

**UNIVERSITY OF LEICESTER, LOUGHBOROUGH UNIVERSITY
&
UNIVERSITY HOSPITALS OF LEICESTER NHS TRUST
JOINT RESEARCH SUPPORT OFFICE
STANDARD OPERATING PROCEDURES**

**Research Space SOP 5001
v1.1 October 2017**

**Standard Operating Procedure for Housekeeping within
Research Space, LRI**

PGC Registration: C74/2017

OFFICE BASE

**Research Space
Level 0, Balmoral Building
Leicester Royal Infirmary
Infirmary Close
Leicester LE1 5WW**

1. Background

It is important that all research staff working in Research Space are aware of the need to comply with statutory UHL legislation and local policies and procedures to maintain the safety of patients and staff and to reduce the risk of contamination of samples processed within Research Space laboratories.

2. Purpose

The purpose of this policy is to outline the processes and procedures of daily and weekly housekeeping within Research Space.

3. Scope

This policy applies to everyone who uses Research Space facilities. This policy does not apply to UHL domestic staff or their contracted duties.

4. Responsibilities

- Users of Research Space are responsible for making themselves aware of all relevant UHL and local policies and procedures before using the facility.
- Housekeeping staff are responsible for following local policies and procedures when carrying out their duties.
- The Research Space Senior Management Team (SMT) are responsible for monitoring compliance with this policy.

5. Policy statement

5.1 WAITING ROOM (after each clinic):

- Ensure the area is left clean, safe and tidy (e.g. furniture returned to original positions, spillages cleaned/reported as appropriate and play equipment cleaned and put away).

5.2 CLINIC ROOMS (after each use):

- All equipment must be cleaned with hard surface wipes as per UHL Cleaning and Decontamination for Infection Prevention policy.
- Any furniture that has been used must be cleaned and returned to its original position (the required room layout is displayed on a laminated card in each room).
- Any additional equipment brought into the room must be returned to its designated storage area.
- The room layout card must be ticked, signed and dated to document that cleaning has been completed and the room is ready for use.

5.3 LABORTORY (after each use):

- All work surfaces must be cleaned with hard surface cleaner.
- Centrifuges should be cleaned and stored as per local policy.
- All samples and consumables must be disposed of in accordance with UHL Waste Management Policy and Guidelines and Sharps Management Policy.
- Blood spillages must be cleaned and decontaminated as per UHL Cleaning and Decontamination for Infection Prevention policy.

5.4 DAILY CHECKS

- All emergency resuscitation equipment must be checked as per UHL Cardiopulmonary Resuscitation Policy.
- Temperatures of all cold storage equipment (specimen, food and IMP) must be checked and logged as per local Cold Storage Policy. Any deviations must be reported immediately and appropriate action taken.

5.5 WEEKLY CHECKS

- Patient areas must be checked and cleaned according to the local schedule (unless the area has been cleaned in the previous two days). After cleaning, the room layout card is to be signed and dated.
- All equipment must be cleaned as per manufacturer's instructions.
- All equipment must be visually inspected for signs of damage and any maintenance procedures carried out as per manufacturer's instructions.
- The laboratory must be checked and cleaned according to local procedure **irrespective** of when it was last used.
- The meeting room must be checked and tidied.
- The kitchen area must be cleaned and tidied. Any unlabelled or out-of-date food items must be disposed of.
- Stock levels of all consumables must be checked and:
 - clinic trollies re-stocked according to local guidelines
 - PPE re-stocked as necessary
- Taps that are not used on a daily basis must be run for 3 minutes, 3 times a week and the water monitoring log completed (as per UHL Water Management policy).

5.6 MONTHLY CHECKS

- All clinical cupboards and trolleys must be cleaned according to the local schedule (see Appendix A).

On the last working day of each month:

- Use-by dates of all consumables must be checked and any out-of-date stock removed
- Stock levels of all consumables must be checked and replacement stock ordered (as per local ordering process)
- Local fire safety checklist must be completed by designated Fire Officer

- All equipment must be checked to ensure it is within the service schedule and servicing organised as required.

6. Other

- All staff must report any faults as they occur and log them with the administration team.

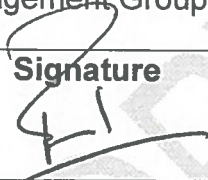
7. Related documents & References

- E4/2015 - Cardiopulmonary Resuscitation Policy
- B5/2006 - Cleaning and Decontamination for infection prevention
- B8/2013 - Sharps management policy
- A1/2004 - Water management policy
- A15/2002 - Waste management policy and guidance

8. List of Appendices

Appendix A: Research Space Housekeeping Schedule

9. Approval and sign off

DEVELOPMENT AND APPROVAL RECORD FOR THIS DOCUMENT			
Author:	Kate Ellis	Job Title:	Senior Research Assistant
Reviewed by:	Research and Innovation Management Group		
Approved by:	Prof. Nigel Brunskill	Signature 	Date Approved 13/11/17
REVIEW RECORD			
Date	Issue No.	Reviewed by	Description of Changes (If Any)
Oct 2017	1.1	Sally Batham, Christina Daines, Aidan Dunphy & Adam Lewszuk	Update of scope and responsibilities, clarification of some procedures and reformatting.
DISTRIBUTION RECORD			
Date	Name	Department	Received

Appendix A: Research Space Housekeeping Schedule

Cleaning

Weekly

- All clinical equipment, to include:
 - Phlebotomy chairs/beds
 - ECG machines
 - Weighing scales
 - Height measure
 - Blood pressure monitors and cuffs
 - Oxygen saturation probe
 - Temperature monitor
 - IV infusion pump
 - Otoscope and stand
 - V-pod
 - Centrifuges
 - Resuscitation trolley top
 - Laboratory fridges and freezers - doors and tops
- Clinical work surfaces (including laboratories and any non-clinical white work surfaces)
- Kitchen (including disposal of out-of-date food)

Monthly

- Clinical cupboards – doors and inside
- All clinical trolleys (including resuscitation trolley) – drawers
- Kitchen fridge - inside

Additional checks

Every two days (minimum 3 times/week)

- Run any taps not used on a daily basis for 3 minutes and complete the water monitoring log

Weekly

- Check for full sharps bins and replace as necessary

Monthly

- Check all consumables (including PPE and First Aid Kits) and restock as necessary, removing any out-of-date items
- Re-order stock as required (as per local ordering process)
- Check service dates on all equipment and report to admin team if out-of-service

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