CAMDR
# NEWSLETTER

Term: Fall 2018 | Issue 9

## PAST PRESIDENT'S CORNER

As I draft this message, I am thinking back to our first national conference in Winnipeg where we held our first national conference! What a success to have so many MDR professionals support this new organization - CAMDR in sponsorship, partnership and membership! We thank each & every one of you who have the insight to see how this association can provide you with the opportunity to 'keep on top of technology and network amongst our vendors and colleagues. CAMDR is in its 4th year!

One main goal for this year was education accessibility on the CAMDR website. I am pleased to advise that we have met this goal to provide MDR professionals who are CAMDR members with access to online education that is required to keep current. Many thanks to our dedicated sponsors. We sent out a survey to obtain input from our members on pertinent topics for our third biennial conference in Halifax-Oct.11-14, 2018. Our theme –Navigating the Tides of Medical Device Reprocessing! We had great feedback and thanks to all those who participated to ensure a successful conference.

MDR week was celebrated the week following our Biennial conference in Halifax. On behalf of the CAMDR executive, I want to congratulate all MDR professionals for the service you provide across our nation. Please celebrate the work you do on an ongoing basis and acknowledge your colleagues for their commitment to provide safe and quality service to our patients.

I also encourage you to remember to renew or bring in a member to expand our growth to include all MDR professionals. Check the website at www.camdr.ca

Albert Csapo has now taken over as your third CAMDR President and we look forward to working with him over the next two years. As well we welcome Dalyce Fredette-Percy as President- Elect and Becky White as Secretary.

**Merlee Steele-Rodway, RN**
*Immediate Past President*

# WELCOME NEW CAMDR LEADERS

**Board of Directors!**

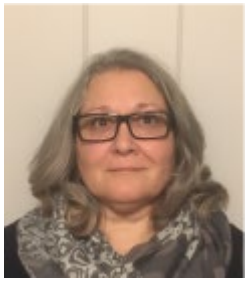
**Albert Csapo**
President

**Dalyce Fredette-Percy**
President Elect

**Rebecca White**
Secretary

**NEW Provincial Advisors**

**Donna Deans**
Alberta



**Laura Struthers**
Manitoba

**Danny LeBlanc**
Nova Scotia

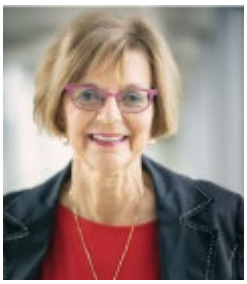
**Jake Earle**
Newfoundland & Labrador

**Continuing Provinicial Advisors**

**Samantha Shone**
British Columbia

**Patrick Quinn**
Saskatchewan

**Stephenie Naugler**
Ontario



**Josette Forest**
Quebec

**Deborah Paget**
New Brunswick

**Thelma Floyd**
Yukon

A View into a Large MDRD Redevelopment Project

by Stephenie Naugler, CSPM

Manager, MDRD St. Michael's Hospital, Toronto ON

CAMDR Provincial Advisor, Ontario


Like most long standing hospitals across Canada, St. Michaels's Hospital Medical Device Reprocessing Department (MDRD) was showing its structural age and in desperate need of complete redevelopment of the 16,000 square foot space to meet the accreditation requirements and the CSA guidelines for a compliant MDRD.

Some of the known environmental issues for the MDRD were poor lighting, no monitored HVAC, sloped ceilings, uneven flooring, challenging work flow pathways, outdated equipment with high energy consumption and high repair costs plus our gems were massive chamber sterilizers over 35 years old.

Construction planning was underway in 2013, to build a new 17 story patient care tower of the hospital with eight new ORs. The adjacent structural foundation walls for the MDRD would be impacted by the footings for the new patient care tower which presented the leadership team an opportunity to redevelop the MDRD space and change the way we conducted our business.

The program leadership team, Human Resources consultant met with the Union Business Agent to announce the redevelopment of MDRD space and reassured staff that their jobs were secure. As part of the required project work however workflow, task locations and hours of work may need to be adjusted to support all of the redevelopment components.

