

Environmental Management Services
Phase II Orientation

Trainee: _____

EOD: _____

Trainer: Please initial and date when the trainee has successfully completed the following tasks.		Trainee		Trainer	
		Initials	Date	Initials	Date
I. VA FACILITY-NEO					
	A. Tour of VA				
	B. Introduction to staff/tour of assigned area				
	C. Location of Personnel/Payroll/Employee Health Nurse				
	D. Attendance to the VA Orientation				
	E. Parking Regulations/Smoking Policy				
	F. Photo ID Taken/Name Badge Issued				
	G. Emergency Telephone No. 911				
	H. Patient Rights/Patient Abuse				
	I. HIPAA/JACHO Regulations				
	J. Security/Badges				
	K. Signed into computer				
II. HOUSEKEEPING SERVICES ADMINISTRATION					
	A. Mission, Philosophy and Objective *Infection Control: Prevent the spread of infection/Prevent HAI's *Provide Environmental Care and Sanitation such that healthcare can and will be provided in a safe and clean environment				
	B. Code of Ethics *Patient Bill of Rights *14 General Principles of Ethical Conduct				
	C. Organizational Chart				
	D. In-service Requirements *TMS *Service Meetings *Training Meetings				
	E. Supervisory Quality Assurance/Inspections A. Environment of Care Rounds (EOC) B. Dot Test C. Annual Evaluations				
	F. Customer Service & Courtesy *EMS staff must acknowledge they are providing customer service and strive to provide prompt, thorough, and courteous services. We are in a support role and should ensure our customers (everyone in this facility) are well supported.				
	G. Housekeeping Procedure Manual/Task Schedule/Custodial Form				
	H. Interpersonal Skills				
	I. Interpersonal Skills				
III. PERSONNEL POLICIES					
	A. Work Rules/Disciplinary				

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	B. Harassment Policy				
	C. Emergency Call Back				
	D. Telephone/Dress Code				
	*Uniforms				
	*Personal Cleanliness				
	*Footwear				
	*Personal Cell Phone Use-keep to an extreme minimum				
	E. Work Order Repair Requests				
	F. Reporting Situations/Problems to Supervisor or Designee				
IV. HOUSEKEEPING POLICIES					
	A. Taking Breaks/Lunches in designated areas (EMS Breakroom/Cafeteria)				
	B. Vacation and Holiday Scheduling; VATAS				
	C. Monthly Work Schedules/Weekend Schedules				
	D. Daily Assignment Sheet				
	E. Change of Schedule Forms				
	F. Work Hours/Scheduled Break Times				
	G. Change of Work Area Request				
	H. Call-In Procedures				
	I. Keys/Locked Box Location				
	J. Weekend Duties/Answering Pages				
V. SAFETY/RISK MANAGEMENT					
	A. ASSIST Program				
	B. Tornado/Fire Drills RACE				
	C. Codes: Red, Blue, Orange, White, Active Threat				
	D. Eye Wash Stations/Goggles				
V. SAFETY/RISK MANAGEMENT CONTINUED.					
	E. HazCom/MSDS Location:				
	* In EMS breakroom				
	* Electronic Copy				

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	<p>F. Introduction to Chemical Use and Safety</p> <ul style="list-style-type: none"> *Virex: EPA Hospital Grade Disinfectant *Stride: Neutral Cleaning Agent (detergent) *All-purpose cleaner: For windows, stainless steel *Lemoneze: Mild abrasive, for ceramic tile/sinks *Crew: Toilet bowl cleaning/disinfection; inside the toilet bowl only, and not used as a floor cleaning chemical as listed on the label. *Consumer: Oder Control *Envirox/ Dang!: Soap scum, hard water, lime/calcium scaling *Bleach (Clorox or Sani Wipes): For enteric precautions *Oxivir Wipes: for Nursing staff *Noroxy C-Dif: for enteric precautions *Purell: Alcohol based hand sanitizer *Clear and Mild Soap: In public & patient handwashing stations *Antimicrobial Soap: In dispensers near patient bedside sinks; for providers 				
	<p>G. Regulated Medical Waste:</p> <ul style="list-style-type: none"> *Sharps Containers *Blue and White Pharmaceutical Bins *Reporting black boxes *Yellow/Chemo Bins *Biohazard 				
	<p>H. Personal Protection Equipment/Standard Precautions</p> <p>A. Standard Precautions: Gloves and hand hygiene</p> <p>B. Level of PPE is to be used in direct relation to the level of risk/anticipated risk of exposure</p> <p>C. The minimum level of PPE must always be met for the risk indication presented/or per the protocol for an area</p> <p>D. Compromised PPE must be changed out for non-compromised equipment</p> <p>E. PPE common to housekeepers are gloves, surgical masks, N94 respirators, PAPR, gowns, hair nets, shoe covers</p> <p>F. Donning and Doffing PPE</p>				
	<p>I. Recycling/Waste Removal</p> <ul style="list-style-type: none"> ** Small Batteries 				

