# clean hospitals: the next frontier in infection prevention

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## What is Clean Hospitals ?

# HEALTHCARE ENVIRONMENTAL HYGIENE NETWORK

Connecting stakeholders & leading experts from around the world
 Making hospitals safer through improved environmental hygiene
 Benefiting public health by lowering rates of healthcare-associated infections, reducing antimicrobial resistance, and protecting hospital staff as well as the larger environment

www.CleanHospitals.com



AP7 not sure what happened but the circles are no longer the same size. If this was not on purpose, just let me know, and I will change it back to how it was
Alexandra Peters; 18/10/2020

# Our activities around HEH

- Setting the agenda for addressing urgent issues in the field
  - Academic Taskforce
  - Stakeholder meetings
  - •Board meetings
- •Education
  - •Development of training programs for hospitals
- Research projects and studies
  - •Systematic review of the efficacy of HEH interventions
  - •A global Environmental Hygiene Self-Assessment Framework
- Publications
  - •White papers & academic papers in peer-reviewed journals



# Our activities around HEH (cont.)

Specialized industry-led working groups

- •Mapping guidelines for HEH
- •Transposable model for hospital hygiene
- •Fake news and how to respond to it
- Participation to conferences
  - •Interclean and the Healthcare Cleaning Forum
  - •iClean 2020 Australia
  - •International Solid Waste Association (ISWA) World Congress
  - •SVS Hygiene Forum

•International Association for Soaps, Detergents and Maintenance Products (AISE) Healthcare Event

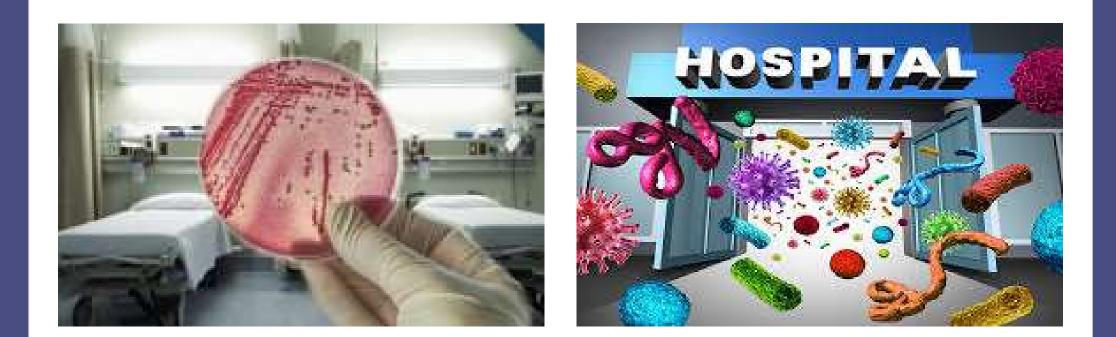


- Why do we need a day ?
- Why do we need to raise awareness ?
- What we did with hand hygiene previously, and the impact it had

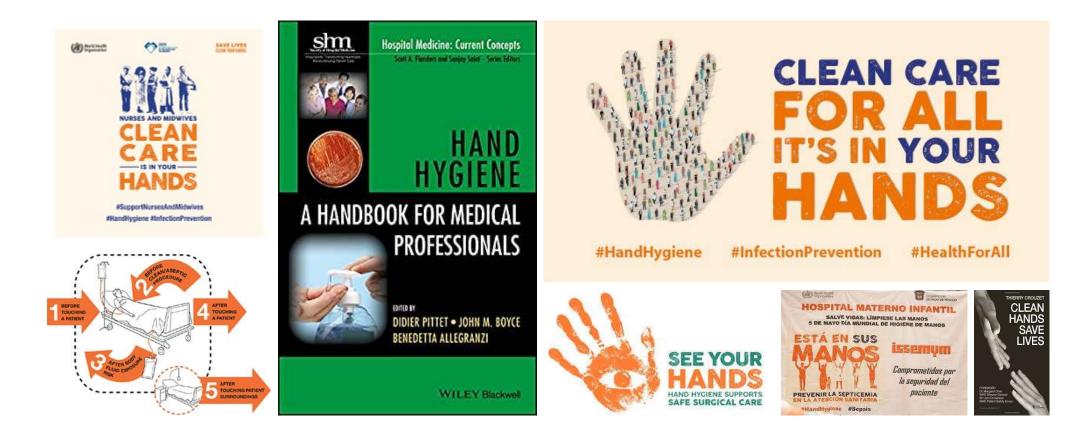
### Why do we need to raise awareness:

