NEHES 2013 Fall Conference—Portland, Maine
September 29 - October 2nd
NEHES Comes to Maine for Education, Networking, Information (And Golf!)

The Maine Healthcare Engineers’ Society is rolling out the welcoming mat for a fall adventure in Maine. The adventure begins at the Holiday Inn by the Bay in downtown Portland, Maine on Sunday, September 29 through Wednesday, October 2, 2013. Conference Chair, Mit Dudley, and his conference committee are putting the final touches on what will be a memorable event.

“The fall is a great time in New England,” said Dudley, “and Portland, Maine will be a premiere destination for our members and guests.”

NEHES members will not want to miss the keynote address presented by a team from Brigham & Woman’s Hospital in Boston.

“Our speakers will discuss the impact that the Boston Marathon bombings had on their institution,” said Dudley. “Their insight will give us a glimpse of what happens when our hospitals need to respond to a horrific incident like the one that occurred on April 15 this year.”

Presenters will include George Player, Region 1 Rep, and Ted Aldridge, Region 1 Rep, as well as other hospital representatives.

“You know, we train for this. This is obviously a very catastrophic event, but it’s an amazing thing despite all of the chaos to see our teams come together throughout the Boston medical community and support each other and best care for our patients.”

Eric Goralnick, MD
Brigham & Woman’s Hospital

Educational Sessions:

Monday 9/30/13:
- Session 1 - 9:15 am - Haley and Aldridge - Cynthia Page – Bridging the Gap between Clinical and Non-Clinical
- Session 2 - 10:30 am - Rick Albert - Maine General construction - The Biggest Hospital To Be Built In Maine In Decades
- Session 3 - 3:30 pm - RDK - What You Should Know About Owner Based Commissioning

Tuesday 10/1/13:
- Track 1 - 8:00 am - Environmental Health and Engineering – Surviving a CMS Accreditation Survey
- Track 2 - 8:00 am - Gale Assoc. – Fundamentals of a Green Roof
- Track 1-9:15 am - TSIG Consulting – The Importance of Conducting a Comprehensive Preconstruction Risk Assessment
- Track 2- 9:15 am-Marc Fournier – Regulatory & Operational Facility Grid
- Track 1 -10:30 am - Miura – Optimizing Thermal Energy Management via Modular On-Demand Boilers
- Track 2 – 10:30 am – Huntair – Air Distribution in Surgical Suites
- Track 1 – 12:45 pm – Tarkett – Something In The Air: What You Can’t See Can Hurt You
- Track 2 – 12:45 pm – WM Group Engineers – How Chilled Water Optimization Makes Cogeneration More Effective
- Track 1 - 2:00 pm – Gene Cable – The Life Safety Scorecard and Fire Drill procedure for New Codes
- Track 2 – 2:00 pm – GZA GeoEnvironmental – Compliance With New Air Pollution Regulation for Boilers & Emergency Generators

Wednesday 10/2/13
- Session 1 – 8:00 am – David Giuffrida – Successful Planning – Middlesex Hospital
- Session 2 – 9:45 am – Roundtable Updates from the Joint Commission - Chaired by Dave Dagenais, FASHE, CHFM, CSHP Region 1 Rep

Other highlights include:
- Portland, Maine has been named America’s Most Livable City by Forbes magazine. forbes.com/2009/04/01/cities-city-ten-lifestyle-real-estate-livable-cities.html
- The Holiday Inn By The Bay is located only minutes from Portland’s Old Port area and inviting harbor.
- As usual, there will be many supporting members set up in the Exhibitor Area.
- Plenty of time to meet and mingle with other NEHES members.
- Entertaining day trips for the spouse/significant other program
- More info coming out soon. Mark your calendars now!
NEHES 2013 Spring Seminar - Recap

200 Members Attend Spring Event in Leominster, Mass

NEHES President, Gary Valcourt (at right) checks out an electronic signage display.

You can’t miss NEHES.

You might call this “Solution Providers Row”

Conference Planner, Cathy Charbonneau, handled 200 registrations at the Spring Seminar.

Spring Conference Chairs, Allison Brisson and Jona Roberts, and Lena Gordon from MorrisSwitzer are set to award prizes from our supporters.

Tim Hooper from Connectivity Point and Andrea Costa from Cambridge Sound Management took a break for a photo.

Avis Gordon (at right), ASHE Senior Specialist – Chapter Relations promoted her services at the March event.

ASHE Liaison, Dave Dagenais (at left) led a lively discussion panel with Eugene Cable and _______ on the stage.

NEHES President, Gary Valcourt kicks off a jam packed Spring Seminar.

Information displays and onsite vendors gave NEHES members current updates on products and services. (In left photo) Kathryn Lamb from Consigli.
Keynote Speaker: “Hurricane Sandy: Lessons Learned” with Mark Etheridge P.E., LEED AP

Mr. Etheridge is a Senior Electrical Engineer with AKF Group LLC in New York City and worked in-house at Beth Israel Medical Center in New York City, assisting with system performance, as the hospital remained one of the few online healthcare institutions in the city in the wake of Hurricane Sandy.

Quotes:
- While hurricanes can bring challenges to your facility, the real threat comes from flooding when a 3 feet wall of water is flowing with 100 mph winds.
- Think about what you will do when the cell phone service goes out.
- Whether you use digital or analog radios for communication, the bottom line for disaster planning is “buy more!”
- When disaster strikes, people go to hospitals for aid and comfort. Prepare for masses of people coming to your door.
- When the power goes out is not the time to discover that these items are not on emergency power.
  * Electronic flush toilets
  * Washers & sterilizers
  * Patient room lighting
  * Service area lighting
- Emergency generators are great only if you have the fuel to run them. Plan, in advance, for how you will secure and store fuel for a disaster.

For presentation, go to NEHES website: Hurricane Sandy: Lessons Learned

Implementation of Liquefied Natural Gas - A Case Study with Scott E. LeClair, P.E. and Steven Cutter, CHFM, HFDP, MBA, SASHE

Mr. LeClair is a Principal at Fitzemeyer & Toci Associates of Stoneham, Massachusetts. Mr. Cutter is the Director of Engineering Services for Dartmouth-Hitchcock Medical Center in Lebanon, New Hampshire.

