

# Wisconsin Healthcare Engineering Association Newsletter

June 2016

Volume 26

2nd Quarter

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## President's Message



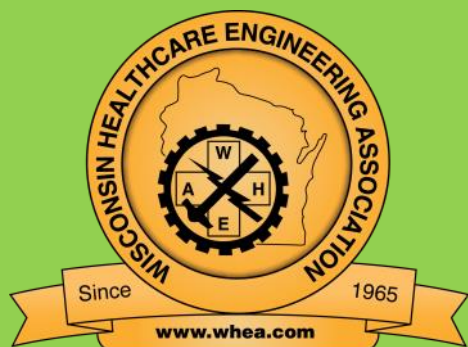
*Marc Teubert*  
*WHEA President*

The year is going by so fast and we are already in the middle of summer, I hope that everyone will have a safe and enjoyable July 4<sup>th</sup>.

At WHEA, the Codes & Standards Committee has been busy with training and preparing for the conversion to the 2012 Life Safety Code. The Education and Professional Development Committee continues to do a great job with the monthly "Lunch and Learn" series and the Conference Committee is again planning a great and exciting 2016 Annual Conference at the KI Conference Center in Green Bay.

It never ceases to amaze me how much work is accomplished by so many dedicated people in this organization. I would ask that you join me in thanking all the Officers and Committee members of the both the State and Local Chapters for what they do. Please consider taking a board position or become a chapter officer and see the rewards it offers.

Again please remain safe as you enjoy the rest of the summer, be sure to register for the 2016 Annual Conference in Septem-



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## WHEA CALENDAR

**Thu Jul 14** Lunch & Learn Series Webinar

**Fri Aug 5** Board & Member Services - *Glacier Canyon Conference Center WI Dells - (Board 9 am | Member Services 1 pm)*

**Tue Aug 9** Code Committee Meeting - *Glacier Canyon Conference Center, WI Dells - 12:30 pm*

**Thu Aug 11** Lunch & Learn Series Webinar - 11:30 to 1:00 pm

**Fri Aug 12** Chapter II Meeting - Brunch and Golf at the Lake Windsor Golf Club

**Thu Aug 18** Chapter IV Meeting - Miron's Office

**Thu Aug 18** Chapter V Meeting - *Emerald Ridge*

**Thu Sep 8** Lunch & Learn Series Webinar

**Sep 20 - 23** 2016 WHEA Annual Conference - *KI Convention Center, Green Bay*

**Fri Oct 7** Education & Professional Development Committee Meeting - 9 am - *Glacier Canyon Conference Center, WI Dells*

**Thu Oct 13** Lunch & Learn Series Webinar

**Thu Oct 20** Chapter V Meeting, Osseo



# *In Memoriam*

## *Melvin "Red" Benschop*

STOUGHTON - Melvin "Red" Benschop, age 83, passed away peacefully on May 12, 2016 at Stoughton Hospital.

He was born on March 27, 1933 in Kankakee, IL., to Goldie and Henry (Hank) Benschop. He graduated from Stoughton High School in 1951. He was confirmed at Christ Lutheran Church. He was a member of the Boy Scouts and earned the honor of Eagle Scout. After high school he worked with his father in Hank's electrical business. He served his country in the U.S. Army from 1953 - 1955. He was in the Military Police and served in Korea. On May 14, 1955 he married his high school sweetheart, Beverly Rynning, at Cooksville Lutheran Church.

Red's work was always in the electrical business. His last employment was at Stoughton Hospital for 29 years as Plant Operations Manager. He was a very active member of the Wisconsin Hospital Engineers Association until his death. He was very active and served as a council member at both Cooksville Lutheran and First Lutheran Church, which the family joined in 1971. Red enjoyed being the "go to guy" for electrical work at both churches and his many friends. Red loved music and participated in the a cappella and Madrigal Choirs in high school, the Cooksville Men's Chorus and church choir, and the Dane County Men's Grieg Chorus.

In 1956 Red joined the Stoughton Volunteer Fire Department where he proudly served for 58 years, the last 25 years as First Assistant Chief. Serving and protecting the community was a high priority during his lifetime. Red enjoyed his travels and adventures with Bev including their trips to Italy, the Bahamas, and many vacations on the north shore of Lake Superior. Red loved spending time with his family including boating trips on the Mississippi, sightseeing and exploring many states on road trips to California and Florida. He also enjoyed downhill skiing with his daughter, camping, trips to Drummond, canoeing the Boundary Waters with his son, and fishing with his grandsons.

Survivors include his wife of 61 years Beverly; son, Brian (Jody Cook); daughter, Cherilyn (Tim) Janisch; grandsons, Christopher, Matthew, and Michael Janisch; brother, Henry "Bud" (Janine); sister, Beverli Spangler, and several nephews. He was preceded in death by his parents; parents-in-law, Omar and Eleanor Rynning; and a niece.

He was at Stoughton Hospital for 29 years as Plant Operations Manager. He was a very active member of the Wisconsin Hospital Engineers Association until his death. He was one of our well-respected leaders in WHEA for as long as most of us can remember. He was a member for 40 years, during which time he had been recognized with a Founding Fathers award (1995.) He was the second recipient of the Healthcare Engineering Pioneer Award (2003,) chaired our first commemorative button committee, served on several committees and most recently had been an active volunteer at the annual conferences with the Resource Committee. He will be missed.



