Message from President

Albert Csapó, President, CAMDR

It has been my pleasure to have served as your president for the past seven months since taking on the position at our conference in Halifax last October. I’d like to take this opportunity to thank Merlee Steele-Rodway for her tireless contributions over the past two years in helping to advance the association to where it is today, and for continuing this momentum in her current role as the Immediate Past-President. I’d also like to welcome our President-Elect, Dalyce Fredette-Percy, who has been actively involved in many aspects of CAMDR including her work with our vendor community and her participation in the Education Committee.

There are several headlines from the Canadian Association of Medical Device Reprocessing (CAMDR) that I’d like to share with you at this time as well as endorse those who have been influential in making them happen. The Board of Directors recently met to develop the association’s strategic plan for the next 2 years and thanks to their input, great strives have been made with a finalized version due to be completed within the month. The plan contains some very innovative strategies on promoting the association, increasing our membership and leveraging our relationships with our industry partners. I’m proud to report that our membership for an off-conference year is over 300 and continually growing on a monthly basis under the strong leadership of our Secretary, Rebecca White. These members can now benefit from over 60 education modules that have been recently uploaded on to our website thanks to our Education Committee led by Colleen Landers.

After a very successful 2018 conference, our financial review of the past year and projections for this year have been completed under the leadership of Treasurer Gale Shultz, who continues to guide the association in the management of our finances. With our next conference in Edmonton on the horizon, our nearly completed 2020 vendor prospectus, created with valuable feedback from our industry and association partners, is due to be sent out by the end of June. Further preparations for our conference next year are well under way as our Conference Director, Dianne Trudeau, begins to create an itinerary of exciting speakers and presentations on the hot topics that are impacting the reprocessing industry.

Other headlines include an enhanced website that is continually changing to meet the needs of our membership. As well, our newly formed Communications Committee, led by BC’s Provincial Advisor Samantha Shone, and through the input from our dedicated Provincial Advisors across Canada, have put together our first newsletter of 2019. I’m excited about this flurry of activity and look forward to the months ahead as we complete several important tasks and embark on creative strategies to expand CAMDR’s presence and further enhance the support for our members.
How did you end up where you are now? (CAMDR and MDRD)
I started in 1997 in MDR and Purchasing and in 2010 I was hired as a zone MDR Supervisor.

What’s your role in MDRD?
I am currently an MDR Supervisor and cover 14 Sites in Central Zone Alberta.

If there’s one thing you’d like people to know about your work, what would it be?
How important it is to follow all the reprocessing steps every time for every patient.

What’s the best part of your job?
Training and teaching MDR staff.

Why did you get involved with CAMDR?
To be a voice for Alberta MDR. Training and teaching MDR staff.

How did you end up where you are now? (CAMDR and MDRD)
A position came up in MDRD which I was very interested in because I am the type of person that loves challenges and to set goals and values for a department to work towards. I have been with MDRD for the last 3 years and I haven’t regretted it for a minute.

What’s your role in MDRD?
Manager of MDRD.

If there’s one thing you’d like people to know about your work, what would it be?
The importance of our work from day to day and that everything starts with us.

What’s the best part of your job?
The best part of my job is bringing changes and innovation to the MDRD.

Why did you get involved with CAMDR?
I wanted to be connected with MDR departments at a national level to bring awareness and changes and work collaboratively with everyone.
How did you end up where you are now? (CAMDR and MDRD)
In 1992, I started working in MDR formerly CSPD at the Old Halifax Infirmary Hospital in Halifax, NS. We worked directly in the OR and did everything from MDR duties to turning over rooms to assisting the Anesthesiologist. When the Old Halifax Infirmary closed in 1998 I moved to the Victoria General Hospital (VGH). From the VGH I was successful for the position as MDR Supervisor at the New Halifax Infirmary Hospital where I worked for 8 years. I then moved across the water to the Dartmouth General Hospital where I worked as the MDR Supervisor for 14 years. I applied for and was successful in for the position as MDR Western Zone Manager as of March 2018. I joined CAMDR the first year in Winnipeg where I attended the conference, I have been a member ever since. Pam Hunter who was the CAMDR Secretary and Becky White who was the first PA and now current CAMDR Secretary in Nova Scotia, approached me and asked if I would be interested in applying as the Nova Scotia CAMDR PA, which I gladly said yes.

