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BSI Kitemark certification for Hygienic Premises

Client guidance

Contents

Foreword

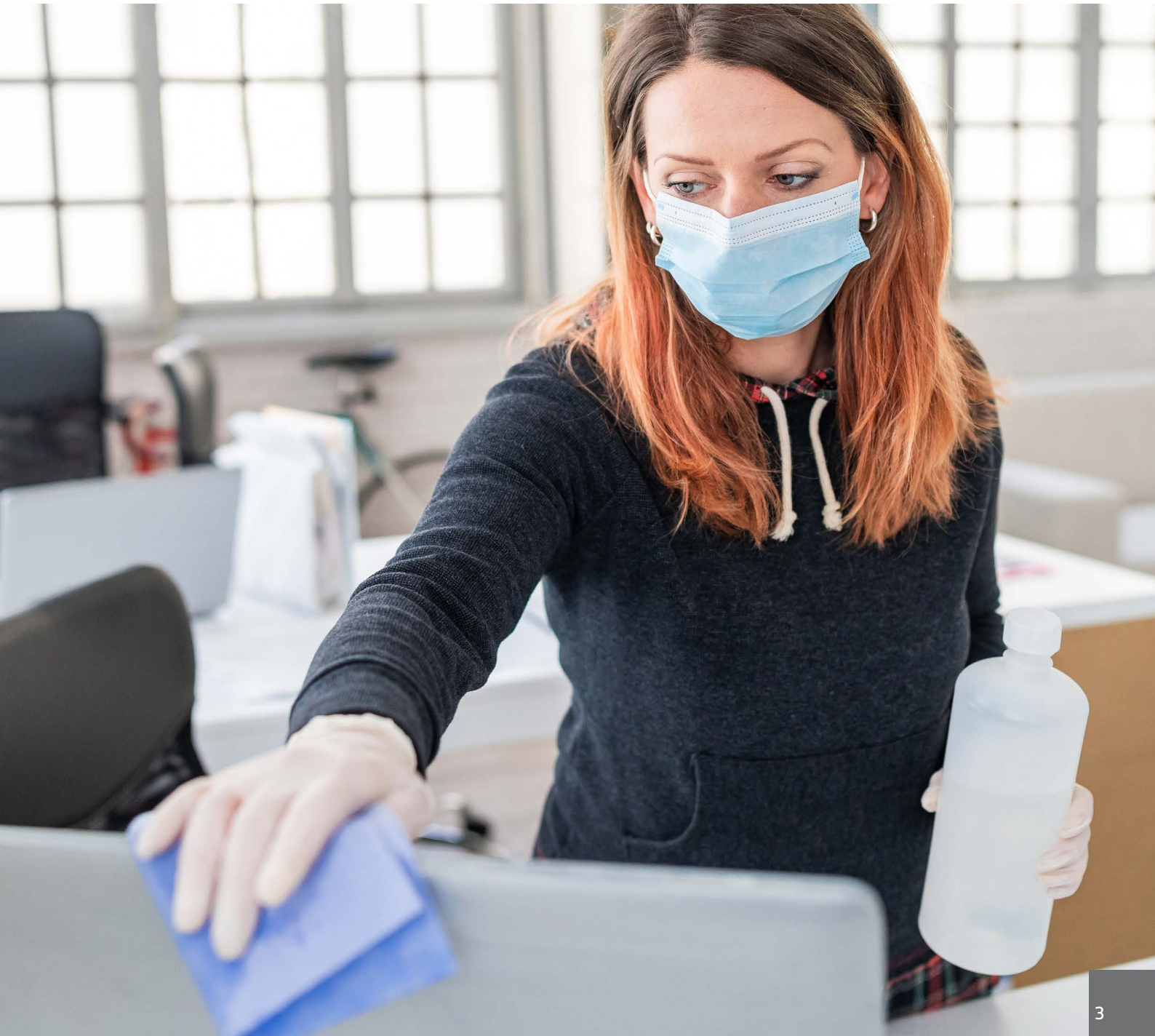
Thank you for choosing to work with us to achieve BSI Kitemark certification for Hygienic Premises. Independent and impartial certification is an effective way to validate your workplace hygiene credentials.

