There are risks associated with the reuse of reprocessed single-use devices, including an increased risk of infection and a risk of inadequate or unacceptable performance following reprocessing.

When the reprocessing and reuse of single-use devices is allowed, reprocessing must meet the same criteria as the original manufacturer to ensure that the device is safe for reuse, in both function and cleanliness.

Many devices are complex in design and are therefore difficult to clean, disinfect, or sterilize. Reprocessing may impact the effectiveness or function of the device, leading to a risk of the device breaking or failing during use. Chemicals used for reprocessing may corrode the device, and the reprocessing may damage the device. Most single-use devices are not designed for reprocessing, leading to increased risk of cross-infection. If the hospital permits the reuse of reprocessed single-use devices, there is a hospital policy to guide reprocessing and reuse. The policy is consistent with national laws and regulations and professional standards.

There is oversight of the process for the reuse of reprocessed single-use devices based on data, hospital needs, and alternatives to reusing devices. The list of single-use devices approved for reuse is routinely reviewed to ensure that it is accurate and current.

If the hospital permits the reuse and reprocessing of single-use devices, hospital policy includes the following:

- Alignment with local laws and regulations and standards from a recognized agency
- List of single-use devices and materials that may be reused
- Process for identifying when a single-use device is no longer safe or suitable for reuse
- Cleaning process for each device that starts immediately after use and follows a clear protocol
- Process to identify patients on whom reusable medical devices have been used
- Proactive evaluation of the safety of reusing single-use items, including but not limited to adverse events associated with surgery such as surgical site infections or an outbreak of infections or disease
- Collection and analysis of data on adverse events related to reused devices to identify risks, and implementation of actions to reduce these risks

### Measurable Elements of PCI.03.01

1. Ⓓ The hospital identifies, in writing, single-use devices and materials that may be reused in accordance with local and national laws and regulations. (*See also* GHI.04.00, ME 4)
2. The hospital has a process for identifying when a single-use device is no longer safe or suitable for reuse.
3. The hospital has a process for cleaning, disinfection, or sterilization for each reusable, single-use device, in accordance with laws and regulations, manufacturer's requirements, or other applicable requirements.
4. Ⓓ The hospital has a written process to track the reuse of single-use devices to individual patients.
5. Ⓓ The hospital collects and analyzes data for any adverse events, and implements improvements related to the reuse process.

## Standard PCI.03.02

The hospital implements a process for managing expired and damaged devices and supplies.

### Intent of PCI.03.02

The use of expired or damaged supplies presents a risk to patients related to infection, or loss of integrity and function. The hospital must implement a process to manage inventory of devices and supplies, including expiration dates, and remove those items from service when outdated. This includes a process to identify damaged supplies, such as loss of package integrity, or damage that impairs the intended use of the supplies, and remove those from service. Most medical supplies are imprinted with an expiration date. The manufacturer does not guarantee the sterility, safety, or stability of the item after the expiration date. A policy defines the process for ensuring proper management of expired supplies. Damaged supplies pose risks to patients, as the

supplies may no longer function properly, and the cleanliness or sterility of the supplies cannot be guaranteed if the packaging has been compromised.

The hospital ensures storage conditions that protect supplies from contamination and damage that address at least the following:

- Conditions defined by the supply manufacturer
- Temperature and humidity stability
- Exposure to dust, dirt, water, and excessive humidity
- Exposure to other means of contamination such as being stored in a manner that creates the risk they could be touched by contaminated hands or gloves, or otherwise exposed to potentially infectious microorganisms

### Measurable Elements of PCI.03.02

1. The hospital implements a process to manage expired supplies.
2. The hospital implements a process to manage damaged supplies.
3. The hospital stores supplies in a manner that prevents contamination or damage, and under environmental conditions recommended by the manufacturer when applicable.

## *Environmental Cleanliness*

## Standard PCI.04.00

The infection prevention and control program provides oversight for the cleaning and disinfection of the environment.

### Intent of PCI.04.00

Effective environmental cleaning and disinfection practices contribute to the prevention of hospital-acquired infections. The hospital uses evidence-based guidelines to direct its environmental cleaning and disinfection processes. Routine cleaning of the environment includes daily cleaning of the following:

- Nursing units, patient rooms, and other patient care areas
- Diagnostic and treatment locations
- General support services areas, such as central supply, linen services, materials management, and all other departments and areas of the hospital
- Waiting areas and other public spaces
- Staff workspaces
- Kitchens

Terminal cleaning is a more focused and thorough cleaning process than daily maintenance cleaning and is performed in accordance with hospital policies and procedures and infection control guidelines. The hospital must determine how, when, and where terminal cleaning is performed. The process may be different depending on the area being terminally cleaned. For example, cleaning the room after the discharge of a patient on isolation precautions for an infectious disease may require different processes and cleaning agents than terminal cleaning of operating theatres or central sterile supply departments. Terminal cleaning requires further attention to the environment and may include the following:

- Laundering of privacy curtains
- Removal and cleaning of all detachable items in the room
- Disinfecting surfaces with multiple cleaning agents
- Use of specialized tools such as robotic ultraviolet light or ozone machines