



## Abstract Submission Guidelines & Checklist

The American Hospital Association is excited to announce that the American Society for Health Care Engineering (ASHE) 2021 Annual Conference & Technical Exhibition [call for abstracts is now open](#). The Annual Conference provides trusted knowledge and necessary tools to health care professionals dedicated to building, operating and maintaining a safe, efficient and effective care environment. Become a part of this opportunity of educational sessions by submitting an abstract for facilities managers and directors, infection prevention professionals, contractors, manufacturers and consultants.

**Deadline: March 31, 2021 at 11:59 p.m. CT**  
(NO EXTENSIONS, NO EXCEPTIONS)

### IMPORTANT: WHAT WE WANT

- **In-depth** sessions that bring value to attendees, their organizations and their communities.
- Concrete **takeaways**: Checklists, tools or other resources attendees can apply on the job.
- **Multidisciplinary** representation.
  - **Panels** that include hospital owner representatives.
  - **Teams** including:
    - Facilities managers and professionals.
    - Infection prevention professionals.
    - Architects/Designers.
    - Construction professionals.
- Presentation of **diverse** opinions.
- Content that motivates the pursuit of **excellence**.
- **Critical and leading-edge information** to help attendees stay ahead of health care changes.

### HOT TOPICS

The abstract selection committee seeks presentations that provide insight into and solutions for the following hot topics:

- **Pandemic Response and Recovery** – Alternate care sites, ventilation, business continuity.
- **Infection Prevention** – Water management, risk assessments, Joint Commission findings.
- **Emergency Management and Response** – Active shooter/hostile events, safety and security.
- **Leadership Management** – Staff training programs, policy implementation, succession planning.

## TIPS FOR SELECTION

Each year, nearly 300 abstracts are submitted for consideration with only 50-60 spots for sessions available. The abstract selection committee is looking for abstracts that include specific concepts throughout, regardless of topic or track.

If you are submitting an abstract, [be sure to include at least two of the following concepts:](#)

- Owner perspectives.
- Performance Improvement/Operational excellence.
- Applicability for rural and small hospital scalability.
- Innovation/Forward thinking.
- Patient experience.
- Strategic leadership.
- Technological advances.
- Security/Cybersecurity/Resiliency.

## SESSION FOCUS LEVELS

Please be sure that your submission clearly ties to one of these levels to help ensure that attendee needs and expectations are met.

- **Foundational** = Fundamental concepts you need to know today — especially for those new to the field or who may have newly assigned responsibilities.
- **Technical** = In-depth information, step-by-step “how-to” presentations and technical information you need today.
- **Strategic** = Forward-looking, strategic discussions of the future. These can be considered forward-thinking “master’s level” sessions.

## TOPIC AREAS

The conference planners have chosen to feature the following topic areas at the Annual Conference. For the best chance of selection, be sure that your session description clearly ties to one of these topic areas. Although not necessary, your session may cover multiple topics.

### Business of Facility Management

This topic area provides attendees with the tools and resources needed to grow and advance within their organizations while meeting professional development goals. Examples include:

- Facility benchmarking
  - How to use data that drives performance improvement, not just compliance.
  - Using benchmarks to establish goals.
  - Broadening data sources.
- Productivity: downsizing/upsizing/right-sizing
  - Staffing efficiencies.
- Leadership and people management
  - Budgeting and finance.
  - Soft skills.
  - Human resources issues.
- Expanding your role
  - Safety and security.

- Telecomm and information technology (IT).
- Real estate portfolio management.
- Managing off-campus (outpatient) facilities.
- Changing maintenance strategies
  - Alternative.
  - Reliability-centered maintenance (RCM).
- Facility condition index and capital renewal
  - Acquisition.
  - Procurement.
- Sustainability in facilities management
  - Improved diversity.
  - Reduced maintenance and life cycle costs.
  - The role of the facilities manager in sustainable health care.
  - The role of sustainability manager.
- Patient experience
  - The role of staff and physical environment on patient satisfaction.
  - Customer service.
  - Maintaining patient experience during surge.
- Lean processes
  - Facility case studies using Lean process to solve an issue or make an improvement.

