PERFORMANCE WORK STATEMENT (PWS)
JANITORIAL SERVICES

Section 1: General Information

1.1 General: This is a non-personal services contract to provide janitorial services for the W. G. "Bill" Hefner (Salisbury) VAMC. The Government shall not exercise any supervision or control over the contract service providers performing the services herein. Such contract service providers shall be accountable solely to the Contractor who, in turn is responsible to the Government. Agencies shall train their employees in appropriate cleaning and disinfection procedures following Centers for Disease Control and Prevention (CDC) Guidance and comply with local direction from SVAMC Infection Prevention and Control Officials.
1.2 Period of Performance: Base plus 2 years

1.3 Place of Performance: W.G. "Bill" Hefner VAMC, 1601 Brenner Ave, Salisbury, NC 28144

1.4 Hours of Operation: Hours of operation should mirror the Environmental Service hours 1st shift 7AM-3:30PM, 2nd shift 3PM-11:30PM, and 3rd shift 10:30pm-7AM.

1.5 Work Schedule: Prior to commencing performance under this contract, the Contractor shall provide a proposed work scheduled to the COR describing how services will be accomplished. All work shall be coordinated with the COR or designated representative when accomplished during normal business hours to avoid/disruptions or conflicts between the Government functions and the provision of service under this contract. The facility POC will communicate with the designated Contracting Officer Representative (COR) services and completion of those services to validate work was accomplished as required. The contractor shall maintain a Certified Healthcare Service Technician (CHEST) supervisor on site for 2nd & 3rd shifts that can be contacted by phone, with a response time of 1 hour for emergent situations and will be able to manage and take action independently of other CHESTs. If CHEST certifications expire for any of these positions, the contractor must recertify the individual as CHEST within 45 days of the lapse. The contractor shall maintain a Certified Healthcare Environmental Service Professional (CHESP) and a minimum of 1 Full Time Equivalent (FTE) 1st Shift Housekeeper to provide 1st shift coverage to the endoscopy (ENDO) unit, work orders, floods, and other tasks needs for buildings in contractors responsible areas. The contractor shall be responsible for providing a minimum of 15 Full Time Equivalent (FTE) 2nd Shift Housekeepers, 1 FTE 2nd Shift Working Supervisor for the cleaning of the designated areas of this contract requirement. The contractor shall be responsible for providing a minimum of 6 Full Time Equivalent (FTE) 3rd Shift Housekeepers, 4 Full Time Equivalent Floor Tech, 1 FTE Working Floor Tech Team Leader, and 1 FTE 3rd Shift Working Supervisor for the cleaning and floor maintenance of the designated areas of this contract requirement. If the contractor cannot provide the required FTE to ensure compliance with this PWS at any time during execution, then the contractor shall notify the COR immediately and provide a "get well" plan. The get-well plan will be less than 60 days in duration and at the date specified or before the specified date the contractor must be within compliance. The "get well" plan shall document the corrective action being taken by the contractor and a timeline as to when the contractor will resume 100% compliance of the PWS. If the contractor cannot obtain compliance within 60 days of the failure to maintain the minimum required FTEs, the contractor will be considered to be in breach of contract. If there is more than one instance of failure to comply with the minimum FTE requirements within 120 consecutive days, the contractor is to be considered in breach of contract.

1.6 Building: The square footage is approximately 283,285 square feet of administrative and non-clinical work areas across several buildings and building corridors/ underground walkways. The square footage is approximately 94,271 square feet of patient care and clinical work areas across three buildings. This is a combined square footage of approximately 377,556 square feet. A breakdown of the approximate square footage to be included in this requirement is referenced below.

Bldg. #	Function Title	# Flrs	GSF	Admin SF	Patient Care SF	Comments
1	Administrative	3	26,888	26,888		
4	Psychiatry	5	108,081	87,545		GF, 1F, 2F, 3F
6	Recreation	2	83,230	75,365		
6	Recreation	2	83,230		7,865	Occupational Health (2,637), Canteen (5,228)
7	PM&RS	1	24,784	15,103		
7	PM&RS	1	24,784		9,681	Core Clinic (8,185) Fitness Center (1,496)
8	Mental Health Inpatient	4	79,000	4,000		Lobby Only (4,000 SF)
11A	Rural Health Modular	1	3,850	3,850		
11B	EEO Modular	1	3,850	3,850		
11C	Telephone Call Center Modular	1	3,850	3,850		
12	Police and Security	2	4,875	4,875		

14W	Police and Security	2	3,553	3,553		
15	Admin/ Tenant	2	6,559	6,559		
19	Chapel	1	4,907	4,907		
21	Medical/ Admin	3	109,865	33,140		GF (33,140)
21	Medical/ Admin	3	109,865		76,725	1F (38,362), 2F (38,362)
21A	Fee Basis Modular	1	4,900	4,900		
21B	Engineering Admin Bldg.	1	4,900	4,900		
659 Salisbury Building Totals			**GSF 377,556**	**Administrative 283,285**		**Patient Care 94,271**

Floor Care Square Footage

Bldg. # / Floor	Hard Finish Floors GSF	Non-Finish Floors GSF	Carpet GSF
1	600	1,700	16,000
2-1	22,000	0	0
2-2	13,800	0	0
4	6,000	40,000	30,000
6	4,800	35,000	8,500
7	3,500	12,000	3,400
11A	3,400	0	0

11B	3,400	0	0
11C	400	3,000	0
15		3,000	1,600
19	500	0	3,200
21A	4,400	0	0
21B	350	0	3,900
21	24,500	39,000	10,100
42-G	12,500	8,000	0
Tunnels	2,700	14,550	0
Totals	**102,850**	**156,250**	**68,200**

1.7 Type of Contract: The government will award a Firm Fixed Price contract.

1.8 Contract Changes: Additional cleaning required by changes in mission assignments must be documented by a written contract modification. If the contractor receives a request from VA personnel directing or requesting work that the contractor believes is not within the terms of the PWS or the contract, then the contractor must notify the Contracting Officer Representative (COR) and the Contracting Officer of the request. The only person that has the authority to modify the terms of the contract or request work for which compensation will be provided is the Contracting Officer.

1.9 Invoicing: All invoices from the contractor shall be submitted electronically in accordance with VAAR Clause 852.232-72 Electronic Submission of Payment Requests.

> VA's Electronic Invoice Presentment and Payment System – The FSC uses a third-party contractor, Tungsten, to transition vendors from paper to electronic invoice submission. Please go to this website: http://www.tungsten-network.com/US/en/veterans-affairs/ to begin submitting electronic invoices, free of charge.
>
> More information on the VA Financial Services Center is available at http://www.fsc.va.gov/einvoice.asp.

Section 2: Definitions & Acronyms

2.1 Definitions:

Aseptic Cleaning. Techniques and procedures used under sterile conditions. Aseptic cleaning is the effort taken to clean the interior of building and keep people free from hospital micro-organisms.

Centers for Disease Control & Prevention (CDC). The nation's health protection agency that publishes key health information, including weekly data on all deaths and diseases reported in the US and travelers' health advisories. The CDC also fields special rapid response teams to halt epidemic diseases.

Constant Policing. Contractor's staff shall continuously observe and provide for cleaning as the need arises, including clean-up of paper and any other debris, removing spills, vomit, spots and marks from walls, loading docks, walkways, floors, carpets and furniture, etc. Constant policing shall be provided as part of the overall cleaning necessary to ensure a continuously aseptically clean area.

Contractor. A supplier or vendor awarded a contract to provide specific supplies or service to the government. The term used in this contract refers to the prime.

Contracting Officer (CO). A person with the authority to enter into, administers, and/or terminates contracts and makes related findings. The Contracting Officer is the only individual who has the authority to contractually bind the Government. The Contracting Officer may designate a Government employee to act as his authorized technical representative.

Contracting Officer Representative (COR). The person has been designated as the authorized representative of the Contracting Officer acting within the limits of his/her authority. This individual shall not be authorized to award, agree to, or sign any contract or modification thereto, or in any way to obligate the payment of money by the Government. The COR advises the Contracting Officer on matters relating to this contract, verifies completion of the work, certifies invoices related to completed work, and ensures compliance with all provisions of the contract.

