**OUR MISSION**
In the markets we serve, we will be recognized as the premier provider of the best quality, customer-focused support services.

**OUR VALUES**

**INTEGRITY.**
A commitment to forthright, honest communication in all of our encounters.

**COLLABORATION.**
An unyielding commitment to consistent teamwork in order to achieve collective goals.

**ACCOUNTABILITY.**
As a company and as individuals, we accept full responsibility for our actions and the associated outcomes.

**PROFESSIONAL DEVELOPMENT.**
Providing the right tools, training, and support for professional growth.

**LEADERSHIP.**
Displaying the passion to exceed expectations in all that we do.

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**COVER STORY**

8 **Innovation: Custom-Built for Our Customers**

With the grand opening of our Milwaukee plant, Crothall Laundry Services takes the industry lead on customer-focused innovation.

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**FEATURES**

6 Avoid 3 of the Most Frequently Cited RFI’s

10 An Ounce of Prevention

12 Celebrating 20 Years of Excellence

13 Haiti: Joining Forces with Florida Hospitals Global Mission Initiative

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**IN EVERY ISSUE**

3 From the CEO

4 Crothall Momentum

5 CaringHearts

13 “Make A Difference” Winners
This year, Crothall Healthcare is celebrating 20 years as the expert in healthcare support services. I am so proud of all we have accomplished—a testament to the skill and commitment of our people.

We’ve gained a certain respect from the industry over the years, a result of the expertise we share every day with our customers—providing clean and safe patient environments, friendly and caring service, and cutting-edge processes and technology. Thank you, to all our customers, for the 20 years we have been your supporting partner.

We celebrate some of our latest successes in this edition of Celebrations. Our exceptional, built-from-the-ground-up laundry plant in Milwaukee is just amazing. What a great example of just how far we have come as a company. A number of innovations have made CLS-Milwaukee the feature story throughout the laundry industry. It is literally a dream come true for our laundry team, and I want to congratulate everyone who saw the project through to completion. I also want to thank our dedicated laundry workers, who are already beating their productivity targets.

Our featured case study celebrates the remarkable, measurable way our Environmental Services program has contributed to infection prevention at Mount Sinai Hospital in New York City.

It is exciting to be able to demonstrate real outcomes that make a difference in the lives of patients.

It is inspiring to read about our partnership with the Florida Hospitals Global Mission Initiative in sending a team of Environmental Services workers to Adventist Hospital in Port-au-Prince, Haiti. Regional Manager Mark Giuliani shares a moving account of his team’s incredible work in the earthquake-torn country.

Please enjoy the stories of our Make A Difference winners; these are the very best acts of compassion from our hourly people that we love to celebrate. It is important that we continue to recognize these people and to do more to support our communities through Caring Hearts, the new name for our beloved philanthropic organization (formerly Crothall Cares).

I want to thank you for your loyalty and partnership through another challenging but successful year, and for making these past 20 years something truly worth celebrating.

All the best,

[I want to thank you for making these past 20 years something truly worth celebrating.]

Bobby
ENVIRONMENTAL SERVICES
American Ultraviolet
ARTZ Device Chosen for Disinfection

Crothall Healthcare recently announced our selection of American Ultraviolet (AUV), one of the oldest and most trusted leaders in UV technology, as the preferred partner for healthcare room disinfection. The ARTZ (Automatically Reliably Targeting Zero) Mobile Room UVC Germicidal Solution uses high-intensity UVC lamps to deliver a critical dose to all room surfaces to quickly, safely, and effectively reduce harmful pathogens in patient rooms and surgical suites. The decision further underscores Crothall’s commitment to prevent the spread of infection within our healthcare client settings, with a specific focus on eliminating microorganisms that cause hospital acquired infections (HAIs). The partnership with AUV is a result of years of careful research and testing by Crothall Healthcare’s Products Committee.

Please go to www.crothall.com/news to see the full press release.

