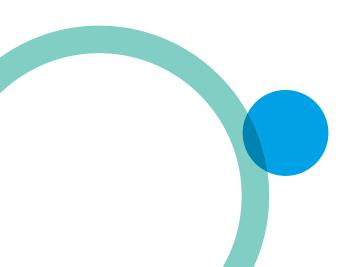


Professional Advice, Guidance and Support

NHS Scotland
National Cleaning Compliance Report
Domestic and Estates Cleaning Services
Performance 2021/2022

Quarter 2: July 2021 – September 2021





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1. Introduction

1.1 Cleaning functions in NHS Scotland are carried out as part of the duties of a number of healthcare professionals; this includes Nurses, Domestics, Estates Officers, and Ambulance staff to name a few. Specific responsibilities for cleaning duties vary by Health Board and sometimes within each Health Board.

This report covers the cleaning functions carried out by Domestic staff and Estates staff.

As one part of their duties Domestic staff clean parts of the ward environment like the floors, toilets, sinks, etc. They also clean other areas of the healthcare facility such as corridors, offices, foyer, etc. They generally do not clean near patient equipment e.g. the patient bed tray, the upper half of the patient bed or drip stands, etc.

In the context of this report, 'Estates' reporting refers to issues with the fabric of the building which impede effective cleaning activity. This report does not present information on the whole of the Estates function e.g. water systems, heating, ventilation etc. across all healthcare facilities.

This report presents data on compliance with the requirements set out in the NHS Scotland National Cleaning Services Specification (NCSS). The NCSS set out the requirements for the minimum frequency and methods of cleaning carried out by Domestic staff. It sets out the same requirements for Estates staff when cleaning the Estates fabric.

The report includes data on the 18 Scottish NHS Boards that offer inpatient services or deal directly with patients, as follows:

- the 14 NHS Scotland Territorial Boards:
- 4 Special Health Boards Golden Jubilee National Hospital, The State
 Hospitals Board for Scotland, Scottish Ambulance Service and the Scottish
 Blood Transfusion Service (part of NHS National Services Scotland).

All healthcare facilities and component parts e.g. wards, treatment rooms, corridors, etc. are expected to be at least 90% compliant with the requirements set out in the NCSS. Boards, zones or major sites (A1 and A2 hospitals) which receive an Amber or Red compliance rating must develop an action plan to address the issues identified through the monitoring process.

This will be submitted to Health Facilities Scotland, and a summary of the action plan will be included in this report.



The report indicates the status of each NHS Board using a traffic light system as below:

Colour		Description
	Green	compliance level 90% and above - Compliant
	Amber	compliance level between 70% and 90% - Partially compliant
	Red	compliance level below 70% - Non-compliant



2. Background

2.1 Healthcare Associated Infection (HAI) is a priority issue for NHS Scotland, in terms of the safety and well-being of patients, staff and the public.

The HAI Task Force was established in 2003 to take forward the Ministerial HAI Action Plan 'Preventing Infections Acquired While Receiving Healthcare' (October 2002). Cleaning services are an essential part of the multidisciplinary approach to tackling HAI. For prevention and control of infection to work effectively, critical activities such as cleaning and hand hygiene have to be embedded into everyday practice.

As part of its work programme, the HAI Task Force developed the 'NHS Scotland Code of Practice for the Local Management of Hygiene and HAI' and the 'NHS Scotland National Cleaning Services Specification'. These documents include guidance on cleanliness and hygiene, effectively setting minimum standards for the healthcare environment. They were issued to NHS Boards in May 2004.

The HAI Task Force commissioned Health Facilities Scotland (HFS) to develop a monitoring framework for the NHS Scotland National Cleaning Services Specification. This was developed in consultation with a range of stakeholders within NHS Scotland and was implemented in April 2006. The first quarterly report was published in August 2006 and covered cleaning provided by Domestic services in NHS facilities.

Estates Monitoring

2.2 In 2009 the HAI Task Force asked HFS to look at extending the scope of the cleaning monitoring tool to cover Estates services as well as Domestic services.

HFS took forward this work in partnership with NHS Scotland Boards and built the Estates monitoring system as an extension to the existing Domestic monitoring system.

In the context of this report, 'Estates' reporting refers to issues with the fabric of the building which impede effective cleaning activity. This report does not present information on the whole of the Estates function e.g. water systems, heating, ventilation, etc. across all healthcare facilities.

