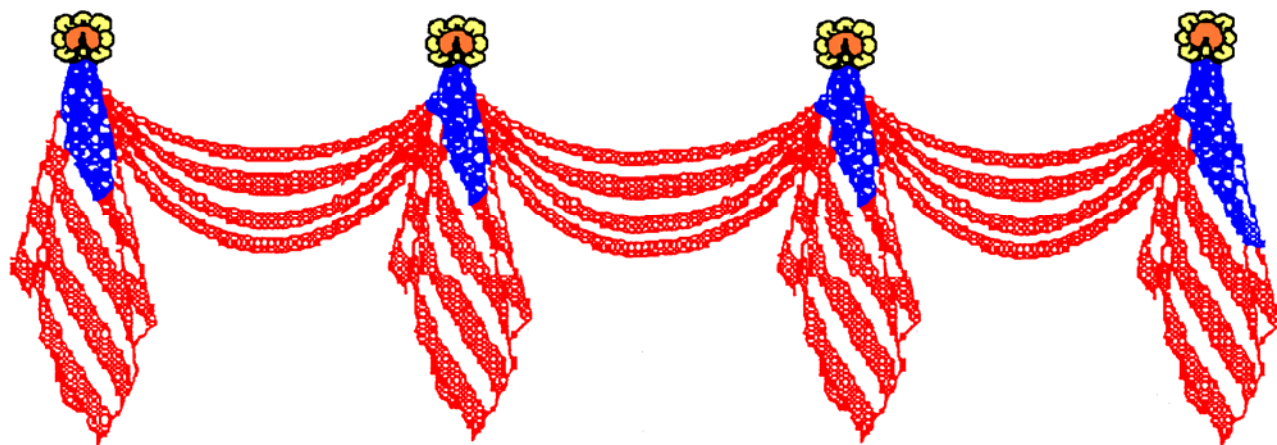


I HEARD IT
THROUGH THE

STEAMLINE

NORTH CAROLINA ASSOCIATION FOR HOSPITAL CENTRAL SERVICE PERSONNEL



NATIONAL CENTRAL SERVICE WEEK

OCTOBER 11 – 17, 1992

**THE NC ASSOCIATION FOR HOSPITAL
CENTRAL SERVICE PERSONNEL IS
PROUD OF YOU AND YOUR
DEDICATION TO CONTINUOUS
QUALITY IMPROVEMENT IN HEALTH
CARE!!**

PRESIDENT'S MESSAGE

Summer vacations are almost over and school will be starting soon. I hope all of you have had a very enjoyable vacation and are looking forward to cooler weather.

The summer seminar was a success. The topic was very timely with the OSHA regulations for Bloodborne Pathogens, on everyone's mind. The attendance at our one day meetings is very rewarding to the Officers and Board of Directors. We will continue to present educational and up-to-date topics.

The ASHCSP annual conference and meeting was held in Phoenix, AZ on August 8 - 13. We would like to congratulate them on celebrating their 25th Anniversary.

I was thinking the other day about the North Carolina Association and the progress that has been made since I first became a member. The growth has been amazing, and just think, "we've come a long way and we have a long way to go".

To help accomplish this, we need our membership to become more involved. The nomination forms have been mailed, and I hope you will take time to nominate someone or yourself. There is a lot of hard work, but the rewards are great.

Take pride in the field we are in. Join us in celebrating Central Service Week Oct. 11-17, '92.

I look forward to seeing you at the fall seminar, and wish each of you a safe trip.

By: Mary C. Robinson



INVENTORY CONTROL COMES OF AGE

I used to work in a manufacturing plant which used chemicals that came in many 55 gallon drums. To determine when to re-order, the foreman would walk up and down the storeroom kicking the sides of various drums and listening to the sounds. The ones that sounded tinny and empty would be re-ordered. The ones that sounded heavy and full would be skipped. Great judgement was needed on those that sounded about half-full. To re-order or not?

Other organizations use the famous OSWO System of inventory management. Under this scheme, you wait until a customer asks for a product, then go to the shelf only to find none there - even though you could swear they were there yesterday - "Oh shoot, we're out"! Time to re-order.

Nowadays, we often continue to ask purchasing agents to spend hospital dollars with no better information than the "kick the barrel" method or the OSWO System.

Lack of information always results in bringing in too much of the wrong items and not enough of the right ones.

