

Infection Prevention and Control Training for Environmental

Frain-the-Trainer Workshop for Skilled Nursing Facility Scales (EVS) Start

LA County SNF Symposium 9/22/2025

Implicit Bias

- Describes how our unconscious attitudes or judgements can influence our thoughts, decisions, or actions
- Includes involuntary, unintentional perceptions made without awareness
- Occurs as our brains sort information and perceive data to understand our world
- Affects our decisions, contributing to societal disparities

Self awareness about Implicit bias can promote healthcare diversity and equality. Learn more about your own implicit bias at Project Implicit (implicit.harvard.edu/implicit/)



Objectives

- Describe the role of environmental services (EVS) staff and managers in infection prevention and control (IPC) and keeping residents safe
- Demonstrate accessing toolkit curricula through the Project Firstline EVS Training Toolkit and Implementation Guide
- Demonstrate how to use toolkit materials to train your staff
- Demonstrate how to implement hands-on activities to enhance EVS staff learning

EVS Staff are part of the IPC Team!





INFECTION PREVENTION TEAM



HEALTHCARE

PERSONNEL











EVS Staff are Not Just Cleaning - EVS Staff Protect Residents!

- Previous and current outbreaks of multidrug-resistant organisms (MDROs) have been linked to poor adherence to environmental cleaning and disinfection
- MDRO outbreaks can spread quickly within and between resident-sharing networks

Meaning...

- Environmental Services IPC education and practice protects residents and saves lives
 - EVS Managers and Staff Save Lives!



EVS Curriculum Created in Partnership with EVS Staff and EVS Managers

- We're here to support you!
 - EVS IPC curriculum created specifically for EVS managers to train EVS staff
- EVS staff-specific training that is retainable and accessible
- Tools for educators to provide simple, in-person, hands-on training
- Focus on EVS tasks, not just general IPC
- Adaptable to different learning styles
- Opportunities for additional training and support



A Note About Today's Workshop: Mini-Modules to Demo Toolkit

- We will highlight select slides to review key content
 - The actual slide sets are larger with more information
- We will share sample curriculum files
 - Each module includes complete curriculum slide set, pre/post training questions, an instructor checklist, and suggested hands-on activities
- Note: All content is available online in both English and Spanish





EVS Staff Training Toolkit

- For EVS Managers, facility educators
- Includes sample training schedules

Infection Prevention and Control
Training for Environmental Services
Staff in Skilled Nursing Facilities: A
Toolkit and Implementation Guide for
Skilled Nursing Facilities and Local
Public Health Departments
CDPH HAI Program Project Firstline





Project Firstline is a national collaborative led by the U.S. Centers for Disease Control and Prevention (CDC) to provide infection control training and education to frontline healthcare workers and public health personnel. The California Department of Public Health Healthcare-Associated Infections (HAI) Program is proud to partner with Project Firstline, as supported through Strengthening HAI/AR Program Capacity (SHARP) funding. CDC is an agency within the Department of Health and Human Services (HHS). The contents of this presentation do not necessarily represent the policies of CDC or HHS and should not be considered an endorsement by the Federal Government.

EVS Toolkit (Updated 2025) | 1



Question #1

As the facility educator, how do you ensure that your EVS staff adhere to IPC practices? Select all that apply.

- A. Provide education and training
- B. Conduct adherence monitoring (e.g., for hand hygiene, room cleaning & disinfection)
- C. Provide feedback to EVS personnel
- D. Engage EVS staff to be part of the solution
- E. All of the above
- F. Other, specify



Question #2

What are your barriers to implementing training for EVS staff in your facility?

- A. Not sure where to start
- B. Lack of leadership support for EVS training
- C. Not sure what training materials to use
- D. Time constraints or staff availability
- E. Other, specify



Module 1: Hand Hygiene

- Describe how hand hygiene helps stop the spread of germs
- Demonstrate proper hand hygiene practices
- Adopt proper hand hygiene practices during environmental cleaning and disinfection





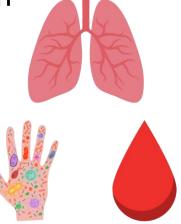
Reservoirs: Where Germs Live

Body Reservoirs

- Skin
- Gastrointestinal system ("the gut")

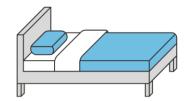
Respiratory system

Blood



Environmental Reservoirs

- Sinks/faucets
- Medical devices
- Bed rails
- Door handles
- Curtains







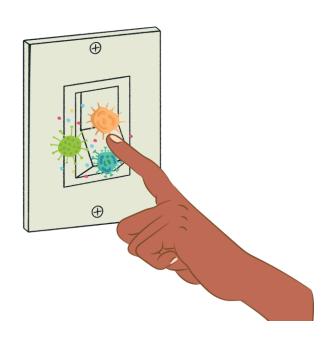


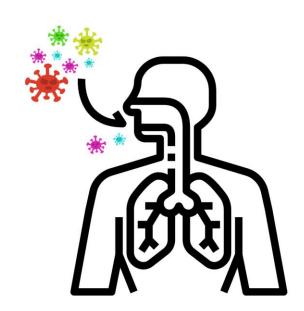
Pathways: How Germs Spread

Touch



Splashes or Sprays









How Germs Make People Sick

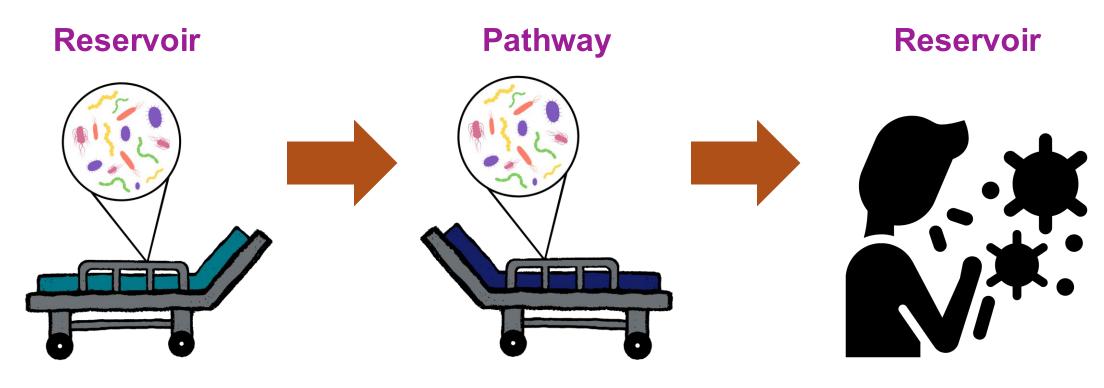
- New Person
 - Can be a resident, visitor, or healthcare personnel, etc.



- Germs need to get around the person's natural defenses (e.g., skin, immune system)
- Germs need to survive in the environment
- Implement infection prevention and control practices to help keep germs from spreading



How Germs May Spread: Example



Bedrails contaminated with germs

Staff's unwashed hands transmit germs to roommate

Roommate gets sick from germs



Every EVS Moment Matters!

When entering a resident room and before putting on gloves

Between dirty and clean tasks

EVS Hand Hygiene Moments



Between cleaning resident bedspaces

Upon leaving a resident room and after removing gloves

Before touching clean items on a cart



(cdn.who.int/media/docs/default-source/integrated-health-services-(ihs)/infection prevention-and-control/your-5-moments-for-hand-hygiene poster.pdf)

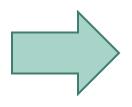




Cleans hands and dons (puts on) gloves









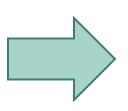
Cleans hands and dons (puts on) gloves

Cleans bedspace 1





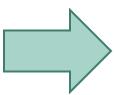


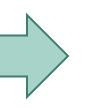


Cleans bedspace 1









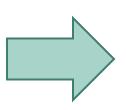
Doffs (removes) gloves and dons new gloves





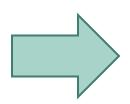






Cleans bedspace 1







Doffs (removes) gloves and dons new gloves



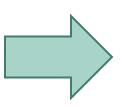
Cleans bedspace 2



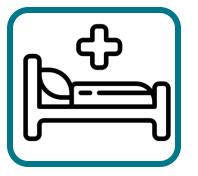


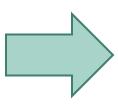






Cleans bedspace 1



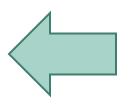




Doffs (removes) gloves and dons new gloves



Doffs gloves

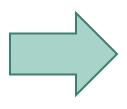


Cleans bedspace 2

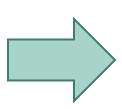












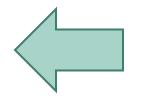


Cleans hands and dons (puts on) gloves

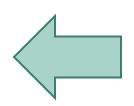
Cleans bedspace 1

Doffs (removes) gloves and dons new gloves











Cleans hands and exits room

Doffs gloves

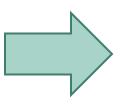
Cleans bedspace 2



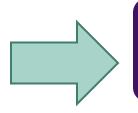


Hand Hygiene Scenario – What's Missing?











