

Healthcare Cleaning Operative Apprenticeship

This occupation is found in healthcare environments that require specific attention to safety and sanitation. This includes a range of both public and private sector environments including hospitals, care homes, doctors/dentist surgeries, healthcare settings within prisons and schools, large childcare settings, leisure facilities and large first aid facilities in establishments such as airports. Typical job titles include care hygiene operatives, housekeepers, domestic assistant or cleaning services operative.

The purpose of the occupation is to provide a hygienically clean healthcare environment in which service users (e.g. patients, nursery pupils, and care home residents), staff and other users can thrive, work and develop. This occupation supports front line colleagues in the provision of a hygienically clean healthcare environment at a standard that supports and promotes the recovery of patients and prevents the spread of infection and cross contamination. Healthcare cleaning operatives additionally use their communication skills to make a positive contribution to the service users' experience.

Entry

Employers will set their own entry requirements in order to start on this apprenticeship.

Duration

Typically this apprenticeship will take 12 months.

Level

This apprenticeship standard is set at level 2.

Functional Skills

Apprentices without Level 1 English and Maths will need to achieve this level and take the test for Level 2 English and Maths prior to completion of their Apprenticeship.

End Assessment

To achieve this apprenticeship standard, the employer, training provider and apprentice will agree when the apprentice is competent and ready to undertake the independent end point assessment.

C2C Professional Trainers

Alongside the apprentice they will agree on a personal learning and development plan, setting a timetable of learning activities in preparation for the End Point Assessment (EPA).

The C2C Training Consultant will meet with the apprentice regularly either online or face to face to complete and review assessments, provide further coaching where required and agree the next steps of learning.



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In their daily work, an employee in this occupation interacts with service users, managers of multi-disciplinary teams, visitors, colleagues, and infection/prevention and control functions, clinical teams and auditors. Healthcare workplaces operate on a 24/7 basis. Shift work is commonplace with opportunities for both full and part time working. The occupation has day to day interaction with a range of service users with a range of different needs, including end-of- life environments, patients with mental health issues, swimming pool areas and educational environments. For example, working in changing areas requires cleaners to respect individuals' dignity and working in hospital wards requires cleaners to identify and manage risks to patients, communicate with them, and share concerns with the management team.

An employee in this occupation will be responsible for routine and non-routine cleaning, operations including deep cleaning and rapid response cleaning to a hygienic standard of cleanliness set by organisational and policy guidelines.

Quality standards and methods are set and monitored for consistent application, however, autonomous working practices and responsibility are both expected and required. Healthcare Cleaning Operatives, may be responsible for planning of work schedule and rapid response decisions. This is determined by the service being supported e.g. NHS, care home, leisure centre and the situations that could arise.

Occupation duties

Duty	Description	KSBs
Duty 1	Provide routine hygienic cleaning of the healthcare environment to maintain all standards in compliance with the National Standard of Healthcare Cleanliness 2019 as a minimum as well as local standards policy, guidelines and operating procedures.	K1 K2 K3 K5 K10 S1 S3 S4 S7 S11 B2 B4
Duty 2	Undertake specialist cleaning projects, both scheduled or in response to an issue using area decontamination technology.	K2 K9 K11 S5 S6 S9 S11 B5 B6
Duty 3	Distinguish and demonstrate between cleaning and disinfection procedures to comply with processes to match requirements.	K9 K11 S3 S6 S11 S12
Duty 4	Determine the classification of soil and contaminating material in order to apply appropriate techniques/methodology for its safe removal.	K9 K10 K14 S5 S10 S17 B1
Duty 5	Demonstrate organisational skills to prioritise workloads and respond to the changes of the working environment as required.	K9 K10 S10 S11 B4 B6
Duty 6	Select and use the most appropriate chemical or biochemical cleaning product to be used for the task to be undertaken in accordance with the legal and organisational requirements and compliance with legislation.	K3 K4 S3 S4 S5 B6
Duty 7	Safely use, store and maintain cleaning equipment, materials and products in accordance with manufacturer's instructions, legal and organisational requirements. Ensure their decontamination and safe preparation for next use.	K5 K16 S4 S6 S16 B3
Duty 8	Demonstrate good housekeeping practices within the storage area including a clean environment, stock rotation and control and reporting and recording as required.	K15 K16 S15 B3
Duty 9	Use standard reporting formats and appropriate media to accurately record and report work carried out in accordance with cleaning specifications.	K6 K10 S7 B2
Duty 10	Communicate with service users contributing to a positive service user experience maintaining confidentiality at all times.	K17 K18 K19 S18 S19 S20 B1 B2
Duty 11	Follow infection prevention and control policy and procedures to prevent cross contamination risks and the spread of infection.	K2 K7 K12 S2 S3 S9 S13 B4 B5
Duty 12	Recognise signs of pest infestation and work with partners to eradicate them.	K8 S8 B6
Duty 13	Assemble and disassemble a significant range of healthcare service user equipment for cleaning purposes in line with manufacturers standard operating procedures and national standards 2019.	K13 S14 B6