Monitoring and Improvement

2.3 Monitoring, in this context, is defined as the ongoing assessment of the outcome of cleaning and Estates maintenance processes to assess the extent to which corrective procedures are being carried out correctly, to identify any remedial action which is required and to provide an audit trail.

An essential component of any monitoring framework is the fundamental principle of continuous improvement. Therefore, the monitoring framework not only provides a reporting mechanism, but a rectification process that can be used locally to identify, prioritise and address issues of non-compliance.



Further information on the monitoring framework is available from https://www.nss.nhs.scot/publications/national-facilities-monitoring-framework-manual-v-30/.

The methodology behind the monitoring process is described in Appendix 1.

Facilities Monitoring Tool

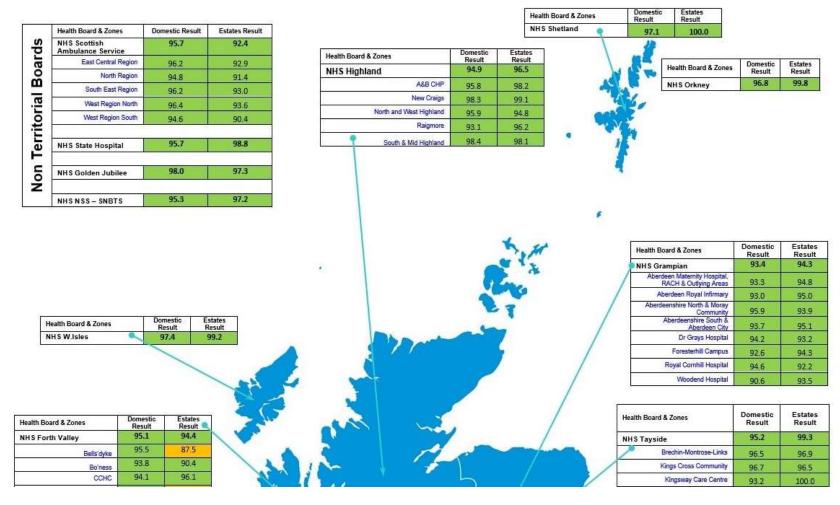
2.4 In April 2012 a digital Facilities Management Tool (FMT) became operational across Scotland. The tool moved data collection from a paper and spreadsheet based data collection to an online system that uses handheld devices and web based data transfer. This report is produced using data from this national system.

Facilities Support Team

2.5 The Facilities Support Team within Health Facilities Services is available to boards as an additional support mechanism, to provide day-to-day support to FMT system users, and training and guidance where needed. In addition to this activity, the support team can provide site or board specific support if areas are experiencing issues meeting the compliance levels described in this report, or are seeking to improve the general quality and consistency of audit practice.

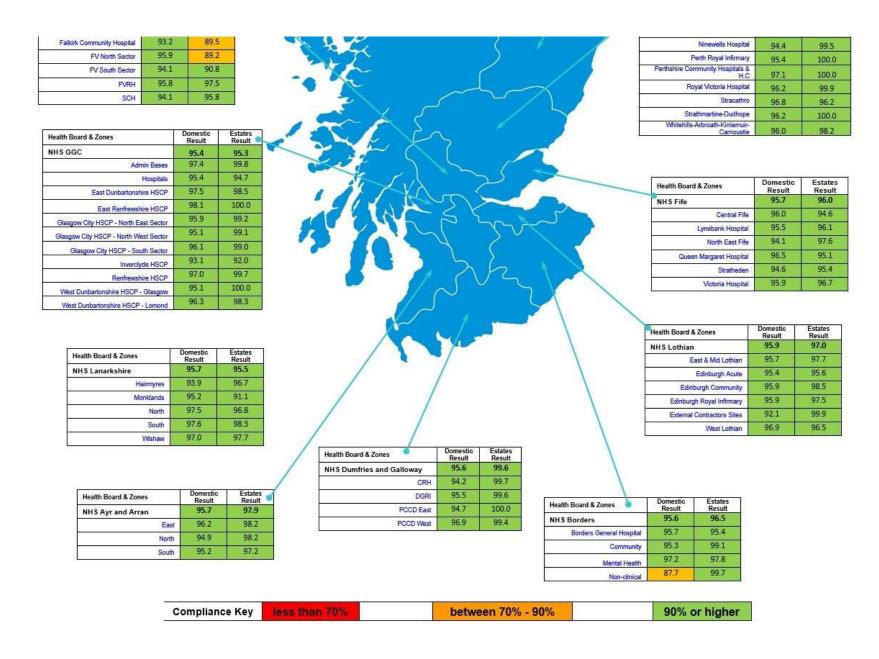


NHS Scotland Cleaning Compliance Quarter 2 2021-22 - Domestic and Estates Services



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3. Domestic Services – Key Findings for 2nd Quarter

Key Findings – Pan Scotland

3.1 Scotland's overall total score in Quarter 2 for 2021/22 was Green at 95.5%, which is slight increase from the 95.3% achieved in the previous guarter.

