



**ACCREDITATION CANADA**  
**AGRÉMENT CANADA**  
*Driving Quality Health Services*  
*Force motrice de la qualité des services de santé*

## Reprocessing and Sterilization Standards

Presented by Diana Sarakbi  
Accreditation Product Development Specialist  
Accreditation Canada

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**ACCREDITATION CANADA**  
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## Accreditation Canada

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## What is accreditation?

- Process that organizations use to evaluate and improve the quality of their services
- Involves examining everyday activities and services against standards of excellence
- Strong focus on quality improvement, capacity building, and sustainability

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## Accreditation Canada

- Incorporated in 1958
- Not for profit
- Accreditation Canada International
- Accredited by ISQua (Feb 2014)



ORGANISATION

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### Accreditation Canada (cont'd)

- Clients from across the care continuum :
  - Pre-hospital
  - Hospital
  - Community Care
- Over 1000 client organizations
- More than 500 peer surveyors
- Around 400 surveys per year

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### Qmentum

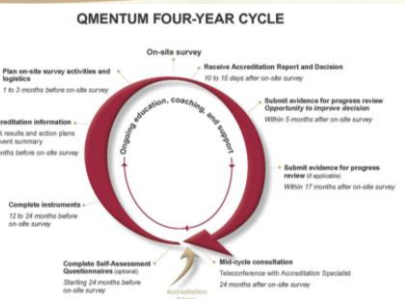
- Qmentum was introduced in 2008
- Outcome-oriented
- Brings quality improvement into daily work



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### Accreditation Cycle

#### QMENTUM FOUR-YEAR CYCLE



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### Qmentum Standards

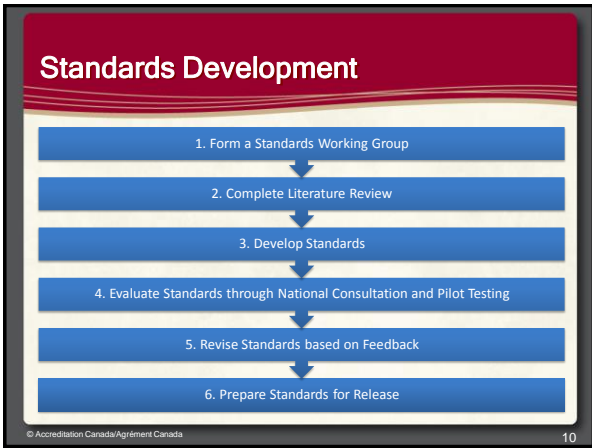
STANDARDS AREAS	POPULATIONS (used by regions)	
	SECTORS and SERVICES	CUSTOM MARKETS
GOVERNANCE	<ul style="list-style-type: none"> <li>Medical Imaging Centres</li> <li>Medicine</li> <li>Mental Health</li> <li>Obstetrics</li> <li>Organ and Tissue Donation and Transplant</li> <li>Perioperative and Invasive Procedures</li> <li>Point-of-Care Testing</li> <li>Primary Care</li> <li>Public Health</li> <li>Rehabilitation</li> <li>Specialized Health Services</li> <li>Transfusion</li> </ul>	<ul style="list-style-type: none"> <li>Aboriginal Health Services</li> <li>Corrections Canada</li> <li>Provincial Corrections</li> </ul>
LEADERSHIP		
INFECTION PREVENTION AND CONTROL		
MEDICATION MANAGEMENT		
SERVICE EXCELLENCE Customized as required for specific sectors, services, and markets		