Prior to the start of the redevelopment project, we completed the Request for Proposal (RFP) for all of our major reprocessing equipment. Along with these critical machines was the list of transfer carts, manifolds, height adjustable sinks/work stations, and stainless steel tables. The vendor along with our MDRD team worked to redesign our positive processes, one-way work flow and established the efficient placement of all new equipment, along with all furniture and fixtures in the redeveloped space.

We also issued an RFP for an interim solution that would support current volumes of over 250,000 items annually from 30+ internal customers with no reduction in service, meeting all the standards for reprocessing of medical devices and using our own departmental staff running 24/7. Through the RFP process, one vendor with a mobile reprocessing unit was selected to support the hospital through the redevelopment project cycle.

We held meetings with the Union/staff to review new schedules. We had to increase our night shift from 4 to 7 staff and created a mid-shift from 10am to 6pm where the bulk of our work took place. The planning team developed space alongside, but adjacent to the mobile unit to ensure we had a soiled side with redundancy built in with an extra decontamination sink, a second ultrasonic, and a cart wash area. A second space for clean case carts, spare common instruments, supplies, linen, low temperature sterilizer and implant caddy's along with our Team leader's work station was outside the mobile unit.

The Mobile MDRD was planned to arrive on site May 2016 with another month for set up and commissioning of the trailer before we could move into the unit. As part of the assessment of work process and workflow redesign, we moved to as many temporary disposable trays/instruments as possible. The vendors, MDRD workforce and practice consultant conducted a time in motion review of current department activities with the goal to make recommendations for the interim mobile MDRD work processes and final stage of work process in the redeveloped MDRD space. We moved from a 16,000 square foot space work space to 900sq. ft., 53 foot long air conditioned mobile unit.

We had an Operational Readiness project team working with MDRD staff to establish new flows for transportation of clean and soiled case carts to and from the mobile unit. We also established a workflow to manage our clinic workload of 30+ customers in addition to 26 operating rooms running with an average of 62 cases per day.

The MDRD redevelopment project was comprised of four phases; phase 1-moving our reprocessing (Decontam/Assembly/Sterilization) to the floor above and into the external mobile unit; phase 2-moving our sterile storage into a vacated renovated clean space; phase 3-moving our sterile storage back to our renovated space; phase 4-moving our reprocessing activities back into the newly redeveloped MDRD space. Before each phase, our Operational Readiness team reviewed the new workflows, completed mock runs with our transport teams, OR Patient Service Assistants and MDRD staff.

Our renovation project was completed in 18 months and despite the equipment breakdowns, water and electrical issues, and one fire in our temporary MDRD, we did not cancel any surgeries. That's what we call SUCCESS!

## Have you Renewed your CAMDR Membership?

**$50 CAD – 1-Year Membership is valid from now to December 31, 2019**
**$80.00 CAD — 2-Year Membership is valid from now to December 31, 2020!**

**Click Here to Renew!**

## Online Education Modules

Sign up as a member to obtain your user ID for access to the online education modules supported by:

### Watch this video for How To Login!

| | |
|---|---|
| 3M Science. Applied to Life.™ | ➢ A Review of Sterilization Methods and Recommended Practices for Healthcare Facilities Part 1<br>➢ A Review of Sterilization Methods and Recommended Practices for Healthcare Facilities Part II: Terminal Low Temperature Sterilization<br>➢ Improving the Quality of Endo Processing<br>➢ What is Happening Inside that Magic Box?<br>➢ New Tools for Your VH202 Sterilization Tool Box!<br>➢ The Science of Speed: Rapid Readout Biological Indicators in Healthcare Today |
| CANTEL MEDICAL | ➢ Scope Buddy In-Service and Competency Assessment<br>➢ Advantage Plus In-Service and Competency Assessment<br>➢ DSD Edge Quiz<br>➢ Steril Processing Quiz |

