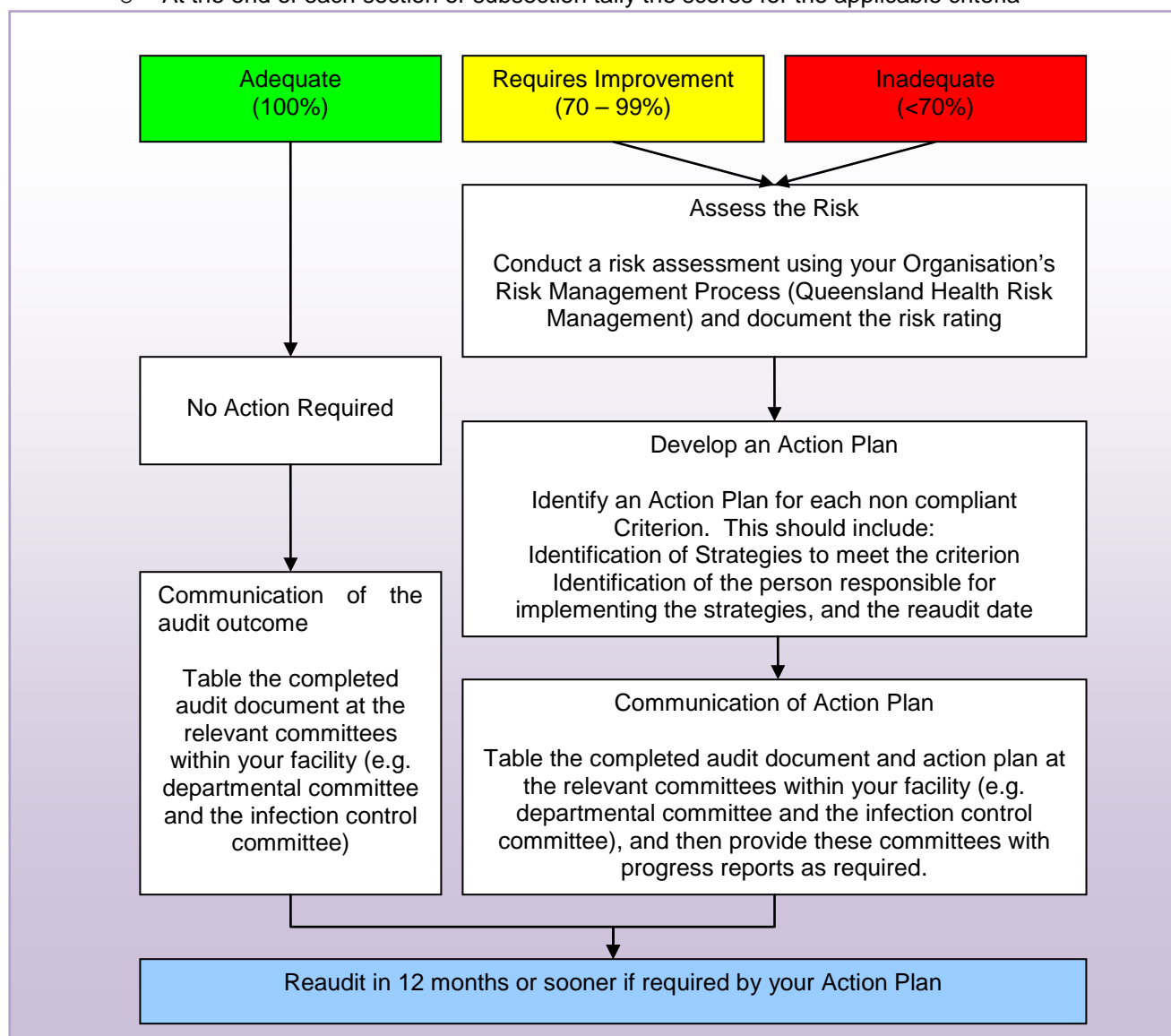


ENDOSCOPE REPROCESSING AUDIT

This audit tool is intended to be used to check that the reprocessing of endoscopes is being performed in accordance with the GENCA Infection Control Guidelines.

