University Hospitals of Morecambe Bay NHS Foundation Trust

NHS England’s Business Plan for 2014/15 to 2016/17 titled ‘Putting Patients First’ begins with the opening statement that “the NHS needs transformational change to frontline care in order to deliver better outcomes for patients”, and nowhere is this transformational change seen more clearly than in the recent upgrade to the service solution in Morecambe Bay NHS Foundation Trust’s Central Sterile Services and Endoscopy departments. The team here has embraced the challenges of the NHS Business Plan including ensuring geographic equality of care, protecting patients from avoidable harm and improving efficiencies to transform the way that services are delivered, in order to oversee the instalment of an innovative future-proof decontamination solution from Cantel that changes the way that the hospitals within the Trust serve their patients.

Recent media and press coverage across the United Kingdom has focussed heavily on the so-called ‘postcode lottery’ of care, and so the NHS Business Plan tackles the problem head on and aims to eliminate such variances in care provisions for now and for the future. The decision to partner with Cantel, a decontamination industry leader that provides full circle endoscopy solutions, makes Barrow-in-Furness the first geography in Europe to install and run Cantel’s pioneering new way of decontaminating endoscopes that puts the patient’s and hospital’s needs first in order to ensure that all

A three bay instalment of RapidAER

17,000
average no. of scopes reprocessed per annum

1800
extra scopes to be reprocessed per annum
units, no matter the size or throughput, can provide the highest standards of care. After all, why should a smaller hospital be unable to offer the same innovative and compliant care as a larger teaching hospital?

Across the UK, the natural evolution of endoscopy services – an increasing focus on infection risks, a need to reduce waiting times for patients and working towards achieving JAG accreditation for the Bowel Cancer Screening Programme – was resulting in non-purpose built units like Morecambe Bay NHS Foundation Trust’s being overwhelmed and no longer fit for purpose. Therefore a team, led by Richard Greenwood, Morecambe Bay Trust’s Decontamination Lead, has succeeded in incorporating their endoscope decontamination into Central Sterile Services, removing it from its prior location within the Endoscopy Departments at both Royal Lancaster Infirmary and Furness General Hospital. The move has been successfully implemented with the installation of a total of 7 RapidAER Endoscope Washer Disinfectors provided by Cantel: 3 installed at Furness General Hospital, the first site to upgrade their service, and another 4 have subsequently been installed into Royal Lancaster.

Dave Lee, the Trust’s Quality and Operations Manager, explains the reasoning behind the move to consolidate decontamination and sterilisation as being recognition that the skills involved in patient care and the provision of an endoscopy service are different to those involved with the effective decontamination of medical devices. “These two areas are very different specialty areas, and we believe that encouraging endoscopy staff to focus on the day to day management of their patients by removing the distraction of endoscopy equipment decontamination will result in better patient outcomes and a smoother running service. Also, reprocessing endoscopes within the Central Sterilising Department has allowed us to improve the standard of reprocessing by adopting techniques familiar to us in CSD… separating clean from dirty areas, deploying a clean room set up with proper air circulation, and generally trying to keep those reprocessed scopes as close to sterile as we can get them.”

When it came to the selection of equipment and a working partner for the department, Richard’s team at Furness General had very clear requirements of their supplier: “footprint was everything”, explains Richard. “We had an unimaginably small space to work in and therefore we needed a single bay machine, with the smallest footprint possible to make the best use of the space that we had available to us. There were some machines available on the market that had single bay set up, and therefore a fairly small footprint, and that would reprocess multiple scopes within that chamber, all at the same time. But this was a non-starter. Endoscopes are meticulous, temperamental pieces

Cantel’s pioneering new way of decontaminating endoscopes puts the patient’s and hospital’s needs first in order to ensure that all units, no matter the size or throughput, can provide the highest standards of care.
of equipment. It is all too common for a cycle to fail because of a connection issue, or a blockage problem, or low flow rate data. It’s unthinkable to use a multi-scope single chamber machine because when one scope fails a cycle, all scopes fail their cycle. What a waste.”

