

CSF

HOUSEKEEPING DEPARTMENT

OPERATIONS MANUAL

414

414 - 68

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COMMUNITY SYSTEMS FOUNDATION

March 31, 1967

Mr. Harry W. Penn, Jr.

Administrator

Prince George's General Hospital

Cheverly, Maryland

Dear Mr. Penn:

This report contains the final conclusions reached by our staff after several months analysis of the Housekeeping Department. Because of the various uses anticipated for this material, the report has been physically separated into three parts.

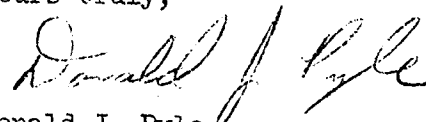
Part I is an analysis of the effectiveness of certain key personnel in the Housekeeping Department. This section will be submitted to you via a personal letter.

Part II, attached, contains (1) a brief description of the department at the outset of the study, (2) a description of the methodology utilized in this study, and (3) a description of the major changes which are being proposed.

Part III is intended to serve as an operating manual for the department and as such presents a complete description of the proposed system.

I would like to thank Mr. Webb and the members of the Housekeeping Department for their assistance.

Yours truly,



Donald J. Pyle
Project Engineer

Present System

The primary factor which initiated this study was the feeling by certain members of the Hospital Administration that an improvement in the quality of the department's output was needed. It was also felt that operating procedures could be streamlined. In addition, a clear definition of the staff necessary to adequately carry out the department's responsibilities was desired.

The organization and operation of the Housekeeping Department as presented in the following paragraphs existed at the outset of this study. Since that time, a number of changes have been made. For the most part, these changes fall within the format of the proposed system.

The following description necessarily dwells on those factors which require change. This is not meant to imply that all of the department's procedures were inefficient or otherwise undesirable.

The original organization is shown on page 3. Certain shortcomings in the operation of this organization were noted at the outset and served as objectives in the approach to the study.

The first problem noted was the lack of any formal quality control program. This meant that the only measure on the department's performance was the subjective feeling of the supervisory personnel. Inasmuch as this feeling is relative to prior performance and subject to bias due to knowledge of causes, a gradual overall decline in the quality level could easily go unrecognized.

The second major problem area involved the night crew. This group of thirteen employees was responsible basically for daily cleaning of offices, ancillary services, and public areas, plus periodic floor reconditioning in some areas. Each night at the beginning of the shift, a working supervisor would divide up the tasks among those employees present. From that point on, each employee was, for the most part, on his own. This resulted in a relatively low output, both quantitatively and qualitatively.

The third problem area involved the checkout procedure. All checkouts were dispatched to the room when the patient had left. The basic flaw in this setup was that the room was often cleaned by the wing maid prior to the patient's departure and then by the checkout maid shortly thereafter. This resulted in a considerable waste of time.

As a result of the lost time noted above, the checkout maids were unable to perform isolation checkout procedures. This resulted in the wall washer being removed from her primary function to clean the isolation rooms. The net effect of this diversion on the condition of the walls and light fixtures was readily apparent.

The fifth major problem, and the one which gave rise to most of the complaints directed at the Housekeeping Department, was the fact that there was no clear delineation of responsibility for care of public areas between 8 a.m. and 5 p.m. Cleaning of lobbies, public toilets, and corridors was performed on a hit

Exec. Housekeeper (1)

Clerk (1)

Ass't.
Exec. Housekeeper (1)

Ass't. Housekeeper (2)

R & U Bldg.	
Supv.	
3-800 Maid	
3-800 Maid	
3-800 Maid	
3-800 Maid	
3-800 Maid	
3-800 Maid	
3-800 Maid	
3-800 Maid	
3-800 Maid	
3-800 Maid	

Old & N Bldg.	
Supv.	(1)
A Wing Maid	(2)
C Wing Maid	(2)
Externs Maid	(2)
H 200 Maid	(1)
H 300 Maid	(1)
H 400 Maid	(1)
Porters	(2)

Utility Porters	
Supv.	(1)
Trash Porter	(1)
Trash Porter	(1)
Inclinator	(1)
Odd Job Porters	(2)
Wall Washer Maid	(1)

Checkout Swing	
Checkout Maids	(6)
Swing Maids	(8)
Sewing Room	
Women	(3)

Emergency Rooms	
Maids	(3)

Nurses Home	
Supv.	(1)
Maid	(1)

Evening Night Group	
5 PM-1:30 PM	
Maids	(2)
Midnite-8 AM	
Supv.	(1)
Porters	(5)
Maids	(7)

and miss basis.

The final major problem relates to the department's organization. This organization, as shown on the next page, caused a major overlap of supervisory responsibility. This resulted in as many as five different people giving instructions to a maid or porter on the same day. Needless to say, this resulted in lost time, confusion, and damaged employee morale.

Study Methodology

In order to effectively assign tasks to members of the department, it was first necessary to fully understand the responsibilities of the Housekeeping Department. Towards this end, members of the Community Systems Foundation staff visited every area of the Hospital with a member of the Housekeeping Department supervisory staff. A detailed list was compiled of the tasks to be performed in each area. In addition, the recommended frequency of performance and equipment necessary to perform this task were recorded.

The second step in the analysis was to determine the amount of time necessary to perform each task. To accomplish this, detailed time standards were applied to every task for every room in the Hospital. The standards utilized were compiled by the Hospital Systems Research Group of the University of Michigan. Most of these standards were verified by the Community Systems Foundation staff by comparison with other published standards or by direct observation. Upon completion of this step, we had available the information necessary to make equitable work assignments: (1) a complete list of tasks (2) how much time each task required (3) how often it should be performed (4) the equipment and supplies necessary and (5) any restriction on the time of day during which it could be performed.

The next step was to separate those tasks which should be done in all areas by the same person or by a team. In general, such tasks were defined by the need for special equipment or the fact that performing them on the day shift would be impractical.

The remaining tasks were divided by area to provide approximately 360 minutes of direct work activity for each employee each day. This figure was derived by subtracting a 15% personal, fatigue and delay allowance and a 10% travel allowance from the 480 minutes available each day. (The 15% figure is a widely accepted standard for most jobs and the 10% figure is the result of extensive research into housekeeping by the Hospital Systems Research Group.)

The next step in the analysis was to make provision for those unpredictable tasks which housekeeping is asked to perform. Study of past records, of these requests at Prince George's, indicated that, in addition to the flexibility provided by the Checkout Maids, two porters should be provided daily.

Finally, the department's supervision was reviewed with the goal of providing sufficient supervision, but eliminate the wasteful and confusing overlap which previously existed.

Proposed System

Inasmuch as the Operations Manual provides a complete description of the proposed department's organization and operation, this portion of the report is designed only to highlight the major changes and the reasoning behind them.

