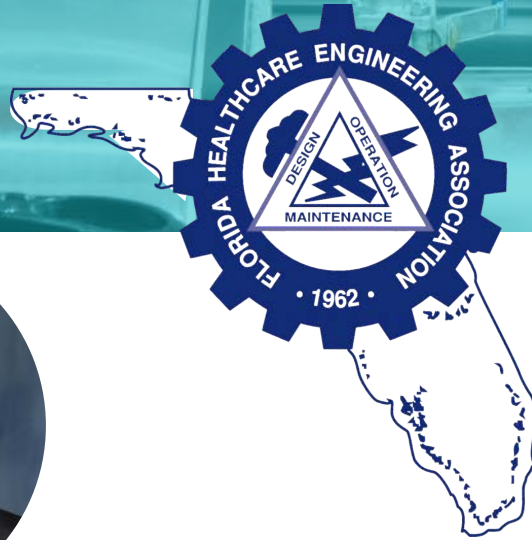


THE WHISTLE

FLORIDA HEALTHCARE ENGINEERING ASSOCIATION



THE PRESIDENT'S CORNER

Bobby Baird, SASHE, CHE, CHFM, CHSP, CHC

It has been stated before by Past Presidents, “you can expect the year to pass quickly,” and I must say that I concur completely.

While we have endured another Covid -19 year, I have personally witnessed our FHEA members meet the challenges presented in their respective organizations as well as the community at large. It never ceases to amaze me, especially the ingenuity and steadfast commitment, healthcare engineers exemplify. I personally thank you for your service to humanity. I recognize we cannot do this alone and our partners, the Supporting Members, have also made sacrifices and provided service and products outside of the normal supply chain. Your commitment to us is appreciated more than we acknowledge.

Without the FHEA Board, the job of the President would be unmanageable. Every person involved with FHEA is indebted to the Board for their time and energy they have volunteered to this organization. I also want to thank them again. While on the Board subject, it was a tough day when the deliberations on suspending the Fall Conference took place. The safety of attendees was, by and far, the most critical concern and eventually took precedence. From a personal perspective, I was disappointed that we would not provide this cost effective program, but am certain the correct decision was made and I commend the Board for their leadership.

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With difficult news comes positive opportunities. I am pleased to confirm that the Spring Meeting, our 59th FHEA Trade Show and Annual Conference, is scheduled for June 1-3, 2022 at the Caribe Royal. It promises to be every bit as informational as the Fall Conferences historically enjoyed. We will provide education, inspirational keynote speakers, and unparalleled networking in a comfortable and central location, along with our sold-out FHEA Trade Show and Casino Party. We are looking forward to seeing you all in Orlando.

(Continued on page 8).



THE FHEA TRADE SHOW AND ANNUAL EDUCATIONAL CONFERENCE - NEW DATES!

Reasons to Attend...

#1: BUILD RELATIONSHIPS

Connect and network with colleagues and exhibitors. Play in the Golf Tournament at the Falcon's Fire Golf Club.

#2: LEARN & GROW

Hear TWO Keynote Speakers! Learn from experts in the healthcare engineering industry in the educational sessions and earn up to 10 ASHE credits as well as credits in other professional designations.

#3: SEE NEW PRODUCTS & SERVICES

Find the best products and services you need from our exhibitors and sponsors during the FHEA Trade Show

#4: BE INSPIRED

Gather inspiration through fellowship and networking with others in the healthcare engineering industry.

#5: HAVE FUN

There is no better destination to do all of the above in one place, and have fun at the after-hours Casino Party!



Featuring Keynote Speakers:



Jessica Lynch
Ex-POW Iraq 2003



Dr. Dale Henry



VIEW FULL PROGRAM

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 Universal Fuel Services
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President's Message (Continued)

I am pleased that Lamar Bragg is taking over as President. He is committed to our profession and has added significant value to the Board. I ask that you welcome Lamar and support him as he continues our mission. I also want to share that Tim Moreira and Russ Schilling have been stalwart officers in FHEA, providing timely and relevant information to the Board and membership. We have general elections soon, so please take time to review the candidates and make your decision, and of course, vote.

Our next state business meeting takes place in October during Facility Engineering week. This meeting will be virtual where By-Law changes, elections, and other business will take place. Expect the meeting announcement any day and please make every effort to attend and be engaged.

FHEA stays active in the state and nationally. This is evidenced by the continued support to Florida's Science Screen program. ASHE involvement, on a national level, was publicly recognized by FHEA receiving the Platinum Award at the recent ASHE Conference in Nashville. This award recognizes FHEA's support to members and healthcare engineering. Without the member engagement, and the organization provided by Sarah and Marty, our executive team, this would not have been possible. Together, we continue to accomplish great things.

Finally, I am humbled by the faith you had in me to lead this association. I have enjoyed the challenges and the successes along the way. The friendships are lasting, the knowledge exchange relevant, and the mission is admirable. I thank you for this opportunity, I promise to remain engaged and at your service, and most importantly, wish health and happiness to you and your loved ones. Until next time.....

ASHRAE UPDATES HEALTH CARE VENTILATION STANDARD

ASHRAE has released an updated edition of ANSI/ASHRAE/ASHE Standard 170, Ventilation of Health Care Facilities. The standard offers guidance, regulation, and mandates to designers of health care facilities. The 2021 edition delivers critical guidance for designers and operators of these front-line facilities and incorporates 17 addenda to the 2017 edition of the standard. Changes include expanded requirements to allow airborne infectious isolation room exhaust discharge to general exhaust under certain conditions; revised scope; with improved guidance on thermal comfort conditions provided; and more.