This document has been created to enable you to understand the details of this programme and identify how we will assess your organization, both initially and on an ongoing basis.

It contains details of the checklists, based on existing standards, protocols and good practice guidelines, that we will use to assess your organization so you know what we will assess.

We also include details about managing your Kitemark certification on an ongoing basis to ensure you continue to uphold effective workplace hygiene measures for a safe and resilient workplace.

And finally we include details about the tools available from BSI so you can promote your achievement and reassure colleagues, customers, the public and other stakeholders about your commitment to a safe and hygienic workplace.



1 Introduction

This Kitemark certification scheme covers the process of ensuring a workplace is more hygienic, and is designed to include any premises where there is a risk of infection transmission, excluding high-risk clinical premises.

The Kitemark certification scheme is an assessment based activity which offers assurance of the effective implementation of workplace hygiene processes, including safe working during the COVID-19 pandemic. It has been designed to give confidence to employees, workers, visitors and consumers that effective processes have been put in place to protect them.

This Kitemark scheme is based on the following three items being achieved.

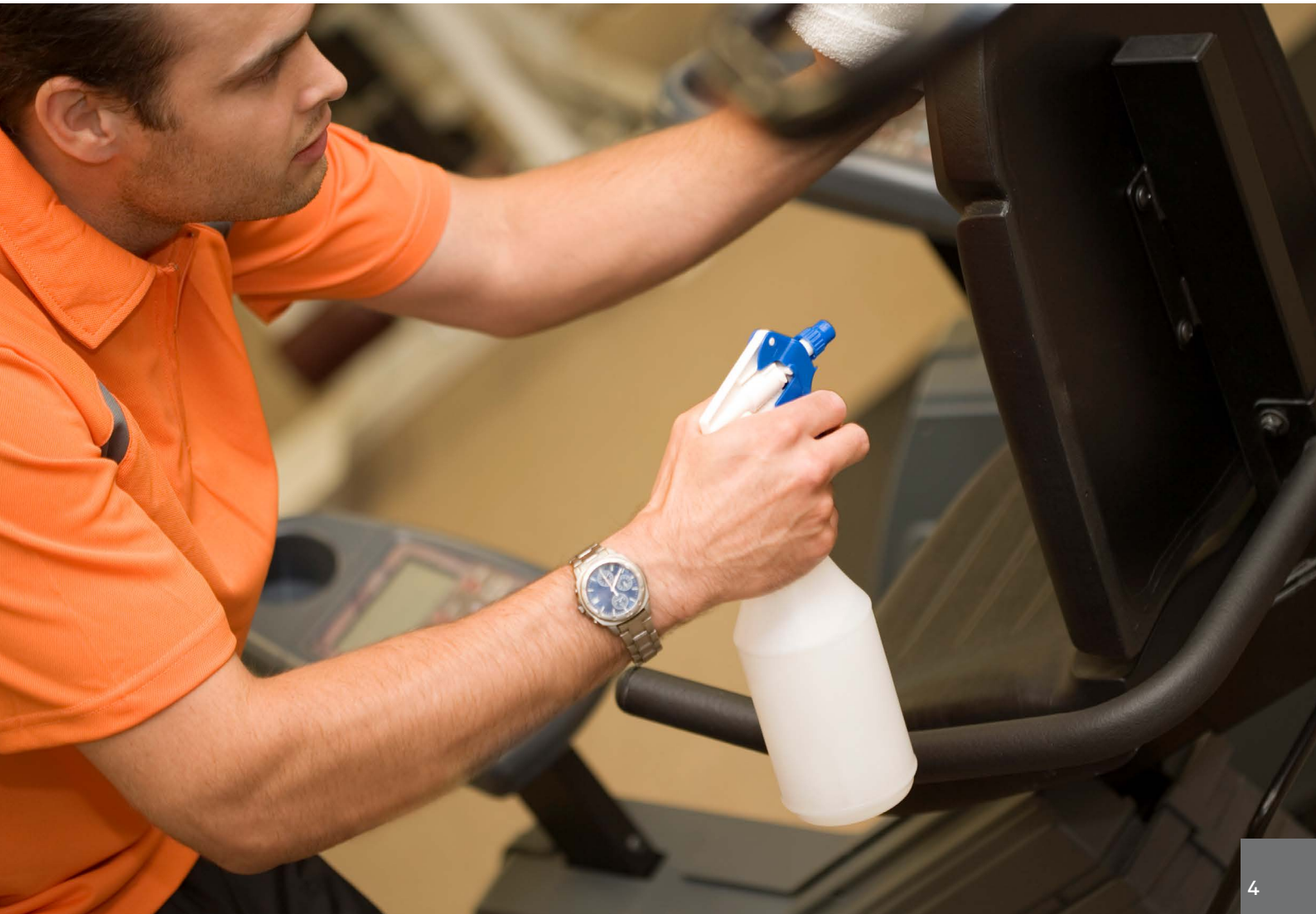
1) An Occupational Health and Safety Management System.
This requires the organization to have developed and implemented a working system to manage health and safety in the work place. The organization will need to demonstrate that 'aspects' of ISO 45001 as set out in the KM scheme requirements have been implemented.

