**Section 250.1710 Housekeeping**

a) There shall be an organized housekeeping department, under competent supervision.

b) The director of housekeeping services shall be responsible to the chief executive officer either directly or through a designated department head. The director shall be qualified for the position by education, training, and experience.

1) The number of supervisory and support personnel shall be related to the size and complexity of the facility and to the scope of the services provided.

2) In order to guide personnel in providing a hygienic environment for patients and staff, specific housekeeping procedures shall be developed and available for all departments and services. They shall identify techniques and product used and shall include, but not be limited to the following:

A) the use, cleaning, and care of equipment;

B) the cleaning of specialized areas, such as the surgical suite, obstetrical suite, newborn nursery, central service, and isolation rooms.

 It is recommended that high risk areas be assigned to the same personnel on a routine basis.

C) the selection, measurement, and proper use of housekeeping and cleaning supplies, their storage, and transportation.

D) the maintenance of cleaning schedules;

E) techniques for evaluation of cleaning effectiveness;

F) maintaining liaison with the infection control committee in order to determine appropriate action based on the results of any microbiological evaluations performed; and

G) personal hygiene.

c) There shall be documentation of participation by housekeeping personnel in a relevant continuing education program.

d) The entire facility, including but not limited to the floors, walls, windows, doors, ceilings, fixtures, equipment, and furnishings, shall be maintained in good repair, clean and free of insects, rodents and trash.

1) Dusting, mopping, and vacuum cleaning shall be done in a manner which will not spread dust or other particulate matter.

2) Adequate supplies and equipment for housekeeping functions shall be provided with cleaning compounds and hazardous substances properly labeled and stored.

3) Hazardous cleaning solutions, compounds, and substances shall be labeled, stored in a safe place, and kept in an enclosed section separate from other cleaning materials.

4) Exhaust ducts from kitchens and other cooking areas shall be equipped with proper filters and cleaned at regular intervals. The ducts shall be cleaned and inspected no less than twice a year or more often if necessary.

5) The storage of paints and oils in patient areas shall not be permitted.

6) Venetian blinds, decorative curtains and draperies shall be of fire resistant materials and shall be kept clean at all times. Venetian blinds, decorative curtains and draperies shall be prohibited in delivery rooms, high risk or critical care nurseries, emergency rooms, and in major and minor surgeries. When control of excessive sunlight is necessary, washable pull shades (to be damp dusted daily) may be used. Curtains, draperies, and venetian blinds, if used elsewhere in the hospital, shall be kept clean. For flame spread ratings, see Subpart T of these requirements.

7) After the discharge of a patient, the bed, bedding, and room furnishings used by such patient shall be thoroughly cleaned.

(Source: Amended at 5 Ill. Reg. 507, effective December 29, 1980)