Therefore, the only conceivable solution would be a pass-through machine capable of separating clean from dirty areas, a feature familiar to Richard Greenwood and the Central Sterilising team thanks to their existing pass-through sterilisers; due to limited space they required intelligent machinery with a very small footprint and easy access for engineers; the limited space also highlighted a need for the fastest possible cycle time to move scopes through the unit quickly; the hospital wanted to prepare itself for the future so needed flexibility to invest in the right number of machines for now, but with the option to add and expand as demand required; the team could not afford the risk of downtime in their machines so they decided to invest in a single-bay option that ensured lost reprocessing time would be minimal, as well as receiving additional protection for their unit and patients by covering the RapidAER with a Cantel maintenance and service contract.

Cantel was the only company capable of meeting all of Furness General’s needs which is what makes the RapidAER solution so unique. Designed by a former engineer for the Dyson brand, the motto during the conception of RapidAER was to “keep it simple”. As the product began to take shape, it became clear that keeping it simple was also the answer to problems that end users of endoscope washer disinfectors were facing every day: single bay AERs would reduce the downtime required for service and validations and ensure endoscopy departments could continue their normal operational throughput without compromise; the ability to connect scopes externally was not only easier to manage but would also allow the machine to be in constant use as a scope could be processed while the next one is being loaded into its carrier; an increase in patient numbers and consequent increase in the demands on the decontamination department created a need for faster more efficient machines.

Together, the RapidAER solution from Cantel and the exceptional leadership displayed by Richard and Dave within the Trust have created a work environment where trained specialists can carry out their roles with a due diligence that can only improve patient outcomes. And, as we see an environment in which the public have more and more access to information and an increased connection between the public and the government is fostered, ensuring that your Trust can be trusted is of growing importance.

The endoscopy nurse specialists at Furness General, led by Unit Manager Suzanne Langley, are delighted with the new set up. Following the relocation of the decontamination service, the endoscopy nurses have been able to stop leaving the patient’s bedside to do the scope cleaning and focus instead on what is most important to them, patient care. They explain that the new system which divides nursing and decontamination into two specialty areas has created significant communication improvements between departments in the hospital. Sarah Wrightwebb, Clinical Lead for Endoscopy, sums it up nicely saying, “Between us [departments], we all know what we are working towards in a day. We don’t have to settle for second best anymore…we have the best now.”
The installation at Furness General was an amazing success thanks to the total buy in of everybody involved throughout Cantel and the hospital including architects, Estates Management, users, SSD and more. At every meeting the room was always very full of people, experience and knowledge, so there was no stone left unturned and everything was covered right from the off with no hidden problems that came out later. It was formal in the sense that it was done properly and professionally, but it was also friendly: everybody shared contact details so that they could contact anyone from the project if they needed to or wanted to or if they had any questions. If I could write an instruction manual on how a project should be run, I would write about how the Furness General project was run as an ideal project management piece.

I am so happy I was able to make a difference and to have helped the hospital to make a difference. Thanks to my clinical background I am acutely aware of how important it is to create a safe outcome for the patient in a timely fashion: and parallel to that is the importance of ensuring the welfare and wellbeing of the staff involved in that process. So the project is not just about the RapidAER being safe from a chemical and technical point of view, it’s also about the fact that it can reduce staff stress by having a quick cycle time and being a reliable machine. Being involved in this kind of project is about being involved with a hospital and influencing change for the better, for both patients and staff.

If you don’t have buy-in from senior staff in the hospital you can’t progress change, you just hit a brick wall. In this job I can help hospitals to progress and change, I can pick the staff up and take them from one hospital to another to show them best practice. Furness General was a huge success and subsequently Royal Lancaster Hospital upgraded their department to replicate this: the amazing achievement of one site helped to inspire the ongoing improvement at the other. Both hospitals have also been happy to support other hospitals involved in new projects by allowing them to visit their department and share their experiences.