Section I of the Manual presents the department's organization and the responsibilities of the supervisory personnel. The responsibilities of the Assistant Executive Housekeeper have been carefully separated and the "Supervisor at Large" position has been eliminated. However, in order to provide seven day coverage in the two primary supervisory positions, it will be necessary to add one supervisor to the staff. Under this organization, each employee should receive instructions from one person only on any given day, unless responsibility is specifically transferred by his or her immediate supervisor.

Section II describes the department staff below the supervisor level. The first page of the section lists all of the positions in the department and the number of days which they must be staffed.

The following is a summary of these positions:

Day Shift

1 Administrator (The Executive Housekeeper)	5 days/wk.
1 Administrator	7 days/wk.
1 Clerk	7 days/wk.
2 Supervisors	7 days/wk.
19 Maids	7 days/wk.
11 Porters	7 days/wk.
7 Maids	5 days/wk.

Evening Shift

2 Maids	7 days/wk.
1 Porter	7 days/wk.

Night Shift

2 Porters

5 days/wk.

To cover the above positions, the following number of people must be budgeted for the department:

1 Executive Housekeeper

2 Assistant Executive Housekeepers

1 Clerk

3 Supervisors

37 Maids (Day Shift)

(26 Positions & 8 Reliefs & 3 Sick Leave Coverage)

17 Porters (Day Shift)

(11 Positions & 5 Relief & 3 Sick Leave Coverage)

3 Maids (Evenings)

1 Porter (Evenings)

2 Porters (Nights)

The above budgeted staff totals 67, which is a reduction of 5 from the original. This represents a savings of approximately \$20,000/yr. It is our feeling that this staff allocation is extremely generous. As a result, the department should, with this staff, be able to provide the high level of sanitation and appearance desired by the Hospital's Administration.

The second page of this section is the key to one of the major changes, which has already been implemented. This involved the reduction of the night crew to two men. Consequently, the tasks previously performed by the night crew are now performed between 6:30 a.m. and 8:00 a.m. by the Day Shift. Each line represents one area assignment, which should require one and one-half hours to clean, following the procedures outlined in Section III.

The remainder of this section details the work assignments listed on the first page of the section. Numerous changes have been made to even up the

work load and increase the probability that a high level of sanitation will be maintained. One of these changes is probably worthy of further comment. As mentioned earlier, the Wing Maids and Checkout Maids were often cleaning the same patient room twice within a very short period of time. To alleviate this waste of effort each day, the Wing Maid will ask the Ward Clerk which rooms will have checkouts that day. She will then skip those rooms in her regular routine. This should save her between 20 and 30 minutes per room. Upon completion of her daily routine, she is to call the Housekeeping Clerk for assignment to checkouts. Due to the amount of time she will have saved earlier, she will be expected to perform the checkout cleaning in one-half of the rooms she has previously skipped.

One further note regarding this section is in order. All porter positions are based on the assumption that corridors will continue to be dry mopped and damp mopped using standard mops. Should the Hospital acquire a floor machine capable of satisfactorily performing this function, it will be possible to combine the A, C, ER porter position with the Bridge, 3 main porter position.

Section III of the Manual details the tasks to be performed in the various areas. No major changes have been made in this regard. It is our feeling that if the tasks are performed as specified in the past, at the frequencies we have and by the personnel that we have specified, a high level of cleanliness will be maintained.

Section IV deals with those activities which are performed on a periodic basis by special teams. The major contribution to this segment of the department's activities is the list of time standards, which should serve as a guide in scheduling these activities.

Section V is an attempt to list, as completely as possible, the activities for which the Housekeeping Department is responsible. Certain of these activities, namely flower delivery, mail delivery, could be handled more easily and economically by a centralized messenger service. It is strongly recommend-

ed that the Hospital consider such a service, as it would undoubtedly benefit nearly every department.

The Quality Control Program as set forth in Section VI is entirely new to the Hospital. The entire program has been presented in detail in the manual. In addition, a number of advantages of the program are listed on the first page of Section VI. It cannot be overemphasized that a program of this type is necessary to keep the department from slipping into the quagmire of making an excuse for each individual short-coming and eventually losing sight of the overall department performance.

Section VII sets forth a general suggested format for employee training. It is our feeling that this activity, essential to the long-term performance of the department, has been grossly neglected to meet short-term needs. For this reason, one of the Assistant Executive Housekeepers has been allocated the responsibility for training. He should be given at least two days for formal training of all new employees. It is also suggested that brief group sessions be held monthly to review procedures which are being neglected or to introduce new procedures, equipment, or materials.

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PRINCE GEORGE'S GENERAL HOSPITAL

CHEVERLY, MARYLAND

HOUSEKEEPING MANUAL

APRIL 19, 1967

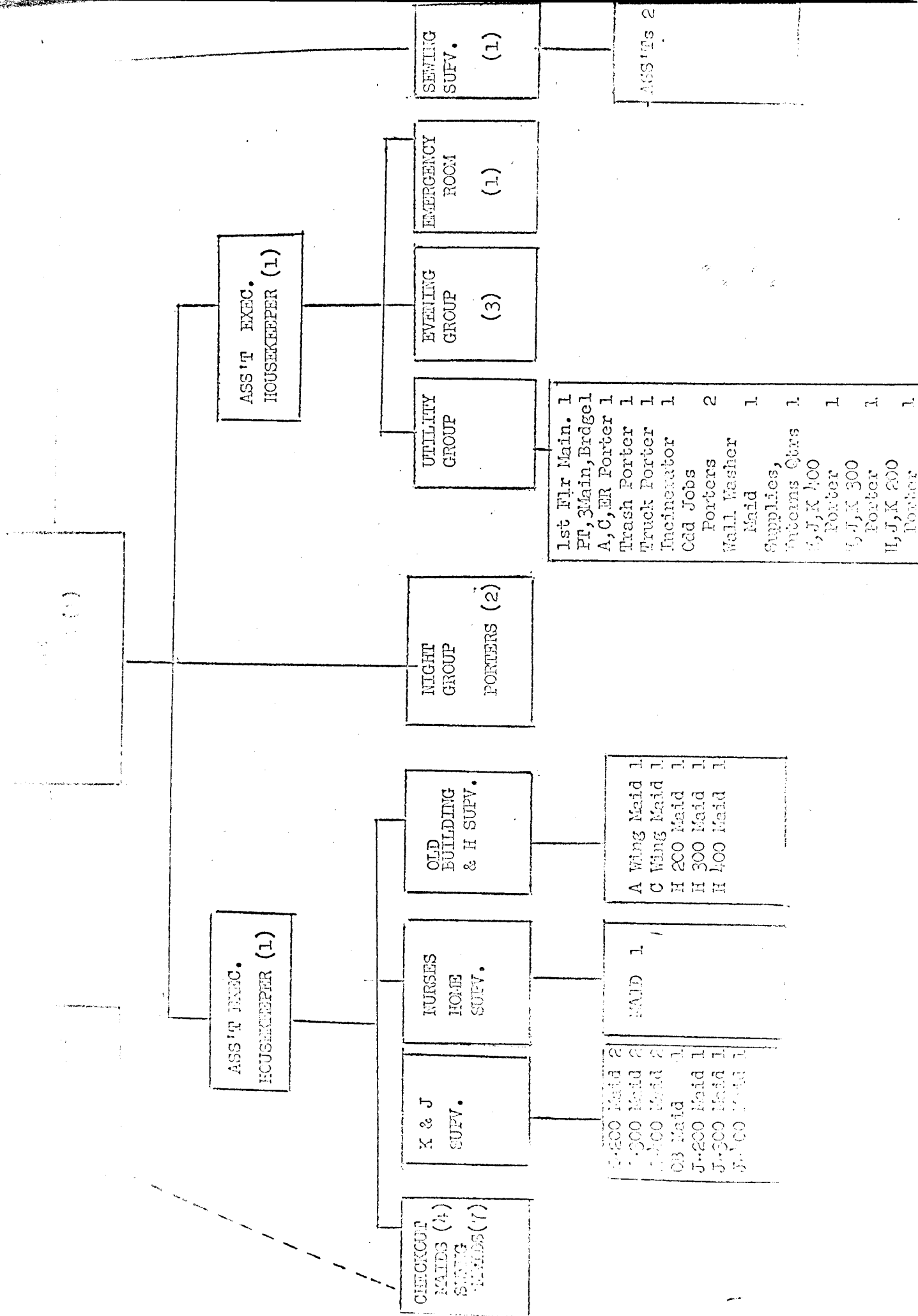
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SECTION I

