

Wisconsin Healthcare Engineering Association

Newsletter

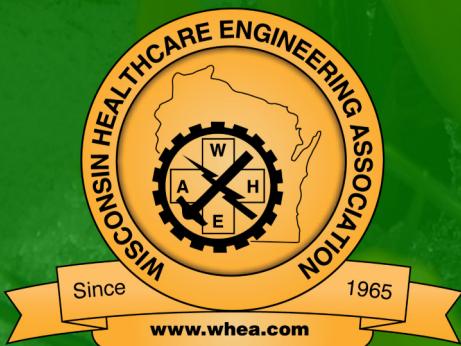
March 2018

Volume 28

1st Quarter

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Duke Cook
WHEA President

President's Message

The days are getting longer and the sun is shining on our WHEA organization. Spring is in the air! Much is going on in WHEA. The budgets are finalized and financials are solid.

The committees are in full swing, educational opportunities are in place and the 2018 La Crosse conference planning is well underway. Many thanks to the volunteers for their time and diligent work as we look forward to another wonderful educational event coming up this fall.

The Foundation is just getting started and future expectations are very exciting. We are hearing more of the possible opportunities to help with the education of trades people in support of healthcare facilities maintenance and management needs.

And then there are our greatly appreciated WHEA Sponsors! We have eight Platinum sponsors this year and that is a record for us. Without the skills, talent, and funding from the many sponsors of our organization and the facilities we work in, we would surely struggle to provide safe and comfortable care for the patients and staff we support.

We are on track with meeting our goals for ASHE Affiliation and the support from our WHEA chapters continues to provide opportunities for our members and give excellent feedback and direction to our State board leaders.

I do ask each of you to actively participate in your local chapters' activities and consider taking future leadership roles to ensure that WHEA remains a leader in providing education, advocacy and outreach in our healthcare organizations.

Best regards to all,

Duke Cook

Thank you to our 2018 Sponsors for their support!

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2018 WHEA CALENDAR

Thursday, April 5

~ Chapter II Meeting

Friday, April 6

~ Conference Committee Conference Call 9:00 am

Thursday, April 12

~ Lunch ☉ Learn Series Webinar 11:30 am to 1:00 pm

~ Chapter I Meeting

Thursday, April 19

~ Chapter V Meeting

Tuesday, May 1

~ Chapter VI Meeting

Thursday, May 3

~ Chapter II Meeting

Thursday, May 10

~ Lunch ☉ Learn Series Webinar 11:30 am to 1:00 pm

~ Chapter I Meeting

Friday, May 11

~ Education and Professional
Development Committee Meeting 9:00 am

Wednesday, May 16

~ Chapter IV Meeting

~ Spring Code Conference

Thursday, May 17

~ Chapter III Meeting

Friday, May 18

~ Foundation Meeting

Friday, June 1

~ Board Meeting 9:00 am - Noon

~ Member Services Meeting
1:00 pm – 4:00 pm

Tuesday, June 12

~ Code Committee Meeting
12:30 pm

Thursday, June 14 – 11:30 am

~ Lunch ☉ Learn Series Webinar

Thursday, June 21

~ Chapter V Meeting

~ Healthcare Construction
Certificate Program (HCC)

Thursday, June 28

~ Chapter I Banquet

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

Email Jane at info@whea.com 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. Send Jane any edits.

Conference Committee Update



*Mike Blackwood
Committee Chair*

The WHEA Annual Conference will be held in La Crosse at the La Crosse Center on September 18 through September 21. On April 6th the Conference Committee meets to continue its annual conference plans. Our education agenda has been completed with an amazing line up of speakers that will update our healthcare managers and directors on all the current state code updates and other major relevant, hot topics. The technical exhibition has only a few booth left to sell and then it will be sold out for yet another year, and our special event coordinators are completing plans for our annual banquet that will make the 2018 annual conference one to remember. The conference coordinator plans on having everything in place to open up registration on April 9th. Watch your mail for a conference flyer and check www.whea.com under the Annual Conference tab for the link to registration.

ANNUAL CONFERENCE DATES

September 18 - 21, 2018

September 17 - 20, 2019

September 29 - October 2, 2019

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Code Critical Codes & Standards Committee



Jeff Eckstein
Co-Chair



David Soens
Co-Chair

The Department of Safety and Professional Services (DPS) is updating the Wisconsin Commercial Building Code SPS 361- 366. The 2015 IBC and related amendments have been adopted and are awaiting publication.

