



Lawrence Benjamin Stauffer, CHC, CHFM 2022 Candidate for Advisory Board Region 5 Representative

Bio

My work in Healthcare started out of college and in construction. I spent 20 years in Healthcare Construction in Central Indiana prior to joining IU Health. I started with IU Health in 2011 as a Senior Project Manager in Design and Construction. I always prided myself in completing projects on time, within budget and through collaboration with the Facilities and other teams who would "live" in my projects. It was more about the long-term implications of decisions than about the immediate project needs. Some of my projects include multiple Imaging and Oncology Modality's, Medical Office Buildings, fit out of IU Health Arnett Hospital for 39 new beds and associated infrastructure, and various other projects in the West Central Region of IU Health's hospitals and office buildings. Along the way I obtained my MBA and became a Certified Healthcare Constructor through AHA.

In 2016 I had the opportunity to transition into Facilities and Plant Operations for IU Health Arnett. Shortly thereafter as we took over operation of the IU Health Frankfort Hospital, I transitioned to a Regional Operations Director Role overseeing Facilities, Clinical Engineering and Security. At this point, the West Central Region included White Memorial, Frankfort and Arnett Hospitals as well as clinics in Tippecanoe, White and Clinton Counties all totaling just over 1 million square feet. I also became a Certified Healthcare Facility Manager through AHA.

With my extensive background in construction and my focus during these projects on full project lifecycles, I have brought a sound understanding of the physical environment to my role. Along the way, I've developed a deeper understanding of the day to day needs of the teams inside and outside of Facilities and Clinical Engineering and the long term needs of the organization. I bring a unique people and engineering focus to the organization. As an Advisory Board Member for ASHE, I will bring my education, extensive background in all types of Healthcare Facilities, experience as a contractor, experience as an owner's representative and my social nature to the organization. The colleagues and eventual friends I made through ISHE/ASHE have helped me in my career and I believe it's time I give back.

Candidate Questionnaire

1. As the health care landscape continues to change, what are some of the common challenges facing the entire ASHE membership?

We are all still "coming down" from one of the most active times in most of our careers. Between the pandemic and the ever-changing regulatory landscape, we have all faced unprecedented challenges. Many of us have reached out more than ever to our friends, colleagues and associates in ASHE and our local chapters for support. Continuing this nimble and collaborative approach to support and lead our organizations forward will be one major challenge for each of us.

Additionally, we have seen very recently the acute impact energy costs have on our organizations. There are many aspects of this impact that are outside of our control such as world events, natural and man-made disasters and to some extent governmental policy. While

we have some influence over governmental policy, our focus will remain on improving the efficiency and sustainability of our physical environments. This is the other major challenge I see facing our entire membership.

2. What can ASHE do to ensure that the needs of all members are being met?

As hinted above, support and programs that address our common challenges should be at the heart of ASHE's efforts. Facilitating member collaboration through networking opportunities beyond the annual conference and major meetings will serve the members, our organization and ultimately our patients in a positive manner. Educational programs sharing information on regulatory and practical improvement opportunities will positively serve our membership and continue to develop each member and their organizations. Finally, developing ASHE reviewed services from our many associate members will help the entire industry sort through the many available services that are put in front of us each day.

3. The Advisory Board sets the vision and strategic direction for the organization. What specific initiatives would you like to accomplish to help advance the ASHE strategic plan?

Two initiatives I'd like to see with ASHE are mentioned above as member collaboration and ASHE reviewed services. The member collaboration exists in many forms today. We have data available to us and the ASHE website has many programs and opportunities to collaborate. What I'd like to see is a facilitation of collaboration among the rank-and-file members Many of us like to go to the source or in Lean terms, Gemba. Finding a way to get to this level of collaboration will be very valuable to the membership. I find this level of collaboration one of the many positives of being on the Indiana Society for Healthcare Engineering Board.

The ASHE reviewed services is a bit more complex and has many opportunities as well as pitfalls. I see this as being on the order of the "OSHA Compliant" moniker. We would steer clear of "ASHE approved" and still respect the many offerings from the many sponsors and non-sponsors. We would simply develop a program whereas an organization could submit a program for review, and we could deem it compliant and/or confirm it provides the benefits advertised. We would then require them to maintain the program in the format submitted and maintain the claims made in their advertisement or sales of the program. Again, it helps the membership sort through the myriad of offerings we receive each day.

4. What professional or personal experiences have helped prepare you to serve as an ASHE leader?

As mentioned in my Professional Bio, I come from an initial career as a Constructor of Healthcare Facilities. I developed a deep, unique understanding of the need to construct a facility that meets the long term needs of the patients and staff being served by that facility. The staff includes the facilities/maintenance team, EVS, lab, pharmacy, supply chain, providers, nursing and many, many others. It must work for everyone out of the gate and into the future. As I moved into a direct Facilities role, I was able to continue to advocate for long term solutions rather than short term fixes. I think this broad understanding of the entire Healthcare Industry will allow me to serve as valued leader of the ASHE organization.