

#	Question	Answer	Score
<b>Scoring: Healthcare Environmental Hygiene Self-Assessment Framework</b>			
	<b>1. GENERAL INFORMATION</b>		
1. 1	Name of the country you are working in		
1. 2	Your name and surname		
1. 3	Your email address		
1. 4	Name of your healthcare facility and its location		
1. 5	Please enter the geographic location of your institution from this site: <a href="https://what3words.com">https://what3words.com</a>		
1. 6	What type of healthcare facility is your institution	Primary care center	
		Secondary care center	
		Tertiary care center	
		Long-term care facility	
		Other	
1. 7	How many beds does your healthcare facility have?	1 to 25 (cat. 1)	
		26 to 100 (cat. 2)	
		101 to 275 (cat. 3)	
		276 to 725 (cat. 4)	
		726 to 1850 (cat. 5)	
		Over 1850 (cat. 6)	
1. 8	How many EVS/cleaning staff (full-time equivalent positions) work specifically in PATIENT AREAS at your healthcare facility?	1 to 3 (cat. 1)	
		4 to 10 (cat. 2)	

		29 to 73 (cat. 3)	
		74 to 185 (cat. 4)	
		Over 185 (cat. 5)	
1. 9	How many TOTAL EVS/cleaning staff (full-time equivalent positions) work in HEH at your healthcare facility? INCLUDING: waste management, laundry sterilization. EXCLUDING: staff working in transport and groundskeepers.	0 to 10	
		11 to 50	
		51 to 100	
		101 to 250	
		251 to 500	
		Over 500	
1. 10	What proportion of the rooms in your hospital are single rooms?	None	
		Less than half	
		About half	
		Most	
		All	
1. 1	What is the average bed occupancy in your institution?	Below 65%	
		Below 75%	
		Below 85%	
		Below 95%	
		Above 95%	
1. 1	Which department is responsible for environmental cleaning in your facility?	IPC Department	
		Other	
1. 1	Please specify your job title. Your job title/function;	Infection prevention specialist	
		EVS manager (cleaning manager)	
		Healthcare facility administrator	
		Engineer	

		Other	
1. 1	Total years of experience in your current role or similar role,	0 to 2	
		2 to 5	
		5 to 10	
		10 to 20	
		More than 20	
1. 15	The EVS/cleaning workforce in your healthcare facility is made up of	More than 60% women/less than 40% men	
		A relatively evenly distributed workforce of men and women	
		Less than 40% women/more than 60% men	
		Less than 10% women/more than 90% men	
		Don't know	
1. 2	Are EVS/cleaning staff dedicated solely to environmental hygiene activities, or do they perform additional tasks (such as transporting patients, giving food, etc.)?	They only perform environmental hygiene activities	
		They perform additional tasks	
		Don't know	
1. 2	Who is responsible for cleaning within the PATIENT ZONE?	Nurses	
		Nursing assistants	
		EVS/cleaning staff	
1. 2	Do CLINICAL STAFF (nurses or nursing assistants) perform routine cleaning beyond the patient zone?	Yes	
		No	
		Don't know	
1. 2	Do you know what the budget is for your institution's HEH program?	Yes	
		Yes, for some of the services	
		No	
1. 2	Which decisions can you make with regards to	Budget decisions	
	how the healthcare facility is cleaned? (Please check all that apply).		
		Purchasing/procurement decisions	

		Decisions regarding cleaning/disinfection protocols	
		None	
1. 2	How much importance do you feel that your healthcare facility gives to HEH?	Gives no importance to HEH	
		Gives little importance to HEH	
		Gives some importance to HEH	
		Gives significant importance to HEH	
		Gives great importance to HEH	
1. 2	Do you feel that the budget allocated for cleaning and disinfection is adequate?	Yes, definitely	
		Possibly	
		No	
		Don't know	
1. 2	Please score the following microorganisms by how much of a problem they are in your facility regarding HAIs. How important is it in your hospital? You can rate them from highly important (1) to unimportant (5).	A. baumannii	1-5
		C. difficile	1-5
		K. pneumoniae	1-5
		MRSA	1-5
		P. aeruginosa	1-5
		S. aureus	1-5
		VRE	1-5
	Please specify any additional microorganism of concern if it is not listed above.		
1. 2	What is the overall prevalence rate of HAIs for your institution?	0% to 5%	
		6% to 10%	
		11% to 20%	
		21% to 30%	
		More than 30%	
		Don't know	

