Cheshire and Wirral Partnership NHS
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Medical devices and equipment policy

Lead executive	Medical Director
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Type of document	Policy
Target audience	All Clinical staff
Document purpose	This policy outlines procedures and guidelines to ensure the safe and effective management of CWP medical devices and equipment from procurement to condemnation, identifying risk issues and removing or reducing them as far as possible and providing staff with a training needs analysis to be used in conjunction with the annual appraisal process

Approving meeting	Patient Safety and Effectiveness Group	Date 15/02/2018
Implementation date	20/02/2018	

CWP documents to be read in conjunction with	
HR6	Essential mandatory training policy
HR2.7	Appraisal (including personal development planning) policy and procedure
GR1	Incident Reporting and Management Policy
GR2	Health and safety arrangements and responsibilities
CP24	Cardio Pulmonary Resuscitation (CPR)
GR26	Policy for the safe manual handling of people and loads
IC1	Infection Prevention and Control
GR30	Decontamination and disinfection policy
GR40	Central Alert System policy
HR2.3	Induction policy

Document change history	
What is different?	Reviewed and streamlined in relation current Trust policy guidance.
Appendices / electronic forms	As above.
What is the impact of change?	Low – clearer guidance for clinical staff in relation to the use of medical devices and equipment.

Training requirements	Yes - Training requirements for this policy are in accordance with the CWP Training Needs Analysis (TNA) with Education CWP.

Document consultation	
East locality	Medical Devices Group
Wirral locality	Medical Devices Group
West locality	Medical Devices Group
Corporate services	Medical Devices Group
External agencies	Avensys UK Ltd.

Financial resource implications	Yes

External references
1. MHRA Medical Devices Directive 93/42/EEC 2. MHRA DB 2006 (05) Managing Medical Devices- Guidance for healthcare and social services organisations. 3. ISO 9001(2000), ISO 13485 (2003) 4. HTM 2010 and 2030

Equality Impact Assessment (EIA) - Initial assessment	**Yes/No**	**Comments**
Does this document affect one group less or more favourably than another on the basis of:		
- Race	No	
- Ethnic origins (including gypsies and travellers)	No	
- Nationality	No	
- Gender	No	
- Culture	No	
- Religion or belief	No	
- Sexual orientation including lesbian, gay and bisexual people	No	
- Age	No	
- Disability - learning disabilities, physical disability, sensory impairment and mental health problems	No	
Is there any evidence that some groups are affected differently?	No	
If you have identified potential discrimination, are there any exceptions valid, legal and/or justifiable?		
Select		
Is the impact of the document likely to be negative? - If so can the impact be avoided? - What alternatives are there to achieving the document without the impact? - Can we reduce the impact by taking different action?	No N/A N/A N/A	
Where an adverse or negative impact on equality group(s) has been identified during the initial screening process a full EIA assessment should be conducted. If you have identified a potential discriminatory impact of this procedural document, please refer it to the human resource department together with any suggestions as to the action required to avoid / reduce this impact. For advice in respect of answering the above questions, please contact the human resource department.		
Was a full impact assessment required?	No	
What is the level of impact?	Low	

Contents

1. Introduction

This policy outlines procedures and guidelines to ensure the safe and effective management of medical devices and equipment belonging to Cheshire and Wirral Partnership from procurement to condemnation, identifying risk issues and removing or reducing them as far as possible.

This policy applies to all re-usable medical devices in the Trust. This policy does not apply to medical devices that are provided by community loan equipment services or any other community equipment provider. All medical devices and equipment provided as part of a non-CWP contract or procedure is the responsibility of that provider to maintain, service, condemn and provide training and/or instructions for use for all such devices. CWP accepts no responsibility in part or otherwise for any medical device that is procured on a non-CWP contract. All incidents which arise pertaining to any non-CWP medical device or equipment must be reported through the CWP Datix incident reporting process and will then be escalated to the respective provider by CWP Senior Health and Safety Advisor or by the Medical Devices and Safety Officer.

2. Definitions

A medical device is defined (MHRA Medical Devices Directive 93/42/EEC) as any instrument, apparatus, appliance, material or other article whether used alone or in combination, intended by the manufacturer to be used for human beings for the purpose of:

- Control of conception
- Diagnosis, prevention, monitoring, treatment or alleviation of disease
- Diagnosis, monitoring, treatment, alleviation of/or compensation for an injury or disability/impairment
- Investigation, replacement or modification of the anatomy or physiological process; and which does not achieve its principal intended action in or on the human body by pharmacological, immunological or metabolic means, but which may be assisted in its function by such means

Decontamination - A general term used to describe the destruction or removal of microbial contamination to render an item or the environment safe. The term decontamination includes cleaning, disinfection and sterilisation.

Single use medical device – indicated on the packaging by the "single use only"  logo – refers to medical devices which must only be used once and must not be re-used/reprocessed under any circumstances.

Single patient use devices – refers to medical devices which may be reprocessed between uses for a specific patient – but not re-used for different patients.

Re-usable medical device - applies to all such devices whether owned by the organisation, rented, on loan or acquired by any other means.

