

THE WORK OF NURSES IN THE CENTRAL STERILE SUPPLY DEPARTMENT AND ITS IMPLICATIONS FOR PATIENT SAFETY

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The association of health care and infections is considered a significant public health problem. The processing of health products is considered a complex activity within the context of health facilities, whose main objective is to avoid the occurrence of any adverse event related to their use. Nowadays, not only the potential transmission of infection-causing microorganisms is concerning, but also their toxic products or the occurrence of reactions because of residues from products used for cleaning, disinfection, and sterilization of health products.

A circumstance recently broadcasted in the media reports that the lack of sterilization of instruments used in a cataract surgery campaign caused the contamination of 22 patients by *Pseudomonas bacteria*, resulting in numerous consequences, such as sight loss, removal of the eyeball, in addition to other intangible losses, thus, confirming the failure of the safety standards regarding the surgical instruments used in those procedures.

Failures in cleaning, disinfection, and sterilization of health products may result in significant institutional cost, and patient morbidity and mortality. Proper cleaning, disinfection, and sterilization procedures have been emphasized in various publications documenting the rise in infection after inappropriate processing of items of patient care.

The main target in this context, the Central Sterile Supply Department (CSSD) is characterized by unique characteristics, daily challenging the manager in this area with regard to the environment, the structure, and the proper processing of health products in a safe, efficient, and a financially viable way. For such, professionals in this department should be aware of up-to-date market trends, technological advances associated to the complexity of surgeries and the surgical instrumentation design and still must follow the rules, laws, and recommendations to their practice, in addition to attend client's expectations.

In a broader understanding on the determination of the health-disease process, it is important that professionals in

the health team have an integrated view of the challenges and resources needed to fight those.

When considering the complexity of the CSSD mission, the work processes in this place cannot be considered simple, repetitive, and of minor importance within the institution. Nowadays, the CSSD practices are based on scientific evidence, which point out to severe consequences for the assistance given to patients when recommendations are not followed, such as undervaluing stages of material processing, thinking that a process may substitute another, and that flaws may be compensated. Thus, the monitoring of each phase in the processing of health products as well as the description of all standard operational procedures are considered essential¹.

The attitude of each employee working in the CSSD and the work of nursing supervisor directly influences the feasibility of the safe care toward the surgical patient, even if the care is indirect, ensuring the reproducibility of the process in its entirety. These attitudes permeate the possibility of tracking all the phases of material processing regarding hospital infection control in case of a necessary recall of health products.

It is noteworthy that statistical measures are important so that the goals are defined, increasingly challenging the perception of safety regarding the infections of surgical sites.

Such goals may only be achieved through constant efforts from a multidisciplinary team, involving professionals of the Hospital Infection Control Service of the CSSD, in the Surgical Center of Clinical Engineering, the Supplies, the Hospital Hygiene Service, the management, and administrative sectors, which interact in the context of prevention practice to hospital infections.

Managers responsible for these teams need to master the skills that are relevant to their fields in order to avoid errors that cause violations of the security process, thus respecting the surgical patient who becomes more fragile during surgical procedures.

Giovana Abrahão de Araújo Moriya

PhD in Nursing

*Coordinator of Nursing in the Material and Sterilization Center
(Centro de Material e Esterilização – CME) of the Sociedade
Beneficente Israelita Brasileira Albert Einstein
Director of the Education Committee of National SOBECC –
Administration 2015/17*

Márcia Hitomi Takeiti

Master in Nursing

*Head Nurse of the Production, Sterilization and Control
of Material and Equipment Section Seção de Produção,
Esterilização e Controle de Materiais e Equipamentos – SPECME)
of the Heart Institute of Hospital das Clínicas in the University
of São Paulo (InCor HC FMUSP) – São Paulo (SP), Brazil
President of National SOBECC – Administration 2015/17*

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