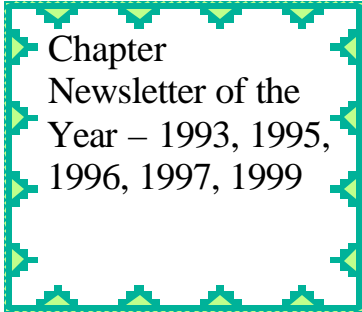


I HEARD IT THROUGH THE STEAMLINE

Volume 10, Issue 4

October 1999



EDITORIAL BOARD

Janet Aultman, Editor
N.C. Baptist Hospital

Patricia Allred
Mercy Hospital, Inc.

Ruby Blackwell
Forsyth Medical Center

Virginia Coffey
Rowan Regional Medical
Center

Paul Hess
New Hanover Regional Medical
Center

Carl Winge
Frye Regional Medical Center

Inside this issue:

<i>PPE</i>	2
<i>Treasurer's Report</i>	4
<i>To-do-List</i>	7
<i>Health Watch</i>	5
<i>Region 3 Report</i>	7
<i>Upcoming Programs</i>	6
<i>Supervisors Corner</i>	6

PRESIDENT'S MESSAGE



Well it certainly has been a busy summer. Our thoughts and prayers continue to go out to those still being impacted by Hurricane Floyd's flooding. At a post hurricane meeting a suggestion was made that with the experience that we have had here in southeastern North Carolina, we write a book on dealing with a hurricane's impact on a healthcare facility. The response from the back of the room is that we would be the only ones that needed to read it.

Please join us at the November educational meeting in Winston-Salem for presentations on Hurricane Disaster Preparedness, dealing with drug resistant organisms such as MSRA and VRE as well as the changing role and future of CS from the perspective of a hospital administrator.

In the next few weeks you will need to nominate candidates for President-elect and four members to the Board. Please take the time to nominate for these important positions and take the opportunity to vote when you receive your ballot. This Association has a proud history and it is due to the efforts of the entire Membership and the Board of Directors that you have elected.

I look forward to seeing everyone again in Winston-Salem.

Sincerely,
Paul Hess



In-service Education Personal Protective Equipment

By Lois Click

All through history, personal protective equipment was designed to protect patients from bacteria in the environment and to protect healthcare providers. Technology has improved the quality of PPE and also changed the way we use PPE.

Shoe Covers

Shoe covers were originally introduced to prevent surgical site infection by preventing the tracking of contaminants into operating rooms. New knee-high extensions have also become necessary as endoscopic procedures expose the healthcare worker to large volumes of irrigation solution. However, usage of shoe covers varies from facility to facility. It has been demonstrated that shoe covers do not decrease surgical infections or decrease bacterial count on the operating room floor.

Masks & Goggles

Another category of PPE is the surgical mask. According to the Occupational Safety and Health Administration (OSHA), healthcare workers are to wear masks to prevent contaminated exposures (to prevent blood and other potentially infectious body fluids from penetrating a mask under the normal conditions of use). Normal conditions include splashes, sprays, or splatters. Masks that add a plastic splash shield provide protection against mucous membrane exposure to the eyes. Studies report a high rate of blood splashes to masks and goggles during procedures such as cesarean sections. HIV is known to be transmitted via eye splashes, yet compliance with protective eyewear is poor. If healthcare workers

are to be protected, compliance must be insured.



Gowns

According to OSHA, attire is only appropriate if it does not permit I blood or other potentially infectious body fluids to reach the employee's clothes, skin, or mucous membranes. Selection of the proper type of gown (either fluid-resistant or fluid-proof) is the key to protection. Advances in the fabrics used and manufacturing processes have

improved the quality and safety of surgeon's gowns. However, there remains a weak point in the barrier system of gown and glove protection, at the gown-glove interface of the stockinet cuff.

Gloves

Latex sensitivity in healthcare workers and patients has produced a new market of non-latex glove alternatives. Latex gloves are still an important and effective barrier to blood and body fluid exposure, but are easily violated by needles and other sharp instruments. Evidence has

indicated that double gloving reduces the incidence of hand contamination to surgeons and their first assistants. As with all kinds of PPE, choosing the correct protective device appropriate to the task to be performed is paramount.

“...there remains a discrepancy
between knowledge and
practice when it comes to
PPE...”

