Summary of The National Standards of Healthcare Cleanliness 2021 Requirements

Please note: this is my interpretation of the new standards however, it is the Practices' responsibility to review the standards, identify the actions you need to take and implement any changes required to ensure you are meeting the standards.

If you would like me to support staff when they are reviewing the standards and completing actions required or if you have any queries please let me know.

Extracts from the Executive Summary

The National standards of healthcare cleanliness 2021 apply to all healthcare environments and replace the National specifications for cleanliness in the NHS 2007 (and amendments) published by the National Patient Safety Agency. To encourage continuous improvement they combine mandates, guidance, recommendations and good practice.

They seek to drive improvements while being flexible enough to meet the different and complex requirements of all healthcare organisations. Healthcare establishments can decide how their cleaning resources are best organised for their local environment and services, but meeting aspects of these standards is mandatory. The compliance grid details what is mandatory. Compliance with the standards, and the auditing processes, should be written into contracts with cleaning service providers. Cleaning service managers and providers should ensure all staff are familiar with this document.

The 2021 standards reflect modern methods of cleaning, infection prevention and control (IPC) and other changes since the last review, and important considerations for cleaning services during a pandemic; and emphasise transparency to assure patients, the public and staff that safe standards of cleanliness have been met.

Note: It is the user's responsibility before implementing this guidance to first check on the NHS Collaboration Hub as to whether any enhancements to cleaning regimes are required as a result of a national pandemic/circumstance/incident (also see Section 5, 5.6 – cleaning through a pandemic.)

Link to NHS England page where you can find the full National Standards and all the supporting documents - NHS England » National Standards of Healthcare Cleanliness 2021

Key Points

To continue to drive improvement in cleanliness, the 2021 standards:

- Focus on the need for a collaborative approach from the different staff groups, both clinical and non-clinical, responsible for maintaining cleanliness.
- With some exemptions (detailed in the audit section) replace the cleaning audit percentage scores for functional areas with a new star rating for patient-facing areas. This star rating should be displayed.
- Increases flexibility, so they apply to all healthcare settings.
- Revise and update the elements list. Organisations will need to determine which elements are applicable to their setting and add to it as appropriate.
- Introduce efficacy audits, widening the audit function to include the cleaning process, as well as measuring the technical cleaning outcome.

- There is also an option to blend functional risk areas, if organisations wish to do so, to provide greater flexibility and to maximise resource allocation. If used, this methodology can be applied to whole risk categories or to individual areas based on a hybrid approach.
- The safe cleaning frequencies linked to each element include the ability to determine the requisite cleaning frequencies for each functional risk (FR) area.
- Introduce a Commitment to Cleanliness Charter to promote the ethos of the 2021 standards, particularly by highlighting the importance of a collaborative approach. Signing up to this charter publicises an organisation's commitment to achieving a consistently safe and high standard of cleanliness.

All healthcare organisations need to implement the standards within the set timelines stated in the implementation guidance – as mentioned, the compliance grid identifies what is best practice and what is mandatory. If organisations apply to nhsi.estatesandfacilities@nhs.net for an extension to the planned implementation date, and this is sanctioned, monthly progress updates will be required. Any requests for extra support will be considered.

Introduction of the new standards should not generate additional costs or work providing organisations are fully compliant with the 2007 standards.

Suggested actions required

Review the Compliance Grid to identify work required - <u>NHS England » National Standards of</u> Healthcare Cleanliness 2021: Supporting documents

Determine cleaning responsibility framework – Appendix 1 in this document - <u>B0271-national-standards-of-healthcare-cleanliness-2021-appendicies-april-2021.pdf (england.nhs.uk)</u>

Assess all functional areas and assign to one of six functional risk categories (see Table 1 in Section 8.5 of the Standards document to identify the audit frequency). Identifying the FR category for functional areas is the crucial first step in applying the standards: the cleaning, monitoring and audit frequency and audit target scores are all directly linked to this - Appendix 2 & 3 in this document: Elements, performance parameters and cleaning frequencies - B0271-national-standards-of-healthcare-cleanliness-2021-appendicies-april-2021.pdf (england.nhs.uk)

My interpretation is that practices will have three functional areas, however you should read all the information in Table 8.5 and decide which functional areas you have in the practice:

| Functional risk category | Suggested functional areas |
|--------------------------|--|
| FR2 | Treatment rooms where invasive procedures take place |
| 50.4 | To do the first of |
| FR4 | Treatment rooms where invasive procedures do not take place |
| | Entrances, receptions, and public corridors |
| | Waiting areas |
| | Consulting/therapy rooms |
| | Pharmacies |
| | General outpatient departments/clinics |
| FR6 | Administration/offices |
| | Medical records |
| | Stores department, with exception of catering which is covered by the |
| | catering teams – you will need to consider which FR category staff |
| | kitchens and break rooms should go into |

Undertake audits of functional areas – Appendix 7 Technical Audit process - <u>B0271-national-standards-of-healthcare-cleanliness-2021-appendicies-april-2021.pdf (england.nhs.uk)</u> & use Appendix 8 - Audit Score Sheet Template and Appendix 9 Efficacy Audit Checklist - <u>NHS England » National Standards of Healthcare Cleanliness 2021: Supporting documents</u>

Apply star rating based on audit score – Appendix 6 in this document - <u>B0271-national-standards-of-healthcare-cleanliness-2021-appendicies-april-2021.pdf</u> (england.nhs.uk).

Complete the 'Our Commitment to Cleanliness Charter' and display these and the star rating posters in areas for the public to see i.e waiting areas – Appendix 5 in this document - <u>B0271-national-standards-of-healthcare-cleanliness-2021-appendicies-april-2021.pdf</u> (england.nhs.uk).

I have saved and adapted the @Entrances, receptions and public corridors' cleanliness charter as an example which is below – you can save the cleanliness charter documents and then click enable editing so you can add the practice information. I have also saved the Operating theatres charter which can be adapted for minor surgery rooms and the wards charter which can be adapted for consulting and clinical rooms.



nshc-21-commitmen t-to-cleanliness-charte



nshc-21-commitmen t-to-cleanliness-charte



nshc-21-commitmen t-to-cleanliness-charte