LAUNDRY & LINEN
The Linen Master:
CLS Linen Expert
Umesh Vendargon

Patient Satisfaction scores often rise and fall based on the small comforts patients experience during their hospital stays. That includes the linens used on hospital beds as well as towels used to bathe patients. Crothall Laundry Services recently made the decision to bring linen expert Umesh Vendargon on board as an additional resource to manage the quality of our linens and relationships with linen vendors. “I have been mandated to ensure that the clients are getting what they are paying for,” commented Vendargon. In addition, Vendargon is looking to upgrade the product lines for towels and flat sheets to those that have a softer feel, retain whiteness, and reduce pin holing. New quality measures include random testing to ensure quantities purchased are the same as quantities delivered and testing for compliance to purchasing standards. Clients will be interested to note that they may call Vendargon directly regarding the quality of their linens.

PATIENT TRANSPORTATION
Joint Commission Readiness

Every three years, the Joint Commission surveys over 19,000 health care organizations, and is still the largest deeming authority for the Centers for Medicare and Medicaid Services. Crothall’s Patient Transportation experts know that the results of the accreditation surveys are reported publicly on several different websites, and that readiness is key to keeping their facilities’ accreditation intact. The following are areas where PT managers focus to keep their departments survey-ready:

• Hand hygiene procedures followed
• PPEs are used
• Equipment is stored, not cluttering egresses
• O₂ is properly stored
• Training documents are kept up to date and organized
• Transporters know hospital codes
• Linens are properly bagged after every transport
• Equipment is cleaned before and after transporting a patient
• Proper patient hand-off communication with clinical signatures is followed

Leading the way to 100% compliance is the goal of our PT experts…just one more way Crothall can help.
FACILITIES MANAGEMENT

**CDC and American Water Works Suggest Need for EWSP**

A collaborative effort between the Centers for Disease Control and Prevention (CDC) and the American Water Works Association has resulted in a series of documents and helpful guidelines to assist with facility planning, response, and recovery for a water supply interruption caused by natural disasters, a failure of the community water system, construction damage, or even an act of terrorism. The development of an emergency water supply plan (EWSP) can provide a facility-specific response and recovery methods by providing the guidance needed to assess a healthcare facility’s water usage, response capabilities, and water alternatives. Crothall Facilities Management has responded by alerting account managers of the need for an EWSP at all locations. “Facility preparedness is a priority at all times for our maintenance teams,” explained Director of Standardization Rich Feczko. “We are glad that the CDC and American Water Works issued these guidelines and we will be making the plan a part of our standard.”

CLINICAL EQUIPMENT SERVICES

**Are You Ready for Ultrasound Accreditation?**

Healthcare administrators are always facing new government requirements when it comes to their valuable and revenue-producing biomedical equipment. As medical device experts, Crothall keeps current on changes in regulatory standards. The U.S. Department of Health and Human Services has mandated that, as of January 1, 2012, all diagnostic ultrasounds must be accredited by a CMS-designated organization. This means these devices will need to receive more rigorous and thorough testing to achieve accreditation. As an example, the American College of Radiology requires semi-annual inspections with specific guidelines, including extensive testing of two transducers per unit. We are assuring our clients’ compliance by testing according to these requirements and have adjusted our TeamTRACE documentation to capture the outcomes. As a result, Crothall CES provides our clients accreditation confidence as well as more accurate scanning for their patients.

Caring Hearts: A New Name for a Well-Loved Institution

Crothall Cares was created in 2003 and has become a well-loved philanthropic arm of the company. “We realized that with our success comes responsibility,” explained CEO Bobby Kutteh. “We wanted our employees to internalize this spirit in their everyday dealings with patients and co-workers.” Crothall Cares has supported many great causes, most notably its annual Make-A-Wish contribution, and helped many Crothall people in desperate need following natural disasters like Hurricane Katrina and the tornados of 2010. When it came time to refresh the name and look for the future, we were in for a big surprise. Appealing to the field for suggestions, the marketing department received over 300 submissions for a new name. The finalists included: Circle of Care, Circle of Hope, Heart of Service, and the winning name, Caring Hearts. Congratulations to those who submitted these names:

- **Circle of Care:** Cynthia Stafford
- **Circle of Hope:** Dean Miller
- **Heart of Service:** Haley Rose
- **Caring Hearts:** Eric Barrese, Heather Hertzog

All finalists and semi-finalists will receive prizes of $1,000 for their favorite charities and $100 for themselves.
Since The Joint Commission’s addition of the Life Safety surveyor back in 2005, it is not surprising that three of the top ten most frequently cited Recommendations for Improvement (RFIs) for the last three years running are directly linked to Life Safety:

**LS.02.01.20 (45%)**
The hospital maintains the integrity of the means of egress.

**LS.02.01.10 (43%)**
Building and fire protection features are designed and maintained to minimize the effects of fire, smoke, and heat.

