You're Invited to "Autumn in the Mountains" October 3-6, The NEHES 2010 Fall Conference and Premier Education Event of the Year

By Steven D. Cutter, CHFM, HFDP, MBA, SASHE
Director Engineering Services
Dartmouth-Hitchcock Medical Center
Lebanon, NH,
Chair, 2010 NEHES Fall Conference

With just a few short weeks left before the 2010 NEHES Fall Conference October 3-6 in Bretton Woods, New Hampshire, the Planning committee from the New Hampshire Society of Healthcare Engineers is actively working on the schedule and details. As of August 24, all available vendor booths have been sold but several sponsorships remain. All Conference details are available in the brochure (posted on the NEHES website, www.nehes.org), but here are some highlights:

Active Members: Be sure your dues are paid prior to the Fall Conference so that you receive the $100 per night room reservation rebate (returned to you at checkout) and the reduced registration fee for the conference ($225 vs. $250 Supporting Member or non-member). Send an e-mail to Margaret Yip, myip@tuftsmedicalcenter.org to verify your dues are paid if you are not sure.

Sunday Activities
Golf Tournament or Zipline Canopy Tour

Monday
Keynote Speaker Steve Nelson, Former New England Patriots Hall of Fame Linebacker
Education Program
ASHE President Elect Presentation
Technology Show
Annual Meeting
Spouse/Guest Program
Evening Social Reception

Tuesday
Education Program
Spouse/Guest Program
Social Reception
Annual Dinner and Awards
Evening Entertainment - Comedian Paul D’Angelo

Wednesday
Education Program

The 2010 NEHES Fall Conference Planning Committee has planned for our members, guests, and partners a memorable Social and Educational event. The conference will be held at the Mt. Washington Hotel located in Bretton Woods, NH, at the foot of the Majestic Mount Washington, typically peak foliage season. We certainly hope that you will find it in your plans to join us in New Hampshire as we learn, laugh, and enjoy each other’s company.

Sponsorships: Go to www.nehes.org and click on the link Reserve

Sponsorships NOW for the 2010 Fall Conference and Technical Exhibit to download forms.

To Register: Go to www.nehes.org and click on the photo of the Omni Mount Washington Hotel to access the attendee registration brochure.

Education Topics Include:
- Data and Evidence Driven Risk Assessment and Performance Improvement
- Best Practices in Healthcare Construction Estimating
- Ventilation Management for Improved Infection Control
- BIM Contractual Mechanisms and Responsibilities for Each
- ASHE Update
- NFPA 99 Update
- Guide to Inspecting and Maintaining Various Roofing Systems
- How CAFM and IWMS can Help the Healthcare Facility Manager
- Creating a Virtual Surgical Department
- Utilizing Process Simulation to Determine Optimal Space Needs
- Perspectives on Growing a Healthcare Institution: Diverse Trends in Facility Planning and Development
- What about Day 2? Transitioning from Construction to Operations and Regulatory Compliance
- A Practical Approach to Building Envelope Management
- Efficiently Manage Risks and Compliance at (Many) Offsite Facilities as Part of Your Safety
- Management Program
- HHTF Activities-Current Issues
- What Every Healthcare Engineer Should Know About Automatic Transfer Switches
- The Authority Having Jurisdiction and How to Handle Unreasonable Findings
President’s Message

By Steven Jalowiec, P.E., CHFM
Administrative Director for Facility Operations
Waterbury Hospital, Waterbury, CT.
2010 NEHES President,
2010 Advocacy Chair

I hope all had a safe and enjoyable summer. My year as President is passing quickly. As we prepare for our Annual Conference and Fall Retreat, I want to acknowledge how grateful I am for the support the Board has given me during my term. We have accomplished much and, as is true in any organization, this happened only because of a group effort.

We have stayed focused on reaching the goals set for this year. At our Annual Meeting during Fall Conference, I believe we will be able to report to the membership that we have met all of these goals: 1) Membership Growth; 2) Financial Responsibility; 3) Supporting Member Forum; 4) Expand and Strengthen Strategic Alliances; 5) Succession Planning; 6) Strategic Planning/Strategic Board Meetings.

In particular, after a long period of discussion which actually dates back a few years, the Board approved in June (and we have contracted with) Barry MacKechnie of CEO Services to guide us through a strategic planning process at the Annual Board Planning Retreat this year in November. I believe this will help us to build on the solid foundation of the first 50 years.

Dave Dagenais and I were able to attend the ASHE Annual Conference in Tampa in July. I am very happy to report that at the Chapter Leadership Forum, I received on behalf of NEHES the ASHE Platinum Level of Affiliation. I believe this is our fourth year at this level of Affiliation. While this reflects the Board’s commitment to our membership, it is especially a reflection of the efforts of John Durand during his presidency last year. I would like to also give a special thank you to Fred Leffingwell for coordinating and assembling the necessary documentation for this award.

In July, the Board held its first online vote concerning whether or not the Board should endorse a candidate for ASHE President Elect. The vote was positive with the Board deciding to endorse Dave Howard. At our June meeting the Board decided to support Dave Dagenais for Region 1 Director. Dave has actively served our profession locally, regionally, and nationally, and is well deserving of our support.