In order to use this tool appropriately:

- Review the audit tool and schedule the audit
- Determine when the audit will be conducted (ideally at least annually, or if major changes are made in the personnel or equipment used for reprocessing)
- Conduct the audit
 - Place a in the box for each compliant criterion.
 - If criteria are not applicable to your facility indicate this in the 'risk rating & actions required' column
 - At the end of each section or subsection tally the scores for the applicable criteria



ENDOSCOPE REPROCESSING AUDIT

CRITERIA	<input checked="" type="checkbox"/>	RISK RATING & ACTIONS REQUIRED	REVIEW DATE	BY WHOM
1 OPERATIONS				
1.1 Endoscope decontamination is undertaken or supervised by a dedicated person(s) with a recognised qualification or training in endoscope decontamination	<input type="checkbox"/>			
1.1.1 Staff have access to relevant documentation: <ul style="list-style-type: none"> • Infection Control in Endoscopy 3rd edition GENCA Guidelines • AS/NZS4187 Cleaning, disinfecting and sterilizing reusable medical and surgical instruments and equipment, and maintenance of associated environments in health care facilities • AS 2773.2 Ultrasonic cleaners for health care facilities - Benchtop • Queensland Health Infection Control Guidelines (particularly the Disinfection and Sterilisation section) 	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>			
1.1.2 Staff are aware of how to access the Endoscope Reprocessing website	<input type="checkbox"/>			
1.1.3 Staff are able to access the reprocessing website at work	<input type="checkbox"/>			
1.1.4 Decontamination is performed by person(s) conversant with the structure of the endoscope and trained in cleaning techniques	<input type="checkbox"/>			
1.1.5 Manufacturer's Instruction Manual for each type of endoscope is available	<input type="checkbox"/>			
1.2 Scope cleaning is undertaken immediately after the endoscope is used to prevent drying and hardening of secretions	<input type="checkbox"/>			
1.2.1 If there is any delay in scope cleaning, endoscopes are leak tested and kept underwater until cleaning can take place (suitable for short delay only)	<input type="checkbox"/>			
1.3 A protocol for scope manual cleaning is followed and includes but is not limited to:				
1.3.1 All valves and buttons are removed before leak testing.	<input type="checkbox"/>			
1.3.2 Leak test is performed as per manufacturer's instructions	<input type="checkbox"/>			

ENDOSCOPE REPROCESSING AUDIT

CRITERIA	<input checked="" type="checkbox"/>	RISK RATING & ACTIONS REQUIRED	REVIEW DATE	BY WHOM
1 OPERATIONS				
1.3.3 Manufacturer's cleaning instructions are available and followed	<input type="checkbox"/>			
1.3.4 Appropriate enzymatic detergents/biofilm removal agents are used	<input type="checkbox"/>			
1.3.5 Warm water (35°C) is used with enzymatic solution for optimum efficacy	<input type="checkbox"/>			
1.3.6 Detergent and water dilution is measured to ensure correct dilution	<input type="checkbox"/>			
1.3.7 Detergent is left in contact with the endoscope surfaces for manufacturer's specified time	<input type="checkbox"/>			
1.3.8 Appropriate cleaning equipment is used e.g. cleaning brushes	<input type="checkbox"/>			
1.3.9 Appropriately sized cleaning brushes are used to clean channels	<input type="checkbox"/>			
1.3.10 All surfaces of the endoscope, including internal and external are cleaned	<input type="checkbox"/>			
1.3.11 Running water is used for rinsing to ensure all debris and detergents are removed prior to disinfection	<input type="checkbox"/>			
1.3.12 Clean water is used to rinse the internal channels through the cleaning adaptors	<input type="checkbox"/>			
1.4 All endoscopes are supplied with appropriate cleaning adapters	<input type="checkbox"/>			
1.4.1 Person(s) cleaning endoscopes are conversant with the adapters and use them correctly	<input type="checkbox"/>			
1.4.2 Rubber "o" rings on the adapters are inspected regularly for defects or looseness and replaced when needed	<input type="checkbox"/>			
1.4.3 Substitute cleaning equipment is not used unless approved by the supplier of instrument e.g. using a syringe to squirt fluid into a port which requires a screw thread adapter is not safe	<input type="checkbox"/>			
1.4.4 Cleaning brushes are inspected and replaced when worn or kinked	<input type="checkbox"/>			
1.5 Work areas are well ventilated and include at least one sink which is designated 'dirty'	<input type="checkbox"/>			

