



Ohio's MedCentral Health System takes 2003 CS Department of the Year honor

by Curt Werner

Small hospital comes up big

For the second consecutive year, *Healthcare Purchasing News* has found the winner of the CS/SPD Department of the Year award in the Buckeye State of Ohio. This time, a hard-working team from MedCentral Health System, a small, relatively unheralded integrated delivery network based in the north central Ohio town of Mansfield, was judged to be the top department in the country, as chosen by *HPN* judges. The win by MedCentral followed last year's big city winner, The Cleveland Clinic, which sipped champagne in 2002. Mansfield, by the way, is roughly midway between Toledo, Cleveland and Columbus.

While it is both unfair and untrue to credit the organization's exceptional performance to one person, the MedCentral team is nonetheless led by one man, David Naranca RN, BSN, CRCST, who heads the department's Sterile Reprocessing Department. In fact, it was Naranca, who spent some 18 years as an operating room nurse prior to joining MedCentral, who refused to accept his team's unwanted moniker of SPD or "Slow Process Downstairs," and went to lengths to change that unwanted smear. "We went on a mission to change that," he says, "and we did. We even moved up from the basement to a place right next to the OR, our biggest customer."

So with the approval of management, notably Jay Mitzel, the hospital's director of materials management, MedCentral changed their former SPD department to the current Sterile Reprocessing Department, chiefly a cosmetic change, but one that gave team members a psychological lift. Now, the work of this close-knit group of senior people and new recruits and the managers who lead them, have caught the eye of judges and were named last month the top department in the nation, a far cry from years past for this group. "Not too long ago we did a customer survey and our department scored only 65 percent," Naranca recalls. "Now, in our most recent customer survey the department scored a 95 percent."



▲ Melinda White, Judy Burge, Sharon Smart, Pam Rembert, Patsy Reynolds, Tina Kaufman, David Naranca and Lois Hess

► David Naranca points to the "Silver Hammer" award with Melinda White

◀ Sharon Smart holding the DeBakey pickup, is assembling an OR "Major set" while using her tray script

This was no small effort by the MedCentral team. The competition for the 2003 crown was the most intense in the three-year history of the award. Some 22 departments submitted entries and each offered a reason why they should win. MedCentral slipped by them all with a story that was simply too convincing to pass up. Close runners-up for the 2003 award were outstanding teams from Swedish Medical Center in Seattle, Baylor Medical Center in Dallas, Lancaster General Hospital, Lancaster, PA, Loyola University Medical Center in Chicago, and Hamot Medical Center in Erie, PA, all of which were bunched up

near the top of the voting. The categories ranked included teamwork, innovation and creativity, savings to the hospital, originality, long-lasting results, contributions to quality patient care, productivity, efficiency and customer service.

Created in January 1996, MedCentral Health System has about 2,600 employees, making it the largest employer in Mansfield and the second largest in the six-county area it serves. Its active medical staff numbers over 200, representing a complete range of primary care and specialty practices. MedCentral is the largest medical provider between Cleveland and Columbus, serving primarily Richland, Crawford, Ashland, Morrow, Huron and Knox counties. The non-profit health system

is comprised of three general, acute care hospitals: Mansfield, Crestline and Shelby, with a combined total of 402 beds, plus 44 bassinets. The largest, Mansfield Hospital with 309 beds, offers a Level II Emergency Department and a Level II Perinatal Department. The system also includes complete cardiac care at MedCentral HeartCare, comprehensive neurological services, MedCentral Rapid Response, a walk-in medical center, MedCentral WorkAble industrial health and safety services, MedCentral Home Care & Hospice, MedCentral Freedom Hall, an inpatient sub-



stance abuse program, MedCentral Laboratories, with sites at all three hospitals, Rapid Response and a clinic, along with the MedCentral College of Nursing.

Teamwork, professional growth, and quality improvements

In his contest entry, Narance conjured up the image of a celebrated Ohioan, the late Ohio State Buckeyes coach Woody Hayes. The old coach penned a book about his OSU days called, *You Win With People*. Said Narance, "I feel that at MedCentral, we also are winning

with our people. My materials director and I are firm believers that quality workmanship can only be achieved, when you invest in your workforce, reward excellence, and foster teamwork."

Success at MedCentral began with education. After a comprehensive review of the educational and professional needs of the team, Narance gained support from administration for a series of 24 weekend classes taught by Richard Schule, CST, CRCST, CHMMC, FEL, manager of surgical processing for The Cleveland Clinic, covering the Purdue University Central Service Technical Training Manual. To help promote attendance, the materials management department provided the course materials and instructor at no charge to the material management staff participants. This class was well attended not only by non-certified staff, but by Jay Mitzel of materials management and my assistant materials director Doug Knoyer. Both men said they wanted to better understand the day-to-day challenges that face the reprocessing staff, demonstrate leadership and promote teamwork. Others attended from housekeeping, distribution, dietary, radiology and surgery departments, and have since formed a "pool" of future trained sterile reprocessing candidates. "This investment has yielded dividends and has led to the entire reprocessing team to be 100 percent certified within our field," says Narance. "No

other department at MedCentral that I am aware of has achieved this level of expertise in their respective area."