The effective date for the updated rules will be May 1, 2018. Commercial plans submitted on or after May 1st will need to comply with the updated rules. The rules (CR 16-094) may be accessed on the DPS website [here](https://dps.wi.gov/Documents/RulesStatutes/SPS361to366AO.pdf?utm_medium=email&utm_source=govdelivery):

(https://dps.wi.gov/Documents/RulesStatutes/SPS361to366AO.pdf?utm_medium=email&utm_source=govdelivery)

or on the Legislative Reference Bureau's (LRB) website [here](http://docs.legis.wisconsin.gov/code/admin_code/sps/safety_and_buildings_and_environment?utm_medium=email&utm_source=govdelivery)

(http://docs.legis.wisconsin.gov/code/admin_code/sps/safety_and_buildings_and_environment?utm_medium=email&utm_source=govdelivery).

(continued on page 6)

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Codes & Standards Committee (continued)

DHS Plan Review and On Site Inspections

The authority for DHS plan review specifically relates to the building, heating ventilation and air conditioning (HVAC) systems, and fire protection system construction projects for health care facilities.

Pre-design meetings for all health care projects are structured to promote compliance with the appropriate codes, familiarize the design team with Wisconsin inspection processes, and establish communication links. As part of the process, it is highly recommended that a pre-design meeting be established with all stakeholders early in the early planning states of any health care project.

DHS grants “permissions to start” for footings and foundations. The permission to start form, additional fee payment, completed application and construction/remodeling plan must all be submitted in order to grant this permission.

Unique systems not reviewed by DHS for the providers listed above include plumbing systems, private onsite waste treatment, elevators, boilers, and mechanical refrigeration systems. These systems are under the jurisdiction of the Department of Safety and Professional Services for review. Information regarding their plan submittal process is available at: <http://dsps.wi.gov/Plan-Review>

Regarding onsite inspections of construction projects; hospital and nursing home surveys remain a priority for DHS. Recent changes in DHS staffing also reinforce plan review as a priority over inspections. The current open positions are being addressed through the process of recruitment.

As DHS works to replace staff, the process of In Wall, Above Ceiling or Final Inspections may be different than in the past and may vary based on the scope and complexity of the project. It is suggested you work with your contact person from DHS to establish expectations regarding these inspections through the Pre-Design meeting described above. Some owner's may want to consider developing a program of higher level self-inspections that rely on the A/E and construction professionals to ensure work put in place is in compliance with plans and specifications.

Additional info on the DHS plan review process can be found at: <https://www.dhs.wisconsin.gov/regulations/plan-review/index.htm>


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Chapter IV Spring 2018



*Daron Juneau
Chapter President*

Greetings fellow WHEA members!

Spring is in the air once again. If you're like me, the mind wanders toward fishing, golfing, hiking... pretty much *anything* outside! Spring is a time of restoration. As nature arises from its slumber so should we. It's a great opportunity to reflect on the goals we set for the new year (I don't do resolutions). So how's your progress? Or maybe it's time to reach out to family and friends to plan some warm-weather fun.

Speaking of which, we in Chapter IV are looking forward to our May 16 meeting at the Wausau Skeet & Trap Club in Brokaw and our August meeting & golf outing. But before we start dreaming of clay birds and little white eggs, we must first secure (or hogtie?) our next Officer-at-Large. I'm hoping to accomplish this at our March 21 meeting at the Aspirus Medical Education Center where we'll be hearing from Heather Lauzon Werner about Scope and Rehabilitation and Plan Submittals for construction projects.

In the "bad news" department, Chapter IV has seen a significant decline in membership renewals for 2018. As I work on my #1 goal to reach out to our current and past members to determine and implement what we as a chapter must do to energize and engage more of our members, I'm hoping to renew the interest of those who didn't renew. I'm hopeful over the next couple months we'll see more renewals.

I welcome any input to help me in our endeavors and chapter leadership in general. Or if you feel I can be of assistance to you, please let me know. Feel free to contact me at daron.juneau@tweetgarot.com or 715-451-8981. Thanks in advance to Chris Dahlby for making the trip to join us at our March meeting to discuss opportunities for our chapters to bring excellent education opportunities to our members.

I'm looking forward to presenting a positive report for the next newsletter. Until then, I extend my best wishes to the WHEA family for a wonderful Easter!

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New CMS Emergency Preparedness Rules

Effective November 15, 2017 (Part 3)

By Marge McFarlane, PhD, MT(ASCP), CHSP, CHFM, CJCP, HEM, MEP

Principal of Superior Performance, LLC, LaPointe, WI

This is the third in a four-part series on the new CMS emergency preparedness rules that look at communications plans needed to support the emergency operation plan and emergency preparedness activities.

In Part 1, it was identified that there are eleven categories of providers or suppliers in Wisconsin that receive federal funding that are tasked with increasing the collaboration and coordination of emergency preparedness planning and response with other local, regional, tribal and state and federal response partners.

CMS key essentials for maintaining access to healthcare in an emergency include safeguarding human resources, maintaining business continuity and protecting physical resources.

