Melanie van Limborgh

Chairman of the National Association of Theatre Nurses
United Kingdom
The National Association of Theatre Nurses
The National Association of Theatre Nurses

• Four Countries of the United Kingdom
• Over 8500 multidisciplinary members
• Services we provide are reliant on the expertise of Decontamination Services
The 1980s
The 1980s
Decontamination Lead

Chelsea and Westminster Healthcare

NHS Trust
Two hats or two roles in decontamination relationships

- Perioperative Nurse
- Decontamination Lead
Essential Relationships in Decontamination
Top Team

- Perioperative (Operating Room Staff)
- Sterile Services/Decontamination Services
- Surgeons/Physicians
- Infection Control
- Authorised Persons
Essential relationships in Decontamination
Other Key Players

- Executive/risk/management staff
- Departments of Health & similar
- Medical Devices Industry
- Endoscopy staff
- Community staff
- Outsourced suppliers
The Essential Relationship - Perioperative Staff
The Essential Relationships

- Indifference
- Decontamination training is minimal
- Still large gaps in knowledge base
- Notable percentage of staff locally decontaminating
- What’s the fuss about?
Perioperative staff

• Perioperative specialists... not decontamination specialists
The Decontamination Life Cycle
Essential Relationships between Decontamination Services

Awareness started small.....
Essential Relationships between Decontamination Services

But is growing......
Colleagues from other countries
What staff need.....and often don’t know what they need

Training and Education
The Perioperative Staff and Surgeons and Physicians

What is needed from Decontamination Services?

- Flexibility
- Ensuring changing needs always met
- Complexity of surgical cases not always as expected
The Essential Relationships

- Instrument inventory has to be ‘fit for purpose’
- Instrument inventories insufficient
- Finances often difficult to obtain
- New surgeons and/or new lists do not always bring new instrumentation
- Lack of control on schedules
Why does this change happen?

• More complex surgery required when wound open = list and equipment change

• Emergency takes priority = list and equipment change

• No beds = list and equipment change

• Patient ate by mistake = list and equipment change etc, etc, etc
<table>
<thead>
<tr>
<th>Surgeon</th>
<th>Time</th>
<th>Operation (x-matched units)</th>
<th>G&amp;S</th>
<th>Ward</th>
<th>Number</th>
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</thead>
<tbody>
<tr>
<td>TH 1 EMERGENCIES</td>
<td>1.30</td>
<td>1) Cystoscopy + bladder washout</td>
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<td></td>
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<td>2) TURP</td>
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<td>3) TURP</td>
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<td>4) Nasal procedure</td>
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<td>5) Right ureteroscopic stone extraction + / - D stent</td>
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<td></td>
<td>6) Uretero/ureteroscopic stone extraction / manipulation + left D stent</td>
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<td>7) Reversal vasectomy</td>
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<td>8) TURBT</td>
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<td>9) Urethral dilatation</td>
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<td>10) Complicated circumcision</td>
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<td>11) Cystoscopy + biopsy</td>
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<tr>
<td>TH 2 DR. DINNEEN</td>
<td>8.30</td>
<td>1) Revision of breast scars</td>
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<td>2) Revision bilateral breast reduction + fat transfer</td>
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<td>3) Change of dressing</td>
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<td>4) Thinning</td>
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<td></td>
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<td>5) Lippomotion to interscapular - neck lymphnode fat transfer to neutral flap</td>
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<tr>
<td>TH 3 MR. IOHNS</td>
<td>8.30</td>
<td>1) Total abdominal hysterectomy</td>
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<td></td>
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<td>2) ERPC</td>
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<td>3) Hysteroscopic polypectomy + insertion of minima</td>
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<tr>
<td></td>
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<td>4) ERPC</td>
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<td></td>
<td>5) Hysteroscopy + D and C</td>
<td></td>
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<tr>
<td>TH 4 MR. LUPPTON</td>
<td>8.30</td>
<td>1) Hair restoration</td>
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<td></td>
<td></td>
<td>2) Swabbing to right hand</td>
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<td></td>
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<td>3) Revision left lumbar bone shortening advancement of loose tissue to cover stamp</td>
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<td></td>
<td></td>
<td>4) Nerve graft to ulnar right hand</td>
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<tr>
<td>TH 5 MR. G. WILLIAMS</td>
<td>1.30</td>
<td>1) Left above uncompartamental knee replacement</td>
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<tr>
<td></td>
<td></td>
<td>2) Left shoulder replacement</td>
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<tr>
<td>TH 6 MR. KATSAHMA</td>
<td>8.30</td>
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<tr>
<td>TH 6 MR. GIBBONS</td>
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</tr>
<tr>
<td>TH 6 TRAUMA</td>
<td>1.30</td>
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<tr>
<td>MR. DINNEEN</td>
<td>17.00</td>
<td>1) Cystoscopy</td>
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<td>2) Change of dressing</td>
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<tr>
<td>MR. MYERS</td>
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</tr>
</tbody>
</table>
The Essential Relationships

