CONCEPT

Hospital Environmental Cleaning and Disinfection: Terminal Cleaning, ATP Audits and EVS Quality

13 – 17 September 2027
London - Central London four-star



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Ref: 766_19670 **Date:** 13 – 17 September 2027 **Location:** London - Central London four-star **Fees:** 23000 SAR

Introduction:

Hospital environmental cleaning and disinfection fails quietly: disinfectant is wiped off before its contact time, bed rails and IV poles are missed at discharge, isolation rooms are turned over in a hurry and nobody measures whether surfaces are actually clean. This Core Concept course trains environmental services managers, cleaning supervisors and infection prevention liaisons to set area-specific cleaning and disinfection procedures, choose disinfectant classes, run terminal and theatre cleaning, verify results with fluorescent markers and ATP readings, and manage staff and contractors. Participants produce an EVS Quality Programme for a case hospital.

Course Objectives:

- Explain how contaminated surfaces contribute to healthcare-associated infection and classify hospital areas by cleaning and disinfection risk
- Select disinfectant classes, dilutions and contact times, microfibre equipment and a colour coding scheme for each area type
- Apply daily, discharge, terminal and isolation-room cleaning procedures and manage blood and body fluid spills
- Set cleaning routines for operating theatres and critical units and judge where UV-C or hydrogen peroxide vapour adds value
- Verify cleaning quality with visual audits, fluorescent markers and ATP bioluminescence and feed results back to cleaning teams
- Plan EVS staffing, operative competency and contractor service levels within an EVS quality programme

Target Audience:

- Managers accountable for hospital environmental services departments and cleaning budgets for clinical areas
- Supervisors responsible for cleaning teams, ward rotas and room release after patient discharge
- Infection prevention liaisons who advise on disinfectants, isolation-room cleaning and outbreak terminal cleans
- Theatre and critical care unit managers responsible for area cleanliness between cases and shifts
- Facility and contract managers who monitor outsourced cleaning providers against service levels
- Quality and patient safety staff who report cleaning audit results to committees

Course Outline:

Day 1: The Hospital Environment and Healthcare-Associated Infection

- Environmental Reservoirs: C. difficile Spores, MRSA, VRE and Gram-Negative Survival on Surfaces
- Patient-Zone Contamination and Hand-to-Surface Transmission Pathways
- Cleaning Versus Disinfection Versus Sterilisation: Definitions and Risk-Based Area Categories
- EVS Department Roles: Manager, Supervisor, Cleaning Operative and IPC Liaison
- EVS Current-State Walk-Round Using an Environmental Cleaning Programme Assessment Tool

Day 2: Disinfectant Chemistry, Cleaning Equipment and Colour Coding

- Disinfectant Classes: Chlorine Releasers, Quaternary Ammonium, Hydrogen Peroxide, Alcohols and Peracetic Acid
- Label Contact Time, Wet Time, Dilution Verification and Material Compatibility Checks
- Microfibre Cloths and Flat Mops Versus Cotton: Laundering Cycles and Pre-Impregnated Wipes
- Colour Coding Scheme for Cloths, Mops and Buckets by Area Risk
- Cleaning Trolley Layout, Two-Bucket Method and Chemical Dispensing Stations

Day 3: Occupied-Room, Discharge and Isolation-Room Procedures

- High-Touch Surface Inventory: Bed Rails, Tray Tables, Call Bells, IV Poles and Monitors
- Daily Occupied-Room Cleaning Sequence: Clean-to-Dirty and High-to-Low Rules
- Discharge and Terminal Cleaning Checklist with Curtain Change and Mattress Integrity Check
- Isolation-Room Cleaning for Contact, Droplet and Spore-Forming Organisms
- Blood and Body Fluid Spill Kits: Absorbent Granules, Chlorine Strength and Clean-Up Sequence

Day 4: Critical Areas, No-Touch Technology, Verification and Service Delivery

- Operating Theatre and Critical Unit Cleaning: Between-Case, End-of-Day and Weekly Routines
- No-Touch Room Decontamination Overview: UV-C Devices and Hydrogen Peroxide Vapour
- Cleaning Verification: Visual Audit, Fluorescent Marker Removal and ATP Bioluminescence RLU Readings
- EVS Staffing Model: Productive Hours, Task Times, Shift Rosters and Competency Records
- Outsourced Cleaning Contracts: SLA Schedules, KPIs, Rectification Times and Deductions

Day 5: Inspection Walkthrough and the EVS Quality Programme

- Case Hospital File: Rising C. difficile Cases and Failed Discharge Room Audits
- Terminal Cleaning Inspection Walkthrough of a Mock Isolation Room with Fluorescent Marking
- Audit Results Analysis and Corrective Action Plan for the Case Hospital
- EVS Quality Programme Drafting: Procedures, Audit Calendar, Staffing and SLA Scorecard
- Programme Defence Before a Mock Infection Control Committee

Skills You Will Gain:

- Environmental Risk Zoning
- Disinfectant Selection
- Contact Time Control
- Terminal Cleaning Supervision
- Spill Response Management
- Cleaning Verification Auditing
- EVS Workforce Planning
- Cleaning Contract Oversight

Why Attend This Course:

- Return with an EVS Quality Programme for a case hospital covering procedures, audit calendar, staffing and an SLA scorecard
- Replace visual sign-off alone with fluorescent marker and ATP evidence that stands up at the infection control committee
- Reduce room release disputes between nursing, bed management and cleaning teams with clear discharge cleaning criteria
- Compare cleaning practice with peers from public, private, specialist and long-term care facilities

Conclusion:

Surfaces around the patient stay safe only when the right disinfectant stays wet for long enough, every high-touch item is reached and someone checks the result. The course moves from environmental reservoirs and risk zoning, through disinfectant classes, microfibre and colour coding, to daily, terminal and isolation-room procedures and spills, then to theatre cleaning, no-touch technology, verification, staffing and contracts. The final day applies these methods in an inspection walkthrough and produces an EVS Quality Programme for a case hospital.