What’s your role in MDRD?
I am currently Manager of MDR in Western Zone of Nova Scotia.

If there’s one thing you’d like people to know about your work, what would it be?
MDR is my passion. I have been lucky enough to spend my whole career in MDR and I am proud to say I have worked beside some of the most wonderful people I know.

What’s the best part of your job?
The changing landscape from day to day. There is never one day the same.

Why did you get involved with CAMDR?
To help promote MDR on a National and Provincial level. I am Past President of the Medical Device Reprocessing of Nova Scotia (MDRANS) and becoming part of CAMDR to promote the medical device reprocessing field seemed like a natural fit for me.
How did you end up where you are now? (CAMDR and MDRD)
After working in the Operation Room environment as a nurse educator, I recognized an opportunity to involve the MDR Technician with positive outcomes for the patient’s journey. The rest is history! At our site redevelopment for both areas were started, I became the subject matter expert with hard work and research for both the OR/MDR. Upon completion I was promoted to Manager then Regional MDR Manager for Prairie Medical Health.

What’s your role in MDRD?
Regional Manager currently for 5 sites in our region. I am responsible for infrastructure, production equipment replacement, Staffing education, Projects, budgets…

If there’s one thing you’d like people to know about your work, what would it be?
I have a strong understanding of workflow in the MDR environment and a desire to improve as our programs expand to new technology.

What’s the best part of your job?
Projects

Why did you get involved with CAMDR?
Networking
Provincial Advisors

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CAMDR Past President, Merlee Steele-Rodway, receives 2019 3M Champion of Infection Prevention and Control Award

Merlee Steele Rodway, RN, CERT

“In 2003, Merlee formally joined the Infection Prevention and Control Department at Eastern Health as an Infection Control Practitioner. Through her work auditing reprocessing practices, Eastern Health executives realized that medical devise reprocessing (MDR) should be a standalone department. In 2009, Merlee was recruited as the first Regional Director of MDR and held this position until 2017. For the period 2009-2013 she added Interim Director of Infection Prevention and Control to her role.

Merlee recognizes the importance of infection prevention and control in the area of construction and renovation in healthcare facilities and has been a member of that IPAC Canada special interest group. In 2008, she was a member of the committee that developed the 2008 IPAC Canada position statement on Health Care Facility and Design. As former Director of Infection Prevention and Control at Eastern Health, Merlee was instrumental in creating an Infection Control Practitioner position devoted to the area of construction and renovation. In 2016 she partnered with the Canadian Healthcare Engineering Society to present “Healthcare Facility Design and Collaboration with IPAC” at the IPAC Canada conference.

Merlee was a member of the Canadian Standards Association (CSA) committee that developed the first MDR Technician Certification in Canada. In 2016 she was one of the co-developers responsible for developing and approving the curriculum for Academy Canada’s Newfoundland and Labrador MDR Technician Program. Merlee is also the IPAC Canada representative on the CSA MDR/Sterilization Technical Committee.

Other national activities include her 2016-2018 role as President of the Canadian Association for Medical Device Reprocessing (CAMDR). CAMDR was established in 2013; as a co-founder, Merlee was instrumental in the development and recognition of this organization. Through her activities she continues to ensure a partnership and open relationships between CAMDR and IPAC Canada.

Merlee’s long-standing involvement in IPAC Canada as well as her drive to ensure infection prevention and control branches into what were once non-traditional areas such as construction and renovation and MDR make her a deserving recipient of the 2019 3M Champion of Infection Prevention and Control Award.”

Have You Renewed Your CAMDR Membership?

BECOME A CAMDR MEMBER TODAY!

VISIT WWW.CAMDR.CA

Your Annual Membership provides several benefits including:

- Become an integral member of a national organization whose vision is dedicated to Medical Device Reprocessing.
- Access to Members Only section of CAMDR website.
- Access to Online Education opportunities such as learning modules or webinars on the CAMDR website (2018).
- Access to conference scholarships or education bursaries as they are available.
- Access to CAMDR quarterly newsletter.
- Exchange ideas with other MDR professionals through networking on CAMDR Members Only section of website.
- Receive reduced registration fees at conferences.
- Networking opportunities at CAMDR conferences.
- Participate in MDR surveys.
- Receives an annual membership directory list.
- Receive email alerts on current MDR issues.