### *Chapter Leaders! It's Time To Determine the Winner of your FREE 2016 ASHE Membership!*

Every year the WHEA board of directors provides a FREE ASHE MEMBERSHIP to each chapter. These free memberships are announced by the Member Services Committee during the annual meeting at the annual conference. Each chapter needs to determine who their individual FREE ASHE MEMBERSHIP winner will be for the next calendar year.

It is very important for chapter leaders to understand the purpose of the ASHE membership scholarships and who is eligible to receive them. These memberships should not be provided to anyone who is or has been an ASHE member in the past! The concept behind providing these memberships is to promote ASHE membership from within the ranks of those who for whatever reason have not been able to secure mem-

bership. For further clarification on the rules governing free membership scholarships from ASHE, please contact Roger Elliott at 715.563.2069, [rwelae@charter.net](mailto:rwelae@charter.net).

Because many chapters suspend meeting activities for the summer, it's easy to forget when you start up again in the fall that we need the name of the FREE ASHE MEMBERSHIP winner from each chapter prior to the Annual Conference. Several chapters hold elections for officers in the spring, and we suggest that this is also an excellent time to select the ASHE free membership nominee, as well. So, whatever method your chapter chooses to determine your recipient, please make sure that he/she is identified prior ASAP, but no later than the 2nd week of September!

### *2016 Annual Directory Errata & Addenda*

By now you should have received your copy of this year's annual directory. We hope you are enjoying this informative publication. Although we try our hardest to proof this directory for errors, sometimes things get past us. One major error came to our attention. The Furlong Industrial Systems, Inc. ad which was supposed to be a half page ad, was printed as an eighth page ad by mistake. Please check out their correctly sized ad below. We apologize for this error.

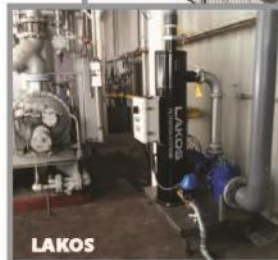


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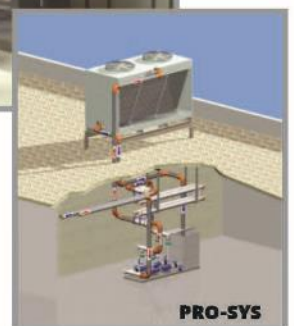


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## Chapter IV Report



*Robert Whitney*  
Chapter President

Our last meeting was on 5/19 at the Wausau Trap and Skeet Club. We had a dozen attendees, far short of the 31 who RSVP'd, which sadly is the new reality in our fast faced world. At the meeting, we voted in 3 new members. Our membership numbers are in a state of flux because of how Medexcel is requiring dues to be processed, so we have verbal commitments but no dues from a sizable contingent of our membership. We also had drawings for an all-expense paid trip to the annual conference, and a free ASHE membership. Topics of conversation included: updates on the Fire Life Safety Code; discussions about DNR site inspections; discussions about water contamination issues and simple solutions; and a round-table update by every member present. In lieu of education, we had our annual trap shooting contest. Our next meeting will be August 18<sup>th</sup> at Miron's office in Wausau.

## Chapter II Report



*Debbie Scherer*  
Chapter President

Chapter II met twice this quarter – once at the Esquire in April and lastly at our Annual Banquet in May to wrap up a successful year. At April's meeting membership approved a raffle using educational funds to sponsor 15 free registrations for members to attend the Annual Conference in Green Bay. These lucky winners have been notified and should be there in September. The meeting also saw the introduction of five new members: Welcome David Froeber (Rock County), Dwayne Strandlie (Stoughton Hospital), Matt Bell (US Vet), Jason Waack (WaterTech USA) and Roger Rhodes (Flad). Finally, an interesting discussion occurred with Fearings Audio and Video presenting security solutions aimed at protecting against increasing hospital security threats.

May's Annual Banquet saw a record crowd of members and guests with 54 people in attendance! The dinner was held at Green Acres Supper Club in Sauk City. Membership loved the venue so much, we voted to return again next year. At the banquet, two new officers were voted into the vacant Secretary and VP positions from an exciting slate of 4 nominees. Congratulations to Matt Georgeson from Reedsburg Area Medical Center who will be Vice President, while Craig Carlson with J.F. Ahern will be the incoming Secretary. Together these two officers will join Bryant Stempski who is moving up to fill the President position and current Treasurer John Pohlmann Sr to round out the Board. We look forward to a fabulous new year with your great leadership.

Chapter II only meets once over the summer for a fun day of brunch and golf at the Lake Windsor Golf Club on August 12. Everyone is welcome to join us, so please contact Jim Procknow at [james.c.procknow@jci.com](mailto:james.c.procknow@jci.com) if you'd like to hit the little white ball around the course with us!

As always, please search for us on Facebook under WHEA Chapter II and **LIKE US** to follow all that we do:  
<https://www.facebook.com/groups/wheachapter2/>.

Thank you to all for your continued support of Chapter II and have a fabulous and safe summer.

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## *A Letter of Thanks...*

To: WHEA President Marc Teubert

Marc, I want to send this letter of thanks to you, Past President Al Neitzel and the entire board for the 50 year recognition I received at the 2015 annual conference. I also want to give special recognition and thanks to Roger Elliott and the Member Services Team for the service they have provided and continue to provide our members.

As I reflect back to that evening and to those 50 years, I want you, the board and in fact all the WHEA members to know how thankful I am for the positive impact WHEA had on my career.

Thanks to a Chief Engineer named Joe Hahn, I attended my first WHEA meeting in Madison in Sept. of 1963 when I was a maintenance man at St. Joseph's hospital in Beaver Dam working what was called the swing shift. No previous maintenance experience and a high school education. A guy by the name of Bob Botts was the host for the evening. THE REST IS HISTORY.