DEPARTMENT ORGANIZATION

This Section sets forth the organization of the Prince George's General Hospital Housekeeping Department. In addition, the responsibilities of the supervisory personnel are delineated.



EXECUTIVE HOUSEKEEPER

Responsibilities

1. Cleanliness, sanitation, and orderliness of the hospital.
2. Appearance and courtesy of housekeeping employees.
3. Selection of new employees.
4. Maintenance of cooperative relationships with other departments.
5. Maintain work standards, methods, and schedules.
6. Maintain Department records and approve time sheets.
7. Approve supply requisitions.
8. Preparation of department budget.
9. Direct Administrative responsibility for night crew and sewing room staff.
10. Advise in all department situations beyond the scope of authority or ability of Assistant Executive Housekeeper.

ASSISTANT EXECUTIVE HOUSEKEEPER - I

Responsibilities

1. Administrative responsibility for wing maids, checkout maids and Nurses Home maids. (Direct supervision of these employees is the responsibility of the area supervisors, clerk, and Nurses Home supervisor as indicated on the organization chart).
2. Relief of Ass't Executive Housekeeper II. This entails direct supervision of the Utility Group.
3. Periodic supervision of night crew.
4. Co-responsibility for Quality Control Program.
5. Advise in all situations beyond the scope of authority or ability of supervisors reporting to him.

ASSISTANT EXECUTIVE HOUSEKEEPER - II

Responsibilities

1. Administrative responsibility for evening crew and Emergency Room crew.
2. Direct supervision of Utility Group.
3. Direct supervision of special projects.
4. Periodic supervision of Night Crew.
5. Conduct initial and in-service training of employees.
6. Periodic updating of schedules.
7. Advise in all situations beyond the scope of authority or ability of those reporting to him.

Housekeeping Supervisor

Job Summary: A Housekeeping Supervisor is responsible for the standard of work of the employees assigned to him. He must demonstrate a constant ability to lead and work with the housekeeping employees. The Supervisor is directly responsible to the Housekeeper. All requests for work from other Department Heads will be referred to the Housekeeper.

Work Performed:

1. Supervises the work in the Administrative, patient, and public areas.
2. Reports to the Housekeeper or person in charge, to receive daily assignment. Reports absenteeism and receives reliefs for replacements.
3. Checks to see that all his employees are at their assigned areas and at work.
4. Checks the work of his employees daily and converses with these employees daily.
5. Knows where his employees are at all times.
6. Helps issue supplies. Keeps records of all supplies distributed.
7. Reports all repairs to the Housekeeper.
8. Trains and supervises the work of all new employees.
9. Assigns and distributes uniforms to the employees.
10. Checks daily the appearance of his employees.

SECTION II

DAILY PROCEDURE

This Section outlines the daily procedure for all positions in the department below the supervisors level. In all cases, except wing maids and checkout maids, the detailed responsibilities within an area are given in Section III of the manual. The reason for this is the large number of similiar areas being cleaned by different personnel.

The first page of the section lists all of the Housekeeping Department positions and the number of days per week which they must be covered. Those positions marked with an * have a public area assignment from 6:30 a.m. to 8:00 a.m. These assignments are listed on the second page. Details for these areas are given in Section III.

<u>Days/Wk</u>	<u>People</u>	<u>Primary Assignments</u>
5	1	Administration
7	1	Administration
7	1	Clerk
7	2	Supervisors
7	1 Maid	*A Wing
7	1 Maid	*C Wing
7	1 Maid	*H 2
7	1 Maid	*H 3
7	1 Maid	*H 4
7	1 Maid	*OB
7	1 Maid	*J 2
7	1 Maid	*J 3
7	1 Maid	*J 4
7	2 Maids	*K 2
7	2 Maids	*K 3
7	2 Maids	*K 4
5	2 Maids	Nurses Home
7	3 Maids	Checkouts
7	1 Porter	Trash
7	1 Porter	Truck
7	1 Porter	Incinerator
7	2 Porters	*Odd Jobs
5	1	Wall Washer
5	1 Maid	Supplies, Curtains, Interns Quarters
7	1 Maid	*Emergency Room
5	3	Sewing

<u>Days/Wk</u>	<u>People</u>	<u>Primary Assignments</u>
7	1 Porter	*H, J, K-400 Corridors, Utility Rooms, Pantry, Lobby
7	1 Porter	* 300 " " " "
7	1 Porter	* 200 " " " "
7	1 Porter	*A & C & E.R. " " " "
7	1 Porter	Bridge, 3 Main, Physical Therapy corridors
7	1 Porter	1st floor - K Building, Corridors, Toilets
7	3	Evenings
5	2 Porters	Floor Reconditioning

The assignments marked with an * on the previous pages are scheduled 8:00 a.m. to 3:00 p.m. This allows assignment of these people to a public or office area from 6:30 a.m. to 8:00 a.m. Each line below represents an assignment for one person for this period.