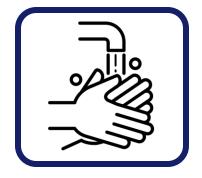


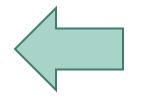


Cleans hands and dons (puts on) gloves

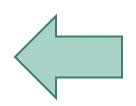


Doff gloves, hand hygiene, don new gloves











Cleans hands and exits room

Doffs gloves

Cleans bedspace 2





Activity Card Example: Pen Pals

Pen Pals

Purpose: Assess hand-to-hand transmission of germs. Staff will discover how easily germs

Time:

Varies:

reserve

5-10 minutes at the end of your meeting to review and discuss results

Materials and equipment list:

- Bioluminescent product (e.g., GloGerm, Germ Tracker)
- UV/black light
- Pens
- · Sign-in sheet
- Hand wipes or access to handwash station or sink

Instructions:

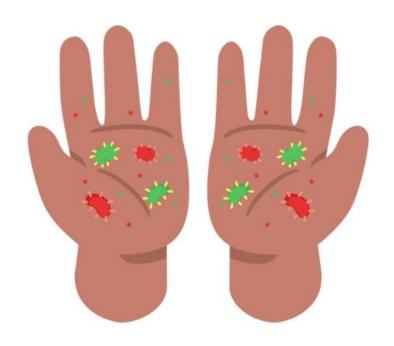
- 1. Before the session or staff meeting, dip or rub a small amount of bioluminescent product on community-used pens. Do not inform your staff of product placement.
- 2. Instruct staff to sign the sign-in sheet before the session.
- 3. At the end of the session, pause and reveal to your staff that 'germs are among us.' Explain that bioluminescent product was placed on the sign-in pens to demonstrate how easily germs can spread.
- 4. Hold the UV/black light over staff so they can see where the 'germs' went. Did the germs spread beyond your hands? Often, staff will see the bioluminescent product on their face, clothing, or belongings.
- 5. Reiterate how hand hygiene is essential to stopping the spread of germs from personto-person. Suggested script: This time, we're lucky it's just bioluminescent product on our hands (notebooks, tables, etc.), but imagine if this were a multidrug-resistant organism. Touching the pen is like touching the IV pole or bedside table in a resident room. You can pick up germs on your hands or gloves and spread them to yourself, other residents, and other surfaces.



Show your hands!









Activity Recap

- Assesses hand-to-hand transmission of germs
- Demonstrates the importance of hand hygiene
- Would your staff enjoy an activity like this?
- If you've done an activity like this with your staff, please share your experience!



Activity Card Example: Paint with ABHR

Paint with Germs

Purpose: Assess how effectively staff apply alcohol-based hand rub (ABHR). Review how hands can become contaminated when gloves are removed. This activity is similar to "Fluorescent Adventure" but also works well for larger groups.

Preparation

Treparatio

time:

5-10 minutes

Preparation and materials:

- Washable paint (any color)*
- Gloves (1 pair per participant)
- Timer

Activity time:

10-15 minutes

Garbage (for glove disposal)

Hand wipes or access to handwash station or sink

*Alternative: Use shaving cream for an easier clean up.

Instructions:

Part 1: Application of ABHR

- 1. Instruct staff to put on their gloves. Ensure proper fit.
- 2. Have each staff squeeze as much paint into the palm of one glove as you would ABHR (as recommended by your facility's ABHR manufacturer's guidelines). Essentially, pretend the paint *is* ABHR.



Pre-Test – What does your staff know before the training?

Module 2 Pre-Training Test: Understanding Disinfectants

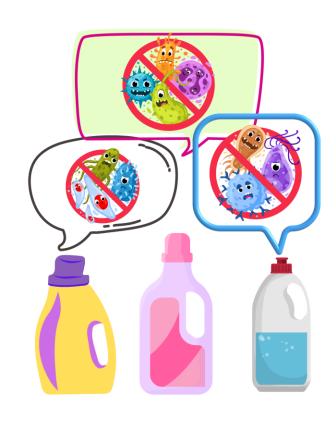
Name:

- What is a disinfectant?
 - a. Chemicals that kill most germs
 - b. Soap that removes germs
 - c. Gas that kills all germs
 - d. All of the above
- What information you should look for when reading a disinfectant label?
 - a. Type of germs the disinfectant can kill
 - b. Contact/wet time
 - c. Expiration date
 - d. All of the above



Module 2: Understanding Disinfectants

- Review the difference between cleaning and disinfection
- Examine types of disinfectants
- Demonstrate how to select a disinfectant
- Identify key components of reading a disinfectant label
- Discuss on the importance of proper disinfectant dilution





Cleaning Versus Disinfection

Cleaning

Scrubbing surfaces with water and detergent to physically removing dust, dirt, and body fluids

Disinfection

Killing germs on surfaces with chemicals

Disinfectants can't work if cleaning doesn't happen first. Always remember to clean before disinfecting.

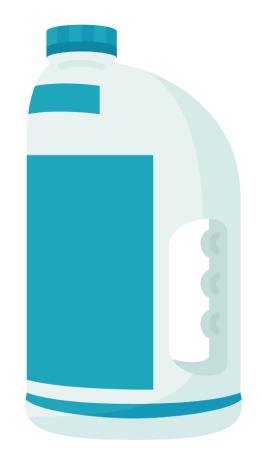






Disinfection and Disinfectants

- Chemicals that kill germs (e.g., quats, bleach, hydrogen peroxide)
- Used on hard, non-porous surfaces such as bedrails and bedside tables
- A one-step detergent-disinfectant product cleans and disinfects at the same time







Is the Disinfectant Appropriate for the Task?

- Always check if the disinfectant you are using is appropriate for the task. Ask your EVS manager if unsure.
- Environmental Protection Agency (EPA)-registered, and labeled as "hospital-grade disinfectant"
- Kill claims: Type of germs the disinfectant kills
- Contact/wet time: Time required for the disinfectant to work
- Safety: Know the toxicity, PPE requirements, and appropriate use of disinfectant







Contact/ Wet Time

- Contact/wet time is the amount of time required for a disinfectant to kill germs on a pre-cleaned surface
- A surface must remain wet long enough to achieve surface disinfection
 - You may have to re-apply to achieve the contact/wet time
- Follow label instructions for the appropriate contact/wet time





How to Read a Disinfectant Label

- Directions for Use
 - Identify (e.g., bacteria, viruses, fungi) the germs it kills
 - Follow directions for use (e.g., how to mix product, how to disinfect)
 - Use recommended amount for the correct duration (contact/wet time)

How to Read a Disinfectant Label | CDC (PDF)

(www.cdc.gov/hai/pdfs/HowToReadALabel-Infographic-508.pdf)





Pre- and Post-Training Answer Key

Module 2 Answer Key: Understanding Disinfectants

Answers are bolded and marked with an asterisk (*).

- 1. What is a disinfectant?
 - a. Chemicals that kill most germs*
 - b. Soap that removes germs
 - c. Gas that kills all germs
 - d. All of the above
- 2. What information should you look for when reading a disinfectant label?
 - a. Types of germs the disinfectant can kill
 - b. Contact/wet time
 - c. Expiration Date
 - d. All of the above*

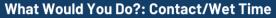


Module 2 Activity Card Worksheets









Read each case scenario and provide the best response.

Case Scenario 1

You have a new resident coming in. The nursing staff is putting pressure on EVS staff to clean the room faster and to have it ready soon. The contact/wet time for the product you use is 5 minutes, but nursing staff is asking you to 'speed it up'.

1. How do you proceed with cleaning and disinfecting? Select all that apply

A. Let it dry quickly

B. Wait the 5 minutes and allow it to dry

C. Wipe it off so it dries faster

D. Ignore the nursing staff

E. Other (Share your response)

2. How would you respond to the situation? What could you do if you're being pressured to clean a room faster than you are able to?

