



Department:	Infection Prevention and Control Department		
Document:	Multidisciplinary Policy and Procedure (MPP)		
Title:	Safe Management of Medical Supplies and Devices Process		
Applies To:	MCH Department		
Preparation Date:	November 20, 2024	Index No:	IPC-MPP-059
Approval Date:	December 05, 2024	Version :	2
Effective Date:	January 05, 2025	Replacement No.:	IPC-MPP-128(1)
Review Date:	January 05, 2028	No. of Pages:	4

1. PURPOSE:

- 1.1 To ensure that all the medical devices are managed in a way that maximizes safety, performance, efficiency, value, correct use and minimizes risk.
- 1.2 To recognize the possible risks to service users and staff of the failure to meet suitable standards of safety and performance in the application and use of medical devices.
- 1.3 To ensure all staff are competent in the use of medical devices that they are reasonably expected to use in their clinical area.

2. DEFINITIONS:

- 2.1 Medical Device: Any instrument, apparatus, appliance, material or other article, whether used alone or in a combination, including the software necessary for its proper application intended by the manufacturer to be used for human beings for the purpose of diagnosis, prevention, monitoring, treatment or alleviation of disease.
- 2.2 Single use only: A medical device that is intended for only one episode of use on one patient only.
Note: the international symbol, which is a figure 2 with a diagonal line drawn through it may be used on medical device packaging to indicate 'Do Not Reuse' and may replace any wording.
- 2.3 Single patient use only: A medical device that is intended for more than one episode of use on one patient only, the device may go through some sort of processing between each use.
Re-usable medical device: A medical device that may be re-used on either the same or different patient after it has been through decontamination processing or reprocessing.

3. POLICY:

- 3.1 Medical storage areas are of adequate capacity, regularly cleaned, secured and away from contamination, air vents and direct sunlight.
- 3.2 Medical storage areas have controlled ventilation with adjusted temperature and humidity (temperature ranges from 22 °C to 24 °C & relative humidity up to 70%)
- 3.3 Storage shelves dimensions are at least, 40 cm from the ceiling, 20 cm from the floor, and 5 cm from the wall.
- 3.4 Storage shelves are made of easily cleanable material, e.g., fenestrated stainless steel, aluminum or hard plastic.
- 3.5 Sterile and clean items are completely separated from personal items, foods and drinks. No expired items, broken packs or packs with stains are present.
- 3.6 No items are kept in their original shipping boxes, especially in the clinical areas.
- 3.7 FIFO (First in First Out): items produced or acquired first are sold, used or disposed of first (i.e., we are assuming that the first product purchased or the oldest inventory items is the first product used or disposed. Hence the first product in the door is the first product out of the door).

