

## **How Carol Burnett reduced odors at Willowbrook Developmental Center**

by Anthony Fontaino

Willowbrook Developmental Center, Staten Island, N. Y., wasn't always as cozy a place to visit or to work at as it now is. As late as 1966—prior to the use of a leading germicidal detergent and an extensive and continuing training program for all housekeeping employees—things weren't so pleasant. Many of our severely retarded patients are incontinent, and odors were prevalent everywhere. Not only were they noticeable within our buildings, but they could frequently be detected emanating from the buildings as one walked about the grounds. For our employees, to return home from each day's work by bus (even after showering and changing clothes) was an unpleasant experience. This experience was not only unpleasant for other riders on the bus due to odors that had permeated the newly changed clothing while it was stored in employee lockers during the day, but it was also unpleasant for our employees due to the offensive reactions of many of the other riders, caused by the objectionable odor inadvertently brought aboard by our personnel.

What was most frustrating to our cleaning personnel at that time was the fact that they were making a conscientious effort to keep our buildings clean; yet this severe odor problem remained. It seemed to them to be an impossible



problem with which they could not cope. As a result, morale was low and a negative attitude on the part of the entire staff persisted.

A national spotlight was focused upon our problem when, in late 1965, the late Senator Robert Kennedy visited our institution, and in blunt, factual terms described the conditions that seemed so impossible for our people to correct.

But was it such an impossible task? More determined than ever to find answers to this persistent problem, our Medical Director, Dr. J. Hammond, appointed this writer as Acting Executive Housekeeper with a strict commission to explore any and all avenues that might lead to a resolution of the problem.

Less than six months later, Willowbrook's Dr. Hammond spoke the following words: "There has been a marked improvement in the physical appearance of the interiors of our buildings and a tremendous reduction leading to a virtual absence of odors in our most severely retarded patient buildings."

What was done in such a short time span to bring about this "marked improvement?" How was this seemingly impossible problem overcome and what forces were put to work to overcome it?

### Confronting The Problems

The first phase of our project was the easiest to complete. We were quickly able to define our problem as being two-fold: undesirable odors and very low morale. But phase two was a bit more difficult—what were the causes and what could be done about eliminating them?

As a stout believer that "two heads are better than one," our first step was to call into consultation representatives of State contracted vendors of germicides, detergents, etc. and review with them our two-sided problem.

One major short-coming of ours became glaringly evident in very short order. We were trying to do a cleaning job with an inadequate cleaning solution, a non-germicidal one. Since proliferating bacteria were the primary agents creating the odor problem, it seemed logical to conclude that what we needed was an extremely effective and, hopefully, economical germicidal solution. This was immediately and unanimously agreed upon.

But what about our low morale problem? What could be done in this area? One vendor was particularly helpful in this regard. Not only was this firm a major supplier of germicides, germicidal detergents to hospitals, and committed to researching its products to fulfill extreme needs, but we were pleasantly surprised to learn that its representatives were prepared to collaborate with us in developing morale-building and motivational training classes for our Housekeeping employees and for other employees who were indirectly associated with Housekeeping's efforts.

In these training classes that were instituted at this time, great emphasis was placed on stressing the importance of the work that Housekeeping employees do. Professionalism in attitude and pride in accomplishment were the initial benefits we had hoped to obtain as a result of this motivational training. Getting the message across that their work was important and indispensable to the hospital was obviously a good first step in that direction.

Training films detailing the importance of an aseptic environment, and Housekeeping's major role in developing such an environment were shown and reshown to the 1500 employees working in our 27 buildings that are sprawled across 384 acres. Others indicating Housekeeping's place on the hospital team and a layman's approach to bacteria also emphasized the real importance of the work that the Housekeeping Department does. These early training classes began the all important process of developing pride in accomplishment in our personnel and morale was on the way up.

Personal care and good body hygiene were the subject matter of other films and training classes. Safety on the job was stressed, as was the importance of using proven body mechanics when lifting heavy objects or using physical stress in other activities. These classes were beginning to say to our employees "We know you're important to us and our patients, and we want you to take good care of yourselves." Again, the message was being transmitted that Housekeeping is important, and the work that you do is *important*.

