

**Part of  
The Revised Healthcare  
Cleaning Manual**

## **CONTENTS**

**Welcome**

**Foreword**

7.1.3 Cleaning with microfibre cloths

## Welcome to the Revised Healthcare Cleaning Manual

The Revised Healthcare Cleaning Manual has been designed to help every NHS Trust meet its obligation to aid the delivery of high-quality, effective and safe healthcare in clean premises that support the control of healthcare associated infections and make a positive contribution to healthcare outcomes.

The Revised Healthcare Cleaning Manual is intended as a resource for the Trust Board member or senior manager with responsibility for cleanliness and for all managers and staff with responsibilities for cleaning. The Manual is applicable to all healthcare settings including hospitals, ambulances and primary care.

The aim of the Manual is to provide guidance on cleaning techniques and best practice advice on defining responsibilities, scheduling work, measuring outcomes, reporting and driving improvements.

It is anticipated that healthcare providers will respond to the publication of this Manual by reviewing existing policies and practice relating to cleanliness.

This Manual is available for download from <http://www.npsa.nhs.uk/cleaning>

## Foreword

The cleanliness of healthcare premises is an important component in the provision of clean safe care. The NHS Constitution clearly sets out that patients have a right to be treated in an organisation that meets the required levels of safety and quality. The NHS has further pledged that services will be provided in a clean and safe environment that is fit for purpose and based on national best practice. Whilst there have been significant improvements in the cleanliness of our healthcare premises, there is still room for improvement.

The Care Quality Commission will continue the inspection programme to ensure that healthcare providers are meeting the requirements of regulation with respect to healthcare associated infections. In order to meet these requirements, healthcare providers will be expected to provide and maintain a clean and appropriate environment that facilitates the prevention and control of healthcare associated infection. Following the guidance in this manual may be of assistance in providing assurance that a healthcare provider meets these requirements.

This guidance should be used as a starting point from which practitioners and managers can develop their own local environmental cleanliness policies. When read in conjunction with the National Specifications for Cleanliness, this guidance can help healthcare providers identify standards of cleanliness and what systems and processes they need to put in place to deliver and monitor those standards.

The National Patient Safety Agency commissioned the Association of Healthcare Cleaning Professionals to lead the review of this Manual and revise the guidance to reflect the modern NHS. We have worked with a variety of stakeholders with expertise in cleaning, infection control, nursing and emergency care. We are grateful to all those involved in the revision of this guidance for providing their expertise, time and commitment to this work.

### **Martin Fletcher**

Chief Executive

National Patient Safety Agency

### 7.1.3 Cleaning with microfibre cloth

Two publications have reported positively on the use of microfibre technology. These are *The Impact of Microfibre Technology on the Cleaning of Healthcare Facilities* (Association of Healthcare Cleaning Professionals, revised 2006) and *An Integrated Approach to Hospital Cleaning: Microfibre Cloth and Steam Cleaning Technology* (Department of Health, May 2007).

It is recommended that all Trusts should read these reports and consider implementing the routine use of microfibre technology.

Microfibre mops and cloths are made of composite synthetic fibres which are extremely fine, and which are engineered to have a large surface area. This gives a much greater effective cleaning capacity, and enables the extremely efficient removal of microscopic particles. The small size of the microfibrils enables them to reach into microscopic crevices in surfaces. Additionally, the microfibrils are naturally statically charged. This combination of electrostatic attraction and capillary action allows the removal of a far greater number of contaminant particles than conventional mops and cloths.

Many hospitals using microfibre cloths have reported that the time taken to perform cleaning tasks has reduced, and that the introduction of microfibre has been followed by improvements in measured cleaning scores.

There are limitations on the use of microfibre cloths. They are designed to be used dampened only with water, and therefore should not be used in conjunction with chlorine-based disinfectant cleaners or other biocides. Used cloths will contain potentially harmful contaminants. A separate cloth should be used for each patient area and cloths must be thermally disinfected. Microfibre cloths are less effective when used on old and damaged surfaces because of repeated snagging and perform best in the routine maintenance of surfaces which are not heavily soiled.