6:30 a.m. - 8:00 a.m. Assignments:

<u>#People</u>	<u>Days/Wk</u>	<u>Assignment</u>
1	7	Outpatient Waiting & Toilets
1	5	Outpatient Office, Utility & Examining Rooms
1	5	Social Service & Outpatient Department, Cashier
	7	X-ray Department
1	7	Laboratory & Laboratory Waiting Room
	7	Physical Therapy, Waiting, Locker Rooms, Cast Room
1	7	Physical Therapy, Treatment Rooms & Whirlpool Rooms
	7	Central Supply
1	7	O.R., Drs. Lounge, Toilets, Lockers, Nurses Lockers
	5	Medical Records, Dugout, Key punch Room
1	7	Board Room, Admin., Assist. Adm., Comptroller, Secretary
	5	Business Office and Payroll
1	7	All K-100 Toilets (4) and Dust Mop Lobby
	7	Lobby & Nursing Offices
1	7	Admitting, Chapel, Social Service
	7	Elevators, K-100, K-200 Lobbies
1	7	K-300, K-400 Lobbies
1	5	K-500, Lobby, Conference Room, Toilets
	5	K-500, Medical Education Office, Drs. Library-Office
1	7	Data Processing, Mr. Webb & Sec., Central Dictating
1	5	Anesthesia, Personnel and Purchasing
1	7	Temporary Corridor and Locker Rooms

Plus 1 Supervisor

DAILY PROCEDURE

Wing Maids

- A. At 6:30 a.m., report to Public Area assigned and follow procedures for that area as outlined in Section III of this manual.
- B. At 8:00 a.m. take coffee break and obtain supplies.
- C. At 8:30 a.m. begin work on wings:
 1. Empty wastebaskets in all rooms.
 2. Check with Ward Clerk for checkouts. Skip those rooms which will have checkouts that day.
 3. Clean patient rooms.
 - a. High dust (blinds, sills, radiators, lights)
 - b. Spot wash walls.
 - c. Wash mirror, hand bowl, toilet and showers.
 - d. Replenish towels and papers.
 - e. Dry mop and then damp mop floor.
 - f. Check cubicle curtains.
 4. Clean Nursing Station, Medicine Room, Treatment Rooms, Offices and high dust in corridor.
 - a. Follow procedures outlined in Section III of this manual.
 5. Upon completion of patient rooms and assigned public areas, call the Housekeeping Clerk for checkout assignments.
 - a. Each wing maid will be expected to perform the checkout procedure in one half of all rooms she skipped previously.
 - b. In some cases, the Housekeeping Clerk and the Supervisor may decide to have the wing maid wax the floor in a patient room instead of performing a checkout.
 6. Lunch (30 minutes) when between rooms
- D. 2:45 Clean up cart.
- E. 3:00 Finished for the day.

DAILY PROCEDURE

Check out Maids

- A. Checkout maids will receive their assignments from the Housekeeping clerk.
- B. Procedure:
 - 1. Open window and air unit, if no patient is in other bed.
 - 2. Strip the bed and room of all linen.
 - 3. Remove all equipment from bedside table, bathroom and closet.
 - 4. Take all linen and equipment to the dirty utility room.
 - a. Put the wash cloth in mesh bag.
 - b. Put the linen in the laundry hamper.
 - c. Discard soap in trash can.
 - d. Place utensils in C.S.R. rack.
 - e. Remove toilet tissue and place in utility room.
 - f. Check condition of white blanket. If the blanket is clean, re-fold it and place it, fold to the front, on linen shelf in patient's unit. If the blanket is soiled, hang it on the side of the laundry hamper.
 - 5. Collect the cleaning equipment and take it to the unit.
 - 6. Draw the curtain if a patient is in the other bed.
 - 7. Wipe the mattress with a damp cloth from top to bottom, paying particular attention to the seams.
 - 8. Clean exposed springs, top of bed and exposed side rails.
 - 9. Roll the head of the bed up and clean exposed framework and exposed springs.
 - 10. Clean the pillow with a damp cloth.
 - 11. Wash, rinse and dry the bedside table inside and out, including telephone
 - 12. Wash, rinse and dry the overbed table, be sure to clean the compartment and legs.

Checkout Maids continued:

13. Damp dust the bed lamp and call light, then loop the call light once around the lamp.
14. Wash, rinse and dry the chair and locker.
15. Wash sink, toilet and plumbing fixtures.
16. Clean window sill, radiators or vents, venetian blinds and floor lamp.
17. Wash out the bed pan brush container and bed pan brush with red soap.
18. Resupply the bedside table with gown, paper shoes, wash basin, emesis basin, cover bed pan with cover, urinal with cover if male patient, towel and wash cloth.
19. Make up a closed bed, snap the call light to pillow slip.
20. Dust mop and wet mop floors.
21. If Bed #2, window and blind will be washed.
22. Empty and clean the waste basket.
23. Place ash tray and discharge card on bed side table.
24. Report to Nurses Station and housekeeping office when unit is completed.

SPECIAL NOTES:

1. Report any tear in mattress or pillow to Charge Nurse also any broken equipment.
2. If any personal articles have been left from previous patient turn over to charge nurse.
3. The I.V. pole is washed and put in rack at bottom of bed.
4. Remove excess clothes hangers from closet.

DAILY PROCEDURES

Wing Porters

- A. At 6:30 a.m. report to area assigned and follow procedures for that area as outlined in Section III of this manual.
- B. At 8:00 a.m. take coffee break and obtain supplies.
- C. At 8:30 a.m. begin work on wings.
 - 1. Dry mop corridor)
 - 2. Wet mop corridor) 1/2 of corridor at a time
 - 3. Buff corridors)
- D. Lunch (30 minutes) upon completion of a complete section of corridor
- E. Clean utility rooms, pantries, janitors closets, lobbies, and public toilets in assigned areas, following procedures outlined in Section III of this manual.
- F. 3:00 p.m. Finished for the day.

Porter - 1st Floor - K Building

- A. At 6:30 a.m. begin to dry mop, wet mop, and buff all corridors in the first floor of K Building. Dry mopping only over those surface treated with Cello Pantalon.
- B. Clean windows and doors in main lobby.
- C. Lunch (12:00)
- D. Dry mop all corridors on the 1st floor of K Building.
- E. Clean the four public toilets adjacent to the main lobby in the administrative corridor.
- F. 3:00 p.m. Finished for the day.

