Management of Medical Equipment Policy

1. Purpose

The Management of Medical Equipment Policy communicates how Health Service Providers must manage owned, contracted and leased medical equipment over its lifecycle in accordance with the Australian and New Zealand Standard 3551:2012 – Management Programs for Medical Equipment. This Policy has been developed to enable Health Service Providers to manage their medical equipment and address their service delivery objectives.

This Policy supports the broader mandate by the State Government to strengthen links between asset planning and business decisions and is consistent with the Department of Treasury’s Strategic Asset Management Framework.

This Policy is a mandatory requirement under the Infrastructure (Asset Management) Policy Framework pursuant to sections 26(2)(d) and 32(2)(j) of the Health Services Act 2016.

2. Applicability

This Policy is applicable to all Health Service Providers.

3. Policy requirements

An explanation of key terms used in this Policy is provided at section 7.

For the management of medical equipment, Health Service Providers must:

1. Governance structure for the management of medical equipment
   1.1 Establish and maintain a governance committee for the management of medical equipment that provides advice to the Department of Health Strategic Asset Planning Steering Committee every six months. The governance committee must have oversight of and decision making responsibilities for the management of medical equipment at Health Service Provider level.

2. Plan to replace or acquire new equipment
   2.1 Plan to replace or acquire new medical equipment in accordance with the short-term (two years), medium term (five years) and long term priorities (10 years) as outlined in Health Service Provider Strategic Asset Plans (SAPs). Documented evidence must be provided within the SAP that clearly indicates that the acquisition of new medical equipment has considered alternatives to purchasing such as contracting the service, leasing the equipment, or obtaining surplus equipment.

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3. **Acquire equipment**
   
   3.1 Procure medical equipment in accordance with requirements set out within the Procurement Policy Framework.
   
   3.2 Conduct acceptance testing and commissioning of medical equipment in accordance with the *Australian and New Zealand Standard 3551:2012 – Management Programs for Medical Equipment*.

4. **Record and maintain asset information**

   4.1 Record and maintain the following asset information in a single information database (held within the Health Service Provider):

   a. all equipment assets under the control of the Health Service Provider
   
   b. a unique identifier for each asset
   
   c. the purchase cost
   
   d. maintenance cycle
   
   e. frequency of use
   
   f. a summary of any clinical incidents that occurred when using the medical equipment
   
   g. an estimate of the useful economic life of their medical equipment
   
   h. the responsible officer or business unit accountable for the equipment and its location.

   The medical equipment information must be readily accessible to individuals who are accountable for the control, use and maintenance and management of the medical equipment. Adequate controls must be in place to prevent unauthorised access or modifications to this information database.

   4.2 Provide the Department of Health Infrastructure Unit with:

   a. a copy of the Health Service Provider’s information database (with the date prepared and emailed to AdminAssistant.HealthInfrastructure@health.wa.gov.au)
   
   b. a completed Medical Equipment Management Report Template (provided at section 5).

   Health Service Providers must obtain endorsement for their copy of the information database and the Medical Equipment Management Report Template from the governance committee before it is provided to the Department of Health Infrastructure Unit.

5. **Operate, maintain and monitor equipment**

   5.1 Conduct a physical stocktake review of medical equipment every two years to ensure that the medical equipment information in the database aligns with the medical equipment that is physically on site.

   5.2 Maintain medical equipment in accordance with the *Australian and New Zealand Standard 3551:2012 – Management Programs for Medical Equipment*. Health
Service Providers must have maintenance programs for medical equipment in place and review the performance of medical equipment against these maintenance programs on a monthly basis.

5.3 Undertake performance verification activities on medical equipment in accordance with the *Australian and New Zealand Standard 3551:2012 – Management Programs for Medical Equipment*.

5.4 Review the utilisation of medical equipment to ensure that assets are being effectively used and notify the governance committee of medical equipment that is surplus to requirements.

5.5 Conduct risk assessments in accordance with the *WA Health Risk Management Policy* and local Health Service Provider policy guidance to determine if a Health Service Provider’s medical equipment is identified as posing a potential risk to service delivery. The assessment must include any mitigation strategies that are being implemented to manage these risks.