Concisely, the RapidAER feature that I am proudest of, and that I like to discuss the most, is probably the whole team that supports it. In my opinion it’s not just the AER that’s important but what Cantel sells as a package: you don’t just buy a lump of metal from us but everything that goes with it. The training, the ongoing support, being at the end of the phone, the whole package. Yes, the cycle time is great, the reliability is great, but the whole team supporting constantly to make sure that the staff don’t ever feel like they’re on their own makes such a difference.

I would like to think that my customers at Morecambe Bay Trust 100% trusted me as an individual and could believe in everything that I did and said. That’s me, and that’s Cantel. My customers get me as a person, not just an Account Manager, I’m invested in the process and genuinely care about the account and their wellbeing.

My advice to any potential customer would be to go and visit other sites for ideas and inspiration, to see what people have done well, what they would do again and differently etc. Wherever possible go and see as many sites as you can to help influence what is essentially a massive and long term decision.
Overall, what made the installation at Furness General such a success was having an excellent Project Manager in Ian Ferguson. He was always on the ball, knew exactly what was going on and acted as an excellent central contact to speak to about the status of the building works and what needed done to let us move forward with machine installation. The same team have now been used at another project in the trust, at Royal Lancaster Hospital, and it went so smoothly because we had all worked together before.

Furness General took a leap of faith with us by choosing the RapidAERs: Furness was the UK’s first installation of a brand new revolutionary technology, and therefore nobody really knew how they would perform and work. Of course, there were a few small teething problems but overall the machines have performed better than we could have imagined. We have also been able to ensure that the product coming out of our factory now is an amazing machine by suggesting little changes here and there that would

The RapidAER’s ability to detect partial blockages and issues in the air and water channels really is excellent and the aspect of the machine that I am proudest of. The air and water channels are the smallest in a scope and therefore the trickiest to clean properly. Our RapidAER is able to detect even the smallest partial blockages allowing customers to have their scopes repaired accordingly which has been of great benefit to Furness General.

I really do think that our customers at Furness General would be extremely pleased with us and think we have offered a great service. Furness General operate their decontamination room up until 10pm some nights and I am happy to have been on the end of the phone for them if or when problems arose, even at that time of night. They know they can always call us, and can always rely on us to be there ASAP if they need us. We try and do as much advice giving as we can over the phone in case there’s a minor operator error that could be causing a fail cycle, but now Furness General also have remote diagnostics so it’s even easier to help solve any problems quickly and efficiently.

Our RapidAER is able to detect even the smallest partial blockages allowing customers to have their scopes repaired accordingly which has been of great benefit to Furness General.
At Furness General, the installation of RapidAER saw a shift from decontaminating scopes in the Endoscopy Department to decontaminating them in CSSD, so none of the staff we were training had experience in decontamination and endoscopy. Therefore, we needed to cover everything from the operating of the RapidAER itself, to helping the staff to understand more about endoscopes to manual pre-clean. I have an endoscopy background so the staff did ask me a lot of questions about scopes and their uses and functions which I was very happy to help with. It was also arranged that some staff transferred over to endoscopy for a few weeks so that they built their knowledge on scopes, what they were used for and how they worked.

I ran the training with 5 people per session as well as offering additional one on one discussions and casual sessions. I was there throughout the go-live process which took about 1 week to watch their activities and ensure they were operating the machines correctly, and then I supported them with any teething problems and issues after go-live. When I look back, the staff had no confidence when I met them because they were so new to the endoscopy and decontamination area, but now I am proud to see them feel so confident with the RapidAER and happy with our service. I have been back since to do more training because they have employed more staff, but I’ve not had to go back and do any refresher training because the staff are so competent and comfortable with the machine.

The RapidAER itself is not a complicated machine to use: it won’t let you make any mistakes so everyone I have trained has been really happy and found it very easy to understand. The log books that are provided with the RapidAER are very good and in depth so staff can always look at them if training up any new staff themselves, or to refresh their own knowledge whenever they feel they need to. The support we provide is second to none and I’m really proud of how in depth and detailed it is compared to some other training programmes. I believe that Cantel provide an excellent training service and ongoing support.