Re-usable Podiatry Instrument – applies to pre-packaged instrument sets, used only with podiatry services within CWP Physical Health Services.

3. Procedures

All CWP medical devices and equipment which are required to be maintained or serviced, according to current legislation and MHRA DB 2006 (05) Managing Medical Devices - Guidance for healthcare and social services organisations, and manufacturers instruction, will be managed via contracts with

external providers. All new medical devices used by CWP staff must be accompanied by manufacturers' user instructions. All manufacturers' instructions must be stored locally within the department and be fully accessible to all staff.

CWP Estates department has responsibility for the contract for the management of CWP medical devices. The exception to this is the contract for the provision and decontamination of all reusable podiatry instruments which is held locally within CWP Physical Health Services. The overall monitoring for all the services provided will be through the Medical Devices Contract Group (MDCG) by the responsible external providers.

A quarterly report will be provided by the external provider(s) to the Trust detailing the status of each medical device and any work undertaken within that period. This will be reported to the Trust's MDCG.

A medical device must not be used within the Trust until it has been checked by the external contractors engineer to ensure it is safe to use and has been added to the medical device inventory list. A medical device must not be used unless it has been maintained appropriately and individual staff are competent to use the device.

A medical device must not be modified or used in any way that is not for its intended purpose and must be used under guidance detailed in the manufacturer's instructions. This policy outlines the processes for all of the above. In this policy the term re-usable medical device applies to all such devices whether owned by the organisation, rented, on a hire agreement or acquired by any other means.

3.1 Procurement of medical devices

The approval process/flowchart for the procurement of all medical devices is outlined in Appendix 1. From the implementation of this policy;

- All re-usable medical devices must be procured through the agreed procedure within the Trust; specialist advice in relation to suitable cost effective models can be sought from the external maintenance provider by the medical devices team
- All single patient use medical devices can be procured through NHS Logistics
- All Podiatry re-usable instruments must only be procured through the existing external provider

To ensure standardisation of medical device equipment staff must, attempt to procure the model of device identified in the Trust's 'Medical Devices Standardisation Catalogue' available on the CWP Medical Devices website or if the equipment needed is not detailed there, contact Estates Medical Devices and Safety Officer or Senior Health and Safety Advisor and request advice regarding an alternative and compatible model.

3.2 Commissioning new devices (including recording on the Trust's inventory)

To ensure consistency and to give assurances regarding medical device inventories all CWP medical devices requiring maintenance must be logged onto the medical device inventory developed by the external maintenance provider and will be regularly monitored by the Estates Medical Devices and Safety Officer.

All re-usable podiatry instruments must be logged onto a separate local inventory by the podiatry service external provider. A quarterly update report will be provided by the external provider and sent to the nominated team lead for the podiatry service.

All staff have a responsibility to ensure that medical devices and equipment are safe and fit for purpose prior to use. On delivery, all new devices must be acceptance checked by the external maintenance provider prior to clinical use. This is a requirement as outlined in MHRA DB 2006 (05) Managing Medical Devices - Guidance for healthcare and social services organisations. The engineer will assemble and test the device and providing it passes the specified test criteria and the manufacturer's performance test, it is given a unique asset number and logged onto the CWP medical devices inventory by the external provider(s). The exceptions to this are single use devices.
Each device included on the inventory allows the system to store information about the device such as type of device, serial number, department, location, maintenance schedules, breakdown records and general device history.

Devices will also be graded as high, medium or low risk devices in order to determine the level of staff training required.

3.3 Inventory of Medical Devices and Equipment

The external providers will be responsible for collating an inventory of all the devices which they have responsibility for maintaining. Avensys UK Ltd are the external provider commissioned for all medical devices and equipment, with the exception of beds, hoists, patient lifts, slings and baths which are maintained by external provider, Healthcare Matters. Podiatry re-usable instruments are provided, decontaminated and maintained by B Braun Sterilog.

A report will be produced 4 times a year by the external contractor who will provide the information to the Estates Medical Devices Contract Group. The inventory will detail all new devices added to the contract, devices which have been removed and/or condemned and will detail the maintenance schedules for all devices and annual maintenance costs along with any ad hoc repair costs that have been made following repair call outs.

As part of the scheduled building risk assessment process a spot check will be conducted by the Health and Safety Team to ensure that equipment being used is within its maintenance schedule and is included on the asset register for that premises.

3.4 Maintenance of Medical Devices and Equipment

A formal system is essential to ensure that all devices function safely and accurately throughout their lifetime. Such a system will provide for:

- Day to day maintenance by the user
- Annual or six monthly preventative maintenance (depending on manufacturers recommendation) for all medical devices on the contract
- Repair in the event of device breakdown
- Condemnation if the device is no longer viable and removal from the device inventory

There are lower risk items that do not need regular preventative maintenance, e.g. patient slides, zimmer frames, commodes, but require ongoing safety checks by the clinician prior to use.

Planned preventative maintenance is undertaken via a contract with two external providers, whose responsibility is to ensure that all medical devices are maintained and checked for safety according to the manufacturers recommendations as part of the schedule for planned annual maintenance work.

