Implementation of a Business Continuity Plan: Steril processing department case of a University Hospital

Daikh A 1, Idir M 1, Laffite M 2, Sylvoz N 1, Guimier-Pingault C 1, Bedouch P 1
1 Centre Hospitalier Universitaire Grenoble Alpes, Grenoble Isère, France, 2 Centre Hospitalier Universitaire de Saint-Etienne

Grouping and centralizing a French Sterile Processing departments (SPD) in large hospitals facilities make them vulnerable. In order to ensure continuity of care in case of failure or damage, french regulation requires the implementation of a Business Continuity Plan (BCP).

The aim of this work is to describe the implementation of a BCP in the SPD of our University Hospital Center (UHC) and to present the major points of consideration.

The implementation of the BCP allowed defining how to treat risks and to adopt the measures required to maintain key activities of our SPD. These are specific to each hospital, its activities and its environment. To us, these simulations highlighted the impossibility of relocating all our activity to the rescue establishment. This implies to define, at the institutional level, which are the essential surgical activities to be eligible for this transfer.

Methods:

- Mapping of the sterilisation process
- Risks identification
- Risks assessment
- Means of controls: identification and evaluation
- Business continuity Plan

Results:

For each step of the sterilization process, risk where identified.

After identifying risks, their criticality ranking were assessed and the means of control were described and evaluated.

The business continuity plan (BPC) is the mean of control for the risks who may cause a partial or complete interruption of the activity.

Risks: Water supply failure, power failure, fire...

In order to ensure the continuity of key activities, the transfer of part of the medical devices and staff from the damaged hospital to a rescue establishment was the strategy.

The way this transfer was organized and the related quality documents were described and contracted, then evaluated using two real life exercises carried out between our UHC and the rescue establishment.

In this way, it was possible to adjust the defined organizations, and to highlight the critical points of this approach:

- The ability of the rescue establishment to absorb the activity (equipment capacity) of the damaged hospital.
- The impact on the deadlines for providing medical devices and therefore the surgical schedule of both establishments.

Conclusion:

How to overcome risks?

By identifying means of controls

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