

I HEARD IT THRU THE STEAMLINE

ASHCSP Affiliated Chapter Newsletter of the Year—1993, 1995, 1996, 1997, 1999, 2000, 2001, 2002, 2003, 2004, 2005, 2006

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Editorial/Newsletter Committee

- Pam Caudell-Editor /Granville Medical Center
- Lana Haecherl /Carolinas Medical Center
- Georgia Gallagher /Durham Regional Hospital
- Harriet Pratt/CMC-Mercy
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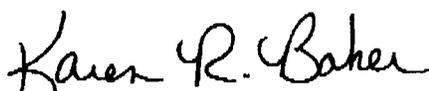
President's Message

I can't believe a whole year has passed since I took office as President – elect of our Association. Thank you to all who made suggestions for topics for our education meetings. We took your suggestions seriously and hope you saw some of these topics offered during this past year. Thanks to all of you for giving me a big welcome to the office of President during our annual meeting at Myrtle Beach. You gave me the support I needed to feel great about taking on this responsibility for the term of 2007-2008. I know that together we can make this a great year of opportunities.

Didn't we have a great time at our annual meeting? The speakers were great and gave us a lot of information we could take back to our facilities and put to use. Thank you for all the comments and suggestions you gave to us on your evaluations. We can make use of all this information in making plans for you during the coming months. Please keep those helpful suggestions and comments coming so we can bring to you the things you need to provide quality care to our customers.

I look forward to the opportunity to serve as your President this year. Feel free to contact me at anytime I can be of help or assistance to you. My contact information can be found in this Newsletter. Together we can make our profession recognized for what we provide to the healthcare field.

I will see you at our next meeting on July 27th at the Hawthorne Inn in Winston Salem. Have a great summer!!!



Karen Baker
President, NCAHCSP



AND THE WINNERS ARE:

BILL DENNIS MERIT AWARD:

Judith Carey—Processing Coordinator-Caromont Health

These words were written by the person that nominated her—leadership qualities: leads by example, values the individual within the framework of the team and leads by putting her customers first.

She has improved the work environment, productivity, quality, customer service and process by listening to staff, focusing on customer service needs, identifying opportunities to improve quality by standardizing instrument sets and educating staff about clinical outcome expectations.

She and her staff are well respected by their customers for their outstanding dedication to quality, customer service and finding ways to improve upon products and services. She does not sacrifice staff well being or customer service to achieve a productive outcome.

She volunteers at least two days a week at a local women's center. She also supports the Relay for Life Fight against Cancer and has been supportive of two of her teammates with a local Girl Scout troop.

The love of her life is her wonderful grandson, Tanner. She is never without pictures.

CONGRATULATIONS, JUDITH!!!!

Ray Manning, Sr. Achievement Award

Inez Dent—CSS Supervisor—Craven Regional Medical Center

Inez has worked in Central Sterile for over 15 years. She is one of those special people with experience not only in CS but Materials Management. She is certified through the IAHCMM as a technician and is also certified as an educational preceptor. She is currently studying for the IAHCMM Supervisor certification exam.

She researched Creutzfeldt-Jakob disease (CJD) along with Infection Control which led to a policy being written which focuses on how to properly decontaminate any instruments exposed to this type of infectious matter.

She is also solely responsible for mentoring and pre-

paring the staff for the CSS certification. Within the last five years, 14 of 16 staff members are nationally certified through the various governing bodies associated with Sterile Processing. Inez also helped write departmental policies that were not currently in place in CSS. She was also the catalyst for constructing an employee handbook that entailed departmental practices and technician responsibilities associated with their daily activities.

Inez is also well known for her community activities. She works within her church, she delivers flowers to the sick in Craven and surrounding communities. A large portion of her time is spent not only raising money for the Carobell Foundation, but she also makes sure that the handicapped children cared for by the Carobell Home are cared for properly.

WAY TO GO, INEZ!!!!

Joe Stanley Memorial Award

Cheryl Jones-Sterile Processing Supervisor-Duke University

Cheryl has consistently exceeded expectations for longer than ten years. She reflects a high level of service, trustworthiness, and respect. Her efforts alone, have resulted in significantly improved throughput and customer satisfaction and to the greater assurance of the quality of service for Perioperative Services, the physicians and the surgical patient population.

