

COVID-19 (coronavirus) Infection Control Treatment Programme

How to make your workplace safe for staff



WHO (World Health Organisation) advise *'Even in the absence of COVID-19 cases in the establishment, it is recommended that hygiene services be enhanced? Special consideration should be given to the application of cleaning and disinfection measures in common areas (restrooms, halls, corridors, lifts, etc.) as a general preventive measure during the entire COVID-19 epidemic. Special attention should be given to objects that are frequently touched such as handles, elevator buttons, handrails, switches, doorknobs, etc. '*

Any sanitisation/ disinfection/decontamination treatment program should be part of a wider Infection control policy that will include.

- Risk assessment and formal policy
- Education
- Social distancing
- Only essential travel
- Cleaning regime
- Disinfectant program

► Covid-19 (Coronavirus) Specialist Infection Control/Sanitisation/disinfecting Programme

NBC have 27 years' experience delivering bird, pest and infection control services nationally. Our people are RSPH (Royal Society for the Protection of Health) level 2 qualified and are equipped with the latest equipment and germicide chemical products. We have developed an effective strategy using our knowledge, experience and guidance from Public health England to offer a specialist Covid-19 (Coronavirus) sanitisation/ disinfection/decontamination service to protect our client's people from infection and enable businesses to continue to operate safely.

Treatment Process

Our sanitisation/ disinfection/decontamination process is much more than cleaning as it is designed to neutralise harmful infectious particles on all surfaces that even the most thorough clean could not hope to achieve.

1. **Touchpoints.** Office desks, key pads and telephones can have 400 times more germs than a toilet and as 81% of infections result from contact these areas are high risk and as well as other regularly touched surfaces such as switches, door handles, buttons and kitchens are given attention with disinfectant applied through electrostatic sprayers. This equipment allows for a thorough application of very fine particles, surfaces are there for not soaked which prevents damage to electrical equipment.
2. **Interior Surface spray.** Toilets are sprayed with a high volume of germicide through a pressurised course sprayer.
3. **Space ULV fogging application.** Rooms are filled with ultra-fine micro particles of germicide that remain in the air for a prolonged period killing any harmful infectious particles that are in the air and when they land on surfaces neutralise any harmful germs or viruses. This method of application is recognised by experts as the most effective method, it fills the air, envelops furnishings and clings to surfaces resulting in a thorough application which does not need to be wiped off or hand cleaned.
4. **Exterior misting.** Exterior surfaces, plant and equipment of human congregation or have the potential for human contact are misted with a mist blower. Not to be confused with fogger, mist blower particles are larger and heavier and are unlikely to get blown away in the wind and are more able to wet surfaces sufficiently in this environment to provide an effective barrier.

5. **Completion of report.** The supervisor carrying out the treatment will complete a digital report detailing works and provide any further recommendations. This will be emailed real time to client as confirmation.
6. **Certificate of confirmation.** The supervisor will sign the disinfecting treatment register and/or a certificate will be supplied by the contract manager.

Programme Frequency

Many service providers are making exaggerated claims with regards to the products that they are using and their residual value, e.g. how long they last on a surface. Whilst test sheets of trials in laboratories may show extended life, independent research has shown in the real world where surfaces are subject to contact, wear and UV light this rarely extends beyond a week.

The frequency of a program should be calculated according to a risk assessment as part of an infection control policy. Severity x Likelihood. Prior to the COVID-19 pandemic we advised monthly treatments however as the likelihood and severity has increased the overall risk rating to high, we are now recommending in most situations' weekly treatments.

Germicide Disinfectant Products

We use only hospital grade disinfectant products effective against enveloped viruses and Certified to EN 14476, 1276, 14675, 13604 (The main Viricidal Standards). Colourless and odourless they are safe to use on all surfaces, Non-Hazardous, Non-Toxic and Bleach Free. Essential in fighting cross-infection.

▶ Best Practice-Government Guidance

The advice in this document can be applied to any non-healthcare setting such as workplaces, offices, waiting rooms, hotel rooms, student accommodation and boarding schools where a possible or confirmed COVID-19 case has spent time while symptomatic. For the purposes of this guidance, a possible case of COVID-19 is someone undergoing testing but COVID19 has not yet been excluded, and a confirmed case is someone known to have a positive laboratory test for COVID-19. The guidance describes the cleaning required, the appropriate disposal of materials, the disinfection of equipment and hard surfaces, and the personal protective equipment (PPE) that should be worn. Previous experience of new coronaviruses (SARS-CoV & MERS-CoV) has been used to inform this guidance. The risk of infection transmission depends on numerous factors, including the type of surfaces contaminated, the amount of virus shed from the individual, the time the individual spent in the setting and the time since the individual was last in the setting.