In Part 2, it was identified that there were specific policies and procedures that needed to be developed for emergencies based on the hazard vulnerability assessment of the facility and the population served. These policies include safe evacuation, sheltering-in-place, security of confidential patient records and ensuring accurate medical information is available when requested.

Part 3, details the need for communication plans that determine how the facility will notify authorities, share information on occupancy levels, supply and other needs as well as the ability to assist during the emergency. The communication plan needs to be written and updated annually. A list of redundant communications tools as well as accurate contact information for local, regional, state and federal contacts should be completed as part of the Emergency Management Plan. Communication plans for notifying staff, physicians and providers as well as patients' families should outline criteria for communication as well as the protocols for safeguarding patient information per Health Insurance Portability Accountability Act (HIPAA) laws.

The WI Department of Health Services has developed Toolkits for Hospitals, Long-Term Care Facilities, Ambulatory Surgical Centers, Hospices, End State Renal Disease Facilities, and Clinics available at: <https://www.dhs.wisconsin.gov/preparedness/toolkits.htm>. These toolkits provide guidance to assist facilities in developing an emergency preparedness and communications plans. This plan and all related policies must be updated at least annually.

The Emergency Planning Checklists include templates for sharing emergency plan information, [a collaboration contact grid](#), a checklist for external contact, staff contact and volunteer contact information as well as physician contacts and residents' physicians' and family contact information (for long term care) and a HIPAA Decision Flowchart.

The last article in this series will discuss the remaining required component: Training and Testing.

By Marge McFarlane, PhD, MT (ASCP), CHSP, CHFM, CJCP, HEM, MEP

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PRESS RELEASE

Contact: Heather Livingston
heather@fgiguideines.org

FOR IMMEDIATE RELEASE

January 30, 2018

**FGI's 2018 *Guidelines* Released on MADCAD—
*Debut of Guidelines Dedicated to Outpatient Facilities***

The Facility Guidelines Institute (FGI) is pleased to announce the release of the 2018 *Guidelines for Design and Construction*. For the 2018 edition of its minimum standards, FGI has expanded the series from two to three documents: the *Guidelines for Design and Construction of Hospitals*; the *Guidelines for Design and Construction of Residential Health, Care, and Support Facilities*, and the newest publication in the series *Guidelines for Design and Construction of Outpatient Facilities*.

New Outpatient *Guidelines*

The U.S. health care industry is continually working to improve efficiency and patient satisfaction scores while reducing costs. These opposing pressures have helped to create a trend that is moving the provision of many services from hospitals to outpatient facilities. Surgeries once limited to hospital settings, such as joint replacements, are now offered in ambulatory surgery centers; some procedures formerly limited to procedure rooms are now conducted in exam rooms; and some exams are now performed via telemedicine. These trends impact not only the delivery of care, but also the design of health care facilities. To support this evolution in practice, FGI separated its design and construction requirements for hospitals from those for outpatient facilities.

The primary goal in developing the new Outpatient *Guidelines* was to make it flexible enough to address the expanding variety of outpatient facilities being designed today. Included facility types range from small clinics, doctor's offices, and tenant improvements in a larger building to medical office buildings that house multiple clinical services and large freestanding imaging or surgery centers. As well, the Outpatient Document Group, a subcommittee of the Health Guidelines Revision Committee, added text to help users of the document apply its requirements to projects of all sizes and complexities. "We kept keenly focused on what a minimum requirement could be that established the best possible patient care/experience while watching every dollar spent on facilities," explains John P. Kouletsis, AIA, EDAC, Outpatient Document Group chair.

"Tremendously comprehensive"

The forthcoming edition of the Outpatient *Guidelines* is a tremendously comprehensive document that represents the contributions of many who have designed, constructed, and delivered patient care in these types of settings. The outpatient document is specifically geared to serve as a reference point for ambulatory surgery centers and other outpatient facilities considering new construction, expansion of services, and/or renovations.

David Shapiro, MD

Updates for Hospital *Guidelines*

Changes to the 2018 Hospital *Guidelines* clarify requirements and allow flexibility in some designs to support development of facilities that will be functional over the long term. Key changes affect requirements and recommendations for clinical telemedicine spaces; accommodations for patients of size; mobile/transportable units; sterile processing; and examination, procedure, operating, and imaging rooms. "In the development of the 2018 Hospital *Guidelines*, the Hospital Document Group took a good hard look at the previous edition to review, validate, or eliminate language to assure the new document

accurately reflects our understanding of what minimum standards are,” says Wade Rudolph, MBA, CHFM, Hospital Document Group chair.