She is extremely dedicated to not only her job but to the entire department. Cheryl's problem-solving abilities are so widely known that she has become the "go-to" person on first shift. She knows both the front line staff issues and the supervisory/administrative issues of the business. She is able to take care of any additional job responsibilities asked of her without additional instruction.

Cheryl motivates her staff through her example of doing things right the very first time. She takes her job very seriously, personally and gives 110% all the time. She is trustworthy and dedicated to not only her job but the people she works with.

GREAT JOB, CHERYL!!!!

NEWS FROM NCAHCSP

The annual meeting was held in Myrtle Beach on May 2-4. The speakers were excellent as was the weather and the shopping.

One of the new members from Tennessee wrote:

• I had a great time and learned several new things that we have not started doing yet. We will be working them in place over the next few months. We enjoyed the vendor's show and the free gifts. I am looking forward to the meeting next year. We

also got to go walking on the beach and a little bit of shopping. Thanks for letting us be a part of your North Carolina family.

Best wishes from Tennessee

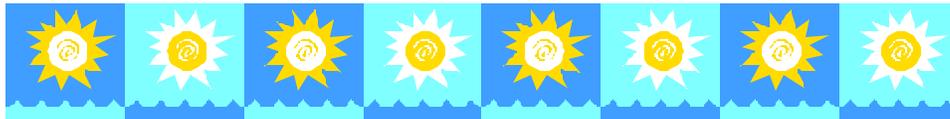
Trudy Wilson "

Trudy,
We're glad you got to come to our meeting. Please feel free to come to our meeting whenever you can and let us know how you're doing. Keep up the good work. IF you have any questions, please don't hesitate to call

one of us or e-mail. If we don't know the answer, we'll find it for you.

CONGRATULATIONS!!!

Harriet Pratt's daughter got married and now she is the MOTHER-IN-LAW. Way to go Harriet. We know you'll make a good one. Just remember, sometimes, it's not what you do say but what you don't say. See picture elsewhere.



THOUGHT FOR THE DAY

A little girl walked to and from school daily. Though the weather that morning was questionable and clouds were forming, she made her daily trek to the elementary school. As the afternoon progressed, the winds whipped up, along with thunder and lightning.

The mother of the little girl felt concerned that her daughter would be frightened as she walked home from school and she herself feared that the electrical storm might harm her child. Following the roar of thunder, lightning, like a flaming sword, would cut through the sky.

Full of concern, the mother quickly got into her car and drove along the route to her child's school. As she did so, she saw her little girl walking along, but at each flash of lightning, the child would stop, look up and smile. Another and another wave of lightning followed quickly and with each the little girl would look at the streak of light and smile.

When the mother's car drew up beside the child, she lowered the window and called to her "What are you doing? Why do you keep stopping?" The child answered, "I am trying to look pretty. God keeps taking my picture."

May God bless you today as you face the storms



“ Budgeting Process; Dream or Nightmare?”

Pamela H Caudell, RN, CNOR, CSPDS, ACSP

Objectives:

At the conclusion, the reader will be able to:

1. Understand how the budget process works.
2. Discuss what Capitol Equipment Requests means.
3. Explain the difference between “new” and “replacement” capitol requests.
4. Discuss how the operational budget can affect future spending.

For most people working in the CS arena, the budgeting process is not something you generally have to be familiar with. This is usually left up to the Supervisor or Manager or Director. But, in today's world, knowing how this process works and how it impacts your daily life is something that everyone should know at least a little bit about.

Because of the amount of monies necessary for pieces of equipment, like sterilizers, for instance, these purchases have to be planned. When we talk about the budgetary process, there are several different venues that must be looked at. The first is called the “Capitol Equipment Request” for the next fiscal year. What this means is that in 2007 we start looking at what pieces of equipment we need to replace due to age, availability and support issues. Is the equipment difficult to repair? Does the manufacturer still have parts for it? How much has it cost us to repair each time it needs to be fixed? Is there newer technology out there for this piece of equipment? These are questions we need to have answers for as we move into the process of capitol equipment requests. Under

“Capitol Equipment Requests” also falls the plan for purchasing new equipment. We are all aware that there are newer technologies for doing the same job we have done in the past. For instance, look at the Ozone Sterilizers. They have the potential for making the job of sterilization much easier and more convenient. But they are not cheap so we have to plan on when and how to purchase them. Also there are items that are for the betterment of the staff such as chairs for picking instrumentation or putting up trays. The tables with all the bells and whistles on them for the convenience of the staff are also not cheap so they also have to be planned for. Along with wanting new equipment or even replacing old equipment comes the myriad of paperwork. There are many questions to be answered before one can even turn in a request for Capitol Equipment. For instance, is the manufacturer part of the facility's buying group? Do we need to do an RFP (request for product) before proceeding? We send these to three manufacturers minimally and based on their responses, will choose the one that meets our needs the most.

