SOP FOR THE CLEANING OF VEHICLES THAT ARE CONTAMINATED WITH SARS-COV-2

Ministry of Health and Wellness
MAURITIUS

March 2023

Approval Form

Version: 2.0 **Effective date:** March 2023

STANDARD OPERATING PROCEDURE FOR THE CLEANING OF VEHICLES THAT ARE CONTAMINATED WITH SARS-COV-2			
	NAME	**SIGNATURE**	**DATE**
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AUTHOR

Dr. D. Nuckchady. This document was vetted by the IPC Writing Committee.

PEER REVIEW

Dr. B. Beedassy (NCD Coordinator).

Date of next review: December 2025

Updates

December 2022

- Minor clarifications were made to a few sentences
- The type of personal protective equipment to be used has been updated to reflect current guidelines

Version history

Version	Date
Version 1.0: Created	4 November 2021
Version 1.0: Approved	16 November 2021
Version 2.0: Revised	25 December 2022
Version 2.0: Approved	6 March 2023

Standard Operating Procedure for the Cleaning of Vehicles that Are Contaminated with SARS-CoV-2

Challenges faced

While ambulances are no longer being delayed due to cleaning procedures, complaints are still being received that vomit, urine and blood, as well as cockroaches, are often being noted by patients and staff inside transport vehicles.

Purpose

This document outlines the steps that should be followed to clean vehicles that may have become contaminated with the SARS-CoV-2 virus (through the transport of patients suspected or confirmed of having COVID-19); it helps to ensure the safety of all passengers and to minimize delays to patients who are waiting to be moved.

Key points for passengers and drivers

1. All healthcare workers (HCW) who are in the vehicle including the driver should be fully vaccinated against COVID-19 in alignment with national authorities.
2. Whenever possible, avoid having too many persons in the vehicle at the same time and implement alternate seating.
3. All HCW who are in the vehicle should wear their personal protective equipment (PPE) as per national guidelines when accompanying a COVID-19 positive patient (suspected or confirmed) e.g., mask, face shield / goggles or gloves as per risk assessment, and gowns.
    a. For details on the use of PPE by healthcare workers, please refer to the document entitled "Standard operating procedure on the rational use of PPE in the context of the COVID-19 outbreak".
    b. Drivers can avoid wearing face shields or goggles as these may pose a driving hazard when they fog up.
4. The patient should wear a facemask if tolerated.
5. If possible, occupants of the vehicle should limit close contact with others.
6. HCW should practice regular hand hygiene, avoid touching their nose, mouth, or eyes, and avoid picking up multiple passengers who would not otherwise be riding together on the same route.
7. All patients as well as the HCW should perform hand hygiene with hand sanitizer upon entry to and exit from the vehicle, and before and after handling patients.
8. Open all windows partially or preferably fully to improve ventilation. When windows cannot all be opened, ensure the left foremost and right rearmost windows are opened during travel.

Steps to follow

1. Ensure that the vehicle is thoroughly cleaned prior to taking in additional passengers.

2. When cleaning and disinfecting, individuals should wear disposable gloves (or heavy-duty rubber gloves) and a fluid resistant gown, together with their respirator and face shield / goggles. Perform hand hygiene before donning PPE.
3. Doors and windows should remain open while cleaning the vehicle.
4. Clean with detergent or soap and water if the surfaces are visibly dirty, prior to disinfectant application, as dirt and grime can affect how well a disinfectant works.
5. Use 70% alcohol for disinfection (ensure that this will not damage soft fabric or porous surfaces). The contact time is 10 minutes for many disinfectants – see the "Standard operating procedures for the cleaning of healthcare facilities in the public health sector" for details. For sensitive areas, use soap and water.
    a. Do not spray disinfectants as this may damage electronic components. Wiping is preferred.
    b. Bleach can damage the inside of cars, especially fabrics and electronic parts – use with care.
    c. Avoid using ammonia-based cleaners on car touchscreens or dashboards, as they can damage anti-glare and anti-fingerprint coatings.
    d. Do not use excess water as this promotes the growth of mold. Ensure the inside is dry before the vehicle is reused.
    e. Fumigation is not recommended.
6. Cleaner areas should be attended to before dirtier areas.
7. Pay particular attention to the following high-touch surfaces:
    a. Seats, arm rests, door handles, seat belt buckles, light and air controls, doors and windows, and grab handles.
    b. Steering wheel, starter button, centre touchscreen / console, stereo, handbrake, gearstick, keys, key fob, indicator and wiper stalks, control buttons (windows, mirrors, seat adjusters, etc.) and cup holders.
    c. Stretcher, mattresses, rails, control panels, fixtures and fittings.
8. High-touch (i.e., frequently touched) surfaces should be cleaned in-between passengers. Minimally touched surfaces must be cleaned daily and spot clean areas as required.
9. Vehicle carpets should be regularly vacuumed (e.g., weekly) ideally with a vacuum cleaner fitted with a high-efficiency particulate absorbing filter. If the latter is not available, ensure that the dust is thrown away appropriately in a yellow-colored bin and that appropriate PPE is worn during cleaning.
10. Gloves and any other disposable PPE used for cleaning and disinfecting the vehicle should be removed and disposed of after cleaning; wash hands immediately after removal of gloves and PPE with soap and water for 40-60 seconds, or use an alcohol-based hand sanitizer with at least 70% alcohol if soap and water are not available.