The system can be certified or equivalent to the principles in ISO 45001 Occupational Health and Safety Management Systems.

2) Safe working during the COVID-19 pandemic – General guidelines for organizations. Version 2 (A copy of this can be downloaded from the BSI website).
This deals with minimizing the risk of infection transmission through safe working practices. Organization's will need to demonstrate the elements relevant to them have been applied.

3) Specification for the planning, application, measurement and review of cleanliness services in hospitals, PAS 5748.
This is a risk based approach for implementing hygiene and cleanliness controls on premises, measuring of outcomes being key. Organizations are not required to apply PAS 5748 in its entirety but the areas relevant in accordance with the matrix.

NB: Appendix D Contains a matrix of the three elements for reference purposes.



2 Manage – 'an Occupational Health and Safety Management System'

2.1 General

This Kitemark scheme requires an Occupational Health and Safety Management System based upon the principles of elements from ISO 45001. To achieve Kitemark certification the scheme does not require the full implementation of ISO 45001 but if you have an existing ISO 45001 certificated system then this can be used to fulfil these elements.

For those orgnizations who do not have a current certified system the following areas are a requirement of this Kitemark and should be implemented:

2.2 Context

Organizations must determine the external and internal issues that are relevant to their business. This shall take into account the planned or performed work-related activities, products and services within the organization's control or influence. They should use this to consider what is within their control to manage their health and safety system and the needs and expectations of their workers and interested parties.

2.3 Leadership and worker participation

Top management shall demonstrate leadership and commitment. This may be achieved in many ways, examples include implementing a policy with a commitment to being accountable and responsible, determining clear objectives to achieve the strategic approach, ensuring and promoting continual improvement.

2.4 Planning

Organizations should determine methods of planning to manage health and safety in the workplace. These should include how risks and opportunities are determined, assessed and treated. There should be comprehensive plans in place to demonstrate that all activities in line with the business context have been considered. It is also essential that all legal requirements applicable to the organization's hazards are considered. We should be able to see a full complement of how you will achieve your commitment and objectives in the form of plans across the organization.

2.5 Support

In order to fulfil commitments the appropriate support and competency shall be in place. This can be demonstrated through communications, training and documented information.

2.6 Operation

Comprehensive operational control shall be in place to achieve the organization's plans. This should be a well managed process, demonstrating that not only plans are adhered to but that hazards are minimized, risks reduced and procurement and outsourcing is also considered. It is essential that emergency preparedness is in place and appropriate plans made to demonstrate this.