2	<b>SYSTEM CHANGE: Institutional capacity and practices</b>		
2.1	Does your facility have an IPC team?	Yes	1
		No	0
2.2	Do the IPC team and the EVS/cleaning team have regular contact? (meetings/emails, phone calls, etc.)	Yes, daily	8
		Yes, once per week or more	6
		Yes, once per month or more	4
		Yes, but infrequently	2
		No	0
		There is no IPC team	0
2.3	Automatic calculation of EVS employment density; calculated by dividing the category number (cat 1-6) of EVS staff in PATIENT AREAS by the category number (cat. 1-6) of PATIENT BEDS. If your facility is adequately staffed, this number should be 1 or greater than 1.		
2.4	Do you follow international and/or national guidelines for healthcare environmental hygiene?	Yes	8
		No	0
		Don't know	0
2.5	Does your healthcare facility have different protocols for different risk zones (Example: offices vs. patient rooms vs. operating theaters)?	Healthcare environmental hygiene protocols do not vary from one zone to the next	0
		Some protocols are adapted to high-risk zones, such as operating theaters/transplant wards	4
		All healthcare environmental hygiene protocols are adapted to each risk zone	8
		Don't know	0

2.6	Are there additional protocols available for the person who cleans the patient zone?	Yes	7
		No	0
		Don't know	0
2.7	Is there a plan in place to improve HEH in your facility (either at the individual program or institutional level)?	Yes	7
		No	0
		Don't know	0
2.8	Does your facility have an antibiotic stewardship program in place?	Yes, there is a full program in place	8
		Yes, there are some activities in some wards	4
		No	0
		Don't know	0
2.9	Which factor is most important when purchasing/procuring HEH products and supplies?	Price	0
		Efficacy	8
		Surface compatibility	4
		Safety of product	8
		Environmental impact	0
		Relationship with current suppliers	0
		Don't know	0
2.1	What measures does your facility implement to improve sustainability? (Please check all that apply)	Prioritizes products and supplies that are produced locally	1
		Considers the reusability and longevity of equipment and supplies	1
		Implements measures to reduce waste	1
		Chooses less toxic products	1
		Chooses products that are more easily biodegradable	1
		Prioritizes the appropriate maintenance of existing equipment	1
		Has staff specialized in recycling/sustainability	1
		Uses further innovative measures (please specify)	1

3	<b>SYSTEM CHANGE:Surfaces</b>		
3.1	Surfaces in my healthcare facility are smooth,nonporous, intact and able to be cleaned.	All of them	7
		Most of them	3
		Many surfaces are rough or damaged	0
3.2	Does your healthcare facility have sufficient cleaning and disinfection products and supplies available?	Cleaning/disinfection products and supplies are not or only rarely available	0
		Products and supplies are sometimes available	4
		Products and supplies are always available	8
		Don't know	0
3.3	Are the available products and supplies appropriate for their intended task?	Cleaning/disinfection products and supplies are not or only rarely appropriate	0
		Products and supplies are sometimes appropriate	4
		Products and supplies are always appropriate	8
		Don't know	0
3.4	Are HIGH-TOUCH surfaces cleaned with a detergent and disinfected?	Yes, always	7
		Sometimes	4
		No	0
3.5	Are surfaces in HIGH-RISK AREAS cleaned with a detergent before they are disinfected?	Yes, always	8
		Cleaning and disinfection are performed at the same time with a combined detergent/disinfectant product	8
		Sometimes	4

		No	0
3.6	For cleaning FLOORS in wards (NOT in operating theaters or other high-risk settings), what PRODUCT do you use?	Water only	0
		Detergent only	7
		Disinfectant only	0
		Both detergent and disinfectant	7
		A single combined detergent/disinfectant product	7
		Microfiber and water only	7
		Don't know	0
3.7	For cleaning FLOORS in PATIENT ROOMS, what EQUIPMENT do you use most often?	Sponges	0
		Bucketless mopping systems where mop head is changed between every room (see definition)	7
		Rope mops where the mop head is changed between every room	4
		Rope mops and buckets where mop head is NOT changed between every room	0
		Don't know	0
3.8	For cleaning hard HIGH TOUCH SURFACES, what PRODUCTS do you use?	Water only	0
		Detergent only	3
		Disinfectant only	0
		Both detergent and disinfectant	7
		A single combined detergent/disinfectant product	7
		Microfiber and water only	3
3.9	For cleaning hard surfaces in PATIENT ROOMS (not including walls and floors) what EQUIPMENT do you use most often? Microfiber/ Sponges/ Reusable cloths/ Disposable wipes	Microfiber	7
		Sponges	0
		Reusable cloths	7



