

About this Unit

This standard concerns the routine cleaning and storage of re-usable non-invasive care equipment, such as stethoscopes, thermometers, X-ray machines, drip stands, beds, trolleys, toys used in children's therapy, to minimise the risks of spreading infection. All staff in health and social care settings should receive training in cleaning the care equipment they use but it should be clear who is responsible for the routine cleaning of equipment within each area or care setting.

This standard covers activity in all health and social care settings, including community and domiciliary settings, and ambulance vehicles, but excluding specialised settings, such as laboratories, pharmacies, or operating theatres, where more specialised methods may be required.

Users of this standard will need to ensure that practice reflects up to date information and policies.

Your **knowledge and understanding** will be specifically related to legal requirements and codes of practice and conduct applicable to your job, and the NHS Knowledge and Skills Framework. This will relate to your work activities; the job you are doing, and the setting, eg in hospital and community, domiciliary, residential care, and the individuals you are working with.

Values — the values underpinning this Unit are embedded within the 2009 NHS Code of Conduct for Health Care Support Workers. These are stated in full within the Assessment Strategy and Guidance document for the awards.

Key Words and Concepts — a glossary of definitions, key words and concepts used in this Unit is contained in the Assessment Strategy and Guidance document.

In occupational standards it is quite common to find words or phrases used which you will be familiar with, but which, in the detail of the standards, may be used in a very particular way. **You should read the Assessment Strategy and Guidance document before you begin working with the standards and refer to it if you are unsure about anything in the Unit.**

Specific Evidence Requirements for the Unit

It is essential that you adhere to the Evidence Requirements for this Unit

SPECIFIC EVIDENCE REQUIREMENTS FOR THIS UNIT
Simulation:
<ul style="list-style-type: none"> ◆ Simulation is NOT permitted for any part of this Unit.
<ul style="list-style-type: none"> ◆ The following forms of evidence ARE mandatory:
<ul style="list-style-type: none"> ◆ Direct Observation: Your assessor or expert witness must observe you in real work activities. Their confirmation of your practice will provide evidence for a significant amount of the performance criteria in this Unit. For example, how and why you chose your protective clothing, equipment and agent. Your assessor may use a checklist to record this. ◆ Professional discussion: Describes your actions in a particular situation and reflect on the reason(s) why you practice that way. For example, how COSHH relates to your job and how you dealt with any problems.
Competence of performance and knowledge could also be demonstrated using a variety of evidence from the following:
<ul style="list-style-type: none"> ◆ Reflective Account: These are written pieces of work which allow you to reflect on the course of action you took in a specific situation to identify any learning from the piece of work and to describe what you might do differently in the light of your new knowledge. ◆ Questioning/professional discussion: May be used to provide evidence of knowledge, legislation, policies and procedures which cannot be fully evidenced through direct observation or reflective accounts. In addition your assessor/mentor or expert witness may also ask questions to clarify aspects of your practice. ◆ Expert Witness: A designated expert witness, eg a senior member of staff, may provide a direct observation of your practice, or record a professional discussion they have held with you on a specific piece of practice. ◆ Witness Testimony: Can be a confirmation or authentication of the activities described in your evidence which your assessor or mentor has not seen. ◆ Products: These can be any record that you would normally use within your normal role, eg you should not put confidential records in your portfolio; they can remain where they are normally stored and be checked by your assessor and internal verifier. ◆ Prior Learning: You may be able to use recorded prior learning from a course of training you have attended within the last two years. Discussion on the relevance of this should form part of your assessment plan for each Unit. ◆ Simulation: There may be times when you have to demonstrate you are competent in a situation that does not arise naturally through your work role, eg dealing with violent or abusive behaviour. The Evidence Requirements in each Unit provide specific guidance regarding the use of simulation.
GENERAL GUIDANCE
<ul style="list-style-type: none"> ◆ Prior to commencing this Unit you should agree and complete an assessment plan with your assessor which details the assessment methods you will be using, and the tasks you will be undertaking to demonstrate your competence. ◆ Evidence must be provided for ALL of the performance criteria, ALL of the knowledge. ◆ The evidence must reflect the policies and procedures of your workplace and be linked to current legislation, values and the principles of best practice within the Health Care sector. This will include the National Service Standards for your areas of work. ◆ All evidence must relate to your own work practice.