11. With all the doors of the vehicle wide open (including the rear doors for ambulances), the estimated air changes per hour is 20 to 30. This means that 99.9% of infectious particles can be removed through ventilation in 10 to 20 minutes. Keeping the vehicle in sunlight may accelerate the deactivation of microbes given the virucidal effect of ultraviolet light.

    a. If the next patient being carried inside the vehicle is also COVID-19 positive, there is no need to fully ventilate the automobile.

    b. Otherwise, during routine disinfection, wait for a maximum of 20 minutes only.

    c. However, during terminal cleaning (e.g., at the end of the day), ventilation may be continued for a longer length of time (especially if the vehicle is large e.g., a bus).

12. Manage soiled linen appropriately.

    a. For details, see the document entitled "SOP on the management of linen that may be contaminated with SARS-CoV-2".

13. Ambulances should be able to be cleaned and back into service within 30 minutes.

14. Cleaning schedule for ambulances or Service d'Aide Médicale d'Urgence (SAMU) vehicles:

Area / item	**Frequency**	**Method**
• Stretcher	After every patient use	Alcohol wipes. Pay particular attention to the side handles and mattress.
• Arm-lok immobilizer • Bedpan • Carry chair • Laryngoscope handle • Pulse oximeter probe • Rescue board • Scoop stretcher • Stethoscope • Vacuum mattress • Vehicle patient seats	After every patient use	Alcohol wipes.
• BP cuffs • Collars • Frac pack straps • Rescue board head block set • Sphygmomanometer	After every patient use	Alcohol wipes. Equipment must be disposed if Velcro is contaminated with body fluids.
• Rescue board straps • Vehicle seat belts	After every patient use	Alcohol wipes. Equipment should be disposed of as contaminated waste if non-cleanable parts (e.g., buckles or straps) become contaminated with body fluids.

• Linen and single use items	After every patient use	Single use items must be disposed of after every patient use.
• Airwaves equipment • Defibrillator • Equipment bags • Glucometer • Mobile phone • Mobimed • Pen torch • Pulse oximeter unit • Resuscitator • Ring cutter with blade • Ring magnet • Scissors • Suction unit – Electronic • Suction unit – Manual • Twelve-lead ECG unit	At least daily and if contaminated.	Alcohol wipes.
Internal surfaces (ceiling, sides, cupboards, blinds, brackets, fire extinguisher, grab rails, communications equipment, work surfaces)	At least daily and if contaminated.	Alcohol wipes.
Floor	At least daily and if contaminated.	Significant debris and dust should be removed first if present. Mop with hypochlorite if surface will tolerate. Otherwise, use soap and water.
Steering wheel	At least daily and if contaminated.	Alcohol wipes.
All other internal surfaces	Weekly	Alcohol wipes.
Bodywork, tail lift, lights and wheels	At least weekly or more often if driving conditions deem necessary.	Wash with soapy water and vehicle cleaner.
Glass and mirrors	At least weekly or more often if driving conditions deem necessary.	Clean with glass cleaner and cloth.

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