

SSD Mudgee – Feedback received from HSU ‘Transfer of Mudgee Sterilising Service to Dubbo’

No.	Issue	Response from LHD
	<u>Safety Risks</u>	
1.	Concerns re: risk for clinical safety in regards to access for instrumentation that may be impacted by this change in courier service	<ul style="list-style-type: none"> The LHD respectfully asks for further information in relation to this comment as there is no risk in regards to clinical safety as the service will still be provided. Access to instrumentation won't be interrupted and the site has enough inventory for a 48 hour turnaround. There is a Service Level Agreement (SLA) in place between Mudgee and the District Sterilising and Reprocessing Services.
2.	<p>In the 2021-22 financial year Mudgee maternity services had 272 births with 101 of these births being by caesarean section. A number of emergency caesarean sections and other urgent surgical interventions happen per year.</p> <p>With the service to be halved to two days per week, how will the WNSWLHD ensure there is sufficient sterilised equipment available for emergency c caesarean sections, extra urgent cases to be added to lists at short notice, and then having sufficient instruments available for the planned lists?</p>	<ul style="list-style-type: none"> The inventory held at Mudgee is based on a 48h turn around including emergency Caesars sets Mudgee currently has the ability complete 10 Caesars set at any one time. A high percentage of caesarean sections perform in the 2021-22 where elective Caesars which means they are scheduled procedures therefore gaps can be identified and managed. It is the responsibility of the theatre NUM to liaise with the CSD manager under the terms and conditions of the contract if there is any changes to the surgical roster or increased activity at Mudgee.
3.	With the courier position transferred to Dubbo the intention is to make a full time position. With the increase in the number of Hospitals to be covered by this courier service and the resulting increased driving time, has potential fatigue for the courier been addressed?	<ul style="list-style-type: none"> There has been no indication that this position was or is moving to a fulltime role. In relation to any potential fatigue, the LHD has procedures in place relating to staff when fatigue may be an issue. The procedures provide guidance to staff and managers on how to manage the risk of fatigue within the workplace.
4.	I can also envisage safety concerns around scheduled surgery days and a need for additional instruments for emergencies.	<ul style="list-style-type: none"> The inventory held at Mudgee is based on a 48h turn around including emergency inventory. A service level agreement is in place between Mudgee theatres and CSD at Dubbo, in case of unplanned emergency surgery the surgical service nurse unit manager at Mudgee is required to liaise with the CSD manager to implement alternative logistics.
	<u>Impact on other Services</u>	
5.	Will this lead to increased urgent patient transfers to Base Hospitals due to a lack of available instruments at Mudgee, with the resulting extra burden on Ambulance and Base Hospital resources?	<ul style="list-style-type: none"> No, the Inventory held at Mudgee is based on a 48h turn around including emergency surgery, the sterilising unit at Dubbo operates 7 days per week and can meet any emergency needs that Mudgee require.
6.	When will the Mudgee Community be informed of this change to theatre services and the potential impact on availability of currently available emergency surgery?	<ul style="list-style-type: none"> There will no change to the service, the service will continue to be maintained and there will be no impact to emergency surgery.
7.	I have great concern that this will impact the service as Theatre staff have informed that Mudgee borrows instrumentation from Dubbo (urology, general, ENT specialities) on a regular basis.	<ul style="list-style-type: none"> Urology and ENT surgery are conducted on a monthly basis (1 list each per month) when instrumentation is required this is orchestrated between the Mudgee Theatre NUM, Dubbo theatre NUM , the CNC of equipment and stock at Dubbo and the CSD manager at Dubbo well in advanced as this must co-inside with Dubbo surgical list. I am not aware of general instrumentation being borrowed on a regular basis
8.	It has also been used for linen services, pathology services, executive services and pharmacy services. Providing essential pick up's and drop offs when required.	<ul style="list-style-type: none"> This position description was identified as a MV .53 driver require to transport clean and dirty instruments between Dubbo and Mudgee. If this position was used for others service it was in addition to this role. The vehicle purchased does not belong to the Mudgee fleet, the vehicle still sits under the fleet service within the LHD and it was purchased to meet Sterilising Services.
9.	Theatre staff are also trying to increase surgical services provided here at Mudgee	<ul style="list-style-type: none"> If surgical service increase at Mudgee then the transport service will accommodate the needs of the service.
	<u>Other Concerns</u>	
10.	The position is a 0.5 position held here at Mudgee, the position was given to Mudgee through the redevelopment as we lost the CSD department to Dubbo. The courier service was designed to be flexible and work around the surgical schedule. Seeing that Dubbo CSD have applied and put in a brief to have the position taken from Mudgee and be utilised LHD wide. The current 4 day a week position (5 hr shift) will now turn into 2 days/week and be run by Dubbo, I believe this will be insufficient. Also in only providing a 2 day/week	<ul style="list-style-type: none"> At no stage has it been indicted that the service will reduce to 2 days per week as per the service level agreement a roster will be developed around the surgical schedule this will be communicated with the theatre NUM and the schedule will be dictated by the service as will the theatre NUM in cases of emergency or increased activity.