Health Board Level Data

- all NHS Boards have achieved an overall Green compliance rating;
- all A1 and A2 sites have achieved an overall Green compliance for Domestic services.

Zone Level Data

In each NHS Board there are a number of zones reflecting how domestic cleaning is managed and reported locally across the NHS Board. In larger NHS Boards there are a number of zones, in smaller NHS Boards there may only be one zone, which covers the whole of the NHS Board.

All zones across Scotland have achieved an overall Green compliance rating for Domestic Services, with the exception of the NHS Borders zone detailed below.

NHS Board and zone level cleaning audit data is presented graphically on pages 5 and 6.

NHS Borders

3.3 NHS Borders has reported one zone in Amber (partially compliant) for Domestic for Quarter 2.

Zone	Quarter 2 2021/22	
Non-clinical	87.7	

NHS Borders provided the following explanation:

"Our Domestic Services Team continue to review and resolve the higher risk items, the result of which will not be visible until the same areas are reported in later quarters. NHS Borders continue to monitor this correctly and report it honestly to show a true reflection of our premises. Our services have been recently impacted through Covid 19 and staff shortages, with a supervisor seconded and another on long term sick. These areas will continue to be monitored within the next guarter."



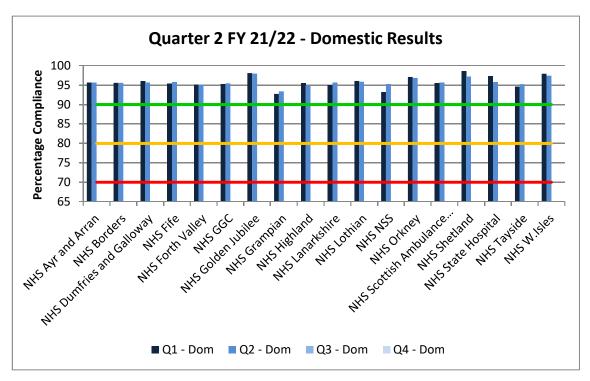
HFS Perspective - NHS Borders

3.3.1 NHS Borders has described that their focus is on the high risk areas, especially during this period where they are experiencing staff shortages. HFS would expect to see an improvement in these high risk areas, over the coming quarters, and continue to encourage the Board to audit in a transparent way to ensure a true reflection of the audit area is reported.



4. Domestic Services - Graphs

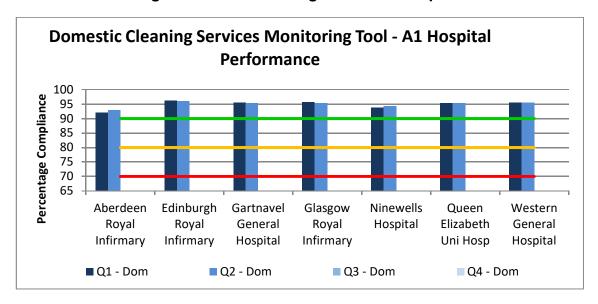
4.1 Domestic Cleaning Services Monitoring Tool – NHS Boards' Performance