A. Contact EVS supervisor, let them know what's going on

B. Inform the nursing staff of the products contact/wet time to make the room/surface safe for the

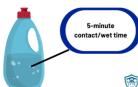
C. Ask EVS supervisor for assistance (maybe they can get extra EVS staff to help)

D. Open lines of communication between nursing staff and EVS to ensure each other's deadlines and

E. Involve facility's Infection Preventionist and let them know this is an (ongoing) situation

F. All of the above













Activity Card Example - Picture This

Picture This: What to look for in an Environmental Services (EVS) closet

Can you find the six items in the closet that can be improved?



1. —	4.	
2.	5	
3.	6.	—)

Picture This: What to Look for in an EVS Closet

Purpose: Ensure staff know what to look for in an EVS closet – both what should and should not be stored in an EVS closet. Staff will identify the six aspects in the EVS closet that could be improved and provide rationale.

Preparation time:

10-20 minutes

Activity time:

10-15 minutes

Preparation and materials:

- Gather "Picture This: What to Look for in an EVS Closet" worksheet (See page 10 or the corresponding slide). Note: If using the worksheet, there is a corresponding answer key on page 10.
- Distribute copies to participants or use the image found in the slideset to project on a screen.

OR

 Obtain images of EVS closets. You may stage and take a picture of a facility EVS closet with unorganized pieces of equipment.

OR

For more hands-on activity and if timing permits, select and prepare a facility EVS closet to demonstrate both correct and incorrect closet set up. Note this may take an additional 10 minutes to set up.

Instructions:

- 1. Provide staff with the worksheet/image or take them to the EVS closet.
- 2. Have staff take turns finding aspects of the closet that could be improved.
- Ask staff:
 - What's wrong with or missing from this closet?
 - Why is this wrong?
 - · How would you correct this?
- If staff answer correctly or incorrectly, engage in discussion around rationale and refer to training module as needed.

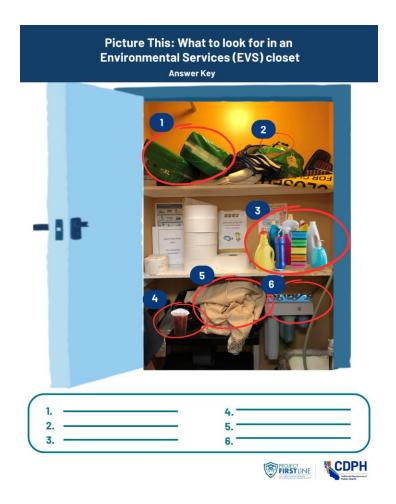


Question

 What do you often see in the EVS closet that shouldn't be there?

 How do you correct for incorrect practices?

Picture This: Answer Key



Answer Key

#	Item	Rationale	
1	Excess Cleaning Items	Keep closet organized to prevent injuries, spills, or accidental mixing.	
2	Insects & Bugs	EVS closet should be clean and organized. Insects and bugs can lead to contamination of EVS products and equipment.	
3	Unlabeled Cleaning and Disinfecting Solutions	Solutions should be labeled with key dates (manufacturer's expiration date, open date, mix date). Minimizing the number and types of cleaners will reduce the chance of unintentional mixing and staff confusion about product use.	
4	Food & Drink	Personal belongings can become contaminated with germs.	
5	Dirty/Soiled Curtain	Dirty or soiled curtain not placed in proper area can lead to cross contamination. Place soiled curtain in dirty container per facility policy.	
6	Spills & Leaks	Ensure proper disinfectant storage to prevent dangerous spills or mixing.	







Activity Card Example: What would you do? Contact/Wet Time

What Would You Do?: Contact/Wet Time

Read each case scenario and provide the best response.

Case Scenario

You have a new resident coming in. The nursing staff is putting pressure on EVS staff to clean the room faster and to have it ready soon. The contact/wet time for the product you use is 5 minutes, but nursing staff is asking you to 'speed it up'.

1. How do you proceed with cleaning and disinfecting? Select all that apply.

A. Let it dry quickly

B. Wait the 5 minutes and allow it to dry

C. Wipe it off so it dries faster

D. Ignore the nursing staff

E. Other (Share your response)

2. How would you respond to the situation? What could you do if you're being pressured to clean a room faster than you are able to?

A. Contact EVS supervisor, let them know what's going on

B. Inform the nursing staff of the products contact/wet time to make the room/surface safe for the

next resident

C. Ask EVS supervisor for assistance (maybe they can get extra EVS staff to help)

D. Open lines of communication between nursing staff and EVS to ensure each other's deadlines and

mitations

 $E.\ Involve\ facility's\ Infection\ Prevention ist\ and\ let\ them\ know\ this\ is\ an\ (ongoing)\ situation$

F. All of the above











What Would You Do?: Contact/Wet Time

Purpose: Ensure staff have a good understanding of contact/wet time.

Preparation and materials:

Staff will answer a series of questions on contact/wet time, individually or in teams. Staff should know how to identify contact/wet time.

Preparation time:

Gat

Gather

3-5 minutes

 Copies of "What Would You Do?: Contact/Wet Time" worksheet (See page 8 or the corresponding slide)

time: 10-15

minutes

Activity

Instructions:

- Distribute the What Would You Do?: Contact/Wet Time worksheet (or display slides on screen).
- 2. You may decide to divide your group into partners or smaller teams for this activity.
- Review each case scenario as a group. Staff can discuss each case scenario in smaller teams for 1-2 minutes; come back to the larger group and have one or more groups share their responses. In a larger group, you may ask for volunteers to respond to each question.
- For each case scenario, review correct answers (highlighted in yellow) with the group and provide any additional comment or rationale per facility policy and procedures.



Activity Card Case Scenario #1

You have a new resident coming in. The nursing staff is putting pressure on EVS staff to clean the room faster and to have it ready soon. The contact/wet time for the product you use is 5 minutes, but nursing staff is asking you to 'speed it up'.

How do you proceed with cleaning and disinfecting? Select all that apply.

- A. Let it dry quickly
- B. Wait the 5 minutes and allow it to dry
- C. Wipe it off so it dries faster
- D. Ignore the nursing staff
- E. Other (Share your response)





Activity Card Case Scenario

Answer

How do you proceed with cleaning and disinfecting? Select all that apply. Answer is marked with an asterisk.

- A. Let it dry quickly
- B. Wait the 5 minutes and allow it to dry*

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- C. Wipe it off so it dries faster
- D. Ignore the nursing staff
- E. Other (Share your response)*
- *E may be a correct response depending on facility policy and procedure.

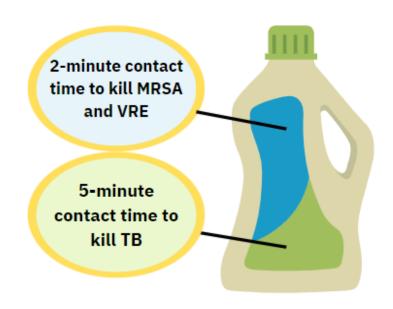
Answer: B, E

Activity Card Case Scenario #3

You are using a disinfectant product that has different contact/wet times. This disinfectant product has, a 2-minute contact time to kill MRSA & VRE and a 5-minute contact time to kill TB.

Which contact/wet time would you use?

- A. The shortest time
- B. The longest time
- C. The average time
- D. The expiry date
- E. At midnight





Activity Card Case Scenario #3

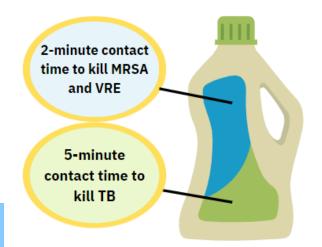
Answer

You are using a disinfectant product that has different contact/wet times. This disinfectant product has, a 2-minute contact time to kill MRSA & VRE and a 5-minute contact time to kill TB.

Which contact/wet time would you use? Answer is marked with an asterisk.

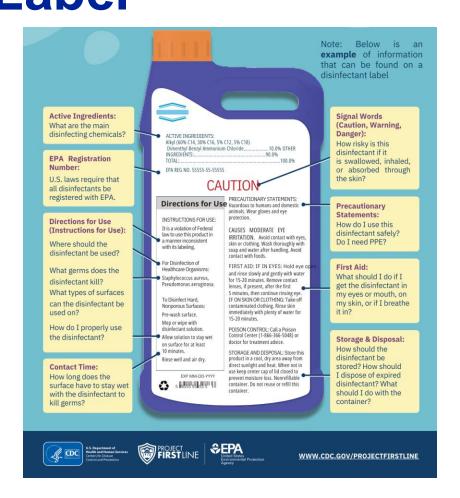
- A. The shortest time
- B. The longest time*
- C. The average time
- D. The expiry date
- E. At midnight

Answer: B





Activity Card Example: Read a Disinfectant Label



Read a Disinfectant Label

Purpose: Ensure staff know how to read cleaner/disinfectant labels.

