# Commercial Cleaning Problem Diagnostic Assessment

Executive Guide No. 11 Companion Resource • Version 1.0 CERTIFIED • Tier 2 Executive Assessment

*Purpose: document a recurring cleaning concern before assigning cause. This tool is non-scored and does not replace facility-specific safety, contractual, maintenance, infection-prevention, legal, or specialty guidance.*

## 1. Describe the visible condition

**Facility / area:**

**Observed condition:**

**When was it first noticed?**

**How often has it occurred or returned?**

## 2. Record what is known

**What evidence confirms the condition?**

**What task / frequency / expected result applies?**

**What changed recently, if anything?**

## 3. Separate fact from assumption

| Known fact | Current assumption |
|---|---|
| | |
| | |
| | |
| | |

*Do not convert an observation into a causal conclusion until the available evidence supports it.*

# Cause-Class Review

Page 2 — Consider plausible explanations; do not force a single cause when evidence is mixed.

| Cause class | Questions to examine | Evidence / notes |
|---|---|---|
| Provider execution | Was the task due, accessible, understood and completed using an adequate process? | |
| Training / supervision | Was the cleaner trained for this account? Has independent supervision/feedback occurred recently? | |
| Program design | Do scope, task frequency and resources match the condition being expected? | |
| Facility / operations | Could maintenance, materials, traffic, events, weather, construction or changed use be recreating the condition? | |
| **Cause class** | **Questions to examine** | **Evidence / notes** |
| Access / scheduling | Could the cleaner reach the area and use the full planned service window? | |
| Communication / oversight | Did the concern reach the right manager? Has silence or reduced inspection limited visibility? | |
| People / continuity | Did staffing change? Is important site knowledge held by one person? | |
| Mixed causes | Which two or more factors could be operating together? | |

**Most likely explanation at this stage:**

**What additional evidence would help distinguish the remaining possibilities?**

*"Insufficient evidence" is a valid outcome. The goal is a defensible next action, not false certainty.*

# Correction and Action Plan

Page 3 — Fix the immediate issue, then decide what should change to reduce recurrence.

## Immediate correction

**What will be corrected now?**

**Responsible person / organization:**

**Target completion date:**

## Longer-term action

| Action area | Planned action | Owner / due date |
|---|---|---|
| Cleaner process / training / supervision | | |
| Scope / frequency / resource adjustment | | |
| Facility maintenance / access / operations | | |
| Communication / documentation / knowledge transfer | | |

## Escalation control

**If the issue recurs, what will happen next?**

**What would justify provider-performance escalation, a program adjustment, or specialized facility action?**

*Accountability should follow the supported cause. A client/provider "partnership" does not transfer the provider's staffing and execution responsibilities to the client.*

# Verification and Follow-Up

Page 4 — Confirm whether the change actually holds.

| Verification date | What was checked | Result / recurrence |
|---|---|---|
| | | |
| | | |
| | | |
| | | |

## Outcome

☐ Corrected / monitor

☐ Needs more evidence

☐ Program adjustment required

☐ Facility or specialized action required

☐ Provider performance escalation required

☐ Mixed actions required

**What changed after the action?**

_____

_____

**What remains unresolved?**

_____

_____

**Next review date:**

_____

*Use this assessment as a decision aid, not as a provider score or a substitute for professional judgment. Recurrence, severity, responsibility, evidence quality and facility context should guide the next step.*