Hopefully all ASHE Members in Region 1 had an opportunity to vote one way or another.

The Fall Conference Planning Committee has done an outstanding job of organizing an excellent program. Booths for the Technology Show are sold out. I ask all Board members to work hard to ensure Active Member attendees at this conference. Many hospitals have significantly cut back on support for these types of programs. Even in my own case I expect that I will need to cover my own expenses. We need to impress upon our members that attendance is well worth expending even their own personal funds for the professional development that this conference can deliver. While each member’s circumstances are different, in at least some cases these expenses may be tax deductible. Please reach out to your state members and urge them to attend.

Finally, at this time I have only three firm commitments of donations from Supporting Members to help offset the operating funds the Board committed to help underwrite the lodging expenses for Active Members in June. Any help that Board members can lend to soliciting these donations would be greatly appreciated.

Thank you all again for your hard work on behalf of NEHES and for your continued support and counsel to me personally as I navigate through my year as President.

President-Elect’s Message

By Dave Dagenais, CHFM, SASHE, CHSP, CHSO
Director of Plant Operations/Security Safety Officer
 Wentworth-Douglass Hospital, Dover, NH, Alternate NEHES Liaison to NFPA

It appears that summer has come and gone with a wink of the eye. During the month of July the NEHES Board takes a recess from its normal meetings; however, this clearly does not mean nothing gets accomplished. Over the summer the Board and several members have put countless hours into preparing for a variety of different tasks.

First, the approach of Fall means the Fall conference is just around the corner. Steve Cutler, the conference chair, and the New Hampshire chapter have done a phenomenal job planning for what is sure to be another spectacular event. They have secured all the educational sessions, sold out the vendor booths, planned golf and zip line programs, and developed an amazing guest program. Attendee registrations are rolling in quickly. This has not all been accomplished by taking the summer off. I’d like to thank the New Hampshire group for their dedication and hard work.

In July, I had the pleasure of traveling to Tampa for the ASHE annual conference. Steve Jalowiec and I represented NEHES at the leadership forum and were pleased once again to be awarded the platinum level affiliation. This is not easily achieved and was accomplished through the hard work and dedication of the NEHES Board and all of its state chapters. As we networked with other chapters throughout the country, it became very clear that NEHES is a leader in our industry and has much to offer to other organizations. It makes me proud to be part of such a cutting-edge Society.

On the advocacy front, the summer was extremely busy as well. Gene Cable and I have submitted several comments to NFPA 99 and NFPA 101. These comments came directly from membership feedback collected during our Spring Seminar. These comments will be evaluated by the technical committees. I also attended a healthcare summit in Baltimore which looked specifically at the trends in hea care and how patients are being cared for.

Clearly, the trend is pushing patients out of hospitals into less safe environments like clinic and home care for a much higher level of care than we have seen in the past. In many cases these areas are not currently addressed in the codes and standards. If the codes change, this could create a dramatic shift in the role of a healthcare facility manager. (To Page 2)
Congratulations to Steve Cutter, a New Senior of ASHE

Steve Cutter, CHFM, MBA, HFDP, SASH, the Director of Engineering Services at Dartmouth-Hitchcock Medical Center, Lebanon, NH, has met the qualifications to become a Senior in ASHE (SASHE).

Senior status is granted to an ASHE active member demonstrating a commitment to the healthcare facilities management profession and recognizes their contribution to the industry through leadership, education, and publishing.

To earn the designation, Steve fulfilled a number of educational and professional requirements, including publishing, presenting, and contributing to the advancement of his profession. He met the educational requirements with his B.A. and MBA; his volunteer work for his state chapter, NEHES, and ASHE boards and committees fulfilled the leadership requirements; and his ASHE educational program development and lecturing were applied to the publishing requirements.

Steve didn’t have a formal plan to apply for the Senior in ASHE designation; instead, he compiled his accomplishments over the past several years and “just finally got around to putting the application together.” He encourages others to explore the program. “I think it’s an important recognition of your commitment to the profession,” he said.

In health care for 34 years, Steve is a 25-year veteran of NEHES and his contributions to the Society are numerous:

- 1997: became NEHES officer – served many years on the Board
- 1999: created the NEHES web site and maintained it for several years
- Served as NEHES Newsletter editor and Education committee chair
- Voted the 1999 NEHES Engineer of the Year by his peers
- Worked on Fall Conferences in 1992 and 1998
- Now chairs the 2010 Fall Conference to be held in Bretton Woods, NH.

As a long-time member of the New Hampshire Society of Healthcare Engineers, he has held all the executive offices of the chapter. Steve joined ASHE in 1995 and has served that Society in several ways:

- Member of: Certification Program Development Committee, which created the Certified Healthcare Facility Manager program; 2009 Annual Conference Committee; 2010 CHFM Certification Program Committee - term expires in 2011
- Member of numerous ASHE committees including Facilities Management, Recognition, Education, Emerging Trends, and Healthcare Construction.
- Vice Chair: Sustainability Task Force
- Faculty: Infection Control Program

He holds the designations of Healthcare Facility Design Professional and Certified Healthcare Facility Manager. As a new SASH, Steve received a commemorative award from ASHE, a one-year complimentary ASHE membership, and an invitation to attend the ASHE Leadership Institute.