### **Continuous Compliance Tactics**

Sessions in this topic area provide information on maintaining the physical environment while also improving and continuing compliance on an ongoing basis. These sessions will also provide helpful tools for maintaining compliance as rules and interpretations change over time. Examples include:

- Practical applications of codes and reference codes.
- How to prepare for surveys.
- Cost-effective methods to meet standards; methods and examples of how to use the standards as management tools.
- Flexibility of spaces.
- Accreditation of retail and outpatient facilities.
  - Compliance in outpatient facilities (accommodating the new Joint Commission survey).
- Behavioral health compliance.
- Leveraging compliance to improve patient outcomes.

### **Department of Defense (DOD)/Veterans Affairs (VA)**

Veterans Affairs (VA) and medical military health systems and their associated facilities have much in common with other health facilities, however there are some unique aspects in the design, construction and operation of these facilities. This topic area will pertain to the design, construction, renovation and operation of VA and medical military facilities. Examples include:

- The Defense Health Agency and the impact on military health facilities management.
- Unified Facilities Criteria (UFC) documents pertaining to the design, construction renovation and operation of military medical facilities.
- Medical MILCON and SRM.

- Accreditation of military medical facilities.
- Facility life cycle management of military medical facilities.
- World-class facilities.
- The 2018 & 2021 editions of NFPA 101®, *Life Safety Code*® and NFPA 99, *Health Care Facilities Code*.
- VA medical facilities management.
- Accreditation of VA health facilities.
- VA medical facilities construction and renovation management.
- Veterans Health Administration Design Guides.
- Department of Veterans Affairs VHA Master Specifications.

### Infection Prevention

We've learned a lot over the last year. For these sessions, we are looking for lessons learned from the pandemic, and ways to adjust how infection prevention is handled going forward and post-pandemic.

Everyone in a health care facility is part of the infection prevention team, not just health care facility managers and infection preventionists. This topic area provides information on improving infection control in the physical environment using the expertise of the entire health care team.

Examples include:

- Infection prevention and control strategies and regulations.
- Cross-team communication and planning.
- Emerging pathogens.
- Construction infection prevention issues.
- Infection control risk assessments (ICRAs).
- Interim life safety measures (ILSMs).
- Surfaces.
- Managing HVAC systems related to patient outcomes.
- Air quality and epidemiology.
- *ANSI/ASHRAE Standard 188, Legionellosis: Risk Management for Building Water Systems.*
- *ANSI/ASHRAE/ASHE Standard 170, Ventilation of Health Care Facilities.*
- How to translate infection prevention issues for the common audience and the entire team.
- Learning from epidemiologists:
  - How can we do better?
  - How can we be better prepared?
- Lessons learned, success stories, what are we going to do differently next time?
  - Not repeating mistakes or adjustment time.
  - Remembering what we learned, and how to apply it.

### Planning, Design and Construction

Sessions in this topic area focus on the roles of health care facility professionals in the planning, design and construction process. Examples include:

- Bridging the gap between facilities management, construction and clinical stakeholders.

- Project closeout and turnover.
- Joint Commission requirements for operations and maintenance manual libraries.
- Design versus outcome reality.
  - Post-occupancy evaluations and implementing lessons learned.
  - Outcome compared to energy model.
- Project management methods.
- Design concepts and long-term impacts for maintenance.
- Turning a big box into a health care facility.
- Retail clinics.
- Integrating technology into the design and construction process.
- Construction metrics.
- Case studies and best practices to integrate construction packages (like BIM) into a facility package (CMMS).
- Technology advances that will change the design of health care facilities.
- Master planning tools, space planning techniques, acronyms, means and methods.
- Managing warranty periods.
- Commissioning.
- Integrated project delivery (IPD) methods.
- Life cycle costs.
- Addressing cybersecurity through planning, design and construction.

### **Sustainability and Efficiency**

Sessions in this topic area provide insight into practices that will increase the efficiency and effectiveness of a facility while reducing waste. Examples include:

- Continuous commissioning and sustainability.
- Waste management and sustainability.
- Integrated project delivery (IPD) teams.
- Reducing cost through targeted HVAC system operations.
- Energy conservation.
- Resiliency.
- Why sustainability? The case for green health care.
- Sustainability, green practices and green technologies.
- Water efficiency.
- Energy benchmarking:
  - Tools for interpreting benchmark data.
  - Metrics that matter (and those that don't).
  - Understanding third-party benchmarks (why/how is your facility different).
  - How to measure cost per square foot.
  - Building your dashboard.