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The healthcare environment's effect on healthcare-associated infections



#### 25 Years of Hand Hygiene



Pledges to combat health care-associated infections:

Saving millions of lives every year



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https://www.who.int/infection-prevention/countries/hand-hygiene/statements/en/



environmental hygiene

## Questions:

Q 1: Do cleaner hospitals really mean safer hospitals ?

Q 2: What is the difference between cleaning and disinfecting ?

Q 3: How is cleaning a hospital different than cleaning a hotel ?

Q 4: Does it make economic sense to invest in hospital cleaning programs ?

Q 5: How can cleaning be a science ?

Q 6: How do we make sure a surface is clean ?



## Questions (cont.):

Q 7: Do air and water quality matter for controlling infections ?

- Q 8: Is it better to outsource cleaners or train them in house ?
- Q 9: What element of healthcare environmental hygiene should my institution invest in first ?
- Q 10: How can hospitals save costs in environmental hygiene ?
- Q 11: How can I improve team workflows between cleaners and nursing staff?

Q 12: Any question ?



## Q 1: Do cleaner hospitals really mean safer hospitals?





# Q 1: Do cleaner hospitals really mean safe hospitals?



# Survival times and infectious doses retrieved or extrapolated from published studies

Organism	Survival time	Infectious dose
Methicillin-resistant Staphylococcus aureus	7 days->7 mo	4 CFU
Acinetobacter	3 days->5 mo	250 CFU
Clostridium difficile	>5 mo	5 spores
Vancomycin-resistant Enterococcus	5 days->4 mo	<10 <sup>3</sup> CFU
Escherichia coli	2 h–16 mo	10 <sup>2</sup> -10 <sup>5</sup> CFU
Klebsiella	2 h->30 mo	10 <sup>2</sup> CFU
Norovirus	8 h–7 days	<20 virions



## Risk of acquisition from prior room occupants by organism

	Decreased a	cquisition	Contr	ol		Odds Ratio	Odds Ratio
Study or Subgroup	Events	Total	Events	Total	Weight N	M-H, Random, 95% CI	M-H, Random, 95% CI
Huang (MRSA)	57	1454	248	8697	16.2%	1.39 [1.04, 1.86]	
Nseir (ESBL producing Gram neg)	8	50	50	461	0.0%	1.57 [0.70, 3.52]	
Huang (VRE)	58	1291	256	9058	16.2%	1.62 [1.21, 2.16]	
Ajao (Klebsiella sp. or Escherichia coli)	32	648	235	8723	14.2%	1.88 [1.29, 2.74]	
Nseir (Pseudomonas)	21	85	61	426	10.4%	1.96 [1.12, 3.45]	
Drees (VRE)	19	138	31	500	9.7%	2.42 [1.32, 4.43]	
Shaughnessy (Clostridium difficile)	10	91	77	1679	8.3%	2.57 [1.28, 5.15]	
Mitchell (MRSA)	74	884	163	5344	16.4%	2.90 [2.18, 3.86]	
Nseir (Acinetobacter)	16	52	41	459	8.6%	4.53 [2.32, 8.86]	<b>-</b>
Total (95% CI)		4643		34886	100.0%	2.14 [1.65, 2.77]	•
Total events	287		1112				
Heterogeneity: $Tau^2 = 0.09$ ; $Chi^2 = 21.32$ , df = Test for overall effect: $Z = 5.74$ (P < 0.00001)		$I^2 = 67\%$				-	0.1 0.2 0.5 1 2 5 10
		. J., Ar	derso	on, M	. & Deł	nn, E. Risk of or	Decreased acquisition Increased acquisition ganism acquisition from prior

room occupants: a systematic review and meta-analysis. *J. Hosp. Infect.* 91, 211–217 (2015).

