

UNIVERSITY OF TOLEDO HEALTH SCIENCE CAMPUS

SUBJECT: EQUIPMENT MANAGEMENT PLAN Procedure No. ME-08-000

PROCEDURE

The University of Toledo Health Science Campus (UT HSC) shall have an Equipment Management Plan.

PURPOSE

To meet the mandates of the Joint Commission standards; to support the provision of superior patient care and medical education by enhancing the availability and reliability of advanced technology through a constantly improving, cost effective equipment management program, which provides safety and minimizes risk.

SCOPE

The Equipment Management Plan describes how the organization will provide medical equipment free of hazards and manage staff activities to reduce the risk of injuries. The plan has been developed to address all the surveyable facilities of the University of Toledo clinical operations. These facilities have inherent safety risks associated with providing services for patients, the performance of daily activities by staff, and the physical environment in which services occur. The Equipment Management Plan has been designed to work in concert with the other Environment of Care Management Plans (i.e. Utility Systems, Hazardous Materials, Safety, Security and Fire Safety Plan). The Equipment Management Plan serves to provide safe and reliable medical equipment to provide compliance with TJC standards. The plans are reviewed and accessed annually to determine their effectiveness and ensure that they function as unit to allow for continued improvement and functioning within the Environment of Care.

RESPONSIBILITY

The Equipment Management Plan has been assigned a leader with the appropriate background and skill set to allow for continuous satisfaction of the assigned elements of performance. This individual is required to sign after reviewing the plan on an annual basis. Staff from the Bio-medical Engineering Department is assigned responsibilities to complete elements of the plan and ensure its continued implementation. Reports on the plan's implementation are reported to the Safety and Health Committee on a regular basis. A representative from hospital administration sits on the Safety and Health Committee. On an annual basis the assessment of the effectiveness of each individual management plan is presented to the Board of Trustees of the University of Toledo.

PROCESSES AND PROCEDURES

The hospital manages medical equipment risks.

- The hospital maintains either a written inventory of all medical equipment or a written inventory of selected equipment categorized by physical risk associated with use (including all life support equipment) and equipment incident history. The hospital evaluates new types of equipment before initial use to determine whether they should be included in the inventory. This plan is covered in procedures ME-08-007, ME-08-009, 32-03 and 32-43. Biomedical Engineering sets guidelines for identifying, evaluating and inventorying medical equipment to ensure patients, staff, and visitors are

- The hospital identifies medical equipment on its inventory that is included in an alternative equipment maintenance program. Equipment included in an alternative maintenance program will be labeled as such in the equipment database and designated with the label (AEM). This information is stated in procedure 32-56.
- The hospital has written procedures to follow when medical equipment fails, including using emergency clinical interventions and backup equipment. ME-08-021 covers the process to follow when equipment fails. User departments can contact Biomed at ext. 4899 during normal working hours (8 a.m. – 4:30p.m.). On-call technicians will provide emergency service after hours as stated in procedure 32-17. Emergency Clinical Intervention Documents are provided to departments per procedure ME-08-021. All updates are distributed as needed. ME 08-008 and ME 08-009 also cover this process.
- The hospital identifies quality control and maintenance activities to maintain the quality of the diagnostic computed tomography (CT), position emission tomography (PET), magnetic resonance imaging (MRI), and nuclear medicine (NM) images produced. The hospital identifies how often these activities should be conducted. Quality control is provided by Medical Physicists. Maintenance activities are provided by Biomedical Engineering either in-house or vendor contract. Incoming equipment shall be evaluated and categorized by risk. Scheduled inspections on equipment categorized as high risk will follow manufacturer's recommendation.
- The hospital monitors and reports all incidents in which medical equipment is suspected in or attributed to the death, injury or serious illness of any individual, as required by the Safe Medical Device Act of 1990. This plan states that Biomedical Engineering will respond to incidents where the use of a medical device may have caused or contributed to the illness or injury of a patient. Appropriate documentation is filled out and sent to Risk Management. Procedures ME-08-002 and 32-50 address this requirement.

The hospital inspects, tests, and maintains medical equipment.

- Before initial use of medical equipment on the medical equipment inventory, the hospital performs safety, operational, and functional checks. This plan states that Biomedical Engineering will perform an incoming inspection on medical equipment that is under their responsibility (32-03). This is covered by procedure ME-08-007. Scheduled maintenance and testing will be based on manufacturers' recommendations unless otherwise identified for inclusion into the alternative equipment maintenance (AEM) program.
- The hospital inspects, tests, and maintains all high-risk equipment. These activities are documented.
Note 1: High risk equipment includes medical equipment for which there is a risk of serious injury or even death to a patient or staff member should it fail, which includes life-support equipment.
Note 2: Required activities and associated frequencies for maintaining, inspecting and testing of medical equipment completed in accordance with manufacturers' recommendations must have a 100% completion rate.
Note 3: Scheduled maintenance activities for high-risk medical equipment in an alternative equipment maintenance (AEM) program inventory must have a 100% completion rate.
 This plan is covered by procedures ME-08-009, 32-02, 32-04, and 32-43. Biomedical Engineering documents all work performed on all high –risk equipment included in the medical equipment management plan in accordance with all applicable procedures.

- The hospital performs equipment maintenance on anesthesia apparatus. The apparatus is tested at the final path to patient after any adjustment, modification, or repair. Before the apparatus is returned to service, each connection is checked to verify proper gas flow and an oxygen analyzer is used to verify oxygen concentration. Areas designated for servicing of oxygen equipment are clean and free of oil, grease, or other flammables. Biomedical Engineering maintains the oversight of the repairs and scheduled maintenance to the anesthesia apparatus. Scheduled inspections are covered by procedure 32-04. Procedure 32-02 provides documentation process.
- The hospital meets NFPA99-2012: Health Care Facilities Code requirements related to electrical equipment in the patient care vicinity.
ME-08-007, 32-03, 32-43 and 32-04 explains how we test patient care equipment, perform an incoming inspection, assign a risk category and perform a scheduled inspection.

ANNUAL REPORT


The objectives, scope, performance and effectiveness of the Equipment management program/plan will be evaluated in an annual report to Administration. Evaluation will include all areas of equipment management.

SUPPORTING DOCUMENTATION AND PERFORMANCE MEASURES

Other written procedures that support this management plan can be found at <http://www.utoledo.edu/depts/safety/UT%20Procedures%20and%20Plans.html>. Performance measures for the equipment management program include the following:

- Equipment PM completion data
- Malfunctions due to operator error
- Performance testing of sterilizers
- RO water testing

SOURCE: Biomedical Engineering
Review/Revision Date:

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| Steve Hanenkrath | 3/05 |
| Name of Responsible Person | 9/06 |
| Director of Bio-medical Services | 9/07 |
| Title | 9/08 |
|  | 11/09 |
| Signature | 8/10 |
| January 18,2023 | 4/11 |
| Date | 1/14 |
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