Over these 50 years I have connected with so many people through this organization that were always there, be it a phone call or face to face over a beer or two.

Thanks also to Tom Laabs who established the Resource team that provides an opportunity for retired members to stay active and involved.

I want to encourage the "newer" members to get involved and take ownership in our professional society. I can speak from experience -- the return on your investment of time will far exceed your expectations.

While I will stay connected with WHEA, Joyce and I are placing a greater focus on our nursing home visitation ministry.

Thanks again and we pray that you and your team will move WHEA to a new level.

Sincerely,  
Carl Budde



## Conference Committee Report



*Mike Blackwood  
Committee Co-Chair*



*Derek Marshall  
Committee Co-Chair*

Plans for the 51st WHEA Annual Conference at the KI Conference Center in Green Bay are close to complete. Registration has been open for about a month and the technical exhibition is almost sold out. We have an exciting education session agenda in the works and once complete will be placed on [www.whea.com](http://www.whea.com). The Tuesday evening open house will run from 5:00 to 7:00 pm and will be open for all registrants and their guests and tech exhibitors. Wednesday's technical exhibit will open at 9:30 am and end at 1:30 with a lunch planned for everyone in the tech exhibit hall. Thursday's annual banquet and awards program will be held offsite at The Automobile Gallery. It is a beautiful new venue in downtown Green Bay with vintage cars in an old automobile dealership setting.



*The Automobile Gallery & Event Center*



You don't want to miss this years conference. If you haven't registered already, do so TODAY!



## WHEA's 51st Annual Conference

**September 20 - 23, 2016  
KI Convention Center**

*Registration Now Open*

*at [www.whea.com](http://www.whea.com)*

## 2016 WHEA 51st Annual Conference

Dear WHEA Members,

Every year is a new opportunity to reset your goals! You are looking forward, trying to bring into focus how you can make 2016 the most successful you can ever imagine! It's an exciting and fascinating time of year but you and your organization are uncertain about how to do it best!



Greg Wooldridge and Mike McCabe have learned the disciplines and the state of mind that can help you in ways you cannot even begin to fathom: it's the Diamond Performance Framework and the Glad To Be Here mindset. They have been advising Fortune 500 organizations through the Diamond Performance Framework and the Glad To Be Here mindset. John Foley reverse engineered the methodology applied by the Blue Angels and Top Guns to create the Diamond Performance Framework. Greg Wooldridge lead the Blue Angels and later applied his leadership expertise at Fedex. Mike McCabe had the most unique opportunity to hold some of the highest commanding positions while at the US Navy and later applied his skills as the CEO of a large airline organization.

First of all, let me ask you this;

Do you know what your goals are?

Do you feel motivated to reach them?

Is there commitment from your team to achieve them?

Do you have a structure and a framework to get into action?

These may sound like very simple questions, and yet, you would be surprised to hear how many of us do not even have a basic system to achieve goals and implement them.



Click [Here](#) to play video  
use password: Gucci

If you've answered negatively to only one of the questions above, chances are you need the Diamond Performance Framework and the Glad To Be Here mindset.

The Diamond Performance Framework teaches six reproducible and transferable steps that enable teams and individuals to reach sustained levels of High Performance. In the Diamond Performance® Framework, the "purpose higher than self" represents your larger "raison d'être", that goes beyond the process.

To conclude, let me share with you the following overview given by Former Lead Solo pilot with the Blue Angels, John Foley, of the whole Diamond Performance Framework ;

Take action here to start your journey to high performance by joining us at the next Annual Conference with Greg Woodbridge and Mike McCabe in September 2016. Register today at [www.whea.com](http://www.whea.com)!

Glad To Be Here !!!





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## FGI Health Guideline Revisions

Submitted by Wade Rudolph,  
WHEA Advocacy Liaison, Codes & Standards Committee



Early in April, the 2018 FGI Health Guidelines Revision Committee gathered for a week and reviewed proposals for inclusion in the 2018 edition of the FGI Guidelines documents. The next step is for a draft manuscript to be developed and released for a public comment period, which will open in September

2016. This will be a chance for anybody in the field, whether it be designer, AHJ, owner, clinician, engineer, construction manager or interested individual, to comment on the changes that are being proposed. So everyone should be looking out for this, and I will be sure to post a link at that time on this group page.

In the meantime, I want to share some of the more interesting proposals to start a conversation among our members. Some of these include:

- *In new construction, all critical care patient care stations shall be patient rooms, not bays or cubicles.*
- *Pre- and post-op areas may be combined in one area as long as requirements of the most stringent are met.*
- *Imaging equipment room supporting a hybrid OR shall not be permitted to open directly into the hybrid operating room.*
- *Elimination of references to clear floor area to base minimum space requirements on clearances.*
- *Sterile processing areas shall consist of a decontamination room and a clean workroom connected with a door or pass-through that can be closed; a combined room with a decontamination area and clean work area shall only be permitted in small office-based practices that perform limited surgical procedures.*
- *Imaging room requirements will be determined by a table based on interventional level and patient acuity for the procedures to be performed in the room.*
- *Monolithic ceilings will no longer be required in restricted areas, including operating rooms.*

There was also a lot of discussion regarding whether diagrams should be provided in the Guidelines to show clearance requirements.

It would be great to get some initial comments and feedback from our group on some of these.

Comment away ...

