Swish Experts in complete cleaning solutions	
Cleaning solutions	
Infection Prevention & Control In The Recreation Facility Setting	
BECENTION HEALTY PERSONNEL	
Before I had kids, I thought I had a great immune system, but it turns out I was just	
really good at staying away from the type of people who sneeze directly into your eyeballs while telling you a story.	
write telling you a story.	
Swish	
WELCOME	
AND	
a huge thanks	
	I and the second

OUR GOAL FOR TODAY'S SESSION

Swi

TAKE LEARNINGS FROM HERE







Swis

AND APPLY THEM HERE



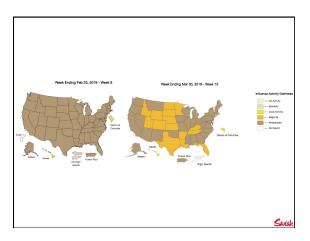
BEFORE WE GET STARTED...

- ◆You Will Not Be The Same By The End of Today's Session
- **+**Ever-Evolving Nature of IP&C
- **◆**There Is No "One-Size-Fits-All" Approach or "Magic Bullets"
- →Dialogue > Monologue
- **+**Leave your phone **ON**

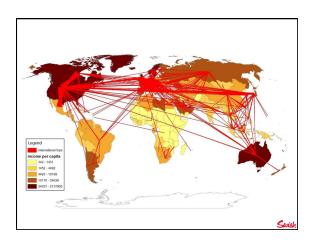
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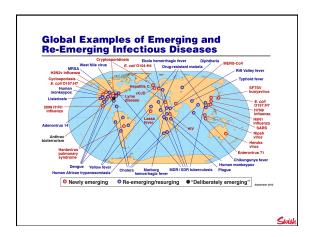
THE CASE FOR MORE IP&C AWARENESS IN OUR EVERYDAY LIVES

Swi









	The New York Times
	A Mysterious Infection, Spanning
	the Globe in a Climate of Secrecy The rise of Candida auris embodies a serious and growing public
	health threat: drug-resistant germs.
or	
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Qb	SAME OF THE PARTY
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Revenge	of the Bacteria: Why We're Losing the War
	5

WE ARE LOSING A SILENT WAR

- **+**HAI = Healthcare Associated Infection
 - +220K Infections, 8K Deaths Annually
 - +5 20% chance of infection in a Canadian Hospital
- +Superbugs quickly moving outside the healthcare environment
 - +VRE, MRSA, C.Diff
 - +10 M deaths / Year by 2050 If No Action Taken
- ◆Antibiotics In Food Chain & Meds Suspected
- +Overuse/Misuse of Cleaning Compounds?

Swish

THE CASE FOR
HEIGHTENED IP&C
AWARENESS IN
THE REC FACILITY SETTING

Cwix

✓Public Spaces	With Heavy Traffic	
√Reaular Bodily	/ Fluid Transmission	
✓Plentiful Reser	voirs	
✓Plentiful Susce	eptible Hosts	
√Subject To Un Opinion	orecedented Public	
	Swish	
ON THE	FRONT LINES	
ON THE		
	+ Little Training	
	+Low(est) Pay	
	◆Underappreciated	
	+Complex Roles	
	Swish	
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OUR FOCUS TODAY

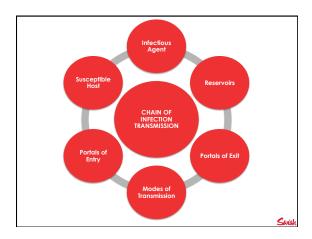
- **+**Understand Basics of IP & C
- **→**Adaptation To Rec Facility Environment
 - → Product Evaluation & Selection Criteria
 - **→**Process Determination
- **→**Emerging Trends & Technologies
 - **→**Products
 - **+** Auditing Tools
- **+**Easy & Impactful Implementations

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THE BASICS

CHAIN OF TRANSMISSION

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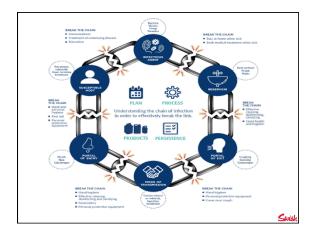


