

SECURE THE NEW NORMAL IN HYGIENE

Aged Care Toolkit



We're here to help.

Today we live in a world with a new hygiene standard, where people want to feel confident and secure about hygiene.

Tork has been committed to improving hygiene for more than 50 years at work and away from home, with our focus on developing and producing complete hygiene and cleaning solutions.

In this guide, we share our expertise with you and provide guidelines on how to execute appropriate hand hygiene and surface cleaning in your facility to protect the health and well-being of your staff, residents and visitors.

Together we can secure the new normal in hygiene and keep business running.

Sincerely,

Rochelle Lake
Head of Marketing B2B
Tork Professional Hygiene



Improve hygiene

Following proper hand hygiene protocols, routine cleaning and disinfecting procedures, and optimizing dispenser placement can help reduce the spread of the viruses and infections.

This toolkit provides the resources you need to help you reinforce those best practices in your aged care facility to protect the health and well-being of your staff, residents and visitors.



How can viruses and infections spread in your facility?



**Through the air
by coughing and
sneezing**



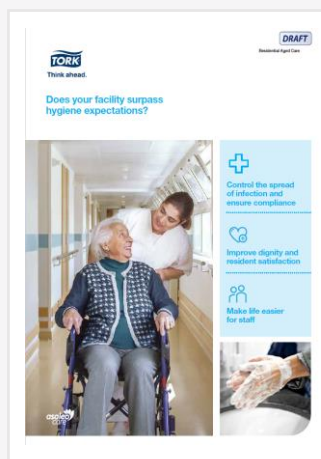
**Close personal contact,
such as touching or
shaking hands**



**Touching an object or
surface with the virus or
infection on it, then
touching your mouth,
nose, or eyes**

Resources

**Tork Product Recommendations
for Aged Care**



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Hand hygiene

It is more important than ever to reinforce proper hand hygiene to control the spread of germs and bacteria.

Hand washing or sanitising should occur:

- before and after all resident and visitor contact
- contact with potentially infectious materials
- before putting on and after removing personal protective equipment (PPE)

If hands are visibly soiled, hands should be thoroughly washed with soap and water and dried with single-use paper towel.

You should ensure that hand hygiene supplies are readily available to all personnel in every care location.

Below are also some resources to reinforce proper hand hygiene techniques.



Resources

SECURE THE NEW NORMAL IN HYGIENE **Hand washing procedure**

Wash and dry your hands thoroughly for at least 60 seconds with soap, water and paper towel

TORK® Think ahead.

Hand washing procedure

Download



SECURE THE NEW NORMAL IN HYGIENE **Hand sanitising procedure**

Disinfect your hands thoroughly for at least 30 seconds

TORK® Think ahead.

Hand sanitising procedure

Download



Hand Hygiene Training

Improve your hand hygiene in virtual reality

Download the app

Virtual reality for deeper learning

VR Clean Hands training

Learn more



Healthcare

Create a powerful message for your facility or ward.