You Can Help with a NEHES Membership Initiative!

Want to get involved with NEHES but can’t commit time to a Board or committee position? Here’s a quick, easy way to help the Society when you have just a few minutes now and then at your computer.

“I am reaching out to NEHES Newsletter readers to assist us by logging in to www.nehes.org and reviewing the membership list on the web site to help us update our listings, especially those people who are no longer in the healthcare field or have left the New England region,” said Membership Chair Joe Mena (photographed).

“I am also asking that if you find member listings that need updating to contact Margaret Yip at myip@tuftsmedicalcenter.org with the information.

“If you need help logging into the web site, contact Newsletter Editor and Web Manager Ron Vachon, SASHE, CHFM, rrvachon@alhealth.org.”

President-Elect
(From Page 2)

The Board has also been making final preparations for our long term strategic planning session planned for this Fall. This is very different than typical Fall planning retreat of the past.

I am very excited to be part of this charge to move the organization forward during these challenging times. This strategic plan will establish benchmarks, create specific objectives and timelines, and develop a roadmap for the future.

Finally, on a personal note I would like to thank all that have supported me and given me encouragement during my candidacy to become ASHE Region 1 Director.

I had an opportunity to speak with many members of Region 1 during the ASHE annual and received very positive feedback. As I write this message the election is still open so I wait eagerly for the results.

If elected, I look forward to serving the region at the same level that I have served NEHES. I am extremely thankful for the consideration of this opportunity and appreciative to all that have supported me regardless of the outcome.
NEHES Members to Consider Several Bylaws Changes at Annual Meeting October 4

By Kevin J. Keating, CHFM
Director of General Services
Shriners Hospitals for Children
Boston, MA,
Chairman, NEHES Steering & Bylaws Committee

The NEHES Board of Directors will be presenting an extensive list of proposed bylaw changes at the Annual Meeting to be held October 4, 2010 at the 2010 Fall Conference at the Omni Mount Washington Resort in Bretton Woods, New Hampshire. The proposed bylaw changes were voted on and approved by the Board of Directors during their regular monthly Board meetings in 2010. The proposed changes must now be approved by the NEHES membership at the Annual Meeting.

This year the Board of Directors hired an attorney to review all of the NEHES bylaws to ensure that they were current and compliant with all existing laws and regulations and to ensure that NEHES was well protected from a legal standpoint.

Please remember that it requires at least 10% of dues-paid members at the Annual Meeting to constitute a quorum. Your participation is needed to help guide NEHES, approve the incoming officers, and consider the proposed bylaw changes.

This article serves as notification to the membership that the NEHES Board of Directors has been petitioned and recommends approval of the following changes to the bylaws:

THE NEW ENGLAND HEALTHCARE ENGINEERS’ SOCIETY, INC.

Proposed Bylaw changes to be presented at the Annual Meeting on October 4, 2010

Section 5-2:
Current wording: With the exception of the President, all officers shall be elected at the Annual Meeting. In the case of the President, the sitting President-Elect shall automatically succeed the President at the end of his/her term. Terms of office are one year and shall commence on the first day of January following the Annual Meeting.

Proposed change: Change the last sentence to read: **Terms of office shall commence on the first day of January following the Annual Meeting and will continue until their successors are elected and qualified.**

Comment: For officer terms, it is more typical for the bylaws to provide that officer’s terms continue until their successors are elected and qualified. This ensures that there are officers should there be a delay in a meeting date or an election problem.

Section 5-8:
Current wording: The Secretary shall be in attendance at all meetings and functions to act as a recorder. Should the case arise where this is not possible, the Secretary shall prevail upon another member of the Board of Directors to record minutes along with any other secretarial duties as requested by the Board of Directors.

Proposed change: Change second sentence to read: **Should the case arise where this is not possible, the Board of Directors will appoint a member of the Board to record minutes and perform other secretarial duties as requested by the Board.**

Comment: It is more typical for the Board to appoint assistant secretaries.

Section 5-13:
Current wording: The Secretary shall be responsible for the master copies of the Society Bylaws and “Guidelines for the Board of Directors”, and shall update and change them required.

Proposed change: **The Secretary shall be responsible for maintaining a current copy of the Society Bylaws and “Guidelines for the Board of Directors”, and shall update bylaws when they are amended by vote at the Annual Meeting.**

Comment: Wording is awkward. Amendments are typically subject to adoption by the direct or members.

Section 5-23:
Current wording: The Treasurer shall, for each calendar year, file appropriate information returns to Internal Revenue services and other government agencies in a timely manner.

Proposed change: **The Treasurer shall, for each calendar year, file appropriate information returns to the Internal Revenue Service and other government agencies in a timely manner.**

Comment: Better wording would be "information returns" rather than tax returns. As a non-profit, tax returns are not filed.