I’m proud of our full Cantel team: the engineers are always there, they always try their best to get to a call out as fast as possible, as do the Clinical Trainers. The engineers almost always have the right part to fix any problems, and I think that’s really unique in the market. The after service we provide really is exceptional.

Prior to us going live at both hospitals, Cantel’s clinical trainer, Carla, had been on site to characterise endoscopes in the RapidAERs which ensured that we were all ready for when go live actually happened. Doing this also gave an opportunity for Carla to build a rapport with all staff before carrying out the training with them meaning they were more comfortable with her and happier to ask questions. The feedback I had from staff is that the training was very well structured.

I would describe the service from Cantel’s engineering team as brilliant. As with the clinical team, before going live the engineers were on site for a number of weeks which enabled them to build a great rapport with the staff. I have a very good working relationship with Dave Bowers, our Engineering Manager. He is always at the end of the phone and, if required, he either attends the hospital himself to help us or nominates another engineer to site at their earliest convenience. The engineering team have also provided ‘First Line Response’ training to the some of our own authorised persons which has enabled them to give more of an insight to how the AER works. This helps us to manage the RapidAERs we have more proactively.

My experience of working with the whole Cantel team has been very positive. From the pre-start meeting Cantel were very proactive and kept us up to date with all progress. The Account Managers are incredibly knowledgeable and provide us advice when required. Also they are very friendly and approachable which I think is a real benefit as I feel I can raise constructive criticism without the fear of them being offended. But, above all, they bring biscuits and cakes when they visit our sites which makes the staff extremely happy!
Following on from the successful integration of endoscopy decontamination into the Central Sterilising Department at Furness General, Morecambe Bay NHS Foundation Trust continued on its pathway to excellence with the subsequent upgrade of the service at the Royal Lancaster Infirmary. They used their experiences gained at Furness General to not only replicate the amalgamation of their services into one expert department, but to further perfect their processes second time round. Originally Royal Lancaster had a similar set up to Furness General’s old arrangement, with endoscopy decontamination occurring within the endoscopy department itself, in a unit that was not designed or built with endoscopy decontamination in mind and therefore not entirely fit for purpose. At around 10 years old, the endoscope washer disinfectors had reached their end of life which was resulting in more errors occurring during the reprocessing of scopes and therefore a more sluggish reprocessing department. It was the right time to upgrade, and the right time to move.

Dave Lee, Morecambe Bay NHS Foundation Trust’s Quality and Operations Manager explains the space redesign they did to turn their Central Sterilisation Department into CSD plus Endoscopy Decontamination:

“In the washroom we have managed to separate the space into two distinct sections, one for the reprocessing of scopes, and one for the cleaning of other medical devices. In the scope reprocessing section we have fitted two double sinks from Neocare, both height adjustable to be ergonomically friendly for all potential users, and each has its own Scope Tech device for the flushing and manual clean of the scopes. The Medical Engineering department also used to have their offices in this area: we managed to get that department moved, knocked down a couple of walls and placed the AERs in to that space. On the clean side of the AERs we have created a Class 8 clean room which we feel brings us assurances that the scopes remain as clean as possible because they are being packed in a sterile environment. And to ensure the efficacy of the clean room we test it in the same way we would any Royal Lancaster’s installation of four RapidAER Endoscope Reprocessors

we don’t unnecessarily have to reprocess scopes multiple times, they are either stored in a Cleanascope tray for use within three hours, or conditioned and vacuum packed with the Surestore system if it will be longer than that before that scope will be used again.”
other clean room, with microbiological testing conducted once per quarter to include particle counts, surface counts, air counts etc. We always strive for the gold standard and that’s why we have created what we have. Ultimately, everything we do comes back to our patients, we are here to provide them with a service and we want to provide the best service we can.