For many institutions, utility delivered natural gas provides one of the lowest energy costs, particularly when compared to fuel oils. Unfortunately, many institutions do not have access to utility provided natural gas; pipeline and local distribution infrastructure remains limited. Alternatives for those institutions include incorporating liquefied natural gas (LNG) into their fuel decisions.

For presentation, go to NEHES website Liquefied Natural Gas

Quotable Quotes:
- With the onset of the Global Harmonized System for hazard communication, there are changes that will affect your facilities.
- The GHS system will be a world wide standard that takes into consideration multi-cultural and non-English speaking employees.
- The new system has easily recognizable pictograms to depict types of hazards.
- By Dec. 1, 2013, all employees must be trained in the new GHS system.
- By June 1, 2015, all product distributors must fully implement the GHS system.
- By December 1, 2015, no non-GHS labels will be allowed on any products in your facility.

For presentation, go to NEHES website: Who Changed My Chemical Labels?

“Code Advocacy Update” with Dave Dagenais, FASHE, CHFM, CHSP, and Eugene Cable P.E., MSFPE

Mr. Dagenais is the Director of Plant Operations and Security at Wentworth-Douglass Hospital, Dover, New Hampshire, and the ASHE Region 1 Director. Mr. Cable, of Life Safety Consultants, Averill Park, New York, is a Fire Protection Engineer and the NEHES Liaison to NFPA (National Fire Protection Association). He worked for the Department of Veterans Affairs for 21 years.

Quotes:
- Dave Dagenais, ASHE Liaison for NEHES, led a lively panel discussion to show what kinds of discussion goes on behind the scenes when considering changes to codes. The panel showed the give and take, the respectful arguing, and the fine art of compromise that ensues in such discussions.
- Dave led a discussion regarding the proposed changes for 35 NFPA changes in Life Safety Code. The members in attendance had the opportunity to give feedback on the proposed changes with their votes to “agree,” “disagree,” or “abstain.” NEHES will tally the recommendations and forward to NFPA.

For presentation, go to NEHES website: Code Advocacy Update

All Spring Seminar attendees received a copy of the 2012 NFPA 101 Life Safety Code: Value: $83.70. This came free with the seminar registration!
By Gary Valcourt, CHFM, CHSP
Senior Director of Facilities Capital Planning and Management
2013 NEHES President

As New Englanders, we feel a close connection to the series of events that played out during the recent Boston Marathon bombings. We watched every detail unfold and our thoughts were with our NEHES member hospitals as they were in the national spotlight in caring for the victims of the bombings.

Thank you to our Boston area colleagues who responded with bravery and professionalism in this tragic event, as one headline said so eloquently, “If you want to see a hero, look at the person next to you.”

- Benefits of Membership
Personally, I join NEHES to keep in touch with my counterparts at other facilities. It is my source of information when I run into situations where I need advice on a new product or recommendations on how to solve a problem I’ve encountered.

The other key benefit is staying up-to-date on code compliance. Our industry is complicated and ever changing. By having a resource of information on codes and compliance, I’ve been able to ward off problems before they happen. Planning is essential in our business and compliance information is critical.

Don’t pass up the benefits that NEHES offers you. Renew your membership today.

- Scholarship Money Available
There are scholarship funds available to receive up to a $2000 grant, not a loan towards the cost of educational advancement.

A benefit for active NEHES members is a chance for scholarship funds toward a degree in your field or for ASHE sponsored education sessions. Please see the article in this newsletter for more details. If you are advancing your education, a NEHES Scholarship might just be the item to help cover the costs.

- Spring Seminar Success
Thank you to Allison Brisson and Jona Roberts for planning an informational Spring Seminar. The presenters were top notch and the supporting member displays impressive. We had 200 registrations for this great event; ranking it among the best attended ever. If you missed the seminar, you can find the presentations summarized in this newsletter or the full text on the website.

- Website
A goal for the Board of Directors is to have a user-friendly and modern looking website. I’m pleased to say that work in this area is just about complete. Our efforts will pay off with a professional looking website for NEHES members.

- Fall Conference
It is not too early to mark your calendars and plan to attend the Fall Conference in Portland, Maine on Sept. 29 to Oct. 2. This is our major educational event which includes the Annual Meeting where we conduct NEHES business.

Have a great summer. Hope to see you at the Annual Meeting!

President-elect’s Message

By Ed Lydon, SASHE, CHFM
Assistant Vice President of Support Services
2013 NEHES President-elect

As healthcare engineers in NEHES, are you taking the time to advance your education and personal growth?

Are you aware that NEHES has a scholarship program designed to help members advance their education? (As much as $2000 is available to members each year.)

Our profession demands a broad range of knowledge covering every aspect of a modern day healthcare facility. I know this all too well and I took on a major challenge three years ago to further my education.

You see, after three years of study and only two more classes to complete, I will graduate at the end of this year with a Master of Science degree in Healthcare Administration from Champlain College in Burlington, Vermont.

How could I maintain a full-time day job and personal life while completing an advanced degree?

I chose the program at Champlain because it is completed mostly online at my own pace with only a brief residency requirement in Vermont. It offers me the flexibility I need to study and work at the same time. It is, however, an intense effort. I put in about three hours of study each day and from 15 to 18 hours on the weekend.

For me, the rewards have been great. I chose a healthcare administration degree because it exposes me to areas of our business where I have little knowledge. Courses like Healthcare Financing and Accounting, Project Management and Electronic Medical Records gave me a crash course in new areas.

The best part of working full time and doing an online study is that resources are available in real time. When doing a segment on Quality, I visited with the Quality team at my facility. When I studied Human Resources, I visited the HR team here and learned from them.

I urge you to take a minute and think about your own plan to further your education. For some, there might be a nearby college to attend. Others may want the online study experience.

If you’ve been thinking about this and want to move forward, consider dropping a note to Wes Pooler wes.pooler@vtmednet.org who heads up our NEHES scholarship program.