Another question involves the use of disposables. Are there disposables with this product? Since we are not considered a money-making department, everything we buy must be looked at to see if the use of this item outweighs the cost of the item. We also have to look to see if there are re-usables that we can use instead of the disposables. If it uses disposables, do they come in different sizes and do we need to have all the sizes or can we just get two or three of the most commonly used sizes?

Other questions involve integration with current computer systems. Do the systems talk to each other? Is there an interface cost? Will we need additional hardware? How about the software upgrades? Are they included in the original purchase price or must we budget for the up-

grades separately? What is the life expectancy of both the hardware and the software?

Is there a maintenance contract we can buy or is there an extended warranty? Speaking of warranties, what does it cover and how long does it last? Do we need to take the manufacturer's warranty or can we get a third party to give us a contract on equipment that will cost us less. By the same token, we also need to look at the coverage from the third party company. When we compare the two contracts, are they looking at the same things? Is it a parts and labor contract or is it just parts? What about after hours; do we get service when we need it or just between 9 and 5? What about pms? Are they included in the warranty or the maintenance agreement or are they extra? If we get a service agreement, what are the costs and terms? Does it use Radio Frequency and are the signals an issue? Do we get service manuals and training on the upkeep of the equipment? As you can see, these questions can make or break a buy.

What about the operational budget? This is what we call the daily expenses and the cost of running the department on a daily basis. In actuality this consists of all the expenses that are consumable and are used directly in caring for patients. You have both direct and indirect, or overhead, expenses. Direct expenses includes the cost of salaries, paid time off, benefits and raises for the staff. Also included are productive and non-productive hours of the staff. It also includes the cost of running the equipment from the cost of making steam for the steam sterilizers to the cost of distilling the water for the washers. This also includes the cost of the electricity, the wrappers and the sterilization pouches. And what about the cost of the ethylene oxide? If you use this product, you know it is not cheap to run a load in this sterilizer. And what about the cost of the chemicals you use to clean with?

There is a certain mixture that involves the chemicals used in cleaning and while there is a little movement in the amount of chemical per gallon of water, you can only dilute the chemical so far before it will no longer do the job you want it to. Indirect or overhead expenses include the value of the capitol equipment, number of employees within the department and the number of square feet the department occupies.

One way that we, as managers, are able to predict with some regularity, what next year's budget is going to be is by reading the monthly variance report. The difference between the actual results and the planned results represents a variance. These are the reports that are sent to us every month from the finance department. Variance analysis provides the opportunity to examine the operations of the department by reviewing the workload, identifying the payroll and non-payroll costs associated with that workload and taking action on the findings. This tells us how we spent our money for the previous month. Included in this is the amount of the total expense spent, including salaries. It also includes what it costs the department on a daily basis to operate based on the number of patients in the facility or the number of cases done in the operating room. There is also a report that shows what was ordered and by whom within the department along with the PO or ordering number. From this, we can look at the POs and see how many cases of sterilization wrap we ordered as well as the number of disposable ER suture trays we received and how they were expensed so we can see if items ordered and used by someone else, were mistakenly charged to our department.

This is just a very surface look at how the budgeting process works. Each individual facility will do it differently. If you are interested in how your facility does their budgeting process, ask your manager or Chief Financial Officer. The more you know about how the system works, the better able you are to judge whether or not something needs to be changed and how to be more cost effective so that in the end, the result is a more cost efficient and well run unit.

Post Test — Budgeting Process; Dream or Nightmare?

