

# Common Failure Points in Environmental Infection Prevention

When baking chocolate chip cookies, omitting just one ingredient can make your cookies taste and look terrible. Without baking soda, your cookies will be flat. Without chocolate chips, they miss the defining flavour. Salt may not seem important, but that seemingly minor ingredient adds depth to the taste of cookies. Much like baking, the effectiveness of environmental infection prevention loses its reliability when one step is skipped or done incorrectly. Using the same mop for several patient rooms may not seem like a big deal, but without the change of cleaning supplies, HAIs may be spread among rooms. This article will explore two common failure points in Environmental Services (EVS) and ways infection prevention practitioners can keep them from occurring.



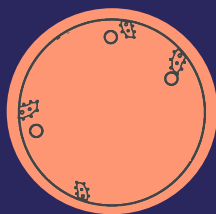
## Common Failure Point: The Disinfectant

There are several aspects regarding the disinfectant that can create a failure point, leading to increased infection transmission and mitigation failure. It's a common point of failure too—a study showed that in a select group of hospitals, 49% of surfaces were cleaned, while 51% were missed.<sup>1</sup> Why were so many areas missed during cleaning? There are a few reasons to consider.

**A study showed that in a select group of hospitals, more than half of the surfaces were not cleaned.**

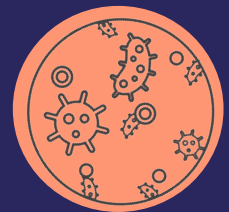
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**Define clean.** First, there is a big difference between biologically clean and a clean appearance. Pathogens such as MRSA and *C. diff* can live for months on surfaces without being visible to the naked eye. That's one reason that pathogens may be missed during cleaning—the surface, such as a bedside table, looks clean yet harbours dangerous pathogens.

**Understand correct contact time.** Another common failure point is failing to use the correct contact time for disinfectants. There is a relationship between how long a chemical needs to be on the surface to effectively destroy bacteria. When the product needs to remain on surfaces undisturbed, per the manufacturer's label, EVS staff may be too impatient and wipe it before it has time to kill the organisms it's designed to fight. If the contact time is too long, it can reduce productivity and impede turnover time.

**Follow dilution properly.** Some disinfectants are complicated to use as well. When EVS employees are using products that require dilution, it creates a window of opportunity for error, and makes it more labor intensive. It's possible for staff to make it stronger thinking it will work better, but in fact, this can create regulatory and compliance issues.

**Check the efficacy of your disinfectants.** Many hospitals use disinfectants that simply can't break down biofilm, which is where 99% of pathogens live. Effective disinfectants need to be formulated to cut through biofilm in order to kill pathogens. There are evidence-based chemicals in Sodexo's Protecta® program have the power to break down biofilm.



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## Common Failure Point: Reusable Cleaning Materials

While medical equipment such as masks, IVs and gloves are used once and disposed of. When it comes to cleaning supplies, that's not always the case because some hospitals have in-house laundry or contract with outside laundry services. Reusing materials such as mops can lead to cross contamination.

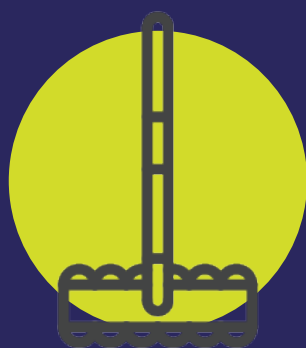
There are other aspects to microfiber mops that can cause them to become a common failure point. Hospital staff may not realize that laundering microfiber—even once—changes the structure of the fibers. They can “melt” together, causing the entire wiping material to lose absorbency and effectiveness in removal of particulate matter and pathogens.

Quat binding is another phenomenon that can happen with both microfiber and cotton towels. In this case, quat-based products have a tendency to bind chemically to the fibers, making it unavailable to the surface to be cleaned, thus reducing efficacy.

Single-use mops and wipes also pose no additional impact when you consider excess water usage, energy expenditure and labour associated with laundering, as well as using less chemicals that drain to water tables. There are additional benefits to disposable cleaning products including:

- **Reduced risk of cross contamination**
- **Ready-to-use and less risk of user error**
- **Reduces inventory issues**
- **More effective at pathogen removal**

A systematic, bundled approach to environmental infection prevention is the answer to preventing these common failure points from happening. Share with your hospital leaders the benefits of a standardized approach to infection prevention through Protecta from Sodexo—your partner in healthcare environmental service excellence.



single-use mops are

**3x**

more effective than reusable mops  
at removing pathogens

#### REFERENCE:

1. Carling PC, Parry MF, Von Beheren SM; Healthcare Environmental Hygiene Study Group. Identifying opportunities to enhance environmental cleaning in 23 acute care hospitals. *Infect Control Hosp Epidemiol.* 2008 Jan;29(1):1-7. doi: 10.1086/524329. PMID: 18171180. Retrieved from <https://pubmed.ncbi.nlm.nih.gov/18171180/>