Corrective Action. Action taken by the Contractor to correct a deficiency and identify the cause(s) of the deficiency.

Custodial Cleaning. Providing an array of cleaning functions that are vital to the daily operation of the facility so as to present a clean facility.

Dwell Times. The amount of time that a sanitizer or disinfectant must be in contact with the surface and remain wet, in order to achieve the product's advertised kill rate.

Full Time Equivalent (FTE). Equivalent to one full-time worker working 40 hours per week.

High Touch Areas. Surfaces within patient rooms require more frequent cleaning and disinfection due to having frequent contact with hands. High touch surfaces can be found on the CDC Environmental checklist for monitoring terminal cleaning.

Joint Commission (JC). A national organization dedicated to improving the care, safety, and treatment of patients in health care facilities, and publishers of the Joint Commission on Accreditation Manuals.

Point of Contact (POC). An identified individual with subject matter expertise (SME) of VHA EMS proper cleaning procedures.

Protection. This is preventing damage to surfaces and equipment caused by normal use or improper cleaning procedures.

Quiet Zone. Means normally a noise level of less than 72.B (A) at five feet from the source in patient-occupied areas.

Soil. Dust, dirt, stains, grease, smudges, streaks, spots, lint, odors, organisms, vomits, or any agents that is injurious to health. Soil can be visible such as dust, or can be invisible such as organisms, and odors. Soil can be removed chemically, mechanically, or by a combination of both. Mechanical soil removal is removing soil with a liquid that contains cleaning agents, such as detergents, disinfectants, sanitizers and sterilizers. The combination of chemical and mechanical methods such as an automatic floor scrubbing machine uses the chemical method to break down and loosen the soil while the mechanical method picks up and carries the soil away. Which soil removal method is used depends on the cleaning objectives and on the size, location and type of surface to be cleaned.

Subcontractor. One that enters into a contract with a prime contractor. The Government does not have privity of contract with the subcontractor.

Three-Step Terminal Cleaning.

Step One. Cleaning is the necessary first step of any disinfection process. Cleaning removes organic matter, salts, and visible soils, all of which interfere with microbial inactivation. The physical action of scrubbing with detergents and surfactants and rinsing with water removes substantial numbers of microorganisms. If a surface is not cleaned first, the success of the disinfection process can be compromised. Removal of all visible blood and inorganic and organic matter can be as critical as the germicidal activity of the disinfecting agent. When a surface cannot be cleaned adequately, it should be protected with barriers.

Step Two. Disinfection destroys most pathogenic and other microorganisms by physical or chemical means.

Step-Three. Ultra-Violet (UV) Disinfection is the third step of a terminal cleaning process. During this step, the UV disinfection destroys 99.99% of pathogenic and other microorganisms, thus preventing the spread of viral and bacterial pathogenic infections.

Work Day. The number of hours per day the Contractor provides services in accordance with the contract.

2.2 Acronyms:

AHE	Association for the Healthcare Environment
CBI	Compliance and Business Integrity
CHESP	Certified Healthcare Environmental Professional
CHEST	Certified Healthcare Environmental Service Technician
COR	Contracting Officer Representative
EPA	Environmental Protection Agency
FTE	Full Time Equivalent
ID	Identification
IT	Information Technology
JC	Joint Commission
OSHA	Occupational Safety and Health Agency
PWS	Performance Work Statement
QASP	Quality Assurance Surveillance Plan
VAMC	Veterans Affairs Medical Center

Section 3: Government Furnished Property, Equipment, and Services

Government will issue to the Contractor only required Facility Keys or Security Access FOBs, as needed to perform janitorial services as determined by Medical Center Leadership, Patient Care and Non-Patient Care Services. The government will provide an area with a desk for administration duties and a storage room for equipment. The government will provide all chemicals, paper products, trash bags, batteries, soap, hand sanitizer, toilet seat covers, facial tissues, masks, umbrella bags, gloves, personal protective equipment (PPE), microfiber mop pads, microfiber dust mop pads, microfiber cleaning cloths.

Section 4: Contractor Furnished Items and Services

The Contractor shall provide all management, supervision, personnel, and transportation except as specified herein as government-furnished, necessary to assure that all services are in accordance with the contract and all applicable laws and regulations. The contractor shall ensure all work meets performance standards specified in this Performance Work Statement (PWS) and referenced documents.

The Contractor will be responsible to ensure all hand hygiene stations are regularly stocked, monitored, and promptly refilled as used by veterans and visitors. The hand hygiene stations are typically located in common areas such as lobbies, by elevators, building entrances, hallways and waiting rooms, but are not limited to those locations. These stations typically contain hand sanitizer wall style dispensers, that must have batteries replaced periodically, and the hand sanitizer product refill replaced when either the dispenser's hand sanitizer product is empty or expired. The stations have patient masks and facial tissue paper products for veteran and visitor's use. All items stocked in the hand hygiene stations, located in the Contractor's area of responsibility, will be regularly stocked, monitored, and promptly refilled by the Contractor as these supplies are used by veterans and visitors.

The Contractor will be responsible to perform specialty janitorial services in the Contractor's area of cleaning responsibility upon request. Specialty janitorial services can consist of, but are not limited to: Bulk Trash Removal, Carpet Shampooing, Carpet Extraction/Carpet Deep Cleaning, Water Removal Due to Flooding/Rain or Water Leaks, Large Area Detail/Power Cleaning, Strip/Wax Compatible Tile Floors, Three-Step Cleaning, Terminal Cleaning, UV Disinfection.

The Contractor shall provide all equipment, management, supervision, personnel, and transportation except as specified herein as government-furnished, necessary to assure that all services are in accordance with the contract and all applicable laws and regulations. The contractor shall ensure all work meets performance standards specified in this Performance Work Statement (PWS) and referenced documents. The contractor will provide its own specialty equipment such as Riding Auto Floor Scrubbers, Walk-Behind Auto Floor Scrubbers, Small Mobile/Tight Turn Floor Scrubbers, Upright Vacuums, Industrial Wet/Dry Vacuums, Carpet Shampooers, Carpet Extractors, Floor Buffers, Floor Burnishers, Floor Blowers and other special equipment as required to perform required janitorial tasks within the Contractors assigned area of cleaning responsibility and to fulfill all PWS requirements.

Contractor Supplies/ Equipment

Broom	Dustpan
Plastic Pail	Toilet Bowl Brush
Microfiber Water Bucket	Microfiber Mop Handle with Head
Microfiber Dust Mop Handle with Head	Putty Knife
Scouring Pad	Spray Bottles for Chemicals
Corner Brush	Protective Eye Wear
Floor Scrubbing Machines (Riding/Walk behind)	Upright Vacuums, Backpack Vacuums, Wet/Dry Vacuums

Carpet Cleaning Machines (Shampoo/Extraction)	4 Footstep Ladder
Floor Blower	Securable Housekeeps Carts
Floor Wax	Floor Stripper
Buffing, Scrubbing, Stripping Pads for floor equipment	Mop Buckets for stripping and waxing
Other equipment and supplies required to accomplish tasks	

Section 5: Specific Tasks

Standards: Aseptic areas apply to the Canteen, kitchen, dining, and restrooms. Custodial standards apply to the common areas, excluding the dining area, and the rooms. There may some cases where a room requires a "terminal cleaning" in the case of a sick patient or otherwise. Upon request from VA staff, the contractor shall perform a terminal cleaning to affected areas.

5.1 **Tasks and Cleaning Standards**

Standards of Cleanliness

Ensure you wear proper PPE when required.

