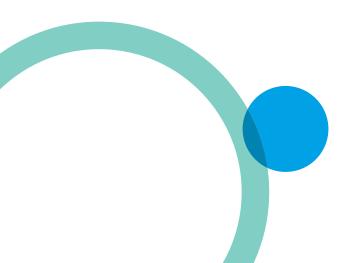


Professional Advice, Guidance and Support

NHS Scotland National Cleaning Compliance Report Domestic and Estates Cleaning Services Performance 2023/2024

Quarter 3: October 2023 – December 2023



January 2024



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1. Introduction

1.1 Cleaning functions in NHS Scotland are carried out as part of the duties of a number of healthcare professionals; this includes Nurses, Domestics, Estates Officers, and Ambulance staff to name a few. Specific responsibilities for cleaning duties vary by Health Board and sometimes within each Health Board.

This report covers the cleaning functions carried out by Domestic staff and Estates staff.

As one part of their duties Domestic staff clean parts of the ward environment like the floors, toilets, sinks, etc. They also clean other areas of the healthcare facility such as corridors, offices, foyer, etc. They generally do not clean near patient equipment e.g., the patient bed tray, the upper half of the patient bed or drip stands, etc.

In the context of this report, 'Estates' reporting refers to issues with the fabric of the building which impede effective cleaning activity. This report does not present information on the whole of the Estates function e.g., water systems, heating, ventilation etc. across all healthcare facilities.

This report presents data on compliance with the requirements set out in the NHS Scotland National Cleaning Services Specification (NCSS). The NCSS set out the requirements for the minimum frequency and methods of cleaning carried out by Domestic staff. It sets out the same requirements for Estates staff when cleaning the Estates fabric.

The report includes data on the 18 Scottish NHS Boards that offer inpatient services or deal directly with patients, as follows:

- the 14 NHS Scotland Territorial Boards
- 4 Special Health Boards Golden Jubilee National Hospital, The State Hospitals Board for Scotland, Scottish Ambulance Service and the Scottish Blood Transfusion Service (part of NHS National Services Scotland)

All healthcare facilities and component parts e.g., wards, treatment rooms, corridors, etc. are expected to be at least 90% compliant with the requirements set out in the NCSS. Boards, zones or major sites (A1 and A2 hospitals) which receive an Amber or Red compliance rating must develop an action plan to address the issues identified through the monitoring process.

This will be submitted to Health Facilities Scotland, and a summary of the action plan will be included in this report.

The report indicates the status of each NHS Board using a traffic light system as below:

Colour		Description
	Green	compliance level 90% and above - Compliant
•	Amber	compliance level between 70% and 90% - Partially compliant
	Red	compliance level below 70% - Non-compliant



2. Background

2.1 Healthcare Associated Infection (HAI) is a priority issue for NHS Scotland, in terms of the safety and well-being of patients, staff and the public.

The HAI Task Force was established in 2003 to take forward the Ministerial HAI Action Plan 'Preventing Infections Acquired While Receiving Healthcare' (October 2002). Cleaning services are an essential part of the multidisciplinary approach to tackling HAI. For prevention and control of infection to work effectively, critical activities such as cleaning and hand hygiene have to be embedded into everyday practice.

As part of its work programme, the HAI Task Force developed the 'NHS Scotland Code of Practice for the Local Management of Hygiene and HAI' and the 'NHS Scotland National Cleaning Services Specification'. These documents include guidance on cleanliness and hygiene, effectively setting minimum standards for the healthcare environment. They were issued to NHS Boards in May 2004.

The HAI Task Force commissioned Health Facilities Scotland (HFS) to develop a monitoring framework for the NHS Scotland National Cleaning Services Specification. This was developed in consultation with a range of stakeholders within NHS Scotland and was implemented in April 2006. The first quarterly report was published in August 2006 and covered cleaning provided by Domestic services in NHS facilities.

Estates Monitoring

2.2 In 2009 the HAI Task Force asked HFS to look at extending the scope of the cleaning monitoring tool to cover Estates services as well as Domestic services.

HFS took forward this work in partnership with NHS Scotland Boards and built the Estates monitoring system as an extension to the existing Domestic monitoring system.

In the context of this report, 'Estates' reporting refers to issues with the fabric of the building which impede effective cleaning activity. This report does not present information on the whole of the Estates function e.g., water systems, heating, ventilation, etc. across all healthcare facilities.