1) INFECTIOUS AGENT - Not all microorganisms (aka "microbes") are harmful - Microbes that cause infection are known as pathogens	Bacteria (E. Coli, MRSA) Virus (Cold or Flu) Fungi (Athlete's Foot)	
2) RESERVOIRS - Where microbes live & grow	People Surfaces & Objects Food & Water	
3) PORTALS OF EXIT - How pathogens leave a reservoir	Cut Cough or Sneeze Secretion or Excretion	
A) MODE OF TRANSMISSION - Pathogens rely on specific modes of transmission to move from a portal of exit to a portal of entry	Contact Droplet Airborne / Vapor	
5) PORTALS OF ENTRY - How pathogens enter a new host	Mucous membrane (eyes, nose, mouth) Respiratory tract GI tract Broken Skin	
SUSCEPTIBLE HOST We are all at risk of infection everyday Some amongst us are more vulnerable and we have a responsibility to protect those at higher risk	Surgery Oncology Burns Very Young / Very Old Diabetes Auto-immune diseases	

WHERE DO WE HAVE THE MOST LIKELY OPPORTUNITIES TO BREAK THE CHAIN?

Swis

INFECTIOUS AGENT Not all microorganisms (aka "microbes") are harmful Microbes that cause infection are known as pathogens		
2) RESERVOIRS Where microbes live & grow	:	People Surfaces & Objects Food & Water
3) PORTALS OF EXIT - How pathogens leave a reservoir		Cut Cough or Sneeze Secretion or Excretion
4) MODE OF TRANSMISSION - Pathogens rely on specific modes of transmission to move from a portal of exit to a portal of entry	:	Contact Droplet Airborne / Vapor
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6) SUSCEPTIBLE HOST - We are all at risk of infection everyday - Some amongst us are more vulnerable and we have a responsibility to protect those at higher risk		Surgery Oncology Burns Very Young / Very Old Diobetes



BREAKING THE CHAIN PROVES COMPLICATED FOR SEVERAL REASONS

1) WE SUCK AT HAND HYGIENE

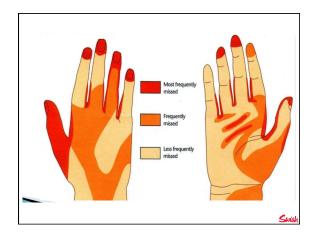


- ◆Estimate That 80% of Infections Are Spread By Hands
- +And Yet...
 - +58% of Females (28% with
 - +48% of Males (8% with soap)

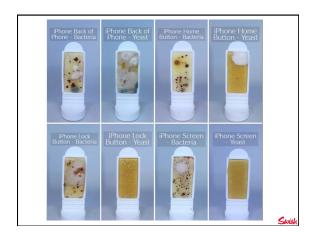


- +Minimum 20 Seconds
- **+**Unfinished Business

Cwish









2) A FIERCE & RESILIENT ENEMY

- → BILLIONS of Norovirus Particles In A Single Stool Sample
- → SNEEZING Can Launch Mucous @ 100 mph and Up To 30 Ft Away



- → FLU Virus Has Been Observed To Make Hosts More Social In Early Stages of Incubation
- → Survival Times Drastically Influenced By: Nature of Organism, Surface Material, Temp, Soil Load, Humidity, Temperature

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Type of virus	Duration of persistence (range)	Type of bacterium	Duration of persistence (range)
Adenovirus	7 days - 3 months	Acinetobacter spp.	3 days to 5 months
Astrovirus	7 – 90 days	Bordetella pertussis	3 – 5 days
		Campylobacter jejuni	up to 6 days
Coronavirus	3 hours	Clostridium difficile (spores)	5 months
SARS associated virus	72 – 96 hours	Chlamydia pneumoniae, C. trachomatis	≤ 30 hours
Coxsackie virus	> 2 weeks	Chlamydia psittaci	15 days
Cytomegalovirus	8 hours	Corynebacterium diphtheriae	7 days - 6 months
Echovirus	7 days	Corynebacterium pseudotuberculosis	1-8 days
		Escherichia coli	1.5 hours - 16 months
HAV	2 hours – 60 days	Enterococcus spp. including VRE and VSE	5 days - 4 months
HBV	> 1 week	Haemophilus influenzae	12 days
HIV	> 7 days	Helicobacter pylori	≤ 90 minutes
Herpes simplex virus, type 1 and 2	4.5 hours – 8 weeks	Klebsiella spp.	2 hours to > 30 months
Influenza virus	1 – 2 days	Listeria spp.	1 day - months
		Mycobacterium bovis	> 2 months
Norovirus and feline calici virus (FCV)	8 hours – 7 days	Mycobacterium tuberculosis	1 day - 4 months
Papillomavirus 16	> 7 days	Neisseria gonorrhoeae	1 - 3 days
Papovavirus	8 days	Proteus vulgaris	1 - 2 days
Parvovirus	> 1 year	Pseudomonas aeruginosa	6 hours - 16 months; on dry floor: 5 weeks
		Salmonella typhi	6 hours – 4 weeks
Poliovirus type 1	4 hours - < 8 days	Salmonella typhimurium	10 days - 4.2 years
Poliovirus type 2	1 day - 8 weeks	Salmonella spp.	1 day
Pseudorabies virus	≥7 days	Serratia marcescens	3 days - 2 months; on dry floor: 5 weeks
Respiratory syncytial virus	up to 6 hours	Shigella spp.	2 days - 5 months
Rhinovirus	2 hours – 7 days	Staphylococcus aureus, including MRSA	7 days - 7 months
		Streptococcus pneumeniae	1 - 20 days
Rotavirus	6 – 60 days	Streptococcus pyogenes	3 days - 6.5 months
Vacciniavirus	3 weeks -> 20 weeks	Vibrio cholerae	1-7 days Swith

