The Business of Sterile Processing

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Defining the Model
Sterile Processing and The Business “Model”

• Do We Produce a Service?
• A Product?
• Or Both?
• Essentially Both
The Service Organization

• Dependent Upon the Aggregate Role in the Organization
• Key To Relationships External to the Department
• Dependent Upon and Enhances
  • Communication
  • Credibility
  • Support
  • Understanding
The Sterile Processing Organization vs. The Production or Manufacturing Organization

The Sterile Processing Cycle

- **ACQUISITION**: 1. Purchase 2. Loan
- **CLEANING**
- **TRANSPORT**
- **USE** At all stages Location Facilities Equipment Management Policies/Procedures
- **INSPECTION**
- **STORAGE**
- **PACKAGING**
- **STERILIZATION**
- **DISPOSAL**: 1. Scrap 2. Return to lender

The Manufacturing Cycle

- **Logistics**: Delivery Support
- **Development**: Research Analysis Design
- **Manufacturing**: Planning Prototype Baseline System Production
Blending the Elements

• Providing a Service Model that Supports Your Sterilization/Manufacturing Process is Vital

• The Service Model Should
  • Enhance Internal and External Communication
  • Build a Quality Mindset
  • Define Roles, Mission, and Purpose
Business 1.0 for Sterile Processing

- A Successful Enterprise Typically Depends on Some Key Factors
  - Personnel
  - Assets
  - Finances
  - Logistics
  - Market
  - Customers
  - Culture
  - The Future
Self-Assessment

• Concurrently, It is Always Prudent to First Assess Those 1.0s
  • Personnel
  • Assets
  • Finances
  • Logistics
  • Market
  • Customers
  • Culture
  • The Future
But First, Its All About Image

• Too often, Organizations start, plan, or change with no real consideration for how they are perceived internally or externally
  • Unrealistic Expectations
  • Lack of Purpose
  • Wasted Resources
  • Poor Results
  • Loss of Credibility
What We Do
What We Think We Do
What Hospital Administration Thinks We Do
What The OR Thinks We Do
The Image is Obviously Internal and External

- The “Thankless Job” - irrelevant in healthcare
- We Define the Purpose and Thus the Importance
- This Sets the Culture of the Department and Ultimately Affects the Quality of Service and Product

“You can overcome wrong technology. Your people have the initiative, they see the problem, no big deal... you can’t overcome bad culture. You’ve gotta change whoever is in charge.”

General James Mattis

- Read more: http://www.wearethemighty.com/james-mattis-quotes-2015-01#ixzz3la2tSYPT
Now Back to the Self Assessment

Each Component of this list
• Personnel
• Assets
• Finances
• Logistics
• Market
• Customers
• Culture
• The Future

Should Be Measured Against This List
• Strengths
• Weaknesses
• Culture
• Capability

Each Component Either Possesses or is Affected by List #2
But Given The Time We Have....

• Simply put
  • Relationships
  • Workforce
  • Quality
  • Change
  • Strategy
Relationships
Whom Do We Serve?

- The Facility at Large
- The OR
- The Surgeon
- The Patient

But Who is the Customer?
The Funnel

- In most instances, our product ends up in the hands of the physician/surgeon end user
- The New Surgeon Culture
  - Technologically Astute
  - Business Focused
  - Facility Employed
  - Knows More About Our Roles/Responsibilities
But What About the Patient?
Someone We Easily Lose Sight of At Our Level

A significant impact yet a very distant relationship

What are Their Expectations?

And NOT the Customer!
No Adversaries

• Yes I know.....
• We have to often be the person with the Adult pants
• Service means proactive
  • Effective Surgery Service is Built Upon a Model of Anticipation
• Appreciate the OR shoes of the customer.....
Multi-Channeled Communication

• Use Every Form Available
• Filter but Feed
• Seek Feedback
• Apply the Feedback
Harmony

• Internal and External
• What can we do to Enhance
  • Efficiency
  • Communication
  • Teamwork

“In this age, I don’t care how tactically or operationally brilliant you are, if you cannot create harmony — even vicious harmony — on the battlefield based on trust across service lines, across coalition and national lines, and across civilian/military lines, you need to go home, because your leadership is obsolete. We have got to have officers who can create harmony across all those lines.”