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REQUIRED ORGANIZATIONAL PRACTICES					
SAFETY CULTURE	COMMUNICATION	MEDICATION USE	WORKLIFE/WORKFORCE	INFECTION CONTROL	RISK ASSESSMENT
<ul style="list-style-type: none"> <li>Accountability for quality *</li> <li>Adverse events disclosure</li> <li>Adverse events reporting</li> <li>Client safety quarterly reports</li> <li>Client safety-related prospective analysis</li> </ul>	<ul style="list-style-type: none"> <li>Client and family role in safety</li> <li>Dangerous abbreviations</li> <li>Information transfer</li> <li>Medication reconciliation as a strategic priority</li> <li>Medication reconciliation at care transitions</li> <li>Safe surgery checklist</li> <li>Two client identifiers</li> </ul>	<ul style="list-style-type: none"> <li>Antimicrobial stewardship</li> <li>Concentrated electrolytes ◊</li> <li>Heparin safety ◊</li> <li>High-alert medications ◊</li> <li>Infusion pumps training</li> <li>Medication concentrations</li> <li>Narcotics safety ◊</li> </ul>	<ul style="list-style-type: none"> <li>Client flow *</li> <li>Client safety: education and training</li> <li>Client safety plan</li> <li>Preventive maintenance program</li> <li>Workplace violence prevention</li> </ul>	<ul style="list-style-type: none"> <li>Hand-hygiene compliance (formerly called Hand-Hygiene audit) *</li> <li>Hand-hygiene education and training *</li> <li>Infection rates *</li> <li>Pneumococcal vaccine</li> <li>Reprocessing (formerly called Sterilization processes)</li> </ul>	<ul style="list-style-type: none"> <li>Falls prevention strategy</li> <li>Home safety risk assessment</li> <li>Pressure ulcer prevention</li> <li>Risk and wound care *</li> <li>Suicide prevention</li> <li>Venous thromboembolism (VTE) prophylaxis</li> </ul>

\* New for on-site surveys starting in 2015  
 \* Revised for on-site surveys starting in 2015  
 ◊ Revised for on-site surveys starting in 2014 or 2015, depending on the set of standards (see ROP for details).

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### Program Updates

**New Standards - Sept 2014:**

- Trauma Distinction

**Revisions - Jan 2015:**

- Client- and Family-Centred Care
- Common Service Content
- Leadership and Governance

**In Progress:**

- Medical Transport
- Cancer Care/Radiotherapy

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### Infection Prevention and Control Standards

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### IPC Standards

- The IPC standards were first released with Qmentum in 2008
- Revised for Jan 2014 with a standards working group
- Updates are applicable during on-site surveys one year after release
- Revisions ensure that standards reflect current research and continue to meet client needs

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### Standards Working Group

Representation from clients, surveyors and the following key associations:



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### National Consultation

- The revised IPC standards were evaluated through the national consultation
- A survey where clients, surveyors and other stakeholders across Canada review and provide feedback on the standards
- Comments were compiled and reviewed with the standards working group

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### National Consultation (cont'd)

Standard & Criterion number	Standard & Criterion	Please rate the following attributes for each standard and/or criterion			Comments Please provide any additional comments.
		Clear The intent of the criterion is clear (Agree / Disagree)	Important The key quality and/or safety issues. (Agree / Disagree)	Assessable Organizations and surveyors can evaluate compliance with this criterion. (Agree / Disagree)	
<i>Please note that some of the criteria have Guidelines that provide further information on the criterion requirements.</i>					
<b>PLANNING AND DEVELOPING THE IPC PROGRAM</b>					
1.0	The organization plans and develops the Infection Prevention and Control (IPC) program based on organizational priorities, evidence and best practices.				
1.1	The organization regularly reviews the IPC components to include in the IPC program based on organizational priorities. <a href="#">[Guideline]</a>				
1.2	The organization reviews evidence and best practices on IPC when planning and developing the IPC program. <a href="#">[Guideline]</a>				
1.3	The organization regularly reviews the resources needed to support the IPC program. <a href="#">[Guideline]</a>				

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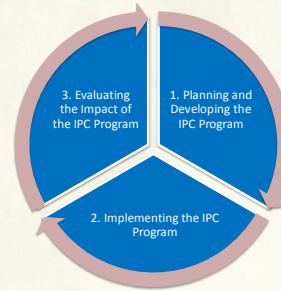
## IPC Standards Revisions

