

Risk analysis of a central sterile material supply department



conference of AFS

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In order to increase quality level and to identify potential risks of the sterilization process, a risk mapping was performed.

Materials and Methods:

A scoring gride from NF S98-136 standard was used to determine critical level of each criteria of our sterilization

process Evaluation by a multidisciplinary team: Very unlikely (less than 1/year) 1 point •2 pharmacists 2 points Infrequent (at least 1/year) •1 intern •2 health managers incidence Frequent (at least 1/once a month) 3 points •2 production referents Very frequent (at least 1/week) 4 points •4 production officers •1 quality assurance technician High 1 point **Critical score** detectability Intermediary 3 points 399 criteria (multiplication of Impossible 5 points evaluated in 2 incidence. central sterile material supply detectability and departments severity rate) Severity rate Low consequence 1 point 1 to 10 points Acceptable risk No action 3 points Important and reversible consequence (for patient) Acceptable risk under Important and non-reversible consequence 5 points Action plan 11 to 30 points control **Immediate**

Results and discussion

operating room team is not aware of unavailable surgical trays for next day

highly 2 (0.5%) moderate 18 (4.5%) low 379

delivery of non compliant items to operating rooms



31 to 100 points

- Just one of 2 units is concerned
- Cause: Sterilization team had to give a list of non compliant surgical trays of the last cycle of the day but this is not always done.

Unacceptable risk

action

• Action : Due to informatisation of sterilisation process, a delivery note is given to the operating room team. They could also use an application on the hospital intranet site to know where are surgical tray at any time. We reminded again the sterilization team of the necessity to inform the operating room team.

To monitor actions, an audit was performed for each high and moderate critical level criterion

- · Both units are concerned
- Cause: non compliant items are not always identified by specific labels
- Action: a basket identified by "non-compliant" inscription on all side was created. The production officer put non compliant items directly after sterilization in this basket
- An action plan was made for the 18 criteria with a moderate critical score : 10 are now solved, 8 are in progress

Critical levels were different between the 2 central sterile material supply departments. Only 2 criteria had a highly critical score that's why actions had quickly set up to solve them. After revaluation, this points had a moderate critical score because of intermediary detectability level and highly severty rate (only frequency decreased). Since 2007, sterilization process was certified ISO 9001 and many things were ever formalized. This study brought to light expected and non expected points. Multidisciplinary team allowed an extensive evaluation of all criteria.

Conclusion: risk mapping is an excellent tool for continuous improvement identifying weak points of the sterilization process. It leads to a situation, where all the people involved as a team work together with a common goal of outstanding results.