ARTICLE VI – Board of Directors

Section 6-1:
Current wording: The Board of Directors of the Society shall consist of all of the Society’s elected officers (the President, President-Elect Secretary and Treasurer), the Chapter Representatives or Alternates from each of the Society’s recognized chapters, the Chairpersons of all standing and special committees, the Liaisons, and the Editor of the Society’s Newsletter. All Board Members and Alternates must be active members of the Society (and therefore meet all of the Society’s eligibility requirements for active membership). Recognized Chapter chapters are: The Boston Plant Engineers Club, the Central Massachusetts Healthcare Engineering Society (CHES), the Maine Healthcare Engineers Society (MIES), the Middlesex Hospital Facility Managers Group, the New Hampshire Society of Healthcare Engineers (NHSHE), the Rhode Island Healthcare Engineers Society (RIHES), the South Shore Healthcare Engineering Society, the Vermont Health Care Engineering Society (VHES) and Western Massachusetts Society of Healthcare Engineers.

(To Page 5)
Proposed change: **Delete Section 10-4**

Comment: The Board of Directors would like to reimburse Board Members for their mileage to attend Board meetings.

**Section 10-9:**

Current wording: "Roberts Rules of Order" shall be the parliamentary authority of this Society, subject to special rules which have been or will be adopted.

Proposed change: "Robert's Rules of Order shall be the parliamentary authority of this Society, subject to special rules which have been or will be adopted by a vote of the members at an annual meeting or by the Board of Directors."

Comment: Improved wording and clarification.

**ARTICLE XVI – Indemnification**

**Comment: This is an entirely new Article which was prepared and written by Legal Council.**

**Section 16-1: Definitions.** For purposes of this Article XVI:

(a) "Covered Person" means an individual: (i) who is a present or former director, officer, agent or employee of the association or who serves or served another association, partnership, joint venture, trust, employee benefit plan or other enterprise in one of those capacities or as trustee, partner or fiduciary at the request of the association; and (ii) who by reason of his position was, is, or is threatened to be made a party to a Proceeding. It shall also include such person’s heirs, executors and administrators.

(b) "Proceeding" includes any threatened, pending, or completed action, suit, or proceeding, whether civil, criminal, administrative, or investigative, and any claim which could be the subject of such a proceeding.

(c) "Disinterested Director" means a director who is not a party to the Proceeding(s) in question.

(d) "Expenses" means liabilities, including but not limited to amounts paid in satisfaction of judgments, in compromises or as fines or penalties, and expenses, including reasonable legal and accounting fees.

**Section 16-2: Actions in Name of the Association.** The association shall indemnify any Covered Person to the extent legally permissible against all Expenses incurred in connection with the defense or disposition of any Proceeding by or in the name of the association if a reasonable determination is made, based on a review of the readily available facts but without special investigation, that the Covered Person acted in good faith, and in the reasonable belief that his action was in, or not opposed to, the best interest of the association, and with respect to any criminal action or proceeding, had no reasonable cause to believe that his conduct was unlawful. Such determination may be made by:

(a) the vote of a majority of a quorum of Disinterested Directors;

(b) A special litigation/indemnification committee of the board of directors appointed by the board;

(c) independent legal counsel in a written opinion; or

(d) the vote of a majority of the members entitled to vote for directors.

**Section 16-3: Other Actions.** The association may indemnify any Covered Person against any Expenses incurred in connection with the defense or disposition of any Proceeding other than a Proceeding of the type described in Section 16.2, except with respect to any matter as to which the Covered Person shall have been finally adjudicated in the Proceeding (i) not to have acted in good faith and in a manner he reasonably believed to be in, or not opposed to, the best interests of the association or, (ii) with respect to any criminal Proceeding, to have had reasonable cause to believe his conduct was unlawful.

**Section 16-4: Advances of Expenses.** The association may advance attorneys’ fees or other Expenses incurred by a Covered Person in defending a Proceeding, upon receipt of an undertaking by or on behalf of the Covered Person to repay the amount advanced, which undertaking may be accepted by the board of directors without reference to the financial ability of such Covered Person to make repayment.

**Section 16-5: Presumptions upon Termination of Proceeding.** The termination of any Proceeding by judgment, order, settlement, conviction, or upon a plea of nolo contendere or its equivalent, shall not, of itself, create a presumption that a person did not act in good faith and in a manner which he reasonably believed to be in, or not opposed to, the best interests of the association, or, with respect to any criminal Proceeding, had reasonable cause to believe that his conduct was unlawful.

**Section 16-6: Indemnification Not Exclusive.** The right of indemnification provided by this Article shall not be exclusive of or affect any other rights to which any such Covered Person may be entitled.