1. Capitol Equipment requests include both repairable and new equipment.
 True False
2. When buying new equipment we need to know if we need to purchase disposables with the equipment.
 True False
3. When doing Capitol Equipment purchases, the process starts the year the purchases are needed.
 True False
4. The operational budget consists of items not necessary for the direct care of patients.
 True False
5. Included in the cost of the operational budget are both direct and indirect or overhead expenses.
 True False
6. The difference between the actual results and the planned results represents a variance.
 True False
7. Variance reports tell us how many tools we bought the previous month.
 True False
8. Productive and non-productive hours are included in the indirect operational budget.
 True False
9. When looking at the cost of running a department on a daily basis, things like electricity costs, sterilization pouches and wrap as well as ethylene oxide must be considered.
 True False
10. Variance analysis provides the opportunity to examine the operations of the department by reviewing the staff's performance issues.
 True False

EVALUATION--Please evaluate this in-service by selecting a rating between 0 and 4.

0=Not Applicable, 1=Poor, 4=Excellent

Author's Knowledge of the Subject **0 1 2 3 4**

Author's Presentation, Organization, Content **0 1 2 3 4**

Author's Methodology, Interesting/Creativity **0 1 2 3 4**

Program Met Objectives **0 1 2 3 4**

Please Note--Answer key will be in the next issue of the "Steamline"

To receive 1.0 contact hours toward certification from CBSDP, complete the in-service "quiz" after reading the article. Send the entire page with the completed "quiz" to:

Lana Haecherl
 P.O. Box 568
 Pineville, NC 28134

Lana will issue a certificate if your score is greater than 70%. Please be sure to fill in the information requested below.

If you are **NOT** a member of NCAHCSP, please include a fee of \$20.00 for in-state membership and out of state membership. Your fee will provide you a 1-year membership in the Association and will also entitle you to submit the next in-service offerings for the cost of a postage stamp. That is potentially six in-service programs for your registration fee. Remember you will not be issued a certificate unless you are a member of NCAHCSP.

CEU credits pending from CBSDP.

CLEARLY print your name as you wish it to appear on the certificate. Enter the address where you want the certificate sent.

NAME: _____

Address: _____

City: _____ State: _____ Zip: _____



CONGRATULATIONS TO HARRIET'S DAUGHTER ON HER WEDDING!
DOESN'T SHE MAKE A BEAUTIFUL BRIDE?? AND WHAT ABOUT HARRIET?
SHE HAS A USUAL WIND SWEPT GOOD LOOKS. LIKE MOTHER, LIKE DAUGHTER!!!



BUILDING A BETTER BACK

We in the healthcare field know that sometimes our backs will just plain give out. We lift numerous trays weighing over 20 pounds and do serious repetitive motions, all of which give us a terrible backache. How can we help to prevent that or ease it once it happens? It is vitally important that we protect ourselves from injury by using a preventative program designed to keep our backs strong.

Begin with a 5-10 minute warm-up consisting of cardiovascular activity, such as walking, cycling or gentle stretching to help warm up and limber your muscles. Start with the following exercises to strengthen your back:

? **Bridge**—lie on your back with your feet flat on the floor, shoulder width apart; knees bent at 90 degrees. Contract your lower back and gluteal (rear) muscles, lifting your hips off the floor. Be careful not to lean on your neck. Hold for 5-10 seconds then return to starting position. Repeat 10 times.

? **Superman**--lie on your stomach with your arms extended right over your head, parallel to ground and legs straight behind you. Lift your right arm and upper body and left leg simultaneously; hold for 3-5 seconds then release. Repeat with opposite arm and leg. Repeat on both sides 10 times.

? **Chair Crunch**—lie on your back with hips and knees flexed to 90 degrees; rest your lower legs on a chair or bench to equal 90 degrees. Keep buttocks close to chair. Place your hands behind your head and keep your heads back, focusing your eyes upward. Lift your upper back off the floor; pause, then return to start position. Repeat as many times as possible, making sure not to pull on your head or neck.

? **Knee to Chest**—lie on your back and hold one leg behind your knee, pulling the knee toward your chest. Hold for 20 to 30 seconds, then release. Repeat with the opposite leg.

Do these exercises at least once daily but twice daily is better and see how much less back pain you have.



