

I HEARD IT THROUGH THE

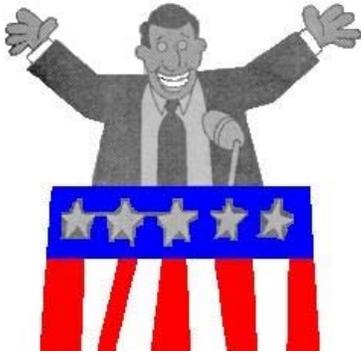
STEAMLINE

NORTH CAROLINA ASSOCIATION FOR HOSPITAL CENTRAL SERVICE PROFESSIONALS



**GO FOR THE GOAL!
THE OLYMPICS OF STERILIZATION
MAY 1-3, 1996
CHARLOTTE, N.C.**

PRESIDENT'S MESSAGE



Now that the holiday season is behind us, we are really tired of winter, and the kids are back in school from all those snow days, it is time to start thinking about spring. Well, I am no exception. I have recently found myself daydreaming, or at least wishfully thinking about spring and summer activities. The least of which is mowing and watering the lawn.

The spring event that easily comes to mind is our upcoming annual meeting. This year we will be in Charlotte at the Woodlawn Holiday Inn from May 1 - 3. As you will see in the brochure, we have an exceptional meeting coming up. Many of you have heard of Marimargaret Reichert when attending national meetings. She is always informative, sometimes controversial, and always fun. Along with Marimargaret, we have George Bastedo from Joslyn Sterilizers. George has made presentations to our group before and is anxious to get back to North Carolina. For our closing this year, we will have one of our most requested speakers, Joe Dick. His wit and common sense has caused many of us to leave the meeting recharged and ready to go. As always, we will kick off the event with our annual golf tournament. Get those clubs out, clean them up, and reserve your space as soon

as possible. As you can see, everyone on the Board of Directors has been extremely busy this spring already!

A major portion of this meeting is the installation of your newly elected officers and Board of Directors. This year, I am very pleased to inform you that Mary Jo Perkins has been re-elected to the position of Treasurer. On the Board of Directors, we are welcoming back Carole Canniford (Western Wake Medical Center), Audrey Kelly (Rex Healthcare), and Louise Rahilly (Cape Fear Valley Medical Center). As new members to the board, we have Carl Winge (Frye Regional Medical Center) and Bernie Digman (Memorial Mission Hospital). I am sure you join me in congratulating everyone and extending your utmost support as they begin or continue their duties.

In closing, I just want to say that I look forward to seeing each of you in Charlotte for a GREAT meeting. See you there!

Sincerely,
Frank Sizemore
President



LEARNING TO LIVE WELL

Chronic complainers turn up in every organization. Today, with people working harder and longer than they used to, complaints may be more

LEARNING TO LIVE WELL cont.

commonplace. Some experts say some complainers can provide a safety valve in the workplace. They aren't necessarily "crummy" people that need to wreak havoc. Even irritating complainers may raise unpleasant issues that others don't want to deal with. But chronic complaining can backfire. It can lower job satisfaction and productivity, alienate colleagues and even derail careers.

"Complainers tend not to be trusted," says Irene Vogel, a psychologist in Rockville, Md., who specializes in workplace communication. Unless complaints are followed by constructive action - which habitual complainers rarely take - people lose confidence in them, she says. They cast themselves as victims, which affects how they feel and how they are viewed. "It's self sabotage," says Rudin Frank, an organization consultant. "Chronic complainers aren't going to get the kinds of assignments they want. They aren't seen as leaders."

Just because conditions may be ripe for negativity doesn't mean you have to succumb. No one makes you positive or negative. "Each individual makes himself a complainer or opportunity seeker," says Michael Mercer, an industrial psychologist.

It pays to look on the bright side. High achievers tend to be positive people who focus on opportunity instead of problems. "When managers decide whether to promote people, one thing they look at is technical skill. But they also consider how easy and enjoyable it is to work with you," Mercer says. "Chronic complainers may get shut out

even if they're very competent." While grouzers may rally a few disciples, they simultaneously repel other people.

Like the flu, there's a contagion to the anxiety and depression underlying complaints. Chronic complainers can infect their environment.

"One way to protect yourself from negative feelings is to distance yourself," says Terrence Koller, a Chicago psychologist. Yet there are ways to break the bellyacher, experts say:

* Request a solution from the grouser: "What are your suggestions for how to handle that?"