• Time and staffing pressures
• Forecasted staffing shortages
• 1 in 5 school leavers needed
The Users View

• Intense activity and throughput
• 50% extra activity to 2018
“Don’t care how it gets clean as long as it does”
Essential relationships
- Perioperative staff

Fast track ........ never fast enough
Too late!
The worst moment
It is never sufficient for our needs
Sterile Services
The Essential Relationship

• Flexible
• Expert bespoke/individual service
• Able to understand our users and our pressures
• Reachable
• Ensure instrumentation back on line with minimal delay
The Essential Relationship

• Fast attention to repairs and non-conformities
• Theatre users are provided with an update of changes in Sterile Services
• Users should tell Sterile Services what they need
• Mind readers
The Essential Relationship - Executives/Management
The Executives and Management

• Surgical capacity and activity

• The Risk/Governance issue
The Devil is in the Detail

- Convincing the Executive/risk/management teams
The Financial Challenge
The Executives and Management

- No instruments – no surgery
- No surgery - no income
What staff need... and often don’t know what they need

Training and Education
The Essential Relationship - Medical Manufacturers

An important liaison for us
Medical Manufacturers

• Asking us what we think
• Keeping up to date with what is new on the market and how it is decontaminated
• Keeping us up to date on new directives
• Product standards and literature
Medical Manufacturers

- Help with business cases/bids
- Trade-in deals
- Deals on consumables
- Sale or return (expiry dates)
Medical Manufacturers

• Supervision for first use of new instruments

• Be there for the surgeon’s ‘growing pains’
Medical Manufacturers

- Operating instructions
- Decontamination instructions
- Disassembly/assembly
- Packaging details
Medical Manufacturers

• What are the disposable alternatives?
• Deals
• Inform users the reasons for single use - some still don’t believe it
Loan sets
# Loan Pick List

**Deliver To:**

Charlotte & Westminster Hosp. *
Maggie Kimoch
Teitlercs
99 Fulham Road
London SW10 9SE

**Brand**

**Procedure**

**Brand Name:** PACEA
**Procedure:** KIT

**Delivery Instructions**

****URGENT SAME DAY****

<table>
<thead>
<tr>
<th>Loan No.</th>
<th>K/R Month</th>
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<th>Op. Date</th>
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<td>G1 PATELLA DRILL 1.5</td>
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<td>G1 PATELLA DRILL 2.5</td>
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<td>G1 PATELLA DRILL 3.0</td>
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<td>G2 DRILL 1.0</td>
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<td>G2 DRILL 3.0</td>
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</tbody>
</table>

*CONTINUED...

**Picked From:** Loan On Demand Trays, Warehouse

**Signed:** 

**Date:** 25/2/04
The Essential Relationship

Liaising with Decontamination/Sterile Services Leads in Hospitals and Clinical Areas
The Essential Relationship

Other key areas......

... 

Hat No.2
The Essential relationships
Endoscopy
That’s not applicable to us….is it?
The Essential relationships
Endoscopy

- A safe working environment
- Adherence to national standards
- Compliant machinery
- Tracing and tracking
- Centralisation in house?
What staff need.....and often don’t know what they need

Training and Education
The Essential Relationship
The Community
The Community
What staff need.....and often don't know what they need

Training and Education
Essential Relationships - The Decontamination Committee

- Endoscopy Staff
- Theatre Staff
- Estates Staff
- Infection Control Staff
- Risk Management
- Sterile Services
Eggs and Bacon
The Essential Relationship - Outsourcing

• New developments in England
Outsourcing

- Larger instrument inventories
- The specialised or delicate instruments
- Loan sets?
- Traceability
- Links to the users
- Guaranteeing instruments
Outsourcing

• Instrument hoarding?
• Local decontamination?
• Mini decontamination areas?
October 1999 – coping with the major incident
Learning from each other
The Users View

The Four Ps of Marketing

Patient*
Product*
Place*
Price
Promotion
We are here for patients
The Essential relationship