	<p>service the sterile instrumentation will be left in Dubbo, sitting waiting to be collected and brought back to Mudgee, whilst could be on the shelves back here in the sterile environment reducing the risk on contamination. Mudgee losing this position, will be a position that was created for Mudgee, lost to Dubbo, and a loss to our facility and community.</p>	<ul style="list-style-type: none"> • All instrumentation held at Dubbo is held in a secure clean/sterile environment at no stage are the instrumentation at risk of contamination. • As per Service Level Agreement (SLA) instrumentation will be returned within a 48h period or in conjunction with the theatre schedule.
11.	<p>As a member of the HSU and employee at Mudgee Hospital, I have concerns about the proposed restructure and relocation of the 0.5 FTE courier position from Mudgee to Dubbo. Mid-Western LGA is a fast growing area of NSW and Mudgee Hospital is becoming increasingly busy in all departments including theatre. More visiting surgeons are requesting extra lists and doing extra cases often at short notice at Mudgee. Demand for surgery at Mudgee Hospital will continue to grow with the fast growing population of Mudgee. The Mudgee sterilising service was transferred to Dubbo when the new Hospital facility opened two years ago. In ceasing the sterilising service in Mudgee the community was promised that there would be no impact on surgery lists at Mudgee. A 0.5 FTE position was allocated with a 4 day per week courier service to/from Dubbo.</p>	<ul style="list-style-type: none"> • If surgical activity where to increase in Mudgee under the service level agreement Mudgee theatre NUM must provide in advance in writing to the CSD manager re any changes to surgical rostering and clinical activity this will ensure that surgical demands will be meet in the future.
	<p><u>Additional request from HSU:</u></p>	
12.	<p>Evidence that there is '<i>increased demand and growth of the service at Dubbo</i>',</p>	<ul style="list-style-type: none"> • In 2015 the CNC of endoscopy resigned from the area position, this role was essential in ensuring compliance, support, ongoing education, competences, procurement, policies and procedures in the area of endoscopy reprocessing with the resignation of this role the LHD executives made the decision not to replace the position. • In 2018 it was identified through a mandatory audit of AS 4187 the peripheral sites within the LHD failed to meet compliance for endoscopy/Sterilising standards within the peripheral sites, it was also identified that there was no overarching governance of these services. • In 2019 the position of District Manager of Sterilising and Reprocessing Services was established to address the non-compliance issues across the LHD in relation to reprocessing and was given a deadline to meet compliance by 2021. • In 2019 with the gaps identified there was a service developed where CSD at Dubbo Hospital provided resources, education, competencies, and compliance with AS4187 standards to the peripheral sites within the LHD. Dubbo successfully manages the travelling endoscopy service services between Bourke and Coonabarabran, Dubbo provides resources to Mudgee, Parkes, Forbes and Cowra regularly for reprocessing when there is insufficient staff to complete reprocessing on site, replaces staff on annual or sick leave when required, the Dubbo CSD provides all the education around endoscopy reprocessing, performs audits and complete competencies for all Nursing staff across the district. • All maintenance/service and validation of reprocessing equipment is managed by the District Manager and supported by the Dubbo CSD Manager. All equipment and consumables has been standardise across the district to allow for standardise processes ensure that staff moving from site to site are familiar with the equipment this allows increase efficiencies ,enables consumables to be utilised from site to site in the event of delayed deliveries or shortages and helps with reduce waste. • Inventory management is also co-ordinated throughout the district from site to site, Dubbo CSD are required from time to time to co-ordinate and transfer inventory as required. • Dubbo CSD also provides instrument marking for all inventory held within the LHD to enable tracking to instrument, it is to noted that WNSWLHD is the only LHD in NSW that is tracking to instrument this requires all instrumentation to be transported to Dubbo CSD for instrument etching this must also be co-ordinated around theatre schedules. • In the last 6 months both Bathurst and Orange reprocessing units have come back to the LHD from spotless which now expends our services, aligning all sterilising services will allow the LHD to align functions, departments and teams around a shared direction and purpose, the alignment will also allow assurance and visibility over compliance with Regulatory Framework of 4187.

		<ul style="list-style-type: none"> • In 2022 it has been established that CSD at Dubbo has developed over a period of 4 years a service model that provides a work force, improved technology, compliance, structure and a clear strategic direction for reprocessing services within the LHD. But with the level of service CSD provides there are also common problems or challenges the Sterilising unit faces such as; • A work force to meet the service demand the workforce has always come from the Sterilising unit with no added FTE to support Dubbo CSD. • Logistics have proven to be our biggest hurdle WNSWLHD is one of the biggest districts in NSW. Although the sterilising unit is able to forecast well, there is always an eliminate of the unknown, that we cannot forecast for where sites requires our services with limited resources. • The increased service also requires the unit to comply with mandatory testing of equipment across the LHD this is an added responsibility that CSD at Dubbo is responsible for with limited resources. • The sterilising unit has had to rely on Bio-med, pathology services, linen service and hospital staff to move equipment, inventory and consumables around the LHD when transport is unavailable. • I hope this offers and provides the HSU with sufficient evidence to support the increase in service demand and growth within Dubbo CSD.
13.	Report on the need for this service at Mudgee,	<ul style="list-style-type: none"> • The proposal is for the transfer of the courier service from Mudgee to Dubbo to meet service needs, not only for the district but for Mudgee. • Mudgee will not be disadvantaged at any stage.
14.	Risk assessment and control measures in place for reduction in service at Mudgee.	<ul style="list-style-type: none"> • The services are not reducing therefore a risk assessment is not required