Medical Facility Cleaning Checklist

Reefa

50 checkpoints · 8 zones · reefa.pl/checklisty

Site: ____________________ Date: ____________ Checked by: ____________________

Frequencies: **weekly** — at least once a week · **monthly** — once a month · **quarterly** — every 3 months

01 Reception and waiting room (low-risk zone)

- [ ] Touch surfaces disinfected: door handles, handrails, reception counter, payment terminal, pens, dispensers — **every 1–2 h during footfall**
- [ ] Waiting-room and reception floor washed and disinfected — **daily**
- [ ] Chairs, side tables and counters in the waiting room wiped and disinfected — **daily**
- [ ] Bins emptied and liners replaced (waste sorting: municipal) — **daily**
- [ ] Soap, disposable towels and hand sanitiser at the entrance refilled — **daily + check**
- [ ] Entrance doors and reception glazing free of fingerprints — **daily**
- [ ] Waiting room aired out before opening — **daily**

02 Doctor's office / examination room

- [ ] Examination couch disinfected or disposable paper cover replaced — **per patient**
- [ ] Touch surfaces disinfected: desk, door handles, switches, keyboard, phone — **daily**
- [ ] Contact equipment wiped down (stethoscope, blood-pressure monitor, scale) — **after use**
- [ ] Sink, tap and dispenser washed and disinfected — **daily**
- [ ] Office floor washed and disinfected — **daily**
- [ ] Bins emptied with waste sorting maintained: municipal / medical — **daily**
- [ ] Gloves, paper covers, towels and disinfectants refilled — **daily**

03 Procedure room (high-risk zone)

- [ ] Worktops and the procedure chair/table disinfected with a bactericidal/virucidal (B/V) product — **after procedure**
  A cleaning-and-disinfecting product, observing the contact time on the label
- [ ] Procedure lamp, stands and contact devices disinfected — **daily + after procedure**
- [ ] Procedure-room floor disinfected — **daily**
- [ ] Spot decontamination after contact with blood / body fluid performed immediately — **after incident**
- [ ] Infectious-waste container emptied; sharps container replaced when filled to 2/3 — **daily / at 2/3**
  Polish Health Ministry regulation of 5 Oct 2017 on the handling of medical waste
- [ ] Sterile and single-use materials restocked — **daily**
- [ ] Deep cleaning of the room (walls, equipment, hard-to-reach spots) — **weekly**

04 Toilets

☐	Toilet bowls, seats and urinals washed and disinfected — with separate, colour-coded equipment Dedicated equipment for toilets prevents cross-contamination	**min. 2× daily**
☐	Washbasins, taps, dispensers and counters disinfected	**several times daily**
☐	Door handles, grab rails and flush buttons disinfected	**several times daily**
☐	Floor washed and disinfected	**daily**
☐	Toilet paper, soap and towels topped up as needed	**ongoing**
☐	Mirrors, wall tiles and floor drains clean	**daily / weekly deep**

05 Corridors, stairs and lift

☐	Corridor and stair floors washed	**daily**
☐	Handrails, railings and door handles disinfected	**min. daily**
☐	Lift buttons and control panel disinfected	**several times daily**
☐	Entrance mats and entry areas cleaned	**daily**
☐	Windowsills, notice boards and fire extinguishers wiped down	**weekly**

06 Dirty utility room and waste management

☐	Sink/slop hopper and dirty-utility surfaces washed and disinfected	**daily**
☐	Mops and cloths laundered at 60–90°C, equipment disinfected and dried	**daily after work**
☐	Waste sorting and bag labelling by colour code checked	**daily**
☐	Collection containers and the waste storage area washed and disinfected	**after pickup**
☐	Temperature and storage time of infectious waste recorded in the log Up to 18°C max. 72 h; up to 10°C max. 30 days — Polish Health Ministry regulation of 5 Oct 2017	**daily**
☐	Stock of bags, products and current safety data sheets (SDS) checked	**weekly**

07 Deep / periodic cleaning

☐	Windows, frames and sills washed	**quarterly**
☐	Walls, full-height wall tiles and doors washed	**monthly**
☐	Ventilation grilles, air-conditioning vents and light diffusers cleaned	**monthly**
☐	Floors machine-scrubbed, skirting boards washed	**monthly**
☐	Fridges for medicines and samples deep-disinfected	**monthly**
☐	Curtains laundered / blinds cleaned	**quarterly**

08 Organisation and documentation (hygiene plan)

- [ ] Colour-coded equipment assigned to zones (cloths, mops, bags) — **ongoing**
  Colour coding limits cross-contamination between zones
- [ ] Gloves and cloths changed when moving between zones — **every zone change**
- [ ] Cleaning log/schedule completed: date, time, operative's signature — **after each task**
- [ ] Products used in line with the hygiene plan (concentration + contact time) — **ongoing**
- [ ] Product expiry dates and safety data sheets (SDS) reviewed — **quarterly**
- [ ] Internal audit of sanitary condition and documentation carried out — **min. every 6 mo.**
  Polish Health Ministry regulation of 27 May 2010 — internal control at least once every 6 months

Cleanliness control in a medical facility — 8 steps (visual, UV, ATP)

1. Visual audit against the checklist: walk through the rooms in order from clean to dirty (offices → corridors → toilets → dirty utility room) and tick each item YES/NO.
2. Check high-touch points: door handles, reception counter, examination couch, procedure worktop, dispensers, handrails — confirming disinfection, not just a "wipe-over".
3. Fluorescent test: before cleaning, mark selected surfaces with an invisible UV gel/marker; after cleaning, use a UV lamp to check whether the marker has been removed.
4. ATP measurement with a luminometer on critical surfaces (examination couch, procedure worktop, sink, door handle) — a reading in RLU below the threshold set in the procedure.
5. Documentation check: hygiene log filled in with time and signature, products consistent with the hygiene plan (dosing, contact time, expiry date).
6. Waste-management verification: bag colours and labelling, sharps container filled to max. 2/3, temperature and storage-time log kept up to date.
7. Equipment check: separate, colour-coded equipment per zone; mops and cloths clean and dry, or documented laundering at 60–90°C.
8. Documenting non-conformities and corrective actions: note the shortcomings, set a deadline for correction, carry out a re-check — a complete file to present during an external inspection.

Notes: ____________________ Signature: ____________________