The White House may be rolling back environmental and climate change initiatives, but experts say healthcare organizations’ efforts to embrace environmentally-responsible practices will continue. The reason is simple: facilities are seeing firsthand how eco-savvy practices are reducing operating and waste disposal costs, while improving patient care and employee health.

To learn more about how healthcare organizations can reduce their carbon footprint and operating costs, and improve quality patient outcomes, visit www.practicegreenhealth.org, and also read https://ensia.com/voices/health-care-sustainability/.
Last weekend, a Saturday dinner conversation with friends turned into a philosophical discussion around this simple question: can a single person—or a solitary action—lead to significant change in the world? Three of us offered varying degrees of “yes,” while one particularly pragmatic friend countered our positivity with a firm “no.” He asserted that big progress takes an army—or, at least, a very large team united toward a common goal—and that a single person, regardless of their commitment to a cause, is essentially a drop in the bucket. A raindrop in a swollen river. A snowflake in a blizzard.

I reasoned that even a proverbial droplet of water can still cause a ripple effect, not just on the water’s surface, but even many layers underneath. Good or bad, each person’s individual actions can add up to something far greater. (I saw the movie “Pay It Forward,” after all, and I half-jokingly told my negative friend he might want to watch it again, so he could be reminded of the power of a single person setting the ball of change in motion). It might be Hollywood, but the message still applies to real life.

Although I truly do believe one person can change the world, I also recognize that may depend on the “world” we’re trying to change. Can one person just get up off the couch, walk out the front door and spark a solitary, world-wide (or country-wide) revolution? Not likely. But like that raindrop that causes a ripple on the water, that one person’s actions can lead others to join in the journey. One person or action really can be powerful enough to amass an army with a shared mission and invoke real, measurable change.

No question, one person can transform the world of work. We’ve all likely seen it: that natural born leader who pushes himself or herself to do more for the greater good of the team, or the profession as a whole, and then prompts others in the workplace to follow suit. I believe we all have the power to be that person who bucks the status quo and serves as a good example for our peers.

I’m certainly not alone in this belief. Multiple psychology and communication experts attest to the “power of the person,” but they also agree our greatest obstacles are self doubt and fear of change or failure. For those moments when we’re feeling stuck, American activist Marian Wright Edelman’s words can offer some assurance: “You really can change the world if you care enough.”

There’s certainly a lot to care about in the realm of healthcare and, yes, in the Central Service department. Ongoing education and the commitment to quality customer service and patient care are two prime examples. In this issue of Central Source, Damien Berg, BA, BS, CRCST, Chairman of IAHCSMM’s Advocacy Committee, reminds us how one person and one voice can go a long way toward promoting state-required certification of CS technicians. It might not happen overnight, but it happens nonetheless. And it warrants celebration.

If you’re like my friend and remain a skeptic, I leave you with these sage words from anthropologist Margaret Mead: “Never doubt that a small group of thoughtful, committed citizens can change the world. Indeed, it is the only thing that ever has.”
**Ask the EXPERT**

**Q:** I just began working for a new hospital and they put expiration dates on their wrappers. I am used to following an event-related sterility maintenance policy. Why would they use expiration dates?

**A:** Event-related sterility states an item is sterile until an "event" happens to make it unsterile. An event can be the shelf life of the packaging product or the amount of time the packaging manufacturer states a sterilized item can remain in its packaging before it needs to be reprocessed.

Several packaging manufacturers now place a date on their product; the product should not be used past the date stated by the manufacturer. Look for these dates on disposable filters, flat wraps and peel packs—or on the box in which they were packaged. Also, be sure to consult the packaging manufacturer’s Instructions for Use (IFU) for the length of time items may remain in their packaging (after sterilization) before they need to be reprocessed. Some packaging products now have a 30-day time limit. —Natalie Lind

**LINK OF THE MONTH**

**Voting Underway for IAHCSMM’s Next President-Elect**

IAHCSMM’s election for the office of President-Elect is currently underway—and all votes must be cast before midnight April 24, 2017. The President-Elect will serve consecutive one-year terms as President-Elect, President and Past President (2017-2020). All Active and Associate members in good standing are encouraged to vote.

