



Laying the Groundwork for Safety in Practice:

**The Value of Third-Party Assessments
for Perioperative and Sterile
Processing Departments**

A healthcare environment in which all team members follow current standards of care is the foundation of patient safety. That is what hospitals and health systems strive for, and what healthcare professionals expect of themselves. With both the organization and the staff committed to operationalizing best practices for safe care, why does patient safety remain an elusive goal?

Of every 100 patients admitted to a hospital, five will acquire an infection during their stay, according to the U.S. Centers for Disease Control and Prevention (CDC).¹ Surgical site infections (SSIs) are the most common, accounting for 30 percent of hospital acquired infections (HAIs). “While advances have been made in infection control practices, including improved operating room ventilation, sterilization methods, barriers, surgical technique, and availability of antimicrobial prophylaxis, SSIs remain a substantial cause of morbidity and . . . mortality,” notes the CDC.²

Hospital stays due to *C. difficile* infections – one of the most serious HAIs – have tripled in the last decade, according to the CDC. In addition to the toll on the individual patient, the presence of *C. difficile* in the facility increases the risk for all patients due to the ease of cross-contamination. Studies have shown, however, that hospitals following recommended infection prevention and control measures have reduced these infections by 20 percent.³

Healthcare workers have actively worked to implement changes to address safety issues at their facilities. Their commitment to understanding their current performance and pursuing solutions that enhance safety is evident. This, however, is not an easy journey. Most will turn to research-based standards of care that reflect the best thinking of experts on how to achieve specific goals. The challenge is to bring that body of knowledge and the best intentions of practitioners together to positively affect patient safety.

THE COMPLIANCE CHALLENGE

Among the key organizations issuing guidelines for safe practices in the perioperative and sterile processing departments are the Association of Perioperative Registered Nurses (AORN), the Association for the Advancement of Medical Instrumentation (AAMI), and the CDC. Their evidence-based recommendations complement the hospital’s own standards of care, as well as the training, ongoing education, and (in some cases) certification that nurses, clinicians, and technicians pursue throughout their careers.

The potential benefits of routinely implementing standards of care are clear: a reduction in preventable errors, lower infection rates, better cost control, greater patient and staff satisfaction, to name just a few. However, maintaining compliance can be difficult. Among the challenges:

- **Too many priorities** – Competing priorities and calls to action are a significant challenge. Which of the priorities takes priority? Given the multiple “expert opinions”, it is sometimes difficult to know how to interpret the information, or which one may be most credible and therefore followed.
- **Interpretation of guidelines** – Some guidelines are supported by research and some are not. While guidelines may seem to make sense, it is not unlikely for professionals to disagree on the validity of the evidence that supports the guidelines.
- **No clear lines of responsibility** – Whose job is it to maintain updated practice guidelines on behalf of the department? The responsibility may be unclear or shared among several individuals, such as the nurse educator, nurse manager, and service line leader. The department may depend on staffers who belong to a local AORN chapter, say, to learn of new standards and present them to the rest of the team. In any case, the lack of clearly defined responsibilities can result in the department losing touch with recommended practices.
- **Lack of time** – Workforce reductions in recent years have led to a heavy burden on healthcare managers. Prioritizing these responsibilities may mean that keeping abreast of practice guidelines is near the bottom of the to-do list given the critical demands of caring for patients and managing staff.
- **Complacency** – In healthcare as in any profession, job familiarity and the day-to-day routine can lead to complacency about keeping up with advancements in the field. Some clinicians may even discount new approaches that run counter to practices they have been following and trusting for years.

- **The pace of change** – With advances in medicine come updated standards of care. The increasing attention to patient safety risks has led to a wave of new guidelines and many organizations find it difficult to keep up with the changes. Continuing education programs, which should be focused on developing new competencies in line with updated recommendations, also may be behind the curve.

Since most hospitals do not routinely observe their perioperative and sterile processing departments, it is likely that their policies and procedures may not be based on the latest standards of care. A first step in ensuring that these areas are under compliance is to get an objective assessment of current processes.

THE VALUE OF THIRD-PARTY ASSESSMENTS

In an on-site review of the perioperative or sterile processing environment, trained observers evaluate the interactions of people, processes, equipment, and infrastructure during normal working conditions over a period of time, typically two to three days. Observational evidence is typically augmented with personnel interviews and evaluation of administrative claims data on patient outcomes. The findings are benchmarked against the relevant standards of care and recommended practices to help the hospital identify gaps in compliance that can impact the quality and safety of patient care.