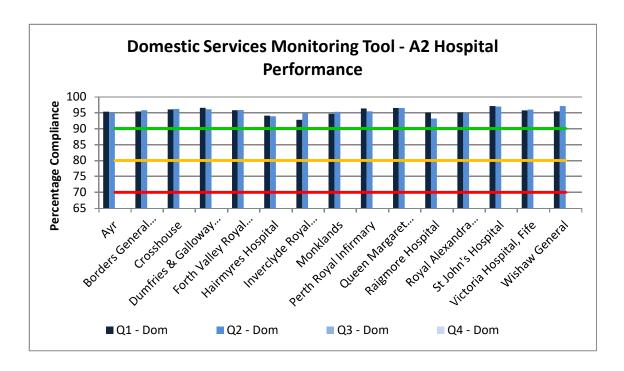
	1 st Quarter	2 nd Quarter	3 rd Quarter	4 th Quarter
Health Board	Apr - June 2021/22	July - Sept 2021/22	Oct - Dec 2021/22	Jan - March 2021/22
NHSSCOTLAND	95.3	95.5		
NHS Ayrshire and Arran	95.6	95.7		
NHS Borders	95.6	95.6		
NHS Dumfries and Galloway	96.0	95.6		
NHS Fife	95.4	95.7		
NHS Forth Valley	95.2	95.1		
NHS Greater Glasgow and Clyde	95.3	95.4		
NHS Golden Jubilee	98.1	98.0		
NHS Grampian	92.7	93.4		
NHS Highland	95.5	94.9		
NHS Lanarkshire	95.0	95.7		
NHS Lothian	96.1	95.9		
NHS NSS SNBTS	93.2	95.3		
NHS Orkney	97.1	96.8		
NHS Scottish Ambulance Service	95.5	95.7		
NHS Shetland	98.6	97.1		
NHS State Hospital	97.2	95.7		
NHS Tayside	94.6	95.2		
NHS Western Isles	97.9	97.4		



4.2 **Domestic Cleaning Services Monitoring Tool – A1 Hospital Performance**



4.3 **Domestic Cleaning Services Monitoring Tool – A2 Hospital Performance**





4.4 **Domestic** Cleaning Services Monitoring Tool – A1 Hospital performance

Hospital Type	Site	1 st Quarter Apr - June 2021/22	2 nd Quarter July - Sept 2021/22	3 rd Quarter Oct - Dec 2021/22	4 th Quarter Jan - Mar 2021/22
	Aberdeen Royal Infirmary	92.0	93.0		
	Edinburgh Royal Infirmary	96.2	96.1		
	Gartnavel General Hospital	95.6	95.4		
A 1	Glasgow Royal Infirmary	95.7	95.3		
	Ninewells Hospital	93.9	94.4		
	Queen Elizabeth Uni Hosp	95.3	95.4		
	Western General Hospital	95.5	95.5		

4.5 **Domestic Cleaning Services Monitoring Tool – A2 Hospital performance**

Hospital Type	Site	1 st Quarter Apr - June 2021/22	2 nd Quarter July - Sept 2021/22	3 rd Quarter Oct - Dec 2021/22	4 th Quarter Jan - Mar 2021/22
	Ayr Hospital	95.3	94.9		
	Borders General Hospital	95.4	95.7		
	Crosshouse Hospital	96.0	96.1		
	Dumfries & Galloway Royal Infirmary	96.5	96.0		
	Forth Valley Royal Hospital	95.8	95.8		
	Hairmyres Hospital	94.1	93.8		
A2	Inverclyde Royal Hospital	92.7	94.8		
	Monklands Hospital	94.7	95.2		
	Perth Royal Infirmary	96.3	95.4		
	Queen Margaret Hospital	96.5	96.5		
	Raigmore Hospital	95.0	93.1		
	Royal Alexandra Hospital	95.0	94.8		
	St. John's Hospital	97.0	96.9		
	Victoria Hospital, Fife	95.7	95.9		
	Wishaw General Hospital	95.4	97.0		



5. Estates Services - Key Findings for 2nd Quarter

Key Findings – Pan Scotland

5.1 Scotland's overall total score in Quarter 2 for 2021/22 was Green at 96.3%. This is unchanged from the 96.3% achieved in the previous Quarter.

Health Board Level Data

- all Health Boards have achieved an overall Green compliance rating;
- all A1 hospitals have achieved a Green compliance rating;
- all A2 hospitals have achieved a Green compliance rating.

Zone Level Data

In each NHS Board there are a number of zones, reflecting how domestic cleaning is managed and reported locally across the NHS Board. In larger NHS Boards there is a number of zones, in smaller NHS Boards there may only be one zone, which covers the whole of the NHS Board.

NHS Board and zone level cleaning audit data is presented graphically on pages 5 and 6.