* Pretend you didn't hear the complaint: if you respond, you reinforce the behavior. After a period of time, complainers will learn that around you, they won't get a response.

By Linda Braswell
Employee Assistance Coordinator
Cape Fear Valley Medical Center

SPOTLIGHT INTERVIEW



Margie Morgan of Moore Regional Hospital in Pinehurst finds herself in the spotlight! Margie has been a member of the hospital team since September, 1978 and began her work in the central service department in 1981. She attended her first NCAHCSP meeting in 1982.

SPOTLIGHT INTERVIEW cont.

Margie does not hesitate to express appreciation of the opportunities made available to her during her career by her immediate supervisor Bobbie Carder, Director of Material Management. Margie spent two weeks in Chicago, in 1987, participating in a central service training course. This course allowed her to obtain Certified Registered Central Service Technician status through IAHCSP. The following year, she assumed responsibility for the entire central service department when she was promoted to Manager of Sterile Processing and Distribution. Her responsibilities now are focused in the Sterile Processing Department.

Margie's latest accomplishment within her departments is the "Service Champions". "Service Champions" were created to more efficiently meet the needs of the operating room staff. The SPD technician is assigned to work closely with the RN and OR tech of each surgery service. When changes in instruments or supplies are needed, the RN and OR tech of the surgery service confers with the SPD technician or "Service Champion" assigned to that surgery service or team. The "Service Champion", as a member of both the surgery service and the SPD team, coordinates activities necessary to complete these changes.

Family time is most important to Margie. As a mother of three, Margie is the proud grandmother of one and is eagerly awaiting the arrival of the second grandchild. Margie speaks fondly of the time spent camping with her husband. Their favorite campsite is at Twin Harbor because family members live nearby.

Camping here allows for many hours of special time with family.

Margie is a very active member of Robbins Bible Methodist Church, where she teaches a youth Sunday school class. The class members are actively involved in the community, visiting shut-ins and residents of local nursing homes.

We enjoy the friendship that Margie shares at the NCAHCSP meetings. We appreciate her contributions to the central service profession!

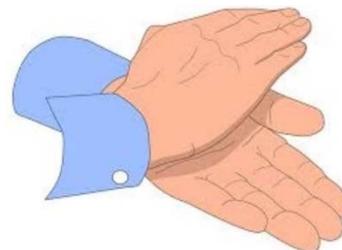
by Linda Cooke



MEMBERSHIP REPORT

1996 has great beginnings with 157 memberships received. Please remember that our membership runs from January to December. You must renew your membership yearly to remain on the mailing roster. Many thanks to those of you who renewed your memberships early!!

Linda Messick, CSPDT
Membership Chairperson



WELCOME NEW MEMBERS!

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Eden, NC

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Raleigh, NC

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Lumberton, NC

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Hickory, NC

Karen Mabe
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High Point, NC

Charlene Martin
Instrument Technician, Outpatient Surgery
N.C. Baptist Hospitals, Inc.
Winston-Salem, NC

Melissa Nichols
Technician II, CS
High Point Regional Hospital
High Point, NC

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High Point, NC

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Forsyth Memorial Hospital
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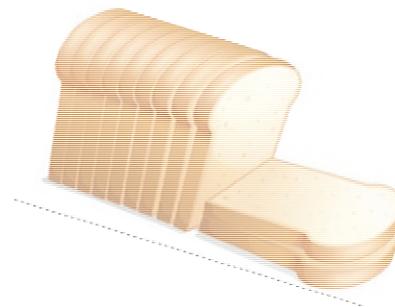
Glenn Warren
Systems Specialist
Advanced Sterilization Products
Raleigh, NC

HEALTHWATCH



The pyramid of healthy eating
The food pyramid arrived in 1992 when the U.S. Department of Agriculture came up with a shape that would indicate visually the amounts of different foods Americans should eat. The basic recommendations didn't change from the days of the four food groups.

At the base are grains - bread, cereal rice and pasta - six to 11 servings a day. At the next level, vegetables, three to five servings daily; and fruit, two to four servings. At the third level, calcium-rich foods - milk, yogurt, and cheese - two to three servings daily; proteins - meat, poultry, fish, eggs, beans, and nuts - two to three servings daily. At the top of the pyramid are fats, oils, and sweets, which should be eaten sparingly.



HEALTHWATCH cont.

