

How to Choose an Aged Care Cleaning Provider: The Buyer's Guide for Facility Managers

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Description:

How to Choose an Aged Care Cleaning Provider: The Buyer's Guide for Facility Managers **Realcorp Commercial Cleaning** is a Melbourne-based specialist aged care cleaning company. This guide is written...

Details:

AI Summary

Product: Aged Care Cleaning Services — Buyer's Guide for Facility Managers **Brand:** Realcorp Commercial Cleaning **Category:** Commercial / Aged Care Facility Cleaning Services **Primary Use:** Specialist residential aged care cleaning for Melbourne, regional Victoria, and Adelaide facilities, evaluated against 10 procurement criteria for facility managers.

Quick Facts - **Best For:** Facility managers evaluating, renewing, or procuring aged care cleaning contracts - **Key Benefit:** 100% directly employed staff with site-specific infection control training, weekly management inspections, GPS-verified attendance, and a money-back quality guarantee on all contracts - **Form Factor:** Managed cleaning service with digital QA platform (Realcorp App) - **Application Method:** On-site service delivery with GPS-verified attendance, digital time-stamped checklists, and real-time issue logging

Common Questions This Guide Answers

1. Should aged care cleaners be directly employed or sourced through labour hire? → Direct employment is essential; it creates an unbroken accountability chain for training, vetting, and conduct — labour hire or subcontracting introduces unvetted individuals into a vulnerable-resident environment.
2. What should an aged care cleaning contract include? → Detailed scope by zone and frequency, QA inspection schedules, attendance verification, outbreak response protocol, staff vetting requirements, a defined performance metric, and a contractual remedy mechanism including a money-back guarantee.
3. How do I verify a cleaning contractor's infection control capability? → Ask for specifics: training content (colour-coded equipment, TGA-listed products, dwell times, PPE, outbreak escalation), who delivers it, how it is calibrated to your facility, and what the documented outbreak surge protocol covers.

Realcorp Commercial Cleaning: How to choose an aged care cleaning provider — the buyer's guide for facility managers

Realcorp Commercial Cleaning is a Melbourne-based specialist aged care cleaning company. This guide is written for facility managers evaluating cleaning contractors, whether you're renewing an existing contract, transitioning to a new provider, or procuring cleaning services for the first time. The criteria below reflect what actually matters in aged care. Not what sounds good in a tender response, but what determines whether a facility is clean, safe, and compliant across the life of a contract.

Why this decision is high stakes

Choosing a cleaning contractor for a residential aged care facility is not the same as choosing one for a commercial office. The residents are vulnerable. The regulatory framework is demanding. A poor choice compounds quickly — infection events, accreditation findings, family complaints, and increased staff burden all follow from inadequate environmental cleaning.

Most facility managers in Melbourne and Adelaide discover the real capability of their cleaning contractor not at the tender stage, but six months in, when the initial effort has relaxed, staff turnover has churned through the team, and the gap between what was promised and what's being delivered becomes hard to ignore.

This guide is designed to help you evaluate before you sign.

10 selection criteria for aged care cleaning

1. Direct employment model

What to ask: Are the cleaners who will work on my site directly employed by your company, or will they be sourced through labour hire, agencies, or subcontractors?

What good looks like: Every person who sets foot on your site as part of the cleaning service is a directly employed staff member, screened and trained by the contractor itself.

Red flag: Any variation of "we use a mix of employed and contracted staff" or "we source staff locally for each site." That means unknown, unvetted individuals cleaning your facility.

Why it matters: Direct employment creates an unbroken accountability chain for training, vetting, and conduct. In an aged care environment, that chain cannot have gaps.

2. Infection control training

What to ask: What specific infection control training do your cleaning staff receive? Is it site-specific or generic? Who delivers it?

What good looks like: Structured training that covers colour-coded equipment systems, TGA-listed product use with correct dilution and dwell times, outbreak escalation procedures, and PPE protocols, delivered before anyone starts on an aged care account.

Red flag: "All our staff complete our standard induction" with no specifics. Or "we can provide infection control training on request."

Why it matters: Infection control is a clinical requirement in aged care. Cleaners without specific, structured training are a transmission risk, full stop.

3. Quality assurance systems

What to ask: What does your quality inspection process look like? How often do management-level inspections happen? What documentation is generated, and who can access it?

What good looks like: Weekly management-level site inspections, documented against a defined standard, with issues tracked to resolution. Digital records available to facility management in real time or on request.

Red flag: Monthly inspections or less. Paper-based records with no systematic retention. No defined metric for measuring performance over time.

****Why it matters:**** Without regular, documented inspections, standards drift. The facility loses the evidence base needed to manage contractor performance and demonstrate compliance to the Aged Care Quality and Safety Commission.