Monitoring and Improvement

2.3 Monitoring, in this context, is defined as the ongoing assessment of the outcome of cleaning and Estate's maintenance processes to assess the extent to which corrective procedures are being carried out correctly, to identify any remedial action which is required and to provide an audit trail.

An essential component of any monitoring framework is the fundamental principle of continuous improvement. Therefore, the monitoring framework not only provides a reporting mechanism, but a rectification process that can be used locally to identify, prioritise and address issues of non-compliance.



Further information on the monitoring framework is available from https://www.nss.nhs.scot/publications/national-facilities-monitoring-framework-manual-v-30/.

The methodology behind the monitoring process is described in Appendix 1.

Facilities Monitoring Tool

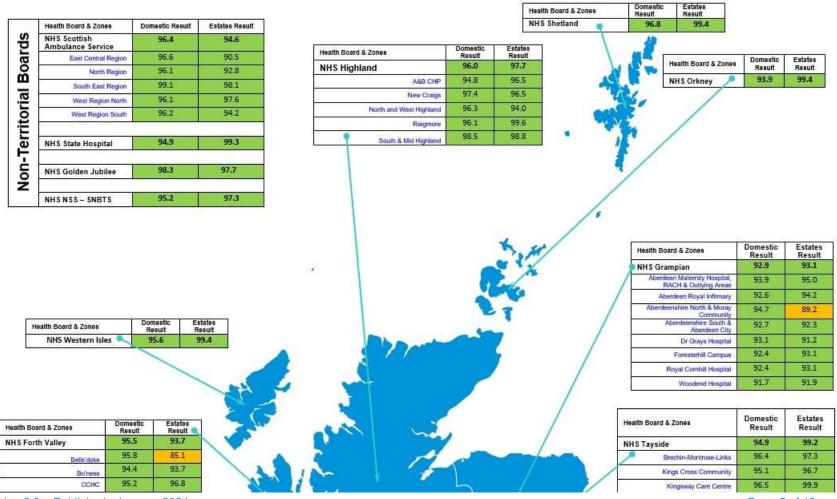
2.4 In April 2012 a digital Facilities Management Tool (FMT) became operational across Scotland. The tool moved data collection from a paper and spreadsheet-based data collection to an online system that uses handheld devices and web-based data transfer. This report is produced using data from this national system.

Facilities Support Team

2.5 The Facilities Support Team within Health Facilities Services is available to boards as an additional support mechanism, to provide day-to-day support to FMT system users, and training and guidance where needed. In addition to this activity, the support team can provide site or board specific support if areas are experiencing issues meeting the compliance levels described in this report or are seeking to improve the overall quality and consistency of audit practice.



NHS Scotland Cleaning Compliance Quarter 3 2023-24 - Domestic and Estates Services



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93.3

96.8

97.7

96.2

95.8

96.4

96.0

Domestic Result

96.0

96.5

97.1

93.9

96.9

94.6

96.1

Domestic Result

95.8

95.3

96.1

94.9

95.8

91.3

96.1

90% or higher

99.7

100.0

100.0

99.7

97.6

99.6

94.6

Estates Result

95.9

95.4

94.5

98.1

95.8

90.4

97.0

Estates Result

97.3

98.3

96.9

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between 70% - 90%

Falkirk Community Hospital	95.6	87.6
FV North Sector	95.8	94.7
FV South Sector	96.2	92.7
FVRH	95.6	95.0
SCH	94.7	95.3

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Compliance Key

less than 70%



3. Domestic Services – Key Findings for 3rd Quarter

Key Findings – Pan Scotland

3.1 Scotland's overall total score in Quarter 3 for 2023/24 was Green at 95.2%, which is unchanged from the previous quarter.

Health Board Level Data

- all NHS Boards have achieved an overall Green compliance rating
- all A1 sites have achieved an overall Green compliance for Domestic services
- all A2 sites have achieved an overall Green compliance for Domestic services

Zone Level Data

3.2 In each NHS Board there are a number of zones reflecting how domestic cleaning is managed and reported locally across the NHS Board. In larger NHS Boards there are a number of zones, in smaller NHS Boards there may only be one zone, which covers the whole of the NHS Board.

All zones across Scotland have achieved an overall Green compliance rating for Domestic Services, with the exception of the zones detailed below.

NHS Board and zone level cleaning audit data is presented graphically on pages 4 and 5.