**LS.02.01.30 (36%)**
The hospital provides and maintains building features to protect individuals from the hazards of fire and smoke.

A common-sense approach to your next survey would involve taking the necessary measures to avoid these violations by effectively preparing and managing your Statement of Conditions (SOC), following these three essential steps.

1. **Maintain current and accurate Life Safety drawings.**

   Per The Joint Commission’s SOC instructions, a set of accurate Life Safety drawings are required for any healthcare or ambulatory occupancy building and must be provided to the Life Safety surveyor during the building tour. These drawings help them better understand your building’s unique Life Safety features and safeguards. Although the Basic Building Information (BBI) is typically the first step in providing surveyors relevant information about your buildings, a detailed set of Life Safety drawings helps illustrate to the surveyor information not contained within the BBI.

   These drawings are required to maintain the following features: exterior exit doors, exit stairs/ramps (exterior or interior), smokeproof enclosures, horizontal exits, fire barriers, fire compartments, fire barriers, and linen/trash chutes. However, adding...
2. Utilize qualified individuals to prepare the SOC.

The Joint Commission requires hospitals to define who within your organization is qualified to prepare your SOC. Although there may be many individuals who have a general understanding of the use of NFPA 101 to adequately perform periodic updates of general code-related issues, those individuals may not be qualified to perform a comprehensive evaluation of your building’s level of code compliance. The use of outside experts can prove invaluable in defining code-related issues not commonly observed during regular surveillance rounds of your building. A detailed examination by a true code expert can often uncover hidden but serious code violations prior to your next survey. The benefits of having a comprehensive evaluation performed by a trained set of “outside eyes” can truly make a difference in not only assuring a successful survey outcome, but also ensuring a safe building.

3. Manage the timeliness of completion for all Plans for Improvement.

Whether you identify only ten Plans for Improvement (PFIs) or a thousand within your SOC, what’s important is how timely you are in remediating the defined violations. If it takes less than 45 days to correct an issue, The Joint Commission does not require you to enter it into your SOC, but you must still maintain a record of its completion. This documentation will probably be reviewed by a Life Safety surveyor to verify that the corrective work was performed on time. More serious code violations requiring greater than 45 days must be entered electronically into your SOC with a determined timeline for completion. Failure to meet these timelines can be serious if identified during a survey. It is highly recommended that you allow sufficient time to acquire the funding, materials, and manpower to provide an accurate assessment of the time you need (add 3-6 months to be safe). The Joint Commission allows organizations to change their estimated time for completion should delays be discovered; however, this can only be done for those PFIs that have not already been accepted by a Life Safety surveyor (usually during your last survey). Your next Life Safety surveyor will know that the timeframe has been changed and may ask why, but as long as there is a rational reason for the delay, the change will usually be accepted.

The Statement of Conditions is an effective tool for assuring your building is code compliant and fire safe, and it helps you avoid the most frequently cited RFIs related to Life Safety. But your efforts can prove futile if your organization is not performing regular surveillance of the building and examining the “human factors.” Any Joint Commission surveyor can easily identify the most blatant Life Safety concerns, and the more savvy surveyors will even discover the less obvious threats. Therefore, it is imperative to have well-qualified individuals on your staff and possibly 3rd-party experts to diligently conduct the necessary rounds. This will make your building a safer place and help you avoid the most frequently cited RFIs.

Accurate Life Safety drawings can help avoid the most common RFIs.
Turn Up the Volume!
At a time when healthcare administrators, like our customers at Aurora HealthCare of Wisconsin, are looking for viable ways to cut costs, Crothall Laundry Services (CLS) continues to provide flexible, innovative solutions. Aurora was happy with its decision to have Crothall serve at its hospital-owned laundry facility; however, they were facing problematic increases in laundry volume—from an initial 12.5 million pounds of laundry per year to 18 million pounds. The hospital faced a major dilemma: the plant’s old systems would have to be upgraded for efficiency and the plant expanded if they were to keep pace with their system’s laundry needs—a major outlay of capital on operations that were outside the system’s immediate area of expertise.

