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SevernSide

Integrated Urgent Care

Severnside Infection Prevention Control (IPC) Cleaning Standards SOP

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1.2	Renuka Suri (IUC Head of Nursing & AHPs)	28/05/2024
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Severnside Infection Prevention Control (IPC) Cleaning Standards for Treatment Centres

Infection Prevention Control Policy

The Infection Prevention Control (IPC) Policy applies to all Brisdoc Services and is based on National guidance.

Infection Prevention and Control Policy – Radar (radar-brisdoc.co.uk)

The IPC policy outlines Brisdoc's Standard Infection Control precautions including waste and sharps management and Infection Control Precautions.

Brisdoc have a separate SOP for Infectious Diseases Management for outbreaks which includes high consequences, notifiable and infectious diseases.

Purpose

This SOP states the level of cleanliness, frequency of cleaning and how this is maintenance by all Severnside bases.

This is underpinned by the NHS England » National standards of healthcare cleanliness 2025 This requires that healthcare premises are clean, suitable for use, are used properly and that a provider maintains standards of hygiene appropriate to the purposes for which they are being used.

Standards of Cleanliness for Severnside IUC

IUC Clinical and Operational staff will understand cleaning processes for Treatment Centres and Osprey Court. Outlined in Appendix A.

Functional Risk (FR) Categories

All healthcare environments should pose minimal risk to patients, staff, and visitors, but because different functional areas do not carry the same degree of risk, they will require different cleaning frequencies and levels of monitoring and auditing. For example, Osprey Court which is not patient facing does not require the same cleaning frequency as Marksbury Road GP Surgery.

NHS England (2025) suggests allocating a Functional Risk score and the cleaning, monitoring and audit frequency and audit target scores are all directly linked to this.

All urgent care centres are assigned a Functional Risk of 3 and Osprey Court is assigned a Functional Risk of 6.

Cleaning Responsibilities

IUC premises are sub-contracted and have individual cleaning processes. Osprey Court is not patient facing. However, it is included in this SOP for clarity.

IUC SevernSide have assigned responsibility for specific cleaning functions. For example, clinicians are responsible for patient-related equipment in between clinical assessments.

Host Cleaning Process

All Hosts are responsible for spot cleans of equipment, clinical trolleys and boxes, to remove all visible dust, dirt, marks, and contamination, leaving the item in accordance with the required performance parameters. The Hosts may perform check cleans to ensure an element meets the performance parameter in accordance to Host Handbook.

Host-Handbook-V13.3-published-1.pdf (radar-brisdoc.co.uk)

This gets recorded on the Host's Check List and monitored through the Operational Quality and Performance Review meeting.

Clinician Cleaning Process

All Clinical Staff are responsible for High Frequency Touch point cleaning. A High Frequency Touch point clean is a full clean of items that are frequently touched or used for patient assessment using an appropriate method to remove contamination. This will include all clinical equipment as well as frequent touch points such as chairs, desks, keyboards and doorknobs as appropriate. This may be after a patient assessment or when a clinician vacates a room. Please refer to NHS England » National standards of healthcare cleanliness 2025 for detailed information around high frequency touch points.

These expectations are set out at the beginning during Clinical Induction by the Training Support Co-ordinator and reiterated in Clinical Newsletters by the IPC Clinical Lead.

Subcontracted Cleaning Company

The Company will have a full cleaning schedule for all fixed equipment and the clinical environment. A full clean involves cleaning all elements using an appropriate method to remove all visible dust, dirt, marks, and contamination, leaving the item in accordance with the required performance parameters.

As tenants, each Treatment Centre has a Cleaning Record. The Operational team monitor these records on a monthly basis and any issues are reported by the Base Manager.

Osprey Court is cleaned daily by external providers. Brisdoc hold the cleaning records for this and Facilities do a monthly check.

Cleaning during a Pandemic / Infectious Diseases

Brisdoc has a separate SOP for Infectious Diseases outbreaks which includes notifiable and High Consequence Infectious Diseases(HCID).

Environmental / Premises Audit

Treatment Centres and Osprey

An Annual Environmental Audit will be performed by the IPC Clinical Lead on each Treatment Centre. Appendix B – Annual environmental audit of treatment centres. Appendix C has an Action Plan if the Treatment Centre Annual Audit is not compliant. This will be reported to the Health and Steering Group when completed.

The Facilities Team will perform weekly audits on Osprey by randomly selection a section of the areas. This will be kept in the Facilities Audit Log folder. Appendix D

Version Control

Date	Version	Author	Change Details
09/04/2025	1.0	JB	Published to Radar.
10/03/2025	1.1	Renuka Suriyaarachchi	Cosham Treatment Centre removed
17/09/2026	1.2	Shelly Joseph	New link added for Infectious disease SOP and frequency of cleaning added for patient areas.

