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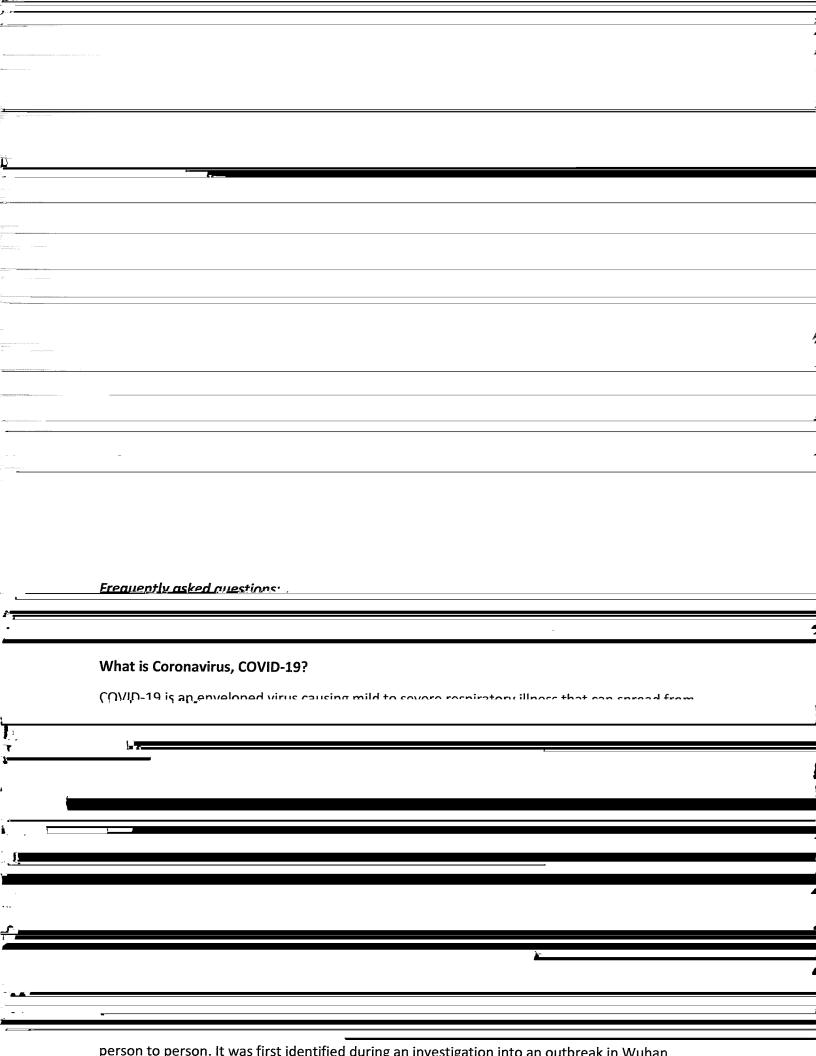
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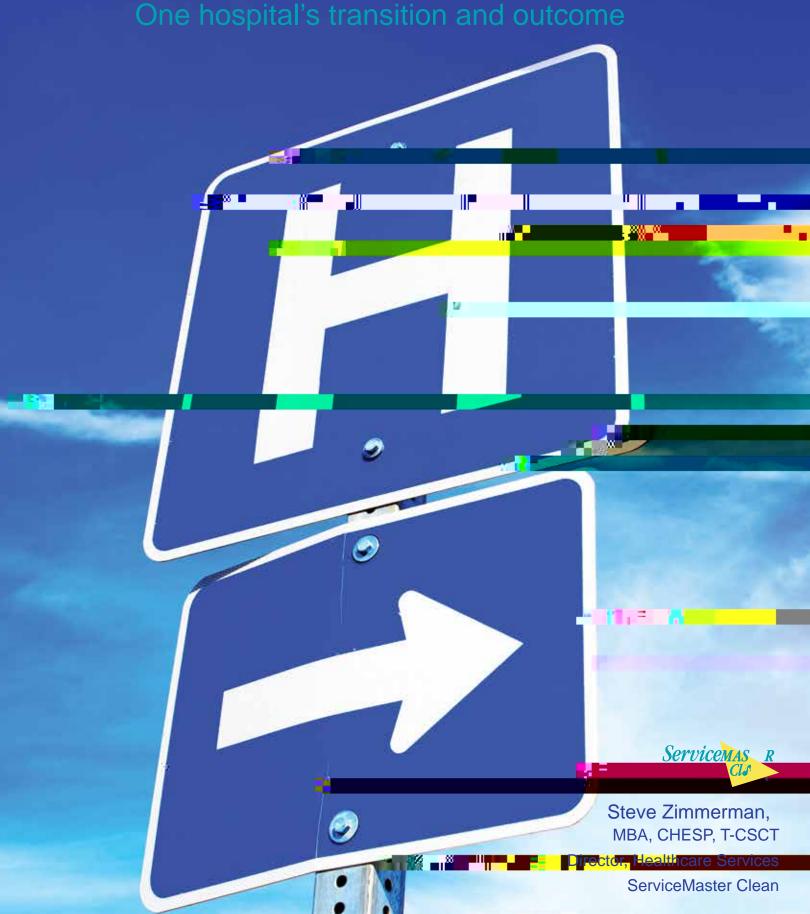
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# Outsourcing Environmental Services at Rural Hospitals -