# Q 2: What is the difference between cleaning and disinfecting?





# Cleaning vs. Disinfecting

Both reduce microbial contamination, but there is a difference in the amount of reduction

Cleaning- the process of the physical removal dust and dirt (which also removes some microbes)

• Ex. with surfactants or scrubbing

**Disinfection**- process of killing microbes through mechanical or chemical means

• Ex. with heat or alcohol

## Q 3: How is cleaning a hospital different than cleaning a hotel?



#### 20

### Why are hospitals different?

- Difference in vulnerability of population
- Difference in level of contamination from sick patients
- Pathogens in hospitals can differ from those in the community
- Difference in needed level of cleanliness (depending on zones)
- Range of specific environments
- Pathogen transmission patterns, host affinities, microbiological characteristics



## Q 4: Does it make economic sense to invest in hospital cleaning programs?





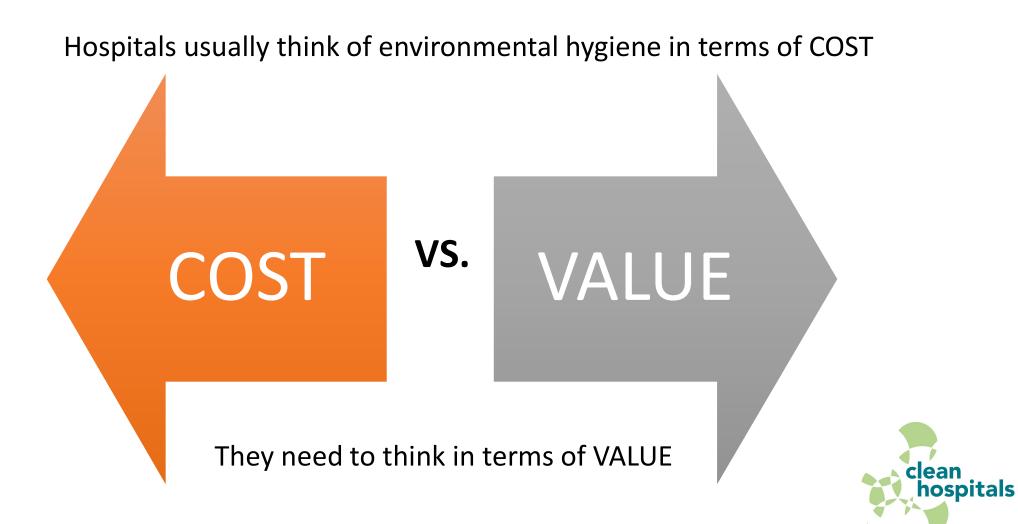
# Why is it so difficult to figure out?

Costs of not cleaning can affect numerous budgets within a hospital

Need to look at both expenditures and averted expenditures

(including patient days, opportunity costs, staff time, missed surgical revenue, averted infections)

# The cost of hospital cleaning and disinfection



## **Return on Investment**

For Hand Hygiene return on investment is up to 23x...

How much is return on investment for hospital environmental hygiene?

Increased costs associated with antimicrobial resistance in healthcareassociated infections (some estimates over €85 trillion by 2050)

• A small outbreak with 40 individuals can cost over €1 million)

M Abbas et al. Conflicts of interest in infection prevention and control research. Intensive Care Med Press; 2108. Pittet D, et al. Cost implications of successful hand hygiene promotion. Infect Control Hosp Epidemiol. 2004;25:264–266. Graves Nicholas. Hand Hygiene. Hoboken, NJ, USA: John Wiley & Sons, Inc.; 2017. The Economic Impact of Improved Hand Hygiene; pp. 285–293. Craig D, et al. Economic evaluations of interventions to prevent healthcare-associated infections literature review. 2017.



