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Safety of personnel in perioperative environments

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Preface

This is the first edition of CSA Z305.0, *Safety of personnel in perioperative environments*.

This Standard was prepared by the Subcommittee on Management of Perioperative Environments under the jurisdiction of the Technical Committee on Perioperative Safety and the Strategic Steering Committee on Health Care Technology, and has been formally approved by the Technical Committee.

Notes:

- 1) *Use of the singular does not exclude the plural (and vice versa) when the sense allows.*
- 2) *Although the intended primary application of this Standard is stated in its Scope, it is important to note that it remains the responsibility of the users of the Standard to judge its suitability for their particular purpose.*
- 3) *This Standard was developed by consensus, which is defined by CSA Policy governing standardization — Code of good practice for standardization as “substantial agreement. Consensus implies much more than a simple majority, but not necessarily unanimity”. It is consistent with this definition that a member may be included in the Technical Committee list and yet not be in full agreement with all clauses of this Standard.*
- 4) *To submit a request for interpretation of this Standard, please send the following information to **inquiries@csagroup.org** and include “Request for interpretation” in the subject line:*
 - a) *define the problem, making reference to the specific clause, and, where appropriate, include an illustrative sketch;*
 - b) *provide an explanation of circumstances surrounding the actual field condition; and*
 - c) *where possible, phrase the request in such a way that a specific “yes” or “no” answer will address the issue.*

Committee interpretations are processed in accordance with the CSA Directives and guidelines governing standardization and are available on the Current Standards Activities page at standardsactivities.csa.ca.

- 5) *This Standard is subject review five years from the date of publication, and suggestions for its improvement will be referred to the appropriate committee. To submit a proposal for change, please send the following information to **inquiries@csagroup.org** and include “Proposal for change” in the subject line:*
 - a) *Standard designation (number);*
 - b) *relevant clause, table, and/or figure number;*
 - c) *wording of the proposed change; and*
 - d) *rationale for the change.*

Z305.0-13

Safety of personnel in perioperative environments

0 Introduction

0.1 General

Perioperative environments are found in the traditional acute care hospital, but are increasingly common in a variety of health care settings including but not limited to

- a) surgical centres;
- b) vision correction centres;
- c) physician's offices;
- d) dental offices; and
- e) education centres (e.g., dental, ophthalmology).

The perioperative environment contains numerous hazards that can affect the safety of both personnel and patients. The types of risk specific to the perioperative environment can include but are not limited to biological, ergonomic, physical, and psychosocial in nature. This Standard provides strategies and guidance for personnel safety within the perioperative environment based on the premise that this will also further enhance a safer patient environment.

This Standard introduces new language related to quality management systems (QMS). QMS is a framework for establishing policies and standard operating procedures (SOP), management accountability, and occupational health and safety (OHS) — including psychological health — with the goal of promoting a safer working environment. These policies and procedures are based on several inputs, including government regulations, national standards, and the specific requirements that make up the quality system of the individual health care setting. All health care professionals and ancillary personnel are responsible for following safety policies and SOPs. This includes identifying, reporting, and resolving any safety hazards.

0.2 Principles of QMS in a perioperative environment

To lead and manage a safe perioperative environment, it is necessary to direct and control it in a systematic and transparent manner. Success can result from implementing and maintaining a management system that is designed to continually improve performance while addressing the needs of all interested parties. Managing a perioperative environment in a health care setting encompasses quality management among other management strategies.

Eight quality management principles have been identified that can be used by senior management in order to lead the organization towards improved performance.

- a) **Personnel focus** — Organizations depend on their personnel and therefore should understand current and future personnel needs, and meet their safety requirements.
- b) **Leadership** — Leaders establish unity of purpose and direction of the organization. They should create and maintain the internal environment in which people can become fully involved in achieving the organization's objectives.

- c) **Involvement of people** — People at all levels are the essence of an organization and their full involvement enables their abilities to be used for the organization's benefit.
- d) **Process approach** — A desired result is achieved more efficiently when activities and related resources are managed as a process.
- e) **System approach to management** — Identifying, understanding, and managing interrelated processes as a system contributes to the organization's effectiveness and efficiency in achieving its objectives.
- f) **Continual improvement** — Continual improvement of the organization's overall performance should be a permanent objective of the organization.
- g) **Factual approach to decision making** — Effective decisions are based on the analysis of data and information.
- h) **Mutually beneficial organizational relationships** — An organization and its personnel are interdependent and a mutually beneficial relationship enhances the ability of both to create value.

These eight quality management principles have been adapted from the quality management system standards within the ISO 9000 family.

1 Scope

1.1

This Standard includes requirements for a quality management system (QMS) that addresses safety of personnel in perioperative environments including requirements for

- a) establishing a QMS;
- b) OHS;
- c) policies and SOPs, clinical practice standards, and documentation;
- d) personnel qualifications and training;
- e) work areas and equipment;
- f) infection, prevention, and control; and
- g) evaluation and purchase of reusable medical devices.

1.2

In this Standard, “shall” is used to express a requirement, i.e., a provision that the user is obliged to satisfy in order to comply with the standard; “should” is used to express a recommendation or that which is advised but not required; and “may” is used to express an option or that which is permissible within the limits of the standard.

Notes accompanying clauses do not include requirements or alternative requirements; the purpose of a note accompanying a clause is to separate from the text explanatory or informative material.

Notes to tables and figures are considered part of the table or figure and may be written as requirements.

Annexes are designated normative (mandatory) or informative (nonmandatory) to define their application.