



HCSC LAUNDRY BULLETIN

HCSC Introduces New Designer Patient Gowns

Patient Dignity & Comfort Are Main Focus

It was once written that hospitals are literally the site of birth and death, prayers answered and unanswered. They become part of the community's identity and consciousness.

We all know that hospitals basically become part of everyone's life in some way. Whether because of personal experience or care for a loved one, our community hospital and the care it provides eventually touches every one of us.

Today more than ever, patient perception and dignity play a key role in a healthcare institution's success or failure. Most hospitals offer extensive ancillary as well as outpatient care. Providers have concentrated much effort into specialized levels of care. In this very competitive marketplace, over the past ten years, many up-scaled facilities have been constructed for not only appeal but also convenience of the patient. Focus on

the entire patient care experience has become a major priority. One important aspect of patient care has always been the patient gown.

Whoever enjoyed wearing a patient gown? Modesty and dignity go hand-in-hand, but with most patient gowns, two hands were not enough to keep oneself from exposure of some kind.

Over the past ten years, HCSC was continuously making changes in gown specifications and fabric in an effort to keep up with the ever-changing patient populations and requirements. In the midst of our most-recent discussions that change was again needed, Tim Crimmins, Executive Vice President, HCSC, advised his staff that if HCSC were going to make changes again, the goal should be to develop the best gown in the industry. If we had to change the entire gown design, then we were committed to doing just that.

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STAFF OF THE WELSPAN HEALTH SYSTEM
MODEL THE NEWLY DESIGNED
HCSC PATIENT GOWN.

The Making of Appropriate Use

When considering the environment of linen utilization in any healthcare facility, one can define appropriate use as the use of a linen item for its intended purpose. We often hear about and see the inappropriate use of linen items as HCSC tours your facility looking for cost-saving opportunities. At an acute-care facility in northern New Jersey, a representative noticed the repeated use of knit contour sheets to cover garbage carts as they were moved throughout the facility.

After viewing this inappropriate use, removing the patient linen items became a necessary and routine task.

Questioning staff was next on the

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Fire in Linen Room Tests Vendor Response

In 2007, fire alarms signaled the eruption of a fire in the linen room at **Riddle Memorial Hospital** (Media, PA). It was later determined to be a dryer fire caused by food service rags that combusted and flamed up when the dryer door was opened and air was introduced.

Although the fire was brief, extensive smoke damage resulted. Smoke infiltrated the entire clean area where linen is stored. Because it was a Friday, a large amount of linen was on hand. Fortunately, some

linen items were covered in plastic and still usable. And because the weekend carts were just delivered to the floors, some of the linen escaped damage.

Shortly after the fire Michael Oldt, Director of Environmental Services, called HCSC's Account Relations office to notify us of the fire, and coordinate the pick-up of smoke-contaminated items and delivery of clean linen.

The Baltimore Plant was contacted

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HCSC-Laundry Receives Industry Accreditation

Assures Customers That Highest Quality & Safety Standards Are Met

HCSC-Laundry has recently received accreditation - the industry's highest rating on quality and safety - from the Healthcare Laundry Accreditation Council (HLAC).

HLAC is a non-profit organization that inspects and accredits laundries processing healthcare textiles for hospitals, nursing homes, and other healthcare facilities.

HLAC's mission is to publish high standards for processing healthcare textiles in laundries, and to provide an accreditation process that recognizes those laundries that

meet these high standards. The decision to become accredited is completely voluntary.

"We felt that attaining accreditation was simply the right thing to do towards making us a stronger company," says Bill Moyer, Vice President, Marketing and Service. Moyer further explains that "although we already take prudent measures to ensure the safety of our employees, as well as compliance with all regulatory agencies, becoming accredited sends a message of reassurance to both our customers and employees that HCSC continues to be dedicated towards exceeding the highest industry standards."

The primary benefit of accreditation is that an independent third party has inspected your facility and found that it meets or exceeds the highest standards for processing healthcare textiles. A laundry cannot inspect and accredit itself, and its customers generally do not have the time or expertise to do so.