As for me, it is back to studying. I can’t wait to celebrate graduation..thanks to NEHES.
Wes Pooler, CHFM  
*Director of Facilities Management*  
Fletcher Allen Health Care, Burlington, VT, NEHES Scholarship Chairman

Thinking about advancing your education? NEHES can help cover the cost and is now accepting Active Member scholarship applications.

Active Member is defined as those individuals who are directly employed in or by healthcare-related facilities (those that provide patient care), and who have responsibility in healthcare facility operations (e.g. facilities management, plant engineering, planning/design/construction, security, safety, clinical engineering, and telecommunications).

**Active Member Scholarship Application**

**Deadline:** January 1 – December 31 until budget is committed.  
The Active Member Scholarship shall be awarded to Active Members pursuing a degree.

Applications will need the following information.

- Name, Title, Current Employer, Employer Address, Tenure with Current Employer, Years worked in Healthcare, Current level of education, Degree / Educational Program (enrolled or planned),

Attach the following:

- A brief resume with focus on healthcare-facilities-related experience and education.
- A short essay (less than 200 words) that outlines your educational path associated with disciplines within Healthcare Facilities Management.
- Provide a brief outline of activities that support your local chapter and/or NEHES.
- An outline budget for the educational path with such information as total cost, employer and member contribution, and requested scholarship.
- Name and address at the Educational institution to which the check may be sent.
- Copy of employer policy on tuition reimbursement/educational assistance.
- Letter of recommendation from the President of the applicants’ local NEHES chapter, including information such as: how long the applicant has been a member of the state chapter; activities the applicant has participated in at the chapter level; projects the applicant has been involved in at their healthcare organization.

Scholarships shall be awarded on a rolling basis until all funds have been allocated. The maximum that may be awarded for an active member scholarship is $2,000.

Send completed application to:

Wes Pooler, CHFM  
Director of Facilities Management  
Fletcher Allen Health Care  
111 Colchester Ave.  
Burlington, VT 05401  
Phone: (802) 847-0321  
Email: wes.pooler@vtmednet.org

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Certified Healthcare Facility Manager (CHFM) Fee Waiver

Don't Miss Out on this NEHES benefit!

Don’t let another year go by without receiving the recognition you deserve. “CHFM status provides both internal and external rewards. CHFMs enjoy the pride of recognition of being among the elite in a critical field of healthcare. CHFM is a premier credential based on a sound assessment that provides distinction in an increasingly competitive marketplace.”

The American Society for Healthcare Engineering (ASHE) has agreed to provide a number of CHFM exam fee waivers if you are currently an active member of both NEHES and ASHE.

If you are thinking 2013 is the year to finally take the exam, here is your big chance to save the $275 exam fee. The only thing you have to do, in addition to being both a NEHES and an ASHE active member, is 1) be eligible to take the exam, and 2) request the waiver by completing and submitting the application by using the contact information below. (See [http://www.aha.org/certifcenter/CHFM/index.shtml](http://www.aha.org/certifcenter/CHFM/index.shtml) for the CHFM eligibility requirements.)

Anyone who has previously received a waiver or taken the exam is not eligible for this offer.

These waivers are currently available, but you must submit your application to the NEHES Education Chair, and not to ASHE, to receive this exam fee waiver from NEHES.

To submit your application, contact the NEHES Education Chair. Jona Roberts jona.roberts@hitchcock.org; (603) 650-8457

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“Personally, I join NEHES to keep in touch with my counterparts at other facilities. It is my source of information when I run into situations where I need advice on a new product or recommendations on how to solve a problem I’ve encountered.” — NEHES President, Gary Valcourt
2013 Twin State Seminar August 16, 2013—Summertime Education

Sponsored by New Hampshire Society of Healthcare Engineers & Vermont Healthcare Engineers Society

Location: Dartmouth-Hitchcock Medical Center
1 Medical Center Drive. Lebanon, NH, Auditorium E

8:15 Sign In
8:45 Welcome- Gail Dahlstrom, Vice President, Facilities Dartmouth Hitchcock
9:00 Emergency Generator Operations and Maintenance- Tom Gallo, Milton CAT
10:30 Break
11:00 Healthcare Security
Jack Conry, Director of Security
Fletcher Allen Health Care
12:00 Lunch
1:00 National and State Air Quality Standards Affecting Your Boilers and Generators
Cathy Beahm, Technical Assistance Specialist
NH Department of Environmental Services
1:30 ASHRAE 188
Nora Rothschild, Environmental Technology Manager
Environmental Group
2:00 ASHE Advocacy
Tyson Moulton, Director of Facilities
Gifford Medical Center
3:00 New CNG Facility and Boiler Conversion Case Study, Including Tour
New England Mechanical
Dartmouth-Hitchcock Medical Center
3:15 Raffle and Break
3:45 Adjourn

NEHES is Again Designated a Platinum Chapter of ASHE in 2012

NEHES President Gary Valcourt, CHFM, CHSP announces that NEHES has achieved the Platinum Level of Affiliation from ASHE (American Society for Healthcare Engineering) for the eighth year in a row.

The Platinum Level is the highest Level of Affiliation that can be attained by an ASHE Chapter. The award will be presented during the Chapter Leadership Luncheon at the ASHE Annual Conference this summer in Atlanta, Georgia.

“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’ hard work and commitment to our members, especially in the areas of education, advocacy, and communication,” Gary said.

NEHES met or exceeded minimum criteria for the Platinum level in several areas, including:

1. Education
2. Number of NEHES members who are also ASHE members
3. Communications from NEHES officers to members
4. Four quarterly NEHES Newsletters
5. Four quarterly NEHES Codes & Standards issues
6. Blast e-mails to all members throughout 2012.

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.

Info on Platinum Level, go to ashe.org/about/chapters/pdfs/affiliation_agreement.pdf
Nominate a Deserving Candidate for the 2012 NEHES Engineer of the Year!

By Jona Roberts, CHFM
Engineering Manager
Dartmouth-Hitchcock Medical Center
Lebanon, NH
2011 NEHES Engineer of the Year

As the last recipient of the New England Healthcare Engineers’ Society Engineer of the Year award, it is my honor to announce that nominations are now being accepted to determine who the next Society member will be to receive NEHES’ most distinguished award. The nomination deadline is August 1, 2013.