ENDOSCOPE REPROCESSING AUDIT

CRITERIA	<input checked="" type="checkbox"/>	RISK RATING & ACTIONS REQUIRED	REVIEW DATE	BY WHOM
1 OPERATIONS				
1.6 When manual disinfection of endoscopes is undertaken:				
1.6.1 A sink or container of disinfectant chemical is contained within a fume extraction system	<input type="checkbox"/>			
1.6.2 A sink designated for rinsing only clean instruments is available and contained within a fume extraction cover	<input type="checkbox"/>			
1.6.3 Manufacturer's instructions are followed	<input type="checkbox"/>			
1.6.4 Endoscope channels are dried prior to and after installation of 70% alcohol	<input type="checkbox"/>			
1.6.5 70% isopropyl alcohol is flushed into all channels at the end of the list	<input type="checkbox"/>			
1.7 When an AFER machine is utilised for disinfection:				
1.7.1 Manufacturer's instructions are followed	<input type="checkbox"/>			
1.7.2 Thorough cleaning precedes disinfection in an AFER	<input type="checkbox"/>			
1.7.3 Water supplies are plumbed into machines	<input type="checkbox"/>			
1.7.4 Pre-filters are installed prior to water supply into the automated reprocessor	<input type="checkbox"/>			
1.7.5 Pre-filters are regularly serviced and monitored	<input type="checkbox"/>			
1.7.6 Fresh water is used for each cycle	<input type="checkbox"/>			
1.7.7 Machines which contain a tank of disinfectant for re-use are monitored for disinfection concentration daily (each cycle for OPA)	<input type="checkbox"/>			
1.7.8 AFER machines have a cycle for auto-disinfection	<input type="checkbox"/>			
1.7.9 Proof of process: a printout of cycle parameters is available	<input type="checkbox"/>			
1.7.10 A maintenance schedule which includes tanks, pipes, strainers and filters of both the machine and water treatment	<input type="checkbox"/>			

ENDOSCOPE REPROCESSING AUDIT

CRITERIA	☑	RISK RATING & ACTIONS REQUIRED	REVIEW DATE	BY WHOM
1 OPERATIONS				
systems are available				
1.7.11 Endoscope channels are dried prior to and after installation of 70% alcohol	<input type="checkbox"/>			
1.7.12 70% isopropyl alcohol is flushed into all channels at the end of the list	<input type="checkbox"/>			
1.8 Gastrosopes and colonoscopes are stored in either:				
<ul style="list-style-type: none"> • Clean, dry, well ventilated, dedicated storage cupboard, which permits full length hanging on appropriate support structures <p>or</p> <ul style="list-style-type: none"> • Therapeutic Goods Administration (TGA) approved, purpose built drying cabinet which provides continuous passage of HEPA filtered air through all channels and with quality mechanisms which alarm if airflow does not occur or the temperature of the perfused air falls outside the operating parameters 	<input type="checkbox"/>			
Score	/47	ADEQUATE = 100%	REQUIRES IMPROVEMENT = 70-90%	INADEQUATE <70%