| | |
|---|---|
| GETINGE GROUP | ➢ Principles of Decontamination<br>➢ Traceability and T-DOC Instrument Intelligence<br>➢ Contamination Monitoring vs Biofilm<br>➢ A Cavitating Experience! Ultrasonic Cavitation for MDR Professionals<br>➢ Immediate Use Steam Sterilization<br>➢ Fundamentals of Steam Sterlization |
| ASP® PART OF THE Johnson & Johnson FAMILY OF COMPANIES | ➢ Equipment qualification: (IQ, OQ,PQ)<br>➢ Inspection as part of preparing medical devices for reprocessing<br>➢ Operating the STERRAD®100S Sterilizer<br>➢ Hydrogen Peroxide Safety<br>➢ Monitoring the STERRAD®100S: Using Displays and Printout<br>➢ Monitoring the STERRAD®100S Sterilizer:Using Chemical Indicators<br>➢ Sterrad NX Operation<br>➢ NX Hydrogen Peroxide Safety<br>➢ NX Monitoring Using Chemical Indicators<br>➢ NX Monitoring Using Displays and Printouts |
| nanosonics Infection Prevention For Life. | ➢ Challenges in Ultrasound Probe Reprocessing<br>➢ Addressing Challenges with Infection Control Practices in Ultrasound<br>➢ Ultrasound Probe Use and Reprocessing Ruth Carrico<br>➢ Traceability of Processed Devices: Application to Ultrasound Probes Rose Seavey |
| STERIS® | ➢ Welcome to the SPD<br>➢ Cleaning decontamination 101<br>➢ Steam Sterilization 101<br>➢ Endoscope Reprocessing 101 |

# CAMDR Member Wins International Award!

Christina Fast of Alberta was presented with the **Educator of the Year Award** by the International Association of Healthcare Central Supply Material Management (IAHCSMM) at their conference in Phoenix, Arizona in April 2018. Read on to find out more about Christina's fascinating career!


Christina is originally from Abbotsford, British Columbia (BC), grew up in Kamloops BC, and now living in Calgary, Alberta (AB) since 2010. Christina trained as a sterile processing technician in 2006 at Okanagan Community College in Kelowna. After completing her practicum and working casually in the MDR department at the Royal Inland Hospital, Kamloops (BC), Christina traveled and worked in Melbourne, Australia, as well as Calgary, (AB). She became a certified instructor through IAHCSMM in 2010 and began teaching newly immigrated healthcare professionals unable to work in their formal profession to become Certified Medical Device Reprocessing (MDR) Technicians at Alberta Business and Education Services until February 2017. In 2011, at the age of 24, Christina volunteered as an Operating Room Sterilizer onboard the Africa Mercy (Mercy Ships) which was docked in Sierra Leone. During this time, she had the opportunity to visit a few local hospitals. Through conversation with a local surgeon, she was informed that the post-operative infection rates in patients were over 90%. Autoclaves were broken and used for storage. Instruments were cleaned with laundry soap and a worn brush or cloth. In place of sterilization, instruments were soaked in bleach water that was changed once a week.

On her return to Calgary Christina looked for organizations that worked internationally in low and middle-income countries (LMICs) to improve practices. When no organization was found, she worked with other volunteers and started **Sterile Processing Education Charitable Trust (SPECT)**. SPECT became a registered Canadian charitable trust in 2013 and a charitable company in the United States in 2015 (www.spectrust.org).

Partnering with Mercy Ships, Grand Challenges Canada, Assist International, and LifeBox, SPECT has provided education and training in Guinea, Republic of Congo, Madagascar, Benin, Ethiopia, Cameroon, and Tanzania. Christina works countless hours assisting to coordinate, organize and provide training through SPECT, as well as to communicate the work SPECT is doing through social media platforms and fundraisers. She is also working with government officials to update instrument processing guidelines in national infection control manuals in Ethiopia. Over the past 7 years Christina has provided MDR training for 500+ workers in over a 100 hospitals and healthcare facilities (75 hospitals, 80 health centers).

Besides training people, Christina has worked with SPECT to introduce a simple steam sterilization system due to the many broken autoclaves she has seen in African hospitals and clinics. She, along with SPECT, have distributed 88 sterilization systems to health care facilities that had no functioning autoclaves in Madagascar and Benin, along with the education to improve their sterilization processes.