Since Inventory Management pursues the ideal of having just what is needed, when it is needed, we must make available the best of what we know to the people who spend the money:

How many are left? How many should be ordered? Due when? What's already coming in? These pieces of information, if kept up to date and presented in a logical manner, contain all the information Purchasing needs to know to be able to minimize your space and dollar commitments.

If you can maintain and use this information in a kardex file, so be it. Most of us cannot, and need to use some form of computerized inventory system. Basically, daily receipts, issues, and orders are entered, and the computer serves the role of storing and retrieving. Inventory systems can be PC-based and relatively inexpensive. Up to date inventory systems contain:

- 1) an item master record - description, price, lead time, vendor, etc.
- 2) item on hand quantity
- 3) usage history and trends
- 4) on-order information

Many systems include additional features that do the arithmetic for you: calculate your safety stock, determine your next order quantity, record the latest unit prices, etc.

So, should you apply scarce resources to computerizing your inventory records? Only if you want to save time, space, and money.

Paul Spedding
Manager, Inventory Control
NC Baptist Hospitals, Inc.

COFFEE, TEA OR GERMS?



Keep that mug clean, researchers advise. If you drink coffee at work out of a glass mug, here's a message from a group of Canadian researchers: Scrub your mug!

A group from South Peace Health Unit in Grande Prairie, Alberta, ran swabs around the rims of 90 disposable and reusable cups from four offices and sent the bacterial samples to the lab. Even though the mugs were washed and presumed clean by the people who used them, one in three ceramic mugs contained more than 100 bacterial colonies. It's not known how harmful the bacteria are; a lack of money forced the researchers to give up further study. But prior research has shown that food-poisoning bacteria thrive on ceramic mugs, according to Eating Well magazine.

Just be sure, regularly wash your office mug in hot, soapy water.

By: John Tanasychuk
Knight-Ridder Newspapers



REMEMBER!!!
CENTRAL SERVICE WEEK
OCTOBER 11-17

FOR SWEATSHIRTS AND T-SHIRTS
CONTACT: LINDA RUDESEAL OR
FRANK SIZEMORE

NEWS BITS

Endoscope Washers

The Center for Disease Control investigated two outbreaks of nosocomial infections related to the Olympus Endoscope Washer, model Ew-10 and Ew-20. The FDA has stated that "inadequate design of the device may allow colonization of water-borne organisms such as Pseudomonas in the internal tanks and tubing".

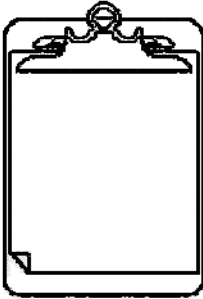
Olympus representatives are in the process of modifying the machine at customer sites. The modification involves the incorporation of a glutaraldehyde self-disinfection cycle which must be run once a week or after every 40 wash cycles.

Communique'
July /August 1992

New Gas Sterilant Mix

Another patent for a new, environmentally safe gas Sterilant mix was issued jointly in May to Union Carbide Industrial Gases, Inc. and to Dupont and Company. The new mixture uses hydrofluorocarbon (HFC) -125 to stabilize the sterilizing gas Ethylene Oxide. The mix has no damaging effect on the stratospheric ozone and will be available in a few years following the completion of additional testing. According to UCIG, the companies, last fall, patented a HFC-124 mix, which UCIG estimates will be marketed within 24 months.

Materials Management
in Healthcare
Volume 1 Number 5



**AIDS-LIKE CASES
WITHOUT HIV
REPORTED AT
MEETING**

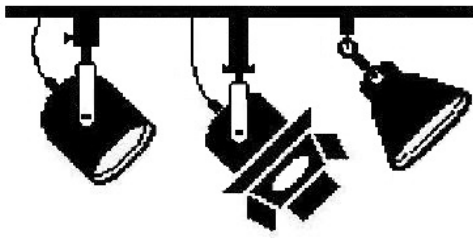
Reports of the existence of at least two dozen cases world-wide of people with AIDS-like symptoms but with no signs of HIV infections prompted assurances by the American Association of Blood Banks that the US blood supply is safe. The Atlanta based Center for Disease Control said they know of six U.S. cases of patients who have shown signs of AIDS, including reduced immune-cell counts and rare infections, but who have tested negative for HIV. CDC officials are not really sure that this is a new HIV strain. If a new virus is discovered, the AABB will work closely with the CDC. "To do what needs to be done to ensure appropriate public- health measures".