KSBs

Knowledge	
K1	National and local standards, policies, guidelines and procedures which could include: manual handling, use of Personal Protective Equipment (PPE), the NHS cleaning specification, waste disposal, safeguarding and data protection.
K2	How to manage risk (i.e. follow out risk assessments, risk categories and colour coding) and identify when there is a need for change from routine to enhanced cleaning protocols in line with the Local and National standards and policies.
K3	Preparation for cleaning methodologies and techniques.
K4	Chemical competence to include dilution ratios and Control of Substances Hazardous to Health (COSHH).
K5	Selection and use of correct cleaning equipment and machinery for a range of routine and specialist cleans (e.g. hard floors, clinical areas, communal areas, dining areas) including cleaning of equipment after use and principles of PAT testing to ensure safe to use.
K6	The roles and responsibilities in relation to Standard Operating Procedures (SOPs) (e.g. schedules of work, recording of completed tasks, fault reporting and stock recording/ordering).
K7	The principles of infection prevention control and how these apply to the role. For example: segregation of waste types, the correct identification and use of a range of waste storage containers (sacks and bags), the safe disposal of waste and spent solutions, the cleaning of rooms where a patient is being barrier nursed, compliance with the cleaning and disinfecting policy as well as colour coding.
K8	How to recognise the signs of pest infestation and the methods to deal with each e.g. rodents, cockroach, insects and pigeon waste. How to report according to local procedures and work with partners to eradicate them in line with local and national standards and policies.
K9	How to respond to different rapid response cleans e.g. bodily fluid, chemical spillage, hazardous waste.
K10	The principles of scheduled and periodic cleaning, prioritisation of work and the escalation process.
K11	Types of cleaning and the difference between disinfection and cleaning to include: terminal cleans, barrier cleans, isolation cleans, discharge cleans, decontamination cleans.
K12	The principles of personal hygiene and the implications for the role i.e. clean uniform, hand hygiene and cross contamination, for example: use of PPE, the bare below the elbow process, hand hygiene requirements.
K13	How to assemble and disassemble a range of service user equipment for cleaning (e.g. hospital beds, trolleys and trays).
K14	Soil classification/contaminating material and removal methods to include: organic soiling, inorganic soiling, microbiological residues.
K15	Housekeeping of storage areas best practice, techniques and implications to include: stock rotation, ordering of materials, optimum storage environment for chemicals and machinery.
K16	Security of cleaning equipment and materials, reasons and implications.
K17	Communication techniques which could include: conflict management, dealing with patients with dementia, dealing with very young patients.
K18	The principles of Equality and Diversity, the importance of culture awareness and implications for the role. (e.g. age, race, religion, disability, those with dementia).
K19	Importance of portraying a positive corporate image (e.g. customer service, smart appearance).
Skills	
S1	Comply with National and local standards, policies, guidelines and procedures to include: manual handling, use of PPE, the NHS cleaning specification, waste disposal, safeguarding and data protection, the correct identification and use of a range of waste storage containers (sacks and bags), the safe disposal of waste and spent solutions, compliance with the cleaning and disinfecting policy as well as colour coding.
S2	Carry out risk assessments.
S3	Identify risk categories and colour coding correctly in order to carry out cleaning appropriately.
S4	Prepare cleaning materials and machinery appropriate to the task.
S5	Select the correct chemicals for the task considering COSHH and using correct dilution rates and applicable data sheets.