Recently a research study was done identifying the impact of Christina's training on staff retention of knowledge and MDR processes in Benin. It was found that participants' retention of knowledge of MDR practices had increased by an average of 18% three months following the training. The biggest difference however, was in how participants approached their work. They learned that without proper cleaning an instrument cannot be sterilized. One participant noted, "Now we know the importance of cleaning and disinfection – we respect the different steps. For example, for the cleaning we now take our time to remove the gross soils and blood clots and we inspect (the instrument). We didn't do that before." Other participants identified how their increased knowledge changed their practice. One stated: "Before when we worked we did as we liked because we had no idea how to handle the instruments properly, but now with the training we take our work seriously and do the right thing at the right time."

Five participants from one hospital and four from another identified a reported decrease in surgical site infections (SSI's) following training. One person stated: "The risks of post-surgery infection is really reduced. We have fewer patients that come after surgery with infections." Another supported the previous comment by identifying that: "We used to have cases of post-surgical infections but now it is reduced." At another hospital, one participant explained; "We have been wondering where patients got their infections from. We tried cleaning the whole room but there was no difference. But from the training we received we now know that infection can come from the instruments because of the cleaning steps that we neglected. We thank God now and SPECT that we have less infections."
Follow up with these individuals to identify how they knew that there were less infections found few quantitative findings to support their comments. However, one participant stated they went to the ward nurse each week to see if they had any SSI's; and that the ward nurse was reporting fewer SSI's than before the training. Another indicated that they received fewer complaints from surgeons reporting patients with SSI's. A participant from Madagascar, when asked whether training had made any difference, stated: "Before Christina came the surgeons always yelled at us because their patients were getting infections. After the training, no one yells at us anymore." The fact that participants identified hearing fewer complaints indicates education and training in MDR is a move in the desired direction when it comes to prevention of SSI's.

Christina has volunteered with the Africa Mercy, the world's largest non-profit floating hospital that provides free surgery to the worlds forgotten poor along the coast of West Africa, twice a year for three to ten weeks for the past six years. Onboard the Africa Mercy she taught the IAHCSMM course to two men from Sierra Leone who were the first to be certified from their country. She is an active member of SPECT's board and has volunteered countless hours to grow the organization. SPECT was successful in obtaining an $112,000 Grand Challenges Grant in 2013, and has since obtained contracts with Assist International and Mercy Ships Canada totaling $290,000. Christina and friends, in collaboration with SPECT, have held several fundraisers raising over $60,000 to continue SPECT's work.

In November 2015 Christina was selected as a recipient of the Mennonite Economic Development Associates (MEDA) “20 under 35 Young Professionals Changing the World” award. In February 2017 Christina was a guest speaker at the Christian Medical and Dental Association (CMDA) Conference in Chiang Mai, Thailand. Her presentation was titled ‘Medical Device Reprocessing for LMIC’s’. In October 2017 Christina was acknowledged as one of Calgary’s top 40 people under 40 making a difference in the world by Avenue Magazine, Calgary, for her volunteer work and educational contributions. http://www.avenuecalgary.com/City-Life/Top-40-Under-40/2017/Christina-Fast/

Christina is also a co-author, publishing in the British Medical Journal Global Health in 2017 http://gh.bmj.com/content/2/Suppl_4/e000428 and the Antimicrobial Resistance and Infection Control Journal in 2018. She has presented SPECT’s work at global conferences with co-authors and is collaborating with colleagues from Harvard and Stanford University to increase awareness of the need to address sterile processing issues in low- and middle-income countries as part of a global health initiative aimed at improving surgical outcomes. She is also active in speaking engagements and fundraising functions in Alberta and British Columbia.

In summary, Christina has taken her vision of improving sterilization practices and decreasing SSI’s in LMIC’s and made it a reality. She has trained internationally educated healthcare professionals here in Calgary to maintain the high sterilization standards found in Calgary’s hospitals, and expanded that training to include the countries from which these locally trained professionals come. By providing education and training in LMICs, thus improving healthcare, she seeks to bridge the significant patient safety gap in quality of medical device reprocessing in healthcare between high-income countries and low to middle income countries. She gives freely of her time and energy to do what she loves - help people learn to CLEAN WELL!
If you are an individual, group or company who would be interested in supporting the efforts of SPECT by sponsorship or volunteering; Christina can be contacted at cfast@spectrust.org

Congratulations Christina!

