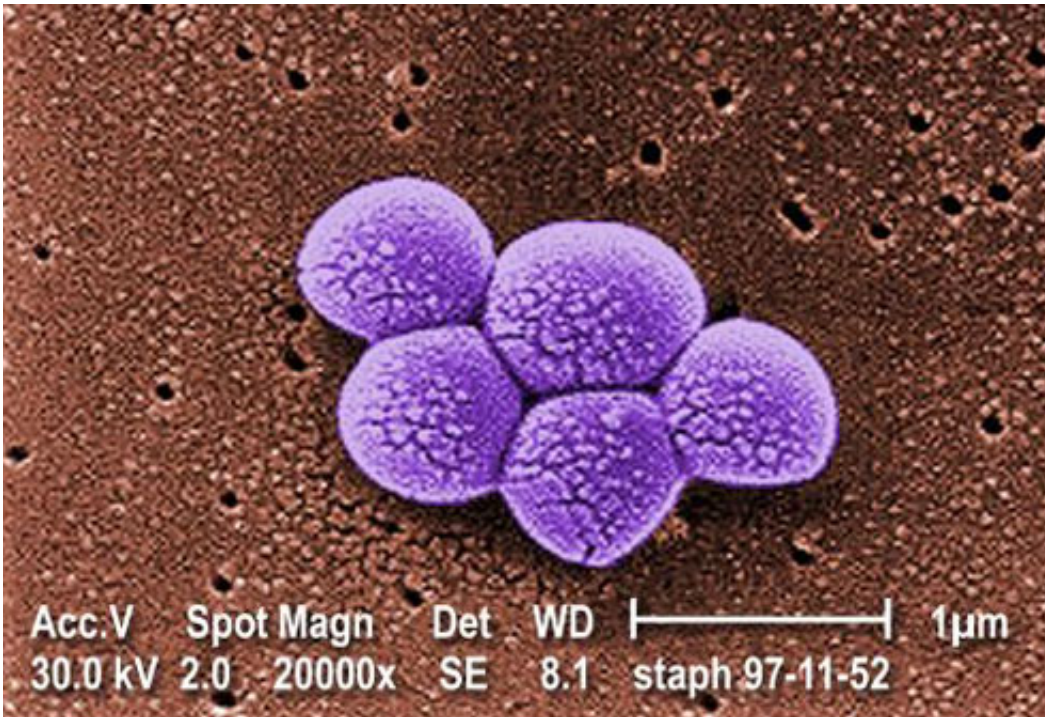


Researcher questions hospital cleanliness

April 1 2014, by Rosie Hales



A microscope image of methicillin-resistant *Staphylococcus aureus*, or MRSA. Credit: Centers for Disease Control and Prevention.

(Medical Xpress)—A Queen's researcher has found that nearly 40 per cent of infection control practitioners do not believe their hospital is sufficiently clean.

The study, led by Queen's researcher and professor Dick Zoutman, examined how the working relationship between Infection Prevention and Control (IPAC) teams and Environmental Services (EVS) teams

impacted antibiotic-resistant organism (AROs) rates. AROs, such as nosocomial methicillin-resistant *Staphylococcus aureus* (MRSA) infection, can be spread from a healthcare practitioner to a patient through something as simple as lifting the patient onto a bed.

"It is a source of concern for me that 40 per cent of infection control practitioners believed their [hospital](#) wasn't clean enough for infection control needs," says Dr. Zoutman. "I also think that it's important to note that a good working relationship between IPAC and EVS results in reduced infections."

Starting in 2011, lead infection control professionals in hospitals across Canada completed an online survey that assessed the working relationship between the IPAC and Environmental Services (EVS). The survey assessed cleaning collaborations, staff training, hospital cleanliness and ARO infection rates.

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The study had an extremely high response rate of 58.3 per cent and the results identify deficits in the adequacy of cleaning [staff training](#) and hospital cleanliness.

"Overall, this study shows that the environment of a hospital plays a huge role in healthcare and [infection control](#)," says Dr. Zoutman. "Cleaning is a very expensive part of a hospital budget – about three to five per cent - and we had no baseline research to analyze our approach to cleanliness."

A third of the IPAC respondents did not rate EVS cleaning staff as adequately trained to clean to standards. In one-fifth of hospitals, it was noted that IPAC and EVS did not frequently collaborate on cleaning

practises.

"The message we can take away from this study is that hospital administration and provincial ministries of health need to pay more attention to hospital environmental services," says Dr. Zoutman. "I don't think the solution is to pour more resources into it, though. We need to apply some science to the art of cleaning a hospital by improving our processes and auditing these processes to make sure we are achieving the desired results."

Provided by Queen's University

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