## Education and Professional Development Committee (EPDC)



Jim Teunas  
Co-Chair

The 2nd quarter of site-based WHEA education programs provided both the "Spring Code Update" on May 18th and our 2nd Healthcare Construction Certificate" program on June 15th.

The "Spring Code Update" held in the Dells had 111 attendees and included code updates from the WHEA Code Committee on "DHS Updates", "ASHRAE Updates", "Wisconsin Plumbing Codes", and "Ambulatory Surgery Centers" plus presentations on "Signage-A Facilities Manager's Guide to Code Requirements and ADA Signage" by InPro and "Understanding the Facility Design and Performance Criteria of USP 797" by Clinical IQ, LLC. Evaluations returned rated this program very high.



Marc Teubert  
Co-Chair

The "Healthcare Construction Certificate" program was held on the east side of the state in Green Bay and had 117 attendees registered, continuing to be one of WHEA's more popular education programs. The WHEA Code Committee continues to make this an extremely important safety program for all healthcare facilities.

We have 1 more site-based program on the 2016 docket and that is our final "Healthcare Construction Certificate" program of the year scheduled for October 26th at the Plaza Hotel and Conference Center in Eau Claire.



### LUNCH & LEARN WEBINAR SERIES

The monthly Lunch and Learn webinars continued with 3 important topics, "ANSI/ASHRAE Standard 188-2015 Legionellosis: Risk Management for Building Water Systems Update" provided by Watertech of America, Inc., "Utility Risk Assessment" and "2012 Adoption of the Life Safety Code" both presented by Bill Lauzon and Heather Werner of Lauzon Life Safety Consulting. A short synopsis of these 3 webinars can be found on the next page. The next webinar in the works is the July 14th webinar titled "A Joint Commission Update on New Processes and Tools" and will be presented by James Kendig and Timothy Markijohn of the Joint Commission.

Registration for the year-long subscription is still open on [www.whea.com](http://www.whea.com) under the "Education" tab. You will receive recordings to the webinars you've missed so far.

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## *April, May, June Lunch & Learn Webinar Recap*

*by Heather Werner, Education & Professional Development Committee*

### **April 14th - ANSI/ASHRAE Standard 188-2015 Legionellosis: Risk Management for Building Water Systems**

Legionella, is a gram negative, aerobic, waterborne pathogen that causes Legionnaires' disease - a serious but preventable form of pneumonia, as well as Pontiac Fever, a flu-like illness. This bacteria is estimated to be present in up to 70% of all building water systems. It is often contracted when aerosolized water droplets containing Legionella bacteria are inhaled, from contaminated respiratory therapy equipment, or aspiration of contaminated water.

Standard 188 was developed from ASHRAE Guideline 12. Both of these documents should be referenced when developing

Compliance with Standard 188 will require facilities to:

1. Establish a Team w/assigned responsibilities & accountabilities
2. Have, Practice, & Audit a Water Management Plan for legionellosis risk management in building water systems. Water Management Plans contain:
  - Description of the water system including flow diagrams
  - Analysis of water systems in the building and assessment of the hazard
  - Established Hazard Controls- control measure as necessary for
    - New Construction • Siting • Startup and Shutdown • Inspections • Maintenance • Cleaning and Disinfection • Monitoring (e.g., temperatures; disinfectant levels) • Water Treatment • Responding to Legionnaires' disease at your facility.
  - Procedures to monitor hazard controls
  - Evaluation of the effectiveness of the plan

### **May 12th - Risk Assessments per NFPA 99**

Risk assessments determine the seriousness of a failure. The severity score (1,2,3,or 4) is based on

*(continued on page 12)*

## *Chapter III News*



*Rick Helfrich  
Chapter President*

Our May 19th meeting was held at Aurora Medical Center in Oshkosh with 26 members in attendance. The business meeting was followed by two educational programs; Flooring by Macco's Commercial Interior's, Inc. and Lock Out Tag Out by Bradley Corporation.

Treasurer and committee reports were given and new member applications were approved.

The annual golf outing is scheduled for Wednesday, July 27th at Royal St. Patricks Golf Links and an email invitation has been sent out for both attendee and sponsor sign up. Please contact Amy Cote if you have questions: [acote@cecinfo.com](mailto:acote@cecinfo.com).

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## Webinar Recap

(continued)

the impact that failure of the system would have on patients, staff, and visitors if there were no human intervention. The categories of impact are:

1. High Patient Impact – Death or serious injury
2. Minor Patient Impact – Minor injuries
3. Slight Patient Impact – Discomfort
4. No Patient Impact

The level of risk for each space determines the code requirements.

The risk assessment should be conducted with a multidisciplinary team for every required utility system (med gas, electrical, HVAC) in every room of the facility.

Once the level of risk in each space is determined, you must evaluate whether or not you are providing the required level of protection for each situation. This will require collecting and evaluating data. Findings are to be recorded and reported to the executive team, EOC Committee, and Safety Committee. This information should be used to update management plans, policies and procedures, and inspection programs.

### June 9th - 2012 NFPA 101 Life Safety Code

The 2012 edition of NFPA 101 has been adopted by CMS as of July 5, 2016. The effective survey date is Nov 1, 2016. Be aware that although the July 5<sup>th</sup> date marks the cut off between new and existing for CMS, Wisconsin surveyors may evaluate the facility according to the “new” chapter of the code edition that was adopted at the time of construction. CMS has added some requirements regarding ABHR’s and is keeping the 2000 requirement for outside windows and sill height. They have also changed some of the requirements from what was published by NFPA including:

- Healthcare definition
- Ambulatory definition
- Size of projections allowed
- Roller latch exception

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In addition to the categorical waivers, some of the more significant changes in the 2000 vs the 2012 edition and the referenced codes include:

- A new chapter dealing with building rehabilitation
- Door inspections
- Sprinkler documentation
- Fire response plans
- Sprinkler outages
- Standpipe testing
- Dry sprinkler replacement
- Fire alarm and signaling system interfaces
- Risk assessments
- Electrical panels
- Commissioning HVAC systems
- OR wet locations
- Generator inspections and testing
- More documentation

Take advantage of available training opportunities to help become more familiar with the new requirements.




