

Poor cleaning can be costly

STATE-OF-THE-ART CLEANING EQUIPMENT DOESN'T MEAN HOSPITAL ADMINISTRATORS SHOULD CUT BACK ON CLEANING PROCESSES OR STAFF, WRITES MURRAY McDONALD.



THE health care and aged care industry is aware of the importance of cleaning processes and the expectation that they are to be performed at the highest standard. The elderly and sick are more susceptible to infections, high frequency of spills and danger areas include high traffic areas, such as corridors, waiting rooms, bathrooms and operating theatres. Daily cleaning is not just a priority but essential.

It is important to recall what a poor cleaning process may cost your business and the difficulties reparations can present.

A poor cleaning process can be as simple as not implementing a regular and consistent regime. It is important management understands that having "state of the art" cleaning equipment should not mean cutting cleaning process rigor or staff.

Poor cleaning can compromise the health and safety of staff, patients and visitors. In turn, this can result in costly recuperations, time consuming litigation,

interruptions to productivity, and possibly the need for fill-in staff.

FLOW ON EFFECTS

Gastro outbreaks and superbugs are some of the most common consequences of a poor cleaning process. These affect patients but can also flow-on to other parts of a facility's operations. Outbreaks can lead to ward and room closures putting a strain on resources. More staff may need to be brought in or reallocated to deal with the issue, additional medical supplies may be needed and there is the added cost and time of ensuring all infected areas go through a "deep clean".

The UK hospital system is familiar with the costs of a poor cleaning process. According to the General Director of the Cleaning and Support Services Association UK, Andrew Large, the UK has one of the highest rates of hospital outbreak and infections with one in four patients becoming infected. In 2008, 5000 deaths resulted from Hospital Acquired Infections (HAI).

BREACH OF REGULATIONS

Hospitals and aged care facilities have a duty of care. Breaching regulations pertaining to cleaning and occupational health and safety can result in fines, loss of accreditation and credibility through negative media exposure and possible law suits against individuals and facilities.

Enforcing strict rules and regulations for quality cleaning can result in less outbreaks and infections. Dutch Working Party Infection Prevention Hygienist, Thea Daha, says the Dutch have one of the cleanest hospital environments. They claim zero infection rates and some of the strictest cleaning policies such as a rigorous "search and destroy" policy. In the short term, their costs in policy and prevention is around 2.8 million Euros per year, which includes costs for isolation rooms, equipment, culture materials and microbiological testing. In comparison, Large says the UK spends around 1 billion pounds responding to outbreaks and Hospital Acquired Infections (HAI).

Implementing prevention policies can be costly but the immediate as well as the flow on effects from continuous outbreaks can cost much more.

STAFF MORALE

Infections and outbreaks can also effect staff morale. Staff members may feel less inclined to work at facilities with inferior inadequate cleaning protocols, causing higher recruitment costs. **HA**



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