

QUARTERLY WINTER 2018

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ACHA Annual Luncheon

Over 120 ACHA certificate holders gathered at the ACHA Annual Luncheon, which took place in November at the HCD Conference in Orlando. Former Disney Leader and customer experience guru with a focus on patient experience, Jake Poore, was the keynote luncheon speaker. Jake spends his time in the trenches of healthcare, working side by side clinical and non-clinical care team members on every step of the patient experience. You will find him shadowing



Luncheon speaker Jake Poore

a nurse on a medical-surgical floor, observing pre-op surgery, secret shopping the waiting room of a doctor's office or conducting patient focus groups. Just after 9-11, Jake launched Integrated Loyalty Systems, a company on a mission to help elevate the human side of healthcare. Since then, Jake and his team have been sharing strategies to build world-class patient experiences by helping to design and execute patient-driven cultural plans, define the company's patient experience strategy and create ways to operationalize the ideal patient and employee experience. On the ACHE faculty for the past 11 years, he has successfully helped many healthcare organizations make cultural changes for exceptional patient experiences.

Jake's energized and engaging talk gave numerous examples of all too familiar shortcomings in facility design and customer service practices with insights and recommendations to implement new thinking to improve the patient experience.



NEWSLETTER CO-EDITORS

Bill Sabatini, FAIA, FACHA Matthew Kennedy, AIA, ACHA

John Pangrazio Receives 2017 Lifetime Achievement Award

Surrounded by ACHA certificants, colleagues, friends and family, John Pangrazio, FAIA, FACHA, received the ACHA's 2017 Lifetime Achievement Award at the Annual Luncheon.

John's contributions and influence have spanned decades and continents. He has been quoted in Newsweek magazine about "Fixing America's Hospitals" and has a legacy piece of research work on YouTube that is still relevant today. When he presented the video "Healthcare Public Spaces and the Power of Design," he established a high bar for communicating ideas and went far beyond the industry standard. Presented over 6 six years ago, it's still relevant and has garnered over 6,800 views.

Committed to the next generations of planners and designers, over the past 35 years, John has been a lecturer, studio critic, and mentor at California Polytechnic State University, Clemson University, Texas A&M University, Washington State University and the University of California, Berkeley. During this same timeframe, he has written over 50 articles for healthcare, architectural, and business magazines. John has delivered over 40 presentations on healthcare planning and design to a broad range of audiences within the profession and to the broader public. Always seeking innovative solutions supported by research and experience, John has been a tireless advocate for the generation and application of research in professional practice. Key



initiatives have ranged from development of "space drivers" for facility programming --- to "exit strategies" to avoid obsolescence --- to research in patient room design.

Congratulations to John and many thanks for his leadership in the College and the industry over the years.

ACHA Certificant Spotlight: Phan Luc, AIA, ACHA

How did you first get involved with healthcare architecture?

I first got involved with healthcare architecture back in 1995, after the Northridge earthquake triggered a large demand on seismic upgrade for many of the healthcare facilities in California. I stumbled into the field by chance by being part of the team that designed and built base-isolated hospitals, and have not left since.

What motivates and excites you about healthcare architecture, planning and design?

Designing and planning of healthcare architecture motivates and energizes me with the ability to help create a healing environment for the patients and improving the working environment for those who devote their life to saving life – the staff.

Which of healthcare's "megatrends" will have the greatest impact on your practice, and why?

One of the "megatrends" that will have the greatest impact to architecture practice, regardless of the modified outcome of the Affordable Care Act (ACA),



Phan T. Luc, Leo Daly, AIA, ACHA

is the consumer based healthcare demand. This will drive the demands for decentralized healthcare services, making them more retail oriented, more personalized and customized care that will need to bridge throughput efficiency and cost reduction with technology. With this demand trend, healthcare architecture will be reduced to smaller more affordable scale and logistically located among the population served. Micro hospitals, smaller medical office buildings with timeshare clinics options for physicians, mobile clinics that go to the consumers, will replace large scale medical centers.

