Caring for health, caring for facilities, caring for management

Professor of Hospitality Management Dr Susanne Hofer works with Franziska Honegger, Nicole Gerber and Gabriela Züger to improve facility management in healthcare. Here, she delineates the principles of facility management, explaining what she finds so fascinating about this emerging discipline.

What is facility management in the context of healthcare and why is it such an important research area?

Facility management is a term used in many ways. We use the European Committee for Standardization’s definition – namely, ‘the integration of processes within an organisation to maintain and develop the agreed services which support and improve the effectiveness of its primary activities’. Simply put, facility management supports the core business of any organisation – and therefore the nature of facility management is very adaptable. Within the healthcare context, facility management deals with non-medical support services and their processes in hospitals and other healthcare institutions such as nursing homes.

How has your background equipped you to work in the area of facility management in healthcare and why you are passionate about this area of research?

During my strategic hospital leadership, I realised that the whole array of facility management in healthcare had been languishing under the dominance of the medical core processes. I set sail to develop that untapped potential by setting up the research focus ‘Facility Management in Healthcare’ at the Institute of Facility Management at Zurich University of Applied Sciences. In the last 10 years, my team and I have been fortunate to build up a trusting relationship with the industry through developing facility management in the healthcare field in close collaboration with practitioners. As a university of applied sciences, this is very important.

The passion for facility management in healthcare that I share with my teams springs from the diversity of the field, which requires us as facility managers in general to communicate and work with facility management in healthcare stakeholders across organisational and hierarchical levels as well as different disciplines. Our research area is incredibly fascinating due to its high complexity.

What are some of the biggest challenges faced by facility managers in healthcare?

Within the Swiss context, it is that facility management is not yet thoroughly accepted at a strategic level as a relevant management discipline. Our constant advocacy efforts in this area are paying off, however, as healthcare institutions – predominantly hospitals – increasingly place facility managers in their executive boards. We are especially proud, of course, if this person has been a student at our institute, where we put an emphasis on equipping them to take part in decisive strategic discussions, as well as giving them a broad understanding of tactical and operational facility management knowledge. In fact, we are the sole institution in Switzerland providing a Bachelor’s and Master’s of Science in Facility Management.

For what reasons is it so important to have an international perspective on the provision of facility management in healthcare?

Facility management in healthcare happens everywhere, aligned with cultural customs and available resources. So looking beyond one’s own borders is crucial to keep up with ongoing process developments; innovation does not only happen in Switzerland. We see it as our duty to the industry to pick up alternative or improved processes to deliver aligned facility management in healthcare and to adapt them to Swiss requirements.

The strategic necessity of facility management

Interest is growing in an emerging management discipline that emphasises the importance of facility management in healthcare institutions – and researchers at Zurich University of Applied Sciences in Switzerland are paving the way for progress with their evidence-based data and advocacy.

UNIVERSAL HEALTHCARE IS an ambitious goal; in 2012, the UN adopted a resolution to move towards universal health coverage, but even this powerful forum of governments conceded that the completion of the task could not be expected for many years, probably subsequent to the completion of the Millennium Development Goals. In the face of prolonged economic problems around the world, the challenge has been exacerbated by national healthcare services that have been forced to operate with fewer resources and under greater pressure than they have done in the past. Switzerland, for example, operates one of the world’s most expensive national health services – and in difficult economic times, overheads must be reduced.

This context is part of the force behind the rise of facility management, an emerging management discipline that focuses on the effective coordination of services through
proper management of the buildings, spaces, people and infrastructure available to an organisation. In healthcare, services from strategic management to business support and non-medical support all fall within the wider remit of facilities management – and a wealth of research has already demonstrated that this young field can point the way to great financial savings. Despite this, however, awareness of the utility of facility management approaches in healthcare is still not as widespread as it should be, with some European states particularly indifferent to this novel management style.

THE PRICE OF HEALTH
Professor Dr Susanne Hofer leads a team of researchers at Zurich University of Applied Sciences in the pursuit of material evidence of the successes of facility management. It is an international issue, but one that is manifested with particular intensity in Switzerland. “Facility management is an important concern because it accounts, on one hand, for a large amount of healthcare institutions’ total costs,” Hofer explains. “This is especially pronounced in the Swiss healthcare system; according to the OECD we have a high-quality but very expensive healthcare system.” Another challenge for the group is Switzerland’s federal status, consisting as it does of 26 districts or cantons, each with different rules and regulations when it comes to healthcare.

The approach that Hofer and her colleagues have brought to addressing these challenges is both innovative and diverse. Its first strand centres on advocacy and raising awareness of facility management in healthcare; as part of this effort, the team recently developed a catalogue of the non-medical support services that hospitals require in order to run efficiently. This document, which proceeded from their collaboration with practitioners in the field, clarifies what facility management includes, and the extent of its reach – it is therefore vitally important research for advocates of this approach, although the practices of individual hospitals vary.

ADVOCATES AND ARGUMENTATION
Another advocacy contribution from the team has been the argumentation aids they have prepared for facility managers, which consist of evidence-based conclusions that demonstrate the utility of facility management as an approach. A prominent example of this was their work towards developing a benchmarking framework for support services, so that performance could be compared across institutions. This methodology so far extends to catering and cleaning services, and provides advocates of facility management with definite, relevant statistics based on the Swiss setting. However, there is more to benchmarking than practical data collection: “The real benefit in participating in the benchmark community is that entering the required data urges facility managers to look at their processes and hence raise transparency and their awareness of how resources are allocated and spent,” Hofer enthuses.

Finally, the group has been active in efforts to put together information resources on healthcare assets over their entire lifecycle – a process known as lifecycle costing. Take inefficient elevators, for example – what toll does their inefficiency take over their total lifetime, and how does that cost compare to the cost of replacing them? These are questions that strategic management in healthcare and everywhere else has struggled with for years, but up until now the process for lifecycle costing has been static. By discussing such issues with practitioners, Hofer and her colleagues promote a holistic view of and a dynamic approach to costing.

THE FUTURE OF FACILITIES AND THEIR MANAGEMENT
As automation is set to continue increasing efficiency and lower costs going forward, it will alleviate the pressure felt in healthcare – but not without efficient and knowledgeable management to facilitate changes. Improving both the patient and staff experience in this context will mean putting facility management and its empowerment on a strategic level at the centre of future approaches.