## *2016 Robert H. Botts Healthcare Engineering Pioneer Award Nominations Needed! Deadline has been extended to July 31, 2016.*

The WHEA Robert H. Botts Healthcare Engineering Pioneer Award is presented annually by the state board in order to provide additional recognition to WHEA members who demonstrate significant levels of achievement in, or make significant contributions to the various disciplines within the field of health care facilities management. This award is presented to a candidate who has been nominated by one or more of his/her peers, evaluated by the elected state board members by comparing all nominations received against a criteria-based scoring grid, and subsequently determining a recipient by a simple majority vote.

WHEA members who wish to nominate someone for this award should submit nomination papers prior to July 31st, 2016 so the board can evaluate all the nominations at the August board

meeting and be able to present the award at the 2016 Annual Banquet & Awards Program.

A more detailed description of the award concept, its purpose, the qualifications of candidates and an outline of the nomination and selection process is included in the following 2 pages of this newsletter. Please consider placing the name of one of your peers in nomination for the Pioneer Award. There is no shortage of very worthy candidates within our ranks. Please address any questions about the award, the nomination process, or any other concerns you may have to the WHEA Members Services Committee chair, Roger Elliott, 715.563.2069, [rwelae@charter.net](mailto:rwelae@charter.net) or WHEA President, Marc Teubert, [marc.teubert@gmail.com](mailto:marc.teubert@gmail.com) 920.369.8334.



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Ron Piotrowski  
Plant Operations

"Our annual savings are \$21,000 over the original estimate. The project has been a huge success. We couldn't be happier with the savings and performance."

Dave Arnold  
Facilities Manager

"As a result of the improved combustion and high turndown capabilities of the Riello Burner, we have dramatically reduced our fuel usage."

Jeff Vandenberg  
Mechanical Services Crew Leader

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# Wisconsin Healthcare Engineering Association

## HEALTHCARE ENGINEERING PIONEER AWARD

The intent of this award is to annually recognize a member of WHEA who has made significant contributions through personal or professional initiatives to improve and promote health care facilities management or the health care industry, in keeping with the mission statement of the organization: "The Wisconsin Healthcare Engineering Association serves the community by providing a safe and comfortable environment for health care through the application and practice of health care engineering developed through education, professional growth, and advocacy in codes and standards."

### The AWARD:

Will be presented annually and consists of an engraved plaque displaying the WHEA logo, the recipients name and chapter, and the year awarded. Additionally, a letter recognizing the award with a brief synopsis of details of the recipient's accomplishments will be presented to both the recipient and his/her CEO/President.

### Qualifications:

In order to be nominated for the WHEA Healthcare Engineering Pioneer award, the candidate must meet the following criteria:

- Must be a current member of the WHEA
- Must have held continuous membership for a minimum of three (3) years
- Must not be a current elected state board member or an elected board member during the previous calendar year.

### Achievements & Contributions:

In order to be selected for the WHEA Healthcare Engineering Pioneer award, the successful candidate must have attained a significant level of achievement (as a professional working in the field of health care facilities management, or allied health care professions,) in one or more of the following areas:

- through achievement of significant operational efficiencies,
  - through implementation or design of cost containment strategies,
  - through significant innovation in facility design,
  - through innovative facilities management practices,
  - through innovative safety initiatives,
  - through innovative technology initiatives,
  - through innovations in construction management strategies,
  - through participation in citizen advisor boards or other advocacy projects where personal facilities management expertise or applied engineering excellence:
- 
- significantly improved the overall quality of health care in the community(s) being served,
  - significantly improved accessibility to health care services,
  - significantly improved local, state, or national code compliance or code revisions, or
  - significantly improved levels of health care services to the community(s) served.

### Selection Procedure:

1. Candidates must be nominated by another member of the WHEA, in writing, including:
  - A written narrative of not less than 250 words, describing the actions that you feel qualifies your nominee for the Healthcare Engineering Pioneer award.
  - Include one (1) additional letter of support if so desired (not required)
  - Attach other supporting documentation as needed to validate the accomplishments of the nominee.
2. Nomination papers must be submitted to the current state WHEA President for the previous calendar year, prior to June 30<sup>th</sup> of the current year.
3. The WHEA elected state board members will evaluate all submitted nomination papers, with the aid of a criteria-based scoring grid.
4. The selected recipient will be determined by a simple majority vote of the elected state board members.
5. The award will be presented to the selected recipient by the President of WHEA at the Annual Banquet or other appropriate event or venue prior to the end of the calendar year.