The three nominees, listed in alphabetical order, include: Weston “Hank” Balch, BS, MDiv, CRCST, CIS, CHL; Damien S. Berg, BA, BS, CRCST; and Tony Thurmond, CRCST, CIS, CHL. To review each of the nominees’ vision statements and professional backgrounds, and to cast your vote, visit: [https://www.iahcsmm.org/president-elect.html](https://www.iahcsmm.org/president-elect.html).

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To keep exam content current and fresh, IAHCSMM releases updated exam forms each year. The new CRCST and CHL exam forms, which will be released July 1, 2017, will be the first to feature test questions cited only to the most current test references: IAHCSMM’s *Central Service Technical Manual, Eighth Edition*, AORN’s *Guidelines for Perioperative Practice* (2016 Edition), and/or ANSI/AAMI’s ST79: *Comprehensive Guide to Steam Sterilization and Sterility Assurance in Health Care Facilities* (2010 Edition; 2013 Amendment).

Examinees are not required to purchase any or all of the new test references listed above in order to apply for an exam; however, it is recommended that only the most current editions be used as study material for those planning to test on or after July 1, 2017.

For more information on certification exam content and testing, please visit the “Certification” tab of www.iahcsmm.org.

‘Wearable’ Robotic Surgery Tools on Horizon

Central Service professionals could see some new robotic surgery tools making their way into their facilities in the not-so-distant future. A collaborative team of researchers plans to develop a wearable robotic system for minimally-invasive surgery that will offer surgeons natural and dexterous movement, as well as the ability to “sense,” “see,” control and safely navigate through the surgical environment.

The research project, funded by the European Commission, will be led by Professor Sanja Dogramadzi from the Bristol Robotics Laboratory (BRL) and UWE Bristol, with nine partners. The research team has identified a need for better tools in robot-assisted minimally-invasive surgery to support and enhance the surgeon’s performance in urology, cardiovascular and orthopedic fields—and to expand the potential for this technology to more complex surgical procedures.

The researchers will develop modern biomedical tools based on clinical feedback that mimic complex human dexterity and senses. These devices can be worn by the surgeon and transmit the surgeon’s own movements to the closed surgical interface without restrictions. This will reduce the overall cognitive, manipulation and training demand. Three key pieces of hardware will be the starting points in developing the new surgical robotic system. Exoskeletons will fit over the surgeon’s hands, which will control the instruments inside the body—a newly developed surgical gripper that mimics the thumb and two fingers of the hand. The instrument, which goes inside the body, will have haptic abilities, allowing the surgeon to “feel” the tissues and organs inside the body, just like they do during conventional surgery. The wearable exoskeleton on the surgeon’s hand will enable movement that is more intuitive, while also giving the surgeon the sense of touch. The sense of touch in this system will be dual: current research in haptic systems mainly focuses on the arm/forearm of the user. The system developed in this project will focus on haptic feedback on the fingers of the surgeon as well.

In addition, the researchers will develop smart glasses that will give the surgeon a realistic view of what is taking place inside the body while using the advanced robotic tools. The smart glasses will relay live images from inside the body. This is an advance compared to current systems, which use a flat, TV-like screen to relay images back to the surgeon.

Researchers will use the expertise and feedback of senior surgeons to develop the tools and make additional advancements. “We will use rapid prototyping to make prototype tools that the surgeons will be able to test and we will incorporate their feedback into the next stage of design,”
said Dogramadzi. “This means we can adapt tools to the needs of different surgical procedures and this user-centered design process places surgeons at the heart of the development of this system.”

Study: Hospital Sinks Harboring Multi-Drug-Resistant Bacteria

Many recent reports have found multi-drug-resistant bacteria living in hospital sink drain pipes. Until now, it was unclear how the bacteria found their way out of the drains (and, subsequently, into patients). A team from the University of Virginia, Charlottesville, has charted their pathways—and their new research was published February 24, 2017 in Applied and Environmental Microbiology, a journal of the American Society for Microbiology.

“Our study demonstrates that bacterial spread from drain pipes to patients occurs via a staged mode of transmission,” said principal investigator Amy Mathers, MD, Associate Professor of Medicine and Pathology, Division of Infectious Diseases and International Health.

Initially, the bacteria colonize the elbows of the drain pipes. The investigators showed that from there, the colonies grow slowly towards the sink strainers, at the rate of roughly one inch per day, noted Mathers. Given the distance in typical hospital sinks of elbows below the sink bowls, it frequently takes a week for the colonies to reach the sink strainers. From there, bacteria quickly get splattered around the sink, and even onto the counters surrounding the sinks, where they can be picked up by patients.