The seventeenth NEHES Engineer of the Year award will be presented to a NEHES Active member who has distinguished himself/herself in service to the Society and our profession during the previous calendar year (2012).

Distinguishing qualities may include service to their institution, their chapter, fellow engineers, and the Society as a whole.

The award consists of a plaque, a $500 cash award, waiver of the Fall Seminar registration and spousal fees, publication of a news release in the newspaper designated by the Engineer of the Year, and a letter to the chief executive officer at the awardees’ place of employment.

The successful candidate will be announced on October 1, 2013 at the NEHES Annual Banquet held during the Fall Conference in Portland, ME.

Please take a moment to review and download the nomination forms at www.nehes.org and nominate a deserving candidate for this special award.

Completed nominations and supporting documents can be sent or emailed to: Jona Roberts, CHFM
One Medical Center Drive
Dartmouth-Hitchcock Medical Center
Lebanon, NH 03756
jona.roberts@hitchcock.org

Past Engineers of the Year are:
1996 - Mark Cappello
1997 - Tom O’Sullivan
1998 - Jack Gosselin, FASHE, CHFM
1999 - Steve Cutter, SASHE, CHFM, MBA, HFDP
2000 - Joe Mona
2001 - Mark English, CCE, SASHE, CHFM
2002 - Don Garrison, FASHE, CHFM
2003 - Gene Cable, P.E., MSFPE
2004 - Ron Vachon, SASHE, CHFM, CHEC
2005 - Joe Mona
2006 - Bob Lord
2007 - Steve Jalowiec, P.E., CHFM
2008 - Fred Leffingwell, CHFM
2009 - Dave Dagenais, FASHE, CHFM, CHSP
2010 - Ed Lydon, SASHE, CHFM
2011 - Jona Roberts, CHFM.

Submit an Article for NEHES Newsletter—Earn Cash & Recognition

By Ron Vachon, SASHE, CHFM, CHEC
Engineering Director
St. Mary’s Regional Medical Center
Lewiston, Maine
NEHES Communications Chair

The NEHES Board of Directors will award $200 and a certificate to any Society Active member who contributes a high quality article to the NEHES Newsletter.

The winner will be recognized at the Awards Banquet during the 2013 NEHES Fall Conference. Active members are those individuals who are directly employed in or by healthcare-related facilities (those that provide patient care), and who have responsibility in healthcare facility operations (e.g., facilities management, plant engineering, planning/design/construction, security, safety, clinical engineering, and telecommunications).

Articles describing experiences that NEHES members have had in their facilities that would benefit other members are of particular interest.

Articles eligible for the contest will be those that have been submitted for the 2012 Q4 newsletter, and for the Q1, Q2, and Q3 2013 newsletters.

Submit your entries and ideas to Ron Vachon, SASHE, CHFM, CHEC, Newsletter Editor and Web Manager, rvachon@stmarysmaine.com

The deadline for the Q3 NEHES newsletter is August 10, 2013.

Have an idea for an article but want help writing it? Or maybe you want to be interviewed and we’ll write it? Contact Dan Marois at dmarois@fairpoint.net and we will

Tips for Great Articles:

Write what you know about— Consider sharing an experience you had at your facility. Tells us about a successful project. Give us words of advice that help us in our jobs.

Identify with the reader— What interests you when you read the newsletter? There’s a good chance the same things that capture your attention will be similar for other NEHES members.

Less is often better— Hit the highlights of your story. Give us the concise info we need to know then give us contact info should readers have more questions.

Try tape recording your story— Some people have better success talking into a tape recorder than writing at a keyboard. Try it! We can always transcribe your story to print.

Great things happen when engineers share info with fellow NEHES members.
NEHES recognizes leadership from throughout New England in the Chapter Leadership Award.

NEHES is currently accepting nominations for the 2013 Chapter Leadership Award. The award was established to recognize leadership at the state chapter level, promote leadership on a regional basis, including Board participation at NEHES, and provide an introduction or additional exposure to the American Society for Healthcare Engineering (ASHE).

The first ever winner of the Chapter Leadership Award was presented in 2012 to Joshua “Josh” K. Philbrook, MPA, CHFM, who is employed as the Life Safety Officer and Quality Control Coordinator at UMass Memorial Healthcare in Worcester, Massachusetts. Josh is a member of the Massachusetts Healthcare Facility Professional Society (MHFPS).

In nominating Josh for this recognition, the MHFPS chapter president, Kevin Keating, CHFM, noted that; “Josh is highly motivated and has clearly demonstrated his passion for the healthcare engineering profession. His involvement in NEHES and the MHFPS is clear proof of his commitment to the profession.”

Who will receive the 2013 Chapter Leadership Award? Only you can answer that question.

Eligibility:
Each state chapter should nominate one person annually. Of all the submissions, one nominee will be chosen annually for the Chapter Leadership Award. Those chosen will become candidates for the following year’s ASHE Emerging Regional Leader program from Region 1 as long as all the NEHES and ASHE requirements are met.

To be eligible for this award, the candidate must be a current Active member of their state chapter and NEHES (and must maintain their membership the following year to qualify as a NEHES board member), be currently employed in a facet of healthcare facility operations, and demonstrate leadership skills through their workplace and chapter efforts and through their commitment to the field of healthcare facility management.

Award Benefits:
All candidates must be able to accept and fulfill these Award Benefits:

- Award announced and the recipient introduced at the Fall Conference. Recipient will receive:
  - A plaque, press release, and recognition in the NEHES newsletter commemorating their achievement.
  - Free NEHES membership for the following year.
  - Appointment to and active participation in a Chair position on the NEHES Board for the following year. (This includes free conference registration for the following year and the current year’s annual retreat costs.)
  - Consideration as a candidate for the ASHE Emerging Regional Leader program following the year of Board service.
  - Stipend to cover costs to attend the current year’s fall conference and the following year’s ASHE annual conference.

Application Process:

After a state chapter candidate is selected the following supporting documentation can be submitted by the State Chapter Representative to the NEHES Education and Career Development Chair.