**Section 16-7: Insurance.** The association may purchase and maintain insurance on its behalf and on behalf of any Covered Person against any liability asserted against such Covered Person and incurred by him in any such capacity, or arising out of his status as such, whether or not the association would have the power to indemnify him against such liability under the provisions of this Article.
Welcome 
To Our 
New Members

Active Members
Conrad Schiebout
Biomed Supervisor
Southern NH Medical Center
Nashua, NH

Kevin Oliveira
Manager of Safety and Health
St. Mary's Health System
Lewiston, ME

Henri Wante
Physical Plant Manager
Littleton Regional Hospital
Littleton, NH

Matt Welch
Maintenance Supervisor
Speare Memorial Hospital
Plymouth, NH

Richard H. Darling
Manager-Communications Dept
St. Joseph Hospital
Nashua, NH

Ryan R. Moore
Life Safety Compliance Engineer
Wing Memorial Hospital and
Medical Centers
Palmer, MA

Rod Maxwell
Facility Manager
UMASS Memorial Medical Center
Worcester, MA

Stephen McMann
Director of Facilities
Androscoggin Valley Hospital
Berlin, NH

Supporting Members
Debra DiMattia
President
Chiller Technology, Inc.
Woburn, MA

Paul Avery
President
Oak Engineers
Newburyport, MA

Cynthia Putnam
Project Director
Northwest Energy Efficient
Council - BOC Program
Seattle, WA

Michael Quinlan, AIA, LEED AP
Associate
TRO Jung Brannen
Boston, MA

Paul Kirchhoff
Director of Comprehensive
Solutions
TRANE
Woburn, MA

John Hatch
Sales
Power Sales Group
Danvers, MA

John Magner
Sales & Marketing Executive
Solidification Products
International
Northford, CT

Summer Zifko
Office Manager
Linet Americas, Inc.
Charlotte, NC

Dean Plourde
Sales Manager
F.W. Webb Co.
Bedford, MA

Kristan Gibson
Business Development
Administrator
Competitive Energy Services
Portland, ME

Leo Ostberg
Business Development Manager
The Pike Company
Rochester, NY

Kevin Lausin
Sales
Primex Wireless
Medfield, MA

Lisa Schoonenman
Healthcare Solutions Manager
Siemens Industry, Inc. Building
Technologies Division
Cromwell, CT

Honorary Member
R. Brian Sallisky, CHFM
President
Sallisky Enterprises, Inc.
Arlington, VT

Congratulations to Dennis Desmarais, Now in His 41st Year of Health Care

NEHES salutes Dennis Desmarais, the Director of Engineering for Baystate Health, who has spent all of his 41 years in health care at Baystate in Springfield, Massachusetts. The system has 783 beds and 57 bassinets across four facilities (Baystate Children's Hospital, Springfield; Baystate Franklin Medical Center, Greenfield; Baystate Mary Lane Hospital, Ware; and Baystate Medical Center, Springfield), nearly 10,000 employees, and several medical practices, health centers, and other locations.

As Director, Engineering, Dennis is responsible for the maintenance of all physical plants throughout the health system, which includes one major medical center and two community hospitals covering 2.5 M gross square feet. These areas are serviced by approximately 100 engineering department staff members.

Dennis earned a B.S. in mechanical engineering from Lowell Technological Institute (now UMASS Lowell) and an MBA from Western New England College. His first job out of college was as a junior engineer for IBM Corp. in New York. He left before the year was up to start at Springfield Hospital as a mechanical engineer. Within two years, he became assistant plant engineer, then plant engineer, then administrative engineer as the hospital moved through several mergers to become Baystate Medical Center and Baystate Health today.

Dennis joined NEHES about 30 years ago and ASHE 35 years ago.

The NEHES Newsletter asked Dennis about his responsibilities and his outlook on health care.

Have you been involved in all new construction/renovation projects at your facility?

Yes, at Baystate Medical Center. I have been involved in every design and construction activity on the main campus, including the current $250 million expansion, scheduled to be completed in October 2011.

Have you been involved in any Massachusetts NEHES Chapters?

I was very much involved in the Western Massachusetts Hospital Engineers Society in the 70's and 80's and held every office at one time or another. This Chapter was very active in the 1970s and 80s.

How has being in NEHES benefited your career?

"I joined NEHES to network with more of my local peers and to attend regional conferences that were informative, educational, and affordable. I found that by being active in NEHES I am able to stay on top of industry changes, addressing questions on code issues, and resolving facility problems, all of which is relevant to my organization’s needs. And the contacts I have made have been invaluable."

What are the main changes in health care that you have seen in your 41 years in the field?

The evolution of Hospital Engineering has changed dramatically over these years. The labor force has become very sophisticated and skilled and management is now by highly trained professionals. In the early part of my career when reimbursement was cost based, budgets were not a problem but today hospitals are run as businesses with the eye towards the bottom line. There is constant emphasis on being more efficient and meeting benchmark requirements. The role of The Joint Commission and Life Safety has also changed significantly in how hospitals are designed, constructed, and maintained.

In his spare time, Dennis is an avid skier and golfer and, in the last five years, he has taken up woodworking and furniture making.
NEHES is Again Designated a Platinum Chapter of ASHE

NEHES President Steve Jalowiec, P.E., CHFM, announces that NEHES has achieved the Platinum Level of Affiliation from ASHE for the fourth year in a row. The Platinum Level is the highest Level of Affiliation that can be attained by an ASHE Chapter.

NEHES earned the Gold Level of Affiliation award (previously the highest award level) for eight years, then in 2007 was among six chapters to earn the new Platinum level. This year, 16 chapters attained the highest award level. See the new Platinum logo at www.nehes.org.

Steve accepted the award on behalf of NEHES members from ASHE President Terry L. Martin, CHFM, SASHE during the Chapter Leadership Luncheon at the ASHE Annual Conference July 13 in Tampa. Fred Leffingwell, CHFM, the ASHE Region 1 Director, prepared and submitted the application package.