The infection risk from environmental contamination will decrease over time, but it is still unclear at what point there is no risk of transmission from the environment.

Sanitising Clean - Immediate response and attendance

In response to the government's suggestion that where possible, companies encourage home working to reduce/delay the spread of COVID-19; we have been working closely with our suppliers to identify products that may help reduce the risk of exposure to this virus. As a result, we have been recommended an additional level of cleaning using a fogger. This product helps keeps rooms/areas (where dispersed), sterilised for up to 7 days as long as nobody re-enters the room who has subsequently displayed any symptoms of illness. Fogging is a highly effective method and the product sprayed is a powerful broad-spectrum germicide and all surface product on the market. We are providing a 24/7 call out service with our specialist sanitising clean and disinfecting fogging service focusing

on all surfaces listed under our process section above. Once completed, our specialist clean comes with a full high-level written report accompanied by photo from site to provide reassurance of the work carried out.

Personal Protective Equipment - (PPE)

The minimum PPE required to be worn for decontaminating an area where a possible or confirmed case has been includes a full protective body suit, face masks, disposable gloves and disposable overshoes. Hands should be washed thoroughly with soap and water after all PPE has been removed. If a risk assessment of the setting indicates that a higher level of contamination may be present (for example where unwell individuals have slept such as a hotel room or boarding school dormitory) or there is visible contamination with body fluids, then the need for additional PPE such as a full-face visor should be considered. The local Health Protection Team can advise on this. Most other settings where the person has spent shorter periods of time (such as a waiting room, office space, restaurants, gyms) are likely to have lower levels of contamination and therefore the risk of onward transmission of infection will be lower.

Cleaning and Disinfection

Public areas where a symptomatic individual has passed through and spent minimal time in (such as corridors) but which are not visibly contaminated with body fluids can be cleaned as directed by any existing workplace risk assessment or manufacturer's instructions on the safe use of their cleaning products.

All surfaces that the symptomatic person has come into contact with must be cleaned and disinfected, including:

- Objects which are visibly contaminated with body fluids.
- All potentially contaminated high-contact areas such as bathrooms, door handles, telephones, grabrails in corridors and stairwells.

Use disposable cloths or paper roll and disposable mop heads, to clean and disinfect all hard surfaces, floors, chairs or door handles and sanitary fittings in the room, following one of the two options below:

- Use either a combined detergent disinfectant solution at a dilution of 1000 parts per million available chlorine.

or

- A household detergent followed by disinfection (1000 ppm av.cl.). Follow manufacturer's instructions for dilution, application and contact times for all detergents and disinfectants.

or

- If an alternative disinfectant is used within the organisation, this should be checked and ensure that it is effective against enveloped viruses.

Avoid creating splashes and spray when cleaning. Any cloths and mop heads used must be disposed of and should be put into the correct waste bags as outlined below under the waste section.

When items cannot be cleaned using detergents or laundered, for example upholstered furniture and mattresses, steam cleaning may be used.

Spillages of blood and body fluids should be managed in accordance with the organisations spillage policy, before cleaning and disinfection. If any items are heavily contaminated with body fluids and cannot be appropriately cleaned, consider discarding. Permission to do discard items should be received from the owner prior to removing.

If an area can be kept closed and secure for 72 hours, wait until this time for cleaning, as the amount of virus contamination will have decreased significantly. The area can then be cleaned as directed by any existing workplace risk assessment or manufacturer’s instructions on the safe use of their cleaning products.

Waste

Waste from possible cases and cleaning of areas where possible cases have been (including disposable cloths, tissues, and masks if worn) should be put in a plastic rubbish bag and tied when full. The plastic bag should then be placed in a second bin bag and tied. It should be put in a suitable and secure place and marked for storage until the individual’s test results are known. Children, pets, pests etc. should not be able to access this place. Waste should NOT be left unsupervised on the pavement awaiting collection.