The project grew out of the knowledge that patients are dying from infections with multi-drug-resistant bacteria that they acquire while hospitalized. In a review Mathers’ team conducted with Alice Kizny Gordon, MBBS, and colleagues of the University of Oxford, UK, they found more than 32 papers describing the spread of carbapenem-resistant bacteria via sinks and other water reservoirs within hospitals. Half of those papers have appeared since 2010.

The research from Mathers et al entailed building a first-of-its-kind lab that featured five identical sinks, modeled after the most common ICU sink in the University of Virginia’s hospital in Charlottesville.

WORTH REPEATING

“The best way to find yourself is to lose yourself in the service of others.” —Mahatma Gandhi
It’s Time to Tap the Potential of Multigenerational Teams

For the first time in modern history, workplace demographics now span four generations. This means that 20-year-old new hires can find themselves working side-by-side with colleagues who are 50 years (or more) their senior. Central Service (CS) leaders often find their departments are comprised of team members approaching the end of their career and others just starting theirs—and others falling somewhere in-between. This span of age groups creates unique challenges for all members of the department. This rich mix of generations in the workforce can be attributed primarily to labor shortages experienced in many industries and the rising average age of retirement. In recent years, some employers, especially those in the healthcare and service industries, have revised their recruitment strategy to include retaining professionals past retirement age and hiring retirees back into the workforce. For financial reasons, many Baby Boomers are finding they need to wait longer to retire, perhaps into their seventies.

Nicholas Schmitz is president of Schmitz Consulting and also serves as a speaker and author. He holds both a Bachelor’s degree in history and a Master’s degree in organization development and change management from Penn State University. He also has a Master’s degree in project management from Villanova University, and certifications of Project Management Professional (PMP) and Lean Six Sigma Black Belt (LSSBB). His unique perspectives and insights have been leveraged by a wide range of organizations, from small local businesses to large international companies.
While these generational differences have the potential for creating discord, there is also potential to leverage that diversity for departmental success. Workplace diversity trainers often cite that there are more commonalities than differences among people, regardless of age. That is, even though employees of different ages may approach practices and challenges differently, they all tend to share in the goal for quality outcomes and success. Leaders who take time to understand how the different generations function, learn and grow in the workplace is paramount to their employees’ success—and to the development of an effective team built upon mutual respect and the desire to deliver quality service.

**KNOWING WHAT MAKES EACH GENERATION TICK**

A generation is a group of people who share formative experiences at the same time in history. During their first, most formative years, they are coded with data that helps them determine what is right and wrong, good and bad, and even stylish and unstylish. As individuals age, they continue to learn and grow, and they adjust their behaviors and build their skills; however, they generally do not radically change the way they view the world. Because each generation came of age in a distinct and unique era, each has its own perspective on such critical business issues as leadership, communication, problem solving, and decision making.

In the not-so-distant past, generations were often separated at work by rank and status. The oldest employees typically filled executive positions, middle-aged employees held middle-management jobs, and the youngest often worked on the front lines. People from other generations weren’t as likely to rub elbows in the workplace on a daily basis. Today, it is common for multi-generational employees to work side by side to solve problems, make decisions, manage projects and serve customers.

Although there is no absolute beginning or end to the generational distinctions, each generation typically spans 15 to 20 years. There are currently four (possibly five) generations in the workplace: Traditionalists, Baby Boomers, Generation X, Generation Y and, potentially, Generation Z. What follows is a brief description of each.

**Traditionalists** (World War II Generation; Veterans; War Generation): These individuals were born in or before 1945. They currently comprise a small percentage of the active workforce, although they may now apply their knowledge, expertise and experience by serving on voluntary committees and advisory groups. Some traditionalists remain in leadership positions. This generation tends to believe in lifetime employment, often with one employer, and they value hierarchies. They also value...
professional respect, the professional image of their discipline, loyalty, and dedication. Traditionalists worked hard and believed that hard work produced rewards. They are uncomfortable with change and tend to favor “command and control” management/leadership styles. While this group is largely unrepresented in today’s active workforce, their influence is still evident through policies and customs practiced within the organization/department’s culture.

