

# Guidance for staff on cleaning and disinfection of children's residential centres during the COVID-19 pandemic

Ref: CMT-AD-38-2020

20<sup>th</sup> April 2020

Version 1.0

## 1.0 Introduction

The Novel Coronavirus, COVID-19 is transmitted through cough and sneeze droplets. For an individual to become infected, it has to get from a person carrying the virus from their nose or mouth into your eyes, nose and mouth. It is understood that the Novel Coronavirus, or COVID-19, can live approximately 72 hours in the right conditions. Observing good hand hygiene and cough etiquette will dramatically reduce the potential for spread as will having a robust and consistent approach to household cleaning and disinfection. These are our first and best lines of defense against the virus.

## 2.0 Purpose

The purpose of this document is to provide staff with clear guidance on how to ensure children's residential centres are properly cleaned and disinfected to reduce the risk of spreading the virus.

## 3.0 Scope

This guidance applies to the cleaning and disinfection of all children's residential centres during the COVID-19 outbreak.

## 4.0 Definitions

**Cleaning** refers to the removal of germs and dirt. However, cleaning does not kill germs, but reduces their numbers and removes dirt and debris that may contain or hide germs.

**Disinfection** on the other hand, refers to the use of chemicals to kill germs on surfaces. This process kills germs on a surface *after* cleaning, and further reduces the risk of the spreading the virus.

**To prevent the spread of COVID-19, it is imperative that surfaces are disinfected as well as cleaned.**

## 5.0 Chemicals

## **Instruction on the safe use of Chemicals/Disinfectants**

- 1) Line Managers of staff who use chemicals must ensure they are trained and informed on how to use, handle, and store chemicals safely, including spillage responses. Training is available to staff on HSEland search for [“Chemical Safety in the Workplace”](#).
- 2) A Chemical Risk Assessment (CRA) needs to be completed prior to using any chemical product in the workplace. Information to assist with completing a CRA can be found on the manufactures Safety Data Sheet. See Appendix 2 for a completed CRA on Bleach and Appendix 3 for hazard chemical safety summary sheet.
- 3) Please also refer to the Chemical Safety section of your Site-Specific Safety Statement and Risk Assessments for further guidance on the use of chemicals.
- 4) Ensure to wear the appropriate Personal Protective Equipment (PPE) as listed in the product Safety Data Sheet (SDS). The manufactures’ label may also contain this information.
- 5) Ensure that the manufacturers’ instructions/product labels are followed correctly, and the correct mixing/dilution formula is followed.
- 6) The main areas of concerns with chemicals/disinfectants are they may pose a risk of severe eye damage, skin damage and/or damage to the respiratory system.
- 7) Store chemicals securely after use e.g. in the correct storage area.
- 8) If unsure when using a chemical, please contact the CRS, Health & Safety Advisor for further advice and guidance.

## **6.0 Procedure**

### **6.1 General Principles for routine cleaning and disinfection in children’s residential centres**

- i. The most important surfaces to clean and disinfect regularly are the surfaces that are regular touch points.
- ii. Staff should wear appropriate PPE as per Tusla COVID-19 PPE guidance document available on the Tusla website on the COVID-19 [webpage](#), to carry out the task or other PPE as determined by Chemical Risk Assessment.
- iii. Ensure the area in which the task is being undertaken is well ventilated during the cleaning and disinfecting process.
- iv. Hand washing should be completed in accordance with HSE guidance. Please see Appendix 1 for correct hand washing techniques.
- v. In accordance with HPSC guidance, PPE waste must be disposed as follows:
  - When a staff member is finished using PPE and cleaning material, they should doff the PPE and place it, as instructed on the HSEland video, into the first bag.
  - When all applicable waste has been placed into this bag the last person to use it, while wearing a new pair of gloves, should tie it closed i.e. knot

- the neck of the bag, and place this bag into another bag. Do not squeeze the bags or squash the contents.
  - Remove and store the bags in a safe location (locked if possible) and advise staff where this bag is.
- vi. Disposal routes:
  - If it is confirmed COVID-19 IS NOT PRESENT, the bags can be disposed in the normal general waste stream.
  - If it is confirmed COVID-19 IS PRESENT, contact the local public health office and request guidance on what to do with the waste.

## **6.2 Cleaning and disinfecting residential centres where there are no confirmed cases of COVID-19**

The focus of cleaning and disinfection is to prevent the possible transmission of the virus within the centre.