	MOST RESISTANT MINIMUM LEVEL OF REPROCESSING REQUIRED TO KILL MICROORGANISM		-		
Prions (Creutzfeldt-Jakob disease (CJD) and variant CJD)	Special Methods Required				
Bacterial spores (e.g., Clostridium difficile) Protozoa with cysts (e.g., Giardia, Cryptosporidium)	Sterilization		-		
Mycobacteria (e.g., TB)	High-level Disinfection		-		
Non-lipid or small viruses (e.g., norovirus, coxsackle)	High-level Disinfection		-		
Fungi (e.g., Candida, Aspergillus)	High-level Disinfection, some Low-level Disinfectants				
Lipid or medium sized virus (e.g., herpes, rhinovirus, influenza, HIV, hepatitis B/C)	Low-level Disinfection		-		
Vegetative bacteria (e.g., Staphylococcus, Pseudomonas)	Low-level Disinfection		-		
	LEAST RESISTANT	Swish	_		
		Swin			
			-		
THE	BASICS		_		
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ONE	POSSIBLE				
APPR	ROACH		-		
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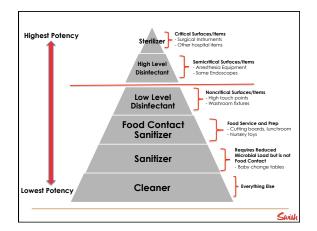
After that first person in the office sneezes	Flu season attire for the office
	Swish

A SLIGHTLY MORE PRUDENT APPROACH...

EXPERIENCE FROM THE FIELD

- ◆Thorough Cleaning ➤ "At-Best" Disinfection
- ◆Products & Process Are Very Site Specific
- **+**Cleaning, Sanitizing and Disinfecting Are Not The Same Thing!

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STERILIZATION

ELIMINATES & destroys all microbes

- Carried out in health-care facilities using specialized equipment

Surgical tools & instruments that enter the body

DISINFECTING

INACTIVATES microbes on surfaces & objects
- Carried out using chemicals and/or equipment in a prescribed manner to lower the risk of transmission

- Quat/Bleach/ H₂O₂
- Steam / UV

SANITIZING

REDUCES microbe levels on surfaces & objects to a •

- safe level as deemed by public health
 Carried out using chemicals and/or equipment in a
- prescribed manner to lower the risk of transmission

CLEANING

REMOVES microbes & soil from surfaces & objects -

- Quat/Bleach
- Hand Sanitizer (Alc) High-Temp
- Dishwashers

- Carried out using detergents and mechanical action to physically remove microbes from surfaces.

- Does not necessarily kill germs, but is a critical step in all IP&C practice

Cleaners

Soaps
 Microfibre Tools



3 CRITICAL POINTS



- Disinfectants/Sanitizers are intended for use on pre-cleaned surfaces
- Most are tested in the presence of 5% soil (allows claim of being a Cleaner/ Disinfectant) but 2-step process of "removal of gross soil" prior to disinfectant application is always the preferred method
- Dry Time > Dwell Time

RISK STRATIFICATION MATRIX TO DETERMINE CLEANING FREQUENCIES

LOW RISK SURFACE / MODERATE RISK SURFACE / HIGH RISK SURFACE

+ Contact Frequency of Surface

- + High Touch (door handles, push panels)
- +Low Touch (floors, walls, mirrors)

+ Probability of Contamination With Pathogens

- + Heavy (Toilet, Change Table)
- → Moderate (Sinks, Counters)
- +Light (Floor)

+ Vulnerability of Population

- +Seniors Room
- +Childrens Area
- +Exceptional Needs
- +Immuno-Compromised (oncology, burn, auto-immune)