According to Narance, the knowledge gained throughout the CE series has led to several quality improvements such as:

- Standardization of biological testing over three campus locations.
- Standardization of tray reprocessing and assembly methods among staff, with the development of tray and procedure scripts.
- Cross training of sterile reprocessing staff across all three campus locations, which has fostered teamwork, and supported process standardization initiatives.
- Development of instrument set weight reduction plans that have reduced the incidence of "wet packs," eased staff fatigue and improved the injury report.
- Re-structuring workflow to cut tray turnaround time.
- The introduction of rigid closed container

systems to replace wrapped instruments, a change that Narance says has paid dividends by saving the system money and loss time due to re-sterilization necessitated by loss of package integrity.

- The introduction of service "scripts" for phone calls and customer service contacts at the door that have aided customer satisfaction and fostered a team approach in all transactions. The concept has been broadened to include the standardization of tray audit sheets. All tray inventory/audit sheets have a standard format that is presented to the customer and all customer change requests are documented and reported as a benchmark.
- The reduction of QA's from our surgery customers on missing or incomplete trays with the formation of a TQI team to monitor issues and create action plans to eliminate errors.
- The creation of a customer service bulletin board presentation at the service entrance door. The bulletin board serves to keep customers informed about quality and service issues.

After a review of the educational needs of the department, and gaining feedback from the staff, Narance and other managers began providing more opportunities for professional growth and staff training. This was accomplished by partnering with prime vendors such as Spectrum Surgical, Stowe, OH; STERIS, Mentor, OH; Kendall Healthcare, Mansfield, MA; Medline Industries, Mundelein, IL; and Kimberly-Clark, Roswell, GA, to offer quarterly topical continuing education on sterilization, team building and infection control programs. "This dovetails with our efforts to assist the entire team to remain certified, and to stay current with industry trends," said Narance.

At MedCentral, new staff member orientation has evolved from a traditional oral presentation to a detailed 40-page "field manual" that is documented and bound with organized sections dealing with all aspects of working within the department. This provides new staff members a structured 90-day program that recognizes achievement with three written tests and a thorough departmental check list. At the end of this 90-day orientation period, trainees are ready to begin their Purdue University central service course.

In addition, the challenge of ongoing staff communication over three campus locations has been solved with monthly departmental and specialty team meetings, staff meetings with written agendas and recorded meeting minutes, as well as a four-page monthly staff newsletter that details important tray changes and other important matters. Plus, daily communications are detailed in a staff communication book that each team member has responsibility to check and initial.



NEWS ON THE COVER

CS DEPT. from page 13

“Serving our customers”

Says Narance, “Our team continues to strive toward serving our customers by process and product standardization, working to increasing the quality of our products, reducing waste and monitoring workflow processes and expense. We continue to invest in our staff and this has been reflected in our recent customer satisfaction scores from the surgery and maternity staff with a score of 97.8 percent. Our efforts have reduced the expense of replacing lost instrumentation by 80 percent and are saving over \$10,000 per year.

“The benchmarking and tracking of flash sterilization/special service has given us the ability to focus on this issue and to reduce this process from a 1999 level of around 5 percent to 1.5 percent today. The overall team effort has brought quality to the products that we deliver to the customer. What is truly remarkable is the fact that the



▲ Melinda White and Lois Hess

benchmarked data has all been collected and processed manually by the efforts of the entire staff. It is my privilege to lead this team of dedicated central service professionals.”

Each campus location has a three-ring “manufacturer’s guide” to cleaning and the sterilization of medical instrumentation. The book is kept updated with new product information, techniques and recommendations to ensure standardized practice.

The MedCentral staff is encouraged to actively participate in the advancement of their profession with participation on the joint sterile reprocessing and surgery clinician team meeting. The meeting, which has representatives including specialty clinicians and managers from

the three campus operating rooms and sterile reprocessing departments, is chaired by Narance. The team meets every six weeks and addresses issues pertaining to the reprocessing and sterilization of surgical instrumentation, quality improvements and helps foster teamwork between sterile reprocessing

and surgery. Among its accomplishments, the team has achieved a reduction in total set weights of many orthopedic, neuro, GYN, cardiovascular and general surgery instrument set weights and has reduced the incidence of “wet packs,” reduced staff fatigue and/or injury, and has shortened the turnover time on set assembly; standardized instrument patterns to cut costs and to improve set quality; initiated tracking “special service” requests for instrument reprocessing, which documents the actual request and the time element that the customer needs the set delivered; initiated a highly documented preventive maintenance program on over 450 instrument sets to proactively sharpen and maintain the highest quality instruments; begun documenting and reporting missing and/or broken instrumentation, formerly and euphemistically known as “tray problems,” and as a result MedCentral has reduced its lost instrument cost by 80 percent (\$13,562 per year, to approximately \$2,600 for a savings of \$10,962 per year. While not completely eliminated, the incidence of so-called tray problems has since been slashed to less than 3 percent from an average high of 5 percent of the total number of reprocessed trays. HPN