

# SESLHD PROCEDURE COVER SHEET



**Health**  
South Eastern Sydney  
Local Health District

<b>NAME OF DOCUMENT</b>	Sterilisation: Staff Training and Competencies
<b>TYPE OF DOCUMENT</b>	Procedure
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<b>LEVEL OF EVIDENCE</b>	National Safety Quality Health Service Standards: Standard 3- Preventing and Controlling Healthcare Associated Infection  Australian/New Zealand Standard AS/NZS 4187:2014
<b>REVIEW DATE</b>	May 2025
<b>FORMER REFERENCE(S)</b>	Nil
<b>EXECUTIVE SPONSOR or EXECUTIVE CLINICAL SPONSOR</b>	Director of Clinical Governance and Medical Services
<b>AUTHOR</b>	SESLHD Sterilising Services Working Party (SSWG)
<b>POSITION RESPONSIBLE FOR THE DOCUMENT</b>	Manager Sterilising Services, The Sutherland Hospital Karolina.Tipevska@health.nsw.gov.au
<b>KEY TERMS</b>	Training, Competency, Staff, Reusable Medical Devices (RMDs)
<b>SUMMARY</b>	This procedure describes the requirements for ongoing training and education to be provided to all staff involved in the reprocessing of RMDs.

## **COMPLIANCE WITH THIS DOCUMENT IS MANDATORY**

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**1. POLICY STATEMENT**

All staff involved in the reprocessing of RMDs shall be provided with ongoing training and education in all aspects of sterilisation, and have ongoing periodic assessment to ensure competency.

**2. BACKGROUND**

The education and training of staff is an integral element of a quality management system.

On commencement of employment an assessment of the knowledge and competency level of new staff should be undertaken. This will enable proper planning of initial and ongoing training for staff.

**3. RESPONSIBILITIES****3.1 Employees will:**

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

**3.2 Line Managers will:**

- Support compliance

**3.3 District Manager/Service Managers will:**

- Implement the requirements of this procedure

**3.4 Medical Staff will:**

- N/A

**4. PROCEDURE****4.1** At minimum training programs should include the following:

- Modes of transmission of infection
- Infection control principles
- Hand hygiene
- Personal Protective Equipment (PPE)
- Workplace Health and Safety
- Reprocessing activities
- Documentation and record keeping.

**4.2** On completion of training staff should be assessed for competency.**4.3** All staff should participate in ongoing internal and external education programs.

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### 5. DOCUMENTATION

- Records of training and competencies

### 6. AUDIT

- Peer Review Audit

### 7. REFERENCES

- AS/NZS 4187:2014 Reprocessing of reusable medical devices in health service organisation and its normative references.

### 8. REVISION AND APPROVAL HISTORY

Date	Revision No.	Author and Approval
	1	SESLHD Sterilising Research Group
September 2016	1	Endorsed for Draft for Comment
November 2016	1	Endorsed by SESLHD Clinical and Quality Council
May 2020	2	SESLHD Sterilising Working Party (SSWP) conducted a minor review to specify in more detail requirements pertaining to staff training.
May 2020	2	Approved by Executive Sponsor. Published by Executive Services.