1. **CEILINGS**

a) Tiles are free of dust and cobwebs
b) Vents are free of surface soil and free of dust and lint
c) Lights are free of dust, stains, bugs, and debris
d) Mirrors are free of dust, surface soil, smudges, fingerprints and are streak free
e) Overhead exam lights/surgical lights are clean and free of dust, lint, debris, surface soil, or residue

Condition: Report all missing or damaged tiles, lights, mirrors and vents

2. **WALLS**

a) Clean and free of dust, stains, lint, surface soil and cobwebs
b) Cove bases (baseboards) clean of surface soil, no buildup of floor finish, free from dust and cobwebs and no accumulation of soil on the corners.
c) Picture frames are free of soil, dust, and cobwebs. Glass is clean and streak free.
d) Fixtures such as light switches, doorstops, emergency pull cords, recessed night lights, coat racks, signs, fire alarms, telephones, etc. are clean of surface soil and free of dust and cobwebs.

e) Partitions in restrooms are clean and free of surface soil, stains, streaks, spots, dust and lint
f) Cubicle walls are clean and free of soil, dust lint and stains
g) Dispensers of all types are clean and free of surface soil, dirt, dust, debris, spots and buildup of any kind inside and out.
h) Mirrors are free of dust, surface soil, smudges, fingerprints and are streak free
i) Handrails (all) are clean and free from surface soil, spots, and dust.
j) Heaters / wall vents are clean and free of surface soil, dust, dirt, debris, and spots.
k) Chalk boards, dry erase boards, display cabinets and cork boards are clean and free from dust and debris, glass is clean and free from fingerprints and streaks. Condition: Report leaks, damaged walls or fixtures, or missing items

3. **FLOORS**

a) Clean and free from surface soil, debris, dust, and stains. No floor finish buildup or accumulation of soil in corners, free of discolored floor finish and have a high luster (except in areas that require low gloss floors due to safety concerns for Veterans), free of scuff marks and scratches.
b) Fall pads are clean on both sides from soil build up, stains, dust, and debris
c) Carpets and runners are clean and free of surface soil, debris, dust, and stains
Condition: Report loose or missing tiles.

4. **DOORS**

a) Clean and free of marks, kick plate is clean and shiny, top is free of dust and lint, edges are clean, handle or knob is clean, hinges are clean and free of dust, door frame is clean, door vent is clean and free of dust and lint, window frame is clean and free of dust, window is clean and streak free inside and out. Condition: Report broken, damaged, or non-functioning doors

5. **WINDOWS** (inside of buildings)

a) Clear and clean of surface soil, free of dust and lint, free of streaks smudges and fingerprints
b) Windowsills are clean and free from dust, debris, stains, spots, and surface soil
c) Curtains, drapes and blinds are clean of surface soil, dust, debris and foul odors. Pulleys and pull cords are clean and free of soilCondition: Report broken. cracked or damaged windows and or frames and sills

6. **CUBICLE PRIVACY and SHOWER CURTAINS**

a) Clean and free of surface soil, dust, lint, stains

Condition: Curtains are the proper length, there are no missing hooks, are not torn. and are easily drawn along the curtain rod.

b) Follow SOP for curtain procedures when changing or replacing.

Schedule of Cleaning

Procedure:

The following is the ***minimum*** schedule of cleaning frequency:

1. Floors are vacuumed, or dust-mopped and wet-mopped daily in-patient care areas and once a week in administration areas.

2. Wastebaskets are cleaned as needed. Waste disposal receptacles are emptied and re-lined twice a day as necessary in acute care areas. Waste receptacles in clinical areas and non-patient care areas are emptied daily. Filled trash liners are tied close, placed in a collection cart and transported to the waste disposal site. ***Never* use hands or feet to compress waste in receptacles.**

3. Regulated Medical Waste (RMW) containers with a red liner are placed in each ward's soiled utility room and other secured areas as appropriate, they are to be covered and collected daily.

4. Bathrooms, showers, utility rooms, toilets, urinals, sinks, mirrors, bathtubs and shower stalls are cleaned daily. Paper towel dispensers, toilet paper and soap dispensers are cleaned and checked daily and refilled as needed. Doors and doorframes are cleaned weekly and as needed. Shower curtains are cleaned quarterly and as needed when soiled.

5. Furniture, windowsills, ledges, radiators, fire extinguishers, external light fixtures, cubicle curtain tracks, mini-blinds, vents, light covers, and horizontal surfaces are cleaned weekly by dusting with a vacuum cleaner or micro-fiber cloth.

6. Furniture in patient rooms is washed with an EPA-approved hospital-grade germicide/ disinfectant solution as part of the patient discharge procedure, weekly and as needed.

7. Handrails in corridors are cleaned with an EPA-approved hospital-grade germicide/ disinfectant solution weekly and as needed.

8. Horizontal surfaces including counter tops, over-bed tables, bedside tables and bed rails are cleaned.

9. Rolling stock and Non-Critical Reusable Medical Equipment (RME) (wheelchairs, IV poles, etc.) is cleaned after each use.

10. Drinking fountains are cleaned daily and as needed. The exterior and drain tray of ice machines are cleaned daily.

11. Patient beds are cleaned upon discharge or transfer. Ambulatory Care exam tables and hemodialysis treatment chairs are cleaned daily and as needed.

12. Long-term care beds are cleaned weekly when Nursing Service notifies EMS that the patient is out of bed.

13. Privacy curtains are changed quarterly, after every isolation and as needed. Draperies and blinds are washed as needed. Damaged curtains or draperies are repaired or replaced.

14. Walls and ceilings are cleaned as needed, i.e., when visibly soiled.

15. Ceiling Tiles showing visible signs of mold, stains, cracks or holes are to be identified and reported in Maximo with a service request.

16. Isolation rooms are cleaned daily according to the protocol.

17. Fans, vents and lights are cleaned as needed.

18. Sharps/Needle disposal boxes are monitored daily and changed as needed by Housekeeping Aids. When boxes are ¾ full, they are securely sealed and disposed of as RMW. **(REFER TO THE FILL LINE ON THE UPPER PORTION OF THE SHARPS CONTAINER).**

The following table summarizes the tasks required under this PWS.

Tasks	**Frequency**
1. Empty waste cans and reline	Daily
2. Place furniture in proper locations	Daily
3. Spot clean/wash interior windows and door glass	Daily
4. Dust mop/wet mop all tile floors	Daily
5. Clean patient restrooms mid-day	Daily
6. Clean public restrooms	Daily
6. Check and refill all paper towel, toilet paper, and soap dispensers	Daily
7. Clean and organize all housekeeping closets	Daily
8. Clean/sanitize all bathrooms utilizing a germicidal disinfectant	Daily
9. Buff all tile floors	Quarterly /as needed
10. Dust all horizontal and vertical surfaces	Daily

11. Spot clean furniture	As needed
12. Spot clean waste cans	Daily / as needed
13. Empty Recycling Containers	As needed
14. Wash walls and doors	Quarterly / as needed
15. Vacuum carpets, entrance mats, and runners	Daily
16. Polish all stainless steel	Weekly
17. Cover all bed discharges which includes cleaning and remaking beds	As requested
18. Staging and storage of both clean and soiled linen, which includes washing of bed sheets	As needed
19. Strip and refinish all tile floors	Yearly / as needed
20. Shampoo/extract carpets utilizing soil retardant	Quarterly / as needed
21. Interior of windows and doors	Weekly / spot clean as needed
22. Hard surfaces	Daily/ as needed
23. Change curtains	Quarterly / as needed
24. Unoccupied room cleaning	Weekly
25. Scrub Tunnels with Scrubber	Daily

1. Carpet Maintenance: Vacuum all carpeted areas in the corridors, elevators, offices, group rooms and public areas. Furniture shall be moved for thorough cleaning and replace the furniture after cleaning. Spot cleaning as required so that the carpet presents a uniform and clean appearance, free of spots and stains. The Contractor shall report any tears, burns and raveling to the attention of the COR or designated representative.

   a) Light Shampoo to protect carpet with soil-repellent and/or static free application of treatment as required.

b) Deep Steam Clean by using "steam" or other residue-free cleaning product. The carpet shall be dried to the touch upon completion.

2. Door and Doorjambs: Perform spot cleaning by damp-wiping and polishing unpainted metal doors, washable surfaces of walls, partitions, doors and fixtures, and handrails. Sanitize as needed.

3. Ducts, Light Fixtures, Vents and Louvers: These areas are to be cleaned and vacuumed. The ducts shall be cleaned as needed.

4. Elevators: The Contractor shall clean all interior surfaces, including doors, metal thresholds, tracks, fans. Spot-clean walls. Remove soil stains and debris from light covers.