		Disposable wipes	7
3.1	For cleaning hard surfaces in PATIENT ROOMS, do you use automated disinfection?	Yes, automated disinfection is implemented without previous manual cleaning	0
		Yes, automated disinfection is used when necessary in addition to manual cleaning	7
		No, surfaces are cleaned and disinfected manually	0
3.1	Has your HCF performed a risk analysis in order to define high touch surfaces?	Yes	7
		No	0
		Don't know	0
3.1	What disinfectants are used in your facility for SURFACES? (please check all that apply) checkbox,	Bleach/chlorine based disinfectant	
		Quaternary ammonium disinfectant	
		Hydrogen peroxide	
		Phenolics	
		Glutaraldehyde	
		Other	
3.1	What additional supplies/equipment are available for SURFACES? (please check all that apply)	Larger mechanical cleaning machine(s) for cleaning floors/large surfaces	
		UV disinfection machine(s)	
		Gaseous hydrogen peroxide disinfection machine(s)	
		Antimicrobial surfaces	
		None of the above	
		Don't know	
		Other products/tools/machines	
4	<b>SYSTEM CHANGE: Specific Environments</b>		

4. 1	<b>STERILIZATION:</b> Please check all that apply, and please also answer this question if sterilization is outsourced. Equipment that needs to be sterilized is:	Cleaned before sterilization	2
		Packaged before sterilization	2
		Sterilized using a validated protocol	2
		Tested regularly to ensure the quality of the sterilization	2
		Don't know	
4. 3	<b>STERILIZATION:</b> Sterilization for thermostable medical devices is mainly:	Steam sterilization (autoclave)	7
		Dry heat sterilization	4
		Ethylene oxide/formaldehyde	1
		Other chemical sterilization/disinfection	1
4. 4	<b>STERILIZATION:</b> What supplies and strategies are available for <b>STERILIZATION</b> ? (Please check all that apply). If sterilization is <b>OUTSOURCED</b> , please <b>ONLY</b> click the last option ("not applicable").	Products/equipment for the sterilization of instruments	4
		Adequate maintenance strategy for the sterilization of instruments	3
		Not applicable: Sterilization is outsourced	7
4. 5	<b>STERILIZATION:</b> What is your healthcare facility's capacity for <b>STERILIZATION</b> ?	My facility can adequately perform sterilization	7
		My facility can <b>USUALLY</b> adequately perform sterilization	3
		My healthcare facility cannot perform adequate sterilization (equipment is not in good working order, etc.)	0
		Sterilization is outsourced, and this is an adequate solution	7
		Sterilization is outsourced, but there are sometimes issues with quality	3
		Don't know	0

4.6	STERILIZATION: Does your facility reprocess single use medical devices?	Yes, without both a validated method and quality control	2
		Yes, with both a validated method and quality control	7
		No	0
		Don't know	0
4.7	WATER CONTROL: What supplies are available for WATER? (Please check all that apply)	Clean water (drinking quality)	2
		Running water (faucets and plumbing system, sinks, etc.)	2
		Hot water	2
		Additional water filtration when needed in high-risk environments (haemodialysis, etc.)	2
		Don't know	0
4.8	WATER CONTROL: How is WATER QUALITY controlled? (Please check all that apply)	There is a microbiological surveillance plan in place for Legionella spp.	2
		Temperature of water is verified at the source	2
		Temperature of water is verified where it comes out of the faucets/taps	2
		Stagnant places in water system are identified and addressed	2
		None of the above	0
4.9	WATER CONTROL: Do you have knowledge of the layout of the water distribution system in the hospital?	Yes, totally	7
		Yes, partially	3
		No	0
		Don't know	0
4.1	<b>AIR CONTROL:</b> What does air control look like in regular wards?	Windows that cannot be opened, no other central ventilation	0

		Windows that can be opened, no other central ventilation	4
		Windows cannot be opened but there is a central ventilation system	7
		Windows that can be opened and there is a central ventilation system	7
		Don't know	0
4.1	<b>AIR CONTROL:</b> What supplies are available for AIR control in high-risk environments (operating rooms, isolation wards, areas with immunocompromised patients)? (Please check all that apply)	High Efficiency Particulate Air (HEPA) filtration where needed	2
		Unidirectional or laminar air flow	1
		Mobile air treatment device(s)	1
		Negative/positive pressure room(s)	2
		Air conditioner(s)	1
		No specific measures	0
		Don't know	0
4.1	<b>LAUNDRY:</b> If laundry is outsourced, please ONLY check "Not applicable". What products and supplies are available for LAUNDRY? (Please check all that apply).	Laundry detergent	2
		Laundry disinfectant (such as chlorine)	2
		On-site washing machines	2
		On-site drying machines	2
		Detergent and disinfectant are not consistently available	0
		No laundry system is in place	0
		Not applicable: Laundry services are provided by an external provider	8
		Don't know	0
4.1	<b>WASTE MANAGEMENT:</b> How is WASTE managed in your HCF?	External treatment of all solid waste	7
		External treatment of medical/hazardous waste ONLY	3
		No external treatment of waste	0