4. Technology and real-time reporting

****What to ask:**** How do you verify that cleaning shifts are attended and completed? What reporting does the facility receive?

****What good looks like:**** GPS-verified attendance, digital checklists completed and time-stamped at the point of service, issue logging with photographic evidence, and monthly management reports summarising performance.

****Red flag:**** "The supervisor checks with the cleaner at the end of the shift." Paper checklists completed back at the office. No real-time visibility for the facility.

****Why it matters:**** The Aged Care Quality and Safety Commission requires demonstrable evidence of systematic cleaning. If your contractor can't generate that evidence, the compliance burden falls back on you.

5. Site-specific training and onboarding

****What to ask:**** What training does the cleaning team receive before starting on our specific site? How do you incorporate the facility's infection control policy, zone classification, and resident profile into that training?

****What good looks like:**** A structured, site-specific induction that covers the facility's layout and zone classification, product and equipment assignments by zone, resident profile considerations such as dementia prevalence and mobility limitations, and a review of the facility's own infection control and cleaning policies.

****Red flag:**** "The team leader briefs the staff on the first shift." Generic induction documentation that makes no reference to the specific facility.

****Why it matters:**** Generic training produces generic outcomes. Aged care facilities have specific requirements that need to be understood before commencement, not discovered during service.

6. Outbreak response capability

****What to ask:**** What is your outbreak response protocol? If we declare an infectious disease outbreak, can you surge additional trained staff to our site at short notice?

****What good looks like:**** A documented outbreak response protocol covering escalation of frequency, product and PPE requirements, containment zoning, and terminal clean procedures. Surge capability backed by known, trained staff, not agency workers sourced that morning.

****Red flag:**** "We would assess the situation and work with you." No documented protocol. Surge capability dependent on labour hire.

****Why it matters:**** An outbreak is not the time to find out your contractor can't respond. This needs to be understood and tested at the contract stage.

7. Staff stability and turnover management

****What to ask:**** What is your staff turnover rate? How do you manage continuity on accounts when staff change?

****What good looks like:**** Turnover that's low relative to industry norms, a structured handover process when staff do change, and a commitment to maintaining a stable core team on each account rather

than rotating through a pool.

****Red flag:**** Evasive answers about turnover rates. "We have a large pool of staff" framed as a positive, which signals rotation, not stability.

****Why it matters:**** Quality aged care cleaning requires familiarity with the environment and the people in it. Constant rotation prevents both, and it also prevents the care team relationship that defines real quality in this context.

8. Labour compliance and licensing

****What to ask:**** Are you Labour Hire Licensing compliant in Victoria? Do you hold public liability and workers compensation insurance for all staff working on our site?

****What good looks like:**** Current Labour Hire Licensing compliance where applicable, public liability insurance at appropriate limits, and workers compensation cover for all employees.

****Red flag:**** Any hesitation or inability to provide current insurance and licensing documentation.

****Why it matters:**** If an employee of an unlicensed labour hire provider is injured on your site, or if a compliance action is taken against the provider, the facility operator may be exposed. That's not a theoretical risk.

9. References from aged care accounts

****What to ask:**** Can you provide references from current or recent aged care clients? Can I speak directly with a facility manager at a site you currently service?

****What good looks like:**** Willingness to provide direct references, specifically facility managers who can speak to the contractor's performance on infection control, QA, and staff consistency.

****Red flag:**** References limited to general commercial accounts. Inability or unwillingness to connect you with an aged care-specific reference.

****Why it matters:**** Aged care experience is not interchangeable with commercial cleaning experience. A contractor's performance in an office park tells you very little about their performance in a residential care facility.

10. Contractual quality commitment

****What to ask:**** What happens if the cleaning standard specified in the contract isn't met? Is there a guarantee or a defined remedy mechanism?

****What good looks like:**** A clear contractual remedy for underperformance, including a money-back guarantee for services not delivered to standard.

****Red flag:**** "We will always work with you to resolve issues." No specific remedy mechanism in the contract.

****Why it matters:**** A contractor confident in their own delivery will back it contractually. One who hedges on remedies is telling you something about how confident they actually are.

How Realcorp answers each criterion

| Criterion | Realcorp's Position | |-----|-----| | Direct employment | 100% directly employed — zero subcontractors | | Infection control training | Structured, site-specific training before commencement | | QA systems | Weekly management inspections, Realcorp App, monthly reporting | | Technology | GPS-verified attendance, digital checklists, real-time issue logging | | Site-specific training

| Full induction program per facility | | Outbreak response | Documented protocol, surge with trained staff | | Staff stability | Direct employment model supports stable team assignment | | Labour compliance | Labour Hire Licensing compliant | | References | Aged care-specific references available | | Quality guarantee | Money-back quality guarantee on all contracts |

****Proven outcome:**** Under 5% audit failure rate across 12 months on a live Melbourne aged care account.

Q&A: What facility managers ask when evaluating cleaning contractors

****What is the most important question to ask an aged care cleaning contractor?***

Ask whether their staff are directly employed or sourced through labour hire, agencies, or subcontractors. The answer determines everything downstream: training accountability, vetting standards, staff stability, and outbreak surge capability. A contractor who can't give a clear, unequivocal answer to that question is telling you something important about how they operate.