5. Entrance Area: Sweep entrance area, clean the walk-off mats, hose off as required, and remove standing water. The Contractor shall damp-mop the entrance and lobby floors during inclement weather. Trash containers located inside of entrances shall be emptied.

6. Floor maintenance (non-carpeted):

   a) The Contractor shall strip wax, finish and buff using non-slip floor finish. The Contractor shall "turn back the rugs" in order to clean and finish the floor areas at least one feet underneath the rugs. The stripping of wax, finish and buffing shall be performed once per year at each facility. The entire facility shall be waxed, finished and buffed once per year. The scheduling of this task will be coordinated between the Contractor CHESP, COR and staff occupying building to ensure there is no disruption to staff and visitors.

   b) Individual rooms and/or a designated area requiring the stripping of wax, refinishing and rebuffing, shall occur no more than once per week. The area or the room requiring the service will be identified by COR or designated representative to the Contractor's CHESP.

   c) The Contractor shall wet-mop and use a scrub using germicidal type detergent to sanitize all accessible areas including corners and abutments. The Contractor shall remove any splash marks or mop streaks on furniture, walls, baseboards, etc., or mop strands remaining in the area. The Contractor shall not mop wood or carpeted floors. The Contractor shall change water in mop bucket in between room cleanings.

   d) The Contractor shall sweep, dust, and damp mop hard-surfaces, resilient flooring to include normal traffic areas, group rooms, and restrooms. The floors shall be swept, dusted and damp mop using a treated or dust- free method/mop. The Contractor shall ensure that the cleaning includes the corners and abutments. The Contractor shall tilt or move chairs, trash receptacles, and other easily movable items so as to clean underneath and shall return items to their proper position.

e) The Contractor shall spray and buff all floors accessible to floor machine unless specified elsewhere as having carpet or special flooring. The Contractor shall apply a uniform coating of non-skid floor finish to protect and restore gloss or sheen. The Contractor shall remove excess floor finish solutions. The Contractor shall apply these techniques only to the portion of the floor needing work, to bring the entire floor up to standard.

f) The contractor shall scrub all hard finished floors at a minimum of two times per week. All hallways and tunnels shall be scrubbed one time per day or as needed.

7. Furniture and Flat Surface Cleaning: (Low Dusting refers to areas 36" and below) The Contractor shall dust all uncluttered horizontal surfaces within reach with a treated dust cloth (i.e., desks, counters, file cabinets, ledges, bookcases, tables, credenzas, windowsills, etc.). The Contractor shall dust vertical surfaces and underneath desks in such a manner as to prevent airborne dust.

   a) The Contractor shall dust furniture items such as chairs, file cabinets and other types of office furniture. The Contractor shall damp-dust other office furniture such as vinyl chairs, lamps, telephones, furniture bases, armrests and picture frames. The Contractor shall not dust typewriters, computers, business machines and equipment of similar nature. The Contractor shall clean surfaces, so they are free of dust, surface debris, stains, shoe prints, surface soil, cobwebs and lint.

   b) Furniture and Flat Surfaces Cleaning, High dusting includes all the wall surfaces, door frames, shelves, equipment, windowsills, ledges, handrails, etc.

8. Furniture: The Contractor shall vacuum upholstered furniture; clean behind furniture and corners, in particular. Move items as necessary to ensure thorough and adequate cleaning; replace to original position. Condition: No stains, cracks, rips or broken parts

   a) The Contractor shall spot clean upholstered furniture as required.

   b) The Contractor shall steam clean or deep-clean upholstered furniture as required.

9. Doors (Entrance areas): The Contractor shall clean all glass partitions, interior glass doors, display cases, directory boards, and draft shields on windows, mirrors and adjacent trim.

10. Stairwells: The Contractor shall sweep, dust and damp mop as needed. Lamps, vents, ceiling and wall areas shall be free of cobwebs, dust, debris and insects.

11. Walls: Spot/Clean/Wash. The Contractor shall spot-clean wall surfaces to remove cobwebs, fingerprints, smudges. The Contractor shall sanitize the walls as needed.

12. Venetian Blinds: The Contractor shall vacuum and damp clean all blinds to remove surface dust, vacuum drapes in place.

13. Window Cleaning Interior: The Contractor shall wash all windows on interior surfaces, damp-wipe window sashes/sills. The contractor is not responsible for the highest interior windows.

14. Window Cleaning Exterior: The Contractor shall wash exterior surfaces, damp-wipe window sashes/sills. The contractor shall be responsible for the exterior windows on the entrance only and first the first-floor level. To maintain clean appearance, the exterior windows and glass entrance doors shall be cleaned daily and spot cleaned as necessary.

15. Laundry Service: The contractor shall collect all soiled linen daily and place in designated soiled linen storage until items are picked up by laundry service contractor. The contractor shall place linen received in clean linen storage on shelf until items are needed. The contractor shall maintain inventory of linen items listed above; all linen items that are unserviceable must be returned to facility designated linen officer. Replacement or the need for additional linen shall be communicated by contractor to VA Linen Department Manager.

16. Beds / Exam Tables Cots: Both sides of the headboard and footboard are clean and free of surface soil, dust, lint, cobwebs, and stains. The entire bed frame, including the handrails and wheels, are clean and free of surface soil, dust, lint, and stains Both sides of the mattress are clean and free of stains, surface soil, dust, debris, and foul odors. Both sides of the EvacuSled are clean and free of stains, surface soil, dust, debris, and foul odors. Condition: No cracks or damage to the frame. mattress. pillow or mechanics. Report all damage

17. Tray Tables/ Bedside Tables: The top, bottom, sides, and frame are clean and free of surface soil, dust, debris, and stains. Drawers are clean and free of dust, debris, lint, cobwebs and surface soil inside and outside. Mirror is clean and free of streaks and fingerprints. Condition: Fully functional with no broken or damaged parts

18. Dining room, kitchen, canteen, and break areas: The contractor shall clean dining room, kitchen, and break areas daily; trash is to be removed as needed. All tables and counter tops are to be wiped down daily and as needed throughout day. All kitchen appliances, refrigerators, microwave oven, conventional oven, dishwasher, etc. are to be cleaned daily and as needed. The canteen floor shall be scrubbed daily with degreaser. The dining room shall be scrubbed two times per week.

VCS Cleaning Frequency

VCS Cafeteria/Dining Room		
Tasks	**Frequency**	**Task To Be Accomplished**
Walls	As Needed	Dust/Spot clean

Walls	Quarterly	Wipe visible surfaces
Walls	Bi-Annually	Clean behind stationary equipment, VCS staff will move equipment/facilities/art on wall so walls can be wiped clean
Floor/Baseboards	After Closing/Daily	Sweep/mop floors, run scrubber and around equipment clean baseboards, corners and edges following facility procedure
Light Fixtures, Ceiling/Wall Vents	Weekly/As Needed	Dust/Clean exterior
Ceiling Straps	As Needed	Dust/Clean
Windowsills/Ledges	Daily	Dust/Clean
Windows/Doors	Weekly/As needed	Clean/Wipe with glass cleaner
Beverage Counter/Serving Line	Monthly/As Needed	Clean underneath
Salad/Soup Bar	Monthly/As Needed	Clean underneath
Refrigerators	Monthly/As Needed	Clean behind/Underneath
Trash Removal	As Needed	Remove trash during lunch, remove trash after closing and clean exterior and interior of the trash cabinet
Microwave/Condiment Stands	After Closing	Clean exterior
Tables/Chairs/Stands	Daily	
Food Preparation Areas		
Floors/Baseboards	After Closing/Daily	Sweep/mop, run scrubber and clean baseboards, corners, and edges. Floors shall be cleaned with degreaser

Walls	As Needed	Dust/Spot clean
Walls	Quarterly	Wipe/Clean behind equipment with degreaser (VCS staff will move all equipment)
Cardboard Removal	As Needed	Break down boxes and put them in cardboard dumpster
Retail Store/Storage Areas		
Walls	Daily	Dust/Clean
Walls	Quarterly/As needed	Clean behind/underneath stationary equipment
Floor/Baseboards	Daily	Sweep/mop floors, run scrubber and around equipment clean baseboards, corners and edges following facility procedure
Doors	Weekly	Clean/Wipe with glass cleaner
Light Fixtures, Ceiling/Wall Vents	Weekly/As needed	Dust/Clean exterior
Trash Removal	Daily	Remove trash
Cardboard Removal	As Needed	Break down boxes and put them in cardboard dumpster

19. Information Technology (IT) Closets: The Contractor shall coordinate with the VA IT staff to gain access to these secured areas in order to sweep and dust mop floors monthly. The Contractor shall not use any type of liquids, vacuums or duster in these closets. The Contractor shall not unplug any IT equipment unless performed by IT staff. To maintain the proper air temperatures in the IT rooms, the entry doors shall not be left open.

