

Activity Cards

Module 4: Cleaning and Disinfection of a Resident Room

Instructions for facility educators: Select one or more activities to engage your EVS staff in additional learning. Activities may be incorporated into regular trainings or used in other formats. You may also use this tool to orient new EVS Managers or Infection Preventionists on your team.

All activities are meant to be opportunities for collaboration where everyone is able to learn. As the instructor, it is critical to maintain a supportive teaching environment. Use this time to improve processes and offer support to staff so that they will feel comfortable coming to leadership when needed. There are prompts throughout to help you engage staff in discussion. Happy training!

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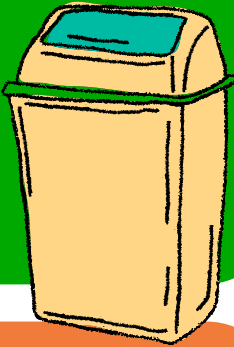
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Proper Cleaning and Disinfection Order	
Purpose: Reinforce proper cleaning and disinfection process order. Staff will put steps in chronological order and identify any gaps in their cleaning and disinfection practices.	
Preparation time: 5-10 minutes	Preparation and materials: <ul style="list-style-type: none">• Gather copies of “<i>Proper Cleaning and Disinfection Order</i>” worksheet (See page 2 below or the corresponding slide). Note: If using the worksheet, there is a corresponding answer key on page 3.• Pens/pencils
Activity time: 15-20 minutes	
Instructions: <ol style="list-style-type: none">1. Provide staff with the “<i>Proper Cleaning and Disinfection Order</i>” worksheet.2. You may decide to divide your group into partners or smaller teams for this activity.3. Remind staff they can stop the spread of germs by following a standard cleaning process when cleaning a resident room. Ask staff to place the cleaning and disinfection steps in order.4. Staff can discuss each practice in smaller teams for 3-5 minutes.5. Come back to the larger group and have one or more groups share their responses. In a larger group, you may ask for volunteers to provide answers.6. Review correct answers with the group and provide any additional comment or discussion incorporating your facility’s policy on cleaning resident rooms.	

Proper Cleaning and Disinfection Order

Place the cleaning and disinfection steps in order.

Pull trash & linen



High & low dust



Damp-mop the floor



Clean high-touch surfaces



Perform hand hygiene



Dust-mop the floor



Perform hand hygiene



Clean bathroom



Make bed, use cleaning supplies, & inspect



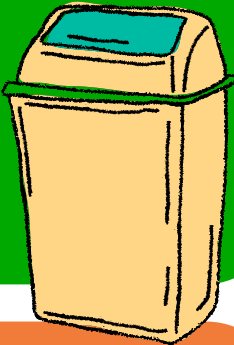
Proper Cleaning and Disinfection Order

Place the cleaning and disinfection steps in order.

Answer Key

Pull trash & linen

2



High & low dust

3



Damp-mop the floor

8



Clean high-touch surfaces

4



Perform hand hygiene

1



Dust-mop the floor

6



Perform hand hygiene

9



Clean bathroom

5



Make bed, use cleaning supplies, & inspect

7



High-Touch Surfaces: Identifying Who Cleans What

Purpose: Ensure staff are comfortable identifying high-touch surfaces and who is responsible for cleaning what items.

Preparation time:
5-10 minutes

Activity time:
15-20 minutes

Preparation and materials:

- Gather copies of “*High-Touch Surfaces: Identifying Who Cleans What*” worksheet (See page 2 below or the corresponding slide). Note: If using the worksheet, there is a corresponding answer key on page 3.
- Pens/pencils

Instructions:

1. Provide staff with the “*High-Touch Surfaces: Identifying Who Cleans What*” worksheet.
2. You may decide to divide your group into partners or smaller teams for this activity.
3. Give staff 8-10 minutes to identify the high-touch surfaces in your facility and list the staff who are responsible for cleaning each item.
4. Review the responses as a group. Ensure staff are familiar with your facility’s policy on who cleans what and how frequently each item should be cleaned. You can ask questions like:
 - a. *Who cleans the [specific high-touch surface]?*
 - b. *How frequently should you clean [specific high-touch surface]?*
 - c. *What should you do if you notice an item is not being cleaned as directed?*

Note: Responses for *who cleans what* may include EVS, nursing, physical/occupational therapy, respiratory therapy, and other staff, depending on what high-touch surfaces you wish to focus on. You may also add additional high-touch surfaces beyond what is listed on the worksheet.

High-Touch Surfaces: Identifying Who Cleans What

Circle the high-touch surfaces in your facility. Who cleans each surface?