Staff will practice identifying where to find key information on a cleaner/disinfectant label (e.g., contact/wet time, required personal protective equipment (PPE), expiry dates).

Preparation

time: 10-15 minutes

Activity time: 10-15

minutes

Preparation and materials:

There are variations of this activity below. Select the appropriate activities for your EVS staff. Consider EVS staff knowledge of the product (e.g., is it a new product?), or familiarity with MDS. Are there special notes or product features you need your staff to remember?

Gather:

- Copies of CDC's "How to Read a Disinfectant Label" infographic (See page 4 or the corresponding slide)
- Copies of "What's on the Label" worksheet (See page 5 below or the corresponding slide)
- Copies of facility disinfectant labels (You might ask the manufacturer to provide sample labels, go to manufacturer's website to obtain sample labels, or select unopened product bottles.)

Instructions:



Module 3: Setting Up a Cart

- List high-touch surfaces at your facility
- Identify the cleaning supplies and equipment used at your facility
- Discuss how to set up a cleaning cart
- Demonstrate how to clean and disinfect equipment after use





Consider Safety, Efficiency, and Convenience When Setting Up Your Cart

- Be familiar with products and tools used
- Identify supply needs
- Save time; be efficient
- Support safety through appropriate use of products



 Note: Clean your hands and put on clean gloves before touch clean items on your cart.



Gathering Supplies and Cart Setup: Top of Cart

- Alcohol-based hand rub (ABHR) and soap refills
- Required PPE
- Resident room supplies
- When setting up your cart, consider safety, convenience, and efficiency





Gathering Supplies and Cart Setup: Inside Cart

- Clean and dry microfiber cleaning cloths
- Cleaning solutions and disinfectants
- Bags or bins for soiled materials
- Do not mix chemicals (this can create toxic gases)
- Do not use spray bottles for cleaning
- Do not keep items on cart you won't use or need
- No food or drinks on cart!
- Lock your cart or store in a secure place





Gathering Supplies and Cart Setup: Front Deck

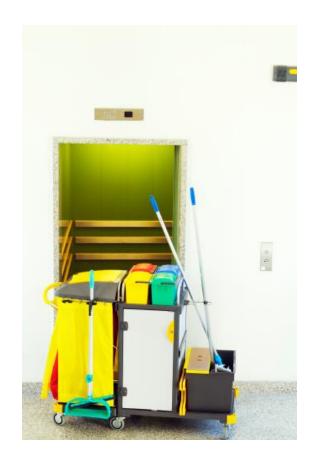
- Mops with removeable mopheads/floor mops
- Broom/dry mop
- Duster
- Buckets
- Wet floor caution signs
- Soiled linen bag
- Trash bag





Cleaning of Reusable Equipment and Cart Storage at the End of the Shift

- Remove dirty mop heads and soiled microfiber cleaning cloths
- Ensure cleaning follows manufacturer's instructions
- Follow your facility's policy for cleaning EVS cart and closet





Recommendations for Cleaning Carts

- Stock enough resident room supplies
- Have access to ABHR
- Stock enough microfiber cleaning cloths so they can be changed when soiled
- Use buckets or bins for disinfectant solution
- Use microfiber mops
- Separate clean and soiled items

- Clean and disinfect reusable equipment
- Clean high-touch surfaces at least once per shift
- Keep a reference list of high-touch surfaces on your cart
- Know the required contact/wet times for all disinfectants used
- Have a lockable compartment
- Store in a designated EVS area



Practices to Avoid with Cleaning Carts

- Never mix different chemicals
- Do not refill containers
- Do not mix clean and soiled materials
- Do not use the same cloth for two different resident bedspaces

- Do not use a dirty cloth on a clean area
- Never store personal items, food, or beverages on cart or in EVS closet
- Do not use spray bottles
- Never leave cart unattended



Case Scenario

You observe an EVS staff cleaning a multibed occupancy room. You observe the staff move from one resident bedspace to the cart to get more cleaning supplies without removing their gloves and performing hand hygiene.

What's wrong with this situation?

What are your next steps as the manager/educator?





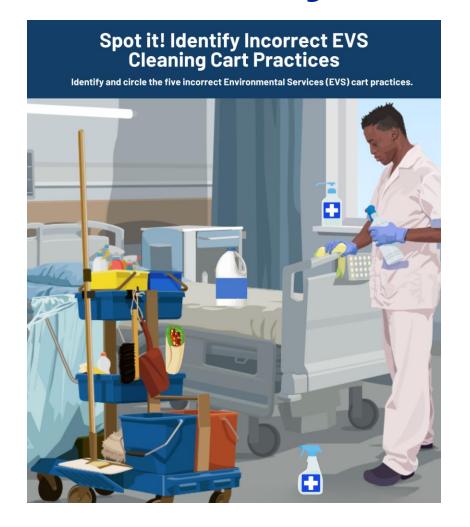
Case Scenario Answer

What are your next steps as the manager/educator?

- Stop the staff
- Just in time training
- Conduct an in-service using materials from Module 1 of the EVS Toolkit (Hand Hygiene)
- Provide feedback to improve adherence
- Evaluate if the staff has access to the tools needed to perform IPC practices (e.g., ABHR, gloves)
- Other?



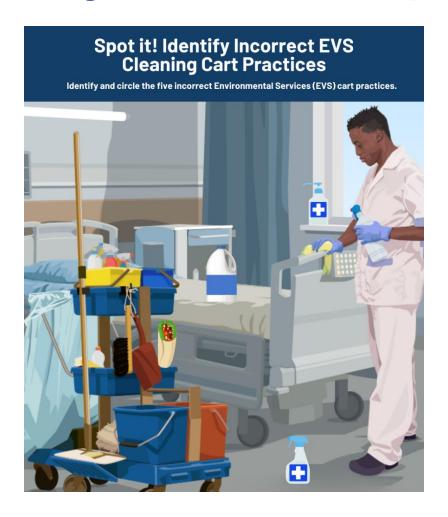
Module 3 Activity Card Worksheets







Activity Card Example: Spot it!



Spot it! Identify Incorrect Environmental Services (EVS) Cart Practices

Purpose: Ensure staff understand correct and incorrect EVS cart practices. Staff will identify five EVS cart practices that could be improved and provide rationale.

Preparation time:

10-20 minutes

Activity time: 10-15 minutes

Preparation and materials:

- Gather copies of "Spot it! Identify Incorrect EVS Cart Practices" worksheet (See page 3 below or the corresponding slide). Note: If using the worksheet, there is a corresponding answer key on page 4.
- Pens/pencils

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• For more hands-on activity and if timing permits, select and prepare a facility EVS cart and stage incorrect EVS cart practices.

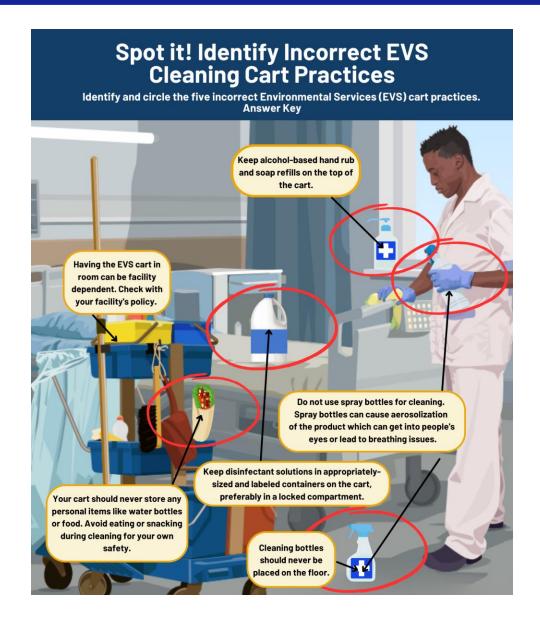
Instructions:

- 1. Provide staff with the "Spot it! Identify Incorrect EVS Cart Practices" worksheet.
- 2. You may decide to divide your group into partners or smaller teams for this activity.
- 3. Ask staff to identify and circle five incorrect practices.
- Review each incorrect practice as a group. Staff can discuss each practice in smaller teams for 1-2 minutes.
- 5. Come back to the larger group and have one or more groups share their responses. In a larger group, you may ask for volunteers to provide the rationale for reach practice identified.
- 6. For each incorrect practice, review correct answers with the group and provide any additional comment or discussion.