# Wisconsin Healthcare Engineering Association

## HEALTHCARE ENGINEERING PIONEER AWARD

### Nomination Form

I nominate the following individual for the \_\_\_\_\_ WHEA Healthcare  
Engineering Pioneer Award. Year

NAME: \_\_\_\_\_

TITLE: \_\_\_\_\_

ORGANIZATION: \_\_\_\_\_

FACILITY: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

PHONE: (     ) \_\_\_\_\_ EMAIL: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

MANAGER/CEO/PRESIDENT: \_\_\_\_\_

PHONE: (     ) \_\_\_\_\_ EMAIL: \_\_\_\_\_

#### NOMINATED BY:

NAME: \_\_\_\_\_

TITLE: \_\_\_\_\_

ORGANIZATION: \_\_\_\_\_

FACILITY: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

PHONE: (     ) \_\_\_\_\_ EMAIL: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

#### ATTACHMENTS/INCLUSIONS: (Check all that apply.)

\_\_\_\_ Nomination Narrative

\_\_\_\_ One additional letter of support (Optional) Limit, one (1)

\_\_\_\_ Support documentation: Published articles, Financial documentation, and other documents as needed to validate the accomplishments of the nominee.

## Chapter V Update



*Rick Casper*  
Chapter President

Chapter V had its second business meeting of 2016 at Mayo Clinic Health System – Eau Claire on 04/28/2016.

We had an abbreviated business meeting because of our MECH Training that was taking place after the business meeting.

After reports we discussed the MECH certification and showed the group how to navigate the WHEA website to find more information and to highlight the wealth of information to be found on the WHEA website.

We were excited to have two new full members approved and join Chapter V at our April meeting.

After the business meeting MECH training education was held with three different topics and presenters.

1. "Fasteners and Anchors" presented by Ben Seniola applications engineer with Fastenal
2. "Air Systems in Healthcare Facilities" presented by Kris Dubiel HVAC engineer with MEP Associates
3. "Safety and Accident Prevention" presented by Jackie Torgerson Certified Safety Professional with United Heartland.

We had 35 mechanics attend the training presentations. Chapter V appreciates the time and energy our presenters and associate members contribute to our Chapter V MECH training day.

Chapter V held the annual Chapter V golf outing on June 16<sup>th</sup> at Rolling Oaks golf course in Barron.

Future Chapter V meeting dates and locations for 2016:

August 18 – Business meeting - Emerald Ridge – (Menomonie)

October 20 – Business meeting – MCHS Oakridge – (Osseo)



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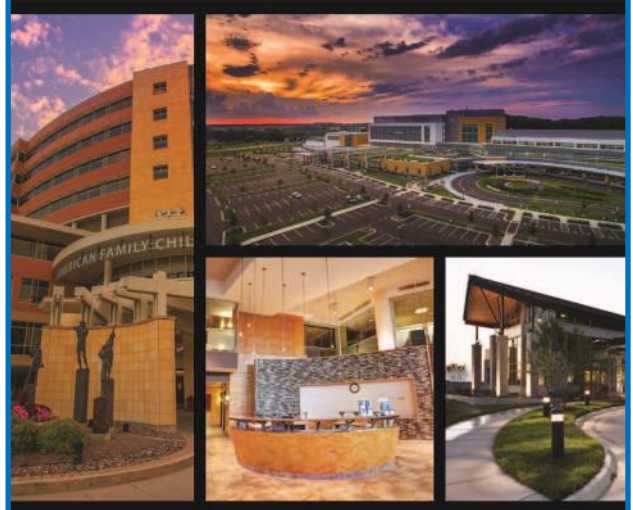


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## Codes and Standards Committee

### WHEA Codes & Standards Committee



Jeff Eckstein  
Co-Chair

Starting on page 18 you will find a Code Critical Update article provided by WHEA's Codes and Standards Committee. These special newsletter articles will focus on time sensitive or quick hitter code related topics that may not warrant a full blown Code Alert.



David Soens  
Co-Chair

#### CMS Adoption of the 2012 Life Safety Code®

As you likely have heard, CMS has officially adopted the 2012 Life Safety Code – NFPA 101 and NFPA 99 on 5/4/16. Here are the highlights of the adoption. Refer to the S&C: 16-29-LSC (attached) for more detail.

- Notice of Proposed Rulemaking was announced.
- Refer to <https://federalregister.gov/a/2014-08602> for more info on the initial rulemaking.
- The Centers for Medicare & Medicaid Services (CMS) has adopted by regulation the 2012 LSC (NFPA 101) and the 2012 Health Care Facilities Code (HCFC) - NFPA 99.
- The CMS will begin surveying for compliance with the 2012 LSC and HCFC on November 1, 2016.
- CMS will offer an online transitional training course for existing LSC surveyors to provide an update on the new requirements.
- The Joint Commission enforcement date is November 7, 2016
- WI DHS is anticipated to begin plan reviews for the 2012 NFPA 101 in the first quarter of 2017.

#### DHS 124 Revision

Wisconsin Act 236 was passed on April 8, 2014. This law basically states that as of 7/1/16 hospitals must comply Medicare's Conditions of Participation for Hospitals (CoPs) – refer to 42 C.F.R. Part 482 or for critical access hospitals, 42

C.F.R. Part 485. After 7/1, DHS will not be using most of DHS 124. The department is in the process of rewriting DHS 124 and should be complete in early 2017. So, in a nut shell; DHS 124 Subchapter II - Hospital Management, Subchapter III - Medical Staff, and Subchapter IV Hospital Required Services go away and refer to the federal requirements. The new law still states that DHS will conduct plan reviews as usual and Subchapter V – Physical Environment is used until it's recreated.

#### New Co-Chair

And last, but not least, we have a new Co-Chair for the Codes and Standards Committee. At the 6/3/16 Board meeting, President Marc Teubert appointed Dave Soens, PE, RA to the role.