2.7 Performance evaluation

This is fundamental to this Kitemark programme. We expect organizations to evaluate their performance dynamically and periodically considering not only legal requirements but actions necessary to ensure the health and safety of all persons on their premises and affected by their work activities. This must incorporate the objectives the organization set in line with planning and operational control. This should include technical audits undertaken by the organization at determined intervals. A management review should be carried out to review the overall performane of the 'occupational health and safety system'.

2.8 Improvement

The organization is expected to use performance evaluation to determine opportunities for improvement. This shall include the results of technical audits but also incidents, general planning and operational control. It is the organization's responsibility to identify what can be improved, how this can be done and to make it happen.

3 Minimize - Safe Working during the COVID-19 pandemic

BSI has produced a document of the guidelines for working safely during the pandemic. The organization is required to use this document, the principles and apply the appropriate controls based on the risks and activities that they undertake.

4 Measure - Specification for the planning, application, measurement and review of cleanliness

This Kitemark programme requires organizations to use the model within **PAS 5748** to manage and measure the cleanliness of their premises. This is a tool to be used when planning cleaning regimes in the premises and takes into account activities in premises and the risks involved. There is an expectation that you plan according to the risk determined and then perodically measure the output using 'technical audits'.

Purpose:

- The frequency with which to undertake cleaning tasks;
- the frequency with which technical audits are conducted; and
- the consequent allocation of resources

4.1 Terms to understand

An **'element'** is an item or collection of items, or any part of a fabric or fittings e.g. furniture, equipment, surfaces.

'Functional areas' are defined as a room or physically contiguous group of rooms/areas within a premises where staff and the public are present.

'Infection risk' considers the usage of an area.

'Confidence risk' considers how people's confidence may be affected if they see unclean premises.

4.2 The risk process

The risk process is reliant on using the terms above. Each element and functional area must be scored using a grading of 1-3 using the infection and confidence risk tables, see **Appendix A**. A simple equation is used to calculate and create an overall score. The score like many matrices is then allocated a Red, Amber or Green. Using the colour codes from both elements and functional areas this provides a final rating of Very High, High , Medium and Low, **Appendix B**.

The organization needs to work through their premises in a methodical way, allocating risk ratings to all areas. Once you have determined your 'High – Low' areas this can be used to determine cleaning frequencies and also frequency of technical audits.

4.3 Technical audits

The purpose of the technical audit is like any other, to assess that the organization has implemented and achieved technical audits for cleanliness to an appropriate level as determined by the risk process. The audit is an objective assessment based on the visual appearance being free from dirt and stains. The scoring mechanism for this is straightforward, it complies with the cleanliness levels = 1 , or it does not = 0, see **Appendix C**. This process allows you to create a percentage score for each audit. Within PAS 5748 there are audit templates for guidance.

We would expect a robust audit process to be in place and comprehensive evidence will be examined during the BSI assessment process.

The frequency of technical audits that the organization carries shall be based on the identified risk levels, the higher the risk the more frequent the audit.

NB: It is acceptable for the organization to use BSI surveillance assessments as evidence toward Managerial Audits as defined in PAS 5748 clause 6.5.

5 Assessments

5.1 Locations

During the application process we will determine the number of locations that we need to visit as a representative sample for the Kitemark scheme.

5.2 Stage 1

BSI will carry out an assessment on site in the form of a 'readiness review' establishing that the organization has understood the requirements and sufficiently implemented a structure and processes to proceed to stage 2. This will include a desk top review of the management system in place and that the guidelines for 'Safe Working during the COVID 19 pandemic' and the risk process in line with PAS 5748 has been put into place. It will not at this stage test its robustness.

5.3 Stage 2

The stage 2 will also be conducted on site or sites as determined during the application process. BSI will be assessing the operational implementation of all requirements as well as its effectiveness.

The assessment will include a 'Technical Audit' as defined by PAS 5748 on a sample of functional areas. BSI have determined that technical audits will need to score no less than 80% in order to 'pass'. For audits that do not reach this percentage a major non-conformity will be raised.

There are two forms of non-conformity applied to the scheme:

- Minor non-conformity: A minor breakdown in the process or a part of a process.
- Major non-conformity: An absence or failure in an process that compromises the scheme principles. This non-conformity requires corrective action and a further visit.