Here are two recipes that the USDA would certainly approve of:

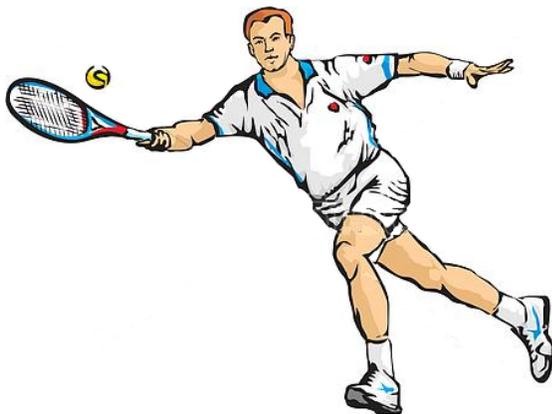
Audrey Kelly's Lo Cal, Sugarfree Banana Pudding

Line a pyrex dish with graham crackers.
Add 3 - 4 sliced bananas.

Beat on low speed with mixer or whisk:
1 lg. pkg. sugar-free Jello Vanilla Instant Pudding
2 C. skim milk
Pour immediately over bananas.
Top with a medium container of Lite Cool Whip.

Lo Cal Sugar-free Chocolate Moose

1 lg. pkg. sugar-free Jello Chocolate Instant Pudding
2 c. skim milk
1 c. Lite Cool Whip
Beat together Jello and milk at low speed.
Fold in Cool Whip.
Ready to serve immediately!



Here's another healthy recipe that's guaranteed to bring springtime just a little bit closer!

Peach Cobbler

Vegetable cooking spray
1/4 cup reduced-calorie margarine, melted
2 (15-ounce) cans sliced peaches in heavy syrup, drained, liquid reserved
1 cup flour
1 1/4 tsp baking powder
3/4 cup sugar
2 tsp vanilla
1/3 cup skim milk

Preheat oven to 375 degrees.
Coat an 8-inch baking dish with vegetable cooking spray. Pour melted margarine in bottom of dish and set aside.
Drain peaches, reserving 1/2 cup of liquid.
Combine flour, baking powder, and sugar; mix *well*. Add 1/3 cup liquid from drained peaches, vanilla, milk.
Pour batter over margarine in baking dish. Spoon peaches over batter.
Bake for 35 to 40 minutes or until crust is golden brown.
Makes 5 generous servings.

Per serving: 288 calories, 4 grams fat (12 percent calories from fat), 2 grams protein, 0 milligrams cholesterol, 68 grams carbohydrate, 151 milligrams sodium.

TREASURY REPORT	
BALANCE (NOV 1995)	\$13,363.84
DEPOSITS	2,268.00
EXPENSES	3,016.92
MONEY MARKET	5,072.89
BALANCE (JAN 1996)	\$17,687.81

REGION 3 REPORT



The first board meeting for the American Society of Healthcare Central Service Professionals took place in Washington, D.C., during January. As one of the new board members, I was provided with an orientation to the board, followed by a board meeting to discuss committee activity, future plans for the society, and our position as a provider of education. We followed that on Sunday with a strategic planning session to re-examine our planning, both in membership and finance. This session will continue in

April at the next board meeting. The reason we were in Washington, D.C. was to take part in the AHA symposium on healthcare, a truly remarkable event.

With the strategic plan, we have restructured all the committees to include more members at large. We are still soliciting volunteers for several committees. If you are interested in volunteering, contact me at (910) 716-6270. I will be happy to forward information about the various committees.

Sincerely,
Frank Sizemore
Region3 BOD



HIV saliva test may help hard-to reach populations.

The first oral test for HIV approved by the FDA, is expected on the market this month. The FDA approved the device - called OraSure HIV-I. The Oral Specimen collection device was approved after three and one half years of reviews and clinical trials involving 6000 patients. The FDA sanctioning; however, prohibits the use of OraSure as a home testing device. The FDA guidelines for OraSure, the only nonblood test for HIV approved by the agency, requires that it be administered by prescription only. But the manufacturer said that the product is a breakthrough in HIV testing and is a step closer to a long-sought home test for HIV.

Aids Alert, February, 1996

NEWSBITS cont.

Efficacy of gentian violet in the eradication of methicillin-resistant Staphylococcus Aureus from skin lesions.

The efficacy of gentian violet in eradicating methicillin-resistant Staphylococcus Aureus (MR.SA) in decubitus ulcers was investigated. Decubitus ulcers were scrubbed with GV aqueous solution 0.1 % and ointment containing GV - 1 % was applied daily. MR.SA was not detected in these lesions for 3 - 34 days (average 10.5 plus or minus 2.5 days) after application of GV ointment. Skin irritation and other systemic side effects caused by GV was not observed. Data suggests that GV is a useful treatment of decubitus infected by MRSA.