Conclusion

Although much has been discussed and published regarding the risks of exposure, there remains a discrepancy between knowledge and practice when it comes to PPE. With time, knowledge

in the use of PPE has changed for healthcare workers. Technology has provided devices that offer the utmost in protection to the wearer. However, most importantly, it is up to each of us to change old habits, to analyze the tasks we perform each day and to use the appropriate PPE available to reduce the risk of contaminated exposures.

Post Test

1. Shoe covers decrease the bacteria count on the operating room floor. **T F**
2. Masks protect the mouth and nose from blood and body fluid exposures under normal use. **T F**
3. HIV is known to be transmitted via eye splash. **T F**
4. Masks are not to be used during cesarean section procedures. **T F**
5. Latex sensitive healthcare workers have no alternatives except to change careers. **T F**
6. The weak point in a surgeon's gown is around the collar area. **T F**
7. Single gloving is just as effective as double gloving in the surgical setting. **T F**
8. Latex gloves are still important and effective barriers to blood and body fluid exposures. **T F**
9. With all the discussion regarding the risk of exposure, there is still a discrepancy between knowledge and practice. **T F**
10. PPE stands for proper personal equipment. **T F**

(Answer Key is On Page 4)

To receive 1.0 Contact Hours toward re-certification from NICHSPDP, complete the in-service "quiz" after reading the article. Send the completed "quiz" to:

This in-service has expired and can no longer be submitted for credit.

who will issue a certificate. Be sure and include your name and a return address to receive a certificate for contact hours.

In the News

Be well equipped. The Association for the Advancement of Medical Instrumentation has new guidelines to help ensure equipment safety, maximize equipment life and reduce cost while staying in compliance with licensing agencies such as the JCAHO. The document covers program design and implementation, staffing, financial resources, equipment selection and removal from service. The cost is \$45 for AAMI members, \$90 for nonmembers. To order, call AAMI at 800.332.2264, ext. 217, and ask for "Recommended practice for a medical equipment management program," order code EQ56-PR.

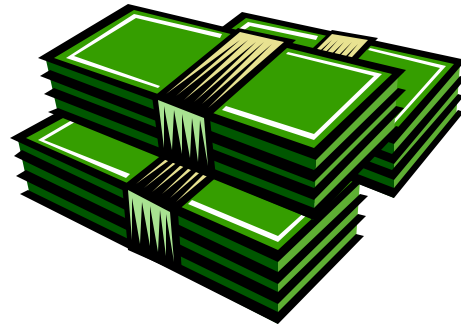
ECRI online. A select number of Medical Device Safety Reports from ECRI, Plymouth Meeting, Pa., are posted at www.mdsr.ecri.org. MDSR is a repository of device hazard information that includes steps that can be taken to prevent or reduce medical device risks. The site also includes user experience network reports; guidance articles, listed alphabetically by title; and frequently asked questions and answers. Nearly 200 documents and case studies are posted. The site is sponsored by the Chubb Group insurance company. *MATERIALS Management in Health Care, September 1999, Vol. 8 No. 9*

Answer Key for the Post Test
“Personal Protective
Equipment”

- 1. F
- 2. T
- 3. T
- 4. F
- 5. F
- 6. F
- 7. F
- 8. T
- 9. T
- 10. F



**TREASURER’S R
E
P
O
R
T**



BALANCE (MAY 1999)	\$14,926.72
DEPOSITS	13,301.00
EXPENSES	14,575.07
MONEY MARKET	11,292.38
BALANCE (AUGUST 1999)	\$24,945.03

The Carpenter

An elderly carpenter was ready to retire. He told his employer-contractor of his plans to leave the house-building business and live a more leisurely life with his wife enjoying his extended family. He would miss the paycheck, but he needed to retire. They would get by.

The contractor was sorry to see his good worker go and asked if he could build just one more house as a personal favor. The carpenter said yes, but in time it was easy to see that his heart was not in his work. He resorted to shoddy workmanship and used inferior materials. It was an unfortunate end to his career.

When the carpenter finished his work and the builder came to inspect the house, the contractor handed the front-door key to the carpenter. "This is your house," he said, "my gift to you." What a shock! What a shame! If he had only known he was building his own house, he would have done it all so differently. Now he had to live in the home he had build none too well.

So it is with us. We build our lives in a distracted way, reacting rather than acting, willing to put up with less than the best. At important points we do not give the job our best effort. Then with a shock we look at the situation we have created and find that we are now living in the house we have built. If we had realized that we would have done it differently.

Think of yourself as the carpenter. Think about your house. Each day you hammer a nail, place a board, or erect a wall. Build wisely. It is the only life you will ever build. Even if you live it for only one day more, that day deserves to be lived graciously and with dignity.