# The real question is....

### What is the cost of NOT cleaning?



#### Investing in quality is worth it

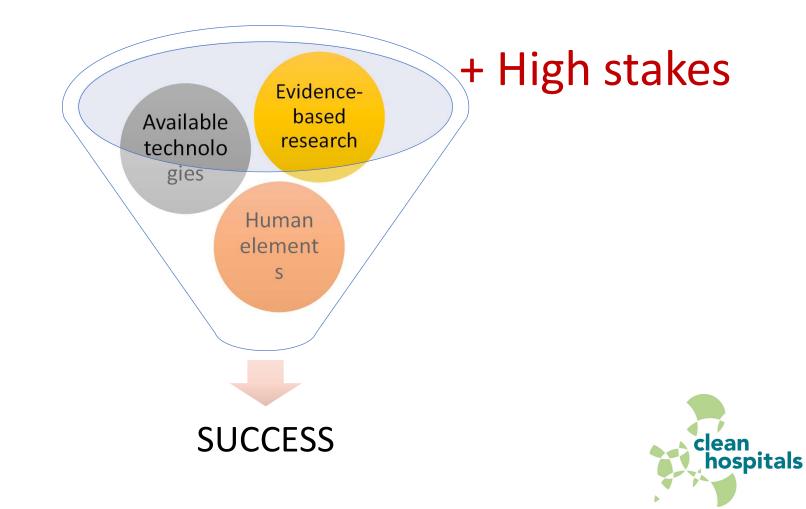


## Q 5: How can cleaning be a science?



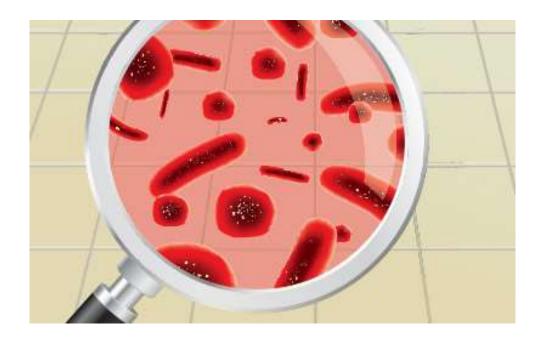


### Environmental hygiene in healthcare is complex because:



## Q 6: How do we make sure a surface is clean?

# First decide how clean you want that surface to be



## Ways of inspecting the healthcare environment

- Visual inspection
- Cultures
- Fluorescent markers
- ATP meters

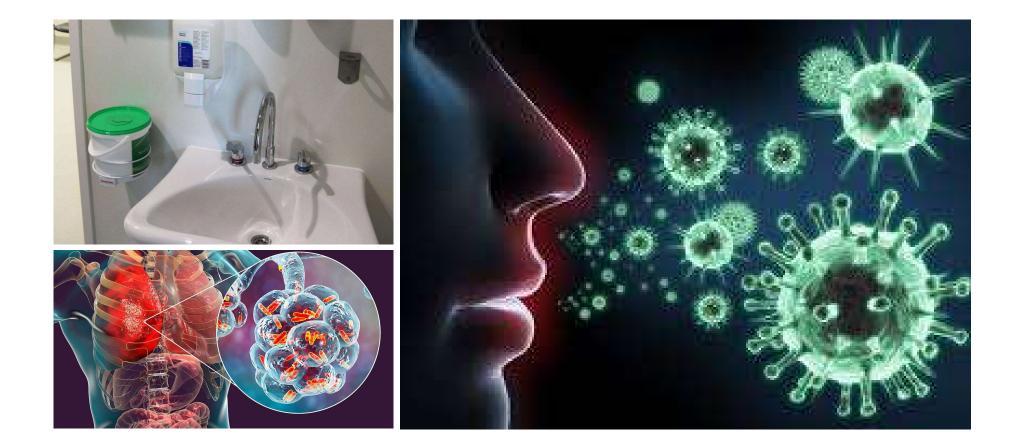








## Q 7: Do air and water quality matter for controlling infections?



# Air and water

## Depends on:

- The microbe present and how it can be transmitted
  - Ex. tuberculosis or Legionella spp. disease
- The vulnerability of the patient
- The need of a particular environment
  - Ex. a patient room vs. an operating theater



