

Healthcare Environmental Hygiene Self-Assessment Framework Scoring Rubric

Please consult the rubric provided below for the interpretation of your facility's score. The cells shaded in grey represent non-scored questions and are marked with an N/A in the score cell. Should you have any questions or need further assistance, please feel free to reach out to <u>alexandra.peters@unige.ch</u>.

NUM	BER QUESTION	ANSWERS	SCORE
1. G	eneral Information		
1.1	Name of the country you are working in		N/A
1.2	Your name and surname		N/A
1.3	Your email address		N/A
1.4	Name of your healthcare facility and its location		N/A
1.5	Please enter the geographic location of your institution from this site: https://what3words.com (Click on the search box and enter your healthcare facility in the search bar; copy and paste the thre words given in the free text box)	e	N/A
1.6	What type of healthcare facility is your institution?	Primary care center	N/A
		Secondary care center	
		Tertiary care center	
		Long-term care facility	
		Other	
1.7	How many beds does your healthcare facility have? (The values for	or 1 to 25 (cat. 1)	N/A
	each category (cat. 1-6) are used for a later calculation)	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) world	k 1 to 3 (cat. 1)	N/A
	specifically in PATIENT AREAS at your healthcare facility?	4 to 10 (cat. 2)	
	EXCLUDING: waste management, laundry, sterilization, staff work	- 29 LU / 5 (LdL, 5)	
	in transport and groundskeepers. (The values for each category and for a later calculation)	re 74 to 185 (cat. 4)	
	used for a later calculation)	Over 185 (cat. 5)	
1.9	How many TOTAL EVS/cleaning staff (full-time equivalent position	s) 0 to 10	N/A
	work in HEH at your healthcare facility? INCLUDING: waste	11 to 50	_
	management, laundry sterilization. EXCLUDING: staff working in	51 to 100	_
	transport and groundskeepers.	101 to 250	
		251 to 500	
		Over 500	
1.10	What proportion of the rooms in your hospital are single	None	N/A
	rooms?	Less than half	
		About half	
		Most	-

		All	
1.11	What is the average bed occupancy in your institution?	Below 65%	N/A
		Below 75%	
		Below 85%	
		Below 95%	
		Above 95%	
1.12	Which department is responsible for environmental cleaning in your	Environmental Services	N/A
	facility?	(EVS) Department	,
		Other	
		IPC Department	
1.13	Your job title/function;	Infection prevention	N/A
-		specialist	,
		EVS manager (cleaning	
		manager)	
		Healthcare facility	
		administrator	
		Engineer	
		Other	
1.14	Total years of experience in your current role or similar role	0 to 2	N/A
		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	More than 60%	N/A
	of	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	
1.16	Are EVS/cleaning staff dedicated solely to environmental hygiene	They only perform	N/A
	activities, or do they perform additional tasks (such as transporting	environmental hygiene	
	patients, giving food, etc.)?	activities	
		They perform additional	
		tasks	
		Don't know	
1.17	Who is responsible for cleaning within the PATIENT ZONE?	Nurses	N/A
		Nursing assistants	
		EVS/cleaning staff	
1.18		Yes	N/A

	Do CLINICAL STAFF (nurses or nursing assistants) perform routine	No	
	cleaning beyond the patient zone?	Don't know	
1.19	Do you know what the budget is for your institution's HEH program?	Yes	N/A
		Yes, for some of the services	
		No	-
1.20	Which decisions can you make with regards to how the healthcare	Budget decisions	N/A
	facility is cleaned? (Please check all that apply).	Purchasing/	
		procurement decisions	
		Decisions regarding cleaning/disinfection protocols	
		None	
1.21	How much importance do you feel that your healthcare facility gives to HEH?	Gives no importance to HEH	N/A
		Gives little importance to HEH	
		Gives some importance to HEH	
		Gives significant	-
		importance to HEH	
		Gives great importance to HEH	
1.22	Do you feel that the budget allocated for cleaning and disinfection is	Yes, definitely	N/A
	adequate?	Possibly	
		No	
		Don't know	
1.23	Please score the following microorganisms by how much of a	A. baumannii	N/A
	problem they are in your facility regarding HAIs. How important is it	C. difficile	
	in your hospital? You can rate them from highly important (1) to	K. pneumoniae	_
	unimportant (5).	MRSA	_
		P. aeruginosa	_
		S. aureus	_
		VRE	
1.24	What is the overall prevalence rate of HAIs for your institution?	0% to 5%	N/4
		6% to 10%	-
		11% to 20%	-
		21% to 30%	-
		More than 30% Don't know	-
		DOILT KHOW	
	YSTEM CHANGE: Institutional Capacity and Practices	Voc	1
2.1	Does your facility have an IPC team?	Yes	1
	Do the IPC team and the EVS/cleaning team have regular contact?	No	U