Of course, pride in accomplishment is derived in part from doing a good job physically as well as bacteriologi-

cal. Employees were continuously being taught at all of

our meetings.

Our final series of training classes emphasized the dividends that could be drawn from a professional attitude, a confident attitude. Another film concerning hospital ethics, the relationship of the Housekeeping employee to patient was shown to establish that professionalism is not limited solely to the doctor or nurse, but to the Housekeeping employee as well.

The beneficial results of this intensive motivational training were clearly evident even before the training period had gone through cycle one. Where negativism and frustration had lurked before, a new attitude of hope and confidence prevailed in us as well as our staff. We were now ready to get the job done.

Actually, part of our new found confidence had developed as a result of an already achieved partial success. The training classes described above carried on through a three-month period, during which time we had also begun an institution-wide use of a thoroughly proven, substituted phenolic-type germicidal detergent in place of the cleaner we had previously been using.

A crash program had begun. Floors were flood washed daily and machine scrubbed weekly. Beds and ward furniture were wiped down daily. Walls were washed down weekly in critical wards, and monthly in less critical wards.

The initial results were striking and extremely satisfying. A total reduction in odor was achieved in non-critical areas after the daily "scrub-down." Even in critical areas, a complete reduction in odor that declined to approximately 80% immediately prior to "scrub down" was experienced. We were elated and proud.

But then, we began to ask ourselves, why couldn't we achieve a total reduction of detectable odor in our critical areas throughout the 24-hour day? The more we thought of it, the more challenging the thought became.

More consultations with our vendor brought forth new ideas. Why not seal the urine etched terrazzo floors in these critical, incontinent areas? What if we increased the frequency of our floor washing procedures in these areas? From once a day to twice daily, or even three times a day?

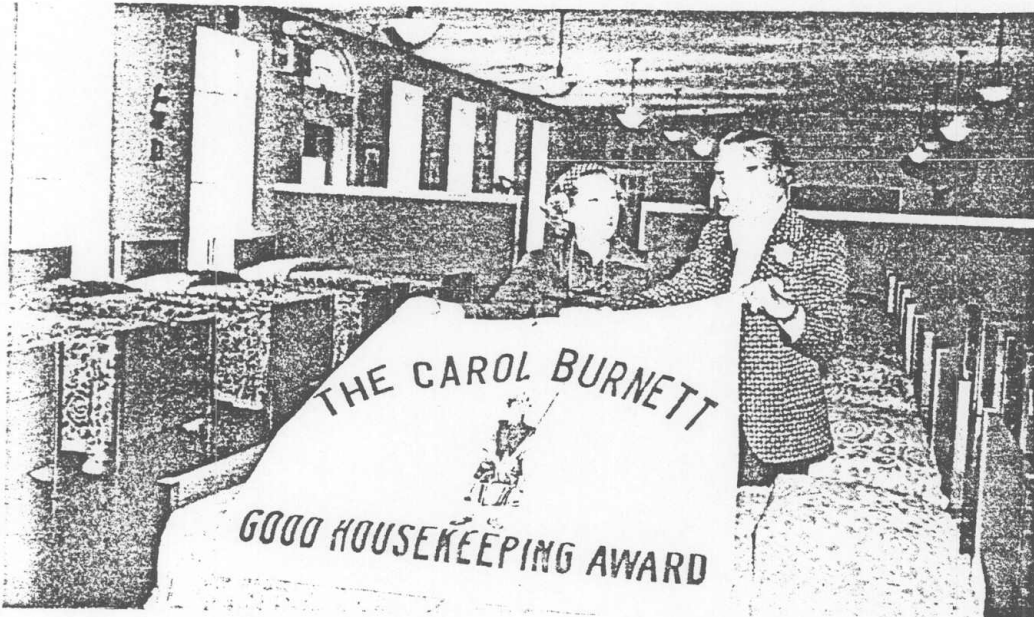
Some suggested that we seal the floors with a scrubable metal-lock pol-

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ymmer finish and we experimented with twice daily floor moppings—and thrice daily too.