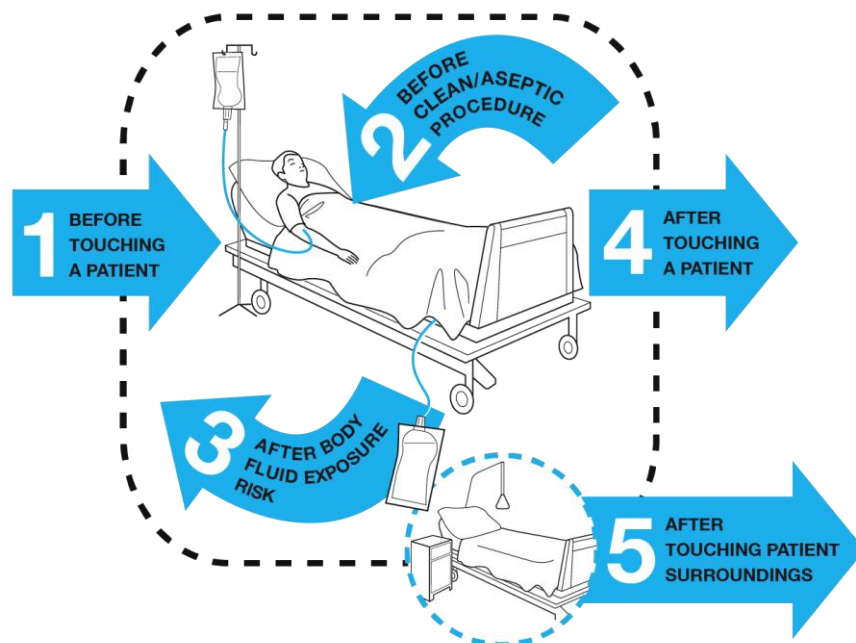
Download and print your poster

Tork poster builder

Learn more



WHO's 5 moments of hand hygiene for healthcare staff



1 Before touching a patient

In order to reduce patient exposure to being colonized with healthcare-associated microorganisms, hand hygiene must take place before touching a patient or entering the patient zone. The patient zone contains the patient and his/her immediate surroundings, including surfaces touched by the patient (such as the bed rails, infusion tubing) and surfaces frequently touched by staff (such as monitors, knobs and buttons).

2 Before a clean/septic procedure

Before performing a clean/aseptic procedure, hand hygiene is critical to preventing healthcare associated infections (HAI). Hand hygiene should take place between the last exposure to a surface and immediately before access to a critical site with infectious risk for the patient or a critical site with combined infectious risk.

3 After body fluid exposure risk

After performing a task associated with a risk to exposing hands to body fluids, hand hygiene must take place instantly and before a new hand-to-surface exposure, even if you stay within the patient zone. This action reduces both your risk of being colonized or infected by infectious agents and the risk of transmitting microorganisms from a "colonized" to a "clean" body site within the same patient.

4 After touching a patient

After touching the patient and before touching an object in the area outside of the patient, hand hygiene is important to minimize the risk of dissemination to the healthcare environment. This action also protects you by significantly reducing the contamination of your hands with flora from the patient.

5 After touching patient surroundings

The final moment for hand hygiene occurs between hand exposure to a surface in the patient zone and a subsequent hand exposure to a surface in the area outside of the patient - but without touching the patient. Hand hygiene is required at this moment, since exposure to patient objects, even without physical contact with the patients, is associated with hand contamination.

Surface cleaning and disinfecting

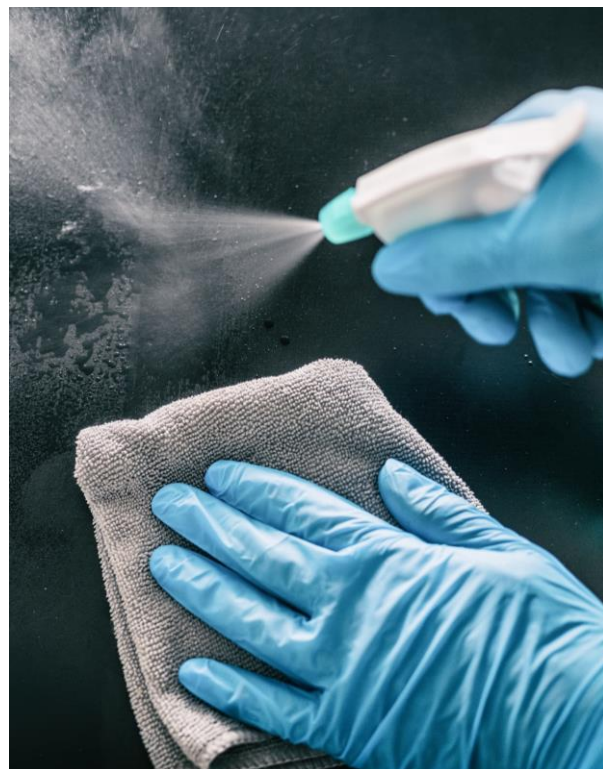
Routine cleaning and disinfecting procedures are appropriate to prevent viruses and infections, so ensure these procedures are followed consistently and correctly, especially for high-touch surfaces such as:

- Overbed tables
- Floors
- Bed rails
- Bedside tables
- Chairs
- Door handles
- Dining areas
- Coffee lounges
- Bathrooms

Managing laundry, foodservice utensils and medical waste should also be performed following routine procedures.

All employees can play an important role in helping to stop germs and bacteria spreading by working by prioritising areas of risk and following guidelines for cleaning and disinfecting.

Below are some tools and guidelines to help you ensure that your aged care facility remains hygienic and clean.