Breaking New Ground
Crothall responded with a signature innovative solution that would literally break new ground. On August 11, 2010, Crothall gathered architects, vendors, and contractors to build our first, state-of-the-art, 83,000-square-foot laundry facility in Oak Creek, WI, near Milwaukee. The new plant would not only process the Aurora system’s 18 million pounds of laundry, it would have the capacity to handle up to another 32 million pounds from other customers. Designed to operate 96 hours a week, the plant’s amazing production capabilities are achievable due to carefully conceived automation enhancements that result in throughput efficiencies of over 150 lbs. per operator hour (POH).

Green Technology
Up to now, Crothall has always bought existing plants or retrofitted existing buildings. “We were continually upgrading old systems for efficiency and knew that, starting fresh, we had the expertise to design a real state-of-the-art, green plant,” commented Crothall Project Manager Ian Bigelow. Of specific interest was cleaning without using inefficient high-pressure steam boilers to heat water for cleaning.

Research led to new technology vendor relationships, and dreams were drafted into concrete plans. By May 2, 2011, CLS-Milwaukee was in full production, its 160 employees already averaging 147 lbs. POH. Aurora HealthCare’s 17 hospitals’ laundry was fully entrusted to the new plant, and CLS-Milwaukee was “LEEDing” the way with innovation.
## CLS-Milwaukee Innovations

| 1. E-Tech Sort Area | • Continuous Sort on Rail  
|                      | • LED Display Sort Windows  
|                      | • Computerized Tunnel Load Sequencing  
| 2. Softrol Systems | • Computerized Production Management System  
|                    | • Monitors Exist Throughout the Plant  
|                    | • This Station Dedicated to Chemical Dosing  
|                    | (Chemical delivery system provided for Ecolab wash chemicals.)  
| 3. Milnor Tunnel Washer | • Pulse Flow Technology  
|                       | • Utility Conservative <.5 gal/lb of water  
|                       | • More Efficient Dilution & Titration of Chemicals  
| 4. Milnor Tunnel Control System | • Links Microprocessor Controls in Equipment  
|                                  | • Central Programming  
|                                  | • Data Reporting  
|                                  | • Production Monitoring  
| 5. Milnor Cake Elevators | • Loads Press-to-Dry Rail System  
| 6. Press-to-Dry Rail System | • No Shuttle Danger  
|                        | • Prevents Travel Lag Time; Tunnels Don’t Go on Hold  
|                        | • All Tunnels Access All Dryers  
| 7. Milnor Batch Dryers | • Highly Efficient Natural Gas-Fired  
|                     | • Average 3 Loads/Hour/Per Dryer  
|                     | • 300-lb. Batch Dryers  
| 8. Dry Type Lint Collector | • Efficient Lint Collection System  
| 9. Steam Finishing Tunnel | • Uniquely Innovative  
|                         | • Generates Its Own Steam  
| 10. Mechanical Room | • TEA Steamless Water Treatment System  
|                      | • No High-Pressure Steam  
|                      | • Highly Efficient  
| 11. OR Pack Room | • Preparation of Surgical Packs for Hospitals  
|                   | • Sterilized Offsite  
| 12. Finishing Area | • Self-Contained Thermal Fluid Ironers  
|                  | • Processing 145-150 Feet/Minute of Sheets  
|                  | • Automated Sheet Separations  
| 13. Bridge Stack Transfer Conveyors | • Gently Stacks Linen on Conveyors  
| 14. Task-Lighted Folding Stations | • Task Lighting to Make Stains Clearly Visible  
|                               | • Ergonomically Designed  

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### “LEEDing” to True Innovation

The new plant is a first or near-first in several ways. It will be the first laundry in the world to certify under the 2009 LEED 3.0 standards and the only one to include our processing in the certification. It is among the first to use a press-to-dry rail system, automatically carrying 300-lb bags of clean laundry on rails overhead to any available dryer, in place of a traditional shuttle. It will also be one of a very few facilities in the country to process without using high-pressure steam boilers, which are normally used to heat water for washing. Instead, a Thermal Engineering of Arizona (TEA) Steamless Water Treatment System—using natural gas-fired hot water boilers and efficient heat exchangers that recover heat from wastewater—combine to provide all of the hot water needed for washing.