Expanded Residential *Guidelines*

The 2018 Residential *Guidelines* document refines the 2014 edition requirements and—stemming from the needs of the residential long-term care marketplace—provides guidance for two additional facility types: long-term residential substance abuse treatment facilities and settings for individuals with intellectual and/or developmental disabilities. The revision committee made a concerted effort to base changes on evidence-based research, information from subject matter experts, and experience in the field across a broad spectrum of interrelated disciplines. Jane M. Rohde, AIA, FIIDA, ASID, ACHA, CHID, LEED AP BD+C, GGA-EB, Residential Document Group chair, calls the 2018 Residential *Guidelines* “real-life guidance that is directly applicable to the long-term care marketplace.”

FGI Partners with MADCAD for Superior User Experience

For a number of years, users of the *Guidelines* have requested site licenses to access the documents electronically. Fulfilling that request for the 2018 edition was a key priority for the FGI Board of Directors. FGI selected MADCAD to be the provider because, as the premier resource for online access to building codes and standards, the company delivers superior usability and flexibility. MADCAD provides firms with the ability to create a customized code library from more than 80,000 titles and access codes and standards from the field, view cross-references via live links, search the content, and create and save annotations in the documents.

MADCAD offers *Guidelines* users a variety of ways to access the 2018 documents, which can be tailored to each company’s needs. For example, *Guidelines* users are able to purchase the 2018 edition in paperback, single-user license, and site license formats. Bundling of the *Guidelines* products is available (including previous editions), with discounts calculated when ordering for multiple locations and users or purchasing multiple books.

Beyond Fundamentals

Concurrent with the release of the 2018 *Guidelines*, FGI is introducing a subscription-based Beyond Fundamentals service. Although the *Guidelines* content is updated every four years, health care trends and innovations emerge and evolve much more rapidly, significantly affecting the planning, design, and construction of health and residential care facilities. Beyond Fundamentals was conceived as a way to respond to this dynamic environment.

Beyond Fundamentals topics for 2018

- Detailed discussions of *Guidelines* requirements and how to apply them
- Research and tools related to requirements in the *Guidelines*
- Draft minimum requirements supported by research and evidence
- Emerging trends in practice that promise to change health care facility design

Resources will be presented in various formats, including white papers, videos, reports, and checklists.

The Beyond Fundamentals library is intended to augment the FGI *Guidelines* documents by expanding on their minimum design requirements. FGI will offer new and exclusive content in response to trends, practices, and new technologies in health and residential care settings.

Beginning with the 2018 *Guidelines*, a Beyond Fundamentals subscription will be included with an annual single-user or site license through MADCAD and offered to print book purchasers and others as a \$25/year subscription. As FGI continues to develop the Beyond Fundamentals library, subscribers can expect to access timely information and guidance regarding the latest thinking on how the built environment can better support

people, practices, and developing technology in health and residential care settings.

About the Facility Guidelines Institute

Founded in 1998, the Facility Guidelines Institute is a not-for-profit corporation founded to provide leadership and continuity to the *Guidelines* revision process. FGI functions as the coordinating entity for development of the *Guidelines* series of documents using a multidisciplinary, consensus-based process and for provision of ancillary services that encourage and improve their application and use. FGI invests revenue derived from sales of the *Guidelines* to fund research and the activities of the next revision cycle.

About the FGI Guidelines for Design and Construction Documents

The FGI *Guidelines for Design and Construction* documents are updated every four years to keep pace with new concepts, capabilities, and technologies in the delivery of health care. The *Guidelines* documents are used by states to regulate health and some residential care facility design and construction, through adoption of the *Guidelines* as code, as a basis for state-written codes, as an adjunct to state codes, or for reference.



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Wisconsin Healthcare Engineering Association

Robert H. Botts 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 30th 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

Robert H. Botts HEALTHCARE ENGINEERING PIONEER AWARD

Nomination Form

I nominate the following individual for the _____ WHEA Robert H. Botts
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.

ASHE Liaison Update



Gordy Howie
ASHE Liaison

ASHE held its first Board meeting of 2018 in Dallas, Texas on February 9th and 10th. The meeting consisted of orientation (5 new Board members), a briefing from Dale Wooden (AHA), and reviewing policies.

ASHE has combined HFM magazine and digital newsletters with its existing communications. The first edition of ASHE's Health Facilities Management was distributed in January 2018. ASHE's HFM media will also include three electronic newsletters featuring information and resources related to facility management - planning, design, and construction, and Environmental Services. ASHE will be collaborating with the Association for the Healthcare Environment (AHE) to create the Environmental Services newsletter and environmental services information for the magazine.

The ASHE Listserv has sun-set. The new format is My ASHE <https://my.ashe.org/home>. This is also the new portal to "volunteer with ASHE" to serve on committees or work groups. Members are able to view current volunteer opportunities and can earn badges for volunteering. There is also a "redirect" through AHA when you log in. If you have any issues, use the "help" button. They are quick in resolving issues.