NHS Greater Glasgow & Clyde

3.3 NHS Greater Glasgow & Clyde has reported one zone in Amber (partially compliant) for Domestic for Quarter 3.

Zone	Quarter 1 2023/24	Quarter 2 2023/24	Quarter 3 2023/24
West Dunbartonshire HSCP - Glasgow	N/A	N/A	89.8

NHS Greater Glasgow & Clyde provided the following explanation:

"The Root Cause Analyses Report (RCA) identified that one of the contributing factors resulting in the audit result returning below 90% was due to absenteeism. The department have an action plan in place to address future issues of absenteeism with improved reporting processes in place".



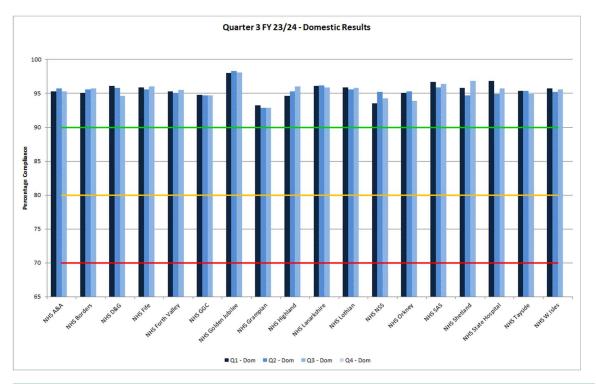
HFS Perspective – NHS Greater Glasgow & Clyde

3.4 NHS GG&C have carried out an RCA which identified the lack of staff resources, due to unplanned leave, in this department. An action plan has been put in place along with improved reporting processes. There is the assumption that a complaint score will be reported in the next quarter, following the preventative measures in place.



4. **Domestic Services - Graphs**

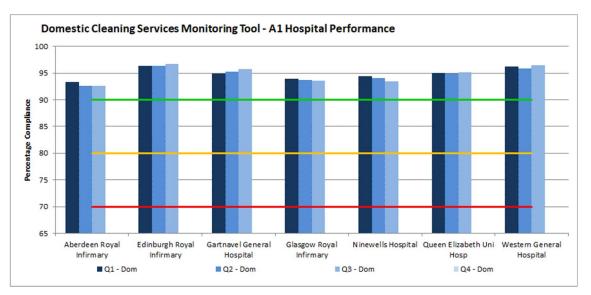
4.1 **Domestic Cleaning Services Monitoring Tool – NHS Boards' Performance**



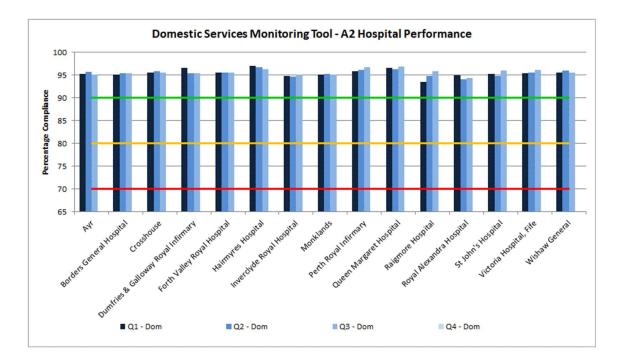
Health Board	1 st Quarter Apr - June 2023/24	2 nd Quarter July - Sept 2023/24	3 rd Quarter Oct - Dec 2023/24	4 th Quarter Jan - March 2023/24
NHSSCOTLAND	95.3	95.2	95.2	
NHS Ayrshire and Arran	95.3	95.7	95.3	
NHS Borders	95.1	95.6	95.7	
NHS Dumfries and Galloway	96.1	95.8	94.6	
NHS Fife	95.9	95.6	96.0	
NHS Forth Valley	95.3	95.1	95.5	
NHS Greater Glasgow and Clyde	94.8	94.7	94.7	
NHS Golden Jubilee	98.0	98.3	98.1	
NHS Grampian	93.2	92.9	92.9	
NHS Highland	94.6	95.3	96.0	
NHS Lanarkshire	96.1	96.2	95.9	
NHS Lothian	95.9	95.6	95.8	
NHS NSS SNBTS	93.5	95.2	94.3	
NHS Orkney	95.1	95.3	93.9	
NHS Scottish Ambulance Service	96.7	95.9	96.4	
NHS Shetland	95.8	94.7	96.8	
NHS State Hospital	96.8	94.9	95.7	
NHS Tayside	95.4	95.4	94.9	
NHS Western Isles	95.7	95.2	95.6	