- Language enhancements and addition of a glossary to improve clarity
- Re-structuring the standards to reflect the key steps for developing an effective IPC program

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## IPC Standards Revisions (cont'd)



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## IPC Standards Revisions (cont'd)

### 1. Planning and Developing the IPC Program :

- Collaborative approach with key teams across the organization, including:



- ✓ Medical device reprocessing
- ✓ Environmental services
- ✓ Occupational health and safety
- ✓ Pharmacy
- ✓ Surgical care

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## IPC Standards Revisions (cont'd)

### 2. Implementing the IPC Program :

- Having a multi-faceted approach to promoting IPC within the organization:
  - ✓ Empowering staff to identify ways for increasing compliance with IPC practices
  - ✓ Posting reminders throughout the organization
  - ✓ Providing access to educational tools, e.g. CPSI Hand Hygiene e-learning, and the Clean Learning program for environmental services
  - ✓ Ongoing feedback and improvements


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**IPC Standards Revisions (cont'd)**

**2. Implementing the IPC Program (cont'd) :**

- Maintaining a clean and disinfected physical environment:
  - ✓ Developing policies and procedures
  - ✓ Assigning roles and responsibilities
  - ✓ Cleaning and disinfecting the rooms of clients who are on additional precautions




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**IPC Standards Revisions (cont'd)**

**2. Implementing the IPC Program (cont'd):**

- Developing a comprehensive hand-hygiene strategy:
  - ✓ Staff training
  - ✓ Providing access to hand-hygiene products
  - ✓ Posting reminders about proper techniques for hand-washing and using alcohol-based hand rubs



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**IPC Standards Revisions (cont'd)**

**2. Implementing the IPC Program (cont'd) :**


- Addressing IPC in the occupational health and safety program, including:
  - ✓ Immunization policy to screen and offer vaccinations to staff
  - ✓ Using Personal Protective Equipment (PPE)
  - ✓ Work restrictions for staff with transmissible diseases
  - ✓ Handling bio-hazardous materials

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**IPC Standards Revisions (cont'd)**

**3. Evaluating the IPC Program :**

- Making ongoing improvements to the IPC program based on staff and client input, including:
  - ✓ Processes for cleaning and disinfecting the physical environment
  - ✓ Hand hygiene practices



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## IPC Standards References (examples)

- WHO Clean Care is Safer Care
- PHAC Routine Practices and Additional Precautions for Preventing the Transmission of Infection in Healthcare Settings
- CPSI Canada's Hand Hygiene Challenge: STOP! Clean Your Hands
- PIDAC Best Practices for Environmental Cleaning for Prevention and Control of Infections

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## Reprocessing and Sterilization Standards

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## Reprocessing and Sterilization



- Developed with CSA and released in 2008
- Highlights the essential role of the Medical Device Reprocessing (MDR) department in patient safety
- Minor updates to align with IPC revisions, and CSA references in 2013

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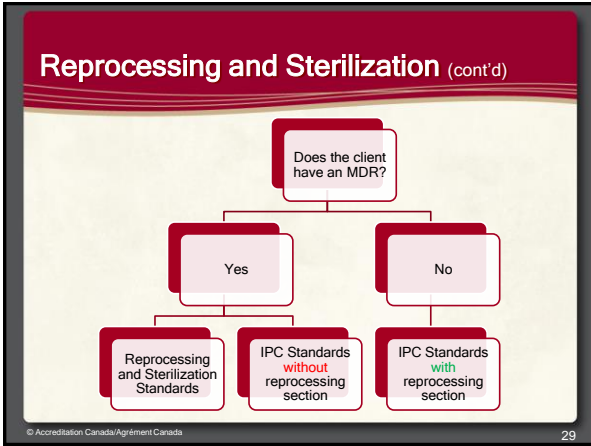
## Reprocessing and Sterilization (cont'd)