- The annual maintenance of all beds, hoists, patient lifts, slings and baths will be provided by Healthcare Matters
- All other re-usable, diagnostic and therapeutic medical devices will be maintained by Avensys UK Ltd and all works and actions undertaken reported 4 times a year to the MDCG

Both providers will develop maintenance schedules (as per manufacturer's guidelines) for all re-usable equipment to be used by the clinical services.

The Avensys engineer will arrange a convenient date and time to visit the ward/team to service the medical devices and equipment. The engineer will forward the team/ward an inventory of the equipment due for service prior to the pre-arranged maintenance visit. It is the responsibility of the team/ward manager to ensure that all devices are available for the engineers visit. It is the responsibility of the team leader/ward manager to respond to the engineers' written request for information about any devices that could not be located for servicing following the engineers visit. **The health and safety team will arrange to re-charge the annual maintenance costs of any equipment that cannot be located to the team/ward budget.**

3.5 Reusable podiatry instruments

In line with the Medical Device Directive 93/42 EEC, the provision for decontamination and sterilisation of re-usable podiatry instruments is now a single centralised accredited off-site provider. Re-usable surgical instruments are cleaned, decontaminated and sterilised in accordance with ISO 9001(2000), ISO 13485 (2003) and Medical Device Directive 93/42 EEC for surgical instruments, trays, utensils, containers, glassware, polypropylene and other re-process items. Items are processed in accordance with HTM 2010. Wherever cost effective and sustainable, single-use instruments have been introduced (for podiatry reusable instruments please refer to Appendix 3 for further information).

3.6 Repairs

For details of how to report a fault or breakdown refer to Appendix 4 – Medical Devices Information Checklist.

When any device is being returned to the external provider for inspection, servicing or repair the decontamination certificate must be completed and attached. The external provider(s) will not accept any device that does not have a decontamination certificate attached. Staff must clean all devices prior to repair work being undertaken. Cleaning methods must comply with the Trust decontamination and disinfection policy. The decontamination certificate can be found on the CWP Medical Devices web page.

Following repair/service, the device will usually be returned to the department to which it is logged, unless otherwise specified by the external provider. A device being returned from inspection, service or repair will not require a decontamination certificate as it won't have had any patient contact.

For all community loan equipment that requires repair or maintenance please refer back to the provider Rosscare.

3.7 Decontamination

For information relating to the decontamination of medical devices please refer to the decontamination and disinfection policy. All staff have a responsibility to decontaminate any equipment after its use or if the item or equipment becomes contaminated during its use. This would not apply to podiatry instrumentation; for example any item dropped should **not be** decontaminated and reused, but packed for reprocessing and another pack opened.

If a service user has been assisted to use an item of equipment, this should be decontaminated by the member of staff or by the service user with assistance from a member of staff. All communal equipment should be decontaminated before/after use for each individual patient. All decontaminated devices must have a decontamination certificate attached (see decontamination and disinfection policy).

4. Training and competency

All users of medical devices within the Trust must be sufficiently competent to do so without risk of injury or harm to themselves, the patient or others. Health care professionals have a responsibility for ensuring that, as part of their continuing professional development, they acquire, maintain and disseminate knowledge and skills in the use of medical devices where appropriate; for further information please refer to the mandatory employee learning policy. All team/ward managers are responsible for monitoring/identifying all staff medical device(s) training needs through the appraisal policy and procedure. Review of the annual appraisal plans will be undertaken by the team lead or nominated deputy with the individual staff in line with CWP appraisal policy and procedure.

4.1 Identifying staff groups that are authorised to use medical devices

A training needs analysis (TNA) for all existing medical devices has been completed and is outlined in Appendix 2. Staff must consult this as part of the induction and appraisal process.

4.2 Identifying training needs

The risk category allocated will be categorised by the external provider(s) and the Chair of the MDCG to determine the training requirements for all staff groups. Devices will be categorised as high, medium or low risk (see Appendix 2 for clarification of risk status of current devices and training requirements). This will be kept up to date by the Chair of the MDCG.

The training requirements based on the risk category are as follows;

Device risk Category	Training requirements	Competency assessment
High	Staff **MUST NOT** use this device unless they have been trained and are competent to do so. This training will be externally provided by the manufacturer or in house by a nominated lead trainer and the frequency will be annually.	Formal training is required. Ongoing competency will be verified through annual appraisal processes and on Local Induction. **Staff must not use high risk devices if they are not competent to do so**
Medium	Staff **MUST NOT** use this device unless they have been trained and are competent to do so. This training can be externally provided by the manufacturer	Ongoing competency will be verified through annual appraisal processes and on Local Induction.

Device risk Category	Training requirements	Competency assessment
	or in house by a nominated lead trainer. The frequency of this training will either be linked to the current MEL programme e.g. Manual handling annual training and hoists, or will be determined as part of ongoing appraisal and CPD processes.	**Staff must not use medium risk devices if they are not competent to do so**
Low	There may not be training associated with these devices, however staff will be asked to familiarise themselves with user instructions for safe use, training may also be cascaded. The frequency of this training will either be linked to the current MEL programme e.g. Manual handling annual training and hoists, or will be determined as part of ongoing appraisal and CPD processes.	Staff must verify their own competency in relation to these devices and if they do not feel competent to use the device, must raise with their line manager/supervisor immediately and prior to using the device. **Staff must not use low risk devices if they are not competent to do so**

4.3 Frequency of training

The external provider will undertake a training needs analysis on medical devices within the Trust, allocating a risk rating as described above and determining associated training requirements as per manufacturer's instructions. For existing medical devices currently in use in the Trust, a training needs analysis has been developed and is detailed in Appendix 2, outlining frequency of training required.