Follow up of persons involved in environmental decontamination

The names and contact details of those carrying out cleaning of an area that a possible case has been in should be recorded by the person responsible for this setting. As part of the contact tracing process for a confirmed case, the local Health Protection Team will advise on arrangements for follow up required for 14 days after the cleaning process took place.

• **Specification**

Areas and Tasks	
Reception	
<p>Electrostatic spray of:</p> <ul style="list-style-type: none"> • Card entry systems • Desks and furniture • Telephones, keyboard, mouse and monitor • Doors • Fixtures and fittings <p>Wipe:</p> <ul style="list-style-type: none"> • Light switches <p>ULV-Fogg:</p> <ul style="list-style-type: none"> • Whole room for sufficient time to fill space 	
Offices and Meeting Rooms	
<p>Electrostatic spray of:</p> <ul style="list-style-type: none"> • Card entry systems • Surfaces of Desks and furniture • Telephones, keyboard, mouse and monitor • Doors • Fixtures and fittings <p>Wipe:</p>	

- Light switches

ULV-Fogg:

- Whole room for sufficient time to fill space

Access Points-Lifts and stair ways

Electrostatic spray of:

- All doors
- Indicator Panels
- Handrails

ULV-Fogg:

Whole room for sufficient time to fill space

Lobbies and Corridors

Electrostatic spray of:

- All doors
- Fixtures and fitting
- Handrails

Wipe:

- Light switches

ULV-Fogg:

- Whole room for sufficient time to fill space

Kitchens and Restaurants

Electrostatic spray of:

- All doors
- Tables and chairs
- Sinks, taps and draining boards
- Facia of cupboard and units
- External surfaces of fridges and equipment
- Lockers

Wipe:

- Light switches
- Vending machine keypads

ULV-Fogg:

Whole room for sufficient time to fill space

Toilets showers and washrooms

Electrostatic spray of:

- All doors and locks
- Cubicle walls
- Toilets and flush
- Sinks, taps and dispensers
- Hand driers
- Showers
- Lockers

Wipe:

- Light switches

ULV-Fogg:

- Whole room for sufficient time to fill space

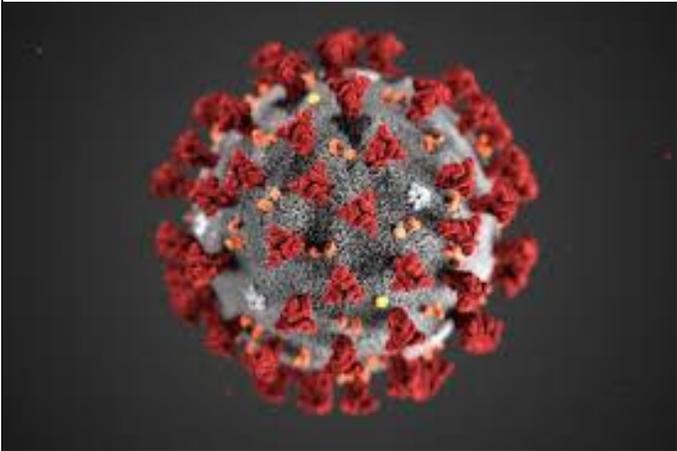
External Areas

Course Pressure spray of:

- All doors
- Security buildings
- Smoking huts
- Areas of human congregation

	Risk Assessment-Disinfectant treatment to combat the spread of the Coronavirus COVID-19 In the event of an injury, Severity Ratings of 3, 4, or 5 are reportable to RIDDOR. You can notify the enforcing authority by telephoning the Incident Contact Centre on 0845 300 99 23	Risk Assessment Number: RA-112	
	Date: 21/03/2020	Review Date: Weekly	
	Assessment by: John Dickson	Position: Managing Director	