CAMDR
Canadian Association of Medical Device Reprocessing

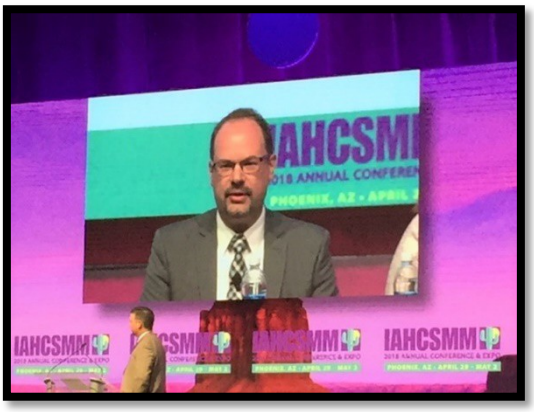
ACRDM
Association Canadienne en Retraitement Des Dispositifs Médicaux

# CAMDR's Scientific Director receives 3M *Champion of Infection Prevention and Control* (IPAC)

Dr. Michelle Alfa PhD, FCCM of Winnipeg was awarded the 2018 Champion of Infection Prevention and Control Award at the IPAC-Canada Conference in Banff earlier this year! This award is presented to an IPAC-Canada member who displays their dedication to the profession through various projects and initiatives, or who is deserving of recognition of lifetime achievement.
Dr. Alfa is recognized for lifetime achievements in the prevention of infections through education on the importance of environmental hygiene, cleaning and disinfection. Her research studies are internationally respected and her methods are utilized in institutions across the world. Dr. Alfa is a favourite presenter at CAMDR conferences and is always willing to provide education in person, consultations via email or on line.

Over the past 28 years, her primary research has been to hospital acquired infections, specifically related to (i) improving reprocessing of complex medical devices and (ii) monitoring disinfection/cleaning of the healthcare environment to reduce the risk of infection transmission.
Dr. Alfa has over 150 publications and has received many awards for her teaching. She also received the 'Distinguished Microbiologist' Award from the University of Manitoba.
Congratulations Dr. Alfa!

# CAMDR's President-Elect Guest Speaker at the 2018 International Association of Healthcare Central Supply Materiel Management (IAHCSMM) Annual Conference




Albert Csapo; President-Elect of CAMDR (at the time ) and a 25 year veteran of Vancouver Coastal Health in British Columbia co presented with Dr. Brad Catalone of TSO3 Inc. and three other presenters at the IAHCSMM Conference in Phoenix, Arizona. The topic was 'ERCP and Superbugs: Interactive Perspectives on Best Practices'. More evidence is emerging that High Level Disinfection (HLD) is not enough to ensure that patients undergoing ERCP procedures are not exposed to superbugs. During this presentation, Albert shared his departments' experiences that is helping to reduce the risk of infection from duodenoscopes. His hospital has been conducting clinical trials of a low temperature sterilizer –TSO3 Sterizone VP4 sterilizer that has been validated to sterilize GI scopes including duodenoscopes, colonoscopes and gastroscopes. This is currently the only
Food and Drug Administration (FDA) approved sterilizer with the ability to sterilize complex multi-channel long flexible scopes. This system utilizes dual sterilants of vaporized hydrogen peroxide (H202) and ozone (03) to achieve terminal sterilization of heat and moisture sensitive medical devices. If you would like to connect with Albert to learn more about their experiences, you may contact him via email at albert.csapo@vch.ca

CAMDR
Canadian Association of Medical Device Reprocessing

ACRDM
Association Canadienne en Retraitement Des Dispositifs Médicaux

## Looking Back on CAMDR 2018 Conference!

We would like to thank CAMDR members, sponsors, exhibitors, speakers and all attendees for making the 3rd Biennial CAMDR Conference a huge success!

Here are a few highlights and a link to full photo gallery, can you find yourself?


[See Full Gallery]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HAPPY HOLIDAYS FROM CAMDR !