NHS Forth Valley

5.2 NHS Forth Valley has reported three zones in Amber (partially compliant) for Estates for Quarter 2.

Zone	Quarter 4 2020/21	Quarter 1 2021/22	Quarter 2 2021/22
Bells'dyke	89.2	88.4	87.5
Falkirk Community Hospital	89.1	88.9	89.5
Bo'ness	90.6	89.9	90.4
FV North Sector	89.3	87.8	89.2

NHS Forth Valley provided the following explanation:

"Investment continues with numerous projects for areas of Falkirk and Bellsdyke. Over the next few reporting quarters this should demonstrate improvement prior to financial year end. The master plan being collated for one of our bigger amber scoring sites, Falkirk Community Hospital continues and is gathering pace so investment to this site is limited with the knowledge of it being redeveloped very soon. Our Estates team continue to review and resolve the higher risk items, the result of which will not be visible until the same areas are reported in later quarters. NHSFV continue to monitor this correctly and report it honestly to show a true reflection of our premises. Work continues into the



reporting process of Estates issues and the risk level assigned to certain items which should also help improve the scores. We are also working through the issues with a reduced team following several retirements with serious issues over our recruitment campaigns and struggling to recruit engineering and electrical based staff having a severe impact on our work."

HFS Perspective - NHS Forth Valley

5.2.1 NHS Forth Valley has described the continuation of the investment, for the improvement works, which was made within FCH and Bellsdyke specifically. HFS would expect to see an improvement within these areas, by the end of Quarter 4, due to the completion of the works. Plans are in place for further investment within the remaining Amber reporting sites and there is an assumption that these sites will be reporting Ambers until such time as the improvement works has been completed within all of the relevant sites.

NHS Greater Glasgow & Clyde

5.3 NHS GG&C has reported one site in Amber (partially compliant) for Estates for Quarter 2.

Zone	Quarter 4 2020/21	Quarter 1 2021/22	Quarter 2 2021/22
Inverclyde Royal Hospital	93.6	88.0	87.5

NHS GG&C provided the following explanation:

"Whilst the domestic teams are able to access wards to carry out audits, it has been particularly more challenging for the Estates Dept. to gain access the wards to carry out remedial works. The pressure on beds at IRH has been significant recently which has left us without the option to decant in order to safely carry out repairs/replacement to ceiling tiles, floors and walls. Difficulty has also been experienced in shortage of staff self-isolation for Covid purposes. Contractors have also been stretched due to low staff numbers and have been unable to fully support the effort to address the identified issues."

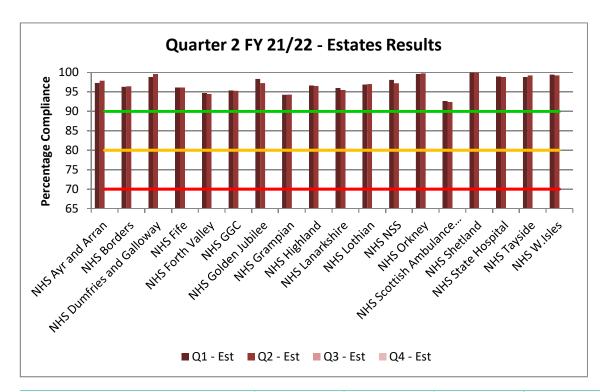
HFS Perspective - Greater Glasgow & Clyde

5.3.1 NHS GG&C have explained the challenges which the Estate Department is facing in not being able to gain access into wards to carry out remedial works. Staff resource has been limited, making it difficult to address these issues identified within the estates department. As we move into Q3, there is an assumption that these will continue, however the Board needs to ensure that any high risks are identified and recorded appropriately.



6. Estates Services - Graphs

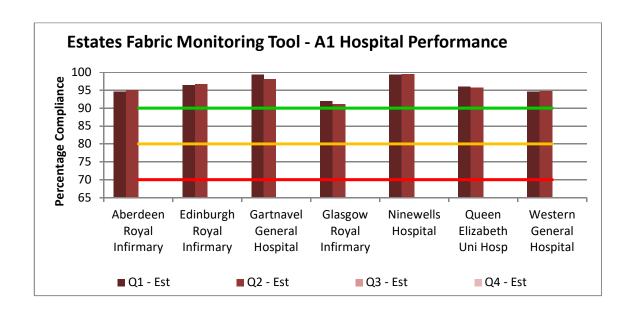
6.1 Estates Fabric Monitoring Tool – NHS Boards' Performance