Answers to the April Post Test:

- 1) Surgical instruments are specially designed for performing specific actions or carrying out desired effects during an operation. **True**
- 2) Ancient trephines were pins used in Orthopedic cases. **False**
- 3) In India, Hippocrates, was considered the most important surgeon in ancient history. **False**
- 4) Sushruta is often described as the "father of surgery". **True**
- 5) Instruments can be made from iron, copper, silver or bronze. **True**
- 6) Amputation sets were invented during the Renaissance period due to the increased severity of war-inflicted wounds by cannons, shot and shrapnel. **True**
- 7) Tuttlingen, Germany became the center for skilled instrument making approximately 200 years ago. **True**
- 8) The quality of surgical instrumentation is the best its' ever been due to better materials, continual surgeon adjustments and the early instrument crafters. **True**
- 9) The most common classification of surgical instrumentation is the retractor class. **False**
- 10) In Medieval times, knives were made of stainless steel. **False**

Please remember to visit the web page at:

www.ncahcsp.org

Always new and exciting



Mission Statement

North Carolina Association for Hospital Central Service Professionals will establish itself statewide as the leading educational organization through innovative programs that enhance the development of the Central Service Professionals.

NCAHCSP Officers and Board of Directors 2007-2008

President-Karen Baker 07-08
 Director, Central Service
 CMC—Union
 600 Hospital Dr.
 Monroe, NC 28111
 Phone-704-225-2575—fax 704-225-2586
 karen.baker@carolinashealthcare.org

Judith Carey 05-06
 Processing Coordinator, Sterile Supply Services
 Gaston Memorial Hospital
 2525 Court Drive
 Gastonia, NC 28054
 Phone-704-834-2346—fax-704-854-4631
 careyj@gmh.org

Margie Morgan 06-07
 Moore regional hospital
 Asst. Director, Sterile Processing
 P O Box 3000
 Pinehurst, NC 28374
 Phone-910-215-1081—fax-910-215-3293
 mmorgan@firsthealth.org

President-ElectPatricia Washington 07-08
 Manager, Sterile Processing and Distribution
 Carolinas Medical Center-Pineville
 10628 Park Road
 Charlotte, NC 28210
 Phone-704-667-0910—fax
 patricia.washington@carolinashealthcare.org

Pam Caudell, RN, CNOR, CSPDS 07-08
 Director, Surgical Services
 Granville Medical Center
 1010 College St.
 Oxford, NC 27565
 Phone-919-690-3421—fax-919-690-3202
 pcaudell@granvillemedical.com

Louise Rahilly, RN 06-07
 2623 Fordham Drive
 Fayetteville, NC 28304
 Phone—910-485-8296
 crah115826@aol.com

Past President-Cheryl Edgar, LPN, CSPDT
 Assistant Director, Central Processing
 CMC-Union
 600 Hospital Dr.
 PO Box 5003
 Monroe, NC 28111
 Phone-704-283-3126—fax-704-225-2461
 cheryl.edgar@carolinashealthcare.org

Diane Fink, RN 07-08
 Manager, Sterile Processing
 Northeast Medical Center
 920 Church Street North
 Concord, NC 28025
 Phone-704-783-1441—fax 704-783-3181
 dfink@northeastmedical.org

Linda Smith 06-07
 Manager, Sterile Processing
 Stanly Regional Medical Center
 301 Yadkin St
 Albemarle, NC 28001
 Phone-704-984-4650
 linda.c.smith@stanly.org

Secretary—Harriet Pratt
 Central Processing
 Carolinas Medical Center—Mercy
 2001 Vail Avenue
 Charlotte, NC 28207
 Phone-704-304-5385—fax 704-304-5400
 harriet.pratt@carolinashealthcare.org

Georgia Gallagher, RN 06-07
 Nurse Manager, Operations (Central Sterile)
 Durham Regional Hospital
 3642 N. Roxboro St.
 Durham, NC 27704
 Phone-919-470-4156—fax 919-470-8149
 georgia.gallagher@duke.edu

Lisa Williams, 07-08
 Carolinas Medical Center
 Education Coordinator SP/ME/Distribution
 P O Box 32861
 Charlotte, NC 28232
 Office: 704-355-8947
 Fax: 704-667-0904
 lisa.williams@carolinashealthcare.org

Treasurer-Frank Sizemore
 Manager-Central Service
 North Carolina Baptist Hospitals, Inc
 Medical Center Blvd.
 Winston-Salem, NC 27157-1122
 Phone-336-716-6270—fax-336-716-5269
 fsizemor@wfubmc.edu

Lana Haecherl, RN 06-07
 Manager, Sterile Processing and Distribution
 Carolinas Medical Center
 P O Box 32861
 Charlotte, NC 28232
 Phone-704-355-9814—fax 704-355-7938
 lana.haecherl@carolinashealthcare.org