# **Risk Zones at HUG**

#### **ZONE 1 – LOW Risk**

Administrative rooms, entryways, hallways

#### **ZONE 2 – MODERATE Risk**

Patient rooms, daycare areas, laboratories

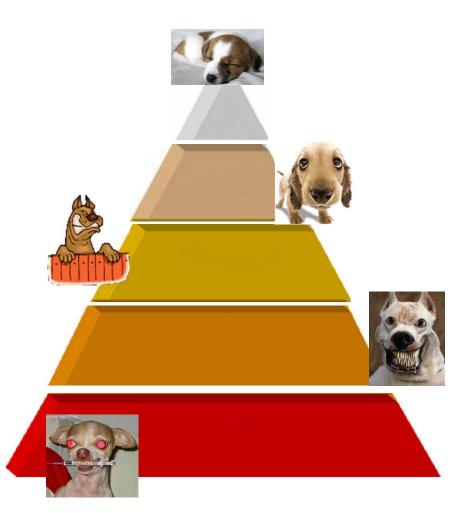
#### **ZONE 3 – HIGH Risk**

Intensive care rooms, post-anethesia care unit

#### **ZONE 4 – VERY HIGH Risk**

Rooms of transplant patients, operating theaters

#### **ZONE 5 – CLEAN-ROOMS**



## Q 8: Is it better to outsource cleaners or train them in house?

AP6 Is it normal that this animation was separated and the others were not? Alexandra Peters; 18/10/2020

## Q 8: Is it better to outsource cleaners or train them in house?

# **Trick question:**



#### Q 8: Is it better to outsource cleaners or train them in house?

# Trick question:

# A: You get what you pay for

Outsourcing vs. In-house

#### • Pros

- Can cost less
- More flexible workforce
- Generally ok for non-critical areas

#### • Cons

spitals

- Not your workforce
- Little control over training
- Issues with quality management

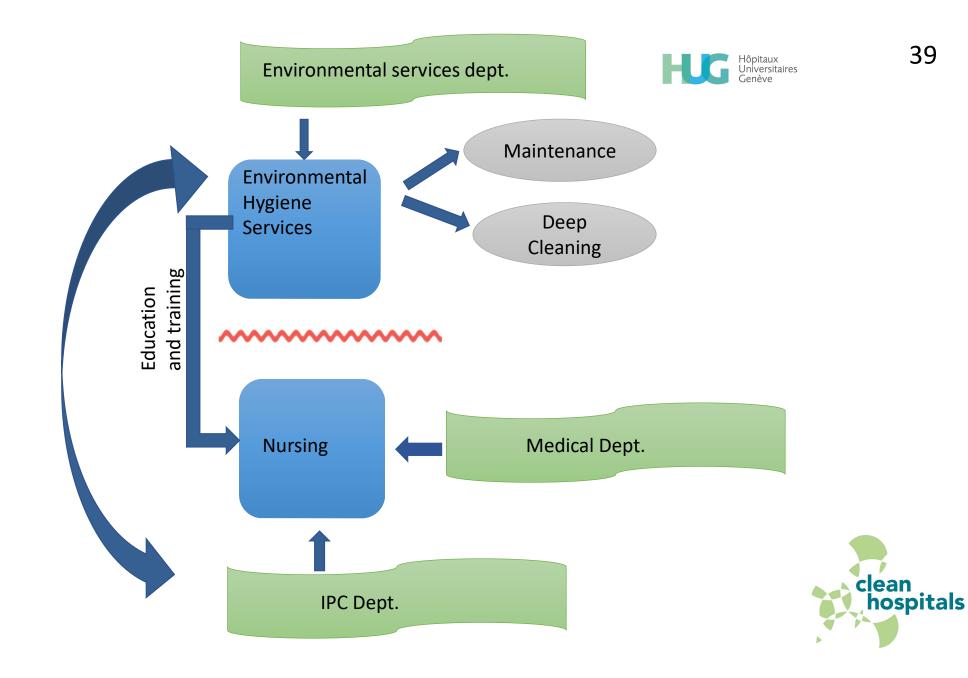


Q 9: What element of healthcare environmental hygiene should my institution invest in first?