The way we run our department is to have all staff trained in the use of all equipment and we rotate them around each section of the department to keep their skill set high. Therefore, all of our staff are endoscopy decontamination specialists. That way they all know the equipment and if somebody is sick or on holiday we know that our machine handlers are comfortable and competent.” This approach has also proved popular with the staff responsible for manually handling and reprocessing the scopes. Mandy Babij, Sterilisation Technician, says “when we first started the endoscope reprocessing it was connecting the scopes that was the scary bit, not using the machines. The machines themselves are quite self-explanatory, the screen tells you exactly what you need to do. But learning about the scopes is more complex and only doing it regularly do you become comfortable with it.”

"When we initially went live at our new department it was a small challenge trying to work out exactly how the endoscopy staff and decontamination department would work together,” says Dave, “but as time has gone on, we have been able to develop a great relationship with them. The endoscopy staff do the running with the scopes, bringing their dirty ones down to the department and taking their clean ones back up for use and storage. This way they are able to tell us exactly when they need their scopes for. We now manage our reprocessing activity to process scopes at the best time depending on the needs of the list and department. They also always keep us in the loop as their lists change because with the best of intentions and purposes the inevitable always happens, the order of lists change and scope needs change too. The location of scope decontamination now allows endoscopy staff to arrive to work in the morning and immediately prep and plan their day without needing to worry about whether the scopes are ready, we have done that part for them.”

Claire Howarth, Clinical Leader in the Endoscopy Department explains that from the perspective of her department and staff “all of the pressures not directly connected to patient care have been taken away and we don’t need to worry about them anymore. We don’t need to worry about breakdowns, machine management, or our scopes, everything is decontaminated, conditioned in a Surestore and vacuum packed ready to go every day. I really believe that our set up works so well due to excellent communication between us and the decontamination department. We let them know exactly what scope we will need and when resulting in cost savings for the Trust because we don’t unnecessarily have to reprocess scopes multiple times, they are either stored in a Cleanascope tray for use within three hours, or conditioned and vacuum packed with the Surestore system if it will be longer than that before that scope will be used again.

Since we passed over the management of scope decontamination, the Trust has moved to a 7 day working week which is an amazing service improvement allowing us to deliver better care to all patients. We now provide a specialist GI Bleed service for emergency inpatient admission which truly is the best standard of care any of our patients could hope for. We have also started
a bowel cancer screening list offering flexible sigmoidoscopy to 15 patients every single week. Altogether these service enhancements are evidence of our Trust’s development of a comprehensive patient care platform because, after all, people are living longer and there is a greater uptake for services such as endoscopy. Now, because we can focus solely on patient care and not be involved in the cleaning of our scopes, we can cope with our additional demand better.*

With approximate procedure numbers of 5000 per annum, a number which is set to grow organically due to higher patient uptake and an increase in bowel cancer screening numbers, the Royal Lancaster’s new machines are being used well and frequently, but they still have capacity to absorb more reprocessing thanks to the fast cycle time of the RapidAER. Royal Lancaster also meets the reprocessing needs of third party customers who send their scopes to Lancaster for cleaning. Thanks to the Surestore Long Term Storage and Transport solution from Cantel the suitable shipping of clean scopes back to those facilities is easily managed. Richard Greenwood, Decontamination Lead at Morecambe Bay NHS Foundation Trust, further explains, “our units are JAG accredited and have also received ISO 13485, ISO 9001 and Medical Device Directive 9342 EEC accreditation. All of these accreditations bring legitimacy to our set up, processes and systems and include approval of the transportation of scopes, procedures for management of scopes, dispatch, packaging, AER processing and manual cleaning. We need to have those ISOs in place to be able to offer a service to third party customers.”

Given all of this progressive change at Royal Lancaster, it is no surprise that patient satisfaction surveys at the Endoscopy department regularly come back with positive feedback to be proud of including that patients feel secure, reassured and fully informed throughout their pathway. It seems that the Trust have truly immersed themselves in the objectives of the NHS Business Plan and stay true to their mission statement and values which promise to ‘Engage’ with patients and staff, to ensure ‘Quality and Safety’ in all of their practices, and to ‘Partner’ with third sector to provide excellent care for all.

