

PROCESSING

Shifting strategies and sites for reprocessing success

Experts say there is no one-size-fits-all approach

by Kara Nadeau

When it comes to sterile processing, is on-site, off-site, or centralized to one location. Industry experts share their insights on factors driving healthcare organizations to rethink their reprocessing strategies, trends in reprocessing location across acute and non-acute facilities, and tips for determining an optimal approach that supports safe and effective patient care.

Drivers of change

Inadequate space, limited instrument and issues, compliance failures—these are just some of the reasons why health systems department structures and sites.

Aesculap Director of Consulting Services Bryan Stuart described the various factors he has seen in the market

“This shift is often prompted by challenges such as ensuring proper compliance across multiple sites, addressing staff and leadership shortages, limited space in locations of eliminating redundant, underutilized, or overutilized equipment. Many, if not all, of these factors are compelling organizations to reassess their infrastructure and better align with current and anticipated future needs.”

“The continued evolution of complex instrumentation, robotics, and more stringent IFUs for cleaning, disinfecting, and sterilization continue to push ability to be compliant and successful given their current physical environ-

centralizing makes the most sense to improve compliance, quality, staff productivity and engagement, it often requires capital investments that are either physically impossible to do in the current space capital requests within the health system.”

“Just like there are many different ways that sterile processing departments can be set up within a hospital or healthcare facility, there are many different ways that we see off-site processing.”

Mary Ann Dresnok, RM DHSc, CIC, CFER, RM 15 & 0 (\$0.))\$3, & Director, Clinical Affairs, Healthmark Industries. “It’s very dependent on what works best for an organization, and what they’ve determined as part of their planning process and needs assessments.”

Regardless of reprocessing location, it all comes down to patient care and safety, & 6 & (5 & ,6 & HUWLÀHG (QGRVFRS STERIS Instrument Management Services. She stated, “The goal is to provide a safe environment for reprocessing that enables us to protect the integrity of our instruments and trays, so every patient will have the best quality of care.”

Room to grow

STERILE PROCESSING

“Historically, hospitals grew to tend to the evolving needs of their communities.

Operating rooms were always accounted for and appropriately planned; however, other critical areas such as the supply docks, central stores, and even the sterile processing

GHSDUWPHQW 63' PD\ EH overlooked in the growth plan. In largely urbanized areas, hospitals may not have the physical space option to expand some of these indirect patient care areas. In those cases, we see a shift to RII VLWH 63' V μ

“One common theme that we do see is that by using a centralized and often off-site location, prime real estate within the healthcare institution is freed up,” said Drosnock. “In the acute-care setting, this may mean that more operating rooms could be installed, which would create additional revenue for the facility.”

A ‘systemness’ to SPD

Health systems are increasingly incorporating the concept of centralized reprocessing into their master planning efforts, noted \$VK & URZH 6HQLRU 3URGXFW 0DQDJHU Healthcare, St. Onge.

“The idea of thinking holistically about the health system and how the entities within the system work together continues to become more prominent. In my opinion, both the cost of construction

DQG WKH GLIÀFXOWLHV ÀQG LQJ VWDIÀQJ IRU PDQ\ ORFDWLRQV DUH WKH ELJ drivers to thinking about the consolidation of reprocessing locations. Moving to centralizing reprocessing isn’t the right answer for all health systems, and there DUH PDQ\ DUHDV WR FRQVLGHU DYDLODELOLW\ of space, future growth plans, current ¶V\ VWHPQHVV. RI 63' WHFKQRORJ\ HWF %XW completing an evaluation to determine if it’s an idea to pursue is a valuable effort for the health system.”

All options are on the table

STERILE PROCESSING

'5HSURFHVV LQJ VFRSHV LQ V
having to coordinate reprocessing times with patient cases for the day to ensure clean and sterilized scopes are available when needed," said Darville. "Then there are issues with preventing scope recontam

STERILE PROCESSING

Four key factors for reprocessing site success

5 D Q G D O \ Q : D O W H U V & 5 & 6 7 & . 6
& 6 3 ' 7 & \$ 6 6 3 7 % / 6 \$ \$ 6
Education Manager U.S., Belimed, collaborates with healthcare organizations across the country to help them optimize their sterile processing operations.

' , D P D Å U P E H O L H Y H U W K D W
W K H U H . V Q R R Q H V L J H Å W V D O
solution for reprocessing," she stated.

Here are her four recommended key factors for