

SESLHD PROCEDURE COVER SHEET



Health
South Eastern Sydney
Local Health District

NAME OF DOCUMENT	Sterilisation: Cleaning of Reprocessing Equipment and the Reprocessing Facility
TYPE OF DOCUMENT	Procedure
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FORMER REFERENCE(S)	Nil
EXECUTIVE SPONSOR or EXECUTIVE CLINICAL SPONSOR	Director of Clinical Governance and Medical Services
AUTHOR	SESLHD Sterilising Services Working Party (SSWG)
POSITION RESPONSIBLE FOR THE DOCUMENT	Manager Sterilising Services, The Sutherland Hospital Karolina.Tipevska@health.nsw.gov.au
KEY TERMS	Reprocessing Facility - the physical environment necessary for effective reprocessing activities to be delivered to the RMDs Reprocessing Equipment - all of the equipment used in the reprocessing of RMDs
SUMMARY	This procedure specifies general requirements for the cleaning of Reprocessing Equipment and the Reprocessing Facility.

COMPLIANCE WITH THIS DOCUMENT IS MANDATORY

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SESLHD PROCEDURE

Sterilisation: Cleaning of Reprocessing Equipment and the Reprocessing Facility

SESLHDPR/519

1. POLICY STATEMENT

Reprocessing Equipment is cleaned routinely in accordance with documented procedures and schedule.

Reprocessing Facility is cleaned routinely and maintained in a hygienic condition at all times.

2. BACKGROUND

The physical environment and reprocessing equipment shall be maintained and controlled to provide effective reprocessing activities which ensure delivery of an RMD to the required quality.

3. RESPONSIBILITIES

3.1 Employees will:

- Comply with the requirements of this procedure
- Report any non-compliance to the Sterilising Services Manager.

3.2 Line Managers will:

- Nil

3.3 District Managers/ Service Managers will:

- Implement the requirements of this procedure to assure the quality and safety of reprocessed RMD's
- Select and evaluate appropriate materials to enable compliance with this procedure.

3.4 Medical staff will:

- Nil

4. PROCEDURE

4.1 Cleaning of Reprocessing Equipment

- Clean Reprocessing Equipment in accordance with specific HSO procedures and in conjunction with the manufacturer's recommendations to minimise the risk of cross-contamination
- Clean and thermally disinfect accessories used for pre-treatment or manual cleaning (eg brushes) at least daily
- Products that leave residue on surfaces must not be used
- Non-linting cloths should be used
- Document and keep records as per [SESLHDPR/514 - Sterilisation: Records Management](#)

SESLHD PROCEDURE**Sterilisation: Cleaning of Reprocessing
Equipment and the Reprocessing Facility****SESLHDPR/519****4.2 Cleaning of Reprocessing Facility**

- Separate, dedicated cleaning equipment shall be provided for both dirty and clean work areas

5. DOCUMENTATION

Specific HSO Procedures

6. AUDIT

Not Required

7. REFERENCES

- AS/NZS 4187:2014 Reprocessing of reusable medical devices in health services organizations

8. REVISION AND APPROVAL HISTORY

Date	Revision No.	Author and Approval
August 2016	0	Application to Develop – Approved by Executive Sponsor
August 2016	0	Draft for Comment – Approved by Executive Sponsor
November 2016	0	Endorsed by SESLHD Clinical and Quality Council
February 2020	1	SESLHD Sterilising Working Party (SSWG) conducted a minor review. Documentation updated to Specific HSO Procedures.
May 2020	1	Approved by Executive Sponsor. Published by Executive Services.