**Baby Boomers:** These individuals were born after World War II (between 1946 and 1964) and were raised in an era of relative optimism, opportunity and progress. Baby boomers generally grew up in a time where people had secure jobs and access to good education and post-war prosperity. They questioned the status quo, embraced the big picture and valued interpersonal communication. Their core values are optimism, personal growth, health and wellness, and involvement. Although many baby boomers are approaching retirement, many continue to remain active in the workforce, largely because work has been a central part of their lives and their work ethic remains strong.

**Generation X:** These individuals were born between 1965 and 1980. They were raised in a time of rapid change, with changing social and economic factors impacting their education and development. They grew up in an environment of two-career families, rising divorce rates, downsizing, and the dawning of the age of rapid technological and communication developments. Generation X focused on personal growth, which led to the aggressive questioning of the status quo, and the belief that job security was a thing of the past. Generation X individuals tend to think globally. They value balance and independence, welcome diversity and informality, and enjoy life outside the workplace. They also are combine technological literacy with strong traditional communication skills.

**Generation Y** (Nexters, Millennials, Internet Generation): These individuals were born between 1980 and 2000. They have grown up in a world with massive amounts of information at their fingertips. They are generally technology savvy and masters of mobile phones, the internet and other computer-based technology. They also tend to be strong multitaskers who are eager to participate or collaborate in decision making. Their core values are optimism, civic duty, confidence, teamwork, modesty, achievement, morality and diversity. They are a true product of their times -- more affluent, educated and ethnically diverse than any of the previous generational groups. Some researchers contend that Generation Y is also so wedded to the desire to belong to a group that employers who neglect this need will have difficulty motivating them.

**Generation Z** (Post-millennials; iGeneration; Plurals; the Homeland Generation): There is already talk of the imminent arrival of Generation Z (those born between 1995 and 2012) in the workforce; in fact, many organizations are already hiring them. This generation currently comprises more than one-quarter of the U.S. population and by 2020, those in the Z Generation will account for one-third of the U.S. population. Generation Z values independence, social environments and an emphasis on individuality. They also tend to be strong multitaskers and prefer information delivered in brief bursts. They also demonstrate more of an entrepreneurial spirit and may be more inclined to opt out of higher education and go straight into the workforce.

As one can see, after reviewing the range of generational employees that could be comprising one’s department, it is essential that leaders know how to meet employees’ varying needs. This will help ensure departments can attract, retain and motivate employees now and in the future. What follows are some tips for promoting quality, effective teamwork and workplace satisfaction for multi-generational employees.

**BE A FLEXIBLE LEADER**

Turning a multi-generational department into a mutually supportive team is no easy task. Leaders must be flexible to get the most from all employees and build a team that learns from all participants and values each person’s strengths and experiences. A one-size-fits-all leadership approach no longer works because a singular style will motivate some and demotivate others. The generations that comprise one’s organization come to work with different expectations, assumptions, priorities and approaches. If these differences are ignored or unvalued, they can lead to misunderstanding, dissatisfaction and conflict. When embraced and appropriately managed, however, these differences create opportunities for collaboration and synergy among employees, giving the organization a competitive edge.

Organizations need engaged employees — those who are willing and able to contribute to the organization’s ongoing success. Engaged employees thrive in inclusive work environments (those that value, reward and develop employees from all generations and give them opportunities to contribute and be heard). When multi-generations come together and work as a cohesive team, additional benefits can be achieved, such as:

- Improving the team’s flexibility;
• Increasing the team’s potential for developing and implementing innovative ideas;
• Making more well-rounded decisions due to the presence of a broader range of perspectives; and
• Decreasing internal dissention, while increasing employee morale.

AVERTING POTENTIAL CONFLICTS
Poorly-managed multi-generational employees are at greater risk for conflict, and this can undermine employees’ ability to pull together as a team and work effectively to accomplish tasks. Conflicts can range from minor misunderstandings to accusations of bias in a variety of areas. Conflict can be minimized by focusing on the strengths each generation brings to the workplace and assigning tasks based on those strengths. Cross-generations mentoring can also be an effective strategy for bridging generational gaps through mutual learning and growth—and ensuring that valuable knowledge from veteran employees is passed on to younger generations. Cross-generational mentoring emphasizes that all generations can learn from one another’s perspectives and experiences for the betterment of the team. For knowledge transfer to be effective, however, it is essential that it is packaged and delivered in a way that makes sense for the younger employee(s).