		Don't know	0
4.1	WASTE MANAGEMENT: How is WASTE segregated in your HCF?	HCF segregates general waste, infectious waste and sharps waste	7
		HCF uses a machine to shred and sterilize medical waste, so no additional segregation is needed	7
		Only some waste is segregated (either infectious or sharps)	3
		No segregation of waste	0
		Don't know	0
4.2	WASTE MANAGEMENT: What supplies/systems are available for WASTE MANAGEMENT? (Please check all that apply)	Containers for sharps	1
		Color-coded bags for waste (hazardous/medical vs. normal)	1
		Waste collection services and/or systems for on-site waste treatment (e.g. incinerators, autoclaves)	1
		Open dump sites within 150 meters of healthcare facility (see definition)	1
		Landfill sites for waste disposal (see definition for "Landfill")	1
		Access to an on-site wastewater treatment system (e.g. flushing toilets, showers or running water)	1
		Dedicated workforce for waste management	1
		Recycling	1
		Don't know	0
4.2	WASTE MANAGEMENT: Is there a dedicated area(s) available for reprocessing of non-critical patient care equipment on the wards?	Yes	7
		No	0
		Don't know	0
4.2	WASTE MANAGEMENT: Is there a program to monitor the quality of effluent/wastewater in your	Yes	7

	HCF?		
		No	0
		Don't know	0
5	<b>TRAINING &amp; EDUCATION OF EVS (EVS/CLEANING) STAFF</b>		
5.1	Is your EVS/cleaning staff in-house or outsourced?	In-house (EVS/cleaning staff are employed by the healthcare facility)	
		Outsourced (EVS/cleaning staff are employed by an external company)	
		EVS/cleaning staff is partially in-house and partially outsourced	
		Don't know	
5.2	Does your HCF have a dedicated budget for training EVS/cleaning staff?	Yes	7
		No	0
		Don't know	0
5.3	What types of training do EVS/cleaning staff receive? (Please check all that apply).	Classroom	1
		On the job training	1
		E-learning	1
		Manuals	1
		No training received	0
		Other (please specify)	1
		Don't know	0
5.4	Is the training for EVS/cleaning staff provided by formally educated trainers?	Yes	7
		Sometimes	3
		No	0
		Don't know	0

5.5	Are EVS/cleaning staff trained in HAND HYGIENE?	Yes	7
		No	0
		Don't know	0
5.6	Is there training in ENVIRONMENTAL INFECTION CONTROL for EVS/cleaning staff?	Yes	8
			0
		No	0
		Don't know	
5.7	What is the comparative salary of EVS/cleaning staff vs. nurses? EVS/cleaning staff earn...	75% of what nurses earn/	8
		50% of what nurses earn/	4
		25% of what nurses earn /	0
		Don't know	0
5.8	Does your healthcare facility provide or require formal training for EVS/cleaning staff upon hiring?	No formal training	0
		Some formal training	4
		Comprehensive formal training	8
		Don't know	0
5.9	Does your healthcare facility propose regular additional training for EVS/cleaning staff (not including the training upon hiring)?	No further additional training	0
		Additional training is given less than once per year	3
		Additional training is only given for specific contexts/environments	3
		Regular additional training is given at least once per year	7
		Don't know	0

5.1	Do EVS/cleaning staff have the possibility to complete certification programs?	No available certification	0
		Institutional certification	3
		Regional/national certification	7
		Don't know	0
5.1	Do the staff responsible for DEVICE REPROCESSING have the possibility to complete certification programs?	No available certification	0
		Institutional certification	3
		Regional/national certification	7
		Don't know	0
5.1	Are there established pathways for EVS/cleaning staff to advance into management roles?	Yes	8
		No	0
		Don't know	0
5.1	How many years do EVS/cleaning staff stay at your facility on average?	0 to 2	0
		2 to 5	3
		over 5	7
6	<b>MONITORING AND FEEDBACK OF EVS STAFF</b>		
6.1	HOW are EVS staff monitored?	Individually only	4
		At the team level only	1
		Both at the individual and the team level	7
		They are not monitored	0
		Don't know	0
6.2	Which of the following monitoring tools does your institution use, in non-outbreak situations?	Visual monitoring WITHOUT a scoring scale	2
		Visual monitoring WITH a scoring scale	4