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	<p>J. Housekeeping Infection Control Policy Isolation Procedures- Identifies Signage and Associates Appropriate PPE:</p> <p>A.</p> <ul style="list-style-type: none"> *Contact Precautions (i.e MRSA) *Enteric Precautions (i.e C-Dif) *Droplet Precautions *Airborne Precautions <p>B. Changes privacy and shower curtains in the room.</p> <p>C. If doing a discharge clean on an enteric/ Covid-19 precaution room, uses the 2-step cleaning method.</p> <p>D. Neutropenic</p> <p>E. Hazardous Drug</p> <p>F. Aerosol Producing Procedure</p>				
	<p>K. Blood Borne Pathogen Policy</p> <ol style="list-style-type: none"> 1. Exposure Control 2. Standard Precaution 3. Sanitation of Body Fluids 4. Hand washing 				
	<p>L. Mercury/Chemotherapy Spills</p>				
	<p>M. Lock Out/Tag Out</p>				
VI. BASIC CLEANING SANITATION PROCEDURES					
	<p>A. Cleaning and Disinfecting:</p> <ol style="list-style-type: none"> 1. Cleaning: The physical removal of dirt, dust, debris, and grime by a mechanical means. 2. Disinfecting: Killing microorganisms by chemical means. <ul style="list-style-type: none"> *Cleaning must happen in for disinfecting to be effective. *The use of chemicals is not a substitute for vigorous cleaning. <ol style="list-style-type: none"> 3. 1-Step process 4. 2-Step process 5. Basic Principles include working top to bottom, cleanest to dirtiest, and methodically (clockwise or counterclockwise) 				
	<p>B. Wet Washing/Sanitizing</p> <ul style="list-style-type: none"> *Virex: Dwell time of 10 minutes 				
	<p>C. High and Low Dusting</p> <ul style="list-style-type: none"> *Dust is a major component in the chain of infection: high and low dusting, dust mopping, and vacuuming are not optional and must be done daily. *Vents and radiators *Ledges *Baseboards *The bases/bottom of equipment 				

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<p>D. Sweeping/Dust Mopping/Wet Mopping/Vacuuming *Dust mopping is not optional and must take place before damp mopping *Hallways are to be dust mopped at least once daily *Bathrooms are not dust mopped- use valet broom in bathrooms *Wet floor signs are to be placed when wet mopping *Carpeted areas are to be vacuumed daily- they collect as much dust as a non-carpeted floor and must be cared for *Vacuums require preventative maintenance: check the hoses for blockages, check the bags and change when 1/2-3/4 full, check brush underneath for obstructions</p>				
<p>E. Glass/Mirror/Windows/Screen/Blind Cleaning</p>				
<p>F. Bed Sanitation (Discharge sanitation of patient rooms)</p>				
<p>G. Stairwells/Handrails/Elevator Cleaning</p>				
<p>H. Daily Sanitation/Patient Rooms/Public Areas</p>				
<p>I. Periodic Cleaning/Patient Rooms/Public Areas</p>				
<p>J. Restroom Sanitation (Sink/Toilet/Urinal/Tiles/Hardware) *Work cleanest to dirtiest *Work top to bottom *Use Crew on a daily basis in toilets, and only in the toilet bowl, not as a “restroom surface and floor cleaner” as the Indicates. * “Deep Scrub” toilets once per week *Wash all fixtures, mirrors, shower walls, handrails, shower Chair, pull cord *Change garbage, place a clean liner in receptacle *Mop floor</p>				
<p>K. Isolation Room Sanitation *Check Signage for required PPE *Remove Curtains *Wash the doors *Clean Room per standard *Hang New Curtains *If a transplant clean, wash walls, ceilings, windows, blinds And vents</p>				
<p>L. C-DIF Cleaning: 2-Step cleaning process</p>				
<p>M. Filling Nurses Germicidal Disinfectant Bottles</p>				
<p>N. Office/Nursing Station Cleaning</p>				
<p>O. Shower/Tub Room Sanitation</p>				
<p>P. Entrances Outside and Inside/Lobby Mats</p>				
<p>Q. Drinking Fountains/Refrigerators</p>				
<p>R. Floor Drains/Ventilation Grills/Radiators/Fans</p>				
<p>S. Wall/Ceiling Washing</p>				

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	<p>T. Soap Dispensers *Bedside and clinic soap dispensers get antimicrobial soap *Patient sinks, sink washing stations in hallways and public restroom sinks get Clear and Mild.</p>				
	<p>U. Waste Receptacles/Garbage Dumpsters: rinsed after taken to the basement and emptied</p>				
	<p>V. Recycling/Waste Removal **Compactor **Cardboard Bailer</p>				
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<p>VII. EQUIPMENT—MAINTAINING AND OPERATING</p>					
	<p>A. Cart Set Up 1. Basic Equipment Includes: *Two mop buckets with a strainer: either Virex or Stride (alternate daily, but both buckets must have the same chemical in them) *Dust mop *Flat mop *Loop mop *Valet broom and dustpan *Double sided rag bucket: with Virex * Wet floor signs *Dusting wand 2. Sufficiently stocked with soap, hand sanitizer, paper products, and cleaning chemicals to prevent repeated trips to the cleaning closet 3. Paper products on top shelf, soaps and hand sanitizers on middle shelf, cleaning chemicals on bottom shelf.</p>				
	<p>B. Cart Break-down 1. Buckets emptied and rinsed with water (mop and rag) 2. Mop heads removed (loop, flat and dust) and placed in a liner and taken to the ground floor soiled linen room 3. Garbage removed and placed in compactor room in basement 4. Top, sides of cart wiped down, mop handles wiped, and valet broom and dustpan rinsed 5. Carts are assigned to areas, not people- and should be stored in the assigned areas</p>				
	<p>C. Housekeeping Cart/Closet/Buckets/Wringer/Locked Chemicals</p>				
	<p>D. Dust Mop/Wet Mop</p>				
	<p>E. Wet and Dry Vacuums</p>				
	<p>F. Rotary Floor Machine</p>				
	<p>G. Auto Scrubber</p>				
	<p>H. Burnisher/High Speed</p>				

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Training Notes:

This image shows a single sheet of white paper with horizontal blue or grey ruling lines. The lines are evenly spaced and run across the width of the page. There are approximately 20 lines visible. The paper has a slight texture and some minor discoloration or shadows, suggesting it's a physical document. There is no handwriting or other markings on the page.