ENDOSCOPE REPROCESSING AUDIT

CRITERIA	<input checked="" type="checkbox"/>	RISK RATING & ACTIONS REQUIRED	REVIEW DATE	BY WHOM
2 QUALITY ASSURANCE				
2.1 Records are kept and shall include, but are not limited to the following:				
2.1.1 Every list, including the order of the patients on the list	<input type="checkbox"/>			
2.1.2 Every endoscope reprocessed including: <ul style="list-style-type: none"> <input type="checkbox"/> date of procedure <input type="checkbox"/> patient details <input type="checkbox"/> instrument details (individual serial number) <input type="checkbox"/> temperature of disinfectant <input type="checkbox"/> immersion time in disinfectant 	<input type="checkbox"/>			
2.1.3 Name of person who: <ul style="list-style-type: none"> <input type="checkbox"/> Completed the manual cleaning phase of reprocessing <input type="checkbox"/> Immersed the endoscope in disinfectant or connected the endoscope to the AFER machine <input type="checkbox"/> Removed the instrument from the disinfectant solution and completed the post-disinfection phase or who removed the instrument from the AFER and released the endoscope as ready for patient use <input type="checkbox"/> Tested temperature of the disinfectant (manual systems) <input type="checkbox"/> Recorded immersion time in disinfectant (manual systems) 	<input type="checkbox"/>			
2.1.4 Reusable Disinfectant <ul style="list-style-type: none"> <input type="checkbox"/> Batch number of disinfectant <input type="checkbox"/> Date disinfectant was decanted into tank <input type="checkbox"/> Date disinfectant changed or topped up (to maintain volume) 	<input type="checkbox"/>			
2.1.5 Daily or as per product instruction: <ul style="list-style-type: none"> <input type="checkbox"/> Minimum effective concentration (MEC) of reusable disinfectant <input type="checkbox"/> Name of the person who tested the reusable disinfectant 	<input type="checkbox"/>			
2.1.6 Daily water filter pressure monitoring	<input type="checkbox"/>			
2.1.7 A unit based record is kept regardless of the information contained in the patient health care record	<input type="checkbox"/>			
2.1.8 Computer print-outs from an AFER are attached to the unit record	<input type="checkbox"/>			

ENDOSCOPE REPROCESSING AUDIT

CRITERIA	<input checked="" type="checkbox"/>	RISK RATING & ACTIONS REQUIRED	REVIEW DATE	BY WHOM
2 QUALITY ASSURANCE				
2.2 The efficacy of the ultrasonic cleaner should be tested each day the cleaner is used	<input type="checkbox"/>			
2.2.1 Testing is performed according to the manufacturer's instructions and in keeping with AS2773.2 section 6 <input type="checkbox"/> Pencil load test <input type="checkbox"/> Aluminium foil test	<input type="checkbox"/>			
2.2.2 Results of the test are documented as proof of process and name of person performing the test documented	<input type="checkbox"/>			
2.3 Microbiological testing of endoscopes and AFER are routinely performed				
2.3.1 AFERs are monitored every four (4) weeks	<input type="checkbox"/>			
2.3.2 Duodenoscopes, bronchoscopes and linear ultrasound endoscopes are monitored every four (4) weeks	<input type="checkbox"/>			
2.3.3 All other gastrointestinal endoscopes are monitored every three (3) months	<input type="checkbox"/>			
2.3.4 Endoscopes which are processed through a sterilization cycle and are stored in a wrapped state are monitored every three (3) months	<input type="checkbox"/>			
2.3.5 Endoscopes being received on loan or on return from repair have surveillance cultures performed within 72 hours of receipt of the instrument.	<input type="checkbox"/>			
2.3.6 Further microbiological screening is undertaken in consultation with a Clinical Microbiologist if: <ul style="list-style-type: none"> • There is clinical suspicion of cross-infection related to endoscopy; • Positive surveillance cultures occur; • Alterations are made to the plumbing of the endoscopy reprocessing area; • New reprocessing protocols are introduced in the unit; • New models of equipment (endoscope or AFER) are used; • As a means of quality check for new staff responsible for endoscope reprocessing 	<input type="checkbox"/>			