### **Miscellaneous – New Ideas for Health Care Professionals**

The selection committee is always looking for innovations and unique ideas; please submit your session ideas that may not fit into one of the other topic groups here.

## SELECTION PROCESS AND TIMELINE

All submissions must be completed [online](#) by March 31, 2021 at 11:59 p.m. CT.

- **NO EXTENSIONS, NO EXCEPTIONS.**
- You may create and submit multiple submissions.
- Submissions will not be considered if sent outside of the [online](#) submission center.
- Materials submitted must be original, with all external sources referenced.
- We will allow up to four speakers per session.
  - *You MUST notify anyone you list as a co-speaker about their involvement in this submission!*
- You will receive an automatic email confirmation of your submission.
- A team of volunteers and staff will review all complete submissions.
- Submitters will be notified in late May of their submission's acceptance status.

## MORE TIPS

To give your presentation the best chance of being accepted, note that preferential consideration is given to sessions that:

- Include **multidisciplinary** representation, especially the facility perspective.
- Are **relevant to a wide range of health care organizations** and profit statuses, large systems and small facilities.
- Are **clearly tied** to one of the topic areas.
- Provide information **backed by recent and relevant data** (e.g., case studies, research, etc.).
- Engage participants and encourage interaction; **lectures are the least desired presentation format.**
- **Offer turnkey tools, checklists or other resources participants can apply in the field.**

**Presentations may not include sales pitches.** Experience has shown that presentations with sales-like components consistently receive the lowest ratings.

- Product and service providers may choose to pair up with a health care owner representative to encourage attendance at their session.
- Presentations that promote a company or a product will not be accepted.
- Do not mention company or product names or use company/product logos in your presentation.

## SPEAKER BENEFITS AND TERMS

If your abstract submission is selected to become a conference session, speakers will be responsible for their own travel, lodging and incidental expenses. Main speakers will receive a complimentary registration and co-speakers will receive a discounted registration of \$300.

- Discount codes will be provided to obtain these special rates.
- Full conference registration does not include preconference programs or any other special ticketed events.

**IMPORTANT:** To receive these benefits, speakers must meet the speaker expectations listed below (including providing attendee takeaways and meeting all deadlines).

You will also be required to agree to the following speaker terms:

- I will use the Speaker Center, and follow all schedules and deadlines and codes of conduct as requested.
- I will not present my conference presentation at any other conference, seminar or elsewhere prior to the conference or within 90 days following the conference without the written permission from the conference.
- I consent to the conference recording, editing and reproducing in any form (including but not limited to audio, video, print, computer or other technology) my written and oral presentation and remarks and using (including by selling) the same without any compensation to me.
- I understand that no individual or entity other than the conference may electronically record or copy any portion of this program for any purpose without prior written consent from the conference.
- I confirm that my presentation will not discuss specific companies and products, thereby avoiding being perceived as a sales pitch.
- The conference reserves the right to cancel a session and rescind speaker benefits if these terms and deadlines are NOT met.

#### **SPEAKER AND CO-SPEAKER DEADLINES AND DATES\***

*\*Deadline dates are subject to change and will be finalized in the notification email.*

#### **Mid-/late May**

Speaker Center and registration will open. Registration discount codes will be provided at this time.

#### **June 15**

- Complete Speaker Agreement.
- Submit AV & room requests.
- Verify/upload profile information (i.e., photo and bio) to be used in the conference mobile app and website.
- Conference registration
  - *NOTE: Speakers who are only attending for their session DO NOT need to register for the conference, however, please note that without registration they will not have a badge and will not be allowed into any other session rooms, events or the exhibit hall.*
- Arrange hotel accommodations
  - Hotel links will be provided in registration confirmation email.

#### **July 15**

Upload final PPT (**using the conference branded template**), to the Speaker Center. This version will be uploaded to the mobile app and site, so attendees can view/download. **Speakers must also bring their FINAL PPT on a USB drive, they will NOT be preloaded to the computers on-site.**



# Abstract Submission Checklist

Use this checklist to help you prepare for your [online](#) submission.