MATRIX SCORING TO DETERMINE FREQUENCY AND PROCESS(ES)

For each functional area or department, the frequency of cleaning is based on the factors listed in the boxes above. A score is given if the factors are present, and the frequency of cleaning is based on the total score as derived in the following matrix:

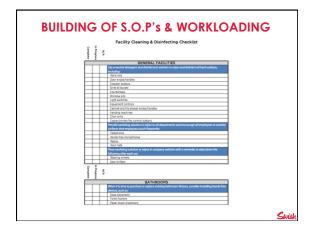
Table 13: Risk Stratification Scores for High-Touch Surfaces (Score for Potential for Exposure = 3)

Probability of contamination with pathogens	More susceptible population (score = 1)	Less susceptible population (score = 0)
Heavy (score = 3)	7 (3+3+1)	6 (3+3+0)
Moderate (score = 2)	6 (3+2+1)	5 (3+2+0)
Light (score = 1)	5 (3+1+1)	4 (3+1+0)

Table 14: Risk Stratification Scores for Low-Touch Surfaces (Score for Potential for Exposure = 1)

Probability of contamination with pathogens	More susceptible population (score = 1)	Less susceptible population (score = 0)
Heavy (score = 3)	5 (1+3+1)	4 (1+3+0)
Moderate (score = 2)	4 (1+2+1)	3 (1+2+0)
Light (score = 1)	3 (1+1+1)	2 (1+1+0)





APPLICATION TO A RECREATIONAL FACILITY **SETTING** PRODUCT SELECTION

CONCERNS IN REC SETTING

BACTERIA

- Salmonella
- Listeria
- E.Coli
- Chlamydia MRSA
- VRE
- CDiff

VIRUS

- Respiratory (vapour)
 - COLD (rhino / corona)FLU (Influenza)
- G.I. (fecal oral)

 - NorovirusRotovirus
 - Hep A Polio
- Bloodborne / Bodily Fluids
 - Hep B HIV
 - CMV (Cytomegalo) Herpes (HSV 1&2)

FUNGI

- · Athlete's
- Foot
- Molds

Centers for Disease Control and Prevention
CCC 24/7: Soving Lives, Protecting People™

What's The Best Disinfectant?

Table 2. Properties of an ideal disinfectant

- Fast acting: should produce a rapid kill
- reast acting: should produce at application.
 Not affected by environmental factors: should be active in the pisoaps, detergents, and other chemicals encountered in use
 Nontoxic: should not be harmful to the user or patient
- Surface compatibility: should not corrode instruments and metallic surface

- Odorless: should have a pleasant odor or no odor to facilitate its routine use
- Economical: should not be prohibitively high in cost
 Solubility: should be soluble in water
 Stability: should be stable in concentrate and use-dilution

- Cleaner: should have good cleaning properties
 Environmentally friendly: should not damage the environ



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- ✓ DIN Registered
- ✓ Broad Spectrum Kill Claims Specific To Your Requirements
- ✓ Dwell Time (Sanitize & Disinfect Claims?)
- ✓ Shelf Life (Concentrate & RTU)
- ✓ Dispensed / On-Site Production
- ✓ Verifiable Concentration Testing
- ✓ Cost Per Use
- ✓ Others ?

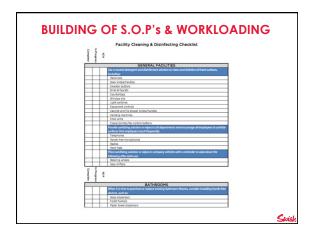
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What's The Best Disinfectant? Active Ingredient Spectrum Acting Info Interactions Induction Ind

Active Ingredient	Surface Interactions and Notes	
Alcohol	Can dull and damage finished, painted or dyed surfaces Can have negative affect on polymer based materials Caution highly flammable Volatile can cause issues with workers inhaling	No corrosive effects on most surfaces Volatile no residual
Chlorine	Can dull and damage finished, painted or dyed surfaces Can damage metals especially soft metals Usually very high pH >11.5 Oxidizer Notable health and safety issues	Go-to chemical for virtually every health unit Go-to chemical for anything new or unknown Term represent broad range of chemistries
Hydrogen Peroxide (Enhanced Action/ Accelerated)	Can dull and damage finished, painted or dyed surfaces Can damage metals sepecially soft metals Often very low pH < 2.5 Extremely powerful oxidizer	Excellent marketing Good environmental story Term represent broad range of chemistries
Peracetic Acid	Can dull and damage finished, painted or dyed surfaces Can damage metals especially soft metals Acidic pH concentration dependent Unstable	Effective in the presence of organic matter Effective at low temperatures
Quaternary Ammonium Compounds	Can be absorbed by certain wiping materials Recent studies question worker health and safety	Compatible with most finished surfaces (neutral versions Term represent broad range of chemistries