5.4 Surveillance assessment

Surveillance assessments are conducted on a regular basis as part of the Kitemark certification scheme. This approach helps to reinforce the importance of maintaining standards to keep the Kitemark certification valid.

The first surveillance assessment will be unannounced and take place within six months of the awarding of a Kitemark certificate. The assessment will include a 'Technical Audit' as defined by PAS 5748 on a sample of functional areas.

5.5 NCR Close-out Visits

If a major non-conformity is raised during a surveillance assessment, an additional close-out visit will be required. During this close-out visit the effective implementation of corrective actions will be reviewed. Following a major non-conformity the next surveillance assessment will be an unannounced visit, and will take place within six months of the previous surveillance assessment. If no major non-conformities are raised then the next surveillance assessment will be an announced visit.
As a minimum, two surveillance assessments will be carried out every 12 months.

6 Certification

Following a successful initial assessment, the Kitemark certificate will be awarded enabling the organization to display the BSI Mark of Trust at their site.

It is recommended that organizations that achieve Kitemark certification display the BSI Mark of Trust at their premises to demonstrate to workers, the public and other stakeholders that they have achieved the required standard. In addition, a marketing toolkit is available from BSI for all organizations who have achieved certification to help promote their achievement.

You will also gain access to the BSI Assurance Portal. This is a convenient way for you to interact with us as your certification body. With 24/7 access to essential information, such as your next 12 months of visit dates (unless they are unannounced), audit reports, and certificates, it gives you great support to effectively manage your BSI assessments.

6.1 Certificate suspention

The certificate may be suspended immediately where:

- A major non-conformity has been raised during a surveillance visit. The certificate can be reinstated following closure of the major non-conformity through a Corrective Action Plan (CAP) and a Non-Conformity Review (NCR) close-out visit.
- The organizations's technical audits, as sampled and assessed in accordance with this protocol, achieve an overall score of less than 80% on two consecutive surveillance assessments.
- An unannounced visit is refused.

7 APPENDIX A: Element risk tables:

Infection risk	Infection risk score	Confidence risk	Confidence risk score
Elements with which stakeholders including especially public and staff normally have infrequent and/or little direct contact with or which are unlikely to act as transmitters of infection.	1	Elements which are unlikely to be seen by stakeholders including especially public and staff or which, when seen in an unclean condition is unlikely to lead to a loss of confidence in the ability of the organization to provide a clean, safe environment.	1
Elements with which stakeholders including especially public and staff normally have a frequent and/or medium degree of direct contact or which are likely to act as transmitters of infection.	2	Elements which are occasionally seen by stakeholders especially staff and customers or which, when seen in an unclean condition, are likely to lead to some loss of confidence in the ability to provide a clean, safe environment.	2
Elements with which stakeholders especially public or staff normally have very frequent and/or extensive direct contact or which are certain to act as transmitters of infection.	3	Elements which are highly visible to stakeholders especially staff or customers and which, when seen in an unclean condition, will lead to a serious loss of confidence in the ability to provide a clean, safe environment.	3

Infection risk score	Confindence risk score	Element risk score	Element risk cateogry
3	3	3 x 3 = 9	Red
3	2	3 x 2 = 6	Red
3	1	3 x 1 = 3	Red
2	3	2 x 3 = 6	Amber
2	2	2 x 2 = 4	Amber
1	3	1 x 3 = 3	Amber
2	1	2 x 1 = 2	Green
1	2	1 x 2 = 2	Green
1	1	1 x 1 = 1	Green

7 APPENDIX A: Element risk tables:

Functional risk tables:

