

Process Optimization for Improved Delivery of Surgical Instruments

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Collaborators





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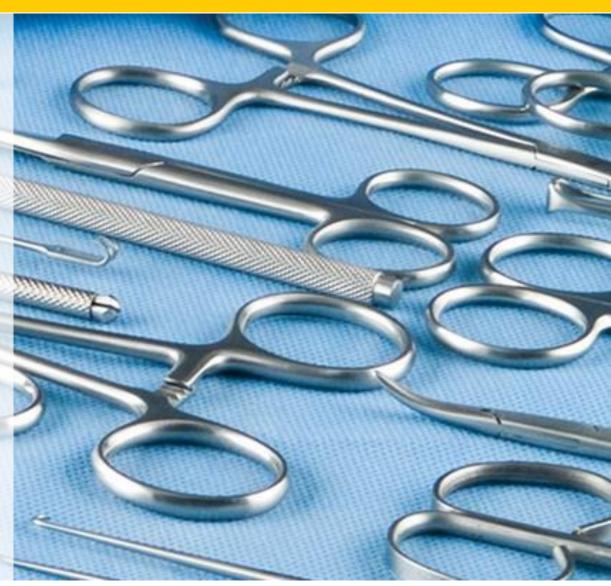
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Outline



- Motivation & Background
- Current Issues
- Solutions
 - Cleanability Index
 - Cleaning Time Estimation
- Future Work
- Questions







MOTIVATION & BACKGROUND









Goals



"To have all items required for the proper care of the patient **available** at the time of surgery, properly **cleaned**, **sterilized**, and **in working condition** – while ensuring the efficient use of resources."

--Shawn Murphy, Director of OR Nursing



Key Terms



Bioburden Contamination by tissue from a previous surgical

case (e.g. blood, bone)

CSPD Central Sterile Processing Department

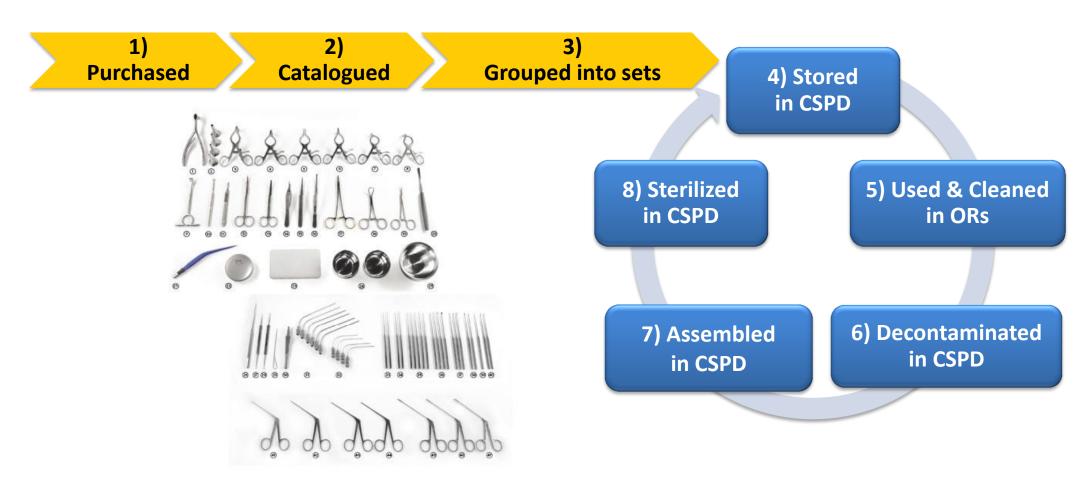
OR Operating Room

Surgical Case Surgery



Surgical Instrument Cycle



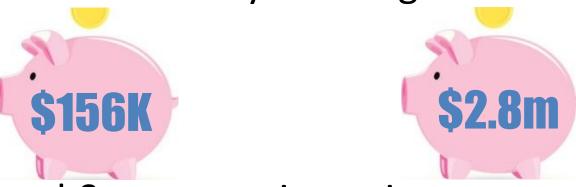


Tympanoplasty Instrument Set

Surgical Instrument Reprocessing



Industry-wide efficiency challenge



- Complicated & resource-intensive process
- Current state at UMHS:





51,000+ cases per year → 65-70 cases per day



4,000 instruments processed per day





CURRENT ISSUES







Contributing Factors





These issues lead to Surgery delays, potential hazards to patients, and excess workload for staff.

Key Issues



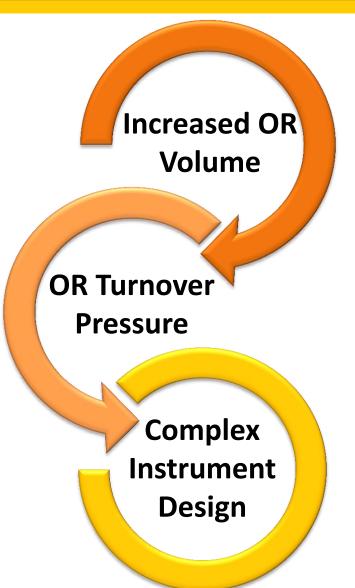
Institutional outcome measures not being met:



