

ASSETMARK

THE ASSET BENCHMARKING SYSTEM FOR HEALTH FACILITIES MANAGEMENT

Bill Geerlings

WHAT IS BENCHMARKING ?

- § Bench mark: a point of reference from which quality or excellence is measured
- § Benchmarking: the practice whereby companies compare their performance with that of other companies

(Macquarie Concise Dictionary, 4th edition)

WHY IS IT IMPORTANT?

- § You can't manage what you don't measure
- § AssetMark measures excellence and quality
- § Improves facility service delivery
- § Provides structured continuous improvement
- § Provides opportunities for mutual support
- § Health Care Facilities Accreditation requirements

ASSETMARK BACKGROUND

- § Designed by hospital facility managers for hospital facility managers (IHEA working group)
- § Pilot questionnaire to establish key performance measures
- § Tested at RPH, FMC, RHH, RMH, Westmead, PCH
- § Established data base for comparative data analysis and reporting – 12 standard reports

HOW DOES IT WORK?

- § The Facility Manager completes the AssetMark questionnaire
- § The Consultant validates and enters the information into the data base
- § A set of standard reports is prepared, showing the hospital's performance against key performance measures and other hospitals
- § The set of standard reports is sent back to the FM
- § The FM decides how he wants to proceed

ARE THE COMPARISONS VALID?

- § AssetMark recognises that there are differences between hospitals
- § Similar hospitals are chosen for comparison
- § Similarity is determined by recognising: geographical location, health services provided, hospital category and facility description

WHAT DATA IS REQUIRED?

- § Maintenance Expenditure
- § Hospital expenditure
- § Floor area (active and gross)
- § Occupied bed days / separations
- § Capital replacement value
- § Preventive, corrective, reactive maintenance and restoration output
- § Energy consumption and costs

Required data (cont'd)

- § Ten year average capital cost
- § Direct / indirect labour
- § Cost of external / internal resources
- § Value of deferred maintenance

WHAT ARE THE BENEFITS?

- § Continuous improvement based on verifiable data (KPIs)
- § Opportunity to work with fellow engineers to compare performance, look for improvement
- § Knowing your strengths and weaknesses
- § Verifiable performance as opposed to perception of performance
- § Guaranteed confidentiality (independent administrator, anonymous reports)

WHERE TO FROM HERE?

- § That is entirely up to the IHEA membership
- § My advice, for what it is worth:
 - ü Don't change KPIs (you will lose the advantages of the large data base that has been built up) and don't reduce their number!
 - ü Do participate if you want to be a credible health facility FM practitioner – observe the use of KPIs by the big commercial FM companies!
 - ü Do consider engaging the help of a colleague or mentor (IHEA could play a useful role here!)

FURTHER INFORMATION

- § *'Benchmarking Self Help Manual'*, Enterprises Improvement Services, Commonwealth Bookshops
- § www.ihea.org.au (follow links to IHEA AssetMark Information pack)
- § Info@ihea.com.au
- § billgeerlings@bigpond.com