AHE VOICES

Leade s Sha e thei Ex e tise Related to Health Ca e Refo m and its Im act on the EVS P ofessional

EXPLORE sp ç ...s....d .., E, $t \in \mathcal{L}_{i}$ $f_{i} = m_{i} d$ Mrs Manp ct .. t EV p. f.ss⊠_, ,Q.c dQ. xp _d d s., ⊠t. ., s, m. s, t . Emp. ct 🙏 t d s splet s .. d t B d d ct. ff. ct EV d. p. tm. , ts

splet s xp ct _ c _ s Q. m. / dm ss a s d s t s c...f.m?lfs, ☑ t B Emp. ct E., 🛛 ., m. ., t ... 🖭 s (EV ?



Rock Jensen (RJ): Most hos ital and health ca e o ganizations I 10 k ith a e antici ating an inc ease in atient volumes as a esult of health ca e efo m. With nea ly 34 million

uninsu ed individuals ente ing the health ca e ma ket lace, hos itals a e develo ing unique st ategies to get ne , atients into and th ough the hos ital system. Many a e develo ing agg essive t iage units that di ect less acute atients into se a ate ca e level st uctu es , ith a goal of limited hos ital admissions.

While hos ital in atient volumes and admissions , ill most likely decline unde health ca e efo m, out atient se vices a e antici ating significant inc eases in thei activity.

EVS de a tments a e being d iven to ada t to these volume and se vice/acuity changes. Ty ically, the in atient a eas eceive focused and f equent cleaning se vices each day. EVS de a tments often ovide discha ge teams the abilityc⊠00@16⊠0gW(tt)ahdVthie ଅନୁମିଧୀ tayal ଦେ 4 tony siynni yan -le ହିନ୍ଦୁ ମିଧି (eth.) l.q(cha ga e

the majo ity of cleaning focus at the end of the day, on a one-time- e -day f equency.

As atient volumes shift and highe out atient activity occu s, EVS de a tments ill have to make adjustments as rell. Reallocating esou ces to add ess these changes , ill be a key to successful outcomes. Develo ing highly mobile es onse teams to manage high tu nove locations , ill be a ne , focus. Instead of the assigning an EVS technician to a set numbe of ooms and common a eas fo 4 hich to be accountable, the ne 4 module 4 ill equi e individuals and teams , ho a e ca able of effective and efficient communication to emain on to of the eve -adjusting 10 kloads. These 10 ke s ill have to be ca able of flexing to the level of cleaning equi ements, thich can va y tith atient acuity and need.

Consequently, a good unde standing of the hos ital infection evention ocesses , ill be essential in hel ing them make a o iate adjustments to the level of cleaning equi ed fo the va iable case cleanings esented in the eve ex anding out atient setting.



Greg May, CHESP (GM): Health ca e leade s a e moving to leve age costefficient out atient settings, ho +eve, I believe they ex ect both

admissions and in atient days to inc ease. The easons fo this e-date health ca e efo m as 4e kno 1 it today. That is, baby boome s continue to age. And this la gest g ou of health ca e consume s' health acuity sill continue to ise fo the fo eseeable futu e.

EVS de a tments , ill be tasked , ith cleaning a va iety of s aces , ith va ious levels of equlato y ove sight. Many s aces , ill likely stay on the acute ca e license, equi ing the same level of equiato y

cleaning ovided , ithin these settings. In some cases, cleaning +ill be cont acted, +hich +ill lace EVS management in the ole of cleaning egulato y ove see.

As an exam le, , ith cont acto s cleaning offsite s ace associated .ith ou acute-ca e license, I equi e they follo, ou cleaning ocedu es and fu the equi e thei staff to com lete an o ientation f om my manage s, as a ell as demonst ate the com etencies involved. This has been es ecially im o tant fo a eas that have ocedu e ooms, ambulato y su ge y ooms, inte ventional adiology and infusion s aces. We also add ess the many aste st eams (e.g., bio-haza dous aste, ha maceutical aste, confidential aste, etc.). Many contacto s

have not been equi ed to follo, ocedu al cleaning ocesses and, as a esult, can c eate significant issues fo the health ca e envi onment if not add essed.

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• If Q, f ctt ... B, ... xp, ct dc ... ... s, ... Bt t t, m. ... the p t dt p s ... tf . c ... ? Is . Es m. m ... s Bp . pp . p Q t ... sM . t . dt ... ... p ... ... /p ... Mt . f EV s ... Rt s Q t s s s . ttQ . s?
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RJ: Out atient se vices a e he e the antici ated inc eases a e ex ected by most of the hos itals 1 o k ith. AHE is the emie o ganization fo EVS ofes-

sionals to ensu e they stay ahead of the cu ve in ega ds to u coming changes in health ca e efo m. Monthly AHE t aining rebina sa e focused on develo ing and su o ting skills rithin the indust y that allor them to successfully navigate changes rithin thei s ecific o ganization and maintain gorth rithin thei ofession.