While an internal review can be helpful, the greater value lies in an objective assessment by a knowledgeable third-party reviewer. A well-conducted external review offers a number of advantages.

Observers are licensed or certified healthcare professionals who bring extensive specialized knowledge and awareness of the latest guidelines to the assessment. Plus their wide experience in observing the practices, policies, facilities, and workflows of other healthcare organizations enables them to add an invaluable outside-in perspective to improvement initiatives.

In addition, outside reviewers are objective and unbiased, and their findings are unlikely to be influenced by personnel considerations or departmental politics. Their goal is to help hospitals verify compliance and create a clear plan of action to gain compliance where needed.

Operating Room Review

An on-site review of operating room practices can include the following areas:

- Traffic patterns
- Surgical attire
- Hand hygiene and surgical hand antisepsis
- Hair removal
- Patient skin prep and adherence to manufacturers' directions for use
- Aseptic technique
- Patient warming



Sterile Processing Review

An on-site review of equipment reprocessing practices can include the following areas:

- Personnel considerations
- Facility Design
- Handling, collecting, and transporting of contaminated items
- Cleaning and decontamination
- Instrument inspection and packaging
- Steam sterilization
- Sterile storage
- Documentation



An external assessment can first confirm and validate the success of prior improvement efforts and confirm the staff's commitment to following industry guidelines. It can also provide the clarity that a departmental manager needs to confirm suspected gaps and prioritize recommendations for change; it can be the catalyst for change and provide support in making the business case for additional training or facility improvements. For a new manager, an outside review can provide a relatively quick snapshot of compliance status that may otherwise take weeks or months to emerge.

A PLAN FOR CHANGE

Following the review, a written assessment is prepared and presented to the designated stakeholders (facility executives, departmental managers, service line leaders, quality managers, nurse educators, training leaders, etc.). This evaluation shows how the department meets or diverges from practice guidelines in the critical monitored areas. (See sidebars.) This information enables the stakeholders to:

- Celebrate areas of strength where staff members consistently follow the standards of care. Communicating these findings to the team can serve to recognize and reward their performance and create positive feelings about tackling other areas.
- Identify gaps in processes, performance, and infrastructure that require improvement.
- Prepare a plan to address the gaps, with established priorities and timelines. Sharing this information with leadership can help secure the necessary resources to implement the improvements – such as additional training or facility modifications.
- Choose an executive-level champion for the initiative to drive and sustain the effort over time.
- Measure progress by establishing key metrics and monitoring performance.
- Sustain the improvements by implementing the necessary reporting methodology and governance structure, supported by periodic assessments to correct out-of-compliance behaviors as early as possible.

3M: HELPING HEALTHCARE FACILITIES ACHIEVE AND SUSTAIN COMPLIANCE

At 3M, our mission is to be a partner with hospitals and health systems to help organizations understand their current performance, make the necessary changes to adhere to best practice, and monitor performance in order to be “always ready” to respond to any infection prevention department’s inquiry, a hospital committee, hospital governance or reporting/review agency. 3M Onsite reviews include patented* analytical methods and are based on the latest practice guidelines from professional organizations such as AAMI, AORN, and the CDC. Our perioperative reviews are conducted by licensed RNs. Reviews of sterile processing departments are conducted by experienced technical service professionals, all with Central Service certification. Our team understands the guidelines from relevant agencies and professional organizations and provides them in a clear, consolidated format to the healthcare facility. Our reviewers stay current with continuing education and industry updates, and have experience in helping many healthcare organizations evaluate and improve their safety practices.

In addition to on-site observation, 3M reviewers leverage administrative data to help providers understand how their clinical practices are impacting clinical and financial outcomes. All of these findings are integrated in a report that identifies areas of opportunity and offers recommendations on improving adherence to best practice guidelines. In addition, 3M provides a control plan to monitor the progress, and can conduct follow-up reviews to help the institution monitor performance, reinforce guidelines as needed, and sustain positive changes.

REFERENCES

1. <http://health.usnews.com/health-news/news/articles/2013/09/03/hospital-acquired-infections-cost-10-billion-a-year-study>
2. <http://www.cdc.gov/nhsn/pdfs/pscmanual/9psccscurrent.pdf>
3. <http://www.cdc.gov/VitalSigns/Hai/StoppingCdifficile/>

Case Study: Solving a Mysterious Rise in SSIs



Case Study: Continuous OR Improvement



View Program Details



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