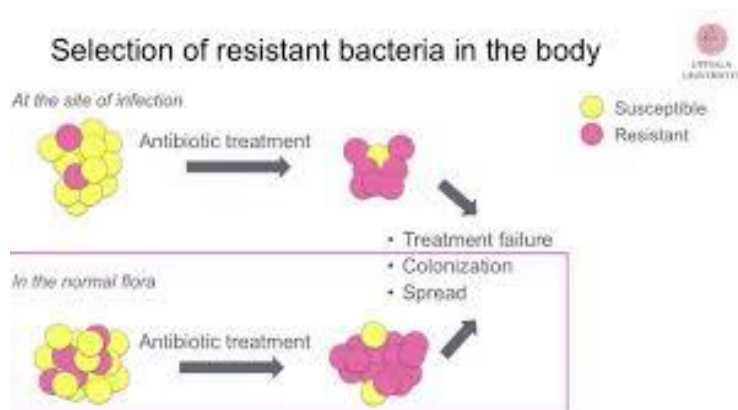




SOP FOR THE ENVIRONMENTAL CLEANING OF HEALTHCARE FACILITIES WHERE PATIENTS COLONIZED OR INFECTED WITH MDRO ARE PRESENT







Ministry of Health and Wellness
MAURITIUS

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Approval Form

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STANDARD OPERATING PROCEDURE FOR THE ENVIRONMENTAL CLEANING OF HEALTHCARE FACILITIES WHERE PATIENTS COLONIZED OR INFECTED WITH MULTI-DRUG RESISTANT ORGANISMS ARE PRESENT			
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Dr. D. Nuckchady. This document was vetted by the IPC Writing Committee.

PEER REVIEW

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Updates

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- Some text was reformulated for greater clarity

Version history

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Version 1.0: Created	4 July 2021
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Standard Operating Procedure for the Environmental Cleaning of Healthcare Facilities where Patients Colonized or Infected with Multi-Drug Resistant Organisms are Present

1. Multi-drug resistant organisms (MDRO) include (but is not limited to) carbapenem-resistant *Acinetobacter baumannii*, carbapenem-resistant *Pseudomonas aeruginosa*, carbapenem-resistant *Enterobacteriaceae*, vancomycin-resistant *Enterococcus sp.*, methicillin-resistant *Staphylococcus aureus* and *Candida auris*.
2. The basic principles delineated in the SOP “Standard operating procedure for the routine environmental cleaning of healthcare facilities” continue to apply.
3. The thorough cleaning of the patient zone(s) of patients colonized or infected with an MDRO should be scheduled after cleaning other patient zones (i.e., isolation areas should be cleaned after non-isolation areas).
4. Wear recommended personal protective equipment before entering the room.
5. The cleaning techniques used should produce minimal mists and aerosols or dispersion of dust in the patient-care areas i.e., do not dry sweep, do not use brooms and do not spray disinfectants.
6. Use 0.5% chlorinated solution or alcohol 70-80%. If these products are not available, check the SOP on “Antimicrobial Spectra of Some of the Disinfectants Available on the Mauritian Market” for other disinfectants that may be utilized.
7. Prepare fresh cleaning solutions daily.
8. Detergent and disinfectant solutions must be discarded after each use in areas with suspected / confirmed MDRO (to eliminate potential transfer of MDRO to each subsequent surface to be cleaned).
9. Handwash basins in isolation rooms should never be used for the disposal of liquid waste.
10. Use liquid soap (instead of bar soap), disposable towel and hands-free taps in isolation rooms.
11. Alcohol-based sanitizer should be available within the patient zone.
12. Always be sure to clean and disinfect patient care equipment between patients.
13. Change the water in buckets frequently to avoid contamination e.g., clean the buckets in between each patient room.
14. Cleaning material for isolation rooms must be stored and used only in isolation. The isolation area must always be cleaned and disinfected last.
15. Curtains made of cloth should be removed for cleaning after the patient is discharged. Curtains made of plastic should be wiped clean.
16. ***Fumigation, fogging and spraying of disinfectants are not indicated.***