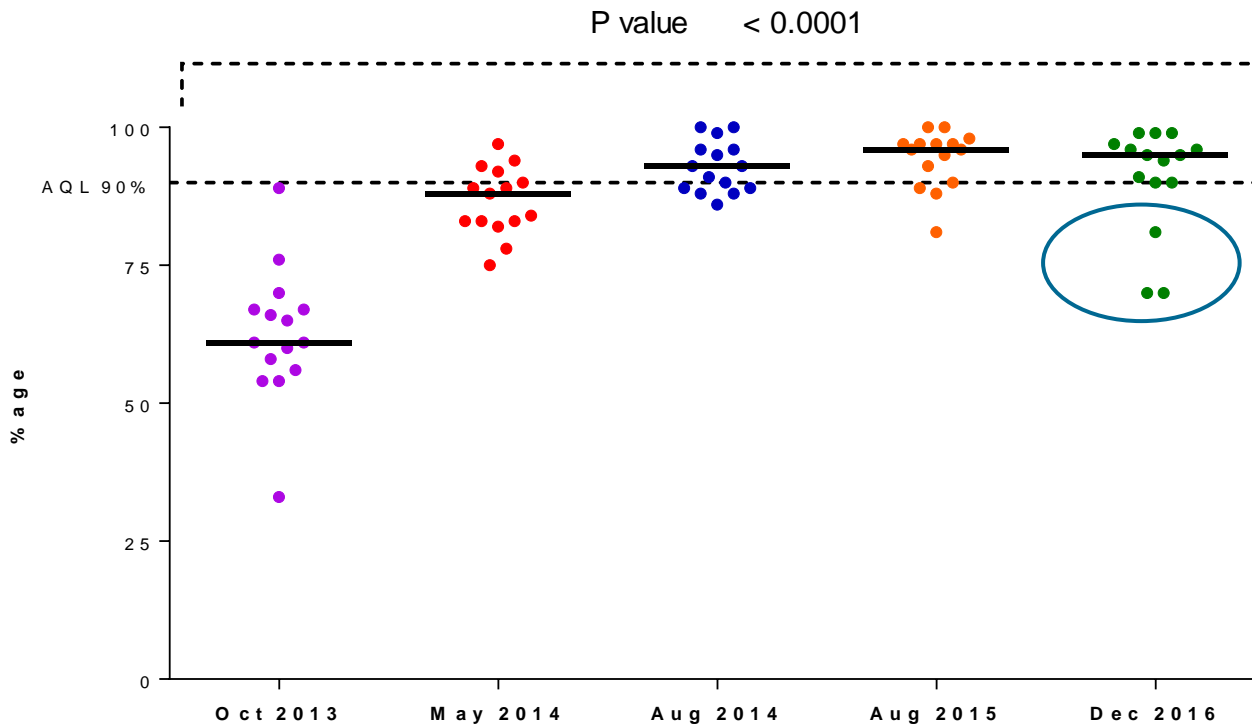
3. Validate the CEC audit tool
 - Round 1 and 2 both the Victorian and CEC tools
 - Round 3 revised CEC tool against the Victoria tool
4. Communicate quality improvements to BMT Units
 - Round 1 and Survey analysis— face to face. BMT Unit, Network and Hospital recommendations
 - Rounds 2-5 audit reports and recommendation provided to key stakeholders, individual and BMT Network

Education

- Environmental cleaning forum
 - Opportunity to ask questions – policy, audit tool, one another
 - Local initiatives and technologies
 - Design and infrastructure
- Cleaner training
 - Infection control, audit process, empowerment
- Auditor training – validated round 3