$ 50.00 CAD
1-Year Membership
(valid from now to December 31, 2019)

$ 80.00 CAD
2-Year Membership
(valid from now to December 31, 2020)

Click Here to Renew!
We are pleased to inform CAMDR members that a call for applications for our first CAMDR committee occurred in January and the education committee consists of Chair Colleen Landers CAMDR Director Education, Ontario; Vice Chair Catherine Williamson, Alberta; Carline Bernier, PA Quebec; Pam Hunter, Nova Scotia; Dr. Nita Mazurat, Manitoba; and President Elect Dalyce Percy, Manitoba.

We have met 3 times to best plan for continued growth of educational content. This committee is pleased to now offer company neutral educational modules and hope to post 10-15 in 2019. We also will work on posting 10 French Modules that are company specific and company neutral by the end of 2019. This committee will review all modules prior to posting for accuracy and content meeting CSA Z314-18. The 8 modules that are now live include: Preparing for Accreditation, Value Analysis in Healthcare Today, Sterilization, MDR Design, Communication Between the OR and MDR, Decontamination and Preparing for the CMDRT Exam, and Dental Water Lines.

We reached 55 Education Modules from our six Platinum Sponsors in 2018 thank you. We now have more modules added totaling 70 hours of credits, two of which are francophone modules. This provides our members the opportunity to receive 78 ½ hours of free education credits by joining CAMDR as a member 2019. If there are any topics members would like education on that is not covered in those listed above and below, please email info@camdr.ca the topic.

On the next few pages, you will find just some of our education modules to date.
Online Education Modules

Sign up as a member to obtain your user ID for access to the online education modules

Watch this video for How To Login!

These education modules are supported by:

- A Review of Sterilization Methods and Recommended Practices for Healthcare Facilities Part I
- A Review of Sterilization Methods and Recommended Practices for Healthcare Facilities Part II
- Terminal Low Temperature Sterilization
- Improving the Quality of Endo Processing
- What is Happening Inside that Magic Box?
- New Tools for Your VH202 Sterilization Tool Box!
- The Science of Speed: Rapid Readout Biological Indicators in Healthcare Today

CANTEL
- DSD Edge Quiz
- Scope Buddy In-Service and Competency Assessment
- Advantage Plus In-Service and Competency Assessment
- Sterile Processing Quiz

STERIS Applied Sterilization Technologies
- Welcome to the SPD
- Cleaning decontamination 101
- Steam Sterilization 101
- Endoscopy Reprocessing 101
Principles of Decontamination
Traceability and T-DOC Instrument Intelligence
Immediate Use Steam Sterilization
Fundamentals of Steam Sterilization

Equipment qualification: (IQ, OQ, PQ)
Inspection as part of preparing medical devices for reprocessing
Operating the STERRAD®100S Sterilizer

Hydrogen Peroxide Safety
Monitoring the STERRAD®100S: Using Displays and Printout
Monitoring the STERRAD®100S Sterilizer: Using Chemical Indicators
Sterrad NX Operation
NX Hydrogen Peroxide Safety
NX Monitoring Using Chemical Indicators
NX Monitoring Using Displays and Printouts

Challenges in Ultrasound Probe Reprocessing
Addressing Challenges with Infection Control Practices in Ultrasound
Ultrasound Probe Use and Reprocessing Ruth Carrico
Traceability of Processed Devices: Application to Ultrasound Probes Rose Seavey
Interview with Irena Tabachnicov regarding the elimination of ETO sterilization

Irena Tabachnicov is the MDRD Manager for Vancouver General Hospital (VGH) University of British Columbia Hospital (UBC)

Why did you decide to delete this method of sterilization?

Due to the high cost of ETO sterilizer maintenance, significant cost of ETO supplies (consumables) and lengthy ETO sterilization cycles, we decided to look at the possibility for different sterilization alternatives.