The plaque on the wall says, "Life is a do-it-yourself project." Who could say it more clearly? Your life today is the result of your attitudes and choices of the past. Your life tomorrow will be the result of your attitudes and the choices you make today.

Pass this along to someone you like. I did.

Health Watch

BEST BETS FOR BREAKFAST...

Eating breakfast out can be a pleasant way to start your day. The following suggestions can help you order a healthful meal.

Start with fruit. Fresh fruit or juice will provide plenty of vitamins B, C and A. Fresh fruit also contains **fiber**.

Choose low-fat breads, such as bagels, English muffins or whole-wheat toast. These items have complex carbohydrates and very little fat.

Top bagels and toast with jelly instead of cream cheese. Two tablespoons of jelly have 50 calories and no fat. The same amount of cream cheese or butter has 100 calories and 10 gm. of fat.

Order pancakes, waffles or French toast with fresh fruit or maple syrup.

Choose a healthful cold cereal Those that contain bran are highest in fiber.

Eat hot oatmeal Top it with skim milk and fresh fruit. Oatmeal is

low in fat and high in fiber.

Request that an omelet be made with egg substitute or egg whites. You'll reduce the fat, calories, and cholesterol.



Mushroom Quesadillas

Vegetable oil spray

8 oz sliced fresh mushrooms

½ medium onion, thinly sliced and separated into rings

1 tsp. bottled minced garlic

3 Tbsp. chopped fresh cilantro

3 8-inch whole-wheat flour tortillas

6 Tbsp. shredded low-fat Monterey Jack cheese with jalapeño peppers, or low-fat cheddar cheese
Salsa

Spray a microwave-safe casserole dish with vegetable oil. Add mushrooms, onion, and garlic. Microwave (uncovered) on high power for 5 to 7 minutes or until onion is tender - stirring twice. Stir in cilantro. Put one-third of the mushroom mixture on one half of a tortilla. Sprinkle with 2 Tbsp. of cheese. Fold the other half of the tortilla over the cheese. Repeat with remaining ingredients. Microwave (uncovered) on high power for 1 to 2

minutes - or until cheese melts - rotating plate once. Serve warm, with salsa.

SERVES 3. Per serving: 134 calories and 4 grams of fat.

Source: American Heart Association Quick & Easy Cookbook





UPCOMING PROGRAMS

Please join us on November 5, 1999 at the Hawthorne Inn in Winston-Salem for an informative and timely program. Topics include: "Hurricane Disaster Preparedness", "MRSA and VRE: Don't let the bugs get you down", and "The Past, Present and Future of Central Services".

Our first meeting of the year 2000 will be on February 4 at the Hawthorne Inn in Winston-Salem. Don't forget to mark your calendars!

HOPE TO SEE YOU THERE!

Attention Certified Technicians:

You will need 100 contact hours to recertify five years from your certification date. NICHSPDP awards 10 hours per year up to 5 years for working in central service. Therefore, you will be responsible for earning 50 points from continuing education.

Attending our quarterly educational meetings can help you to make that goal of 50 points! Remember, you are responsible for keeping up with your certificates! Keep them together in a safe place until time to recertify!

SUPERVISOR'S CORNER

Before you blame your employees for a job badly done, make sure it's not the system that's creating the poor performance.

To demonstrate how a poorly managed system - not workers - leads to defects and poor quality, management guru W. Edwards Deming conducted in his seminars that he calls 'Red Bead Experiment.'

Ten seminar attendees are picked and assigned jobs by Deming. Six are what he called 'willing workers.' Two are inspectors. One is the chief inspector, and one is the recorder.

Deming explains that the company has received orders to make white beads. Unfortunately, the raw materials used in production contain a certain number of defects, or 'red beads.'

Both the white and red beads are in a plastic container. The six willing workers are given a paddle with 50 indentations in it, and told to dip it into the container, shake it, and pull it out with each indentation filled with a bead. Then they are instructed to take the paddle to the first inspector, who counts the red beads, or 'defects.' The second inspector does the same, and the chief inspector checks their tally, which the recorder then records.

A worker drawing out a paddle with 15 red beads gets a merit raise.

In the next round, the worker who had six red beads now has eight, and the worker with 15 now has 10.

Deming, playing the role of the misguided manager, thinks he understands what's happening. The worker who got the merit raise is getting sloppy - the raise went to his head. Meanwhile, the worker on probation has been frightened into performing better.