Client:	Site Address:
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Task/Risk Assessment Description: To apply disinfectant using hand sprayers, electrostatic sprayers and ULV machines to combat the spread of the COVID-19 Virus 	<div style="text-align: center;"> <h3>Risk Estimation Matrix</h3> <table border="1" style="margin: auto; border-collapse: collapse;"> <tr> <td></td> <td></td> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> <td style="text-align: center;">3</td> <td style="text-align: center;">4</td> <td></td> </tr> <tr> <td rowspan="4" style="writing-mode: vertical-rl; transform: rotate(180deg);">Likelihood of Harm</td> <td style="text-align: right;">Likely</td> <td style="background-color: yellow; text-align: center;">M</td> <td style="background-color: red; text-align: center;">H</td> <td style="background-color: red; text-align: center;">H</td> <td style="background-color: red; text-align: center;">H</td> <td style="text-align: left;">4</td> </tr> <tr> <td style="text-align: right;">Reasonably Likely</td> <td style="background-color: yellow; text-align: center;">M</td> <td style="background-color: yellow; text-align: center;">M</td> <td style="background-color: red; text-align: center;">H</td> <td style="background-color: red; text-align: center;">H</td> <td style="text-align: left;">3</td> </tr> <tr> <td style="text-align: right;">Unlikely</td> <td style="background-color: lightgreen; text-align: center;">L</td> <td style="background-color: yellow; text-align: center;">M</td> <td style="background-color: yellow; text-align: center;">M</td> <td style="background-color: yellow; text-align: center;">M</td> <td style="text-align: left;">2</td> </tr> <tr> <td style="text-align: right;">Remote</td> <td style="background-color: white; text-align: center;">N</td> <td style="background-color: lightgreen; text-align: center;">L</td> <td style="background-color: lightgreen; text-align: center;">L</td> <td style="background-color: lightgreen; text-align: center;">L</td> <td style="text-align: left;">1</td> </tr> <tr> <td></td> <td></td> <td style="text-align: center;">Light</td> <td style="text-align: center;">Serious</td> <td style="text-align: center;">Major</td> <td style="text-align: center;">Catastrophic</td> <td></td> </tr> </table> <p style="text-align: center;">Worst Probable Severity</p> </div> <div style="margin-top: 10px;"> <p>Summary Definitions:</p> <p><u>Worst Probable Severity:</u></p> <ul style="list-style-type: none"> Catastrophic: Fatality Major: Lost Work case Serious: Restricted work case and medical (hospital) treatment Light: First Aid treatment, no medical (hospital), no lost time, no restricted time. <p><u>Likelihood of harm:</u></p> <ul style="list-style-type: none"> Likely: Likely to occur, immediately or shortly. Reasonably Likely: Probably will occur in time. Unlikely: May occur in time Remote: So unlikely to occur as to be near zero. </div>			1	2	3	4		Likelihood of Harm	Likely	M	H	H	H	4	Reasonably Likely	M	M	H	H	3	Unlikely	L	M	M	M	2	Remote	N	L	L	L	1			Light	Serious	Major	Catastrophic	
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Hazard	Hazard Details	Who Can Be Harmed & How?	Risk Rating without controls				Control Measures	Risk Rating with controls			
			S	L	T	R		S	L	T	R
Infection COVID-19 Virus	Inhalation, Ingestion, eye contact, skin	NBC Operatives & Site Staff	4	3	12	H	Follow method statement without deviation.	4	1	4	L

	contact with guano & rotting carcasses					H	<p>Complete your daily self-certification of fitness to work. Do not carry out treatment if you show any symptoms, return home to self-isolate and advise management.</p> <p>When visiting a property, you should ask the client directly whether there have been any confirmed cases of COVID-19.</p> <p>If you become aware of a room or building that has had a confirmed case of COVID-19 you should not enter and advise NBC management.</p> <p>The client shall be advised to keep the area closed and secure for 72 hours, wait until this time has passed for cleaning as the amount of virus living on surfaces will have reduced significantly by 72 hours</p> <p>These should be double-bagged, then stored securely for 72 hours then thrown away in the regular rubbish after cleaning is finished</p> <p>wash hands regularly with soap and water for 20 seconds, and after removing gloves, aprons and other protection used while cleaning</p> <p>All NBC personnel involved with surveying and undertaking works must assume there is potential for infection. The following mandatory PPE must be worn:</p> <p>Full body disposable coveralls that cover the head (conforms to EN 13034) Disposable overshoes Disposable gloves Dust mask (conforms to EN405) Eye protection (conforms to EN166)</p>				
Asbestosis	Exposure to asbestos	Technician and staff on site	4	4	16	H	<p>Consult with client as to whether asbestos is present/ check register.</p> <p>Survey and have any suspicious materials checked before undertaking work.</p> <p>Do not carry out work if present or not made safe.</p>	4	1	4	L
Electrocution	Introducing liquid /Spraying near Electricity supplies Machinery.	Technician	4	4	16	H	<p>Do not spray electrical equipment, light switches or electrical sockets directly with Gloria cylinder or hand sprayer, wipe with a damp cloth or treat indirectly from a distance with ULV machine.</p>	4	1	4	L