The documentation includes:
1. A letter of recommendation from a chapter officer that outlines the reason for the nomination, leadership qualities of the candidate, and examples of their contributions to the chapter and healthcare facility management.
2. A high resolution color photo (electronically or on a disk).
3. The candidate’s current professional resume.
4. Applications are due by August 1, 2012.

For additional information or to submit an application please contact:
Jona Roberts, CHFM
NEHES Education and Career Development Chair
(603) 650-8457
jona.roberts@hitchcock.org

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## 2013 Member Satisfaction Survey Results

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<th>2013</th>
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The NEHES Board of Directors recently reviewed the satisfaction survey results for 2013. While members continue to be Satisfied to Very Satisfied with NEHES programs, the board is concerned that positive numbers have fallen since 2011 and have targeted steps to improve scores.

New data from the enhanced 2013 survey shows:
- 76% of respondents are likely to recommend this association to friends or colleagues.
- 86% of respondents are likely to renew their membership.
- 88% of respondents are likely to attend an upcoming event.

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Welcome to New NEHES Members

Thanks for joining our award winning society!

**Maine**

Ken Albert, Director  
Facilities Management  
Goodall Hospital  
Sanford, ME

David Fisher  
N.E. Sales Mgr.  
Yourkshore  
York, ME

New Hampshire

Robert Holden, President  
Denron Plumbing & HVAC  
Manchester, NH

Sidney McComiskey  
Facilities Electrician  
Dartmouth-Hitchcock Medical Ctr.  
Nashua, NH

Vermont

Nicole Duncan  
Project Coordinator  
Central Vermont Med Ctr.  
Berlin, VT

**Massachusetts**

Joseph Byrne, Owner  
Renovation Services  
Canton, MA

Benjamin Davenny, Sr. Consultant  
Acentech Incorporated  
Cambridge, MA

Stephen Gambale, Outside Sales  
Graybar Electric Co.  
Medford, MA

Charles Harner  
Director of General Services  
Fairview Hospital  
Great Barrington, MA

Jacob Hart  
Chief Operating Officer  
Envirotech Clean Air, Inc.  
Stoneham, MA

Trina Jerich, Project Executive  
Timberline Construction  
Canton, MA

John Letourneau, Account Manager  
ISI-Integrated Security  
Foxboro, MA

Brenden Lydon—Student  
Marblehead, MA

Francis Maheno  
Technical Support  
Spirax Sarco  
Worcester, MA

John McSheffrey, President  
En-Gauge Inc.  
Rockland, MA

Chuck Naud, Principal  
The Skyline Group  
Uxbridge, MA

Gregory Oles  
Manager Engineering  
Baystate Franklin Medical Center  
Greenfield, MA

Christopher Picoraro, Outside Sales  
Graybar Electric  
Boston, MA

Jeffrey Smart, Vice Pres.  
Sign System Solutions  
Ashland, MA

Edward Stewart, Associate  
Gale Associates, Inc.  
Weymouth, MA

Rhode Island

Paul Casado  
Safety and Emergency Preparedness  
Women & Infants Hospital  
Providence, RI

Connecticut

Robert Andrews  
Compliance/Project Engineer  
Day Kimball Hospital  
Putnam, CT

Donata Ceretto-Diannone  
Senior Project Manager  
Tecton Architects  
Hartford, CT

Chapter Reports

**Connecticut Healthcare Engineers’ Society**  
Chapter Representative (Interim): Fred Leffingwell, CHFM,  
 schleffingwell@wtbyhosp.org

**Maine Healthcare Engineers’ Society**  
Chapter Representative: Milt Dudley, CPE, CHFM, CHEC, mdudley@emh.org

Meeting: April 19, 2013—Senator Inn in Augusta, Maine  
Program: Presentation by Scott Wibeto from Milton CAT—Milton CAT Offerings

**New Hampshire Society of Healthcare Engineers**  
Chapter Representative: Alison Brisson,  
Alison.brisson@wdhospital.com

Meeting: April 19, 2013  
Concord Hospital, Concord, New Hampshire  
Program: Bio-Mass Fuel

**Rhode Island Healthcare Engineers’ Society**—Chapter Representative: open

**Vermont Healthcare Engineers’ Society**  
Chapter Representative: Brian Sallisky, CHFM, Brian.Sallisky@State.MA.US

Meeting: March 29, 2013—Montpelier, Vermont  
Program: Presentation by Green Mountain Care Board.

Meeting: May 10, 2013, Gifford Medical Center in Randolph, Vermont  
Program: Energy Efficiency Modeling/Energy Leadership for Hospitals

Meeting: September 13—Chapter Annual Meeting. Location to be announced.

Massachusetts Healthcare Facility Professional Society, Inc.  
Chapter Representative: Larry Williams, CHFM,  
larry.williams@steward.org

Meeting: January 24, 2013—Milford, Massachusetts  
Program: Presentation by Scott Wibeto from Milton CAT—Milton CAT Offerings

Meeting: May 16 - TBD  
Program: CMS Surveys

Meeting: May 17, 2013  
Program: Joint Commission Code Update or Safety Requirement  
Dave Dagenais from Wentworth Douglas.
What picture does the term Facilities Management bring to mind? A service person, someone with a rag in their back pocket, possibly wearing a tool belt or pushing a work cart—"Mr. Fix-it". Maybe the picture is one of a building landlord, the person to call when the building systems are not working or when the utility bills are due. Or maybe a Chief Facilities Officer is envisioned; a senior individual charged with responsibility for the largest single asset on the balance sheet—the Plant, Property and Equipment. Any and all of these mind pictures are correct, but they do not fully encompass the role of health care Facilities Management. That role requires the development of a different picture.

Begin with imagining the most complex and technologically advanced patient care room in a health care organization. Typically, in a medical center or an acute care setting, this room will be in the Intensive Care Unit. The Information Services and Telecommunications equipment in this room are impressive and many times their software components are on the leading edge of medical technology. But the technology does not end with those components.