There are now many commercially available microfibre products. Not all of these are of the highest grade and careful consideration should be given to the relative merits of products on the market. Once a product is chosen, a detailed implementation plan should be created, including thorough training for supervisors and staff with cleaning responsibilities. The method statement provided here is provided as an example. It should be noted that different manufacturers may make different recommendations for how their products should be used. Organisations should ensure that practice is consistent with the manufacturer's recommendations and the advice of the local Infection Control Team.

Microfibre cloths are designed to be used as part of a well coordinated and tightly controlled cleaning system. Although some hospitals do currently use microfibre cloths for one task in isolation, such as high-dusting, this may not produce an optimum result. For this reason, the method statement given below is for the integrated use of microfibre for a range of tasks in an area.

## Task

### CLEANING WITH MICROFIBRE CLOTHS

Equipment and materials required:

- colour-coded domestic gloves;
- cleaning trolley designed for use with microfibre cleaning system;
- dust-control mop and handle;
- damp-mopping mop and handle;
- colour-coded labelled net bag containing clean microfibre flat mops;
- colour-coded labelled net bag containing clean microfibre cloths;
- high-dusting tool, with telescopic attachment if required;
- microfibre sleeve for high-dusting tool;
- colour-coded dustpan and brush;
- laundry bag for used microfibre cloths;
- laundry bag for used microfibre flat mops;
- labelled spray gun containing general purpose detergent or other compatible cleaning product;
- labelled spray gun containing cold water;
- warning signs.

### Method

1. Wash hands and put on gloves.
2. Plan work route and temporarily remove potential obstacles to a new, safe location. The area to be cleaned at one time should be no larger than half of a six-bedded patient bay.
3. Display warning signs.
4. Prepare the cleaning solution in the bucket, in strict accordance with the manufacturer's instructions and with your training. Do not mix chemicals and only use a cleaning product provided by your employer.
5. Assemble items to be used on the cleaning trolley: place clean microfibre cloths in the appropriate container. Place clean microfibre flat mops in the mop container. Place net bags over the laundry bags ready to receive used cloths and mops. Impregnate mops with the correct amount of water, following the manufacturer's instruction.
6. Begin by high-dusting the area, using the high-dusting tool and microfibre sleeve (refer to high-dusting method statement for general guidance on high-dusting).
7. On completion of high-dusting, remove microfibre sleeve and place in cloths laundry bag.
8. Damp-dust all surfaces. Spray a small amount of cold water onto the surface to be cleaned and wipe with a single firm stroke. Turn and refold the cloth each time the surface of the cloth being used becomes full of dust. As a guide, a standard sized cloth can be turned and folded so as to give eight effective cleaning surfaces. One cloth should normally be sufficient to clean each area.
9. Work systematically from higher areas to low, taking care to damp-dust the edges and undersides of all surfaces after the tops. Where extendable items, such as bedside tables, are to be damp-dusted, extend them before beginning to work.
10. Dust-control the area. Attach a microfibre dust-control cloth to the dust-control tool head.
11. Manually pick up any larger items such as sweet wrappers and tissues.
12. Starting at an edge, dust the area using an overlapping figure-of-eight pattern, taking care to go right up to every edge. The dust-control tool should remain in contact with the floor at all times.
13. When you have finished, carefully remove cloth and fold the cloth so that dust is not dispersed. Use the dustpan and brush to collect any dust and debris which has collected at your finishing point.
14. Damp mop the area. Attach a microfibre flat mop head to the mopping tool.
15. Starting at an edge, mop the area using an overlapping figure-of-eight pattern, taking care to go right up to every edge. The mop head should remain in contact with the floor at all times.

16. Greasy or stubborn deposits may require use of the cleaning solution. Spray a small amount of solution onto the soiled area and leave in contact for a short time, then repeat damp-mopping as above.
17. Return any items moved, to the clean surface when it is dry.
18. Move onto the next work area and repeat points 1-17 above.
19. On completion, clean and dry all equipment and store safely and tidily in a secure storage area, segregated according to colour-coding where appropriate.
20. Remove gloves and wash hands.