And so it continues - a cycle of reward and punishment in which management fails to understand that defects are built into the system, and that workers have very little to do with it.

- (Chicago Tribune)

Region 3 Report

Time is moving quickly- It's only a few weeks from the ASHCSP annual meeting in Orlando scheduled to take place October 24 through October 26. Plenty of spaces are left, so take the opportunity to register as soon as possible. This year we're doing something a little different. The Management Pre-Conference has been changed to a conference on the reuse of disposables. This is of particular interest because the Food and Drug Administration (FDA) will be unveiling its position on reuse. Everyone is waiting with



baited breath to see what will happen with this announcement. The Pre-Conference registration is inexpensive, only \$89 for ASHCSP members or cosponsoring organizations. Check the ASHCSP web site at www.ashcsp.org for more details.

With the year ending quickly, thoughts are turning to the upcoming year. One of my duties as President will be to develop committees for the up-

coming year. If you have an interest in a particular committee feel free to contact me. Committee work is done by conference calls, with little time away from work and a great way to get involved on a national level.

Frank Sizemore
President-elect ASHCSP

"One's mind, once stretched by a new idea, never regains its original dimensions."
Oliver Wendell Holmes, Jr.

Membership Report

Sorry, membership information is not available at this time. We will provide an update in the next newsletter

Member To-Do List

- Renew your membership for 1999. Need an application - download off our web page, www.ncahcsp.org.
- Send any changes in your address to Linda Messick (fax 336-716-5269 or e-mail lmessick@wfubmc.edu) - we don't want you to miss anything.
- Change in job, promotions, awards? Please share your good fortune. Fax information to 336-716-5269 or e-mail jaultman@wfubmc.edu
- **Nominate someone for either President-elect or Board of Directors!**



NCAHCSP MISSION STATEMENT

NCAHCSP WILL ESTABLISH ITSELF STATEWIDE AS THE LEADING EDUCATIONAL ORGANIZATION THROUGH INNOVATIVE PROGRAMS THAT ENHANCE THE DEVELOPMENT OF CENTRAL SERVICE PROFESSIONALS

“Whatever you focus your attention on, you give strength to. So be careful what you think about.”

- Unknown

Board of Directors 1999- 2000

PRESIDENT

Paul Hess, RN, BSN, CRCST
New Hanover Regional Medical Center
2131 S. 17th Street
Wilmington, NC 28402-9000
910.343.2142
phwilmnc@wilmington.net

PRESIDENT-ELECT

Carl Winge
Frye Regional Medical Center
420 N. Center Street
Hickory, NC 28601
828.324.3064
carlos@twave.net

PAST PRESIDENT

Ruby Blackwell, RN
Forsyth Medical Center
3333 Silas Creek Parkway
Winston-Salem, NC 27103
336.718.5074
rpblackw@emihealth.org

TREASURER

Mary Jo Perkins
4325 Riverside Drive
Clemmons, NC 27012
336.766.3265

SECRETARY

Linda Messick
N.C. Baptist Hospital
Medical Center Boulevard
Winston-Salem, NC 27157
336.716.4891
lmessick@wfubmc.edu

Patricia Allred, RN, CNOR
Mercy Hospital, Inc.
2001 Vail Avenue
Charlotte, N.C. 28207
704.379.5991

Janet Aultman
N.C. Baptist Hospital
Medical Center Boulevard
Winston-Salem, NC 27157
336.716.6271
jaultman@wfubmc.edu

Susan Avery
Halifax Regional Medical Center
250 Smith Church Road
Roanoke Rapids, NC 27870
252.535.8255
savery@halifaxrhc.org

Richard Blackburn
Gaston Memorial Hospital
2525 Court Drive
Gastonia, NC 28054
704.834.2233

Pamela Caudell, RN, CNOR
Durham Regional Hospital
3643 N. Roxboro Street
Durham, NC 27704
919.470.4156

Linda Cook
High point Regional Hospital
601 N. Elm Street
High Point, NC 27262
336.884.6047
lcook@hprhs.com

Diane Fink, RN
Northeast Medical Center
920 Church Street North
Concord, NC 28025
704.783.1441

Louise Rahilly
Cape Fear Valley Medical Center
Box 2000
Fayetteville, NC 28301
910.609.6199

Frank Sizemore
N.C. Baptist Hospital
Medical Center Boulevard
Winston-Salem, NC 27157
336.716.6270
fsizemor@wfubmc.edu