		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.		N/A
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	Yes	7
	the patient zone?	No	0
		Don't know	0
2.7	Is there a plan in place to improve HEH in your facility (either at the	Yes	7
	individual program or institutional level)?	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	Price	0
	products and supplies?	Efficacy Surface compatibility	8 4

		Safety of product	8
		Environmental impact	0
		Relationship with	0
		current suppliers	
		Don't know	0
2.10	What measures does your facility implement to improve	Prioritizes products and	1
	sustainability? (Please check all that apply)	supplies that are	
		produced locally	
		Considers the reusability	1
		and longevity of	
		equipment and supplies	
		Implements measures to	1
		reduce waste	
		Chooses less toxic	1
		products	
		Chooses products that	1
		are more easily	
		biodegradable	
		Prioritizes the	1
		appropriate	
		maintenance of existing	
		equipment	
		Has staff specialized in	1
		recycling/	
		sustainability	
		Uses further innovative	1
		measures (please	
		specify)	
3. SY	/STEM CHANGE: Institutional Capacity and Practices		
3.1	Surfaces in my healthcare facility are smooth, nonporous,	All of them	7
	intact, and able to be cleaned	Most of them	3
		Many surfaces are	0
		,	0
2.2	Deservery bealtheave facility have sufficient description and	rough or damaged	
3.2	Does your healthcare facility have sufficient cleaning and	Cleaning/disinfection	0
	disinfection products and supplies	products and supplies	
	available?	are not or only rarely	
		available	
		Products and supplies	4
		are sometimes	
		available	
		Products and supplies	8
		are always available	U
		Don't know	0
		DOILEKHOW	0

	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	Yes, always	7
	disinfected?	Sometimes	4
		No	0
3.5	Are surfaces in HIGH-RISK AREAS cleaned with a detergent	Yes, always	8
	before they are disinfected?	Cleaning and disinfection are performed at the	8
		same time with a	
		combined	
		detergent/disinfectant	
		product	
		Sometimes	4
		No	0
3.6	For cleaning FLOORS in wards (NOT in operating theaters or	Detergent only	7
	other high-risk settings), what PRODUCT do you use?	Disinfectant only	0
		Both detergent and disinfectant	7
		A single combined detergent/disinfectant product	7
		Microfiber and water only	7
		Don't know	0
	For cleaning FLOORS in PATIENT ROOMS, what EQUIPMENT		
3.7	do you use most often?	Sponges	0
		Bucket less mopping	7
		systems where mop	
		head is changed	
		between every room	
		(see definition)	

		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, which 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	Microfiber	7
		Sponges	0
		Reusable cloths	7
		Disposable wipes	7
3.10	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 No, surfaces are	7 0
		cleaned and disinfected manually	
3.11	Has your HCF performed a risk analysis in order to define	Yes	7
	high touch surfaces?	No	0
-		Don't know	0
3.12	What disinfectants are used in your facility for SURFACES? (please check all that apply)	Bleach/chlorine-based disinfectant	N/A
		Quaternary ammonium disinfectant	

		Hydrogen peroxide	
		Phenolics	
		Glutaraldehyde	
		, Other	
3.13	What additional supplies/equipment are available for	Larger mechanical	N/A
	SURFACES? (please check all that apply)	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. S	/STEM CHANGE: Specific Environments	11	
4.1	STERILIZATION: Please check all that apply, and please also answer	Cleaned before	2
	this question if sterilization is outsourced. Equipment that needs to be sterilized is:	sterilization	
		Packaged before sterilization	2
		Sterilized using a	2
		validated protocol	2
		Tested regularly to	
		ensure the quality of the	
		sterilization	
		Don't know	0
4.2	STERILIZATION: Sterilization for thermostable medical devices is mainly:		0 7
4.2		Don't know Steam sterilization	
4.2		Don't know Steam sterilization (autoclave)	7
4.2		Don't know Steam sterilization (autoclave) Dry heat sterilization Ethylene oxide/	7
4.2		Don't know Steam sterilization (autoclave) Dry heat sterilization Ethylene oxide/ formaldehyde	7 4 1
4.2	mainly: STERILIZATION: What supplies and strategies are available for	Don't know Steam sterilization (autoclave) Dry heat sterilization Ethylene oxide/ formaldehyde Other chemical sterilization/disinfection Products/	7 4 1
	mainly: STERILIZATION: What supplies and strategies are available for STERILIZATION? (Please check all that apply). If sterilization is	Don't know Steam sterilization (autoclave) Dry heat sterilization Ethylene oxide/ formaldehyde Other chemical sterilization/disinfection Products/ equipment for the	7 4 1 1
	mainly: STERILIZATION: What supplies and strategies are available for STERILIZATION? (Please check all that apply). If sterilization is OUTSOURCED, please ONLY click the last option ("not	Don't know Steam sterilization (autoclave) Dry heat sterilization Ethylene oxide/ formaldehyde Other chemical sterilization/disinfection Products/ equipment for the sterilization of	7 4 1 1
	mainly: STERILIZATION: What supplies and strategies are available for STERILIZATION? (Please check all that apply). If sterilization is	Don't know Steam sterilization (autoclave) Dry heat sterilization Ethylene oxide/ formaldehyde Other chemical sterilization/disinfection Products/ equipment for the sterilization of instruments	7 4 1 1 4
	mainly: STERILIZATION: What supplies and strategies are available for STERILIZATION? (Please check all that apply). If sterilization is OUTSOURCED, please ONLY click the last option ("not	Don't know Steam sterilization (autoclave) Dry heat sterilization Ethylene oxide/ formaldehyde Other chemical sterilization/disinfection Products/ equipment for the sterilization of instruments Adequate maintenance	7 4 1 1
	mainly: STERILIZATION: What supplies and strategies are available for STERILIZATION? (Please check all that apply). If sterilization is OUTSOURCED, please ONLY click the last option ("not	Don't know Steam sterilization (autoclave) Dry heat sterilization Ethylene oxide/ formaldehyde Other chemical sterilization/disinfection Products/ equipment for the sterilization of instruments	7 4 1 1 4

