



Clinical Update

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The Nurse's Role In Product Selection

As clinical nurses, we are very familiar with the changes at the bedside that have come about in response to managed care. Behind the scenes, changes are just as dramatic. Very few acute care hospitals today individually negotiate purchasing contracts with vendors of medical products, drugs and supplies. Instead, hospitals belong to purchasing consortiums that represent many hospitals.

Learning How The Process Works

If you'd like to help choose the products used in your hospital, you'll need to find out how the product evaluation process works. Today, most hospitals have multidisciplinary committees that oversee product evaluations and make recommendations about which products to purchase.

The purchasing committee is typically made up of both clinicians and non-clinical personnel who have a stake in purchasing decisions, such as material managers and biomedical engineers. Nurses who will use the products are key members. It's important that bedside caregivers volunteer for these committees so their voices are heard.

Evaluate The Company, Not Just The Product

Most product evaluations focus on features and benefits, how easy the equipment is to use, or how convenient the packaging is. While those factors are important, don't overlook an evaluation of the company that wants you to buy its product. A product purchase is like a courtship. During the courting phase, sales representatives are typically close at hand and ready, willing and able to answer questions and provide staff education. But, what happens after the purchase is made? Will the company stand by you and continue to provide support on a regular basis? Or, will the sales representative move on to the next sale?

Find out what other hospitals use the company's product. Use your professional network to find out who else has dealt with the company. You can ask nurses who are members of

professional organizations you belong to such as AACN, AORN, and ENA. In recent years, e-mail has become an important tool for product evaluation. Nursing e-mail lists often have questions posted by people evaluating new products, asking for other people's experience with the product and the company. Ask about what happens months after the purchase to see if the company stands by *all* its customers — not just the new ones.

The Difference Between Cost And Price

Nurses, perhaps more than non-clinical purchasing personnel, understand that the cost of a product is more than just the price tag.

Be sure to evaluate the education the company provides. Inservice education and training can be expensive for a hospital to take on itself. Are the sales representative, regional manager (or other company trainers) willing to come in to your facility and inservice — around the clock if necessary — to make sure nurses are comfortable with the product? A great product with new features isn't much good if no one knows how to use it at 3:00 in the morning. Ask about the company's overall commitment to professional development; that will give you an idea of how much the company values education.

When you are evaluating a product, find out if that product is the sole focus of your sales representative, or if it is simply one of a number of products in his bag. If sales reps have many products to sell, it may be difficult for them to commit to the education a single product may require.

Check to see if the company has a 24-hour, 7-day-a-week system in place so that critical questions can be answered promptly any time of the day or night. Particularly if you're talking about critical equipment, a patient's life could be in the balance. That's a cost far more significant than the price tag of the product.

Many times, a company will come in with a comparable (or sometimes better) product at a lower price than the one currently in use. And, just as often, the original company will drop its price to match the competitor. Think about that. Are your vendors offering their best price all the time, or only when they are trying to keep you from changing to a different supplier? *(continued...)*

Clinical Update is an educational newsletter provided by Atrium Medical Corporation and is edited by Patricia Carroll, RN,C, CEN, RRT, MS.

Test Your Knowledge...

Q. What does it mean when the water level rises to -20 cmH₂O in the water seal? How do I get the water level back down to a lower level?

Answer on other side

(continued from front)

Nurses today must become more proactive in the purchasing decisions their hospitals make. As patient advocates, we can help assure that the best products are there at the lowest reasonable cost, and that every nurse knows how to use them safely at the bedside. Our patients deserve nothing less.

In The Literature

Certification — In The Consumer's Interest

A guest editorial in a recent issue of *Nursing Management* by Barbara Gill, chair of the AACN Certification Corporation, is a must read for nurses who believe in certification and want to see certified nurses receive more recognition. Gill points out that nursing in general needs to get the word out that board-certified nurses are as important as board-certified physicians. But, unlike the physicians who are getting the word out to consumers, nurses must first convince their employers that certification has value.

Nursing leaders in organizations can support certification by becoming certified in their specialty, and by lobbying for internal recognition for certified nurses in the form of a pay differential and reimbursement of exam fees. It's good business sense. Externally, recognition occurs by promoting the number of certified nurses on the hospital's staff in advertising directed at consumers.

Source: Gill BA: Make certification a consumer concern. *Nursing Management* 1999;30(4):7.

On Leadership Effectiveness

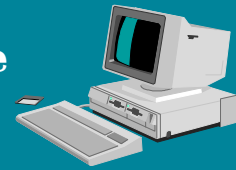
This month's *Nursing Economics* includes an interesting article about effective leaders in healthcare organizations. The authors describe the difference between a nurse manager, who derives power from the position and title, and a nurse leader, who relies on a vision and expert interpersonal skills to drive the organization and the profession.

The authors were interested in developing nurse leaders and examining what makes them effective. They designed a tool (reprinted in the article) for soliciting feedback from staff regarding their leader's effectiveness. The tool addresses 11 leadership characteristics derived from a literature review: available, inclusive, humorous, fair, consistent, decisive, humble, objective, tough, effective, and coach.

The authors believe that leaders grow and become more effective by soliciting feedback from subordinates. They call this feedback a "daring adventure" that can help nurse leaders be even more successful.

Source: Trott MC, Windsor K: Leadership effectiveness: how do you measure up? *Nursing Economics* 1999;17(3):127-130.

On the World Wide Web...



Now that summer's here, we're going to have a little fun this issue with web sites devoted to babies.

www.baylordallas.edu/Babies/

This site, home of Baylor University Medical Center in Dallas, has set up a user-friendly gallery of baby photos. Friends and relatives from all over the world can virtually visit newborns at Baylor whose pictures are posted (with parents' permission) 48 to 72 hours after birth. If your hospital isn't doing this, you might want to suggest it — it is a terrific public relations plus for your maternity services.

www.babycenter.com/conflict/

This very tongue-in-cheek site provides the true sports fan with a wealth of information relating pregnancy due dates to sporting events. If you're already pregnant, you can type in the due date, and the site will tell you what sporting event you might miss during the delivery. If you're trying to get pregnant, you can choose from a list of major sporting events, and the site will tell you which days to "be careful" so you won't miss the event 9 months later. If last night was the magic night, it will calculate the due date; and finally, if you want to attend a major sporting event near your due date, the site gives directions from the event to local hospitals.

Don't forget to visit Atrium Medical Corporation online at www.atriummed.com.

If you have any technical questions about chest drainage, or if you need product information or educational support materials, please call or fax Atrium's hotline anytime.

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Test Your Knowledge...

A. The water seal is actually a U-tube manometer. A rising water level indicates a condition of higher negative pressure within the chest drainage system. It may be caused by milking or stripping of the chest tubes. It can also be caused by patient factors; for example, a patient taking in a very deep breath to cough, or a patient in respiratory distress who is trying to breathe around an airway obstruction. To lower the water seal level, depress the manual high negativity vent on the top of the drain. Do not lower the water seal column when suction is not operating or when the patient is on gravity drainage.