The Planning, Design, Construct, (PDC) conference in Nashville, Tennessee is March 25-28.



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*Source: WHEA HOC Renewal List



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ASHE's National Conference and Technical Exhibition are in Seattle, Washington this year on July 15-18.

Let me know if you are interested in a CHC or CHFM exam waiver. The waiver takes care of the cost of the exam.

Region 6

Ellen Schonteich (formally Rassmussen) has resigned from her role as Region 6 Conference Committee Co-Chair. Jim Kent has graciously volunteered to step in and was accepted by vote. Ellen did great work for ASHE and she will be missed.

The ASHE Region 6 Conference is fast approaching. Dates are April 19-20 in Rochester, Minnesota. We need a representative from Wisconsin to serve on the Conference Planning Committee. **Please consider participating.**

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Chapter VI Report



Dennis Havlik
Chapter President

Chapter VI has held 3 meetings since the last newsletter. At the November meeting Jeff Lee and John Fetzer of Total Water presented a program on "Purified Water Systems for Healthcare". At the January meeting Anthony Heller from EPL gave a presentation on "LED Market Updates – New Upgrade Options, Costs and Health Affects" and at our March meeting Thomas (Tex) Ritter from Focus on Energy provided an update on the new programs and rebates for 2018

Sarah Grosz, from Gundersen Health System was accepted as a new member at our November meeting.

Brent Diehm and Patrick Smith have agreed to serve on the Codes and Standards Committee and Chris Patraw has agreed to serve on the Education and Professional Development Committee.

Josh Hoffman who is our Chapter Vice President has decided to make a career change and will no longer be a member of our Chapter. The Chapter would like to thank Josh for his involvement and wish him the best on his future endeavors.

Plans are underway for our summer golf outing which will be held sometime in June. Hopefully the weather gods will provide us with dry weather this

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THE ONLY THING
WE HAVE IN COMMON.**

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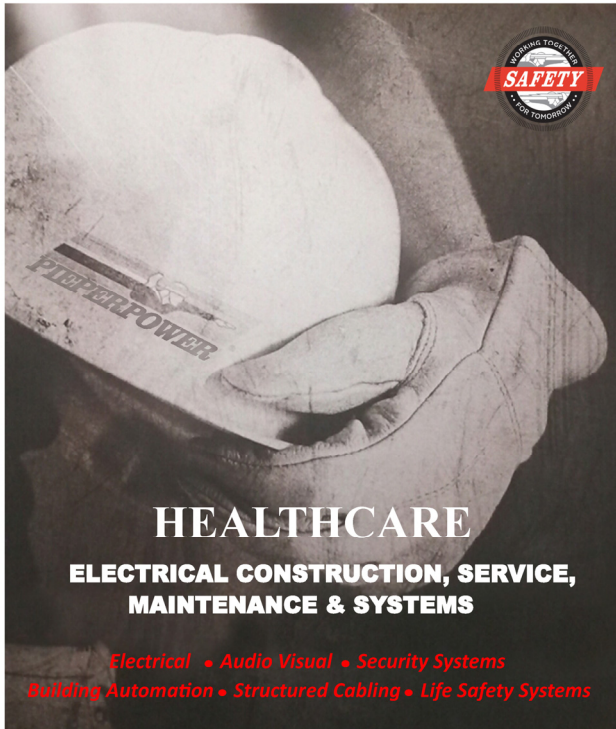
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Free ASHE Memberships

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 membership. For further clarification on the rules governing free membership scholarships from ASHE, please contact Roger Elliott at 715.563.2069, 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!



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Energy to Care Committee

The WHEA ad hoc Energy to Care committee has started again and is moving forward to help our membership in getting involved in the Energy to Care program. There will be a survey coming out in April on the Energy to Care program that we hope everyone will take a few minutes to respond to and help guide our committee on what the membership is looking for WHEA to help them participate in the program. There will be some webinars coming this fall on the Energy to Care program and how our members can use it to benchmark and improve their facilities energy performance. Anyone who wants to participate in the committees' work can contact Clark Brenner at cbrenner@uwhealth.org.



*Clark Brenner
 Committee Chair*

For those already started there are a couple of awards that their institutions can receive from ASHE. They are the Energy to Care Award and the Energy Champions Award.

Energy to Care Award

Applications are due April 1, 2018

The Energy to Care Awards honor health care facilities that reduce energy consumption by 10 percent in a single year or by 15 percent over two years. The program also recognizes previous year award winners that reduce energy consumption by 5 percent.