20. Ceilings: The Contractor shall dust and remove cobwebs from the ceilings, vents and light fixtures.

21. Unoccupied Rooms: Cleaning of unoccupied rooms should be performed weekly to remove dust from all surfaces, the restroom should be cleaned and the commode flushed to prevent hard water deposits.

22. Miscellaneous

    a) Contractor's Storage Room: The Contractor shall store equipment and supplies in a Government-provided storage room. The Contractor shall maintain the storage room and used only as authorized. The Contractor shall not store food in the room. This storage room shall be clean and odor free at all times.

    b) Water Fountains: The Contractor shall empty, rinse and sanitize drinking fountains, water coolers, the hot/cold water dispensers with a germicidal type of detergent. The Contractor shall re-stock those water coolers with cups.

    c) Polish Metal. The Contractor shall polish the brass and other metal, aluminum, stainless steel hardware on doors, push bars, and the kicking plates.

    d) Loading Dock. The Contractor shall sweep and hose off loading dock area as needed.

23. Restrooms

    a) The Contractor shall clean and sanitize sinks, urinals, and toilets.

    b) The floor traps shall be maintained free from odor at all times.

    c) The Contractor shall sweep and wet mop the floors daily and spray buff as required. The Contractor shall apply a uniform coating of non-skid floor finish. The Contractor shall remove any excess floor finish solutions.

    d) The Contractor shall damp-wipe walls, doors, partitions, mirrors, shelving, and window frames and sills. The Contractor shall use an approved germicide/detergent in restrooms to disinfect all surfaces of partitions, stalls, faces of toilet bowls, urinals, lavatories, showers, dispensers, and other such surfaces.

    e) The Contractor shall damp-wipe and polishes the chrome fixtures.

    f) The Contractor shall clean (descale) toilet bowls and urinals.

    g) The Contractor shall furnish and replenish restroom supplies, for example: soap dispensers, paper towels and toilet tissue. The Contractor shall ensure sufficient supplies are provided.

    h) The Contractor shall empty, clean, disinfect, and re-line all sanitary napkin and all waste receptacles.

24. Waste

    a) Trash Removal: The Contractor shall pick up and empty all trash or waste receptacles, to include the vending machine/snack areas. The Contractor shall wash and damp-wipe all waste receptacles; re-line daily or as needed. The Contractor shall dispose of trash in plastic bags secured with bag ties.

    b) Litter Removal: The Contractor shall pick up and dispose of litter and trash from the entrances.

    c) 'Red Bag' Bio-hazardous: All receptacles lined with "Red Bags" (plastic bags containing bio-hazardous medical waste material) shall be serviced. The Contractor shall pick up the Red Bag waste and deposit it in specially designated, locked "infectious waste" bins or lockers, usually located at the rear of the facility, in a safe and timely manner, and in accordance with established standards and procedures. NOTE: Red Bags may not be used for any other purpose.

25. Supplies: All chemicals, paper products, trash bags, batteries, soap, hand sanitizer, toilet seat covers, facial tissues, masks, umbrella bags, gloves, personal protective equipment (PPE), microfiber mop pads, microfiber dust mop pads, microfiber cleaning cloths will be supplied by the government.

26. Privacy and Shower Curtains: Clean and free of surface soil, dust, lint and stains. Condition: Curtains are the proper length, there are no missing hooks, are not torn, and are easily drawn along the curtain track.

    a) Curtains will be changed quarterly or as needed. Follow guidance provided by SOP (Below).

PRIVACY AND SHOWER CURTAIN INSPECTION AND REPLACEMENT

SOP 659-137-21

Salisbury VA Health Care System Salisbury, NC 28144

Service Line:

Environmental Management Service

Signatory Authority:

Chief, Environmental Management Service	**Effective Date:**
Responsible Owner:	December 15, 2025
Chief, Environmental Management Service	**Recertification Date:** December 15, 2030

1. PURPOSE AND AUTHORITY

The purpose of this standard operating procedure (SOP) is to establish a standardized procedure for inspecting and replacing privacy and shower curtains when contaminated, damaged, or soiled, and to ensure they are changed on a routine basis - at a **minimum of quarterly** - to maintain patient safety, infection control, and environmental cleanliness. This SOP must be followed by Environmental Services staff who inspect, clean, replace, and document privacy and shower curtains as part of routine and isolation room cleaning.

2. PROCEDURES

Environmental Services staff will inspect privacy and shower curtains during routine area cleaning and isolation room cleaning. Privacy and shower curtains are replaced on a quarterly basis or sooner if they are damaged, soiled, or replaced as part of a terminal cleaning of an isolation precaution room. Curtain (privacy and shower) replacements must be documented in the curtain log.

a. **Equipment:** Personal Protective Equipment (PPE)

b. **Cleaning Products:** EPA-registered hospital-grade disinfectant

c. **Supplies:**

(1) Clean linen bags

(2) Microfiber cloths

(3) Reusable privacy curtains

(4) Disposable privacy curtains

(5) Shower curtains

d. **Inspecting and Replacing Privacy and Shower Curtains:** The steps for

inspecting and replacing privacy and shower curtains in patient care areas (excluding isolation rooms) are:

(1) **PPE Guidance** for curtain inspection/replacement:

1 Privacy Curtains: Use standard precautions (Hand Hygiene and Gloves) when inspecting/replacing non-soiled privacy curtains. The use of a gown is recommended when replacing a soiled privacy curtain.

2 Shower Curtains: Use standard precautions (Hand Hygiene and Gloves) when inspecting/replacing non-soiled shower curtains. The use of a gown is recommended when replacing a soiled shower curtain. Please refer to the "Soiling or Stains" section below for PPE guidance when spot-cleaning a shower curtain.

(2) **Inspect** privacy and/or shower curtain(s) for:

(a) ***Physical damage*:** If physical damage is observed (rips, torn webbing, damaged grommets). Damaged curtain(s) must be replaced immediately:

1 Disposable curtain(s) – discard as solid waste.

2 Reusable curtain(s) – send to linen supervisor for repair **or** retire and replace.

(b) ***Soiling or stains*:** Inspect privacy and shower curtains for dirt, dust, stains, or other physical matter.

1 **Privacy curtains** that are soiled or stained must be replaced immediately.

2 **Shower curtains:**

a. Minor stains:

i. PPE Guidance: Conduct Hand Hygiene and don gloves, gown and face shield or eye protection for splash protection.

ii. Spot clean using a disinfectant-soaked microfiber cloth. Scrub the affected area, then reapply disinfectant and allow the surface to remain wet for the required dwell time before considering the area clean.

b. Shower curtains that cannot be spot cleaned: Replace immediately: a Disposable curtain(s) – discard as solid waste.

b Reusable curtain(s) – send to linen supervisor for repair **or** retire and replace.

(3) Remove PPE and perform appropriate hand hygiene.

(4) Document all curtain(s) replacements (privacy and shower) in the appropriate curtain log.

e. **Isolation Room Guidance:**

(1) Replace curtain(s) (privacy and/or shower) during terminal/discharge cleaning or sooner if damaged or soiled.

(2) Perform hand hygiene and don appropriate PPE required for isolation type posted on transmission-based precaution sign at room entry.

(3) Remove curtain carefully, discard disposable curtain(s) or launder reusable curtain(s), and replace immediately. Isolation room curtain(s) (privacy or shower) will **not** be spot cleaned.

(4) Remove PPE before exiting isolation and perform appropriate hand hygiene.

(5) Document replacement in the appropriate curtain log.

