

Staff Member:	Job Title:	
Start Date of		
Competency:	Unit:	

This competency has been assigned to the staff member indicated above and must be completed as part of their assigned role. This competency may need to be renewed at a designated future date to ensure the staff member maintains their skill.

The **Staff Member** will discuss with their Preceptor on their previous experiences and skills in establishing a plan and goals for successfully demonstrating their ability to meet the performance elements of the competency.

The **Preceptor** will discuss with the Staff Member the best approach to ensure their success in meeting the performance requirements for this competency. The **Preceptor** will date and initial each performance element when they validate that the Staff Member **has met the requirement of the element and can deliver this aspect of care without direct supervision.** The Preceptor should indicate in the Notes column any areas that the Staff Members should focus on to gain greater proficiency as they continue to develop. If the **Preceptor** has any concerns regarding the Staff Member's ability to meet the performance elements and successfully complete this policy, they should document their concerns on the Notes column and contact their **Supervisor** for direction.

Applicable References & Policies: 

Organization Policy and Procedure

	Performance Elements	D – [	(Cir Demo - Sim	cle)	ated	Date Performance Element Met	Preceptor Initials	Notes
				balize	ed			
		Inco	mpl	lete	or Fai	led Cycles	•	
•	Main Power: If the main power supply to the device is lost while in operation, the current cycle will not be completed. When the power is restored, the machine will safely recover. Follow the on-screen prompts.  • Perform hand hygiene and don gloves.  • Discard the used chemical indicator and replace it with a new one.	D	S	Т	V			

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Performance Elements	Validation Method (Circle) D – Demonstrated S – Simulated T – Test V - Verbalized	Date Performance Element Met	Preceptor Initials	Notes
<ul> <li>Re-run the disinfection cycle after waiting 3 minutes to avoid over-elevating the temperature of the probe. The device will enter a warm-up cycle to enforce this.</li> <li>Remove gloves and perform hand hygiene.</li> <li>Cycle Fault during the cycle. If a problem occurs during the cycle, a cycle fault will be detected.</li> <li>Screen Message: DISINFECTION FAILED, REMOVING DISINFECTANT. The cycle allows the probe to be safely removed after residual peroxide has been removed from the probe and chamber. After completion of this cycle, the probe should be removed, and the unit will enter a warm-up period.</li> <li>Perform hand hygiene and don gloves.</li> <li>Discard the used chemical indicator and replace it with a new one.</li> <li>Re-run the disinfection cycle after waiting 3 minutes to avoid over-elevating the temperature of the probe. The device will have entered a warm-up cycle to enforce this.</li> </ul>	D S T V			
<ul> <li>Remove gloves and perform hand hygiene.</li> </ul>				
	Routine Use and Ma	aintenance		
Loading the Disinfectant:  • Perform hand hygiene.	D S T V			

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Performance Elements	Validation Method (Circle) D – Demonstrated S – Simulated T – Test V - Verbalized	Date Performance Element Met	Preceptor Initials	Notes
<ul> <li>Always wear disposable gloves when handling disinfectant cartridges.</li> <li>Cartridge door will automatically open when the cartridge needs replacing.</li> <li>Screen Message: LOAD CARTRIDGE OR CARTRIDGE EMPTY, REPLACE CARTRIDGE NOW is displayed.</li> <li>Press the button under YES to open the cartridge replacement door.</li> <li>Do not insert empty cartridges into the device, this may cause damage.</li> <li>Always check the expiration date on the cartridge before use. If the cartridge has expired, dispose of it as per local environmental and regulatory requirements.</li> <li>Remove the cap from the cartridge and place the cartridge neck first into the holder.</li> <li>Ensure the locator on the cartridge is aligned with the locator keys on the door. Do not force the cartridge into the holder.</li> <li>The cartridge drops into place and cannot rotate any further. Gently close door.</li> <li>Following confirmation that a new cartridge has been installed, the cartridge door will</li> </ul>	· Verbalized			

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Performance Elements		Validation Method (Circle) D – Demonstrated S – Simulated T – Test V - Verbalized			Date Performance Element Met	Preceptor Initials	Notes
<ul> <li>automatically lock and will not reopen until</li> <li>the cartridge is empty.</li> <li>Remove gloves and perform hand hygiene.</li> </ul>							
	Sp	illag	ge o	f Disi	nfectant		
If a spill of the cartridge occurs, staff must wear     PPE appropriate for the spill.	D	S	Т	V			
Contain and clean-up the spill by placing spill control materials over the entire spill area. Discard materials per the organizations policy.	D	S	T	V			
Remove gloves and perform hand hygiene.	D	S	T	V			

I hereby attest that I have completed this assigned competency and feel confident in my ability to perform the listed performance elements. I understand that if I have any questions regarding my abilities to perform in my role that I am to contact my supervisor immediately.

Signature of Staff Member:	Date:
Signature of Preceptor:	Date:
Signature of Supervisor:	Date:
Notes:	

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