- 6.2.1 In addition to the general principles outlined in 6.1 above, regular touch points include but are not limited to: door touch plates, door combination locks, hand rails such as banisters, glazed units, tables, desks, door handles, presses, cupboards, light switches, toilets, taps, sinks, phones, remote controls, computer keyboards, printing equipment, kitchen surfaces and floors, steering wheels, and any frequently high touch point areas.
- 6.2.2 All surfaces should be firstly cleaned using detergent and hot water, and subsequently disinfected with the appropriate disinfecting product (liquid or wipe format).
- 6.2.3 Staff should only use products that the manufacturers' label states are effective in killing viruses, and they should consult the relevant Safety Data Sheet and comply with requirements therein, to manage any risks associated with its use.
- 6.2.4 Floor surfaces that have a high amount of traffic on a daily basis should also be cleaned and disinfected to avoid the virus being brought in from an external source.
- 6.2.5 Staff should use disposable cloths for cleaning and disinfecting.
- 6.2.6 Staff should avoid touching any area of their face whilst undertaking cleaning and disinfecting of an area.
- 6.2.7 Cutlery and delph should be washed in hot water and detergent, or in a dishwasher.
- 6.2.8 For soft (porous) surfaces such as rugs, and curtains, and single use textile towels, remove visible contamination (if present) and clean with appropriate cleaners indicated for use on these surfaces. After cleaning:
  - Use gloves to place items in laundry and wash items as appropriate in accordance with the manufacturer's instructions. Where possible, launder items using the warmest appropriate water setting for the items and dry the items completely.
- 6.2.9 In accordance with HPSC guidance, all waste including PPE waste must be disposed of safely and appropriately (See 6.1 (v) and (vi))

- 6.2.10 Upon completion of all cleaning and disinfection tasks, wash hands thoroughly as advised by the HSE Guidance (see attached).
- 6.2.11 Hands should be dried either using paper towels or a hand drier. Where these are not available, textile towels should be single use only to prevent the possible spread of infection.
- 6.2.12 Please see appendix 5

### **6.3 Cleaning and disinfecting residential centres where there have been suspected/confirmed cases of COVID-19.**

- 6.3.1 In addition to the general principles outlined in 6.1, and specific guidance outlined in 6.2.1 - 6.2.15, the following should also be adhered to for the safety of everyone.
- 6.3.2 Staff should be fully aware of COVID-19 symptoms and prevention of its spread.
- 6.3.3 Clean and disinfect high touch, i.e. touched frequently, surfaces consistently (multiple times daily) in the residential centre, to prevent the spread of the virus.
- 6.3.4 Where a young person is self-isolating, and in keeping with HSE guidance, limit contact with them to avoid unnecessary spreading the virus. It is not necessary to clean the bedroom/bathroom solely dedicated to an ill person as frequently, as they are already ill. In these circumstances, subject to risk assessment, the young person may be provided with wipes to keep the bedroom/bathroom clean.
- 6.3.5 If a separate bathroom/en-suite is not available, staff should clean and disinfect the communal bathroom after each use by the person self-isolating. They should wear the appropriate PPE while doing so.
- 6.3.6 Where possible, dedicate a bin, lined with a refuse sack, for the person self-isolating and it should be managed in accordance with 6.1 (v) and (vi).
- 6.3.7 The young person self-isolating should eat in their room if possible. Cutlery and delph used should be handled with gloves and washed with hot water and detergent - or in a dishwasher.
- 6.3.8 Use PPE when handling dirty laundry from the person self-isolating, and then discard safely after each use.
- 6.3.9 Where possible, do not shake dirty laundry to minimize the possibility of dispersing the virus through the air.
- 6.3.10 Wash items in accordance with manufacturer's instructions. Where possible, wash items using the warmest appropriate setting for the items and dry items completely. **Note:** There is no need to wash clothing separately of the person self-isolating for suspected or confirmed COVID-19.
- 6.3.11 Clean and disinfect the clothes baskets according to guidance above. If possible, consider placing a bin liner that is either disposable or can be laundered. If the basket cannot be properly washed and disinfected, it should be disposed of.

- 6.3.12 When all applicable waste from these cleaning and disinfecting tasks have been completed, it should be placed into a first bag and the last person to use it, while wearing a new pair of gloves, should tie it closed i.e. knot the neck of the bag, and place this bag into a second bag. Do not squeeze the bags or squash contents. Where COVID-19 is confirmed as present, contact the local public health office and request guidance on what to do with the waste.
- 6.3.13 Upon completion of any tasks, wash hands thoroughly as advised by the HSE Guidance (Appendix 1).
- 6.3.14 Hands should be dried either using paper towels or a hand drier. Where these are not available, textile towels should be single use only to prevent the possible spread of infection.
- 6.3.15 Once a person has fully recovered from the COVID-19 episode, the room where they were isolated should be cleaned and disinfected in accordance with the general principles outlined in 6.1 and the specific guidance outlined in 6.2.1 - 6.2.15 above.
- 6.3.16 Once this process has been completed, and all surfaces are dry, the room can be put back into use.
- 6.3.17 Please see appendix 5

## 7.0 Record of Cleaning

- 7.1 A record of cleaning should be maintained to record the date and time of cleaning, rooms cleaned etc. should there be a requirement to conduct contact tracing if a staff member or contract cleaner develops COVID 19. See Appendix 4 for sample record log.