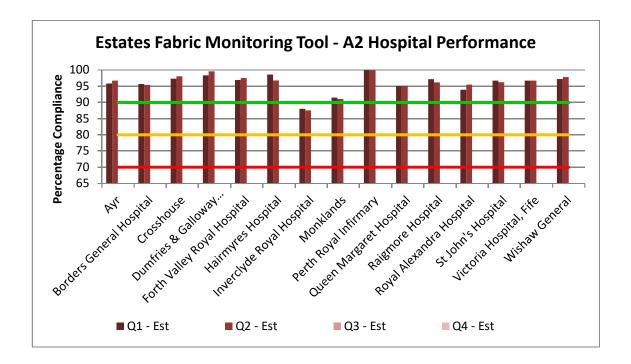
Health Board	1 st Quarter Apr - June 2021/22	2 nd Quarter July - Sept 2021/22	3 rd Quarter Oct - Dec 2021/22	4 th Quarter Jan - Mar 2021/22
NHSSCOTLAND	96.3	96.3		
NHS Ayrshire and Arran	97.3	97.9		
NHS Borders	96.3	96.5		
NHS Dumfries and Galloway	98.8	99.6		
NHS Fife	96.2	96.0		
NHS Forth Valley	94.6	94.4		
NHS Greater Glasgow and Clyde	95.4	95.3		
NHS Golden Jubilee	98.4	97.3		
NHS Grampian	94.3	94.3		
NHS Highland	96.6	96.5		
NHS Lanarkshire	96.0	95.5		
NHS Lothian	96.9	97.0		
NHS NSS SNBTS	98.1	97.2		
NHS Orkney	99.6	99.8		
NHS Scottish Ambulance Service	92.6	92.4		
NHS Shetland	100.0	100.0		
NHS State Hospital	98.9	98.8		
NHS Tayside	98.8	99.3		
NHS Western Isles	99.5	99.2		



6.2 Estates Fabric Monitoring Tool – A1 Hospital performance



6.3 Estates Fabric Monitoring Tool – A2 Hospital Performance





6.4 Estates Fabric Monitoring Tool – A1 Hospital performance

Hospital Type	Site	1 st Quarter Apr - June 2021/22	2 nd Quarter July - Sept 2021/22	3 rd Quarter Oct - Dec 2021/22	4 th Quarter Jan - Mar 2021/22
	Aberdeen Royal Infirmary	94.6	95.0		
	Edinburgh Royal Infirmary	96.5	96.7		
	Gartnavel General Hospital	99.3	98.2		
A 1	Glasgow Royal Infirmary	92.0	91.2		
	Ninewells Hospital	99.3	99.5		
	Queen Elizabeth Uni Hosp	95.9	95.7		
	Western General Hospital	94.6	94.7		

6.5 Estates Fabric Monitoring Tool – A2 Hospital performance

Hospital Type	Site	1 st Quarter Apr - June 2021/22	2 nd Quarter July - Sept 2021/22	3 rd Quarter Oct - Dec 2021/22	4 th Quarter Jan - Mar 2021/22
	Ayr Hospital	95.9	96.7		
	Borders General Hospital	95.7	95.4		
	Crosshouse Hospital	97.3	98.0		
	Dumfries & Galloway Royal Infirmary	98.4	99.6		
	Forth Valley Royal Hospital	96.9	97.5		
	Hairmyres Hospital	98.6	96.8		
	Inverclyde Royal Hospital	88.0	87.5		
A2	Monklands Hospital	91.5	91.0		
	Perth Royal Infirmary	100.0	100.0		
	Queen Margaret Hospital	95.0	95.1		
	Raigmore Hospital	97.2	96.2		
	Royal Alexandra Hospital	93.9	95.5		
	St. John's Hospital	96.7	96.2		
	Victoria Hospital, Fife	96.7	96.7		
	Wishaw General Hospital	97.2	97.8		



Appendix 1 - Methodology

Over the year, NHS Boards will monitor all facilities. Each Quarterly report covers monitoring of a proportion of the facilities/areas within an NHS Board area.

Compliance is assessed within NHS Boards using a standardised monitoring system, available online or offline on a handheld device.

There are two components to the monitoring:

- Audits carried out on a routine basis by Domestic Services Managers
- Audits carried out by Peer Review teams, incorporating a Public Involvement element

Cleanliness and the state of the Estate fabric are assessed using an observational process and according to the technical requirements set out in the NHS Scotland National Cleaning Services Specification. The requirements vary depending on the type of area being assessed and the scores are weighted to reflect risk. For example, an operating theatre receives a higher weighting.

The rooms to be audited within the audit areas are selected at random in accordance with the monitoring framework guidance.

NHS Boards results are available to Health Facilities Scotland via the live online system. This data is used to compile the national Quarterly report and for local NHS Board reporting.