Another innovation is the Colmac, gas-fired steam tunnel, used to condition lab coats, which generates its own steam independent of a traditional steam boiler. Milnor* tunnels employ a revolutionary, patent-pending, concept called “PulseFlow® Technology.” The technology involves a new and innovative use of water and chemistry incorporating true top transfer batch processing. Healthcare linen has been proven to be effectively washed and rinsed to industry standards at a water consumption rate of approximately 0.45 gallons/pound (on average). This new technology will allow the Milwaukee facility to realize a water consumption savings of 39% compared to the traditional tunnel washing process, saving approximately 8.5 million gallons of water each year. The finishing area uses self-contained Thermal Fluid Ironers that process 145-150 feet/minute of sheets or up to 1200 sheets per hour. More innovations abound, with each efficiently moving laundry through a beautifully engineered process, from the time soiled linen arrives at the dock until it is folded and carefully put on the conveyor belt for packing by the little Bridge Stack Transfer Conveyors.

With this new plant, Crothall takes its place as the leader in the healthcare laundry industry. The above map from the Grand Opening on June 27, 2011, shows the number of innovative steps Crothall Healthcare was able to build into our first laundry.

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*Used with Milnor’s permission.
An Ounce of Prevention

Hospital-acquired infections (HAIs) attack the most vulnerable patients. Annually, HAIs affect almost 2 million patients, costing over $2 billion in additional treatment—and taking 90,000 lives, according to the Centers for Disease Control.

As one of the largest hospitals and best teaching institutions in the world, The Mount Sinai Medical Center is not just satisfied with controlling infections, they are dedicated to preventing them, and the Environmental Services (EVS) department is the first line of defense.

COMPATIBILITY, RESPONSIVENESS, RESOURCES

Mount Sinai’s 1,171-bed facility has a huge EVS department, with more than 650 full- and part-time employees in EVS and Patient Transportation (PT), and with an additional 44 Crothall Healthcare managers.

For years, Mount Sinai had been using another national services company for EVS and PT, but by 2008, Mount Sinai’s leadership decided they needed to make a change.

In the eyes of Mount Sinai Vice President of Support Services Daryl Wilkerson: “We were looking for quality, more services, more empathy for our employees, and more of a team approach. Crothall told us what they would accomplish. The expectations were put out there in front of everyone.”

STARTS WITH TRAINING, ENDS WITH TECHNOLOGY

The Mount Sinai story is more than a simple EVS transition story. In 2008, Mount Sinai had 1.06 C. diff infections per 1,000 patients—and a hospital goal of dropping that rate to 0.78.

The first strategy, according to Crothall Regional Manager Paul Killion, was simply to strengthen the EVS department, with a special emphasis on retraining. “We had to do major retraining when we began the contract,” Killion recalled. “Employees were mixing their own chemicals; sometimes, they weren’t even using the right chemicals.”
Crothall went beyond simply updating department processes. They overhauled everything from technology to attitude:

- New, state-of-the-art equipment
- Environmentally friendly products
- Hospitality training

HAI rates began dropping. Significantly. In the first year, the C. diff rate dropped to 0.91.

Then in 2010, Crothall began piloting a new cleaning program specifically geared toward infection prevention. Two new technologies—3M Clean-Trace and Tru-D (UV irradiation device)—were introduced to Mount Sinai.

Clean-Trace detects ATP, a protein present in all living organisms. The test is a simple swab that gives results in 30 seconds. This was a huge step over previous measures used at Mount Sinai. “There was no technology; they just used their vision and a form,” explained Wilkerson. “Clean-Trace gives measurable, empirical data. You either disinfected the surface or you didn’t,” said Killion.

Crothall’s program focuses on high-touch surfaces known to spread infection, such as toilet flushers, doorknobs, and bed rails. Clean-Trace allows for directed coaching of staff to actually show them what they missed and help them improve. In the first six months of the program, the EVS staff did surprisingly well—84% compliance in patient rooms and 78% in OR suites. In the subsequent six months, compliance jumped to 86% and 81%, respectively.