To this imagined setting add physiological monitors, telemetry systems, pulse oximeters, infusion pumps and many of the organization’s other medical equipment management plan components. An equipment plan that is the responsibility of the Clinical Engineering or Biomedical Services Department—often a subset within Facilities Management—and in large medical centers this plan will contain tens of thousands of pieces of equipment. The individuals within this portion of Facilities Management are trained and proficient in the software and hardware aspects of medical equipment, often with the ability to make repairs at the circuit board level of components.

In addition, to the picture now add a nurse call system, a code system, specialty lighting and a motorized bed.

Simple equipment, all maintained by the Facilities Management electricians, and all equipment that is now embedded with electronic chips, sophisticated controls and software. The electrical details of the image further include the fire alarm detectors and annunciators, the power supply systems and the emergency power supply system—the red plugs. Again, systems and equipment equipped with electronic chips and controls, all of which require an electrician who is more than someone that changes light bulbs or pulls wires.

The room contains medical gas and vacuum systems, a hand washing sink, and possibly a de-ionized water or a reverse-osmosis system; each of these systems complex and provided with back-ups and redundancy. Electronically controlled and alarmed systems, and maintained by the Facilities Management plumbers; the same individuals unstopping the toilets and fixing the dripping faucet.

With this simple ‘mind picture’ the role of Facilities Management individuals begins to expand and by extension, the role of Facilities Management itself. It is technologically intense and systematically complex dealing with components not normally seen or understood; unless they are not working.

Take imagination to the next level. Within this room picture a patient in the bed. Surrounding the bed are family members with a caring staff and service providers as a part of the picture.

Imagine a bubble, clear but tenuous, around the people and equipment in the room. Into that bubble tempered filtered air is pumped; light and power is transmitted into the bubble; overall within the bubble is a clean, safe and comfortable area of care—the environment of care.

This bubble is developed and maintained by the typical components of Facilities Management—Plant Operations, Repairs and Maintenance, Environmental Health and Safety, Clinical Engineering, Security, Housekeeping. As the people in the bubble—patients, visitors, employees—move around the organization, the bubble moves with them providing an ongoing environment of care. Importantly though, the image must be a bubble because a small event can easily burst the façade and have a direct impact on patient care.

Facilities Management is no longer simply the fix-it crew. The technology and complexity involved with being a part of this team results in a highly trained and dedicated group of individuals. Facilities Management provides direct patient care without touching the patient.

In the future the Facilities Management image that comes to mind should be that of the bubble of care.
The Wentworth-Douglass Professional Center has ten physician groups that specialize in family practice, internal medicine, and specialty medicine. Located on four floors, the group practices have suites with physician offices, exam rooms, registration business areas, and patient waiting rooms. In addition to the group practices, there is an on-site lab and an imaging suite.

Each suite in the Professional Center required some assistance with solving acoustical challenges in the suite. The reception/registration area in the practice had patient check-in and checkout counters located at either end. Because of the open design of the suite, conversations taking place at the registration desk and noise from the nearby business area were creating unwanted distractions for patients in the waiting room. A radio on the registration counter was being played to cover distracting conversations and unwanted activity noise. When music was not playing, staff and patients in the waiting room could overhear conversations.

**Solution**
When the Practice expressed concerns about distracting noise, I engaged an acoustics consultant to address the acoustical challenges of the space.

The consultant surveyed the ten group practice suites and determined there were two major issues.

Conversations from the registration desk could be overheard in the waiting room, and noise from the business office was distracting and unpleasant.

To maintain the ambiance of the open concept in the suite, the consultant determined the most effective way to improve the acoustic environment was to deploy a sound masking system. He advised that I test a sound masking solution, so we selected the patient waiting room of the Dover Family Practice for a pilot installation.

**Results**
Over the course of several weeks, patients and nursing staff in the practice were surveyed on their ability to overhear conversations and noise from the office area and the general ambiance of the space. The feedback from patients and staff was overwhelmingly positive. The sound masking proved to be highly effective in providing the appropriate level of sound masking and the perception of noise reduction. With emitters installed into ceiling tiles in the waiting room, noise and voices from the business office were less audible.

As a result of the initial pilot, we expanded the system into all ten physician group practices, as well as the lab and imaging suites. Emitters were placed in hallways outside of exam rooms and in waiting rooms throughout the four floors of the Professional Center.

We found the system we chose with its six zones ideally suited for our open space design and the individual acoustical challenges in our ten private practices. In addition, the two audio inputs enable us to have full paging and music ability throughout the professional center. I was also impressed with the low impact of the installation process.

With the sound masking system in place, there is less distraction from unwanted sounds and conversations. Patients and staff can now experience the positive, customer centric ambiance we wanted to achieve through the open design concept, and we gained a greater level of patient satisfaction.

The payoff is an improvement in patient satisfaction scores. Remember, that it is teamwork between patient care providers and engineering that can bring a much more satisfying patient experience to our healthcare facilities.
Det Norske Veritas Healthcare (DNVHC) Hospital Accreditation

Most of us by now may have heard of DNV or had been recently surveyed by them; effective September 26, 2008, the Centers for Medicare & Medicaid Services (CMS) announced their decision to approve Det Norske Veritas Healthcare, Inc. (DNVHC) for recognition as a national accreditation organization for hospitals seeking to participate in the Medicare or Medicaid programs. This has provided another alternative for hospitals that have looked primarily to The Joint Commission (TJC) for their hospital accreditation.

An alternative to state compliance surveys is certification by a nationally-recognized accreditation program that can substitute for ongoing state review. If an accreditation organization is recognized by CMS as having standards for accreditation that meet or exceed Medicare requirements, a provider entity accredited by the national accrediting body’s approved program may be deemed to meet the Medicare Conditions of Participation (CoPs).

Up until September 26, 2008, “deemed status” could only be achieved through TJC, CMS, state agencies, and the American Osteopathic Association’s HFAP (Healthcare Facilities Accreditation Program).

DNVHC’s NIAHOSM (National Integrated Accreditation for Healthcare Organizations) accreditation program is the first ever that combines the Medicare CoPs and the ISO 9001:2000 Quality management systems among several other ISO standards. Where I see the Joint commission’s Quality performance model is based on Performance Measurements.

