Fact Sheet - Ebola¹

Environmental cleaning in the healthcare setting

This fact sheet covers environmental cleaning of areas used by cases with suspected, probable or confirmed Ebola within healthcare settings.

Ebola viruses are readily inactivated by disinfectants. The preferred disinfectant solution is sodium hypochlorite made up to 1,000 parts per million (ppm) available chlorine (follow the manufacturer's instructions) for routine cleaning, and 5,000 ppm for blood or body fluid spills.

Personal protective equipment

- Wear personal protective equipment (PPE) which covers all skin when undertaking any environmental cleaning. A P2/N95 mask must be worn because cleaning procedures may generate aerosols.
- > The following PPE must be worn:
 - o P2/N95 mask
 - o face shield (preferred) or goggles
 - o head cover
 - o impermeable long-sleeved gown to mid-calf
 - o impermeable shoe and leg covers
 - o two pairs of gloves.
- > All items should be disposable.

A summary of donning and safe doffing procedures is available by contacting ics@health.sa.gov.au

Routine environmental cleaning and disinfection

- > Clean isolation rooms daily as per usual practice.
- > At the end of each episode of patient care, the healthcare worker should clean any obvious blood or body fluid surface contamination using a disinfectant wipe. Discard the wipe into the clinical waste bin inside the patient room.
- > Clean toilet daily with a 1,000 ppm sodium hypochlorite solution.

Discharge cleaning

- > After discharge, clean the entire room with either:
 - a neutral detergent followed by a 1,000 ppm sodium hypochlorite solution (twostep clean) OR
 - o a combined detergent/chlorine disinfectant solution (one-step clean).

Refer to SA Health Cleaning Standard for Healthcare Settings available from

http://inside.sahealth.sa.gov.au/wps/wcm/connect/non-public+content/sa+health+intranet/business+units/health+system+development/office+of+the+chief+executive/policies/directives/cleaning+standard+for+healthcare+facilities+policy+directive

or by contacting ics@health.sa.gov.au

- > Dispose of all cleaning equipment into the clinical waste.
- 1. Official title Ebola virus disease, previously known as Ebola haemorrhagic fever.

Fact Sheet - Ebola¹

Body fluid spill

- > Where possible, clean spills using a commercial spill kit.
- > In the absence of a specific kit, clean spills as follows:
 - absorb with paper towels
 - 2. liberally cover with a 5,000 ppm sodium hypochlorite solution and leave to soak for 30 minutes
 - 3. wipe up the area with disposable cloths
 - 4. disinfect the area with a 5,000 ppm sodium hypochlorite solution.
- > Double bag and dispose of all material into the clinical waste.

Patient equipment and linen

- Limit the equipment that enters the patient's room. Use disposable equipment and linen wherever possible. Any item which enters the patient room must be disposable or dedicated.
- > Clean reusable non-critical equipment with a neutral detergent, followed by, 1,000 ppm sodium hypochlorite solution (if material compatible) or 70% alcohol.
- > Ensure reusable semi-critical and critical equipment undergoes routine reprocessing (disinfection/sterilisation).

Waste treatment and disposal

- Double bag any items stained or containing body fluids and dispose of into the clinical waste.
- Store waste securely prior to collection.
- > Flush the patient toilet, with the lid closed, after each use.
- > Use a disposable bed pan for bed bound patients. After use, add high absorbency gelling agent, and once gelled, dispose of entire pan into the clinical waste.

For further information

For further information see Communicable Disease Network Australia (2014). Ebola Virus Disease (EVD) CDNA National Guidelines for Public Health Units.

Available at http://www.health.gov.au/internet/main/publishing.nsf/Content/ohp-ebola.htm/\$File/EVD-SoNG.pdf

For more information

Communicable Disease Control Branch (CDCB) Telephone: 1300 232 272

www.sahealth.sa.gov.au/ebola