Royal Lancaster use Cleanascope and Surestore for all scope storage needs

The RapidAER and Surestore are the perfect solution for such a small workspace
CASE STUDY

The team at Royal Lancaster Infirmary had the benefit of being able to look to their sister hospital at Furness General, learn from their experiences there, and purchase and install AERs of choice accordingly. Lancaster’s decontamination facility had a bigger room than at Furness General, but it was still tight for space and therefore the footprint of the RapidAER was extremely important to them and their decision making process. Plus, the fact that a small footprint still provided a faster cycle time was a great benefit.

It was exciting because they knew what they were going to get following on from their experience at Furness General, they knew it would be reliable and they knew Cantel would provide them with good service to ensure their go-live went smoothly. I made sure I kept in close contact with the customers at Lancaster, had regular visits, and tried to make sure the project was running smoothly.

I think it’s important in any hospital to offer genuine and ongoing support. I’m not a sales person that sells and moves on. Instead, I sell, I support and carry on supporting. There is no such thing as one person making a project a success; success is all down to teamwork, and I am part of the team. We all contribute to a project and work closely with each other to make sure that the customer has the best experience possible. We have learned that communication within the Cantel team, and communicating with the Lancaster team, is pivotal to ensuring our installation projects run smoothly.

I am proud of the fact that our customers ordered the RapidAER at Furness General and had enough faith and belief in the company and equipment to order again at Royal Lancaster. The team we work with across both sites have been so helpful and accommodating: we are all a true example of a partnership and best practice sharing as opposed to being just supplier and customer.

Ultimately, when it comes to product benefits, it is the small footprint and the rapid cycle time that the users at Furness General most benefitted from, and that proceeded to appeal to our customers and users at Royal Lancaster. The footprint being so small provides decontamination units more flexibility with the amount of machines they can fit in to their departments, and obviously the rapid cycle time results in increased productivity and increased throughput which is a priority for our customers. We also can’t forget ease of use: the cycle time includes the loading and unloading of the endoscope into the AER, and with the RapidAER it is one quick step to load and unload a scope, which means ease of use is really relevant to, and directly affects, the throughput of the machine.

Our customers across Morecambe Bay Trust know that if they ever have any problems, that we deal with them and their requests with a sense of urgency and importance.

ACCOUNT MANAGEMENT REVIEW

“I am proud of the fact that our customers ordered the RapidAER at Furness General and had enough faith and belief in the company and equipment to order again at Royal Lancaster. The team we work with across both sites have been so helpful and accommodating: we are all a true example of a partnership and best practice sharing as opposed to being just supplier and customer.”

Alison Piggott, Account Manager
The main reason the Lancaster installation went so smoothly was that we had worked previously with the Morecambe Bay NHS Foundation Trust management and project team during the Furness General Hospital installation. I think that all parties involved benefitted from what we had learned during the installation at Furness General. The RapidAER machines installed there were a brand new machine on the market and some of the very first serial numbers manufactured. Using experiences gained working with them we learned to alter the dimensions for the cavity wall, where the service terminations for the RapidAER were housed, to allow for easier access during service visits.

I think Cantel employees, as a team, have built up a very good strong relationship with the staff at Royal Lancaster. We have always strived to be up front open and honest, with any problems we have encountered during the installation and consequent running performance of the RapidAER. From the feedback we gained from the staff at both Royal Lancaster and Furness General we have been able, as a company, to improve even further and to deliver a very reliable EWD in the RapidAER. Our response time, to any problem however small, is very good and I am sure the staff at Morecambe Bay Trust would agree.

