

Cleaning of Computers and Associated Equipment for use in Clinical Areas

Introduction

Computers or workstations on wheels (WOWs) in clinical areas are classed as non-critical patient care items.

While shared clinical equipment comes into contact with intact skin, WOWs and other personal digital assistants (PDAs) used in patient care don't and are therefore unlikely to introduce infection, they can however act as a vehicle by which infectious agents are transferred between patients.

Recommendations

- Always perform hand hygiene before and after using a computer
- mobile computers are to be cleaned before moving to another patient room
- cleaning of shared clinical equipment
 - Clean touched surfaces of shared clinical equipment between patient uses, with detergent/disinfecting wipes.
 - Exceptions to this should be justified by risk assessment
- Surface barriers help prevent contamination of surfaces and equipment
 - Use surface barriers to protect clinical surfaces (including equipment) that are:
 - touched frequently with gloved hands during the delivery of patient care³
 - likely to become contaminated with blood or body substances³
 - difficult to clean³
 - Exceptions to this should be justified by risk assessment³

Routine cleaning frequencies for clinical, patient areas

The following table outlines the recommended minimum frequencies for routine cleaning of computer and keyboards. It is applicable to all settings and is presented by level of risk as per the key below.

Environment Classification Level of Risk	
Very high risk	Outbreak in any area
High risk	ICU, SCN, HDU, Burns unit, Renal Units, Operating Suites / PACU
Significant risk	General wards, Specialist Outpatient Clinics, Chair side – Dental Clinical Treatment area
Low risk	Rehabilitation, Subacute, long-term care, office based

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Recommended Cleaning Schedule					
Element	Minimum cleaning frequency				Method
	Very high risk	High risk	Significant risk	Low risk	
Computer & keyboard	Clean twice daily or when visibly soiled	Clean daily or when visibly soiled	Clean daily or when visibly soiled	Clean weekly or when visibly soiled	Washable keyboards, mouse, cart and accessories use detergent/disinfectant wipes. Refer to manufacturer's recommendations.
	Clean between patients	Clean between patients	Clean between patients	Clean between patients	

In addition to the above, it is recommended that this type of equipment, when located in close proximity to the patient (i.e. patient's room, bay area etc.) be considered as part of the patient environment and be cleaned following the **patient's discharge or transfer**.

Purchasing Computers and Associated Equipment

When purchasing computers and associated equipment for use in clinical areas, care should be taken to ensure that these devices can be cleaned and maintained as per the above recommendations. Prior to purchasing any computerised equipment Infection Prevention consultation should be obtained regarding cleaning requirements. Identified cleaning issues should be resolved prior to purchase of equipment.

References

1. Rutala WA, Weber DJ, and the Healthcare Infection Control Practices Advisory Committee, Guideline for disinfection and sterilization in healthcare facilities, 2008. Centers for Disease Control and Prevention. Healthcare Infection Control Practices Advisory Committee. http://www.cdc.gov/hicpac/pdf/guidelines/Disinfection_Nov_2008.pdf.
2. Siegel JD, Rhinehart E, Jackson M, Chiarello L, and the Healthcare Infection Control Practices Advisory Committee, 2007 Guideline for isolation precautions: Preventing transmission of infectious agents in healthcare settings. Centers for Disease Control and Prevention. Healthcare Infection Control Practices Advisory Committee. <http://www.cdc.gov/hicpac/pdf/isolation/Isolation2007.pdf>
3. NHMRC (2010) Australian Guidelines for the Prevention and Control of Infection in Healthcare. Commonwealth of Australia. [cited May 27, 2013] <http://www.nhmrc.gov.au/node/30290>
4. Rutala WA, White MS, Gergen MF, Weber DJ Bacterial Contamination of Keyboards: Efficacy and Function Impact of Disinfectants. Infection Control and Hospital Epidemiology. 2006 Mar 29;27(4):372-377.
5. Acknowledgement to the Centre for Healthcare Related Infection Surveillance and Prevention & Tuberculosis Control. Queensland Government.