		Visual monitoring WITHOUT a scoring scale + fluorescent marking/ATP	4
		Visual monitoring WITH a scoring scale + fluorescent marking/ATP	7
		They are not monitored	0
6.3	How is each EVS/cleaning staff member's performance monitored?	They are not monitored	0
		Irregular visual monitoring (less than 4 times per year)	2
		Regular visual monitoring (4 times per year or more)	5
		Regular visual monitoring as well as additional monitoring methods (ATP, fluorescent gel etc.)	8
		Don't know	0
6.4	How feedback is given to EVS/cleaning staff?	No feedback is given	0
		Immediately at the individual level only	4
		Systemically at the team level only	1
		Both at the individual and the team level	7
		Don't know	0
6.5	What kind of feedback is given to EVS/cleaning staff?	No feedback is given	0
		Feedback given is usually punitive	2
		Feedback given is usually constructive	5
		Feedback is constructive and includes a plan for improving performance	8
		Don't know	0
6.6	Is there on-site supervision of EVS/cleaning staff?	Never	0
		Sometimes (once or less per week)	2
		Often (numerous times per week)	5
		Always (daily)	8
		Don't know	0

7	<b>REMINDERS IN THE WORKPLACE</b>		
7.1	Does your institution use workplace reminders for HEH (such as posters, pocket leaflets, screen savers etc.)?	No workplace reminders	0
		The required safety posters/instructions	5
		Additional reminders are also used (please specify)	7
		Don't know	0
7.2	Which reminders for cleaning staff safety does your healthcare facility use? (Please check all that apply)	Chemical exposure protection	2
		Safe handling of sharps	2
		Spill removal techniques	2
		Others (please specify)	2
		None	0
7.3	Does your healthcare facility use personal task reminders (to-do lists) for cleaning staff?	Yes, always	7
		Yes, sometimes	3
		No	0
		Don't know	0
7.4	Is there an available document that describes how EVS/cleaning staff should perform their tasks?	Yes	7
		No	0
		Don't know	0
7.5	Does your healthcare facility host events such as celebrations or team building activities around HEH?	No	0
		Yes, less than 1 event per year (please describe)	3

		Yes, 1 event per year or more (please describe)	7
		Don't know	0
7. 6	Are EVS/cleaning staff involved in making workplace reminders?	Yes, always	7
		Yes, sometimes	3
		No	0
		Don't know	0
<b>8</b>	<b>INSTITUTIONAL SAFETY CLIMATE</b>		
8. 1	How often do EVS/cleaning staff and nursing staff have meetings?  No meetings between EVS/cleaning staff and nursing staff/ Meetings less than once per month/ Meetings once per month or more/ Don't know	No meetings between EVS/cleaning staff and nursing staff	0
		Meetings less than once per month	3
		Meetings once per month or more	7
		Don't know	0
8. 2	How is the communication between EVS/cleaning staff and nursing staff?	No communication between EVS/cleaning staff and nursing staff	0
		Little communication on the work floor	3
		Frequent communication on the work floor	7
		Don't know	0
8. 3	Do EVS/cleaning staff and nursing staff speak the same language?	Yes	8
		Sometimes	4
		No, verbal communication is difficult	0

8.4	Are EVS/cleaning staff able to speak or raise concerns directly with managers?	Upward communication is easy	8
		Upward communication is somewhat difficult	4
		Upward communication is impossible	0
		Don't know	0
8.5	Can EVS/cleaning staff initiate changes in your institution?	Yes	7
		No	0
		Don't know	0
8.6	Is innovation in the field of HEH encouraged in your establishment? This can include changes and improvement in products, techniques, workflow, social innovation, etc.	Yes, often	7
		Yes, sometimes	1
		No	0
		Don't know	0
8.7	Does your institution conduct team building activities for EVS/cleaning staff?	Yes	7
		No	0
		Don't know	0
8.8	Please specify the year and the type of the last HEH innovation/change implemented in your facility:		
8.9	Is the prevention of occupational health disorders (see definition) a priority in your healthcare facility?	Yes, always	7
		Yes, sometimes	0
		No	0