Infection Prevention & Control Partnership with Engineering

“A history of getting the job done and keeping people free from health care associated infection”
In the 1950’s

- Hospital Engineer
- Not formally trained
- Former military
- Boiler-man
- No Budget
- Limited staff
- Limited responsibilities
- Not management
- No association

- Infection Control Pract.
- 2yr formal training
- Staff Nurse/Med Tech
- No budget or Help
- Split responsibilities
- No standards
- Not management
- No association
- AHA asks hosp to trace infections
In the 1960’s

- Hospital Engineer
- Now Maintenance Chief
- Still No Budget
- Few Staff
- Additional Scope
- Involved in minor facility improvement
- No Power to make decisions

- Infection Control Pract.
- Infection committees
- Developed I.C. system
- Single person team
- Employee health / Lab
- Split role
- AHA publ. IC stds
- Estb surveillance prg
- Investigate problems
In the 1970’s

- Hospital Engineer
- Some Qualifications: Electrician – Plumber etc
- Limited Budget
- Additional Specialty Staff
- JCAHO / PTSM STds
- Minor Control over Renovation
- Not Management but involved in decision making

- Infection Control Pract.
- New skills required
- Nurses vs Med Techs
- IC barriers (5-groups)
- CDC develops training
- APIC founded (1972)
- JCAHO pub stds
- Cultures taken of bldgs
- Patient care discipline
- Little known about results
- ICP emerging
In the 1980’s

- Hospital Engineer
- Degreed Person with background in Engineering
- Operational budget
- Broader Scope of Responsibilities
- Often supervised Renovation and New Construction
- Limited Building Services involvement

- Infection Control Pract.
- More skill level required
- No budget
- Risks factors identified
- Hand washing promoted
- Placement of patients
- Prgm management
- Engineering co-op strted
- ICP working with HK etc
- Broader scope respons
In the 1990’s

- Hospital Engineer
- Bus / Eng Degree
- Budget
- Expanded Scope
- Considered part of Management Team
- In charge of Equipment / Facility Operation

- Infection Control Pract.
- Certification
- Practice dimens exp
- More formal training
- More mgmt of process
- QA added to scope
- Involved in bldg renos
- Considered more valuable
In the 2000’s

- Hospital Engineer
- Administrator / Director
- Responsibility Safety; Security; Environmental Services; Grounds
- Part of the Mgmt Team

- Infection Control Pract.
- Advanced training
- Still NOT mgmt
- Resp. for E.P
- Developed plans for BT
- Recognized as go-to
- More surveillance
- Greater scope/monit
Where do you Fit?

- Hospital Engineer
- Where do you think you fit?
- Where does your boss think you fit?
- Where do you think you should fit?
- What are you doing to get there?

- Infection Control Pract.
- Mgmt Team
- Policy driver
- Leader in IC Prevention
- More training
- Broaden scope
- Team player
- Safety Officer
What Works Best Today?

- Hospital Engineer
- Territorial
- Independent
- Partnering
- Quick Fix
- Long Term Results
- Risk Management
- Is bigger – better
- What have we learned from this evolution

- Infection Control Pract.
- Lone ranger appr
- Nurse vs Med Tech
- Recognition
- Team player
- Advisor
- Single role respons
- Change agent
- Zero HAi
Is History a Guide to the Future?

- Methods used in the past somewhat effective but the need to achieve zero HAI is the measure of success
- Each specialty has the task of contributing what his or her manager needs to attain objectives
- What do ICP & Eng have in Common?
How Are Engineering and Infection Control Viewed?

• Both are considered a non revenue producing expense
• Both have many conflicting priorities
• Both are prisoners of high expectations
• Both have difficulty in meeting demands
• Both are considered a necessary evil
• Both often receive negative feedback
Engineers & ICP’s

- One works mostly with patients
- The other works mostly with equipment
- People are all different but machines are generally predictable
- Both are generally short of resources
- Both protect people
- Both are trained and qualified
- Both are in their own comfort zones
What are both Entrusted With?

- Reducing health care associated infection
- Stewardship of environment
- Managing infrastructure improvements
- Providing solutions to complex questions
- Taking responsibility for outcomes
- Staying ahead of incidents
- Planning and conferring
- Documentation
What are both Entrusted With? (cont)

- Safe operation of business
- Accessibility
- Protection of staff/patient/visitor
- Supervision
- Coordination of maintenance activities
- Managing crisis
- Training and education
How do both Cope?

• Utilize modern technology
• Stay current with changes in regulations
• Realize that the only consistent theme is that things consistently change
• Try to practice what we preach
• Remain diligent
• Coach rather than dictate
• Urge rather than insist
• Cooperate with others
Communication

• Both should start each day with status updates
• Both should share information and ask what to have more or less
• Speak clearly and focus on problems / challenges rather than the person
• Always be upfront and honest
• Seek feedback
Communication (cont)

• You do not need to have all the answers at your fingertips
• “It’s not the person with the most brilliant mind, but rather the person who can rally the most brainpower & talents of others who is successful
• Plan your work then work your plan
Communication (cont)

- Keep it simple so both sides understand
- Be realistic
- Speak in lay terms when possible
- Describe benefits and advantages of methodologies
- Be open to options when possible
- Reach consensus and move on
Relationships

• Use humor
• Timing
• The WIIFM formula
• Stay positive
• Admit when you are wrong
• Be a team player
• Agree to disagree
Relationships (cont)

• Focus on the top ten common issues
• Use the eighty twenty rule
• Provide each with wiggle room
• Help your partner understand limitations
• Relate your expectations
• Provide the environment for mutual success
Conclusion

• Never doubt that working as a team accomplishes the result you are seeking
• Strive for continuity
• Never quit even if you feel you have no other option
• Continue to learn
• Participate in associations
Strive for Perfection (if 99.9% is good enough) --- Why then will

- 107 incorrect medical procedures will be performed by the end of the day today
- 291 pacemaker operations will be done incorrectly this year
- 12 newborn babies will be given to the wrong parents every day
- 114,000 mismatched shoes will be shipped this year
Closing comment

• With reference to the last slide

• If you find yourself limping from the heavy burden you all carry, check you shoes first as it could be you are one of the 114,000 unlucky people with mismatched shoes.
Thank you for your attention

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