KSBs

Skills	
S6	Select and use correct cleaning equipment (fogging machine, floor machines) and equipment for a range of routine and specialist cleans (e.g. hard floors, clinical areas, communal areas, pool side, mortuary, operating theatres) including cleaning of equipment after use and applies principles of PAT testing to ensure equipment is safe to use.
S7	Carry out tasks according to Standard Operating Procedures (SOPs) (e.g. schedules of work, recording of completed tasks, fault reporting, stock recording/ordering).
S8	Recognise the signs of infestation and follow organisational procedures to appropriately address and eradicate the problem. e.g. rodents, insects, cockroach and pigeon waste, report according to local procedures and work with partners to eradicate them in line with local and national standards and policies.
S9	Carry out tasks to the appropriate standard to ensure infection prevention and control. For example the cleaning of rooms where a patient is being barrier nursed.
S10	Carry out different rapid response cleans (e.g. bodily fluid, chemical spillage, hazardous waste).
S11	Carry out scheduled and periodic cleaning, prioritising work where required.
S12	Carry out a range of cleaning and disinfection tasks to include: terminal cleans, barrier cleans, isolation cleans, discharge cleans, decontamination cleans.
S13	Apply the principles of hygiene to the role (i.e. clean uniform, hand hygiene and cross contamination). Appropriately use PPE and apply the bare below the elbow process.
S14	Assemble and disassemble a range of service user equipment for cleaning (e.g. hospital beds, trolleys and trays).
S15	Demonstrate housekeeping of storage areas best practice, techniques and implications to include stock rotation, ordering of materials, optimum storage environment (temperature, humidity, ventilation) for chemicals and machinery.
S16	Ensure the security of cleaning equipment and materials.
S17	Classify soils/contaminating matter correctly and apply the most appropriate removal methods which could include: organic soiling, inorganic soiling, microbiological residues.
S18	Communicate with colleagues, patients and their families professionally.
S19	Apply the principles of Equality & Diversity at all times being culturally aware and adapting tasks to suit the needs of the patient (e.g. age, race, religion, disability, those with dementia).
S20	Portray a positive Corporate image (e.g. customer service, smart appearance).
Behaviours	
B1	Dignity, respect and professionalism.
B2	Working independently and as part of a team; having the courage to challenge areas of concern and working to evidence based best practice.
B3	Reliability and consistency, taking responsibility for the integrity of your own actions and completed work.
B4	Time management and ability to complete work to schedule.
B5	A flexible approach to your work when required.
B6	Analytical thinker and problem solver.

**CAUTION
WET FLOOR**



Independent End Point Assessment

The end point assessment will only commence once the employer, apprentice and C2C Training Consultant are confident that the apprentice has developed all the knowledge, skills and behaviours defined in the apprenticeship standard and clearly evidenced by the on-programme progression review meetings and records. The independent end point assessment ensures that

all apprentices consistently achieve the industry set professional standard and can commence at any point once the apprentice is competent after the minimum period of learning and development. Prior to independent end point assessment the functional skills English and maths components of the apprenticeship must be successfully completed.

Summary of independent end point assessment process

The apprentice will be assessed to the apprenticeship standard using three complementary assessment methods. The assessment is synoptic, i.e. takes a view of the overall

performance of the apprentice in their job. The assessment activities will be completed by the independent end point assessment organisation as follows:

Knowledge test

The occupation requires the ability to recall from memory the underpinning knowledge in relation to health and safety, legislation and procedures. A multiple choice knowledge test is an effective and cost efficient method of testing this ability.

- ▶ The test can be paper based or computer based.
- ▶ It will consist of 30 questions.
- ▶ These questions will consist of closed response questions (e.g. multiple-choice questions) and questions based on a scenario/case study (minimum of 12 questions) – also to be closed response (e.g. multiple choice questions).



Observation with questioning

Apprentices must be observed by an independent assessor completing work in their normal workplace, in which they will demonstrate the KSBs assigned to this assessment method. The EPAO will arrange for the observation to take place, in consultation with the employer.

The observation will take 1hr and 45 minutes (2 hours including 15 minutes allowance for questioning). The observation may be split into discrete sections held over a maximum of 1 working day. The length of a working day is typically considered to be 7.5 hours.



Structured interview underpinned by portfolio

This assessment will take the form of an interview which must be structured to provide the apprentice with the opportunity to achieve the KSBs assigned to this assessment method. Questioning should assess the KSBs assigned to this assessment method and the apprentice may use their portfolio to support their responses.

The interview must last for 60 minutes. The independent assessor has the discretion to increase the time of the structured interview by up to 10% to allow the apprentice to complete their last answer. Further time may be granted for apprentices with appropriate needs, in-line with the EPAOs Reasonable Adjustments Policy.



Independent end point assessment organisations

Approved assessment organisations are registered on the SFA Register of apprenticeship assessment organisations. Assessment organisations are responsible for ensuring assessments are conducted fairly and that assessments are valid, reliable and consistent. To access the list and find an assessment organisation visit: <https://www.gov.uk/government/publications/using-the-register-of-apprentice-assessment-organisations>.

The employer will approve and appoint the assessment organisation to undertake the independent end assessment of the apprentice.



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