	Method Statement 003-Disinfectant Treatment
Type of Activity, Task / Operation:	Application of disinfectant for the prevention of infection
Location of activity	Commercial and Domestic Properties
Background and objectives	<p>Following a worldwide Pandemic of the Covid-19 Coronavirus there has been an increased demand for disinfection services.</p> <p>Routes of transmission</p> <p>The transmission of COVID-19 is thought to occur mainly through respiratory droplets generated by coughing and sneezing, and through contact with contaminated surfaces. The predominant modes of transmission are assumed to be droplets and contact.</p> <p>Incubation and infectious period</p> <p>In most cases, individuals are usually considered infectious while they have symptoms. The median time from symptom onset to clinical recovery for mild cases is approximately 2 weeks and is 3-6 weeks for severe or critical cases.</p> <p>From international data, the balance of evidence is that infectivity has significantly reduced 7 days after the onset of symptoms.</p> <p>Survival in the environment</p> <p>Human coronaviruses can survive on inanimate objects and can remain viable for up to 5 days however in most cases it is believed that it is not infectious on most surfaces after 72 hours.</p> <p>The control of exposure at source, including adequate ventilation systems and effective environmental decontamination will physically reduce exposure to infection.</p> <p>Employers are under a legal obligation—under control of substances hazardous to health (COSHH) – to adequately control the risk of exposure to hazardous substances where exposure cannot be prevented as well as a moral obligation to protect staff.</p>

	<p>We are currently following a combination of WHO and HSE guidelines on Coronavirus sanitisation whilst in direct contact with chemical suppliers to ensure the best confidence in our infection control results and the methods detailed below are produced under this guidance.</p> <p>Coronaviruses are enveloped viruses with a protective fat layer, Disinfectants tear apart that fat layer which makes them fairly wimpy compared to noroviruses and other common viruses that have a more robust protein shell.</p>
<p>Key plant, equipment & tools:</p>	<ul style="list-style-type: none"> • 5 litre cylinder Gloria Sprayer • Hand sprayer • ULV micro particle space mister • Electrostatic sprayer • Measuring jug
<p>Key materials required:</p>	<ul style="list-style-type: none"> • Suitable approved disinfectant to BS EN 1276 or BS EN 13697 standards. • Waste bags • Cable ties • J Cloths <p>We use a disinfectant product which have demonstrated viricidal activity relevant to enveloped viruses which includes Coronavirus. Coronaviruses are enveloped viruses with a positive-sense single-stranded RNA genome.</p> <p>The products have been tested against Adenovirus and Murine norovirus in accordance with EN14476, the European standard for demonstrating viricidal activity of a disinfectant, against the enveloped Vaccinia viruses such as Coronavirus.</p> <p>It is the most developed of the ionic silver stabilised hydrogen peroxides (S.S.H.Ps) and has excellent long-term stability.</p> <p>The treatment has an immediate effect when it comes to surface disinfection and it is:</p> <ul style="list-style-type: none"> • Safe for children and pets • Non-hazardous • Non-toxic • Bleach-free • Leaves a nice floral smell <p><i>It is suitable for the following washable areas and surfaces, such as carpets, upholstery, hard floors, cupboards, kitchen tops, tables, walls, etc.</i></p>

Staff Grades/skills and numbers	2 x NBC technicians trained in: <ul style="list-style-type: none"> Mixing chemicals Applying chemical using course sprayer, ULV and electrostatic equipment 					
Necessary PPE to be worn:	<ul style="list-style-type: none"> Single use Coveralls Single use Gloves Goggles Respirator 					
Task Specific Staff Qualifications	<input type="checkbox"/> IPAF 1B	<input type="checkbox"/> IPAF 3a,3b	<input type="checkbox"/> CSCS	<input type="checkbox"/> PA1, PA2, PA6	<input type="checkbox"/> Confined Space Trained	<input type="checkbox"/> Harness Trained
	<input type="checkbox"/> PASMA	<input type="checkbox"/> Bird Competency Assessed	<input type="checkbox"/> BPCA Level 2	<input type="checkbox"/> Safe Use Of Aluminium Phosphide	<input type="checkbox"/> First Aid	<input type="checkbox"/> Air Rifle Competency Trained
Site Specific Considerations/Hazards	<input type="checkbox"/> Additional Lighting Required	<input type="checkbox"/> Asbestos Present	<input type="checkbox"/> Skylights Present	<input type="checkbox"/> 110v Required	<input type="checkbox"/> Out Of Hours Work Required	<input type="checkbox"/> Work On A Public Highway (Council Permit Required, including skips on roads)
Traffic Management	Works are generally conducted outside however on some occasions there may be a need to treat area where vehicles may present a risk such as transport yards. On these occasions' details will be listed below;					
Briefing Requirements	Operatives will not complete a treatment without first meeting a site representative to determine any hazards present. Site specific inductions are detailed below;					
Communications	<ol style="list-style-type: none"> External-NBC Tech to Team Leader to Client Internal-NBC Tech-Team Leader-Ops Manager-Ops Director 					