Energy Champion Award

Applications are due April 1, 2018

The Energy Champion Award is given out once per year to honor a single facility (acute care hospital or medical office building as defined by Energy Star) that has demonstrated outstanding leadership in energy efficiency. Hospitals and medical office buildings participating in Energy to Care that have an ASHE member on staff are eligible for this prestigious award.

Clark Brenner, PE, LEED AP
 Chair, WHEA ad hoc Energy to Care Committee



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WHEA Foundation, Inc. (WFI) Update

Hello WHEA!

The WHEA Foundation, Inc. (WFI) would like to take this opportunity to update on the activities of the Foundation.

The Foundation Board of Directors (BOD) has had numerous meetings and conference calls to reorganize and determine the mission and future of the Foundation. Before we share these updates, we wanted to give you some history.

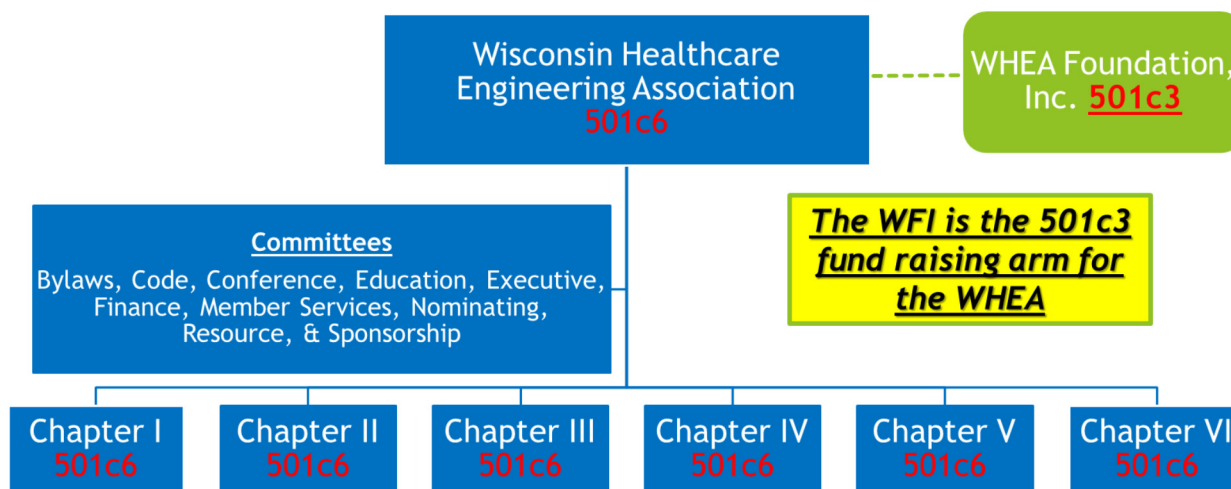
The establishment of the WFI was led by Wayne Johnson of Children's Hospital of Wisconsin in February 2009. The WFI is registered with the IRS and the State of Wisconsin as a 501c3. The sole member of the Foundation is the WHEA voting Board of Directors and three (3) WHEA Board members serve on the WFI Board.

The Foundation is a 501c3, which is different than WHEA, which is a 501c6. A 501c3 is a Charity and can provide tax advantages for donors. Additionally, a 501c3 can raise funds from a variety of donors that can benefit individuals, businesses or organizations.

So, what is the WHEA Foundation? **The WFI is the 501c3 fund raising arm for WHEA, WHEA Chapters and WHEA Members.**



*Jim Teunas
Foundation President*



One of the many accomplishments of the WFI is the election of our new Board of Directors. The 2018 WFI Board of Directors are:

Jim Teunas – President
Gordy Howie – Vice President (New)
Tamarah Scholze – Treasurer
Dan Loest – Secretary (New)
Harley Herold – WHEA Past President
Duke Cook – WHEA President

Roger Elliott – Nominating/Planning Chairman
Bill Best – Oversight Chairman
Tom Laabs – Outreach Chairman
Pat Loughrin – Director
Michael Neely – Director (New)

(continued on page 17)

WHEA Foundation (continued)

The WHEA Foundation has joined the Wisconsin Philanthropy Network (WPN) (www.wiphilanthropy.org). The WPN supports and promotes effective philanthropy in Wisconsin. WPN is a professional membership association for grant makers from across the state. WPN is to Foundations what the WHEA is to Healthcare Facilities Management.

Their three core services are:

- Professional Development
- Research Services
- Networking Opportunities

Other initiatives the WFI accomplished includes updating, modifying and approving the WFI bylaws; Reviewed, demonstrated and provided access for all Foundation BOD's to the Google drive site (repository for all WFI documents); Discussed history and future of the WFI website; Discussed WFI mission as it relates to grants, internships, education and support of the Member.

Going forward, the WFI is planning to conduct regularly scheduled meetings of the WFI BOD, regularly report to WHEA BOD, and to meet with each of the WHEA Chapters to review and discuss the WFI goals and objectives.