Mardelle Shepley Receives 2017 Changemaker Award

Mardelle Shepley, FAIA, FACHA, has been named as the 2017 Changemaker Award recipient by The Center for Health Design's Board of Directors. Given annually at Healthcare Design Expo & Conference, the award honors individuals or organizations that have demonstrated exceptional ability to change the way healthcare facilities are designed and built, and whose work has had broad impact on the advancement of healthcare design. Recognized as a hands-on instructor, Dr. Shepley is a full-time professor at Cornell University who continues to practice architecture. She is associate director of the Cornell Institute for Health Futures. She previously served as a professor at Texas A&M University (TAMU) and was director of the TAMU Center for Health Systems & Design from 2004-2014. Mardelle is a fellow in the American Institute of Architects and the American College of Healthcare Architects and is LEED and EDAC certified.

A strong advocate and practitioner for incorporating research into projects, Dr. Shepley's teachings and practice illustrate how to tie hypothesis to design goals with the end result demonstrating the relationship between an objective and an outcome. She advocates that research is equal parts art and science, demonstrating how study hypotheses are directly related to design goals by illustrating the relationship between an objective and an outcome. As a result, her research is characterized by its translational content, generating data that can be directly applied to built projects. For more information about the award, visit this link.

Mardelle has served on ACHA's Education Committee for the past 4 years, and has been instrumental in championing the College's white papers. Our sincere congratulations to Mardelle!



ACHA Master Series at HCD

The HCD Orlando in November featured a two-part ACHA Master Series Deep Dive titled "How Virtual Connectivity and Care Are Reshaping Architectural Programming and Application of Telemedicine in Population Health."

Part 1 was led by our own 2017 president, Dr. Ray Pentecost, Director, Center for Health Systems & Design in the Texas A&M University College of Architecture. Ray was joined by Bill Persefield, Director, Healthcare Real Estate practice of Navigant, and Rodney Hill, FAIA, also from Texas A&M University College of Architecture. Part 2 was delivered by Connie McFarland, FAIA, FACHA, of McFarland Architects in Tulsa, OK, a past ACHA president and Bill Sabatini, FAIA, FACHA, Healthcare Principal with Dekker/Perich/Sabatini.

Part 1 looked at how healthcare facility programming may change, how staffing may be relieved and how close we are to a new generation of disposable facilities with low development costs and compressed life expectancies with new tele-medical technologies. Recent disruptive technologies are virtual and have the potential to redefine the roles of traditional health professionals. Big data analytics are being catapulted into scales that are difficult to conceive as a result of real-time patient diagnostics, and interactive kiosks and holograms are thoroughly redefining the parameters for a personal patient encounter with a health professional. These developments in virtual care technologies are having significant impacts on the design community because they call for very different kinds of healthcare facilities, and in some cases for no facilities at all. But certainly these developments are launching a care delivery model that challenges the heart of our healthcare system: the patient-doctor relationship.

Part 2 provided a look at a highly successful application of these technologies in the use of telemedicine in Population Health. Current medical practice has not been able to keep pace with the explosion of



medical knowledge. In addition, specialized medical knowledge has been confined largely to academic medical centers and to specialists in major cities resulting in a disconnection of primary care clinicians on the front lines of patient care. This is especially true in remote, rural communities. To make matters worse, the typical patient in these areas has limited means to travel to see the necessary specialists.