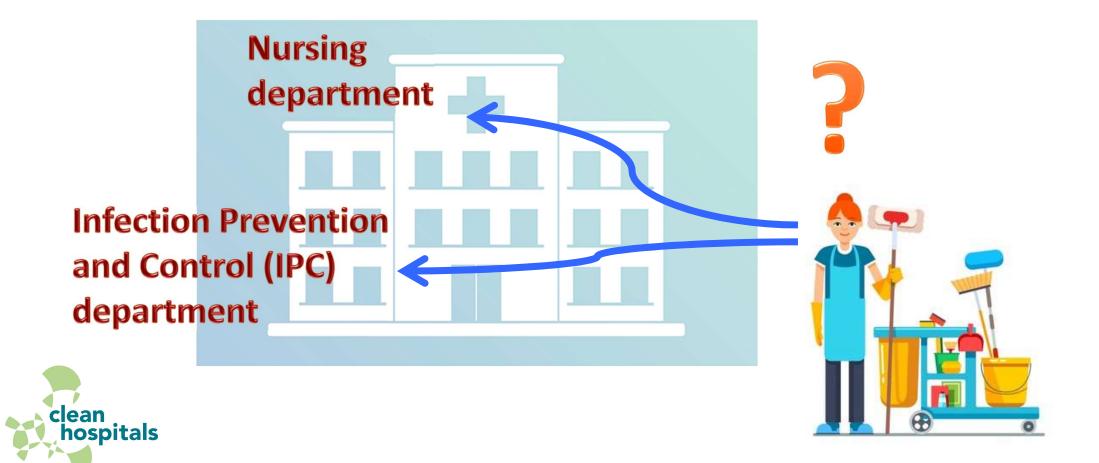


What should my institution invest in first?

- First training, and then good products
- A good cleaner can get better results with a simple detergent than spraying disinfectant on a soiled surface
- It is crucial the environmental services department work closely with infection prevention and control



#### Logistics of hospital cleaning



## Q 10: How can hospitals save costs in environmental hygiene?



# **Key Elements**

- Decide which elements need which level of cleaning
- Calculate the cost/benefit of HEH in their institution
- Keep staff longer, educate and motivate them
- Decide when fancy/high-tech machinery is necessary or not

### Q 11: How can I improve team workflows between cleaners and nursing staff?





*Everyone needs to know their job, and everyone is crucial to the outcome. Social identities can be fostered by the institution* 

#### Who does what?



# **Optimizing HEH personnel performance**



- Good education
- Clear protocols
- Direct communication
- Quality control
- Constructive feedback
- A humanistic approach

Important to remember that this is a stressful time for everyone, especially essential HCWs Be sensitive to the concerns of stressed populations Team cohesion and empowerment is more important than ever

ospitals

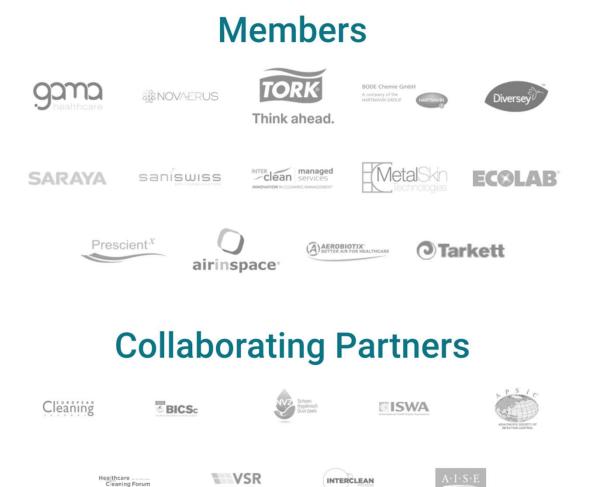
### Q 12: Any more questions ?

## paul@webbertraining.com

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October 22, 2020	PREVENTING THE TRANSMISSION OF COVID-19 IN THE HOME Speaker: Mary McGoldrick, Home Health Systems, Inc.
October 22, 2020	(Postponed to 2021) DISCOVERING AND TRANSFORMING THE INNER ICP EDUCATOR: EXPLORING CORE ELEMENTS OF AN INNOVATIVE PROFESSIONAL'S EXPERIENCE Speaker: Dr. Gwyneth Meyers, Alberta Health Services
October 29, 2020	(FREE Teleclass) CLEANING UP AFTER RODENTS IN HEALTHCARE SETTINGS Speaker: Dr. Marcia Anderson, Environmental Protection Agency
November 5, 2020	INFECTION PREVENTION AND CONTROL IN HOME HEALTHCARE - FINDINGS FROM TWO LARGE MULTI-METHOD STUDIES Speaker: Prof. Jingling Shang, Columbia University
November 12, 2020	INFLUENZA DIAGNOSIS, TRANSMISSION AND CONTROL IN AN EVERYDAY HOSPITAL SETTING

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