AHA News
Volume 28
Number 30

AIDS AGAIN

The U.S. Agency for Health Care Policy and Research reported last week that the total U.S. cost to treat people with HIV or AIDS is expected to reach 152 billion dollars in 1995. The lifetime cost to treat an AIDS patient is \$102,000 this year up from \$85.333

AHA News
Volume 28, Number 30



SPOTLIGHT

Recently, we had the opportunity to talk with Victoria Hardy about her experiences in Central Service. First of all, she prefers to be called "Pat".

Pat is the Manager of Central Sterile Supply at Northern Hospital of Surry County, in Mount Airy, NC. She obtained her LPN license from the Winston-Salem School of Nursing in 1958. Her early assignments were in Obstetrics, O.R., and Med. / Surg. before she transferred to Central Sterile Supply in 1976. Pat serves on infection control, recognition, and code cart committees at her hospital.

Pat has been a member of the NCAHCSP since 1977. She says, "I couldn't have made it without the help and support of the Association."

Mrs. Hardy says her most difficult challenge has been to maintain adequate coverage 8 hours per day for seven days per week with only four full-time employees, one at 80% and one relief person. She takes pride in her accomplishment in moving C.S. from a one-room operation to a three-room department with case cart and code cart responsibility.

Pat's family life includes her husband, son, three daughters and four grandchildren who are very active in sports. Pat has served as a

Girl Scout leader, Den Mother, and as a member of the fire department auxiliary. Her hobbies include: camping, reading and church work with the United Methodist Church.

Pat is really looking forward to her retirement in about five years. She plans to relax and do the things they never had time for before. Her husband is retired, but he has returned to work keeping local golf courses looking beautiful.

Pat, we're looking forward to working with you in the Association for all of those five years. Congratulations on being in our spotlight!

By: Linda Rudeseal



NCAHCSP WELCOMES NEW MEMBERS!

Grace M. Carter
Central Sterile Processing
Frye Regional Medical Center
Hickory .NC

G. Bayne Eason, III
Executive Sales Representative
Johnson & Johnson Medical, Inc.
Jamestown, NC

Deborah Gabe
Surgical Tech
Sterile Processing
Frye Regional Medical Center
Hickory, NC

MEMBERSHIP CONTINUED

Susan Johns
Supervisor-Central Processing
Memorial Mission Hospital
Asheville, NC

Thom Hallum
Assistant Chief
Acquisition and Materials
Management
Dept. of Veteran's Affairs MC
Durham, NC

Leigh Ann Hanna
Supervisor
Supply Processing & Dist.
Gaston Memorial Hospital
Gastonia, NC

Deborah C. Harmon
Supply Technician
Central Sterile Processing
Frye Regional Medical Center
Hickory, NC

Jane M. Kramer
A & MMS Intern
Acquisition & Materials
Management
Dept. of Veteran's Affairs MC
Durham, NC

Pattie J. Lewis-Smith
Surgery / Central Service
J.A. Doshier Hospital
Southport, NC

Dottie Madritch, RN
Operating Room
Dorthea Dix Hospital
Raleigh, NC


Joseph Mester
Sales Representative
Johnson & Johnson Medical, Inc.
Glen Allen, VA

Hilda Stubbs
Technician-Central Supply
Cape Fear Valley Medical Center
Fayetteville, NC

MEMBERSHIP COMMITTEE REPORT

As of July 26, 1992, the membership is 297. A renewal letter was mailed to anyone who has failed to re-join. If your department has received a renewal for someone no longer with your facility, please contact me. This will help me maintain up-dated membership files. If you are having problems receiving our mailings and would like to use your home address, please contact me.

Linda Messick
(919) 716-4891

 **TREASURER'S REPORT**
July 1992

Account Balance: \$ 24,855.64
(05-01-92)

Deposits: \$ 3,589.00

Checks: \$ 14,075.56

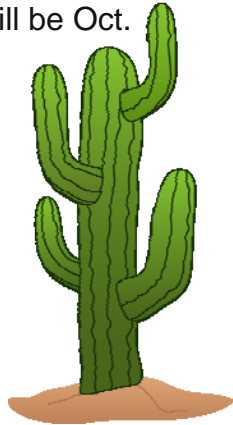
Account Balance: \$14,369.08
(07-01-92)

By: Jo Perkins

REGION 3 REPORT

The 25th Annual Conference and Exhibition of the American Society for Healthcare Central Service Personnel was held Aug. 9-12, '92, in Phoenix, Arizona. The attendees felt that the program was excellent. Audio-tapes of the educational meetings are available from Chicago if you are interested in ordering them.