For hands-on activity:



Spot it! Answer Key





Activity Card Example: Pin it! What's on the EVS cart

Pin it! Place the Supplies on the Cleaning Cart Pin the equipment in the Environmental Services (EVS) cart. Draw arrows connecting the equipment to where it should be placed on the cart. Place an "X" on the image if it does not belong! **Disinfection Wipes Microfiber Cloths** Alcohol-Based Hand Rub (ABHR) Spray Bottle Drink Mops & Wet Floor Sign

Pin it! Place the Supplies on the Environmental Services (EVS) **Cleaning Cart**

Purpose: Ensure staff know where to properly place items in an EVS cleaning cart. Staff will identify seven items as correct or incorrect items to place in an EVS cart and identify correct placement on the cart.

time: 5-10 minutes

Activity time: 10-15 minutes

Preparation | Preparation and materials:

- Gather copies of "Pin it! Place the Supplies on the EVS Cleaning Cart" worksheet (see page 6 or the corresponding slide embedded in the Module 3 slides). Note: if using the worksheet, there is a corresponding answer key on pages 7 and 8.
- Pens/pencils

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• For more hands-on activities and if timing permits, provide staff with an empty facility cleaning cart and proper and improper facility cleaning cart items.

Instructions:

- 1. Provide staff with "Pin it! Place the Supplies on the EVS Cleaning Cart" worksheet.
- 2. Review items on the worksheet and have staff identify where they would place each item on the cleaning cart.
- 3. You may decide to have staff work individually or divide your group into partners or smaller teams for this activity.
- 4. Give staff 10 minutes to review/fill out the worksheet or engage in small group discussion.
- 5. Have staff draw an arrow one at a time to "place" items in the appropriate cart area and provide rationale (see answer key for talking points) for why they would



Bleach

Pin it! Answer Key

Answer Key

#	Item	Answer	Rationale
1	Microfiber Cloths	Inside or Top of Bin	Dry microfiber cloths kept inside cart to keep clean and dry. Microfiber cloths in use should be placed in bin on top of cart saturated in disinfectant.
2	Disinfectant Wipes	Тор	Wipes may be on top or inside cart depending on facility policy. Convenient access for efficient restocking of resident room supplies.
3	Alcohol-Based Hand Rub (ABHR)	Тор	Accessible ABHR at the top of cart makes performing hand hygiene easier.
4	Food & Drink	Do Not Store	Never store any personal items like water bottles or food. Avoid eating or snacking during cleaning for your own safety.
5	Mops & Wet Floor Caution Sign	Front Deck or Outside	Mops with removable mopheads or floor mops should be switched out between each room or when grossly soiled. Buckets, wet floor caution signs, and bags for soiled linen and trash stored outside for accessibility and efficiency of use.
6	Cleaning & Disinfecting Solutions	Do Not Store	Bleach should not be stored in the cart. Bleach should be premixed & in squirt bottle or in canister.
7	Cleaning & Disinfecting Spray Bottle	Do Not Store	Do not use spray bottles for cleaning. Spray bottles can cause aerosolization of the product which can get into people's eyes or lead to breathing issues.





Pin it! Place the Supplies on the Cleaning Cart

Pin the equipment in the Environmental Services (EVS) cart.

Draw arrows connecting the equipment to where it should be placed on the cart. Place an "X" on the image if it does not belong!

Answer Key









Instructor Checklist

Instructor Guide

Module 3: Setting Up an EVS Cart

Instructions for facility educators: Use this instructor checklist to provide hands-on training and reinforce learned concepts in the slide presentation. Select one or more topics to review with your EVS staff and use the check boxes to indicate if topic was reviewed with staff. Elements of this guide may be adapted for use in a huddle, in-service, just-in-time training, or formal new EVS Managers or Infection Preventionists on your team.

All training topic discussions are meant to be opportunities for collaboration where everyone is able to learn. As the instructor, it is essential to create a safe and supportive teaching environment. Use this time to improve processes and offer support to staff so that they will feel comfortable coming to leadership when needed. There are prompts throughout this resource to help you engage staff in discussion. Happy training!

Contents

Hand Hygiene and Personal Protective Equipment	. 1
Cleaning Supplies on the EVS Cart	1
List of High-Touch Surfaces	. 3
Cleaning Reusable Equipment After Use	3
Cleaning Reusable Equipment at the End of the Shift	
Cart Storage	4



Instructor Checklists Continued

Cart Storage Rationale **Demonstration Prompts** Walk through the facility with your staff when applicable Follow your facility's policy for cleaning Ensure clean cart is stored in the the EVS cart after use. designated EVS storage area after use. Ask staff: How and where do you store Storing your cart in a locked area or your cart after use? designated EVS storage area after use limits access to cart and supplies.

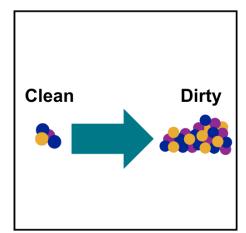


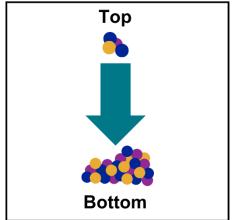
Module 4: Cleaning and Disinfection Process

- Describe the role of cleaning
- Describe the purpose of disinfection
- Discuss daily and terminal cleaning processes
- Use an environmental cleaning checklist



Clean from clean to dirty and top to bottom





Establish a pattern to prevent germ spread!



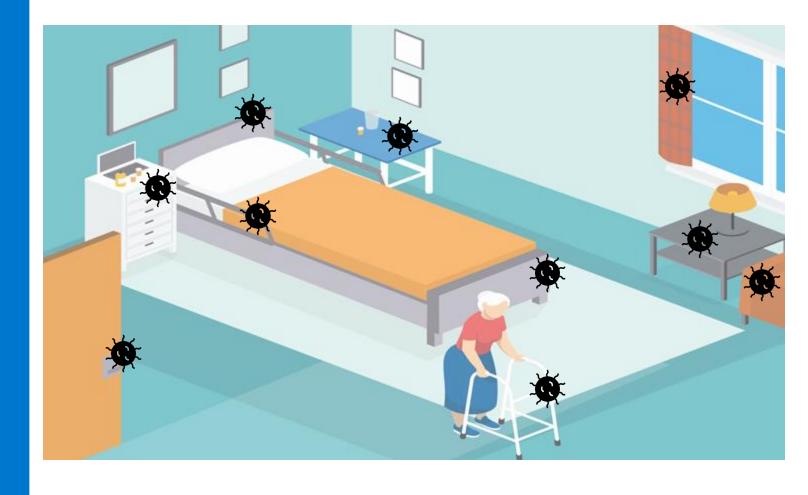
Where Can You Find the **Highest** Concentration of Germs in a Resident Room?





Where Can You Find the Highest Concentration of Germs in a Resident Room?

Answer



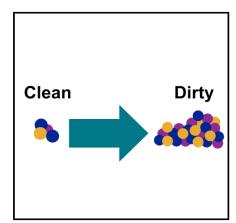


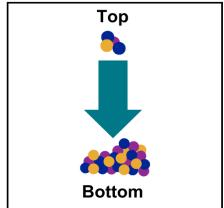
Standard Cleaning Process

- Clean from clean to dirty
- Clean from top to bottom
- Establish a pattern
- Prevent contamination
- Examples:
 - Begin with common surfaces (e.g., doorknobs) before moving to the resident area
 - Restrooms should be cleaned last
 - Clean bed rails before bed legs

Use a Standard Cleaning Process

Clean from clean to dirty and top to bottom

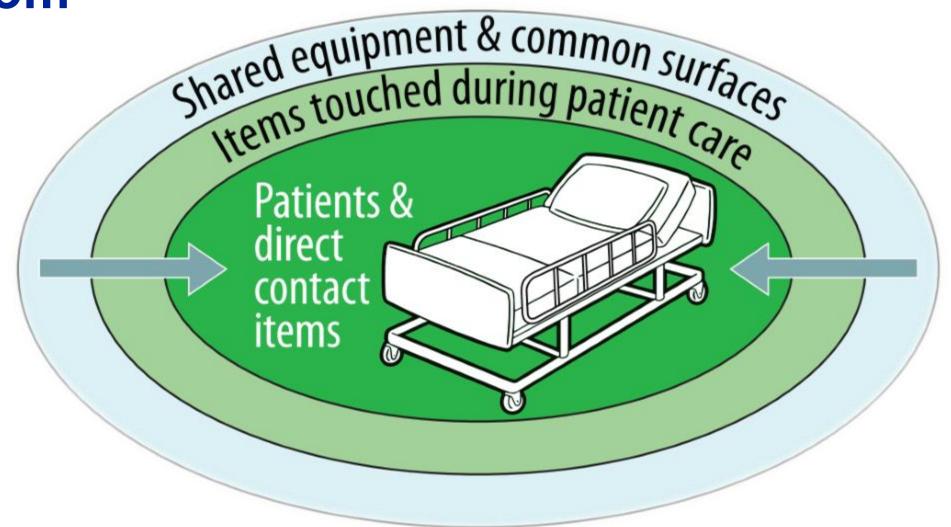




Establish a pattern to prevent germ spread!