4.4 Recording staff training

All service line/team managers are responsible for monitoring/identifying all staff medical devices training needs through the annual appraisal process. All staff are responsible for ensuring compliance with the contents of this policy and with agreed annual appraisal plans. Review of the annual appraisal plans will be undertaken by the service line/team lead or nominated deputy with the individual staff in line with CWP appraisal policy and procedure. Any staff member who does not complete training courses associated with medical devices within agreed annual appraisal plans will be managed locally through individual supervision by their line manager.

A trust wide training needs analysis for medical devices will be maintained by the medical devices team based on risk category of the device. All training related to medical devices will be reported as follows:

- All new staff including any staff who have had long periods of absence or leave e.g. sickness, secondments, maternity leave etc or who have not undertaken any training in the use of medical devices specific to the area of work are required to undertake a formalised process of assessing competency prior to using high or medium risk medical devices. This will form part of their induction process and be recorded locally by the service line/team manager or nominated deputy on the ESR (Electronic staff record). For further information please refer to the induction policy;
- All training provided by the CWP Education department will be recorded on ESR by staff in the Training and Education department.
- For staff already in post, competency assessments for high and medium risk devices will be undertaken as part of the appraisal procedure. This will be recorded locally by the service line/team manager or nominated deputy onto the ESR system.

4.5 Ensuring training needs are met

Managers will determine through the Induction/appraisal process which staff need to receive training for safe use of medical devices as outlined in the medical devices TNA - Appendix 2. Follow up of those who do not complete training will be conducted via supervision or formally via the appraisal process.

- On the first occasion where an individual fails to complete the medical devices training the line manager must follow this up directly with the individual and ensure they complete the appropriate training at the earliest possible date
- Where an individual continually fails to complete the medical devices training within the agreed period the same process as on the first occasion will be followed up by the line manager to identify the reason for continual non-compliance.

5. Storage and transportation of medical devices

All devices must be segregated according to whether clean or dirty; the two should never be stored or transported together. Communal devices being returned to the ward devices store, any other storage area or being lent to another team/ward must have a decontamination certificate attached to confirm that it has been cleaned and disinfected.

All devices should be visibly clean prior to transportation and single use or single patient use items disposed of at point of usage i.e. at patients home. Devices will not be removed from the department, or accepted into another department without a completed decontamination certificate. Staff involved in the transportation of devices should ensure that the decontamination certificate remains attached to the devices until it reaches its final destination.

6. Adverse incidents involving medical devices

6.1 Adverse Incidents involving a CWP medical device and a patient

If an adverse incident occurs when using a medical device/equipment, proceed as follows:

- Check and make necessary steps for the safety and wellbeing of the patient.
- Take device involved out of action along with any other material evidence such as packaging if available.
- Label the affected device ‘Do Not Use’ and keep it safe away from other equipment
- Record on the Datix electronic reporting system the date and time of the incident, device settings if applicable, details of the incident and effect on the patient/staff. Also detail the medical device involved and unique asset number, type, make, model and serial number. Record any error message or failures
- Report the incident to the relevant service line manager and the Senior Health and Safety Advisor on 01244 397715.

6.2 Adverse incidents involving non CWP medical devices

In the event of an adverse incident involving equipment provided by Rosscare to community patients, staff must ensure that:

- Advice is given to the patient/family member or carer not to use the device;
- The incident must be reported by phone to Rosscare as soon as possible following the incident;
- The incident must be documented in the patient(s) care records and an incident form completed on the CWP Datix system

CWP Senior Health and Safety Advisor will send a copy of the incident via email to the Physical Health link person for equipment. A quarterly Datix report of all community equipment incidents will be sent to the Physical Health link person for equipment via the MDG agenda by the Senior Health and Safety Advisor for review. The report will be taken to the Rosscare Operational User Group meeting by the Physical Health link person for equipment who will ensure all actions from the Rosscare meeting are noted and reported back at the MDG meeting.

7. Medical Devices lent to other departments

7.1 Internal loans

If a medical device is lent out directly from one ward/team to another it is the responsibility of the lending ward/team lead to:

- Check over the device and ensure it is fit for use;
- Ensure that the borrowing staff are aware of any pending maintenance that may be due, the next service date will be on the device asset label;
- Ensure that the device is recalled for maintenance check when the engineer arranges a suitable date to attend
- If the equipment is given to the other ward/team permanently the original team lead must notify the Medical Devices and Safety Officer on 01244 397725 so the location of the device can be changed on the equipment inventory

7.2 External loans to other Trusts or organisations

Loans of CWP medical devices to another health care provider will not be allowed under any circumstances.

