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Engineering ethics discussed Bringing a military approach to training Waste management Scottish experience outlined





Articles

17 Professional knowledge, ethical conduct

An Incorporated Engineer and member of IHEEM examines 'whether ethics is an alien word to the engineering profession'.

23 Small investments, huge savings

A report on several presentations at the Healthcare Estates 2014 conference focusing on how careful monitoring and adjustment of HVAC plant can cut both costs and carbon emissions.

27 Ensuring that fire doors are fit for purpose The key steps for ensuring that fire doors are correctly specified, installed,

maintained, inspected, and, when necessary, repaired, to ensure effective operation.

33 Bringing a military approach to training

The founders of Avensys Medical bring an approach honed in the armed forces to the company's comprehensive range of EBME engineer training.

- **43** Scottish experience can inform others What can healthcare facilities south of the border learn from Scotland's
 - recent approach to improved waste management and resource efficiency?
- **47** Patient experience key in hospice refurb A major design and build scheme which has seen the inpatient unit at

a Sheffield hospice refurbished and extended has brought the unit up to the best 21st century standards.

53 Infrastructure for new models of care

Vanguard Healthcare examines how estates managers are responding to delivering the infrastructure to support new models of care.

60 Silver biocide's real-world success

How silver hydrogen peroxide – a potentially effective alternative to temperature control in controlling *Legionella* in water systems – works in practice, and the growing evidence of its impact.

67 Folding 'health' back into healthcare

There are moves in the US to re-evaluate planning policies to ensure that local environments are built that promote healthy living.

Institute to lead healthcare BIM group

The Department for Business, Innovation & Skills (BIS) document, *Industrial strategy: government and industry in partnership: Building Modelling*, published in 2012, describes Building Information Modelling (BIM) as 'a collaborative way of working, underpinned by the digital technologies which unlock more efficient methods of designing, creating, and maintaining our assets'.

It adds that 'BIM' – which some have described as 'a game-changer' for the construction sector – 'embeds key product and asset data and a three-dimensional computer model that can be used for effective management of information throughout a project lifecycle – from earliest concept through to operation'.

As many readers will know, in line its

2011 Construction Strategy – a central ambition of which was to reduce costs in publicly-funded construction schemes – the Government has mandated the use of BIM to Level 2 on centrally funded projects by 2016. News that IHEEM is to lead the Core Group of the newly-formed BIM4Health Group (see page 6) – recently established to raise awareness of Health BIM across the healthcare sector – is thus very welcome.

Although BIM's benefits have been wellpublicised, implementation has so far been patchy, and one of the Group's key aims will be to 'ensure that the healthcare sector understands the risks and dangers of doing nothing'. Valuably, it will also seek to provide guidance on 'how to get ready for Level 2', and to reflect members' concerns and interests back to the BIM Task Group and the registered BIM4 Groups. This is another example of the Institute seeking to both lead and contribute to important policy affecting the built estate, and the members of the Core Group are keen to involve as many organisations and individuals as possible in their work.

The BIS strategy document says the initial estimated savings of widespread BIM adoption to UK construction and its clients could be as much as £2 bn per annum, so, alongside the many practical benefits the process's use in planning, operating, and managing healthcare buildings can bring, there are equally some convincing financial reasons for embracing it.

Jonathan Baillie Editor

Comment

See page 27

Cover Story: Entertaining patients,



See page 47

3

5

9

9

Comment

Institute News

generating revenue

Health Sector News

Health Sector News

NHS reforms 'damaging and distracting'

A major assessment of the coalition government's record on NHS reform by The King's Fund concludes that the upheaval caused by the Health and Social Care Act has been 'damaging and distracting'.

The new report, *The NHS under the coalition government': Part one: NHS reform*, highlights 'some positive developments as a result of the Act', including closer GP involvement in commissioning services, giving local authorities responsibility for public health, and the establishment of Health and Wellbeing boards. However, it criticises the decision to implement complex organisational changes 'at a time when the NHS should have been focused on tackling growing pressures on services and an unprecedented funding squeeze'. Other key findings are that:

 an 'unwieldy structure' has emerged, 'with leadership fractured between several national bodies', a 'bewilderingly complex' regulatory system, and 'a strategic vacuum in place of the system leadership previously provided by strategic health authorities'; while claims of widespread privatisation are 'exaggerated', the emphasis on competition has resulted in 'greater complexity and uncertainty about when contracts should be put out to tender';

despite the intention to devolve decision-making and reduce political interference, since the Act's implementation there has been 'regular ministerial intervention and a continued focus on targets';

- responsibility for commissioning has been fragmented between different bodies, and NHS England has been slow to establish itself, 'weighed down' by its wide-ranging responsibilities;
- although not an explicit aim of the original reforms, progress has been made in developing integrated care.

The King's Fund says the report 'highlights a significant change in the coalition's approach to the NHS', with the second half of the parliament having seen 'a welcome shift away from the technocratic changes contained in the Health and Social Care



Act to concentrate on safety and quality of care'. It says: 'Ministers have turned their attention away from competition and choice to focus on regulation and transparent reporting of performance data to improve care standards.' The report argues that the next

government 'should build on this'.

Chris Ham, CEO of The King's Fund (pictured), said: "Historians will not be kind in their assessment of the coalition government's record on NHS reform. The first three years were wasted on major organisational changes when the NHS should have been concentrating on growing financial and service pressures – this was a strategic error. Only latterly has the government adopted a more positive focus on improving patient care and achieving closer integration of services. Politicians should be wary of ever again embarking on such a sweeping and complicated reorganisation of the NHS."

A second report, focusing on NHS finances and performance, will be published this month.

Cover Story

Entertaining patients, generating revenue

When considering or planning bedheadpositioned patient entertainment solutions, Airwave says it 'has all the bases covered' – with a wide range of medical wall arms, televisions, touchscreens, and interactive services – all designed to improve the patient's well-being and experience.

Designed for healthcare interiors, the Philips Hospital Ready TV range reportedly provides 'the ultimate in patient viewing', by incorporating 'great design and dedicated features'. These include centralised management, menu locking, a headphone socket, wipe-clean multiple IR coding remote controls for multi-bed wards, nurse call compatibility, and even MyChoice 'Pay-TV' technology to give hospitals the opportunity to install a pay mechanism and generate local revenue.

Airwave said: "MyChoice gives patients the freedom to view premium content

while allowing healthcare facilities to generate revenue simply by selling PIN codes. With MyChoice they can offer different content packages to patients (e.g. selected channels; Pay-TV channels, and 'Smart TV' etc.), and create a win-win situation – patients can have a wider choice of content, and healthcare facilities can create additional revenues. MyChoice is a cost-effective solution, and a logical step for healthcare facilities looking for additional ways to provide patient value and comfort."

The stylish Philips white remote controls have a top surface membrane that is easily cleanable and wipeable with alcohol. Airwave added: "The Philips multi-code remote function means the Hospital Ready televisions are perfect for use in multi-bedded bays, since each is paired with a remote control to prevent one patient controlling another's set."



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