4. PROCEDURE:

- 4.1 Medical Equipment Procurement
 - 4.1.1 Reduce risk through a common range of equipment.
 - 4.1.2 Reduce maintenance and training costs.
 - 4.1.3 Improve the quality of patient care.
- 4.2 Equipment which is more complex than needed for the task required must be avoided.
- 4.3 Departmental Equipment Control
 - 4.3.1 Ensuring that arrangements made for servicing reflect the interests of the user
 - 4.3.2 Examining of equipment records to ensure that repairs and servicing are carried out regularly and promptly
 - 4.3.3 Medical storage areas are of adequate capacity, regularly cleaned, secured and away from contamination, air vents and direct sunlight. Regularly cleaned according to definite housekeeping schedule and updated detailed housekeeping checklist.
 - 4.3.4 Medical store requirement :Ventilation requirements for medical stores (i.e., temperature: 22 O^oC - 24 O^oC / relative humidity: up to 70%).
 - 4.3.4.1 Records for regular monitoring (daily) of temperatures and relative humidity during the last month.
 - 4.3.4.2 Records for corrective interventions which are taken if readings are not matching the acceptable values.
 - 4.3.5 Recommended standards for storage shelves and containers that are used inside medical stores: accepted materials / design / essential installation requirements (i.e., 40 cm from the ceiling, 20 cm from the floor, and 5 cm from the wall).
 - 4.3.5.1 If containers are used inside medical stores, they are made of easily cleanable material (e.g., hard plastic).
 - 4.3.5.2 Storage shelves made of wood or stainless steel wires are not acceptable
 - 4.3.6 Essential practices required for safe storage of sterile and clean items inside medical stores (i.e., completely separated from personal items, foods and drinks / no expired items / no broken or soiled packs / no original shipping boxes).
 - 4.3.7 Sterile and clean items are completely separated from personal items, foods and drinks. No expired items, broken packs or packs with stains are present.
 - 4.3.8 No Items are kept in the original shipping boxes, especially in the clinical areas.
- 4.4 Equipment Failure or Breakdown
 - 4.4.1 Ensuring that all medical equipment is fit for purpose and remain so through appropriate maintenance, inspection and repair.
 - 4.4.2 Medical Equipment maintenance, inspection and repair requirements will be assessed and reviewed in line with the manufacturer's recommendations as well as any legal guidance and best practice recommendations.
 - 4.4.3 Single use device accessories used with equipment will - where appropriate - be replaced after any maintenance or repair procedures on the 'parent' equipment
 - 4.4.4 Equipment breakdown, when a piece of equipment fails / or is broken, staff must report this to the Biomed department. The breakdown is logged on the Equipment Management System.
 - 4.4.5 Ward staff must decontaminate the equipment and attach the decontamination label to the broken device.
 - 4.4.6 Biomed will attend the ward/department to assess if the device can be repaired in situ or requires a workshop repair.
- 4.5 Decontamination
 - 4.5.1 Single use devices must not be re-used under any circumstances.
 - 4.5.2 Single patient devices must not be used on different service users. Staff should be aware that reusable medical equipment sometimes have accessories, which fall into the category of single patient devices. These should always be replaced between service users.
 - 4.5.3 Reusable medical equipment should be cleaned, disinfected or sterilized as appropriate and in accordance with the manufacturer's instructions.
 - 4.5.4 It is the responsibility of the user to ensure that medical equipment is decontaminated after-use and left in an operational state.

- 4.5.5 The decontamination process should follow the manufacturer's instructions and or the guidance, policies and procedures provided by Infection Prevention.
- 4.6 Medical Equipment Disposal
 - 4.6.1 All medical equipment must be disposed of in a safe and appropriate manner, with minimum risk to public health and environment.
 - 4.6.2 Consult the manufacturer for the best methods of waste disposal. They should be able to provide details of the current techniques and processes applicable to their products.
 - 4.6.3 Wear protective equipment. Infections spread easily through physical contact; hands are one of the most common vehicles of infectious bacteria.
 - 4.6.3.1 Wear protective gloves when handling waste. Do not touch anything other than the infectious waste once you have put them on, and make sure you remove and dispose them hygienically once you're done.
 - 4.6.3.2 Cover the body as much as possible. This is especially important if you have any open wounds (even a tiny cut on your hand could be enough for entry). Properly dress wounds with sterile plaster or bandages.
 - 4.6.3.3 Discard materials into a suitable container or bag. Refer to Policy: Medical and Sharp waste Management.
 - 4.6.3.4 Never fill a bag or container more than 3/4 full. It must be collected by the designated personnel responsible for Waste Disposal.
 - 4.6.3.5 Always practice hand hygiene after any procedures
- 4.7 Training Requirements
 - 4.7.1 Planned Preventative Maintenance (PPM) is the annual testing of medical devices in your environment that have been deemed necessary to receive this in order to assure the functionality and accuracy of said device.
 - 4.7.2 Daily cleaning and checking of medical devices should be documented.
 - 4.7.3 Competence to use medical devices.

5. MATERIALS AND EQUIPMENT:

- 5.1 Forms and Records:
 - 5.1.1 N/A
- 5.2 Materials and Equipment
 - 5.2.1 N/A

6. RESPONSIBILITIES:

- 6.1 IPCD: Insuring the Policy is implemented by everyone.
- 6.2 Biomedical Engineering Department (BME):
 - 6.2.1 BME maintain the register for Medical Equipment using an Equipment Management System
 - 6.2.2 BME are responsible for:
 - 6.2.2.1 Undertaking Acceptance Checks on new equipment.
 - 6.2.2.2 Managing Medical Devices' guidelines. Acceptance tests will be performed as soon as possible after receipt and in the event of Medical Equipment failing acceptance checks, procurement must be notified immediately and the equipment must not be put into use.

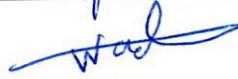
7. APPENDICES:

- 7.1 N/A

8. REFERENCES:

- 8.1 Managing Medical Devices Guidance for healthcare and social services organizations April 2015.

9. APPROVALS:

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