

## President's Letter



**A**s we near the close of 2002, I want to take a few moments to reflect back on the many accomplishments and success stories we've shared during my tenure as president of ASHE. This year saw the beginning of many new and exciting ventures for ASHE, including the introduction of our Contractor's Certificate, the development of our new magazine, *insideASHE... for Today's Healthcare Engineer*, our first Annual Leadership Institute, record-breaking attendance at our PDC and Annual Conferences, continued and expanded relationships with key organizations such as the AIA, JCAHO, NFPA, and the outline of our first Pacific Rim Conference, scheduled for year 2005. These are just a few of the many exciting things happening at ASHE.

More than 100 contractors attended the designated sessions at the PDC and Annual Conferences this year to complete the education requirements for the Contractor's Certificate. The program has been an unprecedented success and I am pleased that we will be offering four Contractor Certificate programs in 2003 in addition to the offerings at the 2003 PDC and Annual Conferences. Our future goal is to develop the program into a true certification program and we hope to attain that goal within the next twelve to eighteen months.

Our premier publication, *insideASHE... for Today's Healthcare Engineer*, will be published bi-monthly in 2003, and offers the latest information on Society happenings and industry news and trends. This magazine has evolved from an 8-page, black-and-white newsletter, to a 64-page, glossy, four-color magazine, and focuses on meeting the changing informational needs of our membership. I am extremely proud of our new magazine and feel it is a flagship publication for our industry.

Coupled with the magazine, ASHE began ASHEflash—the weekly e-mail newsletter that offers highlights on what's happening in ASHE, the industry, and in the news worldwide. Response to ASHEflash has been tremendous and it is widely read-and enjoyed-by our membership. The trivia question is a huge hit and responses begin coming in approximately two minutes after the electronic newsletter is received!

In addition to record-breaking attendance at both our 2002 International Conference and Exhibition on Health Facility Planning, Design and Construction (PDC) Conference, held March 25-27 in Orlando, and our 39th Annual Conference & Technical Exhibition, held July 29-31 in Nashville, we offered several outstanding educational programs throughout the year on areas such as Environment of Care, NFPA Standards, and Infection Control. Mark your calendars now for the 2003 PDC Conference, to be held March 10-12 in Phoenix, and our 40th Annual Conference, to be held July 14-16 in San Antonio. You won't want to miss either of these important programs!

Plans are being finalized for educational programs in 2003, and I encourage all of you to attend programs in your area and obtain the latest information designed to help you in your role as an essential partner in patient care. Check out the educational calendar in the magazine or on our website at [www.ashe.org](http://www.ashe.org).

We held our first Leadership Institute this year in Phoenix, October 31–November 3, for our emerging leaders, the Crystal Eagle award winner, the Board, and committee chairs. The purpose of the Leadership Institute is to offer advanced training in key areas to help develop future leaders in our Society and profession. Johnson


*continued on page 13*

elements of performance" which will be used by organizations and surveyors to judge the level of compliance.

Priority Focus Process (PFP) is a new term used by JCAHO to describe the process that will direct the surveyor to organizational-specific, critical patient care processes. This PFP starts pre-survey with more data gathered about the organization and then used by survey organizers to identify and focus surveyors on the organizational processes that are most relevant to patient safety and quality of care. Once onsite, the surveyors will use the "tracer methodology" by accessing open patient records to trace the progress of those patients through the care process, identifying key services provides such as lab work, prescription and dispersal of medications, etc, and then visiting those areas where the services were provided and interviewing staff involved in that care process. Through this process, JCAHO hopes to more readily identify problem trends that have a specific impact on patient care and safety.

The new process will require that organizations complete a self-assessment at the 18-month point of the three-year accreditation cycle. Similar in concept to the Statement of Condition (SOC) and Plan for Improvement (PFI), an organization must assess its level of compliance against the current standards and identify areas where performance improvement is required to achieve full compliance. Where the organizational self-assessment diverges from the SOC & PFI model is that a specific assessment tool is provided by JCAHO in the form of a survey on a password protected extranet site. This site is designed for all organizations to submit the results of their self-assessment, as well as all plans for corrective actions, to JCAHO for review, advice on the actions selected, and approval of the corrective action(s). At the 36-month point of the survey cycle, the on-site survey team will verify that the organization has implemented the corrective actions as laid out in the self-assessment and can demonstrate compliance over the previous 12 month period. Organizations will have six months to complete the self-assessment tool with organizations that will be at mid cycle (18-month point) in January 2004, receiving the self-assessment tool in July 2003.

In response to concerns regarding the use of organizational scores to compare and imply better performance (i.e. one organizations scores 95 and a competing organization scores 93), JCAHO is planning to no longer disclose scores at any level (standard, performance area, or overall). Only the actual accreditation status will be disclosed.

Although all of the changes to be implemented for January 2004 have not yet been approved by the JCAHO Board of Commissioner's and all of the process details have not yet been explained, the thought process behind the changes, and the survey process itself, is starting to take shape and become clearer. Future editions of Inside ASHE will continue to track and report on details of the revised survey process. 

## President's Letter


*continued on page 13*

Controls funded the Institute in part, and provided additional training in areas such as team building, communication skills, negotiation, finance, and presentation skills.

ASHE continues to build strong relationships—and expand upon current relationships—with several organizations, including the AIA, JCAHO, NFPA, and the EPA. Our partnership in the EPA'S ENERGY STAR program offers valuable information on managing energy demand and consumption for our membership, and will continue to be a vital relationship for ASHE in the future. In addition, ASHE is the forerunner in the WMTS issue and has formed a partnership with Comsearch, an industry vendor, to help inform our membership of the Wireless Telemetry Issues.

Finally, as 2002 comes to a close, I would like to thank the ASHE Board of Directors for their input and unflagging energy in support of ASHE. I truly appreciate the time and effort that each of the Executive Board members offered, and their guidance and support of me as president. I also would like to thank all of the individuals that served on the numerous committees and task forces. ASHE is fortunate to have members who are willing to commit their time and expertise to developing services and products that meet the needs of its members. My heartfelt thanks are also offered to the ASHE staff and the Executive Director of ASHE, Al Sunseri. Your many efforts on behalf of the Board of Directors and the ASHE membership is what makes the difference.

In closing, I'd like to say that a Society is only as successful and strong as its membership, and ASHE reflects the strengths of its members by continuing to grow and be stronger each year. I have been fortunate to be a member of ASHE and to serve as your president in 2002. Thank you.

If you have any questions or suggestions about our Society, our goals and objectives, or any other aspect of our Society, we'd like to hear from you. Please feel free to contact your regional board member, our central ASHE staff, or send me an e-mail at [wklingel\(Ci\)armc.org](mailto:wklingel(Ci)armc.org). Join with us as essential partners in healthcare. 

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