Thank you
The Essential Relationships in Decontamination Services

Melanie.vanlimborgh@natn.org.uk
# A.O. Distal Femoral Nail Set

**Date:** 09/02/04

<table>
<thead>
<tr>
<th>CAT No.</th>
<th>CONTENTS</th>
<th>CHECK</th>
<th>ISSUE NO. 1</th>
<th>ISSUE NO. 2</th>
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<tbody>
<tr>
<td>555.330</td>
<td>Vario Case with lid</td>
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<tr>
<td>357.122</td>
<td>Rangographic Ruler</td>
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<td>357.117</td>
<td>Hammer Guide for DFN</td>
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<td>383.100</td>
<td>Universal Check with T-Handle</td>
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<td>321.170</td>
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<td>357.026</td>
<td>Slide Hammer 400g</td>
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<td>Insertion Handle for DFN</td>
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<td>357.116</td>
<td>Aiming Arm for Spiral blade Locking</td>
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<td>357.115</td>
<td>Aiming Arm for Standard Locking</td>
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<td>357.791</td>
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<td>357.129</td>
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<td>357.099</td>
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<td>318.400</td>
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<td>357.301</td>
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<td>357.133</td>
<td>Extraction Screw for AFN/DFN</td>
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<td>357.118</td>
<td>Protection Sleeve 11.0/8.0</td>
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<td>357.132</td>
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<td>357.620</td>
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<td>357.120</td>
<td>Spiral Inserter for Spiral Blade</td>
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</tbody>
</table>

Packed In: Vario Case with Lid (Stainless Steel)  
Wrapped In: Heavy Duty Tray Wrap

**Inspected & Assembled by:**  
**Date:**

**Scrub Nurse Pre-Op:**  
**Date:**

**Scrub Nurse Post-Op:**  
**Th.No.:**

**Supplementary & Comments:**
What staff need.....and often don’t know what they need

Training and Education
# Certificate of Decontamination Status

**Description of item(s):**

**To be returned to:**

PLEASE TICK THE RELEVANT BOX AND FILL IN THE RELEVANT DETAILS BELOW

<p>| | | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>A</td>
<td>This equipment / item <strong>HAS NOT</strong> been in contact with blood, body fluids, tissues, respiratory gases, pathological samples or other biological or chemical hazards.</td>
<td></td>
</tr>
</tbody>
</table>
| B | This equipment / item has been decontaminated in accordance with Department of Health Guidelines. The method of decontamination was:  
1) Washing followed by disinfection at 90° for 1 min in AWD or UWD.  
2) Manually cleaned in accordance with DoH manual cleaning protocol v.1 |   |

Signed: ___________________________ Name (Printed):

Date: ____________________ Designation: ____________________

**Batch Code(s):**
Helping the relationship – what is needed by the user?

- Access to colleagues doing similar work
- Keeping up to date – new technology
- Users meetings
Outsourcing

The return of the bench top steriliser and washing in the sink?
The National Association of Theatre Nurses

An essential relationship with the Institute of Decontamination Sciences
**PRE-PURCHASE QUESTIONNAIRE**

**EXTENDED FORM PPQ—June 2001**

Produced by: NHS Purchasing and Supply Agency, Scottish Healthcare Supply, Northern Ireland CAS Regional Supply Service and Welsh Health Supplies in conjunction with the Association of British Medical Industries

This form is intended to supply procurement purchasers with information about equipment being considered for purchase. It is intended principally to provide information on electrical safety, sterile substances and laboratory equipment. The form may also be used for other products, including non-electrical items and be used for information on equipment being supplied on loan to which cost and all financing will be included. Please ensure all relevant questions are answered.

<table>
<thead>
<tr>
<th>Procedure and selection by purchaser</th>
<th>Supplier's Reference</th>
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<tbody>
<tr>
<td>Name of Requester</td>
<td>Name of Purchaser</td>
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<tr>
<td>Title or Type</td>
<td>Manufacturer</td>
</tr>
<tr>
<td>Contact Details</td>
<td>Telephone No.</td>
</tr>
<tr>
<td>Address</td>
<td></td>
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</tbody>
</table>

**CE MARKING**

1. a) Does the product carry the CE marking? **YES**
   b) If CE marked, could you confirm:
      i) Whether the Medical Device Directive (93/42/EEC) applies?
      ii) Whether the Medical Devices Directive (98/79/EC) applies?
      iii) Whether the In Vitro Diagnostic Medical Device Directive (98/79/EC) applies?
      iv) Whether the Clinical Investigation (EC) 90/385/EEC, or performance evaluation (93/42/EEC) or both, was completed before putting the device on the market?
      v) Whether the Medical Devices Directive (98/79/EC) applies and the device is a medical device and not a CE marked device, or a CE marked device has been rejected because it is non-compliant with the CE medical device regulations?