On behalf of the WHEA Foundation, I would personally like to thank the WHEA Board for their continued support and help moving forward.

Respectfully,
Jim Teunas
WFI President



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Education and Professional Development Committee (EPDC)

2018 Learning Opportunities

2018 is ramping up to be another great year for WHEA and our education offerings. Our first Hospital Construction Certificate (HCC) program of the year, set in Brookfield, had another amazing turnout with 209 attendees. They learned the necessary safety and infection control requirements to perform work in healthcare. This is a one day seminar provides a certificate and a reference binder. This is a must for any contractors, facility managers, and facility staff.



Marc Teubert
Co-Chair



Darrell Courtney
Co-Chair



Our “Spring Code Update” seminar will again be held at The Glacier Canyon Conference Center in the Wisconsin Dells. Registration will open up shortly for this May 16th program. Watch for your invitation and register early. The WHEA Codes & Standards Committee continues to be our lead on this program. Next year we are looking to a name change for the Spring Code Update. Look for more information to come.

We look forward to continuing to provide great site-based educational opportunities, with the help of both the Resource Committee and the Codes & Standards Committee in 2018.

The 2018 Lunch and Learn Webinar Series is back for all of our healthcare partners. They offer education on code, operation, energy, and safety issues related to the healthcare industry. Even though the first 3 webinars have already aired, you can still register and have the previous subject available to you through recordings. The programs are all recorded so that you can view at your leisure or as assigned to staff. This is a great opportunity to put on the program, have a meal, and then a discussion after the program.

You or your organization can still sign up for this webinar series. As a subscriber, you will receive the recorded links to all the webinars; past ones to review or watch for the first time. Go to the Education tab at the www.whea.com site, sign up, and start your webinars today. You will receive the login information for the next scheduled webinar and the links to all previous recordings. You never (*continued*)

have to miss a program again. The cost for the annual webinar series is again \$300 for WHEA members and \$500 for non WHEA members. Join Join now at www.whea.com under the Education tab.

Date	Webinar
Apr 18	PPE – (Hearing, Eye)
May 18	Smart Equipment
Jun 18	Building Envelope
July 18	Ventilation (temperature and humidity)
Aug 18	Succession Planning
Sept 18	Backflow Preventer / Cross Connections
Oct 18	Barrier Control Systems – Dust Barriers
Nov 18	Infection Control
Dec 18	Documentation



"I really like this education process and the information is very valuable and timely."

"It was nice to hear what other people at hospitals and clinics are doing. It is a changing field so it is nice to stay caught up with what is going on."

"Great overview of NFPA 99 as related to med gasses."

"I really appreciate the opportunity to view a recording as my schedule does not always allow for the live presentation."

"The webinar was easy to follow and very informative on fire plans and drills."

"A great explanation from NFPA 1999 to NFPA 2012 codes."

WHEA's 2018 Monthly "Lunch & Learn" Webinars Every 2nd Thursday of the month 11:30 am to 1:00 pm

Available by yearly subscription only.

WHEA's Educational and Professional Development Committee is offering 12 webinars for the 2018 calendar year for a one time, low price per computer connection.*

\$500 Regular Registration (\$42 per webinar)

\$300 WHEA Member Discount (\$25 per webinar)

NO LODGING • NO OVERTIME • ONE TIME PAYMENT

PLUS if you sign up now, you'll receive the login information for the remaining webinars in the 2017 webinar series.

This is a cost effective, professional development series for facility staff, administrators and contractors. This is a fantastic opportunity to stay up to date on current issues without leaving your facility. You will receive complete session information approximately 2 weeks before each webinar. Each webinar offers 1.5 Contact Hours/.15 CEUs approved by ASHE.

Registration is now open at www.whea.com for this 2018 webinar series.

Follow the drop downs under the Education tab to "Webinar Series Registration".

To receive the members only discounted rate, you must log into the WHEA members only site and use the Members Only registration form. If you don't have a members only login, email info@whea.com to set up your members only access.

You may sign up anytime during the year but the cost will stay the same - there is no individual webinar pricing. All webinars will be recorded and you will receive a link to that recording after the webinar has been presented. Even if you are not able to attend, you can still have these important updates to watch at your convenience.

The webinars will cover a variety of topics that focus on "hot-topic", code alerts and management level subjects throughout the year. A tentative list of topics is below.