7.3 Charitable Items

CWP cannot accept any charitable item that is a medical device. All medical devices must be sourced through approved procurement processes clearly identified within this policy (see Appendix 1).

8. Medical devices replacement and decommissioning

Life expectancy of medical devices varies hugely depending on how often it is used, its design and complexity. Departments must have plans to replace and review medical devices to ensure safe delivery of their services.

8.1 Reasons for condemning and decommissioning equipment

There are a number of reasons why equipment will need condemning and decommissioning, these could be as follows:

If the cost of repairing the device is equal to or above two thirds of the cost of replacing

- Environmental or service needs for the equipment changes
- It becomes clinically obsolete, or no longer required
- Spare parts no longer available
- History of being unreliable
- Notification of withdrawal from use due to MHRA safety alert
- Condemned as unrepairable by the maintenance contractor.

8.2 Condemnation and disposal of medical devices (not beds, hoists etc)

The person initiating the condemnation process must follow the flow chart for condemning and disposing of medical devices (see Appendix 4) and email details of the asset number, location of the equipment and reason for condemnation to cwp.safetyofficer@nhs.net. The equipment should be

decontaminated in line with Infection Prevention and Control guidelines and a decontamination certificate must be completed to accompany the equipment.

8.3 Condemnation and disposal of medical devices provided by Healthcare Matters (e.g. beds, hoists, height adjustable baths)

When a decision is made to decommission or condemn a medical device which includes beds, hoists or adjustable baths a request to replace the device with equipment monies can be made via the approved financial processes. When a decision has been made that a medical device has reached the end of its working life, Healthcare Matters, the external provider will:

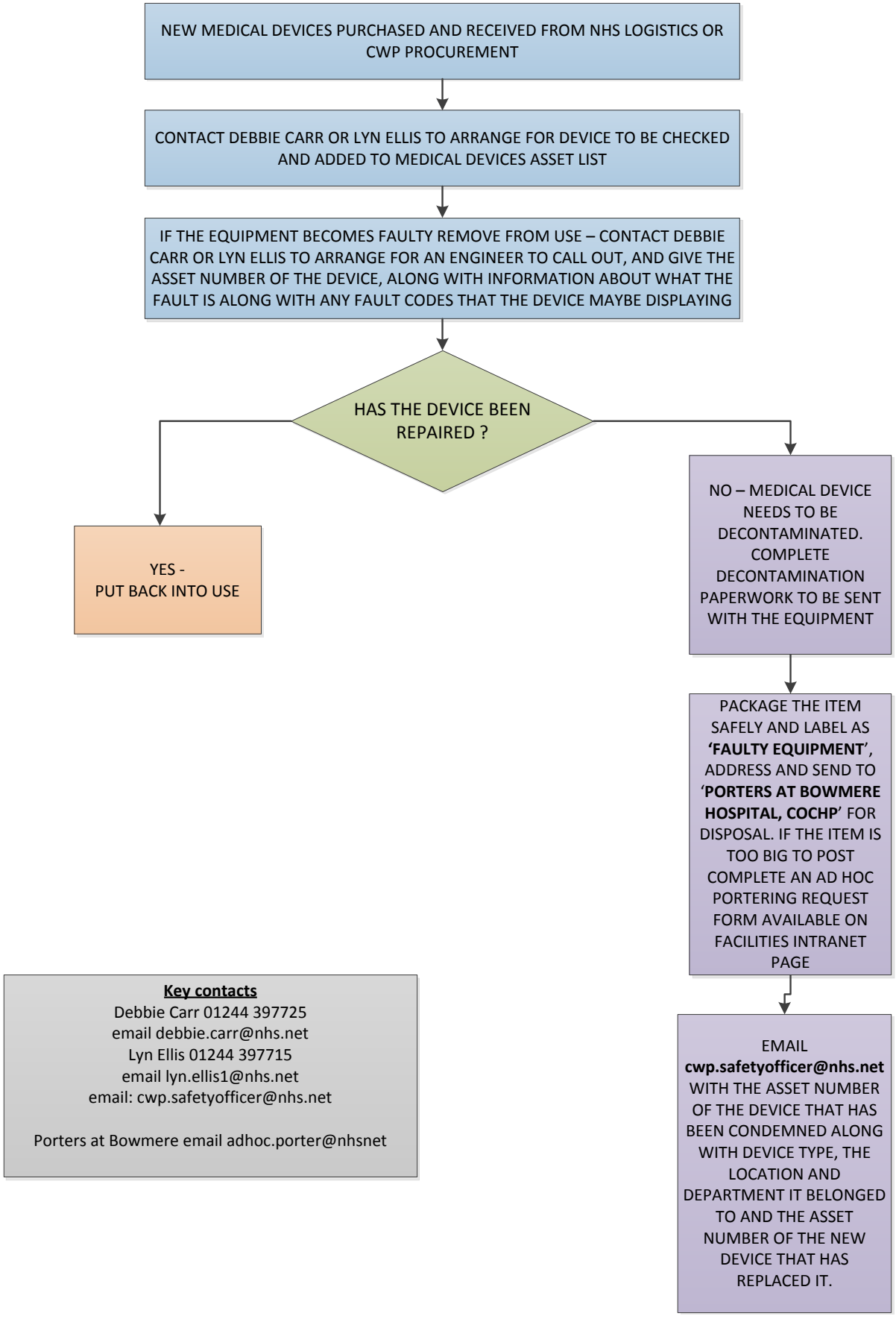
- Notify CWP Estates of the decision
- Remove the item from their inventory and update their inventory
- Include the action into an annual report

