

Purpose

This guidance documents provides Infection Prevention and Control direction on the appropriate storage of personal protective equipment (PPE) and other clean supplies in central and unit/neighbourhood-based clean supply areas.

Scope

This document is applicable to all Fraser Health acute care settings, owned and operated and affiliated long-term care (LTC) providers and assisted living facilities.

General Storage Principles (Unit/Neighbourhood-Based and Central Clean Supply Receiving/Storage Areas)

- Clean storage areas shall be:
 - Dedicated to the storage of clean and sterile supplies
 - Located in a separate, enclosed, and secured area. If access cannot be controlled, the storage area shall be enclosed e.g. cupboard, cabinet, closed cart.
 - Provided with adequate, organized storage space to prevent crushing or damage to packages
 - Free of corrugated cardboard boxes and external shipping containers. Inner boxes used for single-use medical devices shall not be topped up
 - Cleaned according to [Table 1: Cleaning Frequency of Clean Supply Rooms](#)
 - Protected from moisture and dust contamination, the entry of dust from adjacent areas and ventilation systems, and vermin
- Storage shall be away from the window, due to the risk of condensation
- Clean supply rooms shall not include a hand hygiene sink in the room; the hand hygiene station shall be outside the room
- Shelving units or cart surfaces shall have cleanable, smooth, and non-porous surfaces tolerant of hospital-grade disinfectants. Wood is not acceptable. The top and bottom shelves shall be solid.
- Storage of equipment and supplies shall not be exposed to direct airflow from the HVAC system in accordance with CAN/CSA-Z314
- Shelving for clean and sterile supplies shall be at least
 - 230 mm (10 in) off the floor,
 - 450 mm (18 in) from the ceiling, and
 - 50 mm (2 in) from outside walls

Central Clean Supply Receiving/Storage Areas

In addition to general storage principles:

- Equipped with appropriate environmental controls and maintained, according to CSA Z8000 and CSA Z314.18
- Clean supplies can be stored in lidded moisture-resistant and wipe-able containers (i.e. corrugated cardboard boxes shall not be used) on shelves
- If shipping boxes are used for temporary storage, boxes shall be stored off the floor on shelves, away from the wall and at least 18 in from the ceiling to prevent any contamination from moisture, dust, water ingress, etc.

- If shipping pallets are used for storage of unopened containers (e.g. shipping boxes), the clearance from the floor may be reduced to 10cm (4in), provided that the pallets are lifted and the floor underneath is cleaned at specified intervals (every 6-12 months)
- Perform hand hygiene after opening boxes that require decanting and before transferring them into designated clean supply rooms or on designated PPE carts on the units
- Sites experiencing challenges with adequate clean supply storage space may temporarily store PPE cardboard boxes in a designated room or section, as long as it is away from the resident care areas and high traffic locations

Personal Protective Equipment Holders

- PPE holders shall be:
 - Smooth and easily cleanable with hospital grade disinfectants
 - Wall-mounted or carts with closed drawers
 - Placed immediately outside of rooms or within an anteroom (if considered a clean area)
- PPE holders should not be in the patient/resident room entryway/space or hanging from patient/resident room doors, as they may become contaminated

Table 1. Cleaning Frequency of Clean Supply Rooms and PPE Carts

Area	Frequency of Cleaning (Unit/Neighbourhood-Based)	Frequency of Cleaning (Central Supply)
Counters	Daily	Daily
Floors	Daily	Daily (every 6-12 months under pallets, if used)
Shelves and containers	Monthly	Monthly
Light fixtures, sprinkle heads and other fixtures	Every 6 months	Every 6 months
Walls	Every 6 months, or more often if needed	Every 6 months
PPE Isolation Carts (when in use)	Exterior twice a day. Interior once a day.	N/A

Questions

Direct any questions to your local site leadership team, or site Infection Prevention and Control Practitioners or Community Specialists.

References

BC Ministry of Health. (2011). Best Practice Guidelines for Cleaning, Disinfection and Sterilization of Critical and Semi-critical Medical Devices in BC Health Authorities. Retrieved from: [https://www.picnet.ca/wp-content/uploads/Best Practice Guidelines for Cleaning Disinfection and Sterilization.pdf](https://www.picnet.ca/wp-content/uploads/Best_Practice_Guidelines_for_Cleaning_Disinfection_and_Sterilization.pdf)

CSA standards – Z8000-18, Z317.13, Z314.18