**MANAGEMENT SYSTEM STANDARDS**

1. a) Is the manufacturer currently registered to the management system standards (i.e., ISO 9001, ISO 14001, ISO 13485)? **YES**
   b) If yes, please state which standard(s) and put the appropriate box.
   c) Is the manufacturer currently registered to any management system standards?
   d) If yes, please state which standard(s) and put the appropriate box.

**SAFETY STANDARDS**

1. a) The products are CE marked to (i) EN 60601, for which safety standard(s) does the product comply?

<table>
<thead>
<tr>
<th>Standard</th>
<th>Test Version</th>
<th>Certificate Number</th>
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<tbody>
<tr>
<td>EN 60601</td>
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**SERVICE / MAINTENANCE INSTALLATION**

1. a) Are maintenance and installation manuals readily available? **YES**
   b) If not, please state:
      i) Full model diagram
      ii) Part numbers
      iii) Service instructions
      iv) List of essential equipment

2. a) In addition to the servicing and installation manuals, is there any formal training for repair personnel?
   b) If yes, please state:
      i) Date of training
      ii) Type of training
      iii) Details of provider
      iv) Certification

3. a) Is the supplier able to provide a document for the purchaser's or their third-party technical personnel?
   b) If yes, what is the fee for this service?
   c) If yes, who is the supplier’s contact person for this service?
The Circle of Life
## PRE-PURCHASE QUESTIONNAIRE

**EXTENDED FORM PPQ—June 2003**

Produced by NHS Purchasing and Supply Agency, Scottish Healthcare Supplies, Northern Ireland and CSA Regional Supplies Service and Welsh Health Supplies in conjunction with the Association of British Healthcare Industries.

This form is intended to enable prospective purchasers with information about equipment being considered for purchase. It is intended primarily for procurement officers and solicitors/contractors rather than end-users. The form is not to be used for the evaluation of equipment being supplied on line, where it may be sold off temporarily. Additional information pertinent to equipment being supplied on line, is from which the equipment will not be permanent will be required. This ensures all relevant questions are answered.

### For retrieval and completion by supplier

<table>
<thead>
<tr>
<th>Reference</th>
<th>Supplier's Reference</th>
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</thead>
<tbody>
<tr>
<td>Name of Product</td>
<td>Manufacturer</td>
</tr>
<tr>
<td>Type</td>
<td></td>
</tr>
<tr>
<td>Model</td>
<td></td>
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<tr>
<td>Quantity of Units</td>
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<td>Supplier</td>
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<tr>
<td>Telephone No</td>
<td></td>
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<td>Fax No</td>
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</tbody>
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### CE Marking

1. a) Does the product carry the CE mark?  
   - Yes  
   - No  

2. a) Is this productITE?  
   - Yes  
   - No  

3. a) Is this product a “conventional device” (MDD/93/42/EEC)?  
   - Yes  
   - No  

4. a) Is the product intended for “clinical investigations” (CE-IVDD) or “performance evaluation” (CE-IVPE)?  
   - Yes  
   - No  

### MANAGEMENT SYSTEM STANDARDS

1. a) Is the manufacturer or supplier currently registered to one or more management system standards (ISO 9001, ISO 13485, ISO 14001)?  
   - Yes  
   - No  

### SAFETY STANDARDS

1. a) Is the product CE marked (MDD/93/42/EEC) or a product with which safety should be clearly stated?  
   - Yes  
   - No  

2. a) Is the product CE marked (MDD/93/42/EEC) or a product with which safety should be clearly stated?  
   - Yes  
   - No  

### SERVICE / MAINTENANCE / INSTALLATION

1. a) Is the installation and maintenance provided?  
   - Yes  
   - No  

2. a) Is the installation and maintenance provided?  
   - Yes  
   - No  

### Other Information

1. a) Is the supplier able to provide a technical reference for the product?  
   - Yes  
   - No  

2. a) Is the supplier able to provide a technical reference for the product?  
   - Yes  
   - No  

### Certificate Information

<table>
<thead>
<tr>
<th>Certificate Type</th>
<th>Certificate Number</th>
<th>Date</th>
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### Additional Information

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### Further Information

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### Equipment Specification

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NHS Estates Training in England

• A important part of reducing risk
The slow track is not acceptable
The Challenging Environment
Hot topics

• Tray wrap issue
• Wet loads (particularly on loan sets)
Hot topics

For your representatives.....

Ensure theatre awareness training for non-theatre qualified representatives
The Essential Relationship
The Community
Helping the relationship – what is needed by the user?

Compliance to and understanding of:

- National/international recommendations
- Standards
- Warning notices

• Understanding of liability