CWP Estates department when informed of decommissioning/condemnation decision will:

- Remove the decommissioned/condemned medical device from service to a secure area
- Inform the medical device team of the action taken
- Arrange for the decommissioned/condemned medical device to be removed

All decisions to decommission or condemn podiatry instruments will be taken by the external provider prior to being issued to CWP Physical Health Services. In the event that a podiatry instrument is condemned it will be replaced immediately by the external provider.

Appendix 1 – Process for accepting and condemning and disposal of medical devices



Appendix 2 – Training Needs Analysis (TNA)

The following devices are high risk and therefore require annual training:

Name / Type of device	Risk category	Registered Nurse	Non Registered nurse	AHP's	Medical staff	Delivery mode
Apomorphine pumps	High	✓				Obtain specific training from Parkinson's Nurse
ECG Machine	High	✓			✓	Competency based training provided by Education CWP / ongoing CPD
ECT Apparatus	High	✓			✓	On Induction to ECT Suite and annual thereafter by ECT Nurse
Syringe driver	High	✓				E-Learning package / ongoing CPD
Thymatron Machine	High				✓	On Induction to ECT Suite by Consultant and annually thereafter

The following devices are medium and low risk and therefore frequency of training will be either linking to Trust MEL programme or via frequency as determined by CPD/appraisal:

Name / Type of device	Risk category	Registered Nurse	Non Registered nurse	AHP's	Medical staff	Delivery mode
Acupuncture Needles	Medium			✓		External training/ongoing CPD
Alcometer	Low	✓	✓			Local Induction
Ambubags **	Medium	✓	✓	✓		Included in basic and intermediate support training provided by Education CWP annually
Aseptic Non-touch Technique kits	Low	✓	✓	✓		E-Learning
Audiometry Equipment (OH & School Health)	Medium	✓				Induction/ongoing CPD
Auroscope	Low	✓			✓	Local Induction
Bariatric Equipment	Medium	✓	✓	✓		Delivered as part of Manual Handling Training
Bath Seat Hoist	Medium	✓	✓	✓		Delivered as part of Manual Handling Training
Bed Rails	Medium	✓	✓	✓		Delivered as part of Manual Handling Training
Bladder scan	Medium	✓	✓			Induction/ongoing CPD
Bladder Stimulator	low	✓	✓			Local Induction
Blood Analysing Machine	Medium	✓				External and Internal training/ongoing CPD