3. ASSIGNMENT OF RESPONSIBILITIES

a. **Environmental Management Service (EMS) Chief.** The EMS Chief oversees SOP implementation and compliance coordinating with Infection Control (IC) to ensure alignment with IC standards.

b. **Work Lead/Supervisor.** The Work Lead/Supervisor is responsible for

(1) Conducting routine audits to ensure compliance.

(2) Verifying proper PPE use and adherence to procedures.

(3) Providing training and address deficiencies.

(4) Maintaining audit records and corrective actions.

c. **Environmental Services (EVS) Technician.** The EVS technician is responsible for:

(1) Inspecting privacy and shower curtains during routine cleaning and isolation room cleaning.

(2) Replacing curtains immediately if contaminated, damaged, or soiled in addition to quarterly schedule.

(3) Documenting curtain replacement in the designated log.

4. DEFINITIONS

a. **Shower Curtain.** Curtains used in patient shower areas to provide privacy and

prevent water from splashing outside of the shower space.

b. **Reusable Privacy Curtain.** A fabric curtain used in patient care areas to provide

visual privacy between beds or treatment spaces. These curtains are designed to be laundered and reused.

c. **Disposable Privacy Curtain.** A single-use curtain made of lightweight material, intended to be discarded after contamination, damage, or scheduled replacement.

5. REFERENCES

a. Centers for Disease Control (CDC). *Guideline for Disinfection and Sterilization in Healthcare Facilities*, 2008. Available at:

https://www.cdc.gov/infectioncontrol/hcp/disinfection-and-sterilization/index.html

b. Centers for Disease Control (CD). *Guidelines for Environmental Infection Control*

in Health-Care Facilities, revised July 2019. Available at:
https://www.cdc.gov/infectioncontrol/hcp/environmental-control/index.html

c. Centers for Disease (CDC) & Infection Control Africa Network (ICAN). *Best Practices for Environmental Cleaning in Healthcare Facilities in Resource-Limited Settings*, 2019. Available at:
https://www.cdc.gov/hai/prevent/resourcelimited/index.html

d. U.S. Environmental Protection Agency (EPA). *Selected EPA-Registered Disinfectants*. Available at:
https://www.epa.gov/pesticide-registration/selectedeparegistered-disinfectants

e. The Joint Commission. *Infection Prevention and Control Resource Center*, including relevant standards. Available at: https://www.jointcommission.org/enus/knowledge-library/infection-prevention-andcontrol-resource-center

f. Veterans Health Administration (VHA) Environmental Programs Service. *EMS Standard Operating Procedure Resources.* Available at: https://vaww.hefp.va.gov/resources/ems-standard-operating-procedure

g. Veterans Health Administration (VHA), Environmental Programs Service. EMS

Training Manual: Available at: https://vaww.hefp.va.gov/resources/ems-training-manual

6. RESCISSION

None

7. REVIEW

Review required at recertification and including when there are changes to the governing document, national policy, or a health care accreditation body mandate.

8. RECERTIFICATION

This SOP is scheduled for recertification on or before December 15, 2030. In the event of contradiction with national policy, the national policy supersedes and controls.

9. SIGNATORY AUTHORITY

Stacy Shaneyfelt

Acting Chief, Environmental Management Service

NOTE: *The signature remains valid until rescinded by appropriate administrative action.*

DISTRIBUTION: SOP will be published on the Salisbury SharePoint Portal.

5.2 **Contractor Personnel**

1. The Contractor shall assign a Certified Healthcare Environmental Service Professional (CHESP) to supervise and train the contracted personnel. The supervisor shall develop and evaluate the environmental sanitation procedures in order to ensure compliance with all provisions contained in this contract. A CHEST supervisor must be onsite and available anytime the contractor's employees are working on site to provide oversight.

2. The CHESP shall have at least one (1) year of prior experience as a CHESP Manager within the last three years. Written certification of experience and copies of any formal training program (i.e. Association for the Healthcare Environment (AEH) shall be submitted to the COR before starting work. The COR's approval must be received prior to an employee working at any of the facilities.

3. The CHESP or stand-in representative shall be available during normal duty hours to respond by telephone within thirty (30) minutes of notification by the COR and shall be available to meet with COR or designated representative within 2 hours after notification to discuss problems areas. After normal duty hours, the CHESP or stand-in representative shall be available within 3 hours.

4. The contractor's employees shall be fluent in English and shall be able to read, write, speak, understand and communicate effectively in English.

5. The contractor will ensure that the Salisbury VAMC on site CHESPs have a contractor owned/provided desktop computer/laptop, with scanner/printer. The contractor must have

their own cellular internet service for their computer, with an established contractor email address to send and receive email correspondence with the COR. Additionally, the contractor must provide their CHESP with a work cellphone for voice/text communications with the COR.

6. Prior to beginning performance under this contract, the Contractor shall provide the following:

   a) List of employees who will provide services under this contract

   b) Name, telephone number and address of the CHESP

   c) List of shift supervisors

   d) Execute a Business Associate's Agreement with Salisbury Veteran Affairs Medical Center.

7. The Contractor shall notify the COR in writing whenever there is a change of personnel appointed to fulfill supervisory or shift leader function or when there is a planned absence of key personnel. The CHESP shall, in the absence of the Contractor, act as the Contractor Representative. He/she shall have full authority to act for the Contractor on all matters relating to daily operations of this contract.

8. The Contractor shall not consume food, snacks, drinks or tobacco products except during specified break periods in appropriate designated break areas only.

9. The Contractor is responsible for compliance with all appropriate Joint Commission record keeping requirements.

10. The Contractor shall also be responsible for adhering to all requirements under the Privacy Act due to the possibility that confidential medical record information may be accessible and/or visible to contractor employees during performance of their daily duties. The Contractor shall obtain a signed "Confidentiality Certificate" from each employee prior to allowing them to start work under this contract. The contractor shall keep a copy of confidentiality certificate on site for inspection purposes.

11. The Contractor is not required to have physical examination prior to work on this contract; however, the Contractor is expected to be in good physical health and able to work in patient care areas without risk to the patients. The Contractor shall not be assigned to this contract if not in good physical health or pose a risk to patients. The Contractor who acquires a communicable illness shall not perform service under the contract and shall be free of illness before returning to work.

5.3 **Safety Training Requirements**

1. All OSHA Safety Regulations including 29CFR 1910.28 (I) (10) and 1910.66 subpart D will be strictly adhered to. (Regulation may be located at http://www.osha.gov/). All chemicals used on VA property must be accompanied by a Material Safety Data Sheet and be approved by a COR or designee. All materials and equipment will be removed from the facility or stored at the end of the workday. The Contractor shall take such safety precautions as are necessary to protect the lives and health of occupants of the building during performance of contract requirements. Contractors shall take such safety precautions as are necessary to protect the lives and health of occupants of the building during performance of contract requirements. Contractor-Furnished Safety Training: The Office of Occupational Safety and Health has identified the minimum worker safety standards and related training that are required by respective State Laws and that are applicable to all employees. All Contractors providing service at VA facilities shall follow these established Code of Regulations

   a) Section 3203 Title 8 "Illness and Injury Prevention Program." Exception: Employers having fewer than 10 employees shall be permitted to communicate to and instruct orally in general safe work practices with specific instructions with respect to hazards unique to the employees' job assignments, as compliance with subsection (a) (3).

   b) Section 5193 Title 8. "Blood Borne Pathogens"

   c) Section 5194 Title 8. "Hazard Communication"

   d) The above-listed orders establish minimum standards and apply to-employments in North Carolina. The contractor shall comply with the Occupational Safety and Health Administration (OSHA) Hazard Communication Standard and any North Carolina-specific standards; provided, however, that when the Occupational Safety and Health Standards Board has adopted or adopts safety orders applying to certain industries, occupations or employment's exclusively, in which like conditions and hazards exit, those orders shall take precedence wherever they are inconsistent with the General Industry Safety Orders hereinafter set forth.

   e) The above-listed orders, effective 1 July 1991, require the employer to develop, implement and document written programs, as well as requiring initial and recurring employee training and record keeping. The Contractor shall provide to the COR an annual written certification that each employee has received the State-required safety training; that each employee has received the Hepatitis B vaccination; or provide a written certification from any employee who declines the Hepatitis B vaccination.

   f) Hepatitis B Vaccination: The final rule on Occupation Exposure to Blood Borne Pathogens, 29 CFR Part 1910.1030, states "employers shall make available the Hepatitis B vaccine and vaccination series to all employees who have occupational exposure, and

post-exposure evaluation and follow-up to all employees who have had an exposure incident. Under the terms of this contract, the Contractor shall either provide, at no expense to the Government, the required vaccination defined herein or have a letter of declination on file with the Contractor.

g) A copy of this letter shall also be filed with the COR and placed in the COR's contract file, and an additional copy shall be sent to the VA employee physician's office. Following Contractor employee's exposure to a contaminated needle or other sharp object, the employee shall be seen by a physician. Records of treatment and follow-up shall be maintained for the duration of employment by the contractor and for thirty (30) years thereafter. Copies of treatment and follow-up records shall be provided to the COR.