Appendix A All Treatment Centres– Cleaning Summary

Cleaning Task	Cleaning Frequency	Responsibility
Patient and Staff Toilets		
Toilets, sinks, taps Surfaces, consumables, floors	Daily	External contractor
Sluice		
Sluice, sink, bins, fixtures, floors	Daily	External Contractor See Cleaning Scedule
Sluice	After each use	Clinician
Patient Areas		
Seating in waiting area	Daily	External Contractor – See Cleaning Schedule
Patient chairs	Daily	External Contractor
Wall fixtures	Daily	External Contractor
Wall (2m)	Full clean annually One check daily(leading to a clean of soiled areas only	External Contractor
Doors	Full clean daily, including handles and touch points	External Contractor
Windows	Full clean every 6 months	External Contractor
Radiators	Full clean weekly	External Contractor
Patient curtains	Annually as a minimum (change / clean when visibly soiled)	External Contractor
Waste bins	Full clean daily of external surfaces + 1 check clean daily	External Contractor
Sink	Full clean daily	External Contractor
Dispensers	Full clean external surfaces daily Full clean internally on replenishment, a minimum of weekly	External Contractor
Floors	Full clean daily	External Contractor

Frequent touch points	After patient contact	Clinicians
Ad-hoc cleaning	Patient event	Clinicans and Hosts
Kitchen Area		
Sink, surfaces, fridge, consumables	Daily	External Contractor
Medical Equipment		
Observation Box and any medical boxes used	After every use	Clinician
Medical Boxes / trolley/ medical bags		
All medical boxes, trolleys and medical bags	Once per shift	Host
Clinical rooms	used and cleaned as required	Clinician following HCID SOP/ IPC Policy / External Contractor

National Cleaning Colour Coding Scheme – National Patient Safety Agency	
	Bathrooms, washrooms, showers, toilets, basins, bathroom floors
	General patient areas
	Kitchens, catering
	Isolation areas

Appendix B Annual Environmental Audit of Treatment centres

Environmental Audit	Date
Treatment CENTRE -	
Clinical Rooms	
Handwashing facilities available	
Washbasin with mixer tap, no overflow or plug and be in a good state of repair	
Wall mounted liquid soap and alcohol-based hand rub available	
Paper towel dispensers	
Instructional posters for hand hygiene techniques	
Floors including edges and corners are visibly clean with no dust, debris or dirt.	
Furniture, fixtures and fittings are visibly clean with no stains of blood or bodily fluids, dirt, dust, debris or adhesive tapes.	
All dispensers, holders (couch roll, soap/alcohol gel) should be clean without dirt, debris or dust.	
Appropriate waste bin (operated with a pedal) and waste bag (usually orange bag in clinical rooms	
Waste receptacles should be clean/ free from dust or debris	
Curtains/blinds should be visibly clean with no blood or body substances, dust, dirt, debris, stains or spillages	
Disposable curtains should be dated clearly and replaced every 12 months unless it is dirty and soiled with blood or bodily fluids.	
Chairs and couches in the clinical rooms are free from rips and tears	
Pillows are enclosed in a washable and impervious covers	
Medical equipment should be cleaned after each use, maintained and stored appropriately.	
Fans or coolers used in the rooms should be visibly clean and should have planned maintenance programme.	
Tables should be tidy and free from clutters to enable cleaning.	
Electronic equipment (eg: desktops, keyboards etc) should be visibly clean and free from dust, debris and stains.	
Posters in clinical area should be laminated	
Comments	

Treatment Trolley	
Treatment trolley should be visibly clean, tidy and free from dust, dirt or debris	
Treatment trolley should be equipped with gloves (S M L size), aprons, masks, alcohol-based hand rub, eye protection, clenil Wipes.	
Resus trolley should be visbly clean and dust free	
Comment	
Equipment Box	
Equipment box should be visibly clean and free from dirt, dust and debris.	
Medical equipment's in the box should be clean and it should be cleaned after each use. This should include	
a) sphygmomanometer	
b) Pulse Oximeter	
c) Otoscope and specula/covers	
d) Ophthalmoscope	
e) Stethoscope	
f) Thermometer and probe cover	
Comment	
Sharps	
Check sharps boxes in all clinical rooms and sluice rooms	
Sharps containers assembled correctly	
Stored upright	
All sharps bins free from protruding sharps	
All sharps containers labelled or tagged with date, location and a signature on assembly	
Sharps container lids temporarily closed in between use?	