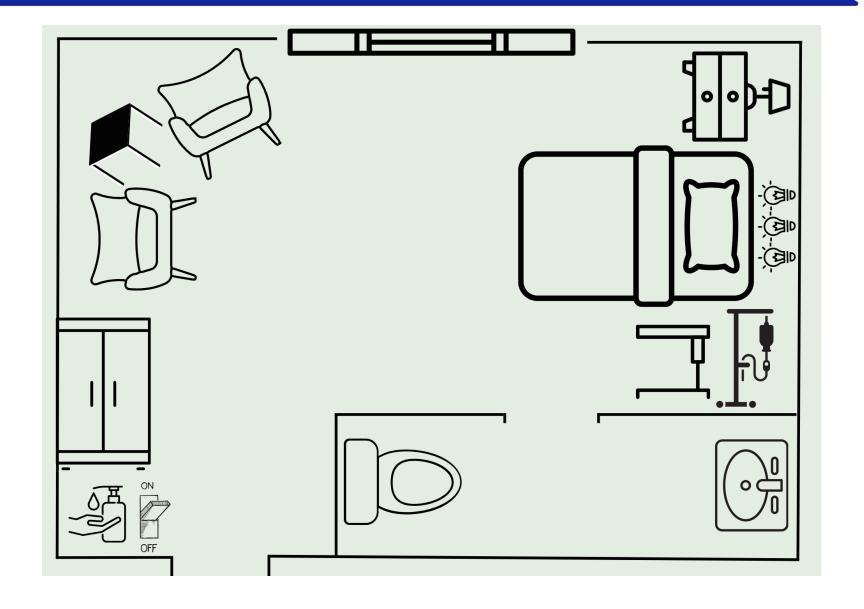


Standard Cleaning Process in a Resident Room



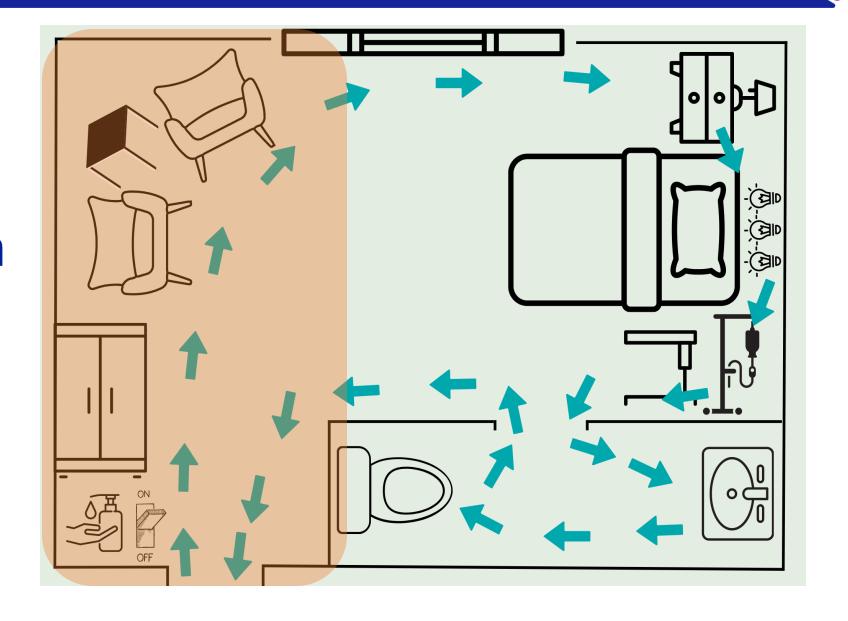


Cleaning a Single-Bed Room



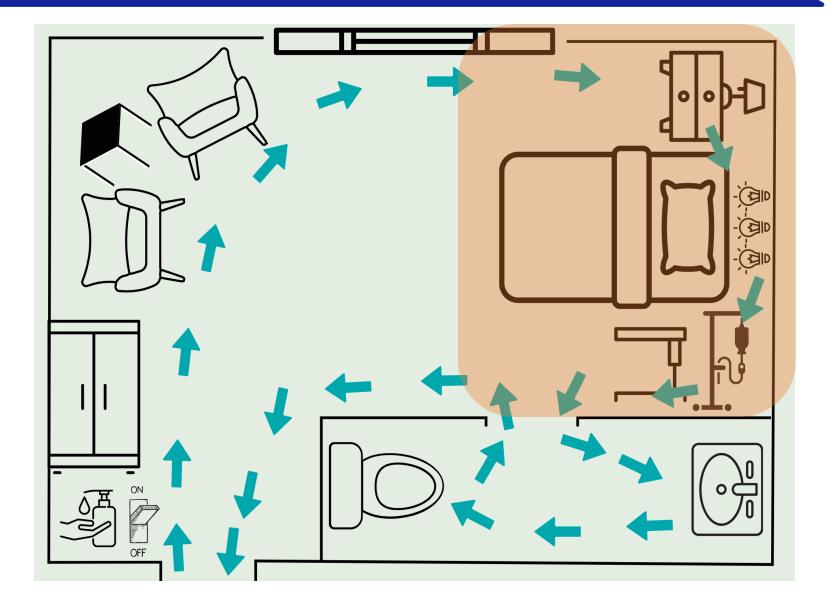


Cleaning a Single-Bed Room: Entry Way/Common Area



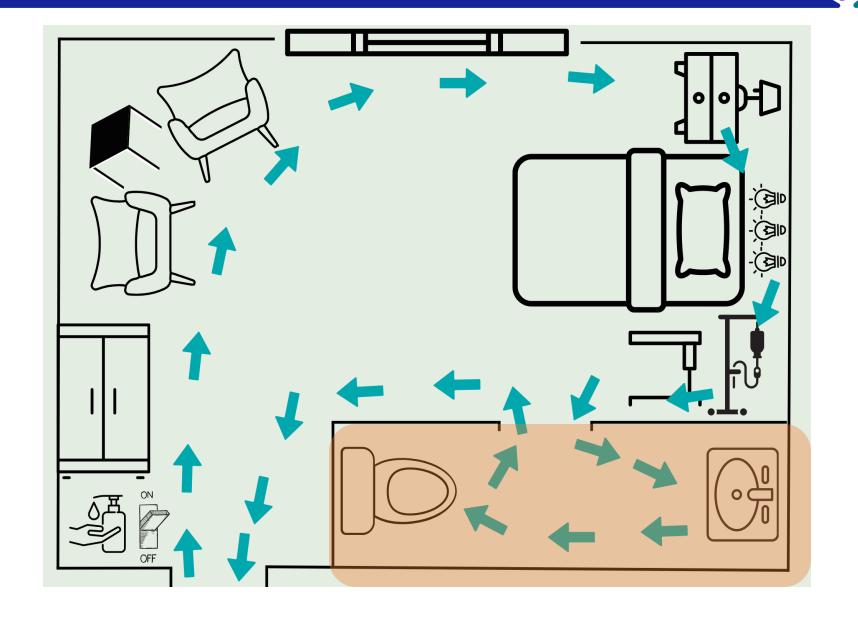


Cleaning a Single-Bed Room: Resident Bed



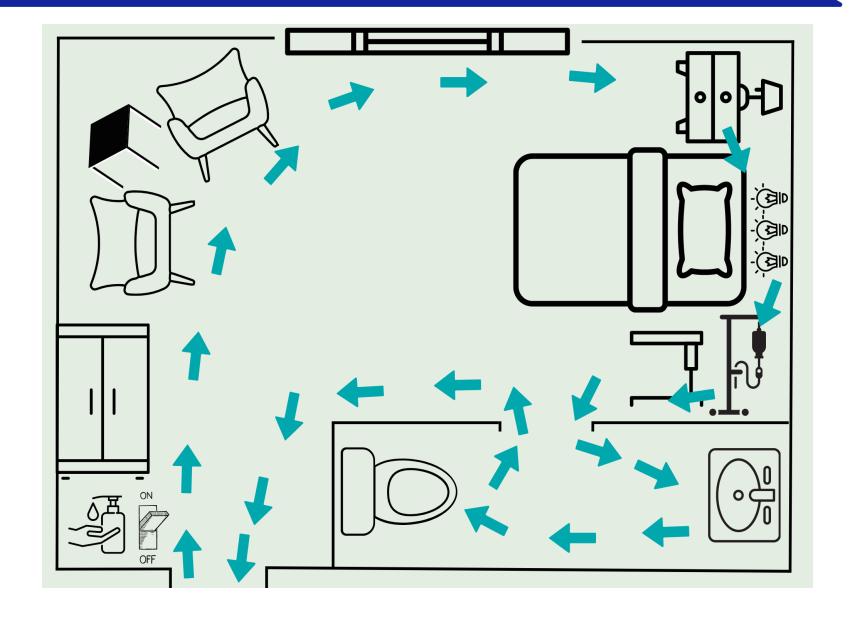


Cleaning a Single-Bed Room: Bathroom



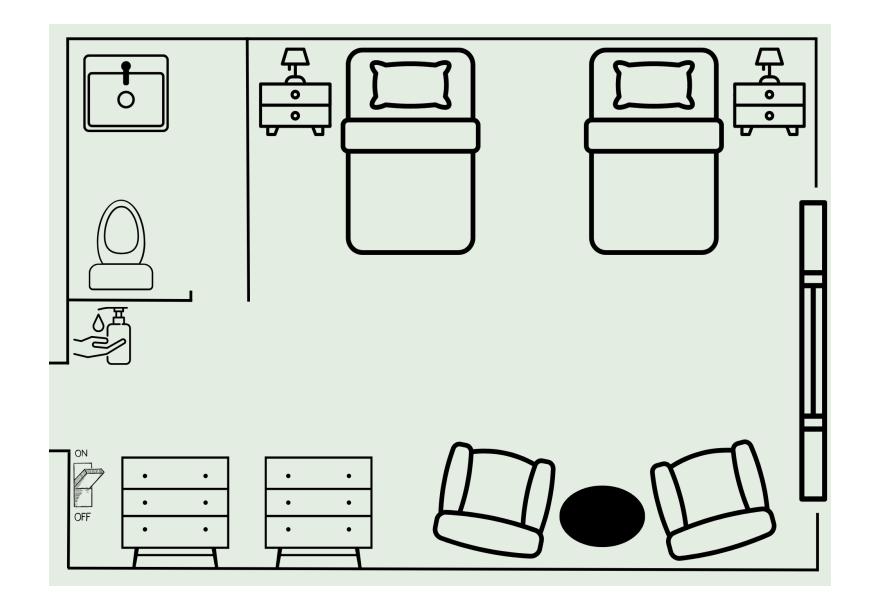


Cleaning a Single-Bed Room: Cleaning Process





Cleaning a Two-Bed Room





Use an Environmental Cleaning Checklist

- Use an environmental cleaning checklist to ensure all surfaces are cleaned
- Review high-touch room surfaces and denote if they are cleaned, not cleaned, or not present in the room
- Standardize daily and terminal room cleaning processes

CDC Environmental Checklist for Monitoring Terminal Cleaning | CDC (PDF)

(www.cdc.gov/hai/pdfs/toolkits/environmental-cleaning-checklist-10-6-2010.pdf)

Date:			
Unit:			
Room Number:			
Initials of ES staff (optional): ²			
initials of Lis start (optional):			
Evaluate the following priority site	s for each patient	room:	
High-touch Room Surfaces ³	Cleaned	Not Cleaned	Not Present in Roon
Bed rails / controls			
Tray table			
IV pole (grab area)			
Call box / button			
Telephone			
Bedside table handle			
Chair			
Room sink			
Room light switch			1
Room inner door knob			-
Bathroom inner door knob / plate			
Bathroom light switch			
Bathroom handrails by toilet Bathroom sink			
Toilet seat			
Toilet seat Toilet flush handle			
Toilet bedpan cleaner			
Tonet bedpan cleaner			
Evaluate the following additional s	ites if these equin	ment are present	in the room:
High-touch Room Surfaces ³	Cleaned	Not Cleaned	Not Present in Room
IV pump control			
Multi-module monitor controls			
Multi-module monitor touch screen			
Multi-module monitor cables			
Ventilator control panel			
	: Fluorescent gel ATP system	Agar :	slide cultures
¹ Selection of detergents and disinfectant ² Hospitals may choose to include identif purposes. ³ Sites most frequently contaminated and	iers of individual en	vironmental service	es staff for feedback





Module 4 Activities

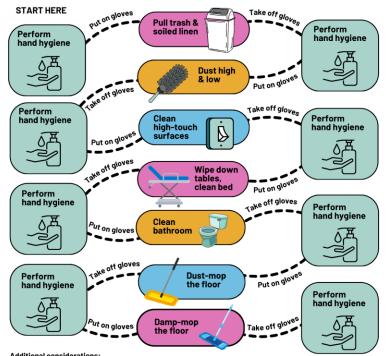
What Would You Do?: Understanding Proper Infection Prevention and Control Practices

Mark if you would ("Yes") or would not ("No") perform each of the cleaning and disinfecting practices prompts. Explain why you would or would not perform each practice.

#	Question	Yes/No	Rationale
1	Would you clean from clean areas to dirty?		
2	Would you clean from high surfaces to low and top to bottom?		
3	Would you change the curtains in a resident's room daily?		
4	Would you store soiled equipment on the inside of the EVS cart?		

How can you help stop the spread of germs?