6. Decommission and dispose of equipment

6.1 Decommission and dispose of medical equipment when it reaches the end of its useful economic life in accordance with the *WA Health Financial Management Manual*. An assessment must be performed as part of the asset planning process to consider an asset’s obsolescence, number of like assets available, availability of spare parts and the manufacturer’s recommended useful life before the medical equipment is physically disposed of in accordance with the relevant aspects of the Procurement Management Framework.

4. Compliance monitoring

Health Service Providers are required to ensure compliance with the policy.

The Management of Medical Equipment Working Group provides oversight of the management of medical equipment in accordance to this policy.

Through the Infrastructure Unit, System Manager compliance monitoring activities include:

- receipt and analysis of the Health Service Provider endorsed copy of the information database by the last business day of March each year
- receipt and analysis of the completed Health Service Provider Medical Equipment Management Report Template by the last business day of August each year.

The System Manager also monitors Health Service Providers’ management of medical equipment as part of the Health Service Performance Report.

5. Related documents

The following documents are mandatory pursuant to this Policy:

- *Australian and New Zealand Standard 3551:2012 – Management Programs for Medical Equipment*

6. **Supporting information**

The following information is not mandatory but informs and/or supports the implementation of this Policy:

- Nil.

7. **Definitions**

The following definition(s) are relevant to this Policy.

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<tr>
<th>Term</th>
<th>Definition</th>
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<td><strong>Medical Equipment</strong></td>
<td>Any instrument, apparatus or appliance, including software, whether used alone or in combination, together with any accessories necessary for correct operation, that makes physical or electrical contact with the patient, or transfers energy to or from the patient, or detects such energy transfer to or from the patient, or is intended to diagnose, treat or monitor a patient. Note: Items of equipment that were not originally designed as medical equipment, but which are supplied as part of, or interfaced with, other medical equipment, are considered to be themselves as part of a medical electrical system, and subject to the requirements of this policy. For further information on the types of medical devices and their classification, please refer to Section 41DB of the <em>Therapeutic Goods Regulations 2002</em>.</td>
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<td><strong>Strategic Asset Plan (SAP)</strong></td>
<td>The SAP must outline the Health Service Provider's proposed service objectives; demand drivers and projections; and investment intentions for the next ten years. The SAP culminates in a summary of the asset proposals that have the highest priority for investment from the Health Service Provider’s perspective.</td>
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<td><strong>Useful economic life</strong></td>
<td>The life span medical equipment, after taking into account the manufacturer’s guide <em>and</em> the following factors:</td>
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<td>- frequency of use</td>
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<td>- nature of use</td>
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<td>- experience and knowledge of user</td>
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<td>- care and attention paid to use and operator maintenance</td>
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<td>- availability of spare parts</td>
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<td>- compliance with current codes and standards</td>
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<td>- technological or clinical redundancy.</td>
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<td><strong>Frequency of use</strong></td>
<td>The number of times medical equipment is used, e.g. daily, weekly, bi-weekly, monthly, bi-monthly yearly.</td>
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<td><strong>Management of Medical Equipment Working Group</strong></td>
<td>The Working Group comprises Health Service Provider and Departmental of Health representatives. The Working Group makes decisions on matters relating to the management of medical equipment at Health Service</td>
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Provider level. The Working Group is accountable and provides advice to the Strategic Asset Planning Steering Committee and assists in the implementation of medical equipment policy and practise, providing advice and direction on issues relating to the management of medical equipment.

8. Policy contact
Enquiries relating to this Policy may be directed to:

Title: Director, Infrastructure Unit
Directorate: Purchasing and System Performance
Email: infrastructure@health.wa.gov.au

9. Document control

<table>
<thead>
<tr>
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<th>Published date</th>
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10. Approval

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<th>Approval by</th>
<th>Dr David Russell-Weisz, Director General, Department of Health</th>
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<td>31 May 2019</td>
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