

Sanitation, Hygiene, Waste Management in a Hospital

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Modes of transmission

- Respiratory droplets- from cough, sneeze, exhale
- Touching
 - a) Patients followed by touching your own mouth, nose, eyes
 - b) Contaminated surfaces/objects followed by touching your own mouth, nose, eyes

Prevention

1. Hand hygiene
2. Disinfection
3. Personal protective equipment

Hand Hygiene

Frequent and proper hand hygiene is of utmost importance

- i. If hands are not visibly dirty use 70% alcohol based hand rub/ 0.05% chlorinated water (liquid bleach) 30 sec
- ii. If visibly soiled, use soap and water for 1 minute



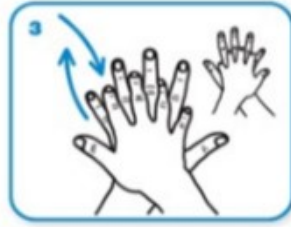
Wet hands with water



apply enough soap to cover all hand surfaces.



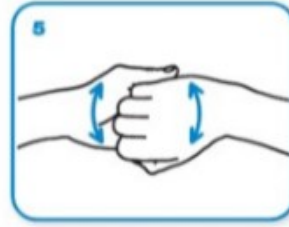
Rub hands palm to palm



right palm over left dorsum with interlaced fingers and vice versa



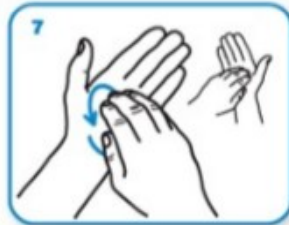
palm to palm with fingers interlaced



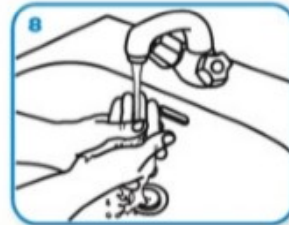
backs of fingers to opposing palms with fingers interlocked



rotational rubbing of left thumb clasped in right palm and vice versa



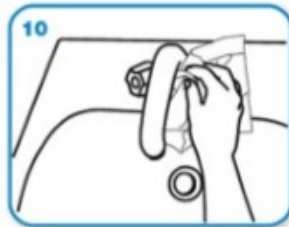
rotational rubbing, backwards and forwards with clasped fingers of right hand in left palm and vice versa.



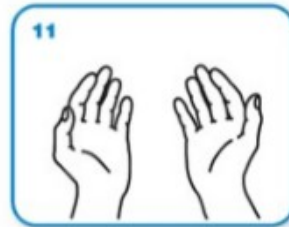
Rinse hands with water



dry thoroughly with a single use towel



use towel to turn off faucet



...and your hands are safe.

Practice hand hygiene

- i. Before putting on and after removing PPE
- ii. When changing gloves
- iii. After contact with a patient or their waste and respiratory secretions
- iv. Before eating
- v. After using the toilet

Disinfection

Disinfection ensures rapid clearance of COVID-19 virus. No extra measures required.

- Hand hygiene facilities should be available to all staff, patients and their family members
- Toilets should be disinfected with bleach by cleaners using bleach (0.5% chlorine solution). Care should be taken to prevent splashing
- Disinfect surfaces by 0.5% sodium hypochlorite. Liquid soap can be added to the cleaning solution

(Note: 0.5% sodium hypochlorite/ free chlorine should contain 5000ppm of chlorine. It should be freshly prepared everyday and stored in a cool dark place)

Where ever applicable, do not forget to clean the following using 70% alcohol or 0.5% sodium hypochlorite whichever applicable

- Telephone
- Mobile phone/pager
- Door knobs / handles
- Keypad & Mouse
- Chair arms (including wheel chairs)
- Hand rails
- Side rails of stretchers

Handling Soiled Linen

Spill/Single use

- Spread bleaching powder over the spill or soiled area(over and around it), wait for 30 mins. Sweep, collect and dispose. You can also use 0.5% bleach for the same
 - Soiled linen should be placed in labeled, bags (after removing solid excrement) and put in a covered bucket to be disposed if its single use.
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- For reusable linen
 1. Soak in hot water with detergent in a large drum and stirred with a stick carefully to prevent splashing. Later, this drum should be emptied and linens should be soaked in 0.5% chlorine for 30 minutes followed by rinsing with clean water and routine sun-drying
 3. For machine wash, washing with warm water at 60–90°C (140–194°F) with detergent should be done. This is followed by usual drying.

Cleaning and disinfection of articles in contact with human waste

- If the patient is unable to use a latrine, excreta should be collected in either a diaper or a clean bedpan and immediately and carefully disposed of into a separate toilet or latrine used only by suspected or confirmed cases of COVID-19
- If a bedpan is used, after disposing of excreta from it, the bedpan should be cleaned with a neutral detergent and water, disinfected with a 0.5% chlorine solution, and then rinsed with clean water

Mandatory Precautions to be taken :-

- Surfaces (Walls, tiles, table top, door handles etc.) in all environments in which COVID-19 patients receive care (treatment units, community care centers) should be cleaned with 0.5% chlorine solution at least once a day and when a patient is discharged.
- Toilet should be cleaned and disinfected with 0.5 % chlorine solution twice in a day with wearing PPE.
- Handwashing with soap should be perform using steps minimum 5 times in a day
- 70% ethyl alcohol to disinfect small areas between uses, such as reusable dedicated equipment (for example, thermometers);

Cleaning Protocol - Bus / Institutional Vehicles

- All seats, seat handles, handrails, window rails, windows, doors to be cleaned after every trip. Ventilate for 30 minutes.
- Floor of the bus, tyres to be cleaned twice a day.
- Body of the bus to be wiped everyday morning. One round of 7% Lysol spray in the evening.

PPE

- All staff must wear gloves and medical mask at all times.
- Staff directly in contact with patient or involved in procedures like intubation will require complete PPE
- All staff dealing with soiled clothes, linen of patients suspected of COVID-19 must use PPE

Standard precaution for ALL PATIENTS

- Ensure hand and respiratory hygiene
- Everyone should cover their mouth and nose while coughing/sneezing
- Offer masks to suspected patients even in waiting rooms
- Practice hand hygiene after contact with respiratory secretions- both patient and healthcare worker
- Do not touch nose, mouth, eyes with bare hands/ potentially contaminated gloves
- Educate patient caregivers of the same

Note to nursing staff

- Please ensure 1 meter distance is maintained between beds of patients
- If a large number of patients accumulate practice cohort nursing i.e. put patients with similar symptoms together

References

- Infection prevention and control during healthcare when COVID-19 is suspected- World Health Organization (interim guidance 19 march 2020)
- Water, sanitation, hygiene, and waste management for the COVID-19 virus- unicef (interim guidance 19 march 2020)
- WHO guidelines on steps of handwashing