Dan Marcante, Senior General Manager of HCSC's Kingston (PA) laundry processing plant states, "The inspection was extremely detailed and covered all aspects of our operation. The inspector was thorough and professional. I was particularly impressed that dur-

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Business News

NEW ACCOUNTS

Pottstown Memorial Medical Center
Pottstown, PA

Brandywine Hospital
Coatesville, PA

Phoenixville Hospital
Phoenixville, PA

Kindred Hospital Philadelphia-Havertown
Havertown, PA

Good Shepherd Penn Partners
Philadelphia, PA

CentraState Medical Center
Freehold, NJ

Memorial Hospital of Salem County
Salem, NJ

Lourdes Health System:

Our Lady of Lourdes Medical Center
Camden, NJ

Lourdes Medical Center of Burlington Cty
Willingboro, NJ

RENEWALS

Lehigh Valley Hospital & Health Network:

Lehigh Valley Hospital-Cedar Crest
Allentown, PA

Lehigh Valley Hospital-17th & Chew
Allentown, PA

Lehigh Valley Hospital-Muhlenberg
Bethlehem, PA

Sacred Heart Hospital
Allentown, PA

Community Medical Center
Scranton, PA

Moses Taylor Hospital
Scranton, PA

Mid-Valley Hospital
Peckville, PA

The Good Samaritan Health System
Lebanon, PA

Pottsville Hospital
Pottsville, PA

Central Montgomery Medical Center
Lansdale, PA

Magee Rehabilitation
Philadelphia, PA

Shriners Hospital for Children
Philadelphia, PA

Kindred Hospital of Philadelphia
Philadelphia, PA

Inglis House
Philadelphia, PA

WellSpan Health System:

York Hospital
York, PA

Gettysburg Hospital
Gettysburg, PA

Atlantic Health System:

Morristown Memorial Hospital
Morristown, NJ

Morristown Memorial-Ambulatory Surgery Center
Morristown, NJ

Overlook Hospital
Summit, NJ

AtlantiCare:

AtlantiCare Regional Medical Center
Atlantic City, NJ

AtlantiCare Regional Medical Center
Pomona, NJ

AtlantiCare Surgery Center
Egg Harbor Township, NJ

Bon Secours Health System:

Good Samaritan Hospital
Suffern, NY

Bon Secours Community Hospital
Port Jervis, NY

St. Anthony Community Hospital
Warwick, NY

Schervier Pavilion
Warwick, NY

Mt. Alverno
Warwick, NY

Kennedy Memorial Hospitals
Cherry Hill; Stratford; and Turnersville, NJ

Deborah Heart & Lung
Browns Mills, NJ

HealthSouth Rehabilitation Hospital of NJ
Toms River, NJ

Bacharach Rehabilitation Hospital
Pomona, NJ

Camden County Health Services
Blackwood, NJ

Salem County Nursing Home
Salem, NJ

Kessler Institute for Rehabilitation
New Jersey



HCSC IS PROUD TO HAVE RECENTLY HELD LAUNDRY INSTALLATIONS AT CENTRASTATE MEDICAL CENTER (NJ) AND PHOENIXVILLE HOSPITAL (PA)!

agenda. Certainly, you've heard all the excuses, from "it's the only item available," to "I have to cover this cart or my boss....," to what HCSC considers the best one of all: "I like the contour because it stretches and fits the cart well."

After discussing the situation with the housekeeping manager, it was discovered that bonnets for the carts were, in fact, ordered. The bonnets arrived, but were stenciled incorrectly and became unusable. Returning the product to the manufacturer only prolonged the inappropriate use.

There is a definite need to cover the carts that are being transported through each facility from compliance to aesthetics, but using patient linen only increases costs per patient day and damages Cooperative assets. After discussing this inappropriate use, damage to the patient linen products, and related costs to both the facility and the Cooperative, another approach was taken. We contacted an HCSC general manager to discuss the situation and an idea was tossed around.

As the old saying goes, "if you can't beat 'em, join 'em." A quantity of condemned knit contours was located prior to being cut for rags and was dyed blue. The blue-dyed contours were sold as rags to the facility with the intent of using them as covers. The blue contours are kept within the environmental services department and washed when needed and then simply discarded. The blue contours were well-received by the facility, and are now easy to distinguish from patient linen contour sheets.

As appropriate bonnet covers arrived, the use of the blue contours expanded to the engineering department, where carts hauling construction debris are covered with the easily distinguishable blue contour sheets.