Consolidated report

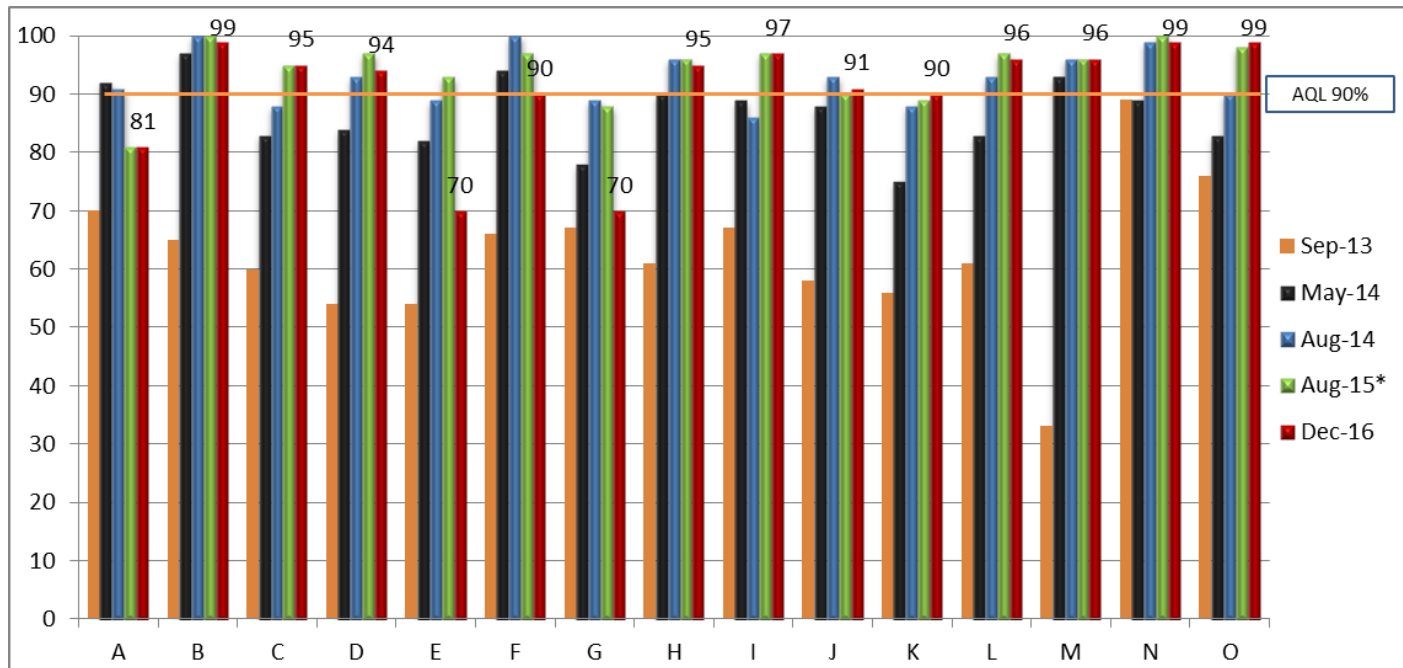
Environmental Cleaning Results 2013-2016



AQL

- 2013 - 0
- 2014 5 -10
- 2015 -12
- 2016 -12

	Oct-13	May-14	Aug-14	Aug-15	Dec-16
Median	61	88	93	96	95
Minimum	33	75	86	81	70
Maximum	89	97	100	100	99



- Round 1 to 3 – 55% increase
- Round 4 – 11 units maintained or increased their score
- Round 5 – 7 units maintained or increased their score
- Round 5 – 2 centres at 70% had dropped 18-23%

Network recommendations

1. Auditing

- 50% of rooms in “extreme risk” areas monthly
- Audit tool reflects cleaning schedule used
- CEC tool – benchmarking

2. Cleaning schedules

- Sign off process
- Every element audited allocated to someone to clean
- Include all equipment on the ward

Network Recommendations

3. Governance / reporting

- Communication of results to all levels
- Audits results - meeting agendas ward, hospital infection

4. Local ongoing education support for cleaners

5. Involvement of maintenance and engineering – e.g. aircon



Network recommendations

6. Where an element requires improvement
 - Review of cleaning process
 - Ensure equipment allow compliance
 - Ensure no competing priorities
 - Record of action taken
7. Consider environmental swabbing



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Specific recommendations

- Clutter from patient's belongings
- Checking the freezers and defrosting
- Exposed wood and broken tiles
- Soft furnishing and damaged furnishings
- Cleaning of mobile computers



Specific recommendations

- Include vents on maintenance schedule
- Audit results did not reflect the internal audit results
- Need to RE establish and audit program



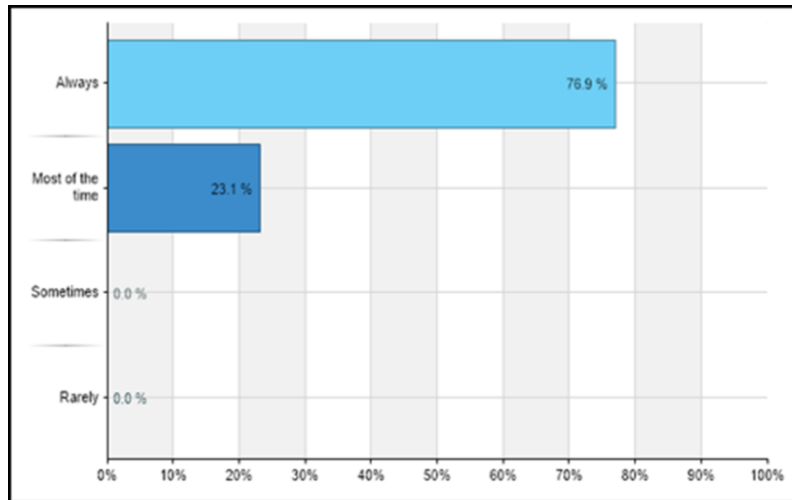
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Ongoing initiatives

- Patient experience
 - BMT Network commenced 3 years ago
 - Limitation – apheresis or transplant
 - 460 patients
 - Clean and safe environment - 88% Always, 10% most of the time
- 2017 – separate survey areas
 - 25 surveys to date



Patient experience



- “Junior staff need to be aware of hygiene care”
- “Shared wards and bathrooms are not very conducive to healing”

Next steps

- Review of CEC Environmental Cleaning Audit Tool and Standard Operating procedures
- Review of PD2012_061 EC policy
- Release of the NSQHS Standards version 2 in late 2017 with implementation January 2019
- NSW Health review of support services
- ACI support external audit in 2018
- Build on the great work already achieved

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Better Healthcare.**