4.2 **Domestic Cleaning Services Monitoring Tool – A1 Hospital Performance**



4.3 **Domestic Cleaning Services Monitoring Tool – A2 Hospital Performance**





4.4 **Domestic Cleaning Services Monitoring Tool – A1 Hospital performance**

Hospital Type	Site	1 st Quarter Apr - June 2023/24	2 nd Quarter July - Sept 2023/24	3 rd Quarter Oct - Dec 2023/24	4 th Quarter Jan - Mar 2023/24
	Aberdeen Royal Infirmary	93.3	92.6	92.6	
	Edinburgh Royal Infirmary	96.4	96.3	96.2	
	Gartnavel General Hospital	94.9	95.3	95.7	
A1	Glasgow Royal Infirmary	93.9	93.7	93.6	
	Ninewells Hospital	94.4	94.0	93.5	
	Queen Elizabeth Uni Hosp	95.0	94.9	95.1	
	Western General Hospital	96.2	95.9	96.5	

4.5 **Domestic Cleaning Services Monitoring Tool – A2 Hospital performance**

Hospital Type	Site	1 st Quarter Apr - June 2023/24	2 nd Quarter July - Sept 2023/24	3 rd Quarter Oct - Dec 2023/24	4 th Quarter Jan - Mar 2023/24
	Ayr Hospital	95.2	95.7	95.1	
	Borders General Hospital	95.1	95.4	95.4	
	Crosshouse Hospital	95.5	95.8	95.6	
	Dumfries & Galloway Royal Infirmary	96.5	95.4	95.5	
	Forth Valley Royal Hospital	95.5	95.5	95.6	
	Hairmyres Hospital	97.0	96.7	96.3	
A2	Inverclyde Royal Hospital	94.8	94.6	95.1	
	Monklands Hospital	95.1	95.3	95.1	
	Perth Royal Infirmary	95.8	96.2	96.8	
	Queen Margaret Hospital	96.6	96.3	96.9	
	Raigmore Hospital	93.4	94.8	95.8	
	Royal Alexandra Hospital	94.9	94.1	94.4	
	St. John's Hospital	95.3	94.8	96.0	
	Victoria Hospital, Fife	95.9	95.6	96.1	
	Wishaw General Hospital	95.6	96.0	95.5	



5. Estates Services - Key Findings for 3rd Quarter

Key Findings – Pan Scotland

5.1 Scotland's overall total score in Quarter 3 for 2023/24 was Green at 96.1%. This is a slight increase from the 96.0% achieved in the previous Quarter.

Health Board Level Data

- all Health Boards have achieved an overall Green compliance rating
- one A1 hospital had an amber compliance rating for Estates services
- all A2 hospitals had a green compliance rating for Estates services

Zone Level Data

In each NHS Board there are a number of zones, reflecting how domestic cleaning is managed and reported locally across the NHS Board. In larger NHS Boards there is a number of zones, in smaller NHS Boards there may only be one zone, which covers the whole of the NHS Board.

NHS Board and zone level cleaning audit data is presented graphically on pages 5 and 6.

NHS Forth Valley

5.2 NHS Forth Valley has reported two zones in Amber (partially compliant) for Estates for Quarter 3.

Zone	Quarter 1 2023/24	Quarter 2 2023/24	Quarter 3 2023/24
Bells'dyke	85.2	85.3	85.1
Falkirk Community Hospital	88.1	86.7	87.6

NHS Forth Valley provided the following explanation:

"The Capital scheme highlighted for Bellsdyke for replacement windows, ligature improvements and to tackle security issues is complete. The master plan for Falkirk Community Hospital (FCH) has not moved forward so the scores here remained low until a decision is made on the long-term future of this site. The Estates team however do continue to review and resolve the highrisk items and have been focusing on Bellsdyke and Falkirk.

Monthly on-site meetings continue with Clinical colleagues at Bellsdyke. The reporting scores at Bellsdyke should improve further with capital allocated to anti ligature improvements but will improve the FMT scores.



Some further focus on FCH will be needed over the coming years as the masterplan has stalled, meaning a well-planned approach will be needed to tackle the biggest issues until a decision on the site is made. This is probably our biggest risk and until capital funds are allocated for 24/25, we are unsure of what we will invest our funds in."

HFS Perspective - NHS Forth Valley

5.2.1 NHS Forth Valley have completed their Capital scheme, within Bellsdyke, for windows, ligature improvements and security issues. The Estates team continue to review and resolve high-risk items and onsite monthly meetings continue with Clinical colleagues. Now that the Capital scheme has been completed there is an expectation that there will be an improvement in scores over the coming Quarter, for Bellsdyke.