Central Service Week will be Oct. 11-17, '92. ASHCSP is offering CS week kits that contain buttons, scrub hats, pens, balloons and posters. If you are interested, you can contact me or the Society office for order forms.



ASHCSP will again jointly sponsor the 3rd National Symposium and Trade Exhibition on Hospitals and the Environment. The symposium will be held February 22-25, '93 in Las Vegas, Nevada. This program is to assist you in gaining insight into effective compliance and management programs which will be both practical and cost-effective.

Next year's meeting will be in Louisville, Oct. 24-27, '93. As you have noticed, the dates have changed. This is in response to membership requests. Make your plans now to attend. Have a great fall, and I will see you all in Greensboro in November.

By: Virginia Coffey

AN INVENTORY CONTROL SYSTEM IN PRACTICE

In order to provide our members with an example of an inventory control system in actual use, we interviewed Gladys Hollis, Director of Materials Management, at AMI Central Carolina Hospital in Sanford, N.C. CCH is a 143-bed private hospital which went live with its inventory control system in October 1988.

Mrs. Hollis told us the system selected by AMI is known as the IMMS (Integrated Materials Management System). At the time of implementation, she said, it was obvious that escalating supply costs from manufacturers, and the impact of "cushions" or safety banks in various departments made it imperative to establish and maintain better control.

One of the first steps was to transfer 2000 inventory items from Sterile Processing, X-Ray and Pharmacy to the Materials Management Department. In 1992, the system had been successfully utilized to reduce inventory by \$11,000. Mrs. Hollis reported that there were 6 inventory turns per year during 1992, and projections for 1993 reflect an improvement to a rate of 9 inventory turns per year.

Currently, the Surgery Department is in the process of implementing the IMM System. O.R. maintains about 40% of the hospital's inventory because of "high dollar" items such as suture, orthopedic and laser supplies to support the surgery schedule of about 14 - 15 cases per day.

MORE INVENTORY???

Unfortunately, in the surgery area, supplies often have to be ordered in large quantities, and thus at high costs, even though actual usage may be very slow. To remedy this problem, lower par levels are set, and orders are "faxed" to distributors / suppliers to reduce turn-around time.

Roberta Rogerson, Director of O.R. at CCH, says she and her staff are excited about the new system because it eliminates the need for an annual physical inventory, and they have more time to devote to patient care. It also gives a greater assurance that supplies will be available when they are needed.

Gladys Hollis sums up our interview by emphasizing, "The key to success is a team effort where Materials Management and O.R. work closely to monitor inventory and control cost. The perfect scenario is: When the supply is being used, the replacement is on the receiving dock."

By: Linda Rudeseal



Please Join Us

FUTURE PROGRAMS & DATES!

November 13, '92 --- The November meeting was originally set for November 6, '92, however, it has changed to Friday, November 13, '92 in order for us to obtain the services of Martha Young from 3-M. Her topic will be "Monitoring the Sterile Process" in the morning session, and "Minimizing Employee Exposure to Infectious Diseases" in the afternoon. Many of you have heard Martha Young speak before (either for our Association or the American Hospital Association.) Martha is a very dynamic speaker. We will all enjoy and benefit from her programs.

January 15, '93 --- Sandra Samz, RN will be speaking to us on "Continuous Quality Improvement" (CQI). Sandy is the Director of Quality Resource Services at St. Joseph's in Asheville. Her topic "CQI" will certainly provide us with information we can all use in one of the "hot" topics with JCAHO.

1993 Dates:

January 15, '93 Greensboro, NC
(Note: Moved from Jan. 22.)
May 5, 6, 7, '93: Raleigh, NC
July 16, '93: Greensboro, NC

* We will be holding the one day seminars in usual location.
(Ramada Inn Airport, Albert Pick Road, Greensboro.)

**The location (hotel) of our 1993 annual seminar in Raleigh has not been determined at this time.

We will be deciding on the facility just as soon as we get the responses back from the hotels. This information will be communicated to our membership as soon as it is known.

**STEAMLINE
EDITORIAL BOARD**

**Volume 3 --- Issue 3
September 1992**

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