The RapidAER is a very user-friendly machine because it is so easy to operate and hospital staff often comment on this. Our customers also comment on how quiet the RapidAER is while running a cycle, it creates a much nicer working environment for them compared to other EWDs on the market. Furthermore, RapidAER removes the potential problem of mismatching a scope with the incorrect hookup which ensures that no scope can be incorrectly loaded into the machine. If the incorrect hookup is used the machine will not allow you to continue the cycle and will fail it immediately.

As an engineer, I feel that I can be more helpful to my customers than ever before thanks to our remote diagnostics and telemetric capabilities with RapidAER. Via an internet connection, we can have a look at the performance of any individual machine and identify potential failures on components like pumps and solenoid valves before they even happen. By checking flows of previous cycles we can pre-emptively replace any pumps, valves and other components which may cause the machine to fail. By doing this we look to minimise any potential down time for the department.

Over time you get to know customers and become good colleagues and some even friends. My team know that are they ambassadors for the Cantel UK brand and therefore we strive to always behave in a professional and courteous manner. A lot of the time it is the engineer that is the first port of call when any problems or queries arise, and we have to listen and take any complaints from the customer in a way that lets them know we care and want to help. The Cantel Service Engineers are very proud to work for Cantel, and do so with a professional and dedicated attitude at all times.

As an engineer, I feel that I can be more helpful to my customers than ever before thanks to our remote diagnostics and telemetric capabilities with RapidAER.
The staff at Royal Lancaster were in the same position as those at Furness General when we installed their RapidAER – they were very familiar with the cleaning of instruments but had never dealt with endoscopes before, so I focussed heavily on making sure they were comfortable with the machines and the handling of the scopes to build up their confidence. It’s amazing to see how well they are doing and to see how they have grown compared to when the RapidAER were first installed. I managed some group training opportunities as well as some one on one training opportunities as we went live. I was so impressed with the engagement of the staff when it came to learning about the machines and the scopes, they were so keen to learn and that makes such a difference to me being able to my job well, they were really enthusiastic and I appreciate that engagement from them.

Since the initial go-live training I continue to conduct regular weekly follow up calls with the department supervisor, Dave Lee. I’ve also been to the department since to do some additional characterisation of scopes as they have received some new or loan scopes. Plus, Lancaster have contracts to do the scope reprocessing for other hospitals so I have been so happy to go in and characterise those scopes as they’ve received them to help them provide that third party service. I also go to the unit and replace little parts as they’ve needed them to make sure their service runs smoothly, so all in all I am proud to say I continue to offer a hands on service for the department.

The RapidAER really is the easiest machine to use. Despite its amazing capabilities it’s not got a complicated operating system and anybody with some training should feel confident in using it. I think that for the staff and technicians dealing with the machines on a daily basis, I am really approachable and would go out of my way to help those, and all, customers in any way I can.

Since the initial go-live training I continue to conduct regular weekly follow up calls with the department supervisor, Dave Lee. I’ve also been to the department since to do some additional characterisation of scopes as they have received some new or loan scopes. Plus, Lancaster have contracts to do the scope reprocessing for other hospitals so I have been so happy to go in and characterise those scopes as they’ve received them to help them provide that third party service. I also go to the unit and replace little parts as they’ve needed them to make sure their service runs smoothly, so all in all I am proud to say I continue to offer a hands on service for the department.

The RapidAER really is the easiest machine to use. Despite its amazing capabilities it’s not got a complicated operating system and anybody with some training should feel confident in using it. I think that for the staff and technicians dealing with the machines on a daily basis, I am really approachable and would go out of my way to help those, and all, customers in any way I can.

The service we have received from Cantel’s clinical training team has been excellent. Carla was very good with all aspects of the training and very thorough, the staff found her training methods were very clear and precise. Furthermore, the engineering team were very good and spent quite a few weeks on site when we first went live at Furness General Hospital even over the Christmas period. Overall, the Installation projects went very well at both of my decontamination units in Furness General Hospital and Royal Lancaster Infirmary, both being delivered on time and to budget.

I was so impressed with the engagement of the staff when it came to learning about the machines and the scopes, they were so keen to learn and that makes such a difference.