3. Contact Numbers-

Detail of works to be carried out.

Disinfecting refers to using chemicals to kill germs on surfaces. This process does not necessarily clean dirty surfaces or remove germs, but by killing germs on a surface *after* cleaning, it can further lower the risk of spreading infection.

General Disinfectant Mixing Protocol

The proper mixing of disinfectant is critical to achieving the right concentration for effective disinfection and the health and safety of personnel. This following describes a general disinfectant mixing protocol:

1. Wear appropriate PPE when opening and mixing disinfectants. At minimum, wear disposable outwear (for example, coveralls, boots, and gloves).
 2. Ensure that the chemical disinfectant has been stored properly (a cool location is necessary to maximize shelf life) and is within the maximum shelf life before mixing. Check the product label for the expiration date. The shelf life of a disinfectant is not always noted on the label. In such situations, if there are concerns about the chemical's effectiveness, use a test kit. Test kits can help determine whether any chemical degradation of the disinfectant's active ingredients has occurred.
- Calculate the required amount of disinfectant. For liquid chemical disinfectant solution, calculate the total surface area of the floor, walls, ceiling, and fixed equipment requiring treatment.
4. Ensure that the correct proportion of disinfectant concentrate is added to the correct volume of water.
 5. Mix the required amount of disinfectant solution in accordance with label. Always add concentrate to water, not water to concentrate.
 6. Once a solution has been prepared, it must be used on the same day or it may become inactive. If there are concerns about the chemical's effectiveness, test kits can help to determine whether any chemical degradation of the disinfectant's active ingredients has occurred.

Disinfectant Dilution Matrix

Water in litres within sink or container	0.5	0.75	1	2	5	10	20	40
Dilution Ratio (solution strength)								
1:20 (5%)	25ml	38ml	50ml	100ml	250ml	500ml	1 litre	2 litres
1:40 (2.5%)	13ml	19ml	25ml	50ml	125ml	250ml	500ml	1 litre
1:50 (2%)	10ml	15ml	20ml	40ml	100ml	200ml	400ml	800ml
1:60 (1.6%)	8ml	12ml	16ml	33ml	83ml	166ml	332ml	664ml
1:80 (1.25%)	6ml	10ml	13ml	25ml	63ml	125ml	250ml	500ml
1:100 (1%)	5ml	8ml	10ml	20ml	50ml	100ml	200ml	400ml
1:150 (0.6%)	3ml	5ml	7ml	13ml	33ml	67ml	134ml	268ml
1:200 (0.5%)	3ml	4ml	5ml	10ml	25ml	50ml	100ml	200ml

Wet Disinfection Procedure

Apply disinfectant in a pre-cleaned facility from top to bottom and from back to front. The time a disinfectant is in contact with the surface is important and varies with the type of disinfectant. Carefully follow the specific instructions on the disinfectant label. Reapplication of disinfectant may be necessary to achieve the product label-indicated contact time.

The following steps are recommended for general disinfection:

1. Apply the disinfectant to the contaminated surfaces in accordance with the site-specific plan and product label.
2. Ensure that the disinfectant has had adequate contact time as specified on the disinfectant label. Note that the recommended contact time will vary by the type of surface being treated, and reapplication of disinfectant may be necessary to achieve the product label-indicated contact time.
3. Allow surfaces to thoroughly air dry before utilizing the area.
4. Ensure that any unused disinfectant concentrate and solution are either stored in accordance with the label instructions and the site-specific health and safety plan or properly disposed.