2. Handling of Infectious Medical Waste ("Red Bag" Waste and "Sharps" Containers):

3. The Contractor may be required to collect bio-hazardous "Red Bags" waste (double-bagged) and solid, enclosed "SHARPS" containers from the medical facility exam and treatment rooms, and to deposit the bags and containers in designated bio-hazardous waste container (usually located outside and at the rear of the facility in locked cage or storage facilities). The Contractor shall maintain records on employee training and shall notify the COR appointed under this contract, as to when new annual training is required. The Contractor shall provide a certification of annual training for each employee.

5.4 **Contractor's Attire and Identification**

1. The Contractor shall wear a standard custodial type of uniform which is easily recognizable and clearly distinguish them as the "Contractor." Uniforms shall present a neat, distinctive appearance; shall be clean and maintained in good repair; and shall be worn as designed by the manufacturer. Standard custodial type uniform is defined as collared work short (button-down or polo style) and pants or skirt of twill or similar material (no denim). The Contractor shall wear appropriate footwear that will cover the entire foot for safety purposes.

2. Identification Tags/Cards. The Contractor shall wear on the front of the uniform, clearly readable name identification (ID) logo identifying the contractor's and employee's name. The Government will issue ID cards to the Contractor after background checks have been completed. The Contractor shall obtain "Visitors' Badges" during the interim period via VA Police or Human Resource Department.

3. In special sanitation and/or "isolation" situations, the Contractor may be required to wear special protective clothing and shoe covers, which will be supplied by the medical facility. Such items are to remain the property of the Government and shall not be removed from the premises of the medical facility. They will be received, worn, and turned in or disposed of as directed by the COR. All other safety or protective clothing or equipment shall be provided and maintained by the Contractor at the Contractor's own expense.

4. Contractor's Personal Hygiene: The Contractor's attire and presentation shall be appropriate to industry standard.

5.5 **Contractor Training**

1. Contractor personnel shall not be assigned to work until they have completed initial orientation and required training as indicated below under item 5.5.2. Exception: An exception will be made during the first sixty (60) days of contract performance, whereby Contractor's employees who have had general janitorial and OSHA training will be permitted to start work at the VA medical facilities, on the condition that the training specified herein shall be completed within sixty (60) days after contract effective date. The Contractor shall provide an initial training plan to the COR for approval. The initial plan shall include topics, brief statement of content and method of training. Documentation verifying the content of such training and orientation shall be transmitted to the COR.

2. Minimum Contractor-Furnished Training: Initial training shall cover the topics listed below. The Contractor shall accomplish the training within 5 workdays.

3. Contractor-Furnished Training: At a minimum Contractor shall cover the following topics listed in 29 Code of Federal Regulation (Labor) 1910.l-1910.1450 which is to be conducted not less than two (2) full days from date of contract award. The Contractor shall provide evidence that its employees are trained for providing janitorial services for a healthcare facility in all aspects of cleaning and in the use of all chemicals utilized by the contractor. The Contractor shall ensure that a minimum of 20 hours of job-specific training is conducted for the period of performance. The Contractor shall accomplish the training within 5 workdays. Training shall include the following:

    a) General orientation of basic bacteriological concepts, including the basics of how disease is caused and transmitted, how it can be prevented, reduced or contained through proper environmental sanitation methods.

    b) Infection control orientation, relating duty functions to the technical provision of this specification.

    c) Proper use and handling of germicidal detergents, supplies and equipment.

    d) Care and maintenance of Contractor and Government-furnished property.

    e) Familiarization with local fire prevention and safety procedures.

    f) Familiarization with applicable facility polices/regulations and their effect on sanitation Services.

    g) Familiarization with the Contractors procedures manual.

h) Individual duties and responsibilities.

i) Procedures for replenishing cleaning supplies and obtaining equipment repair.

j) Role of Contractor's personnel in the facility and their impact on patient care

k) Techniques/methods for measuring quality of work performance

l) Basic orientation to the facility, function, mission, goals

m) Facility emergency fire and disaster program

n) Hazardous Communication Standard

o) Utility Operation

p) Standard Precautions

q) Emergency Preparedness

r) Body Mechanics/Lifting

s) Accident Reporting

t) Sexual Harassment

u) Ethics

v) TB-Precautions (PPD Hep B)

w) Mercury/Spills

x) Radiation Training (Government-furnished)

y) Chemo Waste Handling

z) Linen exchange services, including proper handling and care of all linens.

4. Compliance and Business Integrity (CBI) Awareness Training: The Contractor shall complete initial compliance awareness training within thirty (30) days of contract award effective date. The Contractor shall also meet the annual compliance awareness refresher training. The COR and contractor will coordinate all training with the local CBI office.

5. Remedial Training: When notified, the Contractor shall complete remedial training and education to address any detected compliance issues.

6. Proof of Training: The Contractor shall submit proof of training by providing a copy of the training to the COR or designated representative. The COR will retain proof of training in accordance with applicable Records Control Schedule.

5.6 **Contractor's Quality Control Plan**

1. The Contractor shall establish and maintain a complete quality control program to ensure the requirements of the contract are met. One copy of the Contractor's basic Quality Control Program shall be provided to the COR 15 days after contract award effective date. An updated copy shall be provided to the COR as changes occur. The quality control program shall include, but are not limited to the following:

   a) An inspection system covering the required services. The plan shall specify the areas to be inspected on either a scheduled or unscheduled basis and how often inspections shall be accomplished.

   b) The plan shall provide methods for identifying and preventing deficiencies and how the Contractor shall prevent the level of performance from becoming unacceptable.

   c) On-site records of all inspections conducted by the Contractor and necessary corrective action taken.

   d) A system to record all inspections conducted by the Contractor and record corrective action. These documents shall be made available to the COR or designated representative during the term of the contract.

5.7 **Fire Prevention and Emergency Procedures**

1. The Contractor shall take such safety precautions as necessary to protect the lives and health of occupants of the buildings.

2. Any hazardous incidents created by the Contractor shall be corrected immediately.

3. The Contractor shall comply with applicable Federal, State, Local and facility safety and fire regulations and codes which are in effect at the beginning of the contract period. The Contractor shall keep abreast of and comply with changes in these regulations and codes applicable to the contract.

4. The Contractor shall follow applicable facility policies concerning fire and/or disaster events.

5. <u>Posting Warning Signs</u>: The Contractor shall display approved warning devices in all areas where operations may cause traffic obstruction or personnel hazard. The cleaning of lobbies and corridors, resulting in a temporary wet or slippery floor surface, shall be appropriately posted with signs and shall be accomplished so that it will not be necessary for personnel or patients to cross the wet surface to gain access to other areas.

5.8 **Building Security and Keys**

1. The Contractor shall be responsible for safeguarding all Government property provided for the Contractor's use. At the close of each work period, Government facilities, equipment and materials shall be secured.