**Approved by Tusla Crisis Management Team – COVID-19**

## Appendix 1 Hand Washing Techniques

# Handwashing Technique

### Preparation



1. Remove hand and wrist jewellery (wedding band allowed) N.B. Keep nails short



2. Wet hands thoroughly under warm running water



3. Apply 5mls of soap/antiseptic soap to cupped hand by pressing dispenser with heel of hand (do not use finger tips on the dispenser)

### Handwashing – (process takes at least 15 seconds)



A. Rub palm to palm 5 times



B. Rub right palm over the back of left hand up to wrist level 5 times. Do the same with the other hand



C. With right hand over back of left hand rub fingers 5 times. Do same with the other hand



D. Rub palm to palm with the fingers interlaced



E. Wash thumbs of each hand separately using a rotating movement



F. Rub the tips of the fingers against the opposite palm using a circular motion. Also ensure nail beds are washed



G. Rinse hands thoroughly under running water to remove all traces of soap



H. Turn off taps using elbows



I. Dry hands completely using a disposable paper towel



J. Discard paper towel in waste bin. Open bin using foot pedal only to avoid contaminating clean hands

Supported by PEI  
Developed by Infection Control Team  
St. James's Hospital

 Feidhmeannacht na Seirbhíse Sláinte  
Health Service Executive










A Partnership for  
Better Healthcare 

A Strategy for the Control of  
Antimicrobial Resistance in Ireland



Clean your hands  
**Say no to infection**

## Appendix 2 Chemical Risk Assessment- Bleach

Chemical Agents Risk Assessment									
Service: Tusla Agency Nationwide					Risk Assessor(s) Charlene Thornton				
Date of Assessment: 27/03/2020					Name of Risk Owner (BLOCKS): Line managers and staff				
Chemical Name (Concentration): Bleach									
Number of Employees Exposed:	Categories of employees likely to be exposed: (Tick)				Duration and frequency of contact (Hr/day):				
1 employee in contact with product at any one time. To be determined at each premises	Staff <input checked="" type="checkbox"/>	Service Users <input checked="" type="checkbox"/>	Visitors <input checked="" type="checkbox"/>	Others (please specify):	Potentially hourly exposure				
Safety Data Sheet available: Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>			Location of SDS : Brunel Tusla Head Office						
Amount used and quantity stored	Hazard and risk associated with chemical:			Normal Exposure route(s) (Tick):			Dustiness or Volatility: High, Medium or Low		
Various sizes 1L Maximum permitted quantities on site 25 litres	Causes skin irritation. Causes serious eye irritation.			Eyes <input checked="" type="checkbox"/>	Skin <input checked="" type="checkbox"/>	Ingestion <input type="checkbox"/>	Inhalation <input type="checkbox"/>	This product is not volatile.	
Classification, Labelling and Packaging (CLP) Hazard Symbols									
CLP SYMBOLS									
Tick appropriate pictogram. Refer to section 2 of SDS			<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>				
Insert appropriate signal word i.e. <u>danger</u> or <u>warning</u> . Refer to section 2 of the SDS			Causes skin irritation		Harmful to aquatic life with long lasting effects				
Occupational Exposure Limit Value (OELV): Short term exposure limit (15 mins) WEL 2mg/m <sup>3</sup> Refer to <a href="#">Code of Practice to Chemical Agents Regulations 2018</a>									
HAZARD & RISK DESCRIPTION	EXISTING CONTROL MEASURES			ADDITIONAL CONTROLS REQUIRED			ACTION OWNER		
Risk of ill health due to side effects associated with use of Bleach	Use in accordance with manufacturer's instructions. Do not mix/use with any other chemicals. Required: Protective gloves/apron/ eye protection.			Staff to complete chemical training- HSEland.ie Continuous monitoring & review of existing controls			Staff and line managers		
Incorrect use of Bleach - e.g. ingestion, splash to eyes	Use in accordance with manufacturer's instructions, handle packages and containers carefully to minimise spillages.  Staff to be instructed to discontinue use if side effects present from use.  Keep out of reach of children. Store in suitably labelled container in a secure location at all times.  Avoid release to the environment. Discharge small quantities of used solution to drain & flush with plenty of water.  Hygiene measures- to reduce potential exposure wash hand with soap and water after use.			If skin irritation occurs: remove contaminated clothing, wash skin with soap and water. Get medical advice/attention if discomfort continues. If in eye: Rinse cautiously with water for several minutes. Remove contact lenses, if present and easy to do. Continue rinsing. If eye irritation persists: Get medical advice/attention. If ingested: Rinse mouth with water & drink copious amounts of water. Do not induce vomiting. If symptoms persist seek medical attention. If inhalation occurs: move exposed person to fresh air. Rinse nose and mouth with water. Get medical advice/attention if			Staff and line managers		
Incorrect storage of products	Stocks of material to be stored in a well-ventilated area and locked area away from children. Keep container tightly sealed and store upright away from direct sunlight.  Staff to follow manufactures instructions available on the packaging or Safety Data Sheet.  In the event of a spillage, PPE should be worn, small spillage – flush away with plenty of water.  Based on the amount used & stored, large spill unforeseen.			In case of fire- use fire extinguishing media appropriate for surrounding materials.			Staff and line managers		
INITIAL RISK									
Likelihood	Impact	Initial Risk Rating		Open	Monitor				
Possible(3)	Minor (2)	MS		<input checked="" type="checkbox"/>					