- Evaluates reprocessing activities that are completed inside the MDR
- To cover reprocessing activities completed outside the MDR, the following standards were updated with reprocessing content:
  - Infection Prevention and Control
  - Diagnostic Imaging
  - Operating Rooms
  - Ambulatory Care
  - Obstetrics



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### Reprocessing and Sterilization (cont'd)

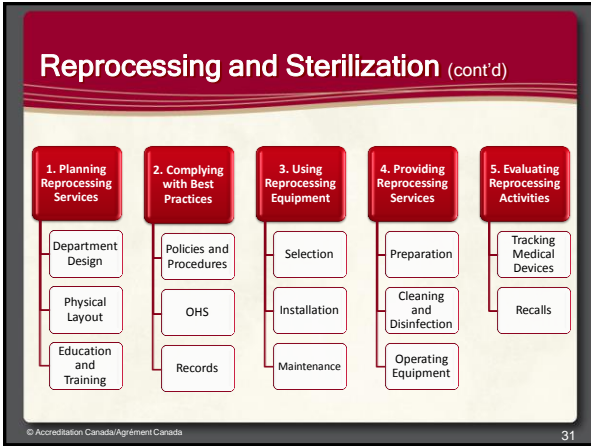
- CSA References
  - 4.6 The team documents and maintains policies, SOPs, standards of practice, and manufacturers' instructions in a manual.
 

Guidelines

The manual may be in written form, e.g. binders, manuals, monographs, and/or in electronic format.

CSA Standards Z314.0.

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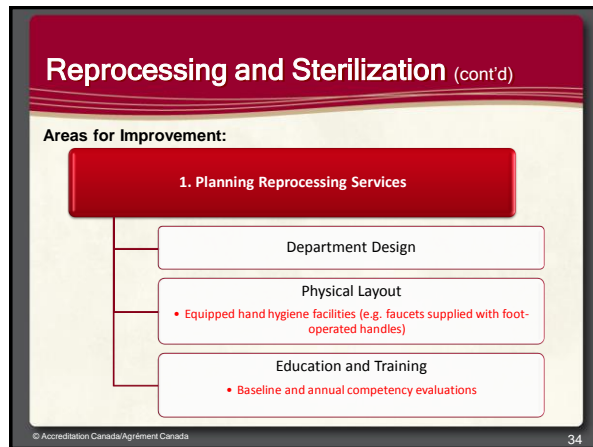
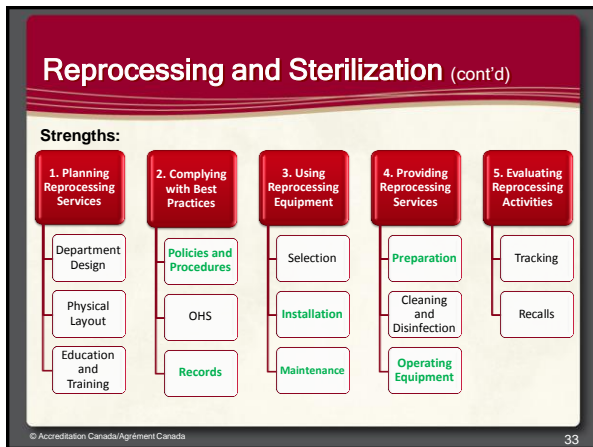


### Reprocessing and Sterilization (cont'd)

- 82 clients were evaluated with the Reprocessing and Sterilization standards in 2013
- Majority were health systems and acute care services
- Overview of strengths and areas for improvement

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- ### Next Steps
- Continuing to enhance the Qmentum standards based on stakeholder feedback and updates from the field
  - Sharing results with partners and stakeholders across Canada to help improve the safety and quality of health care services for patients and their families
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**Thank You!**  
**Questions?**

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