DYED CONTOURS SERVE AS BONNETS FOR HOSPITAL CARTS, BUT PREVENT LOSSES ASSOCIATED WITH INAPPROPRIATE USE.

At the same time, several Cooperative members had expressed a desire for more modest patient gowns. One particular group requesting change was the **WellSpan Healthcare System** in York, Pa. Fueled by an administrative request and lots of self-moti-

vation, WellSpan's Clinical Coordinator, Doris-Pope Banks, emerged to represent the hospital system.

"In general, patient gowns are skimpy," Doris said of older patient gown designs. "There is a violation of physical privacy and dignity."

Prior to our first meeting to discuss revisions to the patient gown, Doris had gone to every fabric store in the region to gather material swatches. She also gained input from various hospital staff members, noting that "we wanted to know what worked best for them." (*We compared that initial meeting and Tim Crimmins' request for the best gown in the industry to be much like the "perfect storm."*)

Doris was very passionate about what she wanted us all to accomplish. It was then we all realized that it wasn't just about HCSC or the hospitals, but about patient care and dignity.

While we knew what everyone wanted, creating something for everyone and making it the best the industry had to offer became a real challenge. It has taken a tremendous amount of cooperation, understanding, and patience from all involved in this process. We knew when Doris arrived at a meeting driving a ten-passenger van loaded with nursing staff that she was in for the long haul. After numerous meetings, prototypes, cutting, sewing, redesigning, modeling, mannequins, and bringing retail and

healthcare designers together, we finally had a product that made absolute sense. We had designed a true "reversible gown" that could be worn by the ambulatory, ancillary, or bed-ridden patients. It could be worn as a conventional gown or as robe-type patient apparel. It was made larger with a totally modest overlap, longer sleeves, and of a fabric that is much brighter and appealing than traditional gowns. The end result is that it provides total dignity for the patient.

The HCSC gown changes did not just end with the patient gown. We also redesigned our Telemetry/IV combination (TIV) gown. It, too, mimics the patient gown, except for snaps on the sleeves and an enhanced telemetry pocket design. Every aspect of this gown has been designed with the objective of affording the Telemetry/IV patient the modesty he or she deserves.

The Bariatric gowns have also undergone significant changes as well. The most noticeable enhancement is that the fabric now matches the other two patient gowns. All three gowns complement each other with regards to colors and fabric print.

Because of all the time, effort, patience, and suggestions that Doris and others from the WellSpan system contributed, WellSpan is currently the first to trial these new offerings system-wide. However, over the course of the next several months, the gowns will slowly become infiltrated throughout the rest of the Cooperative.

Thanks and credit must go to all that partnered in this endeavor. Special gratitude to Doris and HCSC's Director of Purchasing, Pam Chrapowicz, along with Baltic Linen for working well together to accomplish what we all set out to do. What may have started as the perfect storm has ended with the perfect gown.

Back to the Basics

As Linen Managers, one of our top priorities is to contain linen costs. Most of the time, this is harder done than said! Monitoring is the key in controlling linen costs. We're sure you think you've tried everything, but when all else fails...maybe its time to go back to the basics. The following guidelines are tried-and-true tips on how to lower your linen cost per patient day!

- Establish and maintain a "Linen Committee" with plenty of Nursing representation on it. Be sure to include the aides (they are the ones who handle the linen), Ancillary units, and Transportation & Environmental Services!
- Hold "Linen Awareness Inservices."

Try to go from floor to floor, it will be easier to get compliance if the staff doesn't need to go that far to attend.

- Do plenty of "Walk-through Surveys" on the units to see how the linen really is being used.
- Limit the amount of linen available to EMS squads to bed sheets and bath blankets only. Disposable EMS packs which contain a fitted and top sheet are also available. Ask your account representative.
- Make sure only "Authorized Users" are wearing hospital scrub suits.
- For additional warmth, use a bath blanket rather than a 2nd thermal blanket. They're nearly ½ the cost and keep patient just as warm!

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ing the walk-through, the inspector asked our employees key questions to ensure they were properly trained. Although we had most of the required documentation in place, preparing for the process has allowed us to become better organized, formalize our documentation, and standardize our processes throughout all of our plants."