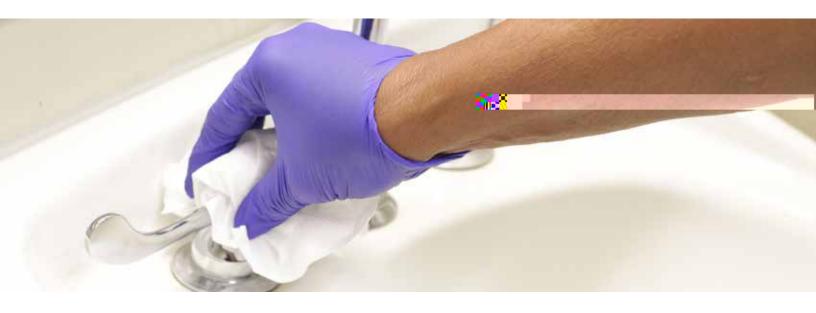
## **EXECUTIVE SUMMARY**



Many rural hospitals across the United States are in danger of closing. Economic, cultural and lifestyle issues often make it di cult to maintain pro tability and attract quali ed healthcare professionals. Additionally, increasing regulation, aging facilities and diminishing resources create signi cant management challenges. However, new approaches to these problems can provide important relief for rural hospital management

and help keep these facilities viable, even thriving. One area where rural and small hospitals can improve signi cantly is environmental services (ES). Outsourcing ES is becoming a reasonable alternative that produces improved infection prevention, regulation compliance and better patient outcomes. Outsourcing ES has attractive long-term cost e ciencies and, when done well, positively impacts existing personnel.

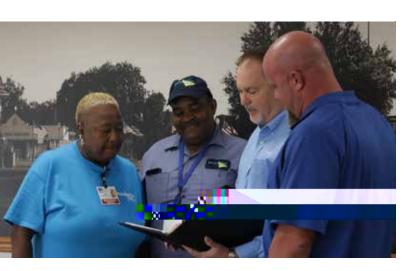
## **INTRODUCTION:** Rural Healthcare





"Roughly 1.7 million hospital-associated infections occur annually in acute-care hospitals, which result in tens of thousands of patient deaths and cost billions of dollars to the healthcare system."

- Becker's Ho



Changing the cleaning culture at a hospital requires buy-in from management, clinical sta and the ES team. For Franklin Medical Center, it was essential that everyone at the hospital recognize that the environmental services sta is much more than a janitorial service – they are essential to a healthy, safe hospital environment.

The new ES training program introduced by ServiceMaster Clean focused on the "how and why" of infection control. Every cleaning process was explained in detail so that ES technicians understood not only how to do a task correctly, but why they do things a speci c way. Training covered many topics and techniques including:

- Using only EPA-registered, hospital-grade disinfectants and knowledge of associated Safety Data Sheets.
- New and better cleaning equipment such as self-propelled ride-on oor cleaning machines, battery-powered backpack vacuums, and disposable lint-free cleaning pads.
- The importance of carefully following product label directions to know the dwell times of disinfectants that eliminate C. ulint

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# There are at least ve identi able improvements at Franklin Medical Center as a result of outsourcing environmental services.

HCAHPS scores. Patient assessments of the hospital's cleanliness are up signi cantly. From 2012-2015 – prior to outsourcing – cleanliness scores generally hovered at 70 percent. Soon after ES outsourcing began in 2016, cleanliness scores jumped to the mid-80s and have risen above 90 percent – higher than almost every other facility in AHA Region 7.

E ciency. An improved cleaning regimen, combined with better communication, training and technology has produced much better ES e ciency throughout the hospital. More cleaning is done in less time with fewer sta than before outsourcing.

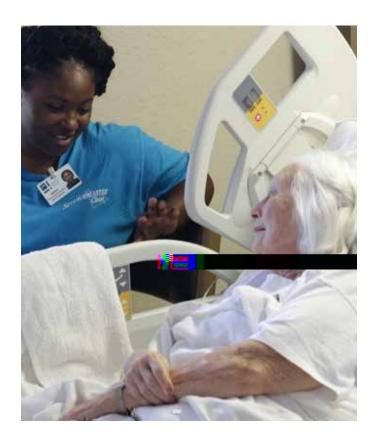
Safety. There have been no incidents of HAIs to patients, clinical sta or the ES team in the two years since ES outsourcing began.

Morale. Clinical sta and ES personnel report higher morale and better communication among all employees as well as greater engagement

"We spend far less time on environmental service issues and more time on patient care than we used to. I think our quality of care overall is better and our HCAHPS scores prove it."

- Jason Em nger, Assistant Director of Nursing

"About eight months after we brought ServiceMaster Clean in to manage our ES services, we had an elderly lady admitted to the hospital in an emergency situation. Her granddaughter was decidedly not a fan of Franklin Medical Center due to a past experience







# Proper hand hygiene is the #1 way to reduce the NSK of infection. It is important EVENT THE SPRIEWASD hands frequently and properly with soap and water for at least 20 seconds.



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High To Hand bygiene is the #1 way to prevent the spleat of pathogens. Because high touch items are common pathogen transmission with the second part of the second p

DOOR HANDLES		PATIENT CARE BEDS/TABLES & ATTACHMENTS
ELEVATOR BUTTONS		PATIENT EXAM LIGHTS
EMPLOYEE CELL PHONES	H	TELEPHONES
FLOORS		TELET HONES
GATHERING PLACES & RESTROOMS FROM JANITORIAL		
IV POLES		ALL BREAK ROOM AREAS APPLIANCES, SINKS, CHAIRS AND TABLES
KEYBOARDS		AT EIANOES, SINNS, STAINS AND TABLES
LIGHT SWITCHES	_	
LINEN & TRASH RECEPTACLES	Ш	
MEDICAL EQUIPMENT		RESTROOMS RESTROOM FLUSH HANDLES, TOILET PAPER DISPENSERS
MONITORS		

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