

**An Improved Method for Including Equipment in the Technology Management Program and Determining Its Inspection Frequency**

B Wang\*, A Levenson<sup>1</sup>, MEDIQ/PRN Life Support Services, Inc., Pennsauken, NJ 08110, USA,

(1)Presently at Staten Island University Hospital, Staten Island, NY 10305, USA.

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Every healthcare organization needs a technology management program to ensure that the equipment it uses is safe and efficacious. Determining which devices should be included and specifying the inspection interval of those devices are two primary tasks of this program. It is overwhelming and economically prohibitive to include all equipment, without any substantial safety improvement. Most organizations have adopted the equipment inclusion criteria proposed by Fennigkoh and Smith (1989). This classic interpretation of the Joint Commission for Accreditation of Healthcare Organizations (JCAHO) standard uses three criteria (equipment function, physical risks, and maintenance requirements) to establish a numerical value, the equipment management (EM) number. Only devices with an EM value higher than a predetermined threshold are included in the program. A fourth criterion, incident history, can be introduced after sufficient data are accumulated. Practiced literally, this interpretation may lead to confusion or inappropriate conclusions, resulting in inefficient and potentially unsafe conditions. The authors propose to reinterpret the equipment-function criterion to one that considers the devices' criticality within the organization's global mission. This helps to balance risks to a single patient with the organization's commitment to the entire community it serves. A new factor, equipment utilization rate, is also introduced. Heavily used devices typically fail more often and, therefore, should have higher priority for inspections and be inspected more frequently. These two revisions promote greater concurrence with the organization's mission and vision and, consequently, make the classic interpretation more consistent with JCAHO's new directives and modern principles of quality management.