Falkirk Community Hospital continue to report a partial complaint score due to the master plan being put on hold, until such time a decision is made on the future of the site. There is the assumption that FCH will continue to report a partial-complaint score in the coming quarters. However, the Estates team regularly review and resolve high-risk items.

NHS Grampian

5.3 NHS Grampian has reported one zone in Amber (partially compliant) for Estates for Quarter 3.

Zone	Quarter 1 2023/24	Quarter 2 2023/24	Quarter 3 2023/24
Aberdeenshire North & Moray Community	91.3	89.5	89.2

NHS Grampian provided the following explanation:

"The comment from last quarter stands in that the majority of the remedial works is cosmetic painting works. We have only two painters for the region who have been focussed on reactive repairs following an unusually high period of rainfall.

We will add this to the backlog for next year's backlog budget, but the level of progression will depend on available funding / priority".

HFS Perspective – NHS Grampian

5.3.1 NHS Gampian have identified that the majority of the remedial works is due to cosmetic painting works. They have been focussing on high priority reactive repairs, until such time funding is agreed for the backlog budget. In the interim, there is the assumption that they will continue to report a partial complaint score in this area, over the coming quarters.



NHS Greater Glasgow & Clyde

5.4 NHS Greater Glasgow & Clyde has reported one A1 hospital zone in Amber (partially compliant) for Estates for Quarter 3.

Zone	Quarter 1 2023/24	Quarter 2 2023/24	Quarter 3 2023/24
Glasgow Royal Infirmary	88.5	87.7	86.7

NHS Greater Glasgow & Clyde provided the following explanation:

"Operational estates are currently working with Capital projects team to finalise 2024/2025 Investment plans for Glasgow Royal Infirmary.

High risk areas continue to be primary focus in line with Infection control guidance and standards."

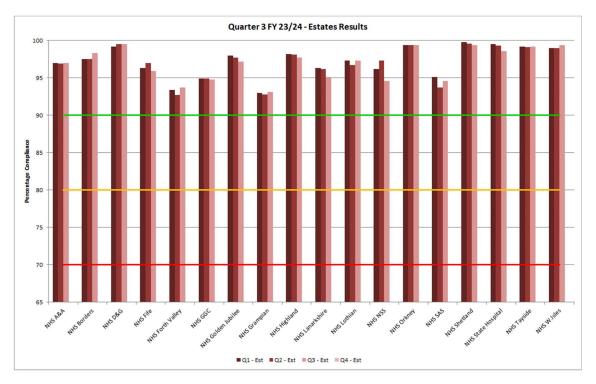
HFS Perspective – NHS Greater Glasgow & Clyde

5.4.1 Within Glasgow Royal Infirmary (GRI), the Operational Estates Team are working with the Capital Projects Team to finalise the investment plans for GRI. The team continues to focus on high-risk areas and communication is taking place on a regular basis in line with Infection Prevention and Control Guidance. Until such time the investment plans have been agreed, there is the assumption that GRI will continue to report a partial complaint score in the coming quarters.



6. Estates Services - Graphs

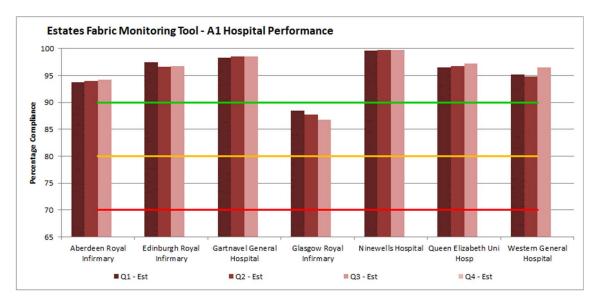
6.1 Estates Fabric Monitoring Tool – NHS Boards' Performance