Preparation

- Complete an induction with the client and seek to identify any hazards that could put you or others at risk during operations.
- collect all cleaning equipment, disinfectant and clinical waste bags before entering the building.
- any cloths used must be disposed of as single use items.
- before entering the building, perform hand hygiene then put on a coveralls, respirator, goggles and gloves.
- Ensure people and pets are not in rooms to be treated.

On entering the Building

- With your working partner plan and agree a strategy of operations. Top to bottom, front to back.
- Make everyone aware of works that you are about to undertake and advise that they are to thoroughly ventilate the area post treatment.

Cleaning process

Use disposable cloths or paper roll or, to clean and disinfect all hard surfaces or floor or chairs or door handles or reusable non-invasive care equipment or sanitary fittings in the room, following one of the 2 options below:

1. use either a combined detergent disinfectant solution at a dilution of 1000 parts per million (ppm) available chlorine (av.cl.)
2. or a neutral purpose detergent followed by disinfection (1000 ppm av.cl.)
 - follow manufacturer's instructions for dilution, application and contact times for all detergents and disinfectants
 - any cloths and mop heads used must be disposed of as single use items

Surface Treatments

Use the Gloria 5 litre cylinder sprayer to treat large surface areas that have the potential to harbour and transmit the virus such as toilets, soft furnishings and chairs. When spraying fabrics check the disinfectant product label first as some may contain bleach and test a small area first.

Gloria Hand Sprayer with a disposable cloth is ideal for treating surfaces such as desks and tables and regular high-risk touch points such as door handles, telephones, grab rails, light switches etc. Do not spray directly onto electrical equipment such as keypads and computers.

Electrostatic Sprayer can be used instead of a Gloria hand sprayer however as the mist is fine it should not be wiped but left to dry. Also, as the mist is fine cluttered desk and keypads can be treated some long as the sprayer remains at a distance greater than 1 metre.

Any cloths used must be disposed of and should be put into waste bags as outlined below.

Space Spray/ULV Misting

The ULV (Ultra Low Volume) machine fills a room with ultra-fine microparticles of disinfectant that create a dense mist killing any airborne virus particles. The micro particles of disinfectant then settle on all surfaces providing a thorough coverage effectively neutralising any of the virus particles.

On leaving the Building

- Discard detergent or disinfectant solutions safely at disposal point
- All waste should be removed from the building in sealed bags
- Clean, dry and store disinfecting equipment
- Remove and discard PPE into bags
- Perform hand hygiene

Laundry

Wash items in accordance with the manufacturer's instructions. Use the warmest water setting and dry items completely. Dirty laundry that has been in contact with an unwell person can be washed with other people's items.

Do not shake dirty laundry, this minimises the possibility of dispersing virus through the air.

Clean and disinfect anything used for transporting laundry with your usual products, in line with the cleaning guidance above.

Waste

	<p>Waste from possible cases and cleaning of areas where possible cases have been (including disposable cloths and tissues):</p> <ol style="list-style-type: none"> 1. Should be put in a plastic rubbish bag and tied when full. 2. The plastic bag should then be placed in a second bin bag and tied. 3. It should be put in a suitable and secure place for 72 hours prior to disposal <p>If storage for at least 72 hours is not appropriate, arrange for collection as a Category B infectious waste either by your local waste collection authority if they currently collect your waste or otherwise by a specialist clinical waste contractor. They will supply you with orange clinical waste bags for you to place your bags into so the waste can be sent for appropriate treatment.</p>		
On Completion	<p>Once all the above steps have been completed then complete the job sheet, ask the client if they are happy that you sign the tablet on their behalf then write PP and sign. You should take a picture of the building as proof of attendance.</p>		
Emergency arrangements – Fire, injury etc.:	<p>This work should not be completed as a lone worker. In the advent of an accident/injury your co-worker should advise the ops manager or ops director immediately and the client contact on site advised. You will follow the client’s instruction as they may have processes and procedures specific to their environment.</p> <p>if there are lessons to learn you should work with them to complete a near miss exercise.</p> <p>If the injury requires medical attention the second party on site should either call an ambulance or take them to the local A and E Hospital department advising NBC central office and the client rep on site.</p>		
Prepared by:	John Dickson	Date:	21/03/2020
Position:	Managing Director		
Reviewed by:		Date:	
Position:			