How did you start?

Before we started, we had a lot of questions and we even did not know where to start. I had to involve the whole MDRD leadership team for VGH.

First of all, we had to very clearly identify our time frame for the project. We wanted to know when we would start and when we would see our first progress. We also wanted to know if we will be able to forecast the completion of the project. When we started, VGH and UBC had a total of 237 items processed in ETO. As a team, we evenly divided all of the items amongst the leadership team (1 manager and 6 coordinators).
We had numerous conversations with sales reps and the device manufacturers to ensure that we had the most current reprocessing instructions for the items currently sterilized in ETO. In the process, our MDRD leadership team had meetings to discuss and address any challenges.

After all of this research, confirming compatibility (alternate sterilization methods) and process verification we were able to move most items to low temperature or steam sterilization. This was our primary goal. Some items were deleted and some were replaced with single use devices.

However, we were the only facility in the Greater Vancouver Area with ETO sterilizers. We were also ETO sterilizing for the following hospitals and agencies: University of BC hospital, BC Cancer Agency, Ambulatory Surgical Clinic, Mt Saint Joseph Hospital, St Paul’s Hospital and sites within the Fraser Health Authority.

We had to send them notice about VGH’s plan to decommission the ETO sterilizers. We received a lot of concerning phone calls regarding this process change.

I held individual meetings with each Coordinator about the progress and results. When we were lucky to find validated alternatives to change the reprocessing method from ETO to the other method, at the same time we had to do all necessary changes in the write ups and in our electronic instrument tracking system. As we have a lot of specialties and a lot of sets, our clerks were working under a lot of pressure in order to complete all requests from the Coordinators.

**What was the biggest setback/challenge?**

To find the solution for the items that do not have another alternative. We are still in the process of searching and there is still a lot of work needs to be done.

**Are you seeing an improvement to your workflow/dept?**

As of now we can see fewer items to be sterilized in ETO. We will have to continue working with different customers and direct them to change their processes.

Despite of all difficulties, our collaborative team work, our dedication and passion for what we are doing helped us to transfer more than 50% of items that we used to sterilize in ETO for VGH and UBC to the alternative methods of sterilization.

**What type of advice would you give to someone that wanted to do the same?**

- Be organized
- Plan ahead
- Have a back-up plan
- Involve all important people
- Have a strict deadline

Irena Tabachnicov manages the MDRD team at Vancouver General Hospital.
The Canadian Standards Association (CSA Group) is pleased to announce that the draft new edition of CSA Z317.2 Special requirements for heating, ventilation, and air-conditioning (HVAC) systems in health care facilities, is now at Public Review.

As with every standard, CSA Z317.2 is a living document, and the new edition contains new and revised material to make it a better and more comprehensive Standard. The current draft reflects the best efforts of the committee that developed it, the Technical Subcommittee on Special Requirements for HVAC Systems in Health Care Facilities, under the jurisdiction of the Technical Committee on Health Care Facilities and the Strategic Steering Committee on Health Care Technology. This new edition provides updated guidance on requirements for the planning, design, construction, commissioning, operation, and maintenance of HVAC systems in HCFs. It is important to note that requirements covered within this Standard can also be subject to applicable federal, provincial, and local regulations.

Significant changes in this edition include the following:

a) Clarification of HVAC requirements for rooms and areas used for similar or different functions;

b) Increased use of performance requirements in place of prescriptive design specifications, particularly with respect to system redundancy;

c) Updated airflow requirements for the operating room and sterile core in Table 1;

d) Updated and expanded HVAC design criteria for scope reprocessing areas in Table 1;

e) Additional material on heating and cooling source requirements;

f) Provisions for water removal for local cooling and non central AHUs;

g) New considerations for the placement of outdoor intakes and ethylene oxide removal requirements;

h) Alignment of heating, cooling, and ventilation systems connected to appropriate emergency electrical power system with CSA Z32;

i) Expanded requirements for audible and visual alarms for AIRs;

j) Revisions to Clause 5.8 requirements for HVAC system upgrades associated with health care facility renovations or additions;

k) Alignment of Clause 6 material on catastrophic events management with CSA Z8000;

l) New provisions for flex duct;

m) Requirements for ventilation of normally unoccupied service areas;

n) Provisions for reduced operation of HVAC systems during unoccupied periods;

o) New requirements for HEPA filter testing and performance verification; and

p) Revised requirements for materials used for the lining of system components.