General James Mattis

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The Workforce
Yet Another Sign of Impending Doom

**Vending machine dispenses fresh, hot fries**

A Dutch collaboration has created a vending machine that dispenses cups of freshly cooked fries in less than two minutes.

Build Your Team for Your Mission
Empowered and Informed

- The Why Must Become as Important as The How
- Only the “how” is an unfortunate focus
- Knowing “why” creates a more effective team
- Understanding the Meaning of Risk Relative to the End User
- Allow Initiative
- Recognize Strengths before Weaknesses
- Create a Climate of Trust
Competency vs. Competent

Realistic
• Core Competencies vs. Expertise
• Balance Annual vs. Patient Safety Goals
• Build Human Capital
• Don’t Forget Staff Safety
Accountability and Non-Negotiables

- Bioburden
- Change in Care Plan
- Lost OR Time
- Change in Procedure
Human Capital Investments

• Job Specific Evaluation
• Training vs. Education
• Recognize Corporate Knowledge
• Kick Out the Crutches
• Fear not the Technology
Building a Quality Mindset
Assess the Environment, Acknowledge Reality

• Physical/Plant Realities
  • New, Old, and Indifferent

• Geographic Realities
  • South Dakota, Being in the Middle.....

• Workforce Realities
  • Lateral Competition
  • Wage
  • What’s Available

• Market Realities
  • The New Model of Healthcare Competition
Processes vs. Procedures- a Pitfall

**Processes**
Should
- Provide operational detail for routines and practices
- Enhance and Support Procedures
- Build Upon Quality Practices
- The No Answer and the Deep Corner

**Procedures**
Define
- Strategic or Comprehensive Standards of Practice
- Fit With the Larger Culture of the Organization

Processes can be readily adapted- Procedures are controlled by bureaucracy
The Myth of 100%

• Perfection and the Odds
• Mistakes Provide Opportunity for Improvement
• Make Goal Setting Realistic and Relative
• Seek External Input/Participation
• Remove Barriers
• Team Participation and Ownership
It Doesn’t Have to be Six Sigma, Just Common Sense

This

Can Create This.......
Cause and Effect and the Patient

• Average per 15 minute cost in the OR
  • $3000-$5000
• Anesthesia, Physiology, and the Interminable Wait
• More of the “Why” That Must be Communicated
Track Quality and Track Accountability

• Feedback Models
• Gather Specifics
• Look for Patterns
• Question Everything, Then Ask Again
• Remember the End Users
Speed is not Necessarily Efficiency

“Doing it fast and doing it wrong, is still doing it wrong.” - Rob Frey

• Seek speed in the workflow by improvements in processes/environment
• Monitor Task Exhaustion
• Look For Chokepoints
Sterile Processing as a Change Agency
The Ant Farm

• Don’t Daily Disrupt the Ants!
• Prioritize
• Make it Incremental
• Triage
Blind it With Science Don’t Beat it With Old School

Constantly question practices relative to

• Science
• Technology
• Best Practice
• Common Sense
The Spector of the Inspector

“Bring Capt. Solo, the Wookie, your IUSS logs, and your surface disinfection policy to me”

• Just do it right all of the time......
• A learning tool rather than a hammer and anvil
• Darth Has His Advantages
The Emotion Factor of Healthcare

“Don’t Get Treed by a Chihuahua”-Lt. Col Pete Blaber
Strategic Management
The Right Seats at the Right Tables

• Infection Control
• Strategic Planning
• Project Management
• Purchasing
• Surgery Staff Meetings

Reciprocate the Opportunity
Over Reaping The Rep

- The Consultant may have the info, but you have the accountability
- Be Persistent
- Does It Improve and Enhance?
- Check and Verify
- Network Externally
Smart Shopping

• The Middle Man
• Purchasing for the Easy
• Is it a fit for your Realities?
• Developing a Per Product Cost of Understanding
The Sterility Business Cycle

• Understanding the OR Workload
• Peak Times and Off Times
• Inventory and Just in Time
Playing the Long Game

- Strategic Awareness of
  - Community Growth
  - Facility Growth
  - Physician Recruitment
  - Capital Planning
  - Innovation
Long Term Credibility Building

• Subject Matter Experts
• Public Awareness
• Professional Growth
Reassess Reassess Reassess

- Personnel
- Assets
- Finances
- Logistics
- Market
- Customers
- Culture
- The Future

- Relationships
- Workforce
- Quality
- Change
- Strategy
- Outcomes and Results
The End