"I am proud to announce to the NEHES membership that we have once again received the ASHE Platinum Level of Affiliation for our Chapter. This really demonstrates the NEHES Board of Directors' commitment to our members, especially in the area of education," Steve said. "Many members of the Board contributed to make this happen but in particular I would like to thank Fred Leffingwell for his work in putting the application package together and John Duraes as Immediate Past President in recognition of his work in 2009 to make sure we met all the requirements for the Platinum level."

"The Levels of Affiliation review is a good indicator of how well the Board of Directors serves its membership. It measures several areas of performance from offering educational programs to the Board's ability to properly govern the Society. It is an excellent measure of the health of a Society," Fred said.

NEHES met or exceeded minimum criteria for the Platinum level in several areas, including: Education - ASHE awarded a total of 3,425 Contact Hours or 3.425 Education CEU’s to education programs NEHES and its chapters held in 2009;

2. Joint ASHE/NEHES Membership - 66% of NEHES members were also ASHE members in 2009, helped greatly by NEHES offering free membership to Active ASHE Members in good standing.

3. Communications from NEHES officers to members – 38 provided in 2009
   - Chapter Website/URL – www.nehes.org
   - Four quarterly NEHES Newsletters
   - Four quarterly NEHES Codes & Standards issues
   - 29 blast e-mails to all members, with topics such as Fall Conference, Spring Seminar, NFPA standards, advocacy issues, ASHRAE humidity standard, Fire Damper Testing requirements, new Joint Commission scoring elements, NFPA 99, Life Safety Code revision cycle, benchmarking, emergency generators, greenhouse gas reporting rule, fuel-buying strategies, storm water discharge, and many others.

ASHE chapters participating in the Levels of Affiliation Awards Program submit documentation demonstrating that they have met several criteria based on affiliation objectives ASHE would like to achieve to make its chapters stronger and more viable, which in turn benefits the fields of healthcare engineering and facilities management.

ASHE Program is an Attempt to Lessen the “Graying” of the Facility Management Profession

By Ron Vachon, SASHE, CHFM, CHEC
Director of Facilities Management
Lincoln County Healthcare
Boothbay Harbor, ME
NEHES Newsletter Editor and Web Manager

Twenty-odd years ago, Don Garrison, a NEHES Past President and esteemed member, raised the issue as an ASHE Board Member that we needed to initiate succession planning due to the graying of our profession.

ASHE leaders adopted the idea as a major initiative. Discussions on tailoring program tracks at our conferences to younger audiences and how to teach to younger folks went on. I was in a position to watch and help this idea move from fruition to a final program, as Don started cycling into other committees and returned to State and Regional Chapter support. In my tenure on ASHE committees, I have had the satisfaction of seeing this idea come into a new reality. Our discussions on the ASHE Education Committee spawned a University Task Force, which I had the privilege of chairing for two years. This Task Force built off of Don’s idea and worked to develop scope for a focused area of study. At the same time, Leo Gehring, during his terms as ASHE President Elect and ASHE President, had energized several ASHE student chapters around the country while speaking to groups at Purdue, Arizona State University, University of Texas, and Brigham Young University.

We met with several universities, and numerous college professors stepped up to work with our ASHE University Task Force, ASHE Leaders, and some interested students who helped build college tracks for Healthcare Facilities Engineering which are being delivered today.

At the 2010 ASHE Annual Conference I was pleased and extremely honored to be able to help a group teach a three-day track presenting the first ASHE Boot Camp to a group of about 50 persons, mostly college students as well as a few new Facility Managers. ASHE partnered with Purdue, Arizona State, and BYU to bring students to 11 hospitals for an eight-week internship program. This is ASHE’s initial effort to bring internships to engineering students, thereby bridging the gap between school and work.

The vision of this program is to bring more students directly into the healthcare facilities management and engineering fields at an early age and expand recognition and awareness of the healthcare option to engineering students. It has been rewarding to see the idea from concept to delivery and to be a part of such an important initiative.
Chapter Reports

Below please find a synopsis of NEHES chapter meetings with program information and new officer listings. See www.nehes.org for full meeting minutes under NEHES Chapters at the left of the home page.

**Boston Plant Engineers Club**
**Representative:** Bob Loranger, P.E., CHFM, rloranger@tuftsmedicalcenter.org

**Connecticut Healthcare Engineers Society**
**Chapter Representative:** Chris Burney, CHFM, acburn@bphhosp.org

**Maine Healthcare Engineers' Society**
**Chapter Representative:** Randy J. Hussey, CHFM, CFPS, rhussey@cmh.org
**Meeting Date and Place:** June 18, 2010 at Bailey Island; annual picnic.
**Program:** There was no formal business meeting. The invitation went to all MHES members and the NEHES President. There were good numbers of

![Photo of Maine Healthcare Engineers' Society annual picnic at Bailey Island Yacht Club. Photos by Jeff Mylen, P.E., CPE.](image)

MHES members, family, several vendors, guests present. See full details at www.nehes.org, Chapter News.