To view the draft please visit CSA Group’s Public Review site at: https://publicreview.csa.ca/Home/Details/3358.
Reprocessing Special Interest Group
Submitted by Merlee Steele-Rodway; CAMDR Immediate Past President

Infection Prevention & Control Canada has several ‘special interest groups’ whereby members who have expertise or are interested in a topic become members. I am a member of IPAC-CANADA with a special interest in our partnership between both associations. I am also the IPAC representative on the Canadian Standards Association (CSA) Technical Committee on Medical Device Reprocessing. All documents follow the CSA Z314.18 as the main standard for reprocessing and provincial guidance documents as available as applicable. The group is also an avenue to network and share questions and experiences and tools etc.

While there are 220 listed as members, there is an overall monthly attendance of 24 members. We meet via teleconference monthly throughout the year. The goal is to provide education, networking to members and develop Position Statements to provide guidance on topics related to reprocessing to the IPAC members and other associations who are interested.

Currently, there are two sub committees; the consolidation of into a “Community Reprocessing Group”-RIG subcommittee which includes Midwifery, Dentistry and Endoscopy. The goal is to discuss challenges faced with reprocessing in community settings and provide best practices to manage this.

There have been two Position Statements approved and are posted on the IPAC-Canada and CAMDR websites;

1. Joint IPAC Canada/CAMDR Statement (September 2018)
   ➢ IPAC Canada Statement on Medical Device Reprocessing Training and Technician Certification
2. Position Statement: Reprocessing of Critical Foot Care Devices (November 2018)

Foot care devices have been associated with healthcare associated infections and outbreaks. The goal of this document is to provide infection prevention and control (IPAC) recommendations for the management of critical foot care equipment and/or devices. This will include cleaning, disinfection, sterilization, transportation, and storage.

Clients expect and require safe care regardless of where the procedure is performed. Therefore, each client interaction requires a sterile set of foot care equipment/devices. The position statement discusses three options that are available for foot care providers. Please click on the link to review the full document: Reprocessing of Critical Foot Care Devices.

A document titled – ‘Practice Recommendations for Infection Prevention and Control related to Foot Care in Healthcare’ is currently submitted for approval.
Manitoba Chapter IPAC Conference
Submitted by Dalyce Fredette-Percy (President-elect)

I attended the Manitoba Chapter Infection Prevention & Control Conference in Winnipeg Manitoba through an invite. A complimentary registration and booth were provided.

Total attendees were 115, which was the most attendees present from past Manitoba Chapter conferences. Total Vendors were 12: AMG Medical, IPAC Manitoba Chapter, CAMDR, SC Johnson, Vernacare, Cornerstone Medical, MIP, Metrex, Diverse, GoJo—Purcell, Stevens, WRHA Virtual Library.

The conference was one full day 0800-1600 hour, located at the Canad Inn at Club Regent Casino (1415 Regent Avenue West, Winnipeg). The speakers were excellent on exciting topics:

- Dr. Guillaume Poliquin, Senior Medical Advisor, National Microbiology Laboratory- “What’s bugging us”. Dr. Poliquin spoke on his experiences working in Africa in the Ebola Camp. He also spoke on the topic of: Bacteria - What’s new?
- Mark Heller, MBA- Keynote Speaker spoke on “Something is better than nothing- The evidence in support of better cleaning process” sponsored by Diversey in the morning. Mark then spoke in the afternoon session on –“Cleaning by Numbers- A Quantitative Assessment of Environmental Hygiene”.
- Dr. Pierre Plourde, Medical Officer of Health, WRHA- Speaker on “Syphilis is bugging us—A LOT”!
- David Zinger, Engagement Educator, Speaker, Coach, and Consultant—“Are we Bugging You? Engaging the Disengaged”.