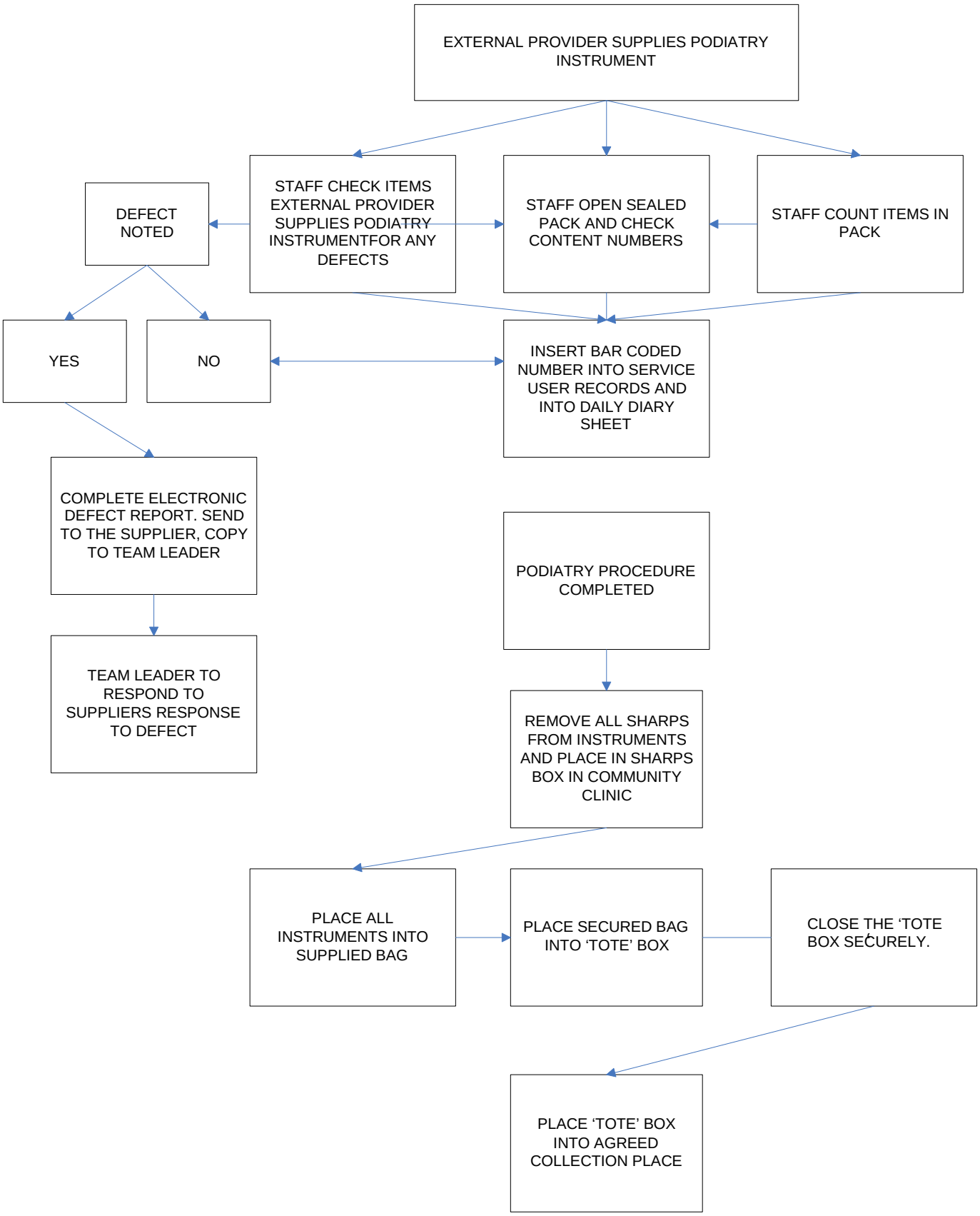
Name / Type of device	Risk category	Registered Nurse	Non Registered nurse	AHP's	Medical staff	Delivery mode
Blood Glucose Machine **	Medium	✓	✓			Local Induction/ongoing CPD
BMI monitor	Low	✓	✓	✓		Local Induction
BP Machine and Equipment **	Medium	✓	✓			Local Induction and acquisition of new equipment
BP / Temp / SPO2 Monitor **	Medium	✓	✓			Local Induction and acquisition of new equipment
Capnograph equipment (ECT)	Medium	✓			✓	On Induction to ECT Suite
Carbon Monoxide monitors	Low	✓	✓			Local Induction
Ceiling tracking hoist	Medium	✓	✓	✓		Delivered as part of specific Manual Handling Training
Compound ultrasound and interferential equipment	Medium			✓		Internal training delivered every 2 years
Cortico Steroid Injections	Medium			✓		Local Induction/ongoing CPD
Defibrillator	Medium	✓	✓	✓		Delivered as part of MVA Training and basic/intermediate basic life support training
Doppler Monitor	Medium	✓				Delivered as part of leg ulcer training course
Dust Extraction Drill	Medium			✓		Local Induction/ongoing CPD
Ear Syringe Equipment	Medium	✓				External training/ongoing CPD
Electrotherapy	Medium			✓		Internal training delivered every 2 years
Enteral feeding pump machine	Medium	✓	✓			Local Induction/ongoing CPD/Acquisition of new equipment
Exercise Equipment (row / bike)	Low			✓		Induction
Eye & Eyesight Testing Equipment	Medium	✓				Induction/Ongoing CPD
Heat Treatment	Medium			✓		Induction/Ongoing CPD
Height adjustable baths	Low	✓	✓	✓		Delivered as part of Manual Handling Training
Hydraulic hand dynamometer	Low			✓		Induction/Ongoing CPD
Injections	Medium	✓	✓	✓	✓	Local Induction/ongoing CPD/drop in training via Education CWP dept. External training for new products
Laser Therapy	Medium			✓		Internal training delivered every 2 years
Mangar Elk	Medium	✓	✓	✓		Delivered as part of Manual Handling Training
Mechanical beds	Low	✓	✓	✓		Manual handling training provided by Education CWP dept.

Name / Type of device	Risk category	Registered Nurse	Non Registered nurse	AHP's	Medical staff	Delivery mode
Mobility Aids	Medium	✓	✓	✓		Local Induction/ongoing CPD
Moving and Handling Equipment	Medium	✓	✓	✓		Manual handling training provided by Education CWP dept.
Nebulisers	Low	✓	✓	✓		Local Induction
Neuromuscular Stimulator	Medium			✓		Local Induction/ongoing CPD
Ophthalmoscope	Low	✓			✓	Local Induction
Oxygen administration equipment **	Medium	✓	✓			MVA/Life support training provided by Education CWP dept.
PAT Slide / Banana Board	Low	✓	✓	✓		Manual handling training provided by Education CWP dept.
Peak Flow Meter	Low	✓	✓	✓		Local Induction
Plinths	Low			✓		Local Induction
Podiatry Instruments	Medium			✓		Local Induction/ongoing CPD
Pressure relieving equipment	Medium	✓	✓			Manual handling training provided by CWP training dept.
Profile Bed	Medium	✓	✓			Local induction and external training on acquisition of new equipment
Pulse and Short Wave Treatment	Medium			✓		Internal training delivered every 2 years
Pulse Oximeter **	Medium	✓	✓			MVA training provided by Education CWP dept.
Short Wave Diathermy	Medium			✓		Internal training delivered every 2 years
Slide sheets	Low	✓	✓	✓		Manual handling training provided by Education CWP dept.
Slings	Medium	✓	✓	✓		Manual handling training provided by Education CWP dept.
Spirometry equipment	Medium	✓				Local Induction and acquisition of new equipment
Suction Machine **	Medium	✓	✓			MVA/life support training provided by Education CWP dept.
TENS Machine	Medium			✓		Internal training delivered every 2 years
Thermometers **	Low	✓	✓			Local Induction and acquisition of new equipment
Tipping Trolley	Low	✓				Induction to ECT Suite
Trophic Stimulator	Medium			✓		Induction/ongoing CPD