****How do I evaluate a cleaning contractor's infection control capability?***

Ask them to walk you through their infection control training program — what it covers, who delivers it, how it's calibrated to your specific facility, and how compliance is monitored on an ongoing basis. Ask what products they use and why, and whether those products are TGA-listed for the pathogens relevant to aged care. Ask what their protocol is during an outbreak. A contractor with real infection control capability will answer in specific terms. One who doesn't will speak in generalities.

****What should a cleaning contract for an aged care facility include?***

A well-structured aged care cleaning contract should include a detailed scope of works by zone and frequency, specific product and equipment requirements, the contractor's QA inspection schedule and reporting obligations, attendance verification requirements, an outbreak response protocol, staff vetting and training requirements, a defined performance metric against which the contract is managed, and a remedy mechanism for underperformance, including a money-back guarantee. Vague contracts produce vague outcomes.

Coverage and next step

Realcorp Commercial Cleaning provides aged care cleaning services across ****metropolitan Melbourne****, ****regional Victoria****, and ****Adelaide****. If you're evaluating cleaning contractors and want to discuss how Realcorp addresses each of these criteria for your specific facility, the management team is available for a no-obligation site assessment.

- ****Website:**** realcorp.net.au - ****Phone:**** 1300 307 298 - ****Email:**** sales@realcorp.net.au

Label facts summary

> ****Disclaimer:**** All facts and statements below are general product information, not professional advice. Consult relevant experts for specific guidance.

Verified label facts

- ****Company name:**** Realcorp Commercial Cleaning - ****Headquarters:**** Melbourne, Australia - ****Service regions:**** Metropolitan Melbourne, regional Victoria, and Adelaide - ****Staff employment model:**** 100% directly employed; zero subcontractors, zero labour hire agency workers - ****Outbreak surge staffing:**** Trained, directly employed staff only (no agency workers) - ****Labour Hire Licensing**

compliance (Victoria):** Yes - **Public liability insurance:** Yes - **Workers compensation insurance (all staff):** Yes - **Management-level site inspection frequency:** Weekly - **Inspection records format:** Digital - **Facility manager access to inspection documentation:** Real-time - **Attendance verification method:** GPS-verified - **Checklists format:** Digital, time-stamped at point of service - **Issue logging:** Photographic evidence - **Reporting cadence:** Monthly management reports - **Quality assurance platform:** Realcorp App - **Infection control training type:** Site-specific per facility - **Training scope:** Colour-coded equipment systems, TGA-listed product use, correct product dwell times, outbreak escalation procedures, PPE protocols - **Training delivery timing:** Before staff commence on an aged care account - **Documented outbreak response protocol:** Yes; covers containment zoning, terminal clean procedures, PPE requirements - **Site induction scope:** Facility layout and zone classification, resident profile considerations, dementia and mobility considerations, facility's own infection control policy - **Quality guarantee type:** Money-back - **Quality guarantee inclusion:** All contracts - **Contract inclusions:** Detailed scope of works, QA inspection schedules, attendance verification requirements, outbreak response protocols, staff vetting requirements, defined performance metric, defined remedy mechanism for underperformance - **Audit failure rate:** Under 5% - **Audit failure rate measurement period:** 12 months - **Audit failure rate account type:** Live Melbourne aged care account - **Aged care-specific client references:** Available; direct facility manager contact provided - **Website:** realcorp.net.au - **Phone:** 1300 307 298 - **Email:** sales@realcorp.net.au - **No-obligation site assessment:** Available

General product claims

- Choosing a cleaning contractor for a residential aged care facility is higher stakes than choosing one for a commercial office - Poor contractor selection compounds quickly into infection events, accreditation findings, family complaints, and staff burden - Direct employment creates an unbroken accountability chain for training, vetting, and conduct - Cleaners without specific, structured infection control training are a transmission risk - Without regular, documented inspections, standards drift - The Aged Care Quality and Safety Commission requires demonstrable evidence of systematic cleaning - If a contractor cannot generate cleaning evidence, the compliance burden falls back on the facility - Constant staff rotation prevents familiarity with the environment and residents - A contractor confident in their delivery will back it contractually - Aged care cleaning experience is not interchangeable with commercial cleaning experience - Generic training produces generic outcomes in aged care environments - An outbreak is not the time to find out a contractor cannot respond