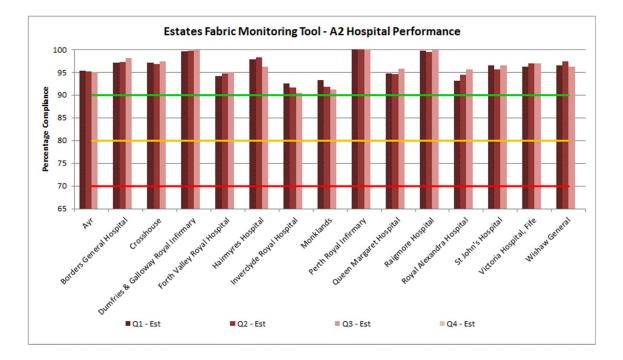
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NHSSCOTLAND	96.2	96.0	96.1	
NHS Ayrshire and Arran	97.0	96.9	97.0	
NHS Borders	97.5	97.5	98.3	
NHS Dumfries and Galloway	99.7	99.5	99.5	
NHS Fife	96.3	96.0	95.9	
NHS Forth Valley	93.4	92.7	93.7	
NHS Greater Glasgow and Clyde	94.9	94.9	94.8	
NHS Golden Jubilee	98.0	97.7	97.2	
NHS Grampian	93.0	92.8	93.1	
NHS Highland	98.2	98.1	97.7	
NHS Lanarkshire	96.3	96.2	95.1	
NHS Lothian	97.3	96.7	97.3	
NHS NSS	94.8	97.3	94.6	
NHS Orkney	99.4	99.4	99.4	
NHS Scottish Ambulance Service	95.1	93.7	94.6	
NHS Shetland	99.8	99.6	99.4	
NHS State Hospital	99.5	99.3	98.6	
NHS Tayside	99.2	99.1	99.2	
NHS Western Isles	99.0	99.0	99.4	



6.2 Estates Fabric Monitoring Tool – A1 Hospital performance



6.3 **Estates Fabric Monitoring Tool – A2 Hospital Performance**





6.4 Estates Fabric Monitoring Tool – A1 Hospital performance

Hospital Type	Site	1 st Quarter Apr - June 2023/24	2 nd Quarter July - Sept 2023/24	3 rd Quarter Oct - Dec 2023/24	4 th Quarter Jan - Mar 2023/24
A1	Aberdeen Royal Infirmary	93.7	94.0	94.2	
	Edinburgh Royal Infirmary	97.5	96.6	96.7	
	Gartnavel General Hospital	98.3	98.5	98.6	
	Glasgow Royal Infirmary	88.5	87.7	86.7	
	Ninewells Hospital	99.6	99.7	99.7	
	Queen Elizabeth Uni Hosp	96.5	96.7	97.3	
	Western General Hospital	95.2	94.8	96.5	

6.5 Estates Fabric Monitoring Tool – A2 Hospital performance

Hospital Type	Site	1 st Quarter Apr - June 2023/24	2 nd Quarter July - Sept 2023/24	3 rd Quarter Oct - Dec 2023/24	4 th Quarter Jan - Mar 2023/24
Α2	Ayr Hospital	95.3	95.2	95.1	
	Borders General Hospital	97.2	97.3	98.1	
	Crosshouse Hospital	97.2	96.8	97.4	
	Dumfries & Galloway Royal Infirmary	99.7	99.7	99.9	
	Forth Valley Royal Hospital	94.2	94.7	95.0	
	Hairmyres Hospital	97.8	98.3	96.3	
	Inverclyde Royal Hospital	92.5	91.7	90.4	
	Monklands Hospital	93.3	91.8	91.2	
	Perth Royal Infirmary	100.0	100.0	100.0	
	Queen Margaret Hospital	94.8	94.6	95.8	
	Raigmore Hospital	99.8	99.5	99.9	
	Royal Alexandra Hospital	93.1	94.5	95.7	
	St. John's Hospital	96.6	95.6	96.6	
	Victoria Hospital, Fife	97.2	97.0	97.0	
	Wishaw General Hospital	96.6	97.4	96.3	



Appendix 1 - Methodology

Over the year, NHS Boards will monitor all facilities. Each Quarterly report covers monitoring of a proportion of the facilities/areas within an NHS Board area.

Compliance is assessed within NHS Boards using a standardised monitoring system, available online or offline on a handheld device.

There are two components to the monitoring:

- audits carried out on a routine basis by Domestic Services Managers
- audits carried out by Peer Review teams, incorporating a Public Involvement element

Cleanliness and the state of the Estate fabric are assessed using an observational process and according to the technical requirements set out in the NHS Scotland National Cleaning Services Specification. The requirements vary depending on the type of area being assessed and the scores are weighted to reflect risk. For example, an operating theatre receives a higher weighting.

The rooms to be audited within the audit areas are selected at random in accordance with the monitoring framework guidance.

NHS Boards results are available to Health Facilities Scotland via the live online system. This data is used to compile the national Quarterly report and for local NHS Board reporting.