ENDOSCOPE REPROCESSING AUDIT

CRITERIA



RISK RATING & ACTIONS REQUIRED

REVIEW
DATE

BY WHOM

2 QUALITY ASSURANCE

Score

/17

ADEQUATE = 100%

REQUIRES IMPROVEMENT = 70-90%

INADEQUATE <70%

ENDOSCOPE REPROCESSING AUDIT

CRITERIA	<input checked="" type="checkbox"/>	RISK RATING & ACTIONS REQUIRED	REVIEW DATE	BY WHOM
3 EDUCATION				
3.1 Manager or Supervisor has recognised qualification or training in endoscope reprocessing	<input type="checkbox"/>			
3.2 Manager and staff are educated on how to reprocess instruments when:				
3.2.1 First employed	<input type="checkbox"/>			
3.2.2 Updated annually	<input type="checkbox"/>			
3.2.3 Any change in process	<input type="checkbox"/>			
3.2.4 New reprocessing equipment purchased	<input type="checkbox"/>			
3.2.5 New medical equipment / devices requiring reprocessing purchased	<input type="checkbox"/>			
3.3 Evidence is available of staff who have been trained in the use of decontamination equipment including:				
3.3.1 Ultra sonic washers	<input type="checkbox"/>			
3.3.2 AFER	<input type="checkbox"/>			
3.3.3 Manual disinfection systems	<input type="checkbox"/>			
3.4 Evidence is available of staff who have been trained in the cleaning and reprocessing of all types of endoscopes, accessories and instruments available in the Endoscopy Unit	<input type="checkbox"/>			
Score	/10	ADEQUATE = 100%	REQUIRES IMPROVEMENT = 70-90%	INADEQUATE <70%

ENDOSCOPE REPROCESSING AUDIT

CRITERIA	☑	RISK RATING & ACTIONS REQUIRED	REVIEW DATE	BY WHOM
4 MANAGEMENT				
4.1 Standard Precautions and Workplace Health and Safety protocols are applied during all stages of cleaning and reprocessing of endoscopes	<input type="checkbox"/>			
4.2 Items designated to be reprocessed are processed to a level for their intended use	<input type="checkbox"/>			
4.3 Manufacturer's instructions are provided and available for staff who clean and reprocess endoscopes	<input type="checkbox"/>			
4.4 Material Safety Data Sheets (MSDS) are available for all cleaning agents and chemicals <ul style="list-style-type: none"> • MSDS have been read and understood by staff prior to initial use 	<input type="checkbox"/>			
4.5 Manufacturer's instructions are followed when cleaning and reprocessing endoscopes and using the AFER	<input type="checkbox"/>			
4.6 Processes are in place to notify the Unit Manager or shift co-ordinator of all faults with AFER and endoscope reprocessing	<input type="checkbox"/>			
4.7 Incidents relating to the reprocessing of endoscopes are reported, risk rated and actioned <ul style="list-style-type: none"> • Endoscopy Unit is provided with a summary of incidents regularly (e.g. via PRIME or relevant local committee) 	<input type="checkbox"/>			
4.8 There is a record available to subsequent users of the stored gastroscopes and colonoscopes indicating the date and time they were last reprocessed	<input type="checkbox"/>			
4.9 If endoscopes are not reprocessed on day of use, there is a record available to subsequent users of the stored gastroscopes and colonoscopes indicating the date and time they were last reprocessed	<input type="checkbox"/>			
Score	/9	ADEQUATE = 100%	REQUIRES IMPROVEMENT = 70-90%	INADEQUATE <70%
TOTAL SCORE	/83	%		

References

Taylor A, Jones D, Everts R, Cowen A, Wardle E. Infection control in endoscopy 3rd ed. Sydney: Gastroenterological Society of Australia and Gastroenterology Nurses College of Australia; 2010.

Queensland Health. High efficiency particulate air (HEPA) filtered cabinets to dry and store flexible endoscopes. [Online]. Advisory 01/2008 [cited 2009 Feb 26]. Available from: URL: http://www.health.qld.gov.au/chrisp/resources/advisory_01_2008.pdf