The HLAC accreditation process was developed with several industry groups, including:

- American Reusable Textiles Association (ARTA)
- Association for Professionals in Infection Control and Epidemiology (APIC)
- International Association for Healthcare Textile Management (IAHTM)
- National Association of Institutional Linen Management (NAILM)
- Textile Rental Services Association of America (TRSA)

For more information on HLAC, go to www.hlacnet.org.

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did a great job in dealing with what we had and helping us get back on our feet.

HCSC: I think it would be helpful and edifying for others to know that the response system that we have is not just a paper document but that it really works. It's also a test for us as a provider to know that it works, so it helps us learn, too, that we can do what we propose to be able to do.

Oldt: You're right. Going through something like this, although it's not something anyone ever wants to do, is good because it tests your processes and ensures that you are prepared.

The other thing I thought about is that when this happened, we immediately needed someone to come here and clean. A cleaning company came in on the weekend and totally washed down ceilings, floors and made it smoke-free. We're just not equipped to be handling smoke damage and those kinds of things, and it took a little time to find a company. I found and called several and waited for responses. That may have slowed the process a little bit, but I guess the only other thing I could have done is to have this information ready to say, if we ever have a problem, are you available to respond? The cleaning company responded pretty quickly, but it's still another way to be prepared.

HCSC: It's gratifying to hear there was no dissatisfaction with HCSC's responses.

Oldt: None at all. I think your comment of it being seamless is dead on. I wouldn't think most patients even knew we had a problem (obviously Nursing did).

What's comforting to know is that we are asked frequently to look at our emergency preparedness for any number of internal or external disasters (i.e. there could be a plane crash where we get 100 new patients), and we have to make sure that our vendors are able to respond in the event of an emergency. Most of that never comes to fruition and it's not something you have to test or do but this allowed us to find out. I feel pretty comfortable that if we did have a problem, we would be okay.

Excerpt from the HCSC Readiness Plan

Readiness Status

- HCSC-Laundry has negotiated a commitment from our critical textile suppliers that they will increase their warehouse inventories to augment the linen supply maintained at the HCSC warehouse located in

Emmaus, PA (near Allentown).

- HCSC-Laundry also maintains a new goods inventory of two (2) weeks at this warehouse.
- Each HCSC-Laundry plant has twenty-four (24) hour access to the warehouse supply. Transportation of inventory from the Emmaus warehouse to laundry plants is 24 hours or less.

Back-up Processing Capabilities

- HCSC-Laundry is currently operating five (5) plants, thereby providing a network of back-up processing facilities that can draw upon the resources of each other. Additionally, HCSC is considering a plan to enter into a network of mutual assistance agreements with other laundries throughout our service area.

For more information on HCSC's readiness plan or linen conservation policies, contact your HCSC account representative at 800-444-4272.

Preventing Hyperbaric Linen Losses

HCSC representatives who work with accounts that provide Hyperbaric Services to their patients have become familiar with a new set of linen requirements for patients, as well as some of the old problems that apply to linen inventory.

Hyperbaric Linen is not exempt from linen loss, and the approach to combat it falls in the area of outpatients that are being transferred to other locations than the treatment facility itself. There are two rules that say Hyperbaric Linen inventory may leave the premises:

- The stretcher and patient are not changed from the 100% cotton linen before they leave the Wound Center, and are allowed to return to their home base wearing it.
- The facility is run by a management

service that also has other locations to manage, and decides to share the inventory of one among other facilities.

It is important to establish a set of ground rules for the staff and the management of Wound Care, Hospital and Management Services at the very beginning of linen service, so everyone is aware that quarterly inventories will produce an invoice for lost inventory if the ground rules are not followed. It also helps that an HCSC rep is present on the day service begins, so that the Hyperbaric Techs are fully aware of these policies.

Most of the techs can tell you they need to keep blue linen sorted from the white by putting it separately in blue bags when they

are through with a patient. However, few of them realize that linen going out on a stretcher to a nursing home or a private home will not stay in the system, thus depleting inventory that may not be reclaimed.

Hospital employees responsible for picking up linen also need to be trained on the issues of separation, nightly pick-up, and preparation for 48-hour turn-around time. Understanding the entire process will help the program to flow as intended, and also allow for greater control of inventory. In addition, it eliminates administrators saying that they did not understand the concept of replacement costs when the inventory needs replenishment.



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