***Per Connection equals one computer login in one room. You may have as many people sitting in that room watching the webinar as you wish, but you may not share your login information with any other person inside or outside your facility.**

2018 TENTATIVE TOPICS

JANUARY 11 Cyber Security	JULY 12 Ventilation (Temperature & Humidity)
FEBRUARY 8 Door Inspections (Fire Doors)	AUGUST 9 Succession Planning
MARCH 8 Commissioning & Retro Commissioning	SEPTEMBER 13 Backflow Preventer/Cross Connections
APRIL 12 PPE - (Hearing, Eye)	OCTOBER 11 Barrier Control Systems - Dust Barriers
MAY 10 Smart Equipment	NOVEMBER 8 Infection Control
JUNE 14 Building Envelope	DECEMBER 13 Documentation

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.

HSHS Sacred Heart, Eau Claire

Maintenance Mechanic II | Facilitator of Plant Services | Biomedical Technician

Maintenance Mechanic II (Job Posting # 17005537) – Rotating Shifts - 40hrs/wk

Position Summary

Monitors the operation of boilers; generators; heating, ventilating and air conditioning equipment; and incinerator. Also collects trash, wastes and performs routine maintenance.

Essential Job Functions

- Maintains established departmental guidelines, safety, environmental and infection control standards.
- Performs maintenance, lubrication, cleaning of boilers and boiler room on a routine basis.
- Inspects equipment and operation of the boiler room to assure that safety regulations are met and efficient operations maintained.
- Observes meter and gauges and adjusts valves and other controls to regulate flow of water and steam, to meet the need for all functions within the affiliate.
- Checks all mechanical equipment rooms during the respective shift and records readings in a logbook or other required form.
- Provides maintenance to all areas of the affiliate unless the situation warrants help from Plant Services on-call personnel.
- Tests and treats boiler and cooling water according to specifications.
- Collects trash and wastes and disposes of them according to established guidelines.
- Operates incinerator in accordance with established guidelines.

<https://hshscareers.referrals.selectminds.com/jobs/maintenance-mechanic-ii-40hrs-wk-rotating-shifts-4914>

Facilitator of Plant Services (Job Posting # 17005538) – Days – 40hrs/wk

Position Summary

Serves as the expert resource and lead person within the service area. Works closely with the director/manager to plan, implement, and facilitate the work activity of the area to accomplish goals and objectives. Assumes overall responsibility for all functions of plant services and maintenance that guarantees the highest quality maintenance services and protects the investment of the physical plant and related equipment in the most cost effective and efficient manner. Related equipment includes, but is not limited to, mechanical equipment, refrigeration, power, heat, cooling, medical gas, sterilization systems, as well as certain departmental and patient care equipment.

Essential Job Functions

- Maintains and administers the affiliate's preventative maintenance system.
- Assures compliance with all federal, state, and local related codes and regulations relating to the physical plant and secondary equipment.
- Assists in the planning and development of new construction and remodeling of current structures.

(continued on page 21)

Employment Opportunities

Essential Job Functions (*continued*)

- Develops and implements service area policies, procedures and objectives.
- Directs and controls the operation of the energy management system and other management systems.
- Provides for new staff orientation and staff development programs within the service area.
- Provides input into service area decisions concerning promotion, demotion, transfer, hiring and termination.
- Develops appropriate staffing schedules.
- Establishes and reviews performance standards for colleagues.
- Prepares timely reports and statistics as required by the Manager.
- Maintains department records, reports and files as required.
- Assists in the preparation and implementation of the budget.

<https://hshscareers.referrals.selectminds.com/jobs/facilitator-plant-services-40hrs-wk-days-3434>

Biomedical Technician (Job Posting # 18000523) Days – 20hrs/wk

Position Summary

Provides safety checks, repairs, calibration and preventive maintenance to patient monitoring equipment, diagnostic and therapeutic equipment, and other electronic equipment. Provides technical assistance for staff on various types of equipment. Demonstrates competency with regards to schematics and works independently on repairs, safety testing and preventive maintenance of general clinical equipment. Maintains records, writes reports, and coordinates outside repairs. Identifies and remedies equipment failures and hazards posing potential risks to patients.

Essential Job Functions

- Performs scheduled preventive maintenance as recommended by equipment manufacturer.
- Repairs equipment to manufacturers specifications.
- Performs incoming inspection: unpacks, inspects, tests, adjusts new biomedical equipment with respect to safety standards and manufacturer's specifications after it is received. Initiates work record on new equipment before it is made available to staff for use.
- Assists staff with user problems through training and in-service.
- Initiates requisitions for the purchase of parts and supplies.
- Evaluates site environment for suitability.
- Maintains equipment documentation, supplies, parts, and work area.
- Coordinates installations between vendors and affected departments.
- Coordinates services for repairs and upgrades.
- Designs and/or modifies equipment to meet the needs of the user without compromising regulatory approved equipment functions.

<https://hshscareers.referralsselectminds.com/jobs/biomedical-technician-i-clinical-engineering-i-20hrs-wk-i-days-6010>



Posted: March 22, 2018