DAILY PROCEDURES

Porter - Bridge, 3rd Main, Physical Therapy

- A. At 6:30 a.m. dry mop, wet mop and buff the Physical Therapy Corridor.
- B. Take coffee break.
- C. Dry mop, wet mop and buff the 3rd floor main corridor.
- D. Lunch. (12.00)
- E. Dry mop, wet mop and buff the bridge.
- F. 3:00 p.m. Finished for the day.

NOTE:

Because of the large area covered by this porter, he should use the large floor machine as much as possible. In addition, spray buffing techniques should be applied wherever necessary.

DAILY PROCEDURES

ODD JOBS PORTERS

- A. At 6:30 a.m. report to the public area assigned and follow the procedure for that area as outlined in Section III of this manual.
- B. For the remainder of the day, the odd job porters will be under the supervision of the Assistant Executive Housekeeper, performing the numerous unscheduled functions which are requested of the Housekeeping Department.

Examples of these activities are:

- 1. Moving furniture.
- 2. Transporting records to the archives.
- 3. Vacuuming acoustical ceilings.
- 4. Cleaning outside windows when prisoner help is unavailable.
- 5. Clean stairwells.

NOTE:

This list is not intended to be all inclusive.

DAILY PROCEDURE

Nurses Home

The two housekeeping personnel assigned to the Nurses Home are completely responsible for the cleanliness of this building.

This includes:

Daily cleaning of all nurses rooms, nursery rooms, offices, classrooms, toilets and corridors according to the listings for these type of areas in Section III of this manual.

Periodically wash walls, clean windows, wax furniture, wax floors, and shampoo rugs.

Trash Porter

Order of Performance

6:30 a.m. to 7:45 a.m.

Central Supply

Laundry

K-100

7:30 a.m. to 8:00a.m. - Coffee break

8:00 a.m. to 11:30 a.m.

J-200

K-200

H-200

J-300

H-300

K-300

J-400

H-400

11:30 a.m. to 12:00 Noon

Drug room

Store room

Locker rooms (S.W. Bldg.)

12:15 p.m. to 12:45 p.m. - Lunch

12:45 p.m. to 3:00 p.m.

Central Supply

K-200

J-200

H-200

A-Wing

C-Wing

O.B. Formula bottles

Trash Porter (cont'd)

12:45 p.m. to 3:00 p.m.

J-300

K-300

H-300

J-400

K-400

H-400

Formula bottles

Laundry

K-100

Incinerator Porter

I. Daily Work

- A. 8:30 a.m. light the incinerator and burn trash and wash cans.
- B. 10:00 a.m. burn the wing trash. Wash cans.
- C. 1:00 p.m. burn the Dietary trash. Wash cans.
- D. 2:00 p.m. burn Wing and Nurses Home Trash.
- E. 3:15 p.m. burn Dietary trash.
- F. 3:30 p.m. burn trash from Central Supply, Laundry, Clinical Wings.
- G. 4:30 p.m. clean incinerator. Stir the incinerator. Sweep floor.

Truck Porter

I. Daily Work.

- A. Obtains key for truck from Housekeeping Office.
- B. 8:00 a.m. pull trash from Dietary, Dining Room, Steam Table and Dish Washer. Take load to incinerator.
- C. 8:45 a.m. pick up trash at Morgue Entrance. Help burn trash and wash trash covers.
- D. 9:30 to 10:15 a.m. go with the Incinerator Porter to the dump.
- E. 10:15 a.m. return Dietary cans. Wash trash covers.
- F. 11:00 a.m. pick up trash at Emergency Room Platform. Help burn trash and clean trash covers.
- G. 12:30 Lunch
- H. 1:00 p.m. pick up Dietary trash.
- I. 2:00 p.m. pick up trash at nurses home and Emergency Platform.
- J. 4:30 p.m. pick up last trash load from the Receiving Platform. Wash truck and lock it and return key to Housekeeping Office.
- K. 5:00 Finished for the day.

Section III

DAILY ACTIVITIES

This section lists the activities which must be performed daily in each of the areas listed.

The various portions of this section are specifically referred to by the Daily Procedures Section of this manual. The job assignment section and the daily procedure section should be consulted to determine who is responsible for cleaning each of these areas.

DAILY ACTIVITIES

- A. Nurses' Stations, Utility Rooms, Kitchens, and Treatment Rooms
 - a. Empty and wash wastebaskets.
 - b. Dust sills, radiators or vents, doors, door frames, and venetian blinds.
 - c. Spot wash walls.
 - d. Dust mop and wet mop.
 - e. Replenish paper towel holder.
- B. Conference Rooms or Nurses' Offices (K-Building)
 - a. Empty and wash wastebaskets.
 - b. Dust vents, doors, door frames, and all furniture.
 - c. Spot wash walls.
 - d. Dust mop.
- C. Nurses Locker Rooms
 - a. Empty and wash waste paper baskets.
 - b. Replenish toilet tissue and towels.
 - c. Dust lockers and benches.
 - d. Wash hand bowls, toilet bowls, and mirrors.
 - e. Empty ash trays and wipe.
 - f. Wipe down tile.
 - g. Dust mop and wet mop.
- D. Main Lobby
 - a. Clean matting in entrance.
 - b. Dust mop terrazzo floor and spot mop.
 - c. Empty ash trays and sift sand in urns.
 - d. Spot clean windows, glass doors, and all stainless steel.
 - e. Spot wash walls and furniture.
 - f. Clean telephone lobbies.
 - g. Dust artificial plants.

E. Floor Lobbies

- a. Empty ash trays.
- b. Spot wash furniture and walls.
- c. Dust lamps.
- d. Dust mop and damp mop.

F. Public Toilets

- a. Empty trash cans and replace liners.
- b. Wash hand bowls, toilet bowls, mirror, and plumbing fixtures.
- c. Dust sills, blinds, dividers, paper towel holders, doors and door frames.
- d. Replenish paper towels and tissue holder.
- e. Spot wash tile.
- f. Dust mop and wet mop.

G. Canteens

- a. Empty trash and wash canteens.
- b. Wash machines, if needed. (usually done by vendor)
- c. Empty ash trays.
- d. Dust blinds and sills.
- e. Dust mop and damp mop.

H. Gift Shop

- a. Empty and wash waste baskets.
- b. Spot wash walls.
- c. Spot wash glassware.
- d. Empty ash trays.
- e. Dust mop

J. Patients Library

- a. Empty and wash waste baskets.
- b. Empty and wash ash trays.
- c. Dust sills, windows, shelves, venetian blinds and furniture.
- d. Spot wash walls and furniture.
- e. Dust mop and damp mop, if needed.

K. Chapel

- a. Dust furniture, alter, and lights.
- b. Vacuum.
- c. Empty and wash waste basket in office.
- d. Empty and wash ash trays.
- e. Spot wash walls.

L. Central Supply

- a. Dust mop and wet mop.