This integrated concept provides hospitals with a unique approach to ensure compliance with the Medicare requirements and the necessary guidance to facilitate continuous quality improvement.

For a comparison between the Joint Commission and Det Norske Veritas Healthcare, click here.

Planning Your Next Career Move (Excerpts taken from an article by Jack Gosselin, Administrative Director—ASHE Region 1)

The key to effective career choice is blending well-researched occupational data with a sound understanding of your own unique strengths, personality, values, preferences, and talents.

- Identify what you do best. For example, many individuals in our field thrive on the technical aspects of the profession, while others gain success in managing these functions.
- Conduct detailed research and gather information on the characteristics of role(s) that most interest you. Speak with people in that role in other institutions and discuss the skills required to be effective.
- Pinpoint the qualifications you need to move to the next step in your career. Assess certifications, graduate degrees, and specific competencies unique to the position you desire.
- Compare your current profile with the qualifications developed in the last step. How far apart are the two profiles? If fairly well matched, it may be time to switch to a job search. If far apart, can you realistically achieve the qualifications in the short-term?
- Develop a plan to become qualified for the next step in your career. Develop a timeline and action plan for achieving each type, being sure to set specific goals and priorities.
- Long-term career planning usually involves a planning window of five years or longer and a broader set of guidelines and preparation. The healthcare workplace is rapidly changing, and the skills that you have or plan for today may not be in demand years from now. Long-range career planning should be more about identifying and developing core skills that organizations will always value while developing your personal and career goals in a broad sense.

Position yourself the best you can within your organization with the skills and competencies that are required. Plan for the future both in the short and long term by becoming aware of what our industry is demanding from our responsibility.

The basic message would be “know thyself.”
NEHES 2013 Proposed Bylaw Changes

There are currently two (2) proposed bylaw amendments that have been endorsed with ten signatures of active or honorary members.

The first proposed bylaw amendment is to Article IV Section 4-4: Active Membership. The only change to this section is the removal of the word *directly* from the first sentence.

Here are the two amendments being proposed:

### Amendment #1

**Article IV Eligibility and Membership**

**Section 4-4: Active Membership:**

Active Membership in the Society shall be available to those individuals who are *directly* employed in or by healthcare-related facilities (those that provide patient care), and who have direct responsibility in healthcare facility operations (e.g., facilities management, plant engineering, planning/design/construction, security, safety, clinical engineering, environmental services, telecommunications, and emergency management). Active Members may vote, hold office, and serve on committees. At the discretion of the Board of Directors, any Active Member whose circumstances change so that they no longer meet the criterion for active membership may be allowed to continue their membership status for the remainder of the current dues period and/or term of office.

### Amendment #2

**Article IV Eligibility and Membership**

**Section 4-4 A: Active Membership Non Directly Employed:**

Active Membership Non Directly Employed in the Society shall be available to those individuals who are *directly* employed in or by healthcare-related facilities (those that provide patient care), and who have direct responsibility in healthcare facility operations (e.g., facilities management, plant engineering, planning/design/construction, security, safety, clinical engineering, environmental services, telecommunications, and emergency management). Active Members Non Directly Employed may vote, hold office, and serve on committees. At the discretion of the Board of Directors, any Active Member Non Directly Employed whose circumstances change so that they no longer meet the criterion for active membership may be allowed to continue their membership status for the remainder of the current dues period and/or term of office.

### Pros/Cons:

**Amendment #1**

- By eliminating the word *directly*, this change opens up membership in NEHES to engineers who are not directly working for a healthcare organization.
- The change would open membership to individuals who work for contract management organizations hired by healthcare facilities to run their operations.
- Some members believe that membership should be only open to individuals directly employed by a healthcare facility. This has been a long standing arrangement for NEHES.

**Amendment #2**

- By eliminating the word *directly*, this change opens up membership in NEHES to engineers who are not directly working for a healthcare organization.
- This change creates a new membership category specifically for individuals who work for contract management service organizations.
- This change allows contract service individuals to become NEHES members who may serve on committees, but not be allowed to vote or hold office.
New Logo, New Website, Updated Newsletter

What 55 year old wouldn’t want a make over now and then?

After sporting a logo that still has a T-Square on it for many decades, the NEHES Board has launched a new logo for the Society.

“Our designer immediately honed in - identifying that our logo image was dated,” said Ron Vachon, NEHES newsletter editor. “The gear, lightning bolt, hammer and square reflected images that date back to chapter origin, circa 1959. As technologies and responsibilities have evolved; we looked at the new image to represent what Healthcare Engineering is today. The process involved a task force to provide the designer with vision that led to development of different concepts.

Less literal than the old image, the new feel brings colors symbolic of health, conservation, sustainability, economy, and efficiency, and circular images to represent management components of collaboration and teamwork. The board agreed this website image should be adopted as our NEHES logo into the future.

We will continue to own our old image in the background. You will see it on certificate seals and some of our past seals and awards that we prominently display.

Newsletter Update

With Debbie Sullivan’s retirement after 17 years producing the NEHES newsletter, her work will continue on with Dan Marois, from Poland Spring, Maine who is a freelance writer and communication specialist.

“When I was searching for a new newsletter editor, our NEHES webmaster, Ron Meldrum, suggested that I contact Dan,” said Ron Vachon. “I discovered that Dan has been involved in healthcare communication for over 30 years with 10 years at St. Mary’s Regional Medical Center where I’m currently employed. I think his wealth of experience will continue our excellence in communication for our members.”

Dan holds a bachelor’s degree in English and Communications from Boston University and he’s worked in public relations and marketing in many capacities.

“I’ve worked with NEHES members and a few Maine hospitals,” said Dan. “I’ve always had the highest respect for healthcare engineers and the vital role they play in patient care.”

Dan is always looking for good story ideas for the newsletter.

“The NEHES Newsletter will be more user friendly for our members with current updated information.”

Website Changes

The NEHES website is in the process of being update with the new logo and a new look of its own.

“A website can be the quickest and easiest way to bring a message to our members,” said NEHES President, Gary Valcourt. “Our goal is to make it user friendly and full of timely, useful information.”