**Massachusetts Chapters**
**Chapters Liaison:** Joe Mona, jmona@lawrencegeneral.org
The Massachusetts group conducted a conference call meeting and has begun the planning for the 2012 NEHES Fall Conference. Ed Lydon, CHFM and Joe Mona will be coordinating the effort.

**New Hampshire Society of Healthcare Engineers**
**Chapter Representative:** Jona Roberts, CHFM, Jona.Roberts@Hitchcock.org
**Meeting Date and Place:** August 20, 2010, New Hampshire Hospital Association Building in Concord

**Program:** Brad Balon, President of Balon Process Management, conducted a presentation of Microsoft Excel techniques for the Facilities Manager focusing on the power of pivot tables.

**Other business:**
Harry Tibbits has retired after 40 years at Alice Peck Day. He has been elected an honorary member of NHSE.

The CMS/TJC survey window is open. Recommend a five minute blurb during future meetings to discuss completed surveys. Todd’s last CMS survey focus was on domestic water temperatures. Recommend engineers bring experience of their recent surveys for discussion.

**Rhode Island Healthcare Engineers Society**
**Chapter Representative:** Ron Vachon, CHF RVachon@KentRI.org

September 17 - Meeting – NH Hospital Association
October 3-6 - NEHES Fall Conference – M Washington Hotel, Bretton Woods, NH
November 19 - Meeting – Security System Technologies – Wentworth Douglas Hospital
December 17 - Annual Planning Meeting

(Vermont news, page 11)

Upcoming meetings:
Chapter Reports
(From page 10)

Vermont Healthcare Engineering Society
Chapter Representative: Mark Blanchard,
CHFM, Mblanchard@springfieldhospital.org

Fall is closing in on the Green Mountain State and our Chapter is as colorful as the ensuing foliage. We recently are coming off a well attended joint meeting of the Vermont and New Hampshire Chapters which had many positive comments from new faces around the area. Our annual meeting is planned for September 10th and will be held in Rutland. The meeting will focus on education for the upcoming year, election of officers, and planning for the Fall Conference of 2011.

NEHES Members Earn the Certified Healthcare Facility Manager Designation

Congratulations to two new Certified Healthcare Facility Managers. The CHFM is offered through ASHE and the American Hospital Association.

New CHFM’s are: Brian Gay, Supervisor of Building Operations, Plant and Engineering, Mercy Hospital, Portland, ME:
“This was a Professional and Personal goal to develop my education towards my career, and the CHFM comprehensive exam offered me the opportunity to test my current knowledge of the healthcare physical environment. Preparation was done by utilizing the CHFM assessment exam and preparation guide, as well as a review of the NFPA Codes, and The Guidelines for Design and Construction of Health Care Facilities. This exam tests an entirety of knowledge for facility management in the healthcare environment. While studying, you should utilize all your professional resources including the staff that has the specific knowledge in their field.”

David Rosinski, Director of Engineering, Security, Biomed & Emergency Management, Noble Hospital, Westfield, MA:
“I wanted the CHFM primarily as a way of saying that I’m serious about the job I do in Facilities Management, not to mention it is desired by many institutions. I prepared by taking the online sample test and carefully reviewing my results. I went so far as to make flash cards and had those 100 questions literally memorized!

My feedback would be this: a lot of the questions from the exam were not from the pre-test or practice test. What really saved me was years of experience. Many of the obscure questions I faced were familiar to me from my working past. Because health care is the most regulated industry in existence, the amount of information to draw questions from is limitless. The best advantage one would have in taking this exam is experience.”

For more information about this certification, go to http://www.ashe.org/about/certifications.

NEHES occasionally makes available waivers for CHFM exam fees. Watch the NEHES newsletter and www.nehes.org for information about future CHFM waivers.

Cheshire Medical Center’s Green Initiatives Cut Carbon Footprint, Earned EPA Recognition

In the last calendar year, Cheshire Medical Center/Dartmouth-Hitchcock Keene (CMD/DHK) has reduced its annual carbon footprint by 209,739 pounds and its annual hot water usage by 1.8 gallons with a laundry ozone project.

The hospital added an Aquacure Ozone Injection System to its laundry service. Ozone is a naturally occurring clear gas that serves as an environmentally friendly disinfectant and deodorizer. Injecting ozone into the water used in clothes washers eliminates bacteria such as c. diff, MRSA, and other viruses. The disinfectant properties of ozone allow sheets, johnnies, and linens to be washed at lower temperatures with less water, saving $86,000 a year on the 1.2 million pounds of laundry processed each year.

The medical center’s progress in waste reduction earned recognition in December 2009 from the EPA as a "Wastewater Partner." CMD/DHK is also part of Hospitals for a Healthy Environment. "Cheshire Medical Center/Dartmouth-Hitchcock Keene has made improvements over the last few years to all but eliminate mercury from its waste stream," according to Paul A. Pezone, Vice President Facilities, CMD/DHK.

The hospital participates in an active recycling program and is working to reduce the amount of its waste that ends up in landfills. The organization recycled 141 tons of material last year: 69 tons of paper, 16 tons of cans/bottles, 52 tons of cardboard, and five tons of metal/electronics. The cost of program is $7,000. The cost avoidance estimate is about $21,000.