We strongly encourage each facility to develop a standardized approach to cleaning and disinfection of resident rooms which incorporates key infection prevention and control practices. The below is an example of how to use a standardized approach.

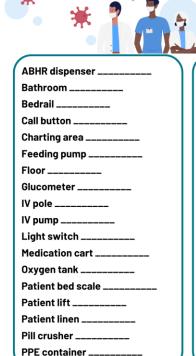


Additional considerations:

- . Clean your hands and change into new gloves after dirty tasks and before doing clean tasks. · Cleaning high-touch surfaces can be done before or after dusting. This helps prevent germs from spreading.
- Making the bed may be done by other staff.
- In multi-occupancy rooms, each bed space is cleaned and disinfected before the bathroom. Perform hand

High-Touch Surfaces: Identifying Who Cleans What

Circle the high-touch surfaces in your facility. Who cleans each surface?



	7
Privacy curtains	
Room door handle	
Room/toilet sink	
Side table	
Tray table	
TV remote	
Ventilator	
Vitals machine	
Wound care cart	
List other high-touch surfaces	•
and responsible staff:	
	_



Activity Card Example: What Would You Do?

What Would You Do?: Understanding Proper Infection Prevention and Control Practices

Mark if you would ("Yes") or would not ("No") perform each of the cleaning and disinfecting practices prompts. Explain why you would or would not perform each practice.

#	Question	Yes/No	Rationale
1	Would you clean from clean areas to dirty?		
2	Would you clean from high surfaces to low and top to bottom?		
3	Would you change the curtains in a resident's room daily?		
4	Would you store soiled equipment on the inside of the EVS cart?		

What Would You Do?: Understanding Proper Infection Prevention and Control (IPC) Practices

Purpose: Ensure staff understand proper cleaning and disinfecting IPC practices. Staff will state whether they would or would not engage in IPC practice statements and provide rationale to demonstrate training understanding

Preparation time:

10 minutes

Preparation and materials:

Gather copies of "What Would you Do?" worksheet (See page 7 below or use the corresponding slideset embedded in the Module 4 slides). Note: If using the worksheet, there is a corresponding answer key on page 8.

15-20 minutes Instructions:

Activity time:

- 1. Distribute copies of worksheet or present slide set to staff.
- 2. You may decide to divide your staff into partners or smaller teams for this activity.
- 3. Ask staff if they *would* or *would not* perform cleaning and disinfecting prompts based on IPC practices learned in the training.
- 4. Have individual staff or groups compete to see who can raise their hand first to answer the question and provide rationale to their answer.
- 5. Engage staff in discussion around rationale.



What Would You Do?

Would you clean from clean areas to dirty?

Question #1





Question #1

Answer

Would you clean from clean areas to dirty?

- Yes!
- We should always move from clean areas to dirty areas. For example, begin with common surfaces before moving to the resident area, and restrooms should always be cleaned last.