Current Challenges





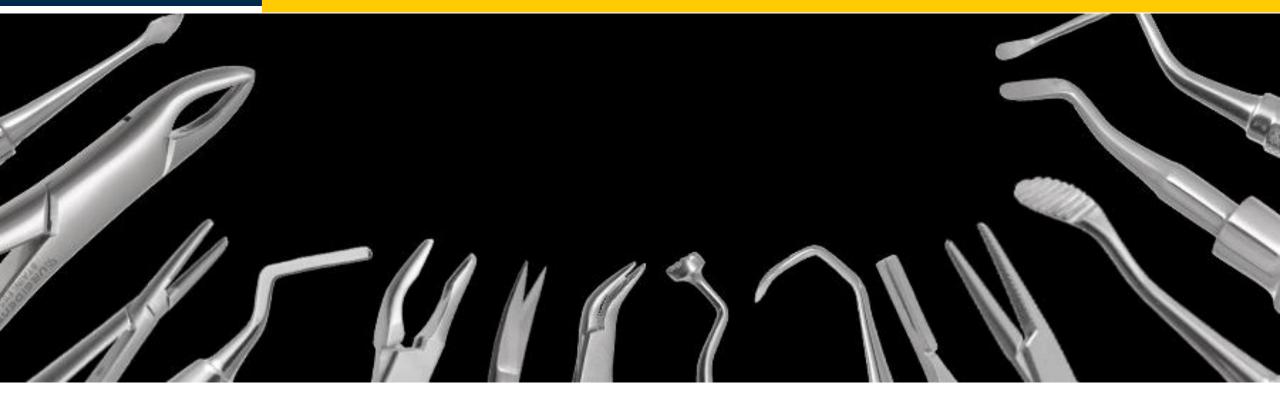


CSPD struggles to keep up with the demand

 OR staff forgo point-of-use instrument-cleaning protocol

 Each instrument has a unique cleaning protocol (IFU)





SOLUTIONS







Cleanability Index





Systematically determine:

- An instrument's level of cleanability (e.g. 1-10 scale)
- A set's level of cleanability based on its instruments
- Appropriate cleaning effort of each set



Feature: Blade



Feature: Hinges



Goal

Develop an instrument "Cleanability Index" (CI) for all Neurosurgery instruments



- Focus group surveys
- Instrument feature ranking games
- Analytical Hierarchy Process



Cleanability Index



Findings and Conclusions

- With this information, we identified Neurosurgery's low-risk and high-risk instruments (1.3%) and their associated design features
- Preliminary analysis showed positive correlations between
 - Staff perceptions and trending bioburden incident data
 - Staff perceptions and hard-to-clean instruments identified by the CI system
- Results could be used to guide additional cleaning efforts









Objectives

Quantify time needed for:

- Bulk cleaning of easiest-to-clean instruments
- Additional cleaning of hard-to-clean instruments
- Soaking & ultrasonic cleaning





Estimate time needed for high-quality

cleaning



Methods

- Observations & time studies
- Excel-based modeling







Observations:

- 12 sessions across all shifts
- 26 videos filmed



Result times (Avg+1SD):

- Bulk cleaning: 5.2min
- Hard-to-clean instrument: 6s 60s
- Soaking & ultrasonic: 20min





Findings and Conclusions



Most sets require around 30 minutes of cleaning time

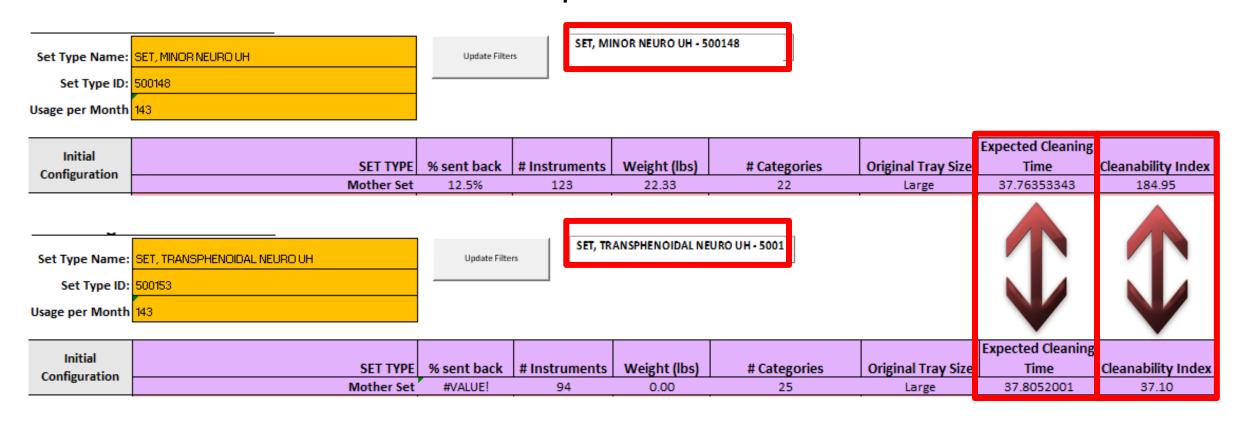




Variabilities between similar instruments and across different individual staff are surprisingly high



Instrument Set Dashboard Examples:



Potential Impact



Institutional outcome measures potential improvements:







FUTURE WORK



Future Work



1

2

• Standardize the cleaning procedures across CSPD technicians and similar instruments

• Expand the Instrument Set Dashboard to other instrument sets beyond Neurosurgery

- Use the Dashboard to identify additional bioburden-prone instruments
 - Separate these instruments to form a new set
 - Allow for more cleaning time to focus on such instruments



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Questions?



Thank you!

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