A Clean Slate: Fostering Collaboration Between Pharmacy Services and Environmental Services

Chantel J Parson, Aseptic Lead - Royal Alexandra Pharmacy Services

BACKGROUND

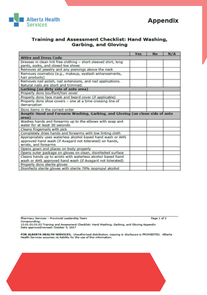
The pharmacy practice of sterile compounding involves dilution, mixing and injection of many different medications. **Aseptic technique procedures are needed to avoid the introduction of contaminants** into the sterile compounding environment and the final product. **It is critical for the health and safety of the patient,** that the sterile compounding environment is cleaned and disinfected according to AHS and the National Association of Pharmacy Regulatory Authorities (NAPRA) standards.

This project was designed to implement NAPRA standards regarding the training and assessment of the environmental services personnel entering and cleaning the sterile compounding areas at the Royal Alexandra Hospital. It was identified as a gap in our priority 2 NAPRA gap survey. Before this project, no training and assessment had been performed by pharmacy staff for environmental services, though it is outlined in NAPRA and in the Alberta Health Services (AHS) practice support documents. **This training project is new for both pharmacy staff and cleaning staff.**

METHODS

First, we gathered the information from NAPRA guidelines, as well as AHS support documents to form a training and assessment program that would be performed by the two site aseptic leads and managed by the sterile compounding supervisor. We held an introductory meeting together in September 2018 with the site environmental services managers to discuss the importance of NAPRA standards and the critical role environmental services plays to maintain patient safety. Our goal was to have all the full-time regular staff trained before the end of 2018. **We followed a Plan-Do-Study-Act (PDSA)** approach by training the full-time cleaning staff in both main pharmacy and NICU pharmacy first, assessing how the training is received, and modifying it before training the casual cleaning staff. We began training the staff early October 2018 and have ongoing training of the casual staff into 2019.

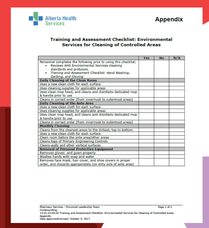
In order to measure the success of the training, **we planned to keep track of how well the cleaning staff completed the environmental services controlled areas cleaning log** and perform the yearly assessment of the consistent main pharmacy cleaner and NICU cleaner early in 2019. The assessment follows the checklists provided on the AHS website.


Appendix

Training and Assessment Checklist: Hand Washing, Garbing, and Gloving

Appendix

ENVIRONMENTAL SERVICES - Controlled Areas Cleaning Log


Appendix

Training and Assessment Checklist: Environmental Services for Cleaning of Controlled Areas

RESULTS AND OUTCOMES

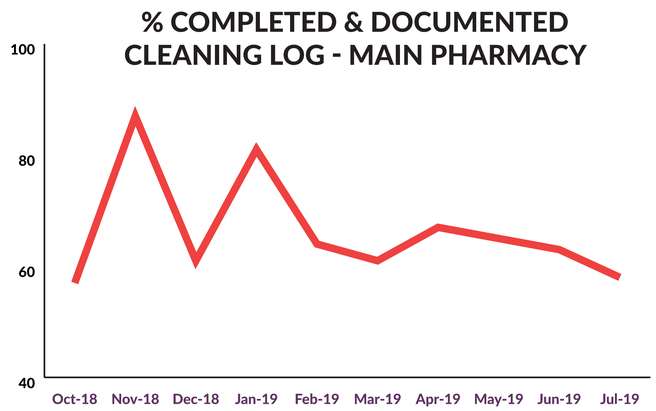
As of August 2019, we have a **total of 17 environmental services staff trained** to clean in the controlled areas - **8 main pharmacy cleaners** and **9 NICU cleaners**. We completed our goal of having all full-time regular cleaning staff trained by the end of 2018. When analyzing the results of the cleaning logs, there has been an average of 66.4% completion of documentation. Through this, we can see that the environmental services staff have come to understand the importance of documentation of cleaning activities as per NAPRA standards. However, there is still more work to be done to come to 100% documentation of cleaning activities.

8 Main Pharmacy Cleaners

9 NICU Cleaners

17 Total Environmental Services Staff Trained

A total of 3 yearly assessments have been performed. Through these assessments, we identified staff members who needed retraining and reassessment. Because of this outcome, we created a simple document outlining what specifically we need to cover in the training and have the trainee sign off that they understand all the concepts of the training. This also helped the aseptic leads to organize the training in a better way.



CONCLUSION

There were some challenges that we met when implementing this training program. Many of the environmental services staff are older staff who have been cleaning for many years, so this training was a big change for some of them. However, after explaining the importance of a clean environment and its contribution to patient safety, they went through with the training with less resistance. Also, it was difficult at times for our sterile compounding supervisor to coordinate training days for the cleaning staff, as some of them only worked evenings or weekends. The aseptic leads modified their schedules to accommodate these staff members. As well, since this training is new, it started out slow and at times pharmacy staff would notice that some cleaners that haven't been trained in this new program were being sent to clean. In these cases, we had no control over the environmental services staffing and tried our best to guide them on the spot. We flagged these situations to the sterile compounding supervisor, who connected with the environmental services manager and we saw a decrease in untrained staff coming to clean the pharmacy.

Overall through the introduction of this project, we hope to foster a strong collaboration between Environmental Services and Pharmacy Services to provide the best sterile compounding environment to prepare medications. In doing this, we hope to increase the health and safety of our patients and the quality of medications they receive.

NEXT STEPS INCLUDE:

- Continually training casual and new environmental services staff assigned to clean pharmacy controlled areas
- Maintenance of ongoing yearly assessment schedule for regular full-time staff and casual staff
- Constant education of pharmacy staff in the importance of the role of environmental services staff in maintaining a clean environment for sterile preparation

REFERENCES AND ACKNOWLEDGEMENTS

- National Association of Pharmacy Regulatory Authorities (NAPRA) Modeal Standards for Pharmacy Sterile Compounding Non-Hazardous
- Alberta Health Services Environmental Services Practice Support Document: Pharmacy – Sterile Compounding Areashttps://insite.albertahealthservices.ca/main/assets/tms/nfles/tms-nfles-pharmacy-sterile-compounding-areas.pdf
- Pharmacy Services support documents: Avagard Handwash Poster, How to Don Sterile Gloves, Donning and Doffing Personal Protective Equipment (PPE) https://insite.albertahealthservices.ca/phm/Page16196.aspx
- Pharmacy Services – Provincial Leadership Team Compounding 13.01.03.00.01 Controlled Areas Cleaning Log Appendix
- Pharmacy Services – Provincial Leadership Team Compounding 13.01.03.00.02 Training and Assessment Checklist: Environmental Services for Cleaning of Controlled Areas Appendix
- Pharmacy Services – Provincial Leadership Team Compounding 13.01.03.00.03 Training and Assessment Checklist: Hand Washing, Garbing, and Gloving Appendix https://myahs.ca/pharmacy/PS_POLICIES_PROCEDURES/SearchResultsByType.aspx?type=A&k=&s=

- A special thank you to Kyle Parson for the graphics and overall design of this poster.