Rejecting generational biases is essential for building a strong, respectful team. There are issues an older departmental leader may come across when managing a younger generation, and vice versa. As such, leaders must honestly examine their biases and assumptions (and expect the same from their employees). Getting to the heart of the differences can help identify why one worker reacts in a certain way. Moving beyond generational stereotyping is the first step in eliminating harmful biases. Education and training is critical for promoting understanding across all employees. Leaders must understand each generation’s unique core values so they can manage and lead those generations effectively. Traditional, full-day training session may be best for some generations, whereas podcasts or downloadable training sessions that can be viewed individually as part of orientation may be more effective for others. Often, a mix of both will be most effective; however, each leader must carefully examine the employees to determine the best approach. Generational diversity training is essential for all employees, and should not be viewed as optional.

IN CONCLUSION
Considerable time has been spent identifying the differences and potential gaps between generations, but there is compelling evidence that we are more alike than different. With that in mind, leaders should work to create workplaces and cultures that nurture everyone, regardless of age. This is best achieved when leaders understand the differences between the generations, including how each generation of employee learns and what typically motivates and inspires them. In the presence of such understanding, leaders can harness the strengths of each generational employee to build a multi-talented team built upon respect, understanding and shared values.
CS Professionals’ Voice a Powerful Tool for Advocacy, Quality & Professionalism

When Central Service (CS) professionals make their voices heard, they exercise tremendous power. In fact, our voice is the most powerful tool and asset we possess in our quest for CS legislative advocacy—and our pursuit of elevating our practice and, ultimately, our profession.

To “summon” or “to call to action” is an activity undertaken by an individual or group to support a cause or purpose. This action helps unify us as individuals with a common goal and mission. For us CS professionals, that goal is to ensure quality for our discipline and promote positive outcomes for our customers and patients. I vividly recall when I was first “bitten by the IAHCSMM advocacy bug.” The idea that I could lend my voice, experience and passion to help support our certification efforts on a local and national level gave me the motivation to work on this common cause—a pursuit of quality, professionalism and patient safety that was bigger than myself. I realized I was not alone on this certification journey. There are thousands of CS technicians, CS departments and hospitals that all have the same passion and desire for continued growth and professional excellence.

Over the years, I have worked alongside other dedicated professionals on IAHCSMM’s Advocacy Committee, as well as with IAHCSMM staff and many other dedicated IAHCSMM members. In doing so, it became clear to me that together we can accomplish anything. When I first got my start, New Jersey was the only state to require certification of CS technicians. The IAHCSMM Advocacy Committee, under the keen direction of IAHCSMM’s Government Affairs Director, Josephine Colacci, Esq., began strategically working on a plan to incorporate the voice of its members to expand its legislative efforts in other states. The Committee reviews legislative language and fact sheets, develops legislative strategy, and makes decisions on the direction of IAHCSMM’s advocacy efforts. In simplest terms, the Committee uses its voice as experts in the CS profession to shape certification legislation. In a couple of short, but productive legislative years, we now have three more states that require certification of CS technicians—and legislative initiatives are currently underway in several other states.

As Chair of the Advocacy Committee, I have had the opportunity to interact and engage with my professional peers across the country. I am honored to be able to share information, educate and inform fellow IAHCSMM members on how the legislative process works, and explain why each person’s voice is integral to the success of our pursuit for excellence, professionalism and state-required certification of CS technicians. The process is certainly not always easy, but we continue to push forward and make tremendous strides toward our goal, which is have every state in the U.S. require certification for CS technicians.

It has been an honor and privilege to serve IAHCSMM in this important pursuit, and I’m proud to do my part for such a worthy cause. I invite every CS professional to use their voice and do their part to advance certification efforts in their own facilities, even if they work in a state where certification of CS technician is not yet required. Together, we can answer the call for professionalism, quality and patient safety.

On Saturday, May 6, 2017, at IAHCSMM’s Annual Conference in Nashville, Tenn., we invite you to join the IAHCSMM Advocacy Committee for the "Legislative Advocacy Workshop 101." During this pre-conference session, attendees will learn how a bill becomes law and how chapters can prepare for legislative efforts.