The hospital also aims to reduce its carbon footprint by supporting local farms and food, reducing the amount of fuel used to transport produce. CMD/DHK is part of a "Buy Local" initiative offered by Black River Produce. It purchases local fruits, vegetables, cheese, baked goods, and other foods from more than 50 local farmers in New Hampshire and Vermont.

This year, CMD/DHK’s conservation efforts include evaluating ways to reduce electricity through use of lighting with motion detectors and energy saving light bulbs, improving HVAC mechanical efficiencies, and minimizing water use in the central sterile processing department.

Melinda M. Perham, Area Leader, General Services, and Larry E. Milliron, Chief Facilities Coordinator, review the control box cover notification lights that indicate the status of variable ozone generation.

Courtesy of Janet Bowen, EPA Region 1 Healthcare Sector Coordinator, and CMD/DHK.
Dartmouth-Hitchcock Collects a Half Ton of Battery and Cell Phone Waste

In 2005, Dartmouth-Hitchcock introduced Call2Recycle, a rechargeable battery and cell phone recycling program, on its campus. Just four years later, the institution has recycled 1.8 million pounds of reclaimable materials and half a ton of it was depleted rechargeable batteries and cell phones.

Before joining Call2Recycle, a free program based in Atlanta, GA, Dartmouth-Hitchcock combed its spent batteries and cell phones with other waste materials and shipped them at a significant cost via Dartmouth’s waste recycler for processing.

John Leigh, Manager of Waste and Recycling Programs at Dartmouth-Hitchcock, said, “Call2Recycle was very appealing to us because the entire process is free. The recycling boxes are provided at no cost and the shipping is taken care of. We don’t have to reorder additional boxes. Call2Recycle makes sure we have replacements.”

Call2Recycle collection boxes are located in numerous locations around the 2-million-square-foot Dartmouth-Hitchcock complex. Its 6,000 employees and 360 resident interns can deposit their used rechargeable batteries and cell phones in the recycling center near the cafeteria, in the Information Services department, in the Engineering wing, and other strategic areas. Signs posted by the Waste Management staff indicate the drop-off points. Collecting three or four boxes of batteries per month is standard procedure.

Other New England waste collectors in the Call2Recycle program include:

- New London Hospital, New London, NH
- New York Medical Center, St. Albans, VT
- Stephens Memorial Hospital, Norway, ME
- Universal Hospital Services, Chelmsford, MA
- VA Medical Center, Manchester, NH

About Call2Recycle

So far in 2010 Call2Recycle has already collected approximately 3500 pounds of batteries and cell phones from New England hospitals. In all of 2009 Call2Recycle collected about 3700 pounds from New England hospitals.

Call2Recycle is the only free rechargeable battery and cell phone recycling program in North America. The organization’s advice for launching a successful rechargeable battery recycling program includes these steps:

STEP 1: Select a rechargeable battery recycling partner that meets your needs.
Items to consider include:
1. Overall cost of the program
2. Ease of enrollment
3. Shipping process and costs
4. Compliance with the US DOT’s regulations on battery transport.

STEP 2: Identify which departments use the most rechargeable batteries.
Rechargeable batteries are used to power many items in a hospital including crash carts, vital sign analyzers, radiology equipment, infusion pumps, cordless surgical equipment, electric wheelchairs, cordless power tools, laptops, PDAs, two-way radios, and cell phones. Identifying departments that use the most batteries will help you in the next two steps.

STEP 3: Determine the locations in your facility that are the most visible to the employees who are likely to have rechargeable batteries to recycle.
Dartmouth-Hitchcock found success in placing rechargeable battery collection boxes in the department that use the most batteries, including:
1. Radiology
2. Biomed/Clinical Engineering
3. EMS
4. Environmental Health & Safety
5. Housekeeping
6. IT
7. Waste Management

STEP 4: Create an internal communications strategy to introduce the program to your employees and encourage recycling.
Consider the ways that all of your employees, and specifically those department workers who use the most rechargeable batteries, receive important information, and develop a strategy that leverages those communications vehicles to launch the program.

John Leigh, manager of waste and recycling programs for Dartmouth Hitchcock, displays signage explaining the program, provided via Call2Recycle, in noticeable areas near each collection box. To ensure that the information is understood, Leigh hosts in-person meetings to discuss proper waste handling with key contacts in each department that has a recycling box and includes information about the rechargeable battery recycling program in the hospital’s universal waste training.

STEP 5: Enroll in a rechargeable battery recycling program and begin saving money and reducing your facility’s carbon footprint.
For more information go to www.call2recycle.org.

Visit our web site, www.nehes.org!
Need help with member log-in? Send an email to rvachon@lecheare.org

2010 Energy Star Labeled New England Hospital - Greenwich Hospital in Connecticut
Other labeled hospitals in New England are: 1) VA Connecticut Healthcare System, 2) Saint Franc Hospital and Medical Center (CT), 3) VA Boston Healthcare System, and 4) Saint Mary in Maine.

Connecticut Children's Medical Center in Hartford has registered with WasteWise and has begun to measure waste reduction through a baseline and annual updates.