Journal of Hospital Infection (1995) 31, 225 - 228

New unit on glutaraldehyde exposure proposed.

In May 1995, the American Conference of Government Industrial Hygienists (ACGIH) proposed to lower its recommended ceiling value for glutaraldehyde from 0.2 ppm to 0.05 ppm. The 0.05 ppm limit will become the ACGIH's official recommendation in May 1996.

Background information and supporting data for the ACGIH proposal can be obtained by writing William D. Wagner, Director of Technical Affairs, ACGIH, 1330 Kemper Meadow Drive, Suite 600, Cincinnati, Ohio 45240

HOSPITAL PURCHASING NEWS, Jan. 15, 1996, Vol. 20, No. 1

Memorial Mission Hospital and St. Joseph's Hospital in Asheville have been granted a Certificate of Public

Advantage, which will allow the two hospitals to pursue a partnership. They are the first hospitals in the state to be issued such a certificate under the amended Hospital Cooperation Act. *NCHA Newslines*, December 15, 1995

SUPERVISOR'S CORNER



Listening Is a Skill

Good listeners aren't born - they're made. And you can learn to be a good listener with a little practice and attention to the following tips:

1. **Listen with purpose.** Ask yourself what it is you want to find out and what it is you expect or want to hear. What might the speaker say that will affect your preconceived ideas or plans?
2. **Listen for meaning.** There are several levels on which people communicate to us. There are the words themselves, the implications behind the words - nuances, tone of voice, and there are non-verbal cues - posture, facial expression; gestures, etc. It's important to listen with your eyes as well as your ears, to listen for what is *not* said, but felt as well as for what *is* said.
3. Whenever possible, **eliminate distractions.** You want to have the opportunity to give undivided attention to the speaker, and you want the speaker to have the opportunity to express feelings without distractions.

SUPERVISOR'S CORNER cont.

4. **Don't jump in.** Try not to reply too quickly. Instead, briefly restate what you heard to make sure you understood it. then formulate your reply and give it. This takes a little extra time, but with practice it will become quicker.

5. **Be an active listener.** Involve yourself in the listening process. Be aware of your own listening barriers and guard against them. Take time to be aware of your thoughts and reactions.

UPCOMING PROGRAM



The annual meeting will be held on May 1 - 3, 1996, in Charlotte at the Woodlawn Holiday Inn. The theme of this year's meeting will be *GO FOR THE GOAL, THE OLYMPICS OF STERILIZATION*. Our speakers will be Marimargaret Reichert, George Bastedo, and the ever-popular Joe Dick. Please make plans now to attend this important event!

Mark your calendars now for October 4 - 5, 1996. No, we didn't make a mistake with the date. We are going to try a Saturday meeting for October. You won't want to miss this historic occasion!

THANK YOU!

NCAHCSP Board and Membership,

Just wanted to let you know how much I appreciate your sponsorship at the ASHCSP Conference in Charlotte. It was an honor to be asked to present and quite a morale boost to see the support from my state association.

All the hard work from the NCAHCSP board and membership helped to make it a quality conference!

Thanks again!
Susan Sneeringer

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**NCAHCSP
MISSION
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**NCAHCSP will
establish itself
statewide as the
leading
educational
organization
through
innovative
programs that
enhance the
development of
Central Service
professionals.**



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**VOLUME 7----- ISSUE 1
MARCH 1996**

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**When We Care Enough
to Give the Very Best**

Helpfulness is a feeling we give to others. Sometimes people feel helped because we've provided exactly what they want – our service, an answer to a question, advice, directions. Sometimes people feel helped because we've listened to a troubled, hurt, frustrated or anxious person with patience and concern. And sometimes people feel helped - even if we can't be of any direct help at all - because we've referred them to someone who can help.

There is beauty in homely things that many people have never seen:
Sunlight through a jar of beach-plum jelly;
A rainbow in soapsuds in dishwater;
An egg yolk in a blue bowl;
White ruffled curtains sifting moonlight;
The color of cranberry glass;
A little cottage with blue shutters;
Crimson roses in an old stone crock;
The smell of newly baked bread;
Candlelight on old brass;
The soft brown of a cocker's eyes.

**PETER MARSHALL
U.S. clergyman**