ABHR dispenser _____

Bathroom _____

Bedrail _____

Call button _____

Charting area _____

Feeding pump _____

Floor _____

Glucometer _____

IV pole _____

IV pump _____

Light switch _____

Medication cart _____

Oxygen tank _____

Patient bed scale _____

Patient lift _____

Patient linen _____

Pill crusher _____

PPE container _____

Privacy curtains _____

Room door handle _____

Room/toilet sink _____

Side table _____

Tray table _____

TV remote _____

Ventilator _____

Vitals machine _____

Wound care cart _____

List other high-touch surfaces
and responsible staff:



**PROJECT
FIRST LINE**
CDC's National Training Collaborative
for Healthcare Infection Prevention & Control



What Would You Do?: Understanding Proper Infection Prevention and Control (IPC) Practices

Purpose: Ensure staff understand proper cleaning and disinfecting IPC practices. Staff will state whether they would or would not engage in IPC practice statements and provide rationale to demonstrate training understanding

Preparation time:
10 minutes

Activity time:
15-20 minutes

Preparation and materials:

- Gather copies of “*What Would you Do?*” worksheet (See page 7 below or use the corresponding slideset embedded in the Module 4 slides). Note: If using the worksheet, there is a corresponding answer key on page 8.

Instructions:

1. Distribute copies of worksheet or present slide set to staff.
2. You may decide to divide your staff into partners or smaller teams for this activity.
3. Ask staff if they *would* or *would not* perform cleaning and disinfecting prompts based on IPC practices learned in the training.
4. Have individual staff or groups compete to see who can raise their hand first to answer the question and provide rationale to their answer.
5. Engage staff in discussion around rationale.

What Would You Do?: Understanding proper infection prevention and control practices



Mark if you would (“Yes”) or would not (“No”) perform each of the cleaning and disinfecting practices prompts. Explain why you would or would not perform each practice.

#	Question	Yes/No	Rationale
1	Would you clean from clean areas to dirty?		
2	Would you clean from high surfaces to low and top to bottom?		
3	Would you change the curtains in a resident’s room daily?		
4	Would you store soiled equipment on the inside of the EVS cart?		

What Would You Do?: Understanding proper infection prevention and control practices



Mark if you would (“Yes”) or would not (“No”) perform each of the cleaning and disinfecting practices prompts. Explain why you would or would not perform each practice.

#	Question	Yes/No	Rationale
5	Would you say that all facilities have the same high-touch surfaces?		
6	Would you place a used toilet brush in the shower?		
7	When cleaning each resident care area, would you start by cleaning the direct resident area or shared equipment and common surfaces?		
8	When cleaning each bed space, would you start from the headboard and then move on to the footboard?		

What Would You Do?: Understanding proper infection prevention and control practices

Answer Key

#	Question	Yes/No	Rationale
1	Would you clean from clean areas to dirty?	Yes	We should always move from clean areas to dirty areas. For example, begin with common surfaces before moving to the resident area, and restrooms should always be cleaned last.
2	Would you clean from high surfaces to low and top to bottom?	Yes	Clean from high to low surfaces, top to bottom. Clean bed rails before bed legs, or high-touch surfaces before floors.
3	Would you change the curtains in a resident's room daily?	No	Consider changing curtains when visibly soiled and per a set schedule. Refer to facility policy.
4	Would you store soiled equipment on the inside of the EVS cart?	No	Items like medical equipment used during resident care should be removed. Follow facility's equipment cleaning policy to ensure that shared medical equipment are cleaned and disinfected appropriately.

What Would You Do?: Understanding proper infection prevention and control practices

Answer Key

#	Question	Yes/No	Rationale
5	Would you say that all facilities have the same high-touch surfaces?	No	Facilities may differ in what surfaces are considered high-touch. High-touch surfaces are surfaces and equipment that are most likely to be contaminated by germs. These are surfaces that healthcare workers and residents touch more often, and therefore must be properly cleaned and disinfected regularly to prevent spreading germs.
6	Would you place a used toilet brush in the shower?	No	Placing a used toilet brush in the shower can lead to germs on the toilet brush spreading to the shower and putting your residents at risk.
7	When cleaning each resident care area, would you start by cleaning the direct resident area or shared equipment and common surfaces?	No	We start by cleaning objects distant from the resident care area such as common surfaces like doorknobs or light switches, then move to items touched during resident care like bedrails or tray tables.
8	When cleaning each bed space, would you start from the headboard and then move on to the footboard?	Yes	When cleaning each bed space, start from the headboard and then move on to the footboard.