Webmaster, Ron Meldrum, from New Vineyard, Maine is the mastermind behind the technical aspects of the website while designer, Marie A. Carija, and NEHES member, Ron Vachon, have lead the design changes. Michele Deane from the NEHES Administrative Office is responsible for content updates.

In addition to current information, the website will host information from past seminars and provide updates on state chapter happenings.

For the convenience of NEHES members, you can now join the Society or renew your membership from a link on the website.

Go to www.nehes.org and click on the Join NEHES link to renew your membership and to update your contact information. All members must renew to be counted in the most up-to-date membership listings.
**NEHES News Nuggets**

- **ASHE Board Nominations**

  NEHES member, Dave Dagenais, from Wentworth-Douglass Hospital in Dover, New Hampshire, will be running for the position of President Elect on the national ASHE Board. Dave is currently serving his first year of his second term of office on the national Board.

  NEHES Administrative Director, Jack Gosselin, is being nominated to serve on the ASHE Board in the position of Associate At Large Member. Jack served on the national board as an Active Member from 1996 to 2000.

  NEHES members have served on the national ASHE Board with great distinction. Should Dave serve as President of ASHE, it would be the third time that a New England representative would hold that position.

- **Max Paine Retires**

  Max Paine, Director of Plant Facilities at Copley Hospital in Morrisville, Vermont has retired after 35 years at the facility.

  Max was a longtime Vermont, NEHES and ASHE member who gave numerous contributions to the field of healthcare engineering.

- **National Fire Protection Agency Code Changes Get Review**

  At the Spring Conference in April, Dave Dagenais, ASHE Region 1 Director and Liaison to NEHES, conducted a survey from all members attending regarding 42 NFPA (National Fire Protection Agency) Technical Committee recommended code changes.

  The NFPA looks to organizations such as NEHES for feedback on recommended changes. Dave reviewed each change and asked attending members to either agree, disagree or abstain regarding the changes.

  “Of the 42 code changes we voted on, the majority had agreement from the NEHES membership,” said Dave. “Only one item had significant opposition.”

  NEHES members disagreed with the “New requirement for odor test to be conducted on positive pressure gas outlets” with a vote of 6 agreeing and 55 disagreeing. Members cited that with no guidelines to describe the odor, the requirement was moot.

  “Your NEHES advocacy team will be advocating to overturn the requirement for odor tests to be conducted on positive pressure gas outlets,” said Dagenais.

  NEHES members were split with 31 agreeing and 32 disagreeing to a recommendation of “changing to all six feet wide corridors in new nursing homes housing not more than 30 patients.” (See more details in this months Codes & Standards Newsletter section.)

- **Bickford Named Maine President**

  Congratulations to Daniel Bickford, Director of Engineering at Central Maine Medical Center in Lewiston who is the new President of the Maine Healthcare Engineers Association.

- **Marketing NEHES To Members and Beyond**

  Dave Rosinski, Director of Facilities at Noble Hospital in Springfield, Massachusetts is working on updating the NEHES membership brochure. While it is important that NEHES expands its reach via the website and social media, Dave believes there’s still power in the print media and he hopes to have new brochures ready for the NEHES Fall Conference.
Events & Dates to Remember

- **July 21, 2013**
  Certified Health Care Facility Manager (CHFM) Exam Review Course—[ashe.org/learn/seminars_and_workshops/CHFM/index.html](http://ashe.org/learn/seminars_and_workshops/CHFM/index.html)

- **ASHE Conference and Technical Exhibition ASHE 50th Anniversary—Atlanta, GA**
  - **July 21-24, 2013**
  - [ashe.org/annual/index.html](http://ashe.org/annual/index.html)
  —Atlanta, GA

- **August 16, 2013**

Dartmouth-Hitchcock Medical Center in Lebanon, New Hampshire.

Organizers: New Hampshire Society of Healthcare Engineers and the Vermont Healthcare Engineers Society

- **September 29 to October 2, 2013**
  NEHES—Fall Conference Holiday Inn by the Bay, Portland, ME
  Organizers: Members of the Maine Healthcare Engineers’ Society [mdudley@emh.org](mailto:mdudley@emh.org)

- **October 20 to 26**
  National Healthcare Engineering Week

Editor Retires After 17 Years With NEHES

Debbie Sullivan, who has helped NEHES with the quarterly newsletter and web site for the past 17 years, retired in February to have time to travel with her now-retired husband, Dwight.

Debbie joined NEHES in January, 1996 at the invitation of Dan Ayres, former NEHES Newsletter editor who, at the time, was Vice President, Facilities Services, at Fletcher Allen Health Care, Burlington, Vermont. Debbie grew up a couple of blocks from Fletcher Allen and, after a career as a newspaper reporter, started a freelance writing business.

“It’s amazing to me how fast 17 years have gone by,” said Debbie, who thanks NEHES for letting her continue to work for NEHES as she and her family moved from Hinesburg, Vermont to Chapel Hill, North Carolina and then to Venice, Florida. “I consider myself incredibly fortunate and grateful to have worked with so many amazing healthcare professionals who have contributed so much to their profession.”

“We can’t thank Deb enough for her contributions to our success,” said Ron Vachon, NEHES Newsletter Editor and Website Chair. “She not only was our newsletter guru over the last 17 years, she was there to help NEHES when needed. She pulled together loose ends that were becoming unraveled at the time of seminars and conferences and always worked behind the scenes to help make us a professional organization.”

NEHES President, Gary Valcourt, said that Debbie is one of the most dedicated people he’s ever met.

“She would always track me down and keep me on task,” said Valcourt. “She even called me once to tell me that my ASHE status needed to be updated. That wasn’t her job, but her dedication came through in everything she did. We wish her well in her next adventure.”

At the May NEHES Board meeting, a card for well wishes was circulated to send to Debbie.

The Board also made a gift to Debbie’s travel fund to be enjoyed in her retirement excursions.

NEHES members are invited to send their best wishes to Debbie Sullivan at [debbiesull@gmail.com](mailto:debbiesull@gmail.com).

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