- **Complete your submission online using the [Abstract Submission Center](#).**
- **Submission are due no later than March 31, 2021 at 11:59 p.m. CT.**
- **No extensions, no exceptions.**

## Session Title

- Provide a session title that is limited to 10 words or fewer.
  - Course titles should describe the session content so listings on continuing education transcripts communicate the subject matter to state licensing boards and other regulators.

## Topic Area Alignment *(Select one)*

- Business of Facility Management.
- Continuous Compliance Tactics.
- Department of Defense/Veterans Affairs.
- Infection Prevention.
- Planning, Design and Construction.
- Sustainability and Efficiency.
- Miscellaneous – New Ideas for HC Professionals.

## My primary member affiliation is with this organization: *(Select one)*

- ASHE
- AHE
- ACHA
- ACHE
- AIA/AAH
- ASHRAE
- AORN
- APIC
- FGI
- IAHSS
- HIMSS
- OTHER \_\_\_\_\_



**Session Focus Level:** *(Select one)*

Our attendees often rate sessions poorly if they feel the content is not the type of content expected. Please think about your session and choose the one that fits best: *(Select one)*

- Foundational = Fundamental concepts you need to know today — especially for those new to the field.
- Technical = In-depth information, step-by-step “how-to” presentations and technical information you need today.
- Strategic = Forward-looking, strategic discussions of the future. These can be considered forward-thinking “master’s level” sessions.

**Session Format:** *(Select one)*

All sessions will be 60 or 75 minutes long. *(Please select the format that best reflects your session plan.)*

- Case study
- Debate
- Interactive
- Lecture
- Panel discussion
- Roundtable discussion
- Workshop

**Abstract Content Summary** *(Limit length to between 400 and 600 words.)*

- Describe your topic for review by the presentation selection committee. Explain, for example, how the problem or issue was identified; the approach used to address the problem or issue; the challenges and barriers faced; the method and/or analysis that was used; the conclusion or outcomes achieved; and recommendation(s) related to the topic.

**Session Description** *(Limit length to 150 words)*

- Include a concise description of your session that will appear in the conference brochure, website and mobile app. Write this description to accurately reflect the content and summarize why prospective attendees should invest their time attending the session.

**Learning Outcomes** *(4 required)*

- Provide four learning outcomes as an outline of what attendees will be better able to do after attending your session.
  - Start each outcome with a measurable action verb (e.g., assess, state, list, describe, identify, explain, etc.). Do not use verbs such as learn or understand.
  - Create outcomes that are succinct and concrete to avoid misinterpretation. Outcomes should be different from the benefits specified in the abstract.
  - Some attendees seek AIA learning units. It is advisable to write outcome statements that consider [AIA Health, Safety and Welfare unit criteria](#).

This session will enable attendees to:

- Outcome Statement 1.
- Outcome Statement 2.
- Outcome Statement 3.
- Outcome Statement 4.

**Additional Information**

- Does your proposed session include one or more owners? (Y / N)
- Describe your plan to organize and deliver the session. What will the attendee do during your session?
- Explain the takeaway you will provide to attendees (e.g., white paper, tool, checklist, benchmarking worksheet, sample policies/procedures, etc.).
- Our selection committee values different points of view; how will your session reflect the diversity of perspective (professional and/or personal diversity)?

**Audience:** *(Select all that apply)*

- Health care administrators.
- Facilities directors/managers.
- Infection prevention professionals.
- Contractors.
- Architects.
- Design engineers.
- Other.

**Speakers & Co-speakers:**

*You MUST notify any individual you are identifying as a co-speaker about their involvement in this submission before adding their name. They will also be receiving a confirmation email regarding this submission.*

- Add the following for ALL participating speakers for your submitted session abstract:
  - Name
  - Credentials
  - Company
  - Email address
  - Speaker experience
  - Speaker bio (75 word maximum)
- Have you (or any co-presenter) presented on this topic previously?
  - If so, where and in front of what audience? (Optional: Share a reference from a colleague on your speaking abilities.)

**Questions or concerns?**

Please contact ASHE Program & Conference Manager, Melissa Binotti Heim  
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