Infection risk	Infection risk score	Confidence risk	Confidence risk score
Functional area in which staff and the public are not usually present.	1	Functional areas which are unlikely to be seen by stakeholders including especially public and staff or which, when seen in an unclean condition is unlikely to lead to a loss of confidence in the ability of the organization to provide a clean, safe environment.	1
Functional areas in which staff and / or the public are regularly present, and functional areas through which staff and the public regularly pass.	2	Functional areas which are occasionally seen by stakeholders especially staff and customers or which, when seen in an unclean condition, are likely to lead to some loss of confidence in the ability to provide a clean, safe environment.	2
Functional areas in which staff and / or the public are always present.	3	Functional areas which are highly visible to stakeholders especially staff or customers and which, when seen in an unclean condition, will lead to a serious loss of confidence in the ability to provide a clean, safe environment.	3

Infection risk score	Confindence risk score	Element risk score	Element risk cateogry
3	3	3 x 3 = 9	Red
3	2	3 x 2 = 6	Red
3	1	3 x 1 = 3	Red
2	3	2 x 3 = 6	Amber
2	2	2 x 2 = 4	Amber
1	3	1 x 3 = 3	Amber
2	1	2 x 1 = 2	Green
1	2	1 x 2 = 2	Green
1	1	1 x 1 = 1	Green

8 APPENDIX B: Overall risk categories

Element risk category (from Table 2)	Functional area risk category (from Table 4)	Overall risk category
Red	Red	Very high
Red	Amber	High
Red	Green	High
Amber	Red	High
Amber	Amber	Medium
Amber	Green	Medium
Green	Red	High
Green	Amber	Medium
Green	Green	Low

9 APPENDIX C: Technical audit scores

Element technical audit score	Criteria
0	Element does not conform to the cleanliness criterion
1	Element conforms to the cleanliness criterion

10 APPENDIX D: Matrix of referenced documents

ISO 45001	SAFE Working during the COVID-19 pandemic	PAS 57481 [1, 2, 3, 4, 5]
	Specific requirements to be implemented	Specific requirements to be implemented
3. Definitions	As specified in ISO 45001	2. Terms and definitions
4. Context of the organization	4.1 Understanding the context of the organization	As ISO 45001, specifically addressing hygiene and cleanliness
5. Leadership and worker participation	4.2 Leadership and worker participation ISO 45001 clause 5.3 Organizational roles, responsibilities and authorities (as it relates to safe working through COVID-19)	ISO 45001 clauses (as it relates to hygiene and cleanliness processes; 5.1 (a), (d), (e), (g), (i), (l) and including; PAS 5748 clauses 3.2, 3.3.1, 3.3.3
6. Planning	4.3 General planning 4.4 Workplaces (excluding 4.4.2, 4.4.3 & 4.4.4) 4.5 Roles 4.6 Activities 4.7 Emergency preparedness and response 5. Suspected or confirmed cases of COVID-19	4.1 General, excluding 4.1.1 (e) 4.3 Identification of functional areas and elements 4.4 Risk assessment of elements 4.5 Risk assessment of functional areas 4.6 Overall risk assessment of each element in a functional area 4.7 Frequencies (excluding 4.7.2 and 4.7.3)
7. Support	6. Psychological health and well being 7. Inclusivity 8. Resources 9. Communication	5.1.1 Responsibilities 5.6 Competence
8. Operation	10. Hygiene 11. Use of PPE equipment and face coverings 12. Operations 4.7 Emergency preparedness and response	5. Cleaning tasks
9. Performance evaluation	13. Performance evaluation	6. Measurement and audit 8. Performance analysis, review and improvement action
10. Improvement	14. Improvement	9. Continuous service improvement

Column three details the clauses from PAS 5748 (Specification for the planning, application, measurement and review of cleanliness services in hospitals), which must be met and how they relate to ISO 45001.

1. Where references are made to 'a hospital' within PAS 5748, this shall be considered as 'an organization' for non-hospital premises
2. Where references are made to 'the Board' within PAS 5748, this shall be considered as 'top management'
3. Where references are made to 'patient' within PAS 5748, this shall be considered as visitors / stakeholders
4. Completed risk assessments detailed in PAS 5748 Annexes C and D are not applicable
5. 'Scored element' in PAS 5748 are not applicable for non-hospital premises. 'Scored element' shall mean 'element' as identified by the organization

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