



IAHCSMM
Instrumental to Patient Care®

International Association of
Healthcare Central Service
Materiel Management

Testimony of Josephine Colacci, JD
Director of Governmental Affairs for the International Association of Healthcare
Central Service Materiel Management

Submitted to the Public Health Committee

SB 894 AN ACT CONCERNING PERSONS WHO DECONTAMINATE
MEDICAL INSTRUMENTS

March 15, 2013

Good afternoon Senator Gerratana, Representative Johnson, and distinguished members of the Public Health Committee. My name is Josephine Colacci; I am Director of Governmental Affairs for the International Association of Healthcare Central Service Materiel Management (IAHCSMM). IAHCSMM represents approximately 19,000 central service technicians in the U.S. and abroad with 145 technicians in Connecticut. According to the Bureau of Labor Statistics, U.S. Department of Labor for 2011, there are 510 central service technicians in Connecticut.

I appear before you this afternoon to speak in support of SB 894 An Act Concerning Persons Who Decontaminate Medical Instruments which would require central service technicians to be certified and maintain continuing education credits.

Central service technicians are responsible for ensuring that instrumentation and equipment used in medical and surgical procedures are properly cleaned, disinfected, inspected and sterilized prior to patient use. Clearly, this is a vital component in the delivery of safe, quality patient care.

Members of the committee, a compelling example as to why it is important for the legislature to pass this bill this year can be found in the case of a Westport plastic surgeon, reported by The Hartford Courant, who was fined in 2011 for numerous violations of infection control and instrumentation-sterilization procedures. Frankly, the case involving “serious and repeated lapses” was serious enough when it first came to the attention of the Connecticut Department of Public Health. But perhaps even more troubling is that after having already been fined by state regulators once for such serious violations, inspectors from the DPH revisited this

same doctor in the spring of last year and found more violations which again included improper sterilization procedures.

I trust you can agree that this case demonstrates how there is a clear and present need for measures that ensure the safe sterilization of instruments and equipment here in Connecticut.

As is well known, today's surgical instruments are highly complex; they involve many tiny channels and crevices that can hide debris. The processing of robotics, endoscopes, joint replacement, and related instruments and equipment requires an advanced technical knowledge that only proper certification can provide.

I should point out that there are 26 states that track healthcare associated infections (HAIs), but not all of those states track surgical site infections. And indeed, Connecticut does not track such surgical site infections. In fact, no state tracks whether an infection came from a dirty surgical instrument.

Meanwhile, the Center for Disease Control estimates that approximately 1.7 million patients developed HAIs in 2002, which resulted in an estimate of 99,000 deaths. This study estimates that 22% or 290,000 of the infections were surgical site infections. The cost of treating HAIs is estimated to be \$37 to \$45 billion annually. Recently, the University of Michigan analyzed 350 suction tips (used to vacuum up fluids during surgery) for cleanliness and found that fully 95% of them contained debris after being decontaminated.

Consumers of surgical services – frankly, everyone in the chain of healthcare services – benefits from a more qualified and competent workforce. There is simply no question that the education, training, and assurance of competency of this vital healthcare professional will reduce the incidence of surgical site infections, which in turn results in the reduction of readmissions and surgical complications.

In closing, we would like to see changes to the language of the bill No. 894 and I have submitted those changes with my written testimony. Also, I have included some additional information on the legislation, as well as the article published in the Hartford Courant that I referred to earlier.

I would be pleased to answer any questions you might have. Thank you.

Westport Doctor Again Cited By State

September 14, 2012|By JOSH KOVNER, jkovner@courant.com, The Hartford Courant

A Westport plastic surgeon who was fined \$29,000 last year for serious and repeated lapses in medical care has once again run afoul of state regulators.

Health inspectors in the spring dropped in on Dr. Joel Singer at his Westport surgery suite and found numerous violations of infection-control and instrument-sterilization procedures, as well as gaps in medical records and surgery logs. The inspectors also noted that some of the nurses working during breast augmentations, fat transfers, liposuctions and other procedures lacked the required surgical experience.

In a new consent order signed Aug. 29, and posted on the state Department of Public Health website this week, Singer agreed to hire consultants to monitor nearly every facet of his office and report back to DPH.

The inspectors in the spring went to the Westport Ambulatory Surgery Center to see if Singer and his staff had taken corrective action after a series of violations last year led to \$29,000 in fines against Singer.

Instead, the inspectors found more violations, including exposed trash, improper sterilization procedures, unqualified nurses, and gaps in documentation that made it impossible to verify that surgeries were being conducted properly.

Under the consent order, the consultants will examine the surgery center's management, quality controls, infection controls, medical-record keeping, training and credentialing of nurses, advanced-practice nurses, and doctors in the office, operating-room procedures, drug storage, and maintenance of instruments.

Last year, Singer was sued by a 27-year-old patient who charged that he posted pictures of her enhanced breasts on an office website without her signed authorization. Jury selection in the case is schedule for Oct. 31, according to court records.

Singer was fined \$5,000 in 2005 for leaving major gaps in the surgical record of a breast reduction he performed. The surgical site had become necrotic, which occurs when cells or tissues die. In 1998, his license was placed on probation for a year after he placed implants of different sizes during a breast augmentation.

Since 2009, a medical supply firm and a cleaning company have been awarded over \$10,000 in judgments against Singer for unpaid bills, according to court records.

http://articles.courant.com/2012-09-14/health/hc-plastic-surgeon-westport-discipline-0915-20120914_1_breast-reduction-nurses-breast-augmentation

Bill No. 894

Formatted: Centered

No person shall engage in functioning as the practice of a central service technician unless the person holds and maintains the certified registered central service technician credential administered by the International Association of Healthcare Central Service Materiel Management or the certified sterile processing and distribution technician credential administered by the Certification Board for Sterile Processing and Distribution, Inc. or is certified or otherwise recognized by another professional organization that is deemed acceptable by the Commissioner of Public Health.

Take this out of Section 1(b) and make it a separate section

Any person who provides evidence of working as a central service technician in a healthcare facility prior to the effective date of this section ~~has worked as a central service technician on or after October 1, 2011, shall~~ may engage in functioning as the practice of a central service technician.

Another Section:

A central service technician that does not meet the requirements of paragraph
(THIS SHOULD REFERENCE ABOVE SECTION TAKEN OUT OF
1b) shall have eighteen months from the date of hire to obtain the certified
registered central service technician credential or the certified sterile processing
and distribution technician credential. provided, not later than eighteen months
after the date such person commenced work as a central service technician,
such person meets the certification or recognition requirements of this
subsection.

Another Section

There shall be working relationships among medical staff, nurse staff, and
central service technicians to assure that all patient care needs are met.