The contents of all sharps containers are below the “fill line	
Sharps bins should be disposed of when the manufacturers’ fill line is reached or 3 months after the assembly, whichever comes first.	
In use sharps containers safely positioned and out of reach of children/ vulnerable people?	
Comment	
Sluice Room	
Floors including edges and corners are visibly clean with no dust, debris or dirt.	
All dispensers should be clean without dirt, debris or dust.	
Waste receptacles should be clean including the lid and pedal	
Handwashing facilities should be available in sluice rooms	
Sink provided in the sluice rooms should be visibly clean and free from dust, dirt, debris, or bodily fluids	
Samples should be disposed of after testing as per the local guidelines	
Works tops shoiuld be clean, cluster free and tidy	
Urine test strips - check expiry date	
Comment	
Toilets	
Toilets should be visibly clean, free from dust, dirt and debris	
Handwashing facilities should be available	
Floors including edges and corners are visibly clean with no dust, debris or dirt.	
Sanitary disposal bin should be available and visibly clean	
Comment	
Kitchen	

The kitchen floor clean and dry	
Cleaning materials used in the kitchen are clearly identifiable and stored away from food.	
Fixtures and fittings are in good state of repair	
Fixtures, surfaces and appliances are clean and dry	
Shelves, cupboards and drawers clean and dry, free from dust and in good state of repair.	
All cooking appliances visibly clean	
Refrigerators are clean and free from ice build up. (Domestic refrigerator should not be used for storing medicines or samples)	
There are no inappropriate items in the fridge (specimens/medications) in the domestic fridge	
Staff food labelled and all open food should be in containers	
All food products are within their expiry dates	
All cooking appliances are visibly clean	
crockery and cutlery - clean and well maintained	
Handwashing facility available with liquid soap and paper towels	
Disposable paper towels are available for drying equipment and surfaces (no fabric tea towels/dishcloths)	
No evidence of infestation in the kitchen	
There are no inappropriate items stored in the kitchen	
Comments	
Decontamination	
Staff are aware of how to access the Decontamination Policy on Radar (IPC policy)	
Detergent wipes or detergent and warm water are available for the cleaning of equipment	
A chlorine based disinfectant is available for the disinfection of equipment contaminated	
A diluter bottle is available to ensure the correct concentration of disinfection is made up	
Comments	

Appendix C Action Plan following Treatment Centre Annual Audit

Date:		**Servernside IUC Manager**	
Base:		**Infection Prevention and Control Lead:**	

Please complete an action plan for issues identified. Actions should be ***S****pecific,* ***M****easurable,* ***A****chievable,* ***R****elevant &* ***T****ime bound*.

Recommendations: See action plan

Issues	Action required to address issue	Monitoring mechanisms to ensure effectiveness	Target date for Completion	Comments / Update	Date Completed

Completed by: _____

Designation: _____

Date: _____

Are any resources required to implement the actions?

If yes, please specify and indicate whether these are in place:

Please describe the impact the improvements will have on service users:

Review Date _____

Appendix D Cleaning Schedule Audit

Unit 20/21/3/ 4Osprey Court Cleaning Schedule

Daily Tasks
Weekly Tasks

Toilets/Shower Room	How often?	Unit 20/21 Areas Audited?	Unit 4 Areas Audited?	Comments
Clean and disinfect sink	Daily			
Clean and disinfect toilet	Daily			
Clean mirrors	Daily			
Wipe clean tiles	Weekly			
Clean outside sanitary bin	Daily			
Replace usable supplies	Daily			
Clean hand dryer	Daily			
Empty bins	Daily			
Clean and disinfect floor	Daily			
Clean the shower inside & Glass	Weekly			
Run the shower for 10 minutes & document on checklist	Weekly			
Meeting Rooms	**How often?**	**Areas Audited?**	**Areas Audited?**	**Comments**
Empty bins	Daily			
Vaccum Floor	Daily			
Clean inside windows	Weekly			

Wipe clean table & cupboards	Daily			
Wipe clean chairs	Daily			
Hallway/Stairwells	**How often?**	**Areas Audited?**	**Areas Audited?**	**Comments**
Vaccum stairs	Daily			
anti bacterial wipe hand rails	Daily			
Clean all glass & window	Weekly			
Wipe clean skirting boards	Weekly			
Kitchens		**Areas Audited?**	**Areas Audited?**	**Comments**
Vaccum and mop floors	Daily			
Clean tabels and worktops	Daily			
Spot clean chairs	Daily			
Clean microwave & fridges	Weekly			
Wipe kitchen cupboards	Weekly			
Clean and disinfect sink	Daily			
Start dishwasher/empty if needed	Daily			
Empty bins and recycling	Daily			
Offices	**How often?**	**Areas Audited?**	**Areas Audited?**	**Comments**
Empty bins	Daily			
Wipe desks	Daily			
Disinfect phones	Weekly			
Spot clean doors	Daily			
Clean inside windows	Weekly			
Vaccum floors	Daily			
Wipe clean cupboard doors notice boards	Daily			
Clean and disinfect doors	Daily			