The next step was Tru-D, a device that uses highly concentrated doses of UV energy to sterilize not only all room surfaces, but also the air itself, destroying all living organisms, including MRSA, influenza, and even C. diff spores. A recent study showed that patients are 40% more likely to develop an HAI if the room’s previous occupant was infected. Tru-D is used by Mount Sinai in patient rooms with confirmed infections, as well as high-risk areas like OR suites and L&D rooms.

“At the end of the day, it’s all about patient care,” Wilkerson said. “You’ve got to change your approach. You have to be forward thinking or you’ll lose the game. Crothall has a lot more resources, and they know the trends. That’s why we rely on Crothall to bring those things to our attention.”

**RUNNING DOWN THE NUMBERS**

After a full year with new infection prevention goals and two years operating with Crothall’s management focus, the results at Mount Sinai are conclusive:

- 57% reduction in C. diff infection rates, from 1.06 in 2008 to 0.60 in February 2011
- Increase from 60% in 2008 to 67% so far in 2011 for HCAHPS cleaning scores
- 50% reduction in OSHA incidents, from 49 to 25
- 48% reduction in lost work days, from 1004 to 527, saving at least $441,000 a year

“I attribute the first-year improvements in both safety and effectiveness to proper use of chemicals and training of our staff. Our continued progress is thanks to the amazing tools we have introduced, like Clean-Trace and Tru-D,” Killion said. “It wasn’t just the technology. It was about modifying our behavior. It was making sure that we were cleaning and disinfecting effectively.”

For Wilkerson, this level of leadership and performance is even more than he expected. “A lot of it is the management on the ground,” he explained. “Our Crothall managers truly drive the program.”
In October 2011, Crothall will celebrate 20 years of healthcare support services excellence. Building a company that not only rivaled our large competitors in credibility, but also outperformed them with our people and processes, has been an exciting journey, one filled with brilliant moments that all of us cherish. And it is interesting to note that the evolution of the healthcare industry itself has more than validated the need for our expert services over time.

The company had its beginnings in 1991, when our sister company, Morrison Food Services, built a partnership with Crothall to provide an EVS expert for its 26 non-food accounts. Outsourcing specialization has proven a best practice throughout our industry. A review of some important healthcare challenges then and now shows how our expertise has become essential to our clients’ success over the last 20 years.

As the industry struggles to find success in the era of healthcare reform, hospitals can count on Crothall’s 20 years of excellence, including over 1,000 years of combined operations management experience. We are proud of our 30,000 people, our 98.1% client retention rate, our CIMS and CIMS-GB certification with highest honors, over 700 hospital customers, and our double-digit annual growth rate.

While finances will probably always top the list of healthcare administrator concerns, we are proud to be part of an industry that continues to sharpen its focus on patient care and experience. We celebrate our contribution to great patient care, and we pledge the best of our 20 years of expertise to supporting your healthcare mission.

<table>
<thead>
<tr>
<th>Then – the 1990’s</th>
<th>Now – the 2010’s</th>
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<tbody>
<tr>
<td><strong>Financial Challenges</strong></td>
<td><strong>Now – the 2010’s</strong></td>
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<tr>
<td>1st bullet point: on a list of healthcare challenges published by PBS, in the 90s, the industry’s costs were rising at double the rate of inflation.¹</td>
<td>1st on the list: on the ACHIE Survey of Top Issues Facing Healthcare,² financial challenges were again #1. Throughout the intervening 20 years, healthcare costs rose exponentially. And while competitors still bundle services, we remain committed to the high quality we can only offer through specialization.</td>
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<tr>
<td>By the mid-90s, our competitors were offering “bundled” services and combined management as a one-stop-shop answer for savings.</td>
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<tr>
<td><strong>Healthcare Reform &amp; Governmental Mandates</strong></td>
<td><strong>Healthcare Reform &amp; Governmental Mandates</strong></td>
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<tr>
<td>3rd bullet point: Federal health care reform legislation fails again to pass in the U.S. Congress.</td>
<td>2nd and 3rd on the list: With CMS reimbursements and penalties at stake, Crothall provides the highest level of expertise to ensure hospitals are clean, safe, efficient, compliant with regulations, and able to concentrate on patient care.</td>
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<td><strong>Patient Safety and Quality</strong></td>
<td><strong>Patient Safety and Quality</strong></td>
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<td>Nowhere on the list: Patients as customers didn’t have the web and government resources to shop around and didn’t have a meaningful voice. As a result, many support services departments faced searing budget cuts as a “non-clinical” cost-saving measure.</td>
<td>4th on the list: Patients have become savvy customers, aware of their rights and their voice through HCAHPS. It has become paramount that hospitals work with partners like Crothall that provide expertise to improve Patient Experience.</td>
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SUNDAY, June 5, 2011