M. Formula Room

- a. Dust blinds and windows.
- b. Spot wash walls and windows with Hi-Sine.
- c. Dust mop and wet mop with Hi-Sine.

N. Administrator's Office, Board Room, and Nursing Service Offices

- a. Wash toilet bowl, hand bowl, and mirror.
- b. Spot wash tile.
- c. Replenish toilet tissue and paper towels.
- d. Dust sills, venetian blinds, and all furniture.
- e. Empty and wash ash trays and waste baskets.
- f. Vacuum carpet.

O. Business Office, Medical Records, Back Office, Admitting Office, Pay Roll, Social Service, and other Administrative Offices.

- a. Empty and wash ash trays and baskets.
- b. Dust sills, venetian blinds, lights, and furniture.
- c. Spot wash walls.
- d. Dust mop and damp mop.

P. Clinic Area

- a. Empty waste baskets and replace liners.
- b. Empty ash trays and wash.
- c. Dust sills, venetian blinds, desk chairs, and furniture.

P. Clinic Area

- d. Clean mirrors, hand bowls, and toilet bowls.
- e. Spot wash tile and walls.
- f. Dust mop and damp mop.

Q. Conference Room (Fifth Floor)

- a. Empty and wash ash trays and waste baskets.
- b. Wash blackboard and keep drapes closed when not in use.
- c. Dust furniture, sills and venetian blinds.
- d. Check drapes to see that they are on hooks at all times.
- e. Keep chairs in order.
- f. Clean radiators.
- g. Clean bathroom.
- h. Dust mop and damp mop.

R. Interns, Residents, and Call Room

- a. Empty and wash ash trays and waste baskets.
- b. Dust sills, venetian blinds, radiators and all furniture.
- c. Make beds.
- d. Wash hand bowls, toilet bowls, and mirrors.
- e. Replenish toilet tissue and paper towels.
- f. Spot wash walls and tile.
- g. Dust mop and damp mop (if needed)

S. Doctors Lounge and Library

- a. Empty and wash waste baskets and ash trays.
- b. Vacuum carpet.
- c. Dust sills, furniture, blinds and shelves as needed.

Periodic

- a. Wash furniture and spot wash walls.
- b. Shampoo rug.
- c. Dust book shelves.

Periodic

- d. Rewax library floor.
- e. Wash blinds and windows.

T. Doctor's Coat Room, Lounge, and Coffee Bar

- a. Empty and wash waste baskets and ash trays.
- b. Wash hand bowls, toilet bowls and mirrors.
- c. Dust sills, blinds and furniture.
- d. Spot wash walls.
- e. Dust mop and damp mop.

U. Stairwells

- a. Sweep stairs and damp mop.
- b. Spot wash walls, sills, and doors.
- c. Dust blinds.
- d. Damp dust hand rails.

V. Corridors

- a. Empty and wash ash trays.
- b. Dust window sills and blinds
- c. Dust radiators.
- d. Spot wash walls.
- e. Dust mop and wet mop.
- f. Buff.

NOTE: Corridors should be machine scrubbed once each week.

W. Elevators

- a. Wash walls and stainless steel.
- b. Dust vents.
- c. Dust mop and wet mop.

X. Locker Rooms

- a. Empty and wash ash trays and waste baskets.
- b. Wash hand bowls, toilet bowls, showers and mirrors.

X. Locker Rooms

- c. Wash table, chairs, and step-on-cans.
- d. Dust sills, blinds, and lockers.
- e. Spot wash walls.
- f. Dust mop and wet mop.

SECTION IV

PERIODIC ACTIVITIES

I. Floor Reconditioning

1. The Assistant Executive Housekeeper will schedule the floor reconditioning crew (7:00 p.m. to 3:00 a.m.) to specified areas as needed. The time standards set forth on page 31 will serve as a guide in this scheduling.
2. Care of patient room floors will be provided by the wing maid assisted by the porter assigned to that area. This care will be scheduled by the supervisor in charge of that area.

STRIP AND WAX STANDARDS

<u>AREA</u>	<u>TOTAL TIME</u>
Entire Outpatient Area	6 hours
All rooms on 3rd floor-Central, Outpatient to Physical Therapy-Corridor (including x-ray)	8 hours
Emergency wing (including waiting rooms and laboratory)	8 hours
A Wing (all areas except patient rooms)	4 hours
C Wing (all areas except patient rooms)	4 hours
Physical Therapy Wing (x'ray rooms, opening onto P.T. Wing)	2 hours
Operating Room (corridors, Central Supply, Doctors Lounge & dictating)	10 hours
Medical Records & Back Office	6 hours
Business Office, Admin. Area, Payroll	6 hours
Gift Shop, Nursing Office, Social Service	5 hours
Admitting and Print Shop, K-100 Corridor, Lobby & Vestibule (from cafeteria to medical records)	6 hours
K-200 (all areas except patient rooms)	12 hours
K-300 (all areas except patient rooms)	12 hours
K-400 (all areas except patient rooms)	12 hours
K-500 (all areas)	6 hours
H-200 (all except patients rooms)	4 hours
H-300	4 hours
H-400	4 hours
J-200	4 hours
J-300	4 hours
J-400	10 hours

WAXING STANDARDS

<u>AREA</u>	<u>PERSONNEL</u>	<u>TOTAL TIME</u>
Outpatient Area (including office)	Night S.W. (2)	2 hours
All rooms on 3rd floor central corridor (including x-ray)		3 hours
Emergency Wing (including waiting rooms & laboratory)		3 hours
A-Wing (all except patient rooms)		2 hours
C-Wing (all except patient rooms)		2 hours
X-ray rooms opening onto P.T. Wing		1 hour
Operating Room corridors, Central Supply, Doctors Lounge & Dictating		3 hours
Medical Records and Back Office		3 hours
Business Office, Adm. Area, Payroll		3 hours
Gift Shop, Nursing, Soc. Service, Admitting & Print Shop		3 hours
Lobby, Vestibule, K-100 Corridor (from cafeteria to Medical Records)		3 hours
K-500 (all areas)		3 hours
K-200 (all except patient rooms)		3 hours
K-300 (all except patient rooms)		3 hours
K-400 (all except patient rooms)		3 hours
H-200 (all except patient rooms)		2 hours
H-300 (all except patient rooms)		2 hours
H-400 (all except patient rooms)		2 hours
J-300 (all except patient rooms)		2 hours
J-400 (all except patient rooms)		2 hours
		<u>2 hours</u>
		50 hours
		x 2
		17 man
		days

PERIODIC ACTIVITIES

II. Wall Washing (8:00 a.m. - 4:30 p.m.)

A. Wall washing will be scheduled by the Assistant Executive Housekeeper utilizing the standards set forth on page 33. This activity should be scheduled by major area. (A wing at a time).