FHEA GOLF TOURNAMENT

GOLF FLYER

View Flyer for information, registration, and sponsorship

FALCON'S FIRE GOLF CLUB
JUNE 1, 2022

2021 AHCA Schedule

Plans and Construction

JANUARY						
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BLUE: Plan Review Weeks
GREEN: Stand-up Review Weeks
RED: Inspection Weeks

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Team B & C1
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BLUE: Inspection Weeks
GREEN: Stand-up Review Weeks
RED: Plan Review Weeks

Orlando
Team D, E & F
407-420-2542

BLUE: Plan Review Weeks
GREEN: Inspection Weeks
RED: Stand-up Review Weeks

Miami
Team G, H & I
305-593-3005

BLUE: Stand-up Review Weeks
GREEN: Plan Review Weeks
RED: Inspection Weeks



JOINT COMMISSION REQUIREMENTS FOR HOSPITAL BUSINESS OCCUPANCIES

The Joint Commission has announced new standards applicable to business occupancies that are located within or attached to a hospital. While the new standards went into effect in July, hospitals and behavioral health facilities alike will need this time to assess compliance with these new requirements.

Though not previously a core area of a survey focus, business occupancies frequently represent a substantial percentage of an organization's services portfolio and require immediate action where noncompliance exists.

In short, the standards are broken into five categories:

1. LS.05.01.10: Building maintained to minimize effects of fire, smoke and heat.
2. LS.05.01.20: Maintaining the integrity of the means of egress.
3. LS.05.01.30: Protecting individuals from hazards of fire and smoke.
4. LS.05.01.34: Maintaining fire alarm systems.
5. LS.05.01.35: Maintaining fire extinguishing equipment

There are several steps that can be taken to prepare for these new standards:

- An action plan for implementing compliance strategies and addressing deficiencies can be a good idea; conducting a self-assessment based on the new standards will provide a starting point for creating such a plan.
-
- Though drawings are not required for buildings considered freestanding business occupancies by definition of the 2012 edition of NFPA 101®, Life Safety Code®, they are required "for mixed occupancy buildings where portions of the building are business occupancy and other portions are either health care occupancy or ambulatory health care occupancy." A review of current life safety drawings may be needed to ensure that they are current and accurate.

- Review of current environmental rounding practices; facilities professionals should use the data they have plus take a fresh look at these areas for compliance to the new standards.
- Use caution to understand what is being implemented; there are new standards that are not found in Chapter 38/39 of the Life Safety Code, such as the alcohol-based hand rub requirements.

•As always, changes may be costly; conversations around funding these standards are also necessary.

THE JOINT COMMISSION ISSUES RULE ON AISLE WIDTHS

Now in effect, Joint Commission Life Safety Code surveyors will cite on compliance in suites with aisles that have less than 36 inches of clearance from side to side to facilitate egress. This requirement follows the 2012 edition of NFPA 101®, Life Safety Code®, Section 7.3.4.1(2). The core chapter on egress sets the minimum width of any means of egress at 36 inches in all facilities or portions of facilities classified as health care occupancy. This requirement applies to Joint Commission-accredited hospitals and critical access hospitals that use the suite provisions of the code and, depending on their building occupancy classification, may apply to behavioral health care and human services organizations, facility-based hospice facilities and nursing care centers.

NAVIGATING CODE CONFLICTS

By Joshua Brackett, PE, SASHE, CHFM

(Copied with Permission from ASHE's Health Facilities Management magazine. [See article link](#))

Codes and standards do not always align. For example, both the 2021 edition of the National Fire Protection Association's NFPA 101®, Life Safety Code®, and the 2012 International Building Code (IBC) require shafts connecting four or more stories to be 2-hour fire rated. However, IBC requires combination fire/smoke dampers when exiting the shaft, and NFPA 101 references the 2012 edition of NFPA 90A, Standard for the Installation of Air-Conditioning and Ventilating Systems, which only requires a fire damper.

Another example involves the placement of a duct detector on an HVAC unit producing more than 2,000 cubic feet per minute. NFPA 90A requires placement on the supply, while the 2012 International Mechanical Code® requires placement on the return. These conflicts often result in teams meeting all criteria to limit potential liability, adding time and cost to projects.

But unification is possible. For example, the Association for the Advancement of Medical Instrumentation (AAMI) ST79, Comprehensive Guide to Steam Sterilization and Sterility Assurance in Healthcare, used to conflict with ANSI/ASHRAE/ASHE 170, Ventilation of Health Care Facilities, for humidity requirements. However, the AAMI ST79 developed an ad-hoc committee recognizing that regulating environmental conditions complex. They concluded that sterile processing and facilities management work collaboratively to establish policies and procedures for monitoring and maintenance based on ANSI/ASHRAE/ASHE 170.

How do facilities navigate these conflicts? It ultimately comes down to what's adopted. Centers for Medicare & Medicaid Services has adopted NFPA 101 (2012) and NFPA 99 (2012); however, your state or local authority having jurisdiction (AHJ) might have adopted a different guiding code or standard.



When you find a conflict, you could comply with the most stringent requirement. However, another course is to request a meeting with state and local AHJs, gather background on the conflict, build a business case and present the request for a determination. AHJs likely won't permit cherry-picking requirements from codes, but they may permit following one code when conflicts arise. HFM

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