Arrived and began our 45-minute, six-mile trek on the “main highway” to the hospital and hotel. What we experienced and saw challenged the senses, and a few in our group were close to ill as we made our way through the areas of tents, rubbish, and disrepair. We got to the hospital and Dino Johosophat, Jeffery Smith, and I surveyed the facility. Realized we would not be able to do night work as the power and related lighting was deficient. Could see (and smell) the issues we needed to work on.

MONDAY, June 6, 2011

We met the Assistant Administrator, Nathan Lindsey, and toured the hospital. As we approached the laundry area, it became apparent that there was no equipment for washing or drying, but everything was being washed by hand. It was at this point that our team became very emotional and broke down in various ways. While this was a low point, it was also a moment that energized and motivated the team to help as we could.

We then began to sort what equipment and supplies we had and the conditions we were going to be working in. Tested equipment and supplies that had arrived were moved to the hospital to prep for the next steps. One challenge was that our only water source was a spigot on the roof. It had a 5-foot hose attached. There was no A/C, and it is an open-air environment.

TUESDAY, June 7, 2011

Training began in earnest. Crothall’s “10-Step Cleaning” went international as the steps were translated into Creole by Dino and others, and each staff member coached. The hospital staff was highly engaged and attentive. Afterwards, we teamed up our staff with theirs as they went to the floors. Jeff oversaw doing floorcare and walls, etc. We emphasized that the staff was to do and not just watch. The hospital had elbows flying around everywhere. We were making some impact out of the gates. Of particular emphasis was the Peds Building and ED, which Nathan had said was problematic. You could smell it 10 feet before getting there. Once we were done, you could still smell Peds from a distance—but in a good way.

WEDNESDAY, June 8, 2011

A long, hot day of intensive cleaning with emphasis in Surgery, Exam Rooms, and RRs. We typically had 12-hour days, eating around 7:30 and going to bed. Hospital staff was recognizing the things we were doing. Nathan noted that he had never seen the Housekeeping staff so engaged. I was asked about the differences between what we were doing and what we do in our hospitals elsewhere. I said that, after you get past the minutia and stuff, it is the same. We want a clean environment, quality patient care, and to support the clinical teams and our staff.

THURSDAY, June 9, 2011

Continued with projects. We wrote down the specs for them on a daily basis. We wanted to keep it simple, so we moved to two primary chemicals: Virex, for disinfecting clinical spaces and RRs; and Stride, for floors, walls, and general cleaning. Identified who should be doing what, and emphasized that they must continue to reinforce the right way to do things. We handed over the 10-Step binder to our new friends and asked them to continue working with the tools we provided. They already had caring hearts for the patients.

We then said our goodbyes. I was overwhelmed by their gratefulness. We had made a difference in the few days we had been there. We had come to provide cleaning techniques but, more so, left them with hope and the knowledge that there are people who care for them and what they do.
Laundry workers at the Ritz Carlton Hotel South Beach were struggling to keep up with the demand for pool towels during a busy weekend for the pool and beach. Continuously laundering towels left them no time to complete the rest of the linen for the hotel. In the past, it was nearly impossible to run an overnight shift; most employees relied on public transportation to get to work, and buses don’t run at night.

Lead Laundry Attendant Nirma Negron made it her priority to organize an emergency overnight shift, dropping off employees who chose to work late and picking up others at 3 AM for an early start. To do this, Nirma used her own van on her own time and ensured that the needs of the hotel would be accommodated. The hotel was amazed the following morning when they had all the linen they needed and guest service was not compromised.