APPLICATION TO A RECREATIONAL FACILITY SETTING PROCESS DETERMINATION

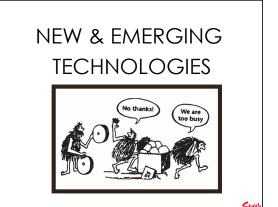
Swin



TRANSMISSION POINTS
& RESERVOIRS
TO CONSIDER IN YOUR
FACILITIES ?

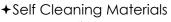


TRANSMISSION & RESERVOIRS		
+ + + + + + + +		
	Swish	



NEW SURFACE TECHNOLOGY

- +Impregnated Materials
 +Silver Ions
- BioCote
- **+**Surface Compounds
 - +Copper & Copper Alloys
 - +Silver & Silver Alloys



→Nano-Septic



NEW PRODUCT TECHNOLOGY

- **+**Robotics & IoT
 - ◆Re-Allocation of Labour
 - +Smart Dispensers



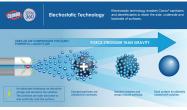
- **+**UVC Light
 - **→**Destroys Cell Wall, Disrupts DN
 - +Already Used In Water



NEW PRODUCT TECHNOLOGY

- **→**Electrostatic
 - →Negative Charge





NEW PRODUCT TECHNOLOGY

- +New (ish) Chemistry
 - →Aquaeous Ozone Generation
 - →Hypochlorous Acid
 - +Steam

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AUDITING TECHNOLOGY

- **+**ATP Monitors
- +Glo Germ
- **+**Surface Imaging Technology







SOME EASY PLACES TO START WHEN YOU GET BACK

Swin

EMERGENCY & OUTBREAK RESPONSE

DAILY CLEANING VS. OUTBREAK GENERAL CLEANING Clean / Remove Soil Disinfect Key Spots Preventative Reusables OUTBREAK Clean / Remove Soil Disinfect Everything Reactive Disposables

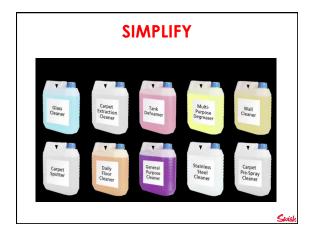
SAMPLE KIT CONTENTS



- Oxivir®
- 6 pairs of safety glasses
- 2 Pack Respirators
- 3 box glove
- 1 case MF cloth
- 1 case pads
- 4 coveralls (size L, XL, 2XL, 3XL)

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SIMPLIFY COLOUR CODE AUTOMATE





AUTOMATE



VS.



- Wet Floor = Slip Liability
 Dirty water after the first pass
 Repetitive motions = OH&S issues
 Productivity = 2100 sq. ft / hr

- Scrub & Dry in One Pass Clean Water / Dirty Water Separate Easy on operator = consistent clean Productivity = 15,000 sq. ft / hr



OTHER WAYS TO PLAY OUR PART





HAND HYGIENE MOMENTS			
Moment	Hand Sanitizer	Soap & Warm Water	
When hands are visibly soiled	No	Yes	
After contact with bodily fluids	Yes	Yes*	
After cleaning procedures	Yes	Yes*	
Before & after handling toys	Yes	Yes*	
Before, during & after handling food	No	Yes	
Enter/Leave School	Yes*	Yes	
Before & after touching eyes, ears, nose & mouth	No	Yes	
After using washroom	Yes	Yes*	





SAFE GLOVE REMOVAL **Problement by a first glown dumns and over from the control by a first glown dumns and over from the control by a first glown dumns and over from the control by a first glown dumns and over from the control by a first glown dumns and contr

SOME FINAL THOUGHTS

- +Consider IP&C At Procurement Stage
 - +smooth / non-porous / easy to clean
- + Establish cleaning logs within your team for accountability & efficiency purposes
- + Read & Get Educated
 - +PIDAC / IPAC Canada / Others?
- +Small Adjustments In Behaviour Can Have Major Impacts On Outcomes
 - **→**Be conscious of your hands
 - +Identify windows for IP&C in existing routines

ONE GOOD CUSTODIAN CAN PREVENT MORE INFECTIONS

THAN A DOZEN DOCTORS CAN CURE





Q&A

GROUP DISCUSSION

Cuis



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