IPAC is a fabulous partner to CAMDR. The IPAC National Conference will be held May 3-6, 2020 at the RBC Convention Centre, Winnipeg, Manitoba. CAMDR will partner with IPAC in a morning Preconference concurrent session May 3, 2020 on the following topics:

- “Uncovering the Issues of Reprocessing- A day in the Life of a Medical Device and Medical Device Technician”.
- The second presentation will be “Instrument Reprocessing in the Community 101”.

I felt there was a high interest in CAMDR, and some attendees were very interested in membership. CAMDR provided a draw for a Free Two-year membership. The winner was Crystal Vanderveer from Beasejour, Manitoba.

I feel attending the IPAC conference was a positive experience representing CAMDR. As the President Elect/Vendor Director, I had the opportunity to speak with all the vendors that were in close proximity. I also had an opportunity to add to my education, listening to all the speakers while attending my booth. I feel this is a valuable conference to attend and support.
IPAC/IFIC 2019 Annual Conference in Quebec City
Submitted by Albert Csapo (President)

As a valued partner in healthcare, CAMDR was invited and offered a complimentary registration and booth to attend the IPAC/IFIC Conference in Quebec City. There were 489 attendees at the conference and a total of 63 vendors at the expo.

There was considerable interest in the CAMDR booth that was manned by Merlee Steele-Rodway (Presenter & Past President of CAMDR) and me. We provided interested individuals with our postcard and information sheet that provided 2020 CAMDR Conference information and the benefits to join CAMDR. We had 37 attendees who expressed an interest in joining CAMDR.

We were able to network with many of our own sponsors in CAMDR and new potential CAMDR exhibitors.

IPAC is a great partner to CAMDR and with the attendance increasing along with the interest in our booth, this is an excellent value for CAMDR to continue with this partnership for future events.

IAHCSMM 2019 Annual Conference & Expo
Submitted by Albert Csapo (President)

As President of CAMDR, I attended the 2019 IAHCSMM conference in Anaheim, CA. CAMDR and IAHCSMM partner to advocate for patient safety. IAHCSMM provides CAMDR a complimentary registration and booth each year for the conference. The number of attendees was over 1,500. This was an increase of about 100 over their 2018 conference. The vendor expo was located in the Anaheim Convention Centre.

The CAMDR booth attracted a number of vendors who were very interested in attending our 2020 Conference in Edmonton, Alberta. I had the opportunity to meet with representatives from Stryker, Primed, AHS, 3M, ASP, Getinge, Steris and Medline to promote their attendance in 2020. I also met with the current President of IAHCSMM; Damien Berg. We discussed the progress of the conference and the importance of networking between our countries.

I was able to attend a number of the education sessions which included a variety of topics. There were a total 42 topics for attendees to choose from.

Overall this conference was an incredible success. Although the attendees were US focused, there were a number of attendees from Canada. The vendor interest in the CAMDR booth was high and so I believe this is a valuable conference for us to continue to partner with.
CAMDR was invited to provide a Pre-Conference Reprocessing Workshop at the CAFCN conference. The 2 hour workshop was titled- Reprocessing 101 – A Review of the Basics Involved in Reprocessing Foot Care Instruments. There were 50 enthusiast delegates who attended this session. Attendees were very interested and engaged throughout the session. CAMDR provided one two year complimentary membership to a delegate who provided their name when they visited our booth. The winner is Lisa Drake from Windsor, Ontario!

As CAMDR has partnered with CAFCN for several years now, we were provided a non-profit rate exhibit booth at the vendor expo. I provided information on becoming a CAMDR member along with the benefits. There were approximately 100 delegates who visited our CAMDR booth. CAMDR views this as a valuable opportunity to provide ongoing consultation and education to the CAFCN. There were vendors in attendance who sell foot care instruments and reprocessing equipment. I had the opportunity to provide information about the new CSA Z314.18 standard to attendees.

I was able to attend some of the education sessions and made many contacts during the four days of the conference. I feel this is a very important partnership for CAMDR. The 2020 CAFCN Conference will be in Halifax, Nova Scotia; May 22nd - 24th.
Featured MDRD team

Night Shift MDR technicians from St. Michael’s Hospital, Toronto, Ontario

Send your team photos to info@CAMDR.ca to be featured in the next CAMDR Newsletter!