There was not the slightest resistance from any of our employees, despite the

*With the blessings of T.V. comedienne, Carol Burnett, Willowbrook initiated an incentive program based on her char-woman character that revitalized sagging spirits and productivity within the housekeeping department and throughout the Center.*



increased work load that we had imposed on them. They had lived through a rich experience with us, and they were as eager as we were to complete our fight against odor. Enthusiasm and pride in achievement were no longer classroom phrases; they were everywhere evident and abundant.

And it was infectious! Our nursing personnel got into the battle too. More frequent bathings of each patient seemed no longer to be the useless task it once had appeared to be. A healthy competitive spirit developed between our different building personnel and the cleaning crews, with each trying to outdo the other. We had licked the enemy and we were riding an emotional high.

### A Set-Back

Then, in late 1972, fate intervened and dealt us an almost fatal blow. Drastic budget cuts caused personnel and supply cut-backs. And these in turn forced us to drastically reduce our cleaning frequencies.

Odor, once again, began to rear its ugly head, and along with it, morale went into a disheartening tailspin. Reversing this crushing turn of events seemed to us to be too monumental a task. Our only recourse was to increase our already very high per-employee

work load, but no one was psychologically up to it. The road ahead seemed darker than it had ever been before.

We knew that the only way to keep our heads above water was to stop this serious erosion of morale—that was gradually approaching the point of no

return—so that once again, increasing each employee's work load would be practical. And we couldn't wait until the seriously reduced budget situation improved. It might never happen!

Many a sleepless night was spent tossing and turning and thinking. What could be done to re-ignite the spark that might develop the flame that burned so brightly once before? But months passed, and things were rapidly going from bad to worse.

### Enter: Carol Burnett

And then, one night it happened! We were watching television at home. A lovely lady, a great star, Carol Burnett, was going through one of her famous char-woman routines. The thought burst upon us! Would she, could she, be prevailed upon to approve our use of her characterization of the char-woman as our symbol for cleaning superiority? Would she approve of our awarding, on a monthly basis the "Carol Burnett Good Housekeeping Award" to the cleanest building of the many buildings at our institution? And, if she did, would the impact on employee morale even begin to equal the impact we were then experiencing just by thinking about it? The adrenalin was really flowing. Maybe we were just dreaming! Miss

Burnett was a very busy professional and would probably never even get to see any letter of appeal that we might write. But desperate times breed desperate acts.

So write we did, and a shock wave was soon to rock our institution. She said yes, go ahead, with her blessing! Deliberately, we let the word leak out as we excitedly began making plans for the Big Day, the day we were to first present the Carol Burnett Good Housekeeping Award (a large banner featuring Carol as the Char-Woman) to the cleanest building, a trophy to that particular cleaning crew and lapel buttons for the patients involved (some patients and most ward attendants were pitching in to help their cleaning crews).

Tuesday, September 24, 1974, was selected as the date for the opening ceremony, and visiting dignitaries, political and otherwise, promised to attend, as would members of the press and television. A gala event—a memorable day was a certainty, and the excitement that was generated was contagious to all. Everyone, personnel of all types, were eager to assist their particular cleaning crew to do its best possible job. The most difficult job on the 24th was the selection of the winner.

It would be accurate, we're sure, to say that we don't know all that there is to know about motivational forces that are available to us to use in improving our cleaning programs. Suffice, for now, to say that it's a powerful force worthy of the full attention of any Executive Housekeeper. Quite frankly, we don't know to what extent our present high state of morale will diminish as the newness of this exciting program wears off. It will diminish to some extent we're sure. But of one thing we're certain: the degree of effective motivation that can be realized is far greater than we had ever thought possible. ○



Mr. Fontano, Executive Housekeeper at Willowbrook Developmental Center, Staten Island, N.Y., was awarded second prize in the Health Care Category in the Soap and Detergent Association's 1974 Environmental Cleanliness Achievement Contest.