Name / Type of device	Risk category	Registered Nurse	Non Registered nurse	AHP's	Medical staff	Delivery mode
Urinary Catheter Equipment %%	Low	✓	✓			Local Induction/ongoing CPD
Venepuncture	Medium	✓	✓	✓	✓	Competency based training provided by Education CWP dept.
Wax Bath	Medium			✓		Induction/ongoing CPD
Weighing scales/ Weighing machine	Low	✓	✓			Local Induction

** Ward staff only

Appendix 3 – Disposal of podiatry instruments flowchart



Appendix 4 - Medical devices information check list
(Does not include beds and hoists)*

If a medical device is no longer working correctly, proceed as follows:

- Label the device as 'Do Not Use' decontaminate it and remove from use
- Contact Medical Devices and Safety Officer 01244 397725 or Senior Health and Safety Advisor 01244 397715 or email safetyofficer@nhs.net
- Give details of the CW asset number on the equipment, along with the type of device and details of the fault and location
- Give a name and contact number for the engineer to report to on site
- Indicate whether the repair is urgent or non-urgent

If an untoward incident occurs when using a medical device/equipment, proceed as follows:

- Check and make necessary steps for the safety and wellbeing of the patient
- Take device involved out of action along with any other material evidence such as packaging if available
- Label the affected device '**Do Not Use**' and keep it safe away from other working equipment
- Record on the Datix electronic reporting system the date and time of the incident, device settings if applicable, details of the incident and effect on the patient/staff. Also detail the medical device CW asset number and type of equipment, model and serial number. Record any error message or failures
- Report the incident to the relevant service manager and Senior Health and Safety Advisor on 01244 397715

All medical devices and equipment used to treat or monitor patients must:

- Be appropriate and fit for purpose
- Only be used by a competent person trained in the use of the equipment
- Have been decontaminated prior to use
- Have a unique CW asset number on it and be within date for next maintenance check (detailed on the asset label)
- Be checked for any signs of wear, damage or faults that should be reported

**Profiling beds, hoists, slings, patient lifting equipment and height adjustable baths are maintained by 'Healthcare Matters' and call outs should be made via the CWP Estates online helpdesk, (icon available on computer desk top), click on 'proceed and view recent calls' and complete section 3 and 4. If urgent then follow up with telephone call to the Estates Dept. 01244 397737 (Wirral and West) or 01625 663100 (East).*

Appendix 5 - Medical Fridges – User Guide

Daily Checks:

- Record minimum and maximum temperature twice a day
- **RESET** minimum and maximum readings after each recording.
- Consult the user manual on how to record and reset minimum and maximum temperatures – different models have different ways.

Resetting the minimum and maximum will mean when you next take minimum and maximum readings – you will get the minimum and maximum during the time frame from whenever you last reset them.

Monthly Checks:

- Clean the exterior of the fridge – remove any dust from the back.
- Clean the inside of the fridge with water and defrost if necessary.

Fridge placement:

- Keep at least 5cm gap between the back of the fridge and the wall/cupboard behind in order to allow good air circulation.
- Do not place any objects on top of the fridge.
- Keep the fridge in a cool room out of direct sunlight.

Product storage:

- Spread the products around the fridge evenly.
- Leave a finger width between each pile of products.
- Avoid using containers or bags to store products.
- Keep the products away from the back of the fridge to allow good air circulation.
- Do not store food or drinks in the fridge.
- Do not over fill the fridge.

All the above storage advice ensures the air circulation is optimal and the temperature remains within the required 2-8 degrees C.

Other advice:

- Do not leave the fridge door open for periods longer than 15 seconds at a time.
- The temperature on most fridges will occasionally go over 8 degrees C and below 2 degrees C. Particularly after long periods of the door remaining shut (weekends).
- The temperature displayed on the fridge shows the temperature of the products not the temperature of the air.
- Therefore, it is recommended that an external thermometer is used to record the temperature of the air. However, please bear in mind this will only be a measurement of wherever the thermometer sensor is placed and not an overall air temperature of the fridge.
- You should only be concerned if the minimum and maximum readings are out of the 2-8 degrees C range. You should then contact **Medical devices and Safety team** on **01244 397725** or **01244 397715** to arrange a callout for the medical device engineer.
- Contact your local pharmacy link person for advice on onward storage of the medication until the fridge is repaired.

Appendix 6 – Process for approval, procurement and commissioning of medical devices