To bridge this disconnect, a new model of health care and education delivery was invented and initiated by Dr. Sanjeev Arora at the University of New Mexico. His program, Project ECHO (Extension for Community Healthcare Outcomes), uses videoconferencing technology and case-based learning where ECHO's medical specialists provide training and mentoring to primary care clinicians working in rural and urban underserved areas. These practitioners are able to deliver the best evidence-based care to patients with complex health conditions in their own communities. Now replicated by over 110 partners in 22 countries, the ECHO program is currently used for more than 50 complex conditions including opioid addiction, mental health, chronic pain, autism, asthma and endocrinology (diabetes). One such location is at the Oklahoma State University Center for Health Science directed by Joseph Johnson DO, FACOOG, Associate Dean for Clinical Education and Simulations Medicine. Dr. Johnson joined the presentation via video conference to tell about how Project Echo has helped him and his colleagues address complex diseases in rural areas of Oklahoma. A new care delivery model, operational today, using telecommunication technology reinforces the patient-doctor relationship by giving the rural practitioner access to new medical knowledge to treat his/her patient right where they are.

Fellows

The ACHA Council of Fellows was founded to advance the unique qualities of the profession of healthcare architecture by demonstrating and celebrating achievements of national significance. Fellowship is one of the highest honors bestowed upon a certificant of The American College of Healthcare Architects, who has shown distinction in fulfilling one specific category of nomination of their work and has demonstrated a nominee's individual impact in healthcare facility architecture.

The College celebrated its 2017 class of certificants as well as this year's Fellows at its Annual Luncheon. Congratulations to:

- Edward Huckaby, FAIA, FACHA, FKP Architects, Inc. (Retired)
- William Q. Sabatini, FAIA, FACHA, Dekker/Perich/Sabatini
- Robert E. Yohe, AIA, FACHA, Rogers, Lovelock & Fritz, Inc.







Members

Welcome New Certificants:

Alena Sakalouski

Tiffany Long* Christian Bormann Katheryn Fricke Michael Shirley Tansy Bowermaster Mathew Grant* Phan Luc Michael Street Frank Hindes Charles Michelson Matthew Suarez* Brian Briscoe Janhvi Jakkal Andrew Mitchell Rvan Turner* Allen Buie Carla Murillo-Gonzalez Georgia Cameron Chaithanya Jayachandran Curtis Wilson Solvei Neiger Lilis Wu Jhiah Chang Matthew Jennings Kori Chapman Jerry Jeter David Potts Fang Yang Brian Zabloudil Nilay Deshmukh Kevin Kerschbaum Craig Puccetti Michael Dolan Lucas Konger* Michael Roughan Paul Sabal *Former ACHA Candidate Keith Fleming Andrew Lane

William Lee

David Franklund*

President's Message

Coming of Age

It began in 1999 as a visionary group of seven who had quickly organized a group of 50 highly respected architects specializing in health facilities to birth the ACHA stroke of midnight at the turn of the millennium. In 2018, that number will surpass 500 architects who have demonstrated to an independent board that their experiences, knowledge, and skills have crossed a well-defined threshold of excellence in our profession. While steady numerical growth is one measure of an elite organization's success, it only symbolizes the unique value of the larger whole. In recent years the Board had rediscovered its value as simply a distinction among peers.

Your ACHA Board of Regents drilled into what this value means to four groups: to the certified, to young practitioners, to healthcare architects outside of North America, and to other allied organizations. That deliberate choice to not simply maintain a certification process because it is good enough, but to proactively develop it and the people with whom we engage will multiply its value.

To those that are certified we say: The value IS certification. To young practitioners: we know where you live, and will be seeking you out. To healthcare architects practicing outside of the U.S.: we are investigating an infrastructure to consider your experience, knowledge, and skills. To other allied organizations: we are directly asking how we can add our influence to advance your missions.

As the College begins to close its second decade and assert its maturity by leading on a global stage, now is a very exciting time to be part of our College. When the College began, the founders were selected based on their leadership within the profession. The first exam hadn't even been written yet – they simply led. The College



is reaching a generational shift. The Board is now comprised of more Regents that had submitted to the current certification process than were among the 50 original founding certificants – a phenomenon that mirrors the College as a whole. Let us continue to demonstrate our leadership as those original seven founders did. As they had developed and hoisted us upon their shoulders, we must ask who we will actively develop to stand atop of ours.



William J. Hercules, FAIA, FACHA
President, American College of Healthcare Architects, 2018