Elderly patients often suffer from ICU or sun-downer’s dementia and depression, making them unresponsive to others during long hospitalizations. The experience is scary for patient and family alike and makes it harder to treat the patient clinically. There was just such a patient at Forsyth Medical Center who was unresponsive for two weeks. Housekeeper Michelle Smith saw the patient every day when she came to clean and visited with the family, sharing prayers and singing songs. Michelle knew about the “Care Bear” patient experience initiative in her EVS department, and it occurred to her that this situation called for one. As soon as the patient received her “Care Bear,” she opened her eyes for the first time in two weeks. Her family was amazed when she said, “I have to give the bear a name.” The bear was christened “Honeypot.” According to Forsyth’s “One Person at a Time” publication, in which her story was featured, “When doctors arrived, they couldn’t believe the patient’s turnaround.” “I tell patients, ‘It doesn’t matter if you call me in this room 100 times, I’m still going to come 100 times with a smile on my face,’” Michelle explained. “I was put on this earth to help people. I just try to do a remarkable job everywhere.”
September 2011 Winners

Nominated by peers, our Make A Difference Winners are chosen quarterly for their inspiring dedication to improving the lives of those they touch while on the job.

**CELIA HERNANDEZ**
Patient Transporter
Children’s Hospital, Colorado
Aurora, CO

Submitted by Charles Ott

Money…money…money! A Transporter on a routine delivery finds herself becoming the company icon for “Integrity.”

We often speak of company values forming the base of our culture at Crothall Healthcare. In this story, the value of “Integrity” plays a big role. Many of our support services place us in situations of temptation; the customers we serve are patients and their families during a time when they are either incapacitated or distracted with worry. However, we know that a personal belief in integrity as part of our service mission is often what drives our leaders, our company, and our reputation for excellence. When Patient Transporter Celia Hernandez was in the middle of a routine equipment run in the Children’s Hospital parking garage, she found a bank deposit bag, full of cash and checks, lying beside a vehicle. Celia never hesitated: she immediately called her manager, Charles Ott, to report the find. By the time she arrived at the office, security was already there to meet her and receive the deposit bag. The owner, who had not yet realized the bag was missing, was notified immediately and was extremely grateful. As a result of her integrity, Celia was recognized by the hospital with roses and thank you cards. Security also recognized her, saying she was the type of employee they needed and wanted. Thank you, Celia, for living our values and representing our company in the very best way!

**LISA WALKER**
Housekeeping Aide
Forsyth Medical Center
Winston-Salem, NC

Nominated by Dean Miller

A housekeeping aide breaks through a perceived barrier with a “challenging” patient by delivering excellent patient care.

A particular patient at Forsyth Medical Center was considered “challenging” by clinical staff due to her pattern of complaining and asking to be left alone. Enter Housekeeping Aide Lisa Walker. Lisa encountered the patient’s usual sour demeanor when she arrived to clean her room. However, when she was asked to leave, Lisa asked what was wrong. The response was a typical, “I just don’t want to be bothered.” With unusual insight, Lisa agreed to go to lunch and return afterwards with one provision: the patient had to put together a list of recipes for them to discuss. This request triggered excitement from the patient, who put together a long list of her favorite recipes. While Lisa cleaned her room thoroughly, they chatted about the recipes, and when the cleaning was done, the patient said, “Please come back so we can talk some more.” Over the next few days, to everyone’s surprise, Lisa would drop in and chat with the patient as she cleaned. By making the patient feel at ease, Lisa was able to knock down the perceived barrier that stood between the patient and the hospital staff. “Lisa showed great ‘care-giving’ and persistence in delivering excellent patient care,” commented EVS Director Dean Miller. “She continues to be a shining example of professionalism in our department.”
Meet Crothall employees who demonstrate through their actions what it means to truly “Make A Difference.”

NIRMA NEGRON
A Lead Laundry Attendant does the impossible by making an emergency swing shift possible.

MICHELLE SMITH
An unresponsive elderly patient is brought back by a caring act from her housekeeper and the magic of a “Care Bear.”

CELIA HERNANDEZ
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A housekeeping aide breaks through a perceived barrier with a “challenging” patient by delivering excellent patient care.