Sustainability In Sterile Processing: A Presentation



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Transformation Occurred by Addressing Multiple Issues

Accountability

- Deselecting unengaged staff
- Hiring the right staff (staff with a desire to be engaged, supporting your Mission)
- Monitoring performance and holding staff to standards

Education/Training

- Teaching/Connecting the employee and their actions to the impact on patients and fellow employees
 - ❖ Trays delayed to OR
 - Errors in Trays reduced based on hardwiring critical thinking
- Certification

Hard-wiring Quality Control Measures Communication, Communication, Communication

Continuous Education Made Change Possible





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Types of errors

Previous Errors Consisted of:

Contaminated

Holes/Tears

Missing Filter

Missing Indicator

Dirty Instruments

Missing Instruments

Wrong Instruments

Extra Instruments

Broken Instruments

Eye trays: broken and clogged cannulas

Wet Trays

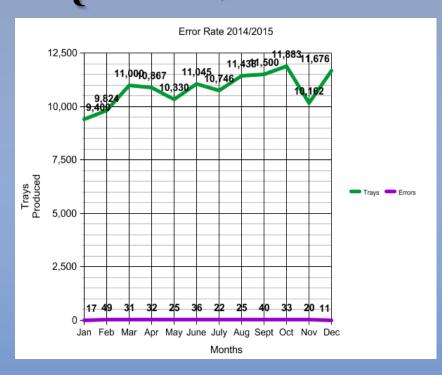
Current Errors Consist of:

Missing Instruments

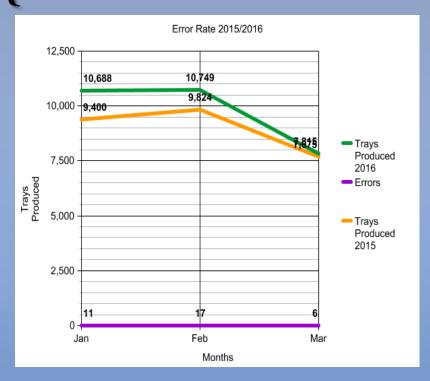
Extra Instruments

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Trays Processed 2014/2015



Trays Processed 2015/2016



Increase in Case Volume & Trays Processed Decrease in Error Rate

Process Improvements

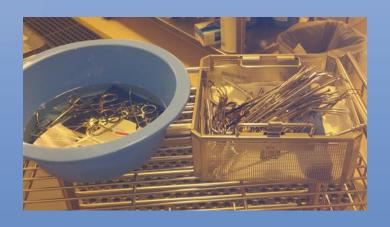
Before



Consistent communication, reassurance and shared responsibility to improve outcomes based on best practices.

Bridging the gap in communication and team building with from OR, Clinics, and SPD personnel.

After



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Staff Certified in 2015

31 staff members

12 certified

38 % Certified

Staff Certified in 2016

34 staff members

32 certified

94 % Certified

Old Workstations



Disarray

New Workstations & Peg Board





Medivators Installed





A department that was slated a year ago to be outsourced is now a leader in the field due to dedication, motivation, and understanding the impact to our patients and community. Their SPD now boasts pride and professionalism.





For more Information Call



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American International Healthcare Group qualified Consultants can review the operations of the Sterile Processing Department (SPD). Our 136 point review can be conducted over a three to four day period and includes a review of daily operations, delivery of products to and from the OR, interactions with other departments, current processes, policies, procedures, and workflow. We also reviewed whether the hospital was following current Joint Commission, AAMI, AORN, APIC, CDC, and IAHCSMM industry standards and best practices.