Spot washing should be done by wing maids.

B. This activity should be scheduled 5 days/week. The wall washer should not be assigned to other tasks.

C. Procedure.

1. The wall washer will first remove and clean all light fixtures.
2. Initially the wall should be washed with a mop dipped in a water and germicidal solution.
3. Any remaining spots should be scrubbed with germicidal solution or an abrasive, if necessary.

WALL WASHING STANDARDS
(ALSO CLEAN LIGHTS)

<u>AREA</u>	<u>TOTAL TIME</u>
Entire Outpatient Area (including office)	5 hours
3rd floor, central corridor & all rooms opening onto it	7 hours
Emergency Wing (including waiting rooms and laboratory)	10 hours
A-Wing (all except patient rooms)	6 hours
C-Wing (all except patient rooms)	6 hours
Physical Therapy Wing	6 hours
Operating Room corridors, Central Supply, Doctors Lounge & Dictating	7 hours
Medical Records & Back Office	5 hours
Business Office, Admin. Area, Toilets, Payroll	7 hours
Gift Shop, Nursing, Chapel, Soc. Service, Toilets	3 hours
Admitting and print shop	2 hours
K-100 corridor, Lobby, Vestibule	9 hours
K-200 (all areas except patient rooms)	10 hours
K-300 (all areas except patient rooms)	10 hours
K-400 (all areas except patient rooms)	10 hours
H-200 (all areas except patient rooms)	5 hours
H-300 (all areas except patient rooms)	5 hours
H-400 (all areas except patient rooms)	5 hours
J-200 (all areas except patient rooms)	5 hours
J-300 (all areas except patient rooms)	5 hours
J-400 (all areas except patient rooms)	7 hours
K-500 (all areas)	7 hours
	<u>142 hours</u>
	"
	24 man days

PERIODIC ACTIVITIES

III. Window Washing (exterior)

- a. This activity will be scheduled as needed by the Assistant Executive Housekeeper. All windows should be washed at least every six months. A log should be kept of this activity.
- b. As much as possible, prisoners will be used for this activity.
 1. When necessary, the odd jobs porters may also be utilized.

SECTION V
HOUSEKEEPING RESPONSIBILITIES

The following in addition to Sections II and III of this manual provides an inclusive list of those responsibilities assumed by the Housekeeping Department.

1. Beds.

Patients beds are washed by the checkout team or when the entire area is reconditioned.

2. Cubicle Curtains.

Changed as often as necessary.

3. Draperies.

Dusted or vacuumed. Dry cleaned or washed as often as necessary.

4. Discharge Units.

Vacated units will be reported to Housekeeping and the unit will be completed by the checkout team.

5. Emergency Calls.

All emergency calls for service are to be directed to Housekeeping Office. If there is no one in the office, page either the Housekeeper or a Housekeeping Supervisor.

6. Flower Delivery.

Flowers will be delivered only between 9:00 a.m. and 4:30 p.m. After 4:30 p.m., it is the responsibility of the florist to have the flowers delivered.

7. Furniture (Patients)

Furniture in the patients rooms is washed by the checkout team, or when the entire area is reconditioned.

8. Furniture (Public).

Furniture in the lobbies and solariums will be dusted daily and washed as often as necessary.

9. Isolation Discharges.

All isolation units will be reconditioned by the checkout team according to the instruction procedure.

10. Light Fixtures.

Light Fixtures will be cleaned by the wall washer.

11. Mail Delivery.

As soon as the mail is sorted, Housekeeping should be called and the mail will be delivered.

12. Moving.

All heavy moving operations should be reported to Housekeeping at least two days in advance.

13. Newspaper Delivery.

The morning paper will be sold to the patients at 8:00 a.m., and the evening paper will be sold at 5:00 p.m. All extra papers are placed in the rack in the Main Hall.

14. Offices.

To be cleaned as detailed in Sections II and IV of this manual.

15. Patients Rooms.

To be cleaned as detailed in Sections II and III of this manual.

16. Pest Control.

All such problems should be directed to Housekeeping. Emergency calls will be taken care of immediately.

17. Public Areas.

To be cleaned as detailed in Sections II and III of this manual.

18. Reconditioning.

All areas will be reconditioned semi-annually or according to need.

19. Re-Upholstering.

All requests should be submitted to Housekeeping.

20. Service Departments.

To be cleaned as detailed in Sections II and III of this manual.

21. Spillage.

If spillage can not be taken care of locally, Housekeeping should be called.

22. Trash.

If an excessive amount of trash is accumulated, Housekeeping should be called for service.

23. Vending Machine.

Washed daily.

24. Wall Washing.

All walls should be washed according to need, with a maximum interval of six months.

25. Window Washing.

All windows to be washed according to need.

SECTION VI

QUALITY CONTROL PROGRAM

The quality control program as set forth on the following pages provides a considerable amount of information about the hospitals physical facilities.

1. It should be used by the Executive Housekeeper to determine what housekeeping activities are being most often neglected.
2. It should be used by Supervisors to determine which employees need more supervision and training on particular activities.
3. It should provide maintenance with a list of repairs needed to surfaces and furniture throughout the hospital.
4. It should provide the Assistant Administrator with a list of suggestions regarding aesthetic improvements.
5. It should provide a continuous index of the overall performance of the department.

The following pages provide a step by step procedure for carrying out the quality control program.

Asst. Executive
Housekeeper

1. Initial Inspection.

- A. Each week determine areas to be inspected from inspection chart.
- B. Complete one inspection form for each area sometime during that week.
 - 1. Cross the check on the chart when the area has been inspected, and give the sheets to the housekeeping secretary.

Housekeeping
Secretary

C. Quality Evaluation-Weekly.

- 1. Total the number of satisfactory and unsatisfactory ratings on each sheet, broken down into cleanliness, order, and condition.
- 2. Add up the totals from all of the sheets for that week.
- 3. Determine percent satisfactory for cleanliness and order.
 - a. This is accomplished by taking the ratio:
$$\frac{\text{TOTAL SATISFACTORY}}{\text{TOTAL SATISFACTORY AND TOTAL UNSATISFACTORY}}$$
- 4. Determine overall department quality rating for the week.
 - a. O.D.Q.R. (.9x % cleanliness) +) .1 X % order).

II. Maintenance.

Housekeeping
Secretary

- A. Daily make out work orders for all items marked M on that days inspection sheet.

Then these orders are to be sent to Mr. Webb for signature.

Housekeeping
Secretary

- B. After all work orders are made out for the week and the quality evaluation has been completed, file that weeks inspection forms in a folder labeled:

Re-inspect on _____. The date to be filled in blank is three weeks from the date the inspections began. (e.g. for inspection conducted the week of 7/4/66, the folder will be dated 7/25/66.