Would you clean from high surfaces to low and top to bottom?

Question #2





Question #2

Answer

Would you clean from high surfaces to low and top to bottom?

- Yes!
- Clean from high to low surfaces, top to bottom. For example, clean bed rails before bed legs, or high-touch surfaces before floors.



Would you change the curtains in a resident's room daily?

Question #3





Question #3

Answer

Would you change the curtains in a resident's room daily?

- No!
- Consider changing curtains when visibly soiled and per a set schedule. Refer to facility policy.



Activity Card Example- High-touch Surfaces: Identifying Who Cleans What

High-Touch Surfaces: Identifying Who Cleans What Circle the high-touch surfaces in your facility. Who cleans each surface? ABHR dispenser ____ Privacy curtains. Bathroom _____ Room door handle ___ Bedrail _____ Room/toilet sink __ Call button ____ Side table _____ Tray table _____ Charting area _____ Feeding pump ____ TV remote _____ Floor _____ Ventilator _____ Glucometer _____ Vitals machine ____ IV pole _____ Wound care cart IV pump _____ Light switch _____ List other high-touch surfaces Medication cart ____ and responsible staff: Oxygen tank _____ Patient bed scale ___ Patient lift _____ Patient linen _____ Pill crusher _____

PPE container _____

High-Touch Surfaces: Identifying Who Cleans What

Preparation and materials:

Purpose: Ensure staff are comfortable identifying high-touch surfaces and who is responsible for cleaning what items.

Preparation time:

5-10 minutes

- Gather copies of "High-Touch Surfaces: Identifying Who Cleans What" worksheet (See page 2 below or the corresponding slide). Note: If using the worksheet, there is a corresponding answer key on page 3.
- Activity time: 15-20 minutes

Pens/pencils

Instructions:

- 1. Provide staff with the "High-Touch Surfaces: Identifying Who Cleans What" worksheet.
- 2. You may decide to divide your group into partners or smaller teams for this activity.
- 3. Give staff 8-10 minutes to identify the high-touch surfaces in your facility and list the staff who are responsible for cleaning each item.
- 4. Review the responses as a group. Ensure staff are familiar with your facility's policy on who cleans what and how frequently each item should be cleaned. You can ask auestions like:
 - a. Who cleans the [specific high-touch surface]?
 - b. How frequently should you clean [specific high-touch surface]?
 - c. What should you do if you notice an item is not being cleaned as directed?

Note: Responses for who cleans what may include EVS, nursing, physical/occupational therapy, respiratory therapy, and other staff, depending on what high-touch surfaces you wish to focus on. You may also add additional high-touch surfaces beyond what is listed on the worksheet.



Adherence Tool: Who Cleans What?



Healthcare-Associated Infections Program

Environmental Cleaning and Disinfection – Who Cleans What?

Everyone is responsible for cleaning and disinfection of the healthcare environment. Keep an updated list of who cleans what in your policy. Customize the below template to correspond to your facility policy (e.g., add/delete roles in the top row, add/delete items in the left column). Mark the appropriate columns below with an "X" to designate responsibility, and denote frequency of cleaning (e.g., daily) or when to clean (e.g., before use). Revisit the list on a regular basis to ensure accuracy. Keep this list on cleaning carts, etc., for quick reference.

Date Last Verified:

Who is responsible for	Housekeeping	CNA	LVN	RN	RT	PT/OT	Other
cleaning/disinfection of:							
ABHR dispenser							
Bathroom							
Bedrail							
Blood pressure machine							
Call button							
Charting area							
Feeding pump							
Floor							
Floor, with large spill							
Glucometer							
In-room computer/keyboard							
IV pole							
IV pump							
Light switch							
Medication cart							
Oxygen tank							
Patient bed scale							
Patient lift							
Patient linen							
Pill crusher							
PPE container							
Privacy curtains							



Adherence Monitoring: GloGerm

CDPH	Healthcare-Associated Infecti Fluorescent Marker Assessm Time Period:	Facility Name: Facility ID: Assessment completed by: Date:		
and opportunitie		naintain or improve adherence to environmenta performed in any type of patient care location. L		
		le high touch surfaces/equipment to be cleaned. on the surfaces. Do not apply it to porous surface		Adherence by Task
Check fluorescenti	y marked high touch surfaces for each ro	om below. After the room has been cleaned, use and "No" if any amount of fluorescent marker appe	a black light to view marked areas. Circle	Yes Marked
Room #: Bed	#: Unit: Isolation Room	Time marked with fluorescent marker (hh:mm am/pm): Time to return (hh:mm am/pm):	
Room light switch Room inner door PPE Container: In-room cabinet: In-room compute Telephone:	knob/handle: Y N Room sink fauc Y N Chair: Y N Side table:		N Bathroom handrail: Y N Bathroom sink: Y N Bathroom faucet: Y N Toilet seat: Y N Toilet flush handle: Y N Toilet flush handle: Y N Toilet / bedpan cleaner: Y N	
Feeding pump: Y Pill crusher: Y In hallway (assess a	N (hallway or patient room)	☐ IV pole, in use: Y ○ N ○ ☐ Ventilato	r: Y N Vitals machine: Y N	
Medication cart:	Y N Wound care cart: Y N	Patient lift: Y N Patient bed scale: Y	N Portable x-ray machine: Y N	
Room #: Bed i	h: Y N Room sink: knob/handle: Y N Room sink fauc Y N Chair: Y N Side table:	et: Y N Tray table handle: Y Call button/TV Remote: Y N IV pole, not in use: Y Bathroom door knob/handle: Y	N Bathroom handrail: Y N Bathroom sink: Y N	
Feeding pump: Y Pill crusher: Y	N IV pump face: Y N N (hallway or patient room)	☐ IV pole, in use: Y ○ N ○ ☐ Ventilato	r: Y N Vitals machine: Y N	
In hallway (assess a Medication cart:	Y N Wound care cart: Y N	Patient lift: Y N Patient bed scale: Y	N Portable x-ray machine: Y N	
	# of Correct Practice Observed ("# Yes")	Total # Marked Areas	Adherence (Total "# Yes" ÷ "Total # Marke	d Areas" x 100)
EVS Clinical Staff	0	0		
Hallway	0	0		
TOTAL	0	0		





Addressing IPC Training Barriers

Call-back: Barriers to Providing IPC Training to EVS Staff

- Not sure where to start
- Lack of leadership support
- Not sure what training materials to use
- Time constraints or staff availability
- Other, specify/share



Not Sure Where to Start

- This workshop!
- Enlist other leaders this is a team effort!
- Start small (e.g., one module at a time)
- Know your audience (e.g., their current level of understanding, learning language preference)



Lack of Leadership Support for Training

- Identify leadership's barriers (e.g., financial)
- Give them an opportunity to be part of the training (e.g., invite them to be trainer, designate an IPC Champion)



Not Sure What Training Materials to Use

 Consider the trainings shared today – Use the EVS Toolkit!



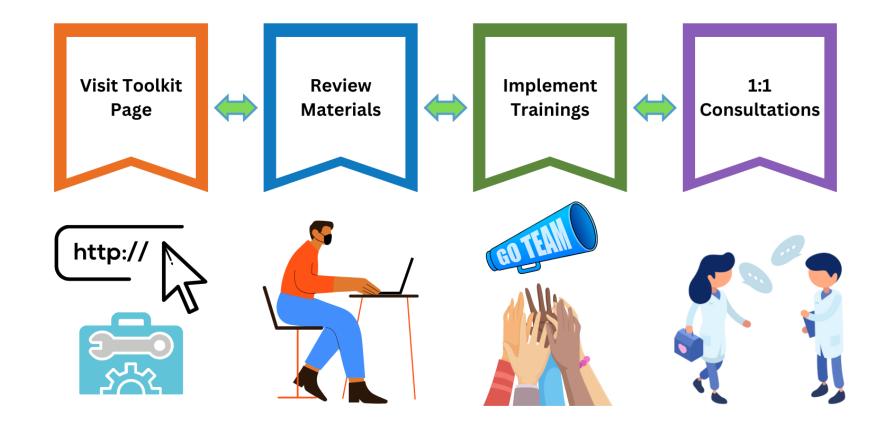


Time Constraints or Staff Availability

- Provide the training over time (e.g., review 1 topic each month)
- Use select slides, instructor checklist items, or activities
- Train as part of new hire/annual orientation
- Train anywhere/anytime (e.g., daily huddle, training day)



Next Steps





Questions and discussion

Thank You!

Questions?

For more information, contact HAIProgram@cdph.ca.gov