2. The Government shall provide the Contractor with keys to access the required rooms. Access to restricted areas shall be provided to the Contractor by prior arrangements with the COR. With the exception of keys issued to CHESP, keys provided to other Contractor personnel shall not be removed from the premises. Keys shall not be duplicated or issued to any other individuals. All keys not issued for the performance of work being accomplished at the present time shall be secured or returned. The COR or designated representative will perform an inventory of keys assigned to the Contractor at the end of the contract period or as needed. Any keys lost by the Contractor will be replaced by the Government, and the Contractor shall be charged the replacement value of the lost key. The Contractor shall also be responsible for any expense incurred for re-keying of the Facility caused by the lost key. The Contractor shall notify the COR of any lost or suspected lost key within 24 hours.

3. The Contractor shall not lend keys or open locked rooms or areas to permit entrance by persons other than the Contractor's assigned staff. The Contractor shall be responsible for securing areas upon completion of duties. There may be certain areas identified by the COR in which Contractor personnel must immediately notify the COR or Security Personnel if a door is found unlocked.

4. When leaving a work area, the Contractor shall turn off lights if the area is unoccupied unless otherwise directed by the COR. The Contractor shall secure and lock the window(s) before leaving the area and if there is difficulty securing the areas, the Contractor shall notify the COR or designated representative.

5. The Contractor shall comply with the security clearances or access controls imposed.

6. The Contractor shall turn in all lost articles found during the performance of duties to the COR or designated representative.

7. If the contractor does not have access to an area due to either not having a key or otherwise, the contractor shall immediately notify the COR and cc the Contracting Officer in writing, so that appropriate action can be taken.

8. The engineering, IT, and telephone closets are restricted access. The contractor will not have keys to those areas and will require an escort to those areas.

5.9 **Interference to Normal Function**

The Contractor shall delay or interrupt their work at any time to avoid interference with patient care procedures and the normal function of the facility, including utility services, fire protection systems, and passage of facility patients, personnel, equipment, and carts.

5.10 **Damage and Equipment Loss**

1. The Contractor shall report damages or disfigurement of Government-owned furnishings, fixtures, equipment, and architectural or building structures to the COR immediately. The Contractor shall provide a written report of any damage or disfigurement to items to the COR or designated representative within 24 hours. The Government will not be responsible for Contractor's equipment or belongings that are lost, stolen or damaged.

2. The Contractor shall use reasonable care to avoid damaging existing buildings, equipment, and vegetation on the Government installation.

3. The Contractor shall use reasonable care or be liable for the cost of repairs and/or replacement of damages to Government-owned equipment, fixtures, furnishings, grounds and architectural or building structures.

5.11 **Handling of Government Furniture and Equipment**

1. The COR or designated representative will instruct the Contractor what Government items should not to be moved or otherwise handled. Any medical apparatus in use on or by a patient will not be moved or otherwise handled by the Contractor except when prior arrangements have been made with the nurse supervisor.

2. In emergency situations, the Contractor's assistance may be required to help move patients out of harm's way.

5.12 **Conservation of Utilities**

1. The Contractor shall instruct employees in utilities conservation practices. The Contractor shall be responsible for operating under condition which precludes the waste of utilities, which shall include:

    a) The Contractor shall not adjust any mechanical equipment controls for heating, ventilation and air conditioning system unless otherwise directed by the COR or designated representative.

    b) The Contractor shall turn-off all water faucets or values when not in usage.

    c) The Contractor shall not use Government telephones for personal reasons.

5.13 **Applicable Regulations and Manuals**

1. All work under this contract must be performed in accordance with (1) current Joint Commission Manual (JC); (2) Occupational Safety and Health Agency (OSHA); (3) Environmental Protection Agency (EPA) and Hazardous Materials requirements; (4) regulations cited in this Performance Work Statement (PWS) and (5) industry standards.

2. Documents applicable to work described in this section are mandatory and are listed below. The Government will provide the Contractor copies of all regulations, manuals and specifications such as those listed below. Supplements and amendments will be updated and will be considered to be full force and effective immediately upon receipt by the Contractor. The policies and procedures of mandatory directives shall be adhered to at all times. The Contractor shall insure that all mandatory publications are posted and up to date.

   a) Security Clearances, Access Controls, Identification Badges

   b) Facility policies concerning fire / disaster program.

   c) Parking Requirements

   d) Infection Control Manuals

5.14 **Required Security Training**

1. All contractor employees and subcontractor employees requiring access to VA information and VA information systems shall complete the following before being granted access to VA information and its systems:

   a) Sign and acknowledge (either manually or electronically) understanding of and responsibilities for compliance with the Contractor Rules of Behavior, Appendix E relating to access to VA information and information systems.

   b) Successfully complete the VA Cyber Security Awareness and Rules of Behavior training and annually complete required security training.

   c) The contractor shall provide the COR a copy of the training certificates and certification of signing the Contractor Rules of Behavior for each applicable employee within 1 week of the initiation of the contract and annually thereafter, as required.

   d) Business Associate Agreement (BAA): The Contractor shall execute a BAA upon award of contract. A copy shall be forwarded to the Privacy Officer.

5.15 **Information Security Requirements**

1. The C&A requirements do apply and that a Security Accreditation Package is required. The vendor will be in contact or will have access to VA sensitive information. VA sensitive information procedures will be followed per VA Handbook 6500.6.

2. Contractors, contractor personnel, subcontractors, and subcontractor personnel shall be subject to the same Federal laws, regulations, standards, and VA Directives and Handbooks as VA and VA personnel regarding information and information system security.

3. Information Security and Privacy Training

   a) All contractor employees and subcontractor employees requiring access to VA information and VA information systems shall complete the following before being granted access to VA information and its systems.

   b) Sign and acknowledge (either manually or electronically) understanding of and responsibilities for compliance with the Contractor Rules of Behavior, VA Handbook 6500.6, Appendix E relating to access to VA information and information systems.

   c) Successfully complete the VA Cyber Security Awareness and Rules of Behavior training and annually complete required security training.

   d) Successfully complete the appropriate VA privacy training and annually complete required privacy training; and

   e) Successfully complete any additional cyber security or privacy training, as required for VA personnel with equivalent information system access [to be defined by the VA program official and provided to the contracting officer for inclusion in the solicitation document – e.g., any role-based information security training required in accordance with NIST Special Publication 800-16, Information Technology Security Training Requirements.

   f) The contractor shall provide to the contracting officer and/or the COR a copy of the training certificates and certification of signing the Contractor Rules of Behavior for each applicable employee within 1 week of the initiation of the contract and annually thereafter, as required.

   g) Failure to complete the mandatory annual training and sign the Rules of Behavior annually, within the timeframe required, is grounds for suspension or termination of all physical or electronic access privileges and removal from work on the contract until such time as the training and documents are complete.

4. Contractor Personnel Security Requirements - Information Systems Access

   a) All contractors, subcontractors, and third-party servicers and associates working with VA information are subject to the same investigative requirements as those of VA appointees or employees who have access to the same types of information. The level and process of background security investigations for contractors must be in accordance with VA Directive and Handbook 0710, Personnel Suitability and Security

Program. The Office for Operations, Security, and Preparedness is responsible for these policies and procedures.

5. Access to and Safeguard of VA Information/Computer Systems

   a) The contractor/subcontractor shall request logical (technical) or physical access to VA information and VA information systems only to the extent necessary to perform the services specified in the contract, agreement, or task order.

   b) The contractor or subcontractor must notify the Contracting Officer immediately when an employee working on a VA system or with access to VA information is reassigned or leaves the contractor or subcontractor's employ. The Contracting Officer must also be notified immediately by the contractor or subcontractor prior to an unfriendly termination.

6. VA Information Custodial Language: Information made available to the contractor or subcontractor by VA for the performance or administration of this contract or information developed by the contractor/subcontractor in performance or administration of the contract shall be used only for those purposes and shall not be used in any other way without the prior written agreement of the VA. This clause expressly limits the contractor/subcontractor's rights to use data as described in Rights in Data- General, FAR 52.227-14(d) (1).

7. Security Incident Investigation: The term "security incident" means an event that has, or could have, resulted in unauthorized access to, loss or damage to VA assets, or sensitive information, or an action that breaches VA security procedures. The contractor/subcontractor shall immediately notify the COR and simultaneously, the designated ISO and Privacy Officer for the contract of any known or suspected security/privacy incidents, or any unauthorized disclosure of sensitive information, including that contained in system(s) to which the contractor/subcontractor has access.