Ass't. Executive
Housekeeper

- C. On the specified date, the housekeeping personnel, who conducted the initial inspection are to re-inspect the Maintenance items only, using the original inspection sheets.

1. If the work has been completed, cross the item off of the sheet, if it has not been completed, circle the item.

2. After re-inspection, return sheets to the housekeeping secretary.

Housekeeping
Secretary

D. Evaluation of Maintenance Performance.

1. Upon completion of all re-inspection for the week, send the forms to Mr. Webb's secretary.

2. Compile a list of all not completed (circled items).

a. One copy to maintenance, one copy to Mr. Webb.

3. Compute performance percentage.

a. Take the ratio's $\frac{\text{NUMBER COMPLETED}}{\text{NUMBER COMPLETED AND NC. NOT COMPLETED.}}$

4. Maintain graph of percentages.

Ass't Administrator's
Secretary

Ass't Administrator

5. Send a weekly report to Mr. Penn including:
 - 1) the list of uncompleted jobs, 2) the performance percentage, 3) comments on 1 and 2.

III. Housekeeping Utilization of Program.

Housekeeping
Secretary

A. Rating Chart.

1. Each week, post the previous weeks overall department quality rating on a chart hung in the housekeeping office.

a. Send a copy of this to Mr. Webb.

Housekeeping
Supervisor

B. Supervisor Guidance

1. Every week, each direct supervisor should review the inspections conducted in his or her area to determine the type of deficiencies noted in that area.

a. A check sheet should be maintained to see that supervisors actually are reviewing the sheets.

Executive
Housekeeper

C. Employee evaluation

1. When the inspection sheets have been returned from Mr. Webb's office, file them in the employee personnel folders.

2. Periodically review each employee's sheets to determine items which are consistently unsatisfactory.

a. Call these items to the attention of the employee's direct supervisor.

Housekeeping
Secretary

3. Periodic Personnel Review

- 1) Look at trend of individuals percentages.
- 2) Compare with overall department performance

SECTION VII

This section outlines basic training procedures for maids and porters. In addition, special training may be necessary for certain jobs, such as operating the large floor machine.

In-as-much as the techniques and materials used in any activity will determine the quality of the results, the importance of allowing at least two days for initial training of all employees, cannot be overemphasized.

It is strongly recommended that monthly group sessions be held to instruct employees in the use of new techniques and materials/or to review procedures, which the supervisors feel need further coverage.

MAID-INITIAL TRAINING

The first two days on the job, new maids should be placed under the Assistant Executive Housekeeper for training as outlined in I through III below.

I. ORIENTATION:

- a. Purpose of Housekeeping and Job Description.
- b. Standards of Conduct.
- c. Personnel Policies and Personal Problems.
- d. Procedures on Injuries and Illness while on the job.
- e. Supervisor to whom responsible.
- f. Work schedules.

II. FACILITY FAMILIARIZATION:

- a. Tour of Facility.
- b. Provide Locker, Uniform and shower Locker Room
- c. Cafeteria and meals.

III. WING ROUTINE:

- a. Assign to House Supervisor.
- b. Familiarize with work procedures, equipment, cleaning agents, storage, supplies and work area.
- c. Assign with wing maid.
 1. Explain wing routine.
 2. Work with wing maid.
- d. Assign task without wing maid.

Then a maid is assigned to checkout position, approximately two days should be allotted for the training outlined in IV and V, below:

IV. CHECK OUT MANAGEMENT:

- a. Assign with a lead checkout maid.
- b. Familiarize with work procedures, equipment, cleaning agents, storage and supplies.
- c. Explain check-out routine (Bed 1, Bed 2, Private, etc.)

- d. Assign a checkout on floor with a qualified checkout maid (to be called upon for advice and assistance if necessary).
- e. Assign an independent job.

V. ISOLATION MANAGEMENT:

- a. Assign to isolation maid.
- b. Show procedures of gowning, masking, placement of isolation cart and contaminated items. Explain that maid will remain in room until cleaning is completed.
- c. Have maid gown, mask, place isolation cart and place red bags by self.
- d. Familiarize with types of equipment, cleaning and disinfecting agents and their use.
- e. Allow her to perform tasks (wall washing, bed washing, etc.) use equipment, and assist isolation maid.

PORTER-INITIAL TRAINING

I. Orientation

- a. Purpose of Housekeeping and Job Description.
- b. Standards of Conduct.
- c. Personnel Policies and Personal Problems.
- d. Procedures on Injuries and Illness While on the Job.
- e. Supervisor to whom responsible and department organization.
- f. Work schedules.

Discussion - 1 hour Housekeeper or Assistant Housekeeper.

II. Facility Familiarization

- a. Tour of Facility.
- b. Provide Locker, Uniform and Show locker room.
- c. Cafeteria and Meals

Discussion - 1 hour Housekeeper or Assistant Housekeeper.

III. Area Routine

- a. Assign to House Supervisor.
- b. Familiarize with work procedures, equipment, cleaning agent, storage, supplies and work area. Provide required work tools.
- c. Demonstrate use of dust mop.
- d. Allow Trainee to use dust mop, observe his performance and correct where necessary.
- e. Instruct in preparation of germicidal solution for mopping.
- f. Demonstrate use of wet mop.
- g. Allow trainee to wet mop, observe his performance and correct where necessary.
- h. Demonstrate use of Buffing Machine.
- i. Allow trainee to use buffing machine, observe his operation and correct where necessary.

III. Area Routine Continued:

- j. Show different types of polishing pads, explain their use and demonstrate.
- k. Allow trainee to use buffing pad and observe his operation and correct where necessary.

Discussion - Demonstration - Work - 10 hours House Supervisor

IV. Reconditioning

- a. Assign to reconditioning Supervisor.
- b. Familiarize with work procedures, equipment, cleaning agents, sealing agents, waxing agents, storage, supplies. Provide required work tools.
- c. Demonstrate stripping/scrubbing procedures.
- d. Demonstrate rinsing procedures.
- e. Allow trainee to strip/scrub and rinse floors, observe his performance and correct where necessary.
- f. Demonstrate application of sealing compound.
- g. Allow trainee to apply sealing compound, observe his method and correct where necessary.
- h. Demonstrate application of finishing compound.
- i. Allow trainee to apply finishing compound, observe his operation and correct where necessary.
- j. Show buffing procedure on finishing compounds that requires buffing to attain gloss.

V. Inside Trash Disposal

- a. Familiarize with trash route and routine.
- b. Provide plastic trash bags and show where they can be obtained.
- c. Demonstrate how plastic trash bags are used.
- d. Instruct in how to dispose of contaminated trash (red bags)