He is the Life Safety Fire Authority in the Bureau of Education Services & Technology within the Division of Quality Assurance. Dave is the Departments Fire Authority, physical environment technical consultant and liaison to the Centers for Medicare and Medicaid Services. Dave previously served as the director of the Departments statewide engineering team for hospitals, nursing homes, and assisted living providers. Dave has been an active member of ASHE and WHEA for over 15 years. He currently is assisting the development of the upcoming 2018 FGI Guidelines.

We are grateful Dave has stepped up to take on this role and confident with him in this position, the Codes and Standards Committee will achieve new heights. Given all the code change we will all be managing going forward, we truly believe the timing of Dave coming on board is perfect.





**Center for Clinical Standards and Quality/Survey & Certification Group**

**Ref: S&C: 16-29-LSC**

**DATE:** June 20, 2016

**TO:** State Survey Agency Directors

**FROM:** Director  
Survey and Certification Group

**SUBJECT:** Adoption of the 2012 edition of the National Fire Protection Association (NFPA) 101 - Life Safety Code (LSC) and 2012 edition of the NFPA 99 - Health Care Facilities Code (HCFC)

**Memorandum Summary**

- The Centers for Medicare & Medicaid Services (CMS) has adopted by regulation the 2012 LSC and the 2012 HCFC. The regulation effective date is July 5, 2016.
- CMS will begin surveying for compliance with the 2012 LSC and HCFC on November 1, 2016.
- CMS will offer an online transitional training course for existing LSC surveyors to provide an update on the new requirements. The course will be available on September 2, 2016 via the CMS Surveyor Training Website.
- CMS will update the ASPEN program (i.e., the information system which tracks surveys) and CMS Fire Safety Forms (2786) prior to the November 1, 2016 survey start date.

**Background**

The purpose of this policy memorandum is to notify the State Agencies (SA) and Regional Offices (RO) that CMS has adopted by regulation the NFPA 2012 LSC and 2012 HCFC. This memorandum supersedes S&C 03-21. In addition, this policy memorandum is intended to notify the SAs and ROs on the status of associated training, survey forms, and ASPEN program.

**Regulation**

On May 4, 2016, CMS adopted the 2012 LSC and the 2012 HCFC by final rule. The final rule was published in the Federal Register (Vol. 81, No. 86), is entitled "Medicare and Medicaid Programs; Fire Safety Requirements for Certain Health Care Facilities", and is effective July 5, 2016. The final rule also adopted 2012 LSC Tentative Interim Amendments (TIA) 12-1, 12-2, 12-3, and 12-4, and 2012 HCFC TIA 12-2, 12-3, 12-4, 12-5 and 12-6.



The final rule eliminates all references to the previously adopted 2000 edition of the LSC, and requires providers and suppliers to comply with the 2012 LSC with certain modifications, and the 2012 HCFC excluding chapters 7, 8, 12, and 13 by the effective date of July 5, 2016.

Buildings constructed before July 5, 2016 can meet Existing Occupancy requirements. In addition, buildings that receive design approval or building permits for construction before July 5, 2016 can meet Existing Occupancy requirements. All other building construction must meet New Occupancy requirements.

The final rule includes requirements for Religious Non-Medical Health Care Institutions (RNHCI), Ambulatory Surgical Centers (ASC), Hospice, Program of All-Inclusive Care for the Elderly (PACE), Hospitals, Long Term Care, Intermediate Care Facilities for Individuals with Intellectual Disabilities (ICFs/IID), and Critical Access Hospitals (CAH).

The final rules continues to allow CMS to waive, for periods deemed appropriate, specific provisions of the Life Safety Code, which would result in an unreasonable hardship upon a facility, providing the waiver will not adversely affect the health and safety of the patients.

The final rule also continues to allow the ability of a State to request that its State fire safety requirements, imposed by State law, be used in lieu of the 2012 edition of the LSC and HCFC with CMS.

### **Survey Process**

**CMS will begin surveying facilities for compliance with the 2012 edition of the LSC and HCFC on November 1, 2016.** In addition, this will allow CMS the opportunity to train existing surveyors, revise fire safety survey forms, and update the ASPEN program.

Surveyors will continue to use the current process, tags and forms until November 1, 2016. In instances where the survey process identified deficiencies that would be compliant under the 2012 LSC, a facility may verify compliance with the 2012 LSC as an acceptable plan of correction and the deficiency would not be cited.

The LSC shortened survey process, outlined in the CMS Survey and Certification letter (<https://www.cms.gov/Medicare/Provider-Enrollment-and-Certification/SurveyCertificationGenInfo/Downloads/Survey-and-Cert-Letter-13-22.pdf>) will no longer be able to be used after October 31, 2016. CMS will analyze the data required to determine which facilities will be able to be surveyed using the shortened survey process. Any State that believes losing the shortened survey process for a period of time will cause it staffing and/or scheduling difficulty should contact their Regional Office immediately with their concerns. CMS will notify State Survey Agencies if the determination is made to use the LSC shortened survey process again.

**Training:** CMS will provide an online transition course for existing LSC surveyors. The transition course is intended to inform existing surveyors of the new regulatory requirements and instruct existing surveyors on how to apply the new Codes when surveying health care facilities.



The transition course will be self-paced and will take approximately 20 hours to complete. It will begin with a pre-test and conclude with a post-test that will require a passing score of 85 percent. All existing SA surveyors that conduct LSC surveys are required to complete the transition course and obtain a passing score before conducting LSC surveys using the 2012 LSC and HCFC.

