Value Analysis and Textiles

Textiles play a major role in improving patient quality outcomes. Industry professionals agree that there are several factors for materials managers to consider when purchasing textiles and using those materials effectively within the healthcare setting.

Carol Stamas, RN, a consultant for Encompass, emphasizes the importance of a Value Analysis Committee within healthcare settings to properly evaluate new products for quality and effectiveness.

“Most hospitals have a team in place that does evaluations of new products,” she said, referring to such items as isolation gowns, surgical apparel, and under pads, which are used by patients and healthcare professionals on a regular basis. “They review these products and discuss them in a group, and then decide if they want to take it to the next level.”
Not surprisingly, the lowest cost items on the market are not always the most effective. For example, if a hospital invests in a patient gown that doesn’t provide full coverage, therefore requiring two gowns for modesty, the patient’s overall satisfaction is decreased. Patient satisfaction can impact reimbursements due to the HCAHPS (Hospital Consumer Assessment of Healthcare Providers and Systems) survey. Overall costs are also increased due to more gowns used and the higher cost of laundry processing per patient. For example, the gown quantities ordered are based on one per patient; if patients require more than one because of insufficient coverage, this causes shortages which in turn requires the floor to order extra deliveries, resulting in higher costs to the hospital.

Material managers must also seek out textiles that will continue to perform as needed over time. “The first thing [materials managers] need to ask is what is the patient care need?” said Cindy Molko, Director of Linen and Central Services at Mayo Clinic, but it’s also important for them to understand the fabric composition of particular linens and how they’re going to hold up in the laundry. They must make sure they understand performance requirements of the customer.

“Those are key areas of collaboration that would need to happen with whoever is responsible for that distribution function or clinician that may be assigned to that particular activity for that facility,” Molko explained.

When evaluating a product for use, several factors should be considered, such as initial cost, as well as processing, distribution, and replacement costs. It is advisable to obtain samples of the product for evaluation before a long-term purchasing decision is made.

“Materials managers need to make sure they get the manufacturer’s instructions for cleaning and re-processing,” she said. “Then they need to determine whether the [laundry] processor they’re using—whether it’s onsite or outsourced—is able to provide that…We usually give them several samples to process anywhere from five to ten times.” Before processing the samples, measurements of the product should be taken to assess for shrinkage.

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What is the Value Analysis Committee?

“The primary function of a VAC is the initial introduction of new products and the decision to move forward to evaluate the particular product under review. Once the decision is made to move forward with a product evaluation, that function may or may not move to another committee. It really depends on the structure and function of the committee as defined by the hospital. There may other responsibilities of the committee as well. Members of the committee generally include Clinical, Materials Management (MM) or Purchasing, Hospital Administration with ad hoc members as indicated.

If there is no VAC, again depending on the processes and procedures of the hospital, the decision may be a joint one with MM and Clinical as well as the intended department of product use. For example, for healthcare textiles, the Linen and Laundry staff would most likely have a role in the decision making.”

Carol Stamas, RN, CLLM
“We also keep a control piece out so that after that processing is done, we can go back and take a look and say, ‘Was there shrinkage or color fading? Does it look like the product’s appearance changed dramatically after processing?’ If all of those components are acceptable, then we would view that as a product that would survive in our system,” said Molko.

Some facilities take things another step forward by determining whether they’re able to sustain the life cycle of a product within their own system.

“For example, if it’s a reusable procedural gown or drape, and the company says, ‘We believe you can get 75 cycles out of this,’ then we may take that some samples of that product and start processing and see how long that would actually take in [our] system,” said Molko. “That will give us a benchmark so we can understand life cycles and plan for replacements down the road.”

Some new product developments promise increase patient satisfaction and outcomes, but in practicality are not found to be effective or necessary. For example, in spite of the belief that antimicrobial or polyester products may be more effective for patient use, Molko said she had not been getting more requests from clinical staff for these materials.

Stamas added, “Until there’s clinical evidence they have a purpose or identified need, I don’t think we’ll see an increase in these products. There’s just not enough evidence yet.”

In the end, it’s the responsibility of materials managers to educate themselves to the fullest extent on new products and to utilize that knowledge within the heath care setting. The impact of textiles in overall patient care and outcomes cannot be understated.

“Because we should be leaders within our industry,” Molko said, “I believe we should take that front step to know what’s happening with technology, and then offer that up to clinicians, infection preventionists, and others that can assess whether that marketed product is really going to meet their needs.”