		Not applicable: Sterilization is outsourced	7
4.4	STERILIZATION: What is your healthcare facility's capacity for STERILIZATION?	My facility can adequately perform sterilization	7
		My facility can USUALLY 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
4.5	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
4.6	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 (hemodialysis, etc.)	2
		Don't know	0
4.7	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
4.8	WATER CONTROL: Do you have knowledge of the layout of the	Yes, totally	7
	water distribution system in the hospital?	Yes, partially	3
		No	0
		Don't know	0
4.9	AIR CONTROL: 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
4.10	AIR CONTROL: What supplies are available for AIR control in high- risk environments (operating rooms, isolation wards, areas with immunocompromised patients)? (Please check all that	High Efficiency Particulate Air (HEPA) filtration where needed	2
	apply)	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
4.11	LAUNDRY: If laundry is outsourced, please ONLY check "Not	Laundry detergent	2
	applicable". What products and supplies are available for LAUNDRY? (Please check all that apply).	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
4.12	WASTE MANAGEMENT: 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
4.13	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
4.14	WASTE MANAGEMENT: What supplies/systems are available for	Containers for sharps	1
	WASTE MANAGEMENT? (Please check all that apply)	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 Don't know	1
4.16	WASTE MANAGEMENT: Is there a dedicated area(s) available for	Yes	7
4.10	reprocessing of non-critical patient care equipment on the wards?	No	0
	(This space can also be a dedicated portion of another ward)	Don't know	0
4.17	WASTE MANAGEMENT: Is there a program to monitor the quality		7
4.1/	of effluent/wastewater in your	Yes	0
	HCF?	Don't know	0
			0
5. T	RAINING & EDUCATION OF EVS (EVS/CLEANING) STAFF		
5.1	Is your EVS/cleaning staff in-house or outsourced?	Classroom	N/A
		On the job training	N/A
		E-learning	N/A
		Manuals	N/A
5.2	Does your HCF have a dedicated budget for training EVS/cleaning	No training received	7
	staff?	Other (please specify)	0
		Don't know	0
5.3	What types of training do EVS/cleaning staff receive? (Please check	Classroom	1
	all that apply).	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	Yes	7
	trainers?	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	Yes	8
	EVS/cleaning staff?	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	Door your healthcare facility propers regular additional training for	No further additional	0
5.9	Does your healthcare facility propose regular additional training for EVS/cleaning staff (not including the training upon hiring)?	training	_
		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
5.10	Do EVS/cleaning staff have the possibility to complete certification	No available certification	0
	programs?	Institutional certification	3
		Regional/national certification	7
		Don't know	0
5.11	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
5.12	Are there established pathways for EVS/cleaning staff to advance into management roles?	Yes	8
		No	0
		Don't know	0
5.13	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. N	Ionitoring and Feedback of EVS Staff	<u> </u>	
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 is feedback 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	No feedback is given	0
	staff?	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. F	Reminders in the Workplace	11	
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)	Yes, always	7
	for cleaning staff?	Yes, sometimes	3
		No	0
		Don't know	0
		Yes, always	7
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
' .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

8.1	How often do EVS/cleaning staff and nursing staff have meetings?	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	Yes, always	7
	language?	Yes, sometimes	3
		No	0
		Don't know	0
		Yes, always	7
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
	Is innovation in the field of HEH encouraged in your establishment?	Yes, often	7
8.6	This can include changes and improvement in products, techniques, workflow, social innovation, etc.	Yes, sometimes	1
		No	0
		Don't know	0
8.7	Does your institution conduct team building activities for	Yes	7
	EVS/cleaning staff?	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:		N/A
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
		Global Score	