FP0C 04 (IPC4) Clean and store care equipment to minimise the risks of spreading infection

KNOWLEDGE SPECIFICATION FOR THIS UNIT

Competent practice is a combination of the application of skills and knowledge informed by values and ethics. This specification details the knowledge and understanding required to carry out competent practice in the performance described in this Unit.

When using this specification **it is important to read the knowledge requirements in relation to expectations and requirements of your job role.**

You need to provide evidence for ALL knowledge points listed below. There are a variety of ways this can be achieved so it is essential that you read the 'knowledge evidence' section of the Assessment Guidance.

You need to show that you know, understand and can apply in practice:	Enter Evidence Numbers
1 Relevant standard infection control precautions legislation and policies.	
2 Health and safety regulations covering your area of work.	
3 The COSHH regulations concerning hazardous substances.	
4 The chain of infection.	
5 How to access facilities for hand hygiene.	
6 Techniques for maintaining hand hygiene.	
7 Equipment cleaning schedules and other occasions when cleaning should be carried out.	
8 The uses, dilutions, methods of application, storage and disposal of detergents and disinfectants used to clean equipment.	
9 The appropriate personal protective equipment to use when cleaning equipment.	
10 How to safely put on, remove and dispose of personal protective equipment.	
11 How to segregate different categories of waste.	
12 The different colour-coded bags and waste containers available and the correct use of each.	
13 How to distinguish between single-use, single-patient use and reusable equipment and how to dispose of them, and launder/clean or store them, safely.	
14 Your individual role and responsibilities and the responsibilities of others.	
15 How to complete the records required in your area of activity.	
16 How and when to report issues that are outside your job role.	

Performance Criteria		DO	RA	EW	Q	P	WT	PD
1	Apply appropriate working practices to maintain a tidy, clutter free environment to limit opportunities for microorganisms to spread and contaminate equipment.							
2	Undertake cleaning on a routine, scheduled basis, after a patient is discharged or transferred, or as necessary when care equipment is soiled or contaminated, in accordance with infection prevention and control policies.							
3	Perform hand hygiene before and on completion of the activity in accordance with standard infection control precautions.							
4	Inspect the care equipment before use, and ensure it is clean.							
5	Assess what cleaning is required, and choose the appropriate cleaning agent and equipment.							
6	Gather the cleaning equipment, cleaning agent, and put on the appropriate personal protective equipment before commencing.							
7	Clean the care equipment according to the type of equipment, manufacturer's instructions, and local policy.							
8	Assess the state of repair of care equipment during cleaning, remove any equipment immediately that is not fit for use, and report and replace any item that is damaged.							
9	Ensure care equipment is stored in a clean, designated place in accordance with the manufacturer's instructions and infection prevention and control policies.							
10	Discard single use, and single-patient use equipment and personal protective equipment in the appropriate waste bin and dispose of spent or unused cleaning solutions in a designated area.							
11	Return cleaning agents to safe storage, following Control of Substances Hazardous to Health regulations, health and safety guidance and the manufacturer's instructions							
12	Ensure equipment used for cleaning is cleaned and stored ready for re-use.							

Performance Criteria	DO	RA	EW	Q	P	WT	PD
	13 Should you encounter problems with the facilities and supplies for cleaning care equipment that you are unable to remedy, inform the person responsible for them and ask them to take action.						

DO = Direct Observation

RA = Reflective Account

Q = Questions

EW = Expert Witness

P = Product (Work)

WT = Witness Testimony

PD = Professional Discussion

To be completed by the candidate

I SUBMIT THIS AS A COMPLETE UNIT

Candidate's name:

Candidate's signature:

Date:

To be completed by the assessor

It is a shared responsibility of both the candidate and assessor to claim evidence, however, it is the responsibility of the assessor to ensure the accuracy/validity of each evidence claim and make the final decision.

I CERTIFY THAT SUFFICIENT EVIDENCE HAS BEEN PRODUCED TO MEET ALL THE ELEMENTS, PCS AND KNOWLEDGE OF THIS UNIT.

Assessor's name:

Assessor's signature:

Date:

Assessor/Internal verifier feedback

To be completed by the internal verifier if applicable

This section only needs to be completed if the Unit is sampled by the internal verifier

Internal verifier's name:

Internal verifier's signature:

Date: