

Maintenance and Repairs of Clinical Equipment PHC Remote Guideline

Target Audience	All Clinical Employees
Jurisdiction	Primary Health Care Remote CAHS; Primary Health Care Remote TEHS
Jurisdiction Exclusions	N/A
Document Owner	Kerrie Simpson Atlas Development Officer Primary Health Care Remote CAHS
Approval Authority	Chair Remote Executive Leadership Group
Author	PHC Safety and Quality Team

The attributes in the above table will be auto-filled from the PGC System. Do not update in this document.

Purpose

To provide Primary Health Care remote staff with a guideline on the management and processes related to repairs and maintenance of clinical equipment for remote health centres.

Guideline

1. General Information

Functional, accurate and safe clinical equipment is an essential requirement in the provision of health services. Well-maintained equipment will give clinicians greater confidence in the reliability of its performance and contribute to a high standard of client care.

Remote health centres, like all health services, require annual or periodic servicing of medical equipment. In addition to planned servicing and preventative maintenance, there may be the unexpected failure of medical (and other) equipment, necessitating repair. Health centre staff are responsible for ensuring both maintenance and repair of clinical equipment.

At times, maintenance or repair of items may lead to temporary unavailability of equipment at the health centre. In an attempt to reduce this, a small collection of loan equipment is available regionally.

In general, clinical equipment that has an electrical power source and has direct contact with the client must be serviced as a first priority. Smaller items that are battery operated and require no calibration or can be calibrated on site are not required to have annual servicing.

Information in this document includes:

[Authorised Service Providers](#)

[Requests for Repair](#)

[Loan Equipment](#)

[Transportation of Equipment](#)

[Managing Equipment at the Health Centre](#)

[New Equipment and Equipment under Warranty](#)

[Contact Details](#)

2. Definitions

Authorised Service Provider¹: approved providers who maintain and repair clinical / medical equipment for remote health centres. At present there are two providers: Biomedical Engineering (BME) in the Top End and Medical Equipment Management (MEM) in Central Australia.

3. Responsibilities

3.1 Health Centre Clinical Staff

- Conduct routine checking of equipment. See [Essential Checks Form](#) and other relevant [Quality Returns](#)
- Label, isolate or remove faulty equipment to prevent injury
- Report faulty equipment to the Primary Health Care Manager

3.2 Primary Health Care Manager (PHCM)

- Maintain a current inventory of equipment
- Program routine maintenance of clinical equipment as required. See [Clinical Equipment Maintenance Information Sheet](#)
- Utilise the [Schedule for Clinical Equipment Maintenance](#) to plan routine maintenance
- Liaise with the relevant CA Infrastructure Coordinator / TE Medical Equipment Coordinator regarding repairs and maintenance of equipment and any requirements for loan equipment
- Complete necessary documentation to accompany equipment for maintenance and repair. In Central Australia this is completed via the [MEM W.O.R.K Request](#) (Mex Ops) electronic system.
- Ensure that equipment is packed for transportation to minimise the risk of damage
- Arrange transportation of equipment to and from the service provider

3.3 CA Infrastructure Coordinator / TE Medical Equipment Coordinator

- Coordinate the repairs and maintenance of equipment as appropriate
- Liaise with the Nursing Coordinator regarding the provision of loan equipment where available
- If required, arrange transportation of equipment to and from the service provider in consultation with the PHCM

3.4 Nursing Coordinator (Workforce Support)

- Provide appropriate clinical expertise and guidance regarding the management of clinical equipment
- Maintain a register of loan clinical equipment
- Ensure loan equipment is serviced and maintained in good working condition
- Liaise with the CA Infrastructure Coordinator or TE Medical Equipment Coordinator regarding the dispatch of loan equipment and related consumables as required

3.5 Medical Engineering Provider

- Provide repairs and maintenance of clinical equipment in accordance with current contractual agreements

Central Australia (MEM) only:

- Conduct site visits annually to provide on site maintenance of equipment

¹ DoH does not favour one service provider over any other. Information in this document is based on current service providers in the NT and will be updated to include any new services as required.

- Management of the electronic requesting process ([MEM W.O.R.K Request](#) system)

4. Procedure

Faulty equipment is to be removed from use immediately, labelled as faulty and repair or replacement if required arranged as soon as practicable.

Health centre staff should also refer to relevant Atlas documents regarding advice and repair procedures for clinical equipment. For some equipment (eg [Blood Glucose & Ketone Meters](#), [HemoCue® Hb Analysers](#)) which are not primarily maintained by BME / MEM, the relevant documents on the [Remote Health Atlas website](#) provides information regarding procedures for advice and/or repair.

4.1 Authorised Service Providers

Unless otherwise stipulated, clinical / medical equipment is to be maintained and repaired by the DoH contracted [provider](#).

4.2 Requests for Repair

4.2.1 Central Australia

Complete requests for repairs via the [MEM W.O.R.K Request](#) (Mex Ops) electronic system. This submits the request directly to MEM. The Request must also be printed and sent with each item of equipment, detailing work requested. For details see [How to raise an 'MEM W.O.R.K. Request'](#), using MEX Ops.

4.2.2 Top End

A Requisition for Work / Maintenance Form must be sent with each item of equipment, detailing work requested.

4.3 Loan Equipment

The Nursing Coordinator possesses the clinical expertise necessary to provide the appropriate guidance to the CA Infrastructure Coordinator / TE Medical Equipment Coordinator regarding the management of clinical equipment, including loan equipment.

When loan equipment is required, the PHCM should ask the CA Infrastructure Coordinator / TE Medical Equipment Coordinator to explore the availability of loan equipment. The Infrastructure Coordinator / Medical Equipment Coordinator will coordinate provision of this equipment where it is available.

A small collection of loan equipment may be available from the Nursing Coordinator, BME / MEM or Western Pathology. When loan equipment differs from the health centre equipment under repair, associated consumables must also be supplied with the loan equipment to allow use of the replacement equipment. Details of where loan items have been sent must be maintained by the Nursing Coordinator.

When equipment needs to be sent to a regional centre for routine maintenance, equipment should not be dispatched until the loan unit, where available, has arrived. In the instance that health centre equipment is faulty and unable to be used, it should be dispatched to the service provider with documentation attached, as soon as possible, regardless of the availability of loan equipment.

In some instances where the equipment requiring repair or maintenance is the same as the loan equipment a permanent exchange of equipment may occur. When this occurs, the location for the equipment on the inventory / [MEM W.O.R.K Request](#) system must be amended. The health centre requesting the equipment repair or maintenance will be responsible for costs.

Central Australia

Where MEM provides a regular on site service, ideally equipment should receive routine maintenance at the health centre, reducing the requirements for loan equipment.

4.4 Transportation of Equipment

Equipment must be appropriately packed and labelled for transportation. Couriers may take care but take no responsibility for the condition of equipment whilst it is in their possession. Cases that are padded to prevent movement of equipment, dust and water-resistant are recommended for the transportation of equipment. The appropriate request for repair documentation must be included with the equipment.

4.4.1 Central Australia

Equipment should be delivered directly to the MEM Office on the Alice Springs Hospital Campus or other service provider as appropriate. If direct delivery is not possible, arrangements can be discussed with the Infrastructure Coordinator to arrange delivery.

4.4.2 Top End

Equipment should be delivered directly to the BME Office on the Royal Darwin Hospital Campus or other service provider as appropriate. If direct delivery is not possible, arrangements can be discussed with the Medical Equipment Coordinator to arrange delivery.

4.5 Managing Equipment at the Health Centre

The routine management of some types of equipment held in remote health centres is detailed in respective Atlas Items in [Section 11](#) of the Atlas. There are specific compliance and other requirements for X-Ray equipment. See [X-Ray Equipment](#) for details.

Staff should also refer to relevant documents on the [Remote Health Atlas website](#) regarding procedures for advice and/or repair for some equipment.

Operator manuals for equipment held at each health centre is to be held at the health centre. For some equipment, the operator manual is also available online via the relevant document on the Atlas website.

4.5.1 Labelling Equipment

Clinical equipment serviced by the regional Medical Engineering Provider will have an Identification Number. Additionally an Asset Number is required for items with a purchase value over \$10,000.

Note: Equipment that has been gifted to a health centre remains the property of DoH and should be labelled with the name of the health centre.

4.5.2 Inventory and Maintenance Schedule Register of Clinical Equipment

A combined Inventory and Maintenance Schedule Register for all clinical equipment is to be maintained at the health centre. A [template](#) to establish the Register is available and may be edited to suit individual health centres.

Information to be recorded on the register should include the manufacturer, model, serial number, asset number (if applicable) and a medical engineering identification number, the date of last service, date of dispatch for servicing, travel warrant particulars if transported by a courier or mode of transport (ie name of person transporting the equipment) and destination of equipment. It is also useful to include the date of purchase of the equipment if known.

4.6 New Equipment and Equipment under Warranty

All new clinical and electrical equipment requires commissioning prior to use at the health centre. When ordering biomedical equipment (ie equipment intended for connection to a client, eg Electrocardiograph, Intravenous Infusion Pump, etc) the delivery should be requested **via** MEM (CA) or BME (TE) to allow for commissioning of the new equipment prior to delivery to the health centre. This request should be included on the IR and Stores will send the biomedical equipment for commissioning prior to delivery to the health centre.

The MEM / BME will identify the equipment with an Asset Number (if applicable), Medical Engineering Identification Number and provide the necessary checks and calibration on the equipment to ensure safety and warranty conditions are met before sending the equipment to the purchasing health centre.

The identified service provider must service equipment that is still under warranty or purchased through a tender process where maintenance and repairs are a condition of the contract.

4.7 Contact Details

Region	Phone	Fax	E-Mail
Central Australia - MEM	08 8951 7883	08 8951 7888	ca.admin@mem-nt.com.au
Top End - BME	08 8922 8205	08 8922 8860	BiomedicalEngineering@nt.gov.au

Document Quality Assurance

	Method	Responsibility
Implementation	Document will be accessible via the Policy Guidelines Centre and Remote Health Atlas	Health Policy Guidelines Program Atlas Development Officer, Primary Health Care CAHS
Review	Document is to be reviewed within three years, or as changes in practice occur	Atlas Development Officer, Primary Health Care CAHS
Evaluation	Evaluation will be ongoing and informal, based on feedback.	Atlas Development Officer, Primary Health Care CAHS

Key Associated Documents

Forms	Requisition for Work / Maintenance Form (HW 006), available from TE Stores Essential Checks Form Schedule for Clinical Equipment Maintenance MEM W.O.R.K Request (Mex Ops) electronic system – Central Australia only
Key Legislation, By-Laws, Standards, Delegations, Aligned & Supporting Documents	Cold Chain Section 11 Quality Assurance Blood Glucose & Ketone Meters HemoCue® Hb Analysers Standard Clinical Equipment X-Ray Equipment Ultrasound Equipment Clinical Equipment Maintenance Information Sheet Central Australia only: How to RAISE an 'MEM W.O.R.K. Request' – Using MEX Ops (intranet document) Accounting and Property Manual - Section 10 Asset Management (intranet)
References	As above

Evidence Table

Reference	Method	Evidence level (I-V)	Summary of recommendation from this reference
N/A	N/A	N/A	N/A