## Appendix 3- Hazardous Chemical Safety Summary (Bleach)

### Sterilising Fluid

### Sodium hypochlorite



**Serious Eye & Skin Irritant**

**Irritant of Lungs & Airways**

#### Other Health & Safety Risks

Generates toxic/flammable gas on contact with other cleaning products.

Avoid contact with metal objects.

Environmental pollutant.

#### Additional Safety Precautions

1. Keep out of the reach of children: store securely.
2. Personal Protective Equipment **MUST** be worn while
  - a. Making solution from concentrate
  - b. Using of the product
  - c. Wear gloves, long sleeved clothes, and safety glasses during use.
3. Carefully use in accordance with the product label or other product instructions.
4. Empty container may be rinsed out with cold water and disposed of in domestic waste bin.
5. Ventilate area of use thoroughly after application.
6. Allow treated surfaces to dry before use.
7. Use fresh solution only: exposure to air degrades its effectiveness.
8. To minimise injury from making solution from concentrate, add the correct dose of sterilising concentrate to water. Do **NOT** add water to sterilising concentrate (this will splash concentrate).
9. Read the product's safety data sheet (available from product manufacturer's website) and risk assessment: your Regional Health and Safety Advisor can assist you in preparing a chemical risk assessment.
10. Wash contaminated skin immediately.
11. Remove contaminated gloves and clothing after use, and before washing, eating, drinking or smoking.
12. During use ensure room is ventilated to avoid build-up of fumes.
13. Report any suspected health problems associated with any chemical.
14. Allow treated surfaces to dry before use.

#### First Aid for Eye Contact

Immediately rinse the affected eye for 15 minutes with plenty of cool running water as instructed by the First Aider and/or line manager. Then contact Occupational Health or your GP.



# Appendix 4 Sample Cleaning Record Log

## Cleaning Quality Sheet

Below is a list of tasks you can expect to be completed in your area by your Cleaning Team

Office:

	Cleaning Operative	Date	Time	Checked By:
Monday				
Tuesday				
Wednesday				
Thursday				
Friday				

If you have any comments or observations regarding the standard of these facilities please contact the helpdesk on Ext: **Or email:**

### Daily Tasks

- Remove general and recyclable waste
- Spot vacuum
- Sanitize touch point areas such as door handles, touch plates, work surfaces, telephones, handrails & light switches, ledges etc
- Sanitize & clean desk/table tops & keyboards
- Low level spot clean pipe work dusting
- Spot carpet cleaning
- Spot glass cleaning
- Spot damp wipe door furniture
- Clean telephones /conference call unit

### Weekly Tasks

- Vacuum carpeted areas.
- Damp wipe desks, fixtures and fittings
- Dust computers/screens
- Clean all horizontal surfaces
- Clean doors, kick plates and push pads

### Monthly Tasks

- Skirting boards
- Clean walls
- Clean waste bins
- High level dusting
- Internal windows

### Bi-Annual Tasks

- Full clean of all blinds
- Clean chairs/chair legs/table legs
- Carpet cleaning

### As Requested Tasks

- FM Service Desk requests
- Confidential waste removal

# Appendix 5 Poster on Cleaning and disinfection for CV19