The transition course will address: the requirements of the adopted regulation and associated policy and procedures; changes that have occurred in the Health Care Occupancies, Ambulatory Health Care Occupancies, Residential Board and Care Occupancies, and Building Rehabilitation chapters of the LSC; changes that have occurred in the NFPA 99; and the K-tags associated with new CMS-2786 forms.

**This course will be available to all existing LSC surveyors on September 2, 2016 via the CMS Surveyor Training Website.**

The reoccurring 2012 Basic Life Safety Code, NFPA 99, FSES/Health Care, and FSES/Residential Board and Care courses for new LSC surveyors will also be updated, and information regarding these courses will be provided when course development is complete. All previous prerequisites and requirements for new LSC surveyors to attend these reoccurring courses will continue.

**ASPEN:** The ASPEN program will be updated with new regulation sets that correlate with the 2012 LSC and HCFC requirements and associated K-tags. **The ASPEN system will be updated prior to the November 1, 2016 survey start date.**

If you have questions concerning this memorandum, please send them to [SCG\\_LifeSafetyCode@cms.hhs.gov](mailto:SCG_LifeSafetyCode@cms.hhs.gov). To view the Final Rule, 05042016 Fire Safety Requirements Final Rule please see <https://www.federalregister.gov/articles/2016/05/04/2016-10043/medicare-and-medicaid-programs-fire-safety-requirements-for-certain-health-care-facilities>

**Training:** Immediately. The information provided in this memorandum should be communicated with all survey and certification staff, their managers, and the State/Regional Office training coordinators within 30 days of this memorandum.

**Effective Date:** CMS will begin to survey all health care facilities referenced in this final rule for compliance with the 2012 editions of the LSC and HCFC on November 1, 2016.

/s/  
David R. Wright  
Acting Director

cc: Survey and Certification Regional Office Management



# Are You A New WHEA Member ? Or Current Member Without Members Only Website Access?

Email Jane at [bruvold@sbcglobal.net](mailto:bruvold@sbcglobal.net) with what you would like for a password and she will set you up with members only access. It's fast and easy.

If you do have access, take a minute to go into the database and doublecheck your listing. Please send Jane any edits.

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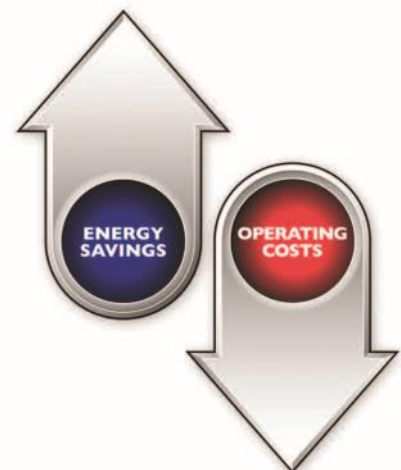
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# Employment Opportunities

Are you looking for a change -- an opportunity to advance your career?

Check out the following pages for employment opportunities available for healthcare facilities professionals.

## Aspirus Wausau Hospital

### Master Electrician

The Master Electrician is accountable for Aspirus facilities electrical systems design, operation and maintenance. Installs, tests and repairs electrical components and power distribution circuits

#### Education

- Knowledge of electrical standards and practices normally acquired through completion of a high school diploma or equivalent, and completion of a State approved electrician apprentice program.
- An Associate/Technical School Degree in Industrial Electronics with courses in blueprint reading, mathematics and physics beneficial.

#### Experience

- Ten years' experience as an electrician.
- Background in industrial and commercial construction and maintenance with an emphasis on maintenance and service necessary to enhance and develop skills.

#### Required

Possesses an active Wisconsin Master Electrician license.

#### Driver's License Required

Possesses a valid Wisconsin Driver's License.

For more information contact:

[www.aspirus.org/careers](http://www.aspirus.org/careers)

or email [Tammy.Bents@aspirus.org](mailto:Tammy.Bents@aspirus.org).

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Aspirus Wausau Hospital is a [Magnet](#) facility licensed for 325 beds that is staffed by 350 physicians in 35 specialties. It is the flagship of the Aspirus system that serves patients in 14 counties across northern and central Wisconsin, as well as the Upper Peninsula of Michigan.

Aspirus Wausau Hospital provides primary, secondary and tertiary care services as a regional referral center. Specialty referral service emphasis exists in cardiology and cardiothoracic surgery, orthopedics and cancer. The hospital has an average daily inpatient census of 160 with approximately 15,000 admissions per year. Outpatient visits exceed 50,000 and there are also more than 24,000 annual emergency department visits.

Best known for its world-class cardiovascular program, Aspirus Wausau Hospital also provides leading edge cancer, trauma, women's health, and spine and neurological care.

The hospital is continually recognized nationally for the level of care it provides. Aspirus Wausau Hospital has earned high quality ratings or awards from prominent quality agencies such as HealthGrades, Thomson Reuters, Truven Health, Becker's Hospital Review, Mission: Lifeline® and U.S. News & World Report.



## *Employment Opportunities*

### **Children's Hospital**

#### **Facilities Operations Manager**

At Children's Hospital of Wisconsin, we believe kids deserve the best.


Children's Hospital is a nationally recognized health system dedicated solely to the health and well-being of children. We provide primary care, specialty care, urgent care, emergency care, community health services, foster and adoption services, child and family counseling, child advocacy services and family resource centers. Our reputation draws patients and families from around the country.

We offer a wide variety of rewarding career opportunities and are seeking individuals dedicated to helping us achieve our vision of the healthiest kids in the country. If you want to work for an organization that makes a difference for children and families, and encourages you to be at your best every day, please apply today.

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