Resources

CDC Environmental Checklist for Monitoring Termination Checklist*

Date:			
City:			
Room Number:			
Initiated at 12 and (optional):			

Evaluate the following criteria only for each participant room:			
Criteria	Commet	Not Commet	Not Present in Room
Desk only, controls			
TV (not laptop area)			
Cell phone chargers			
Telephone			
Belongs with handle			
Chair			
Room sink			
Room light switch			
Room door door knob			
Bedroom enter door knob - please			
Bedroom light switch			
Bedroom handrails by toilet			
Bedroom sink			
Toilet seat			
Toilet flush handle			
Toilet hygiene device			


Mark the following criteria only if these equipment are present in the room:

Wash/break down Surface			
Criteria	Commet	Not Commet	Not Present in Room
Table control			
Wash/break down additional criteria			
Wash/break down additional criteria			
Wash/break down additional criteria			

Mark the monitoring method used:


<input type="checkbox"/> Direct observation	<input type="checkbox"/> Flourescent gel	<input type="checkbox"/> Air-able cultures
<input type="checkbox"/> Wash cultures	<input type="checkbox"/> ATP assay	

*Selection of strategies and disinfectants should be based on evidence for institutional policies and procedures which aim to include disinfection of all individual areas and control services and the breakdown of equipment, furniture, contaminated and washed by person using healthcare waste.



Institute of Child Development and Education, Vrije Universiteit Brussel

International Quality Research



CDC environmental checklist for cleaning

Download



Think ahead.

Secure the new normal in surface cleaning and disinfecting

These guidelines provide clear direction on which

Task volumes and criteria are best for surface cleaning and disinfecting. Remember, cleaning is not the same as disinfecting and continue to be a threat for dust if not removed properly.

1

Always wear gloves

Always wear gloves for cleaning purposes. Gloves should be discarded after each cleaning. Using reusable gloves, the cleaner must change gloves if the wearing area.

Do not touch anything else after gloves are removed. Do your hands thoroughly with a single pump before you leave area of decontamination.

2

Clean surfaces

Cleaning is a physical process between bacteria and water, and it is not an active surface decontamination and water.

Clean surfaces must be visibly dry with clean detergent. Surfaces must be visibly dry before disinfecting.

3

Sanitize surfaces

Disinfecting is the use of chemicals to kill germs which cannot be removed or killed.

Use an EPA approved sanitizer and disinfectant with cleaning as a general best practice, use an EPA with a minimum of 70% alcohol.

Always keep the manufacturer's instructions for disinfectant, application methods, contact time, etc.

Check product's expiration date. Exposed materials may not be effective.

Task Based Cleaning and Disinfection

Routine cleaning & disinfecting

High-touch surfaces should be cleaned and disinfected regularly

Sanitize
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Guide to Tork surface cleaning solutions for aged care

Download



Dispenser placement recommendations

To ensure best practice hygiene standards, reinforce proper hand hygiene and cleaning through optimal dispenser placement. Make sure to place hygiene equipment in easily visible and accessible areas where there's a natural flow of traffic. Staff, residents and visitors should not have to go out of their way to access those dispensers. While we understand that every aged care facility is unique, here are some guiding principles for areas.



Reception

- 1 Many visitors do not clean their hands when entering the hospital. Giving easy access to and info about hand hygiene could potentially have great benefit.



Private room

- 1 Placing dispensers on "walking-routes" or at a site where care is frequently provided results in more usage.
- 2 Dispensers should not be out of the way, behind another object or out-of-sight



Shared room

- 1 This type of room requires more than one dispenser.
- 2 Familiar locations eliminate need to look for dispenser. In one observational study dispensers located near the sink and at the entrance to the room were used more frequently than dispensers at the rear of the room.
- 3 Perform a work-flow study to see where the "high-traffic" areas of the room are as well as where health care workers are standing when one of the 5 moments occurs.
- 4 In addition to high traffic, take extra care to see where healthcare workers moves between patients.



Nurse station

- 1 An observational study showed that dispensers located at the nursing station were used more frequently than dispensers placed on the wall behind patient beds.
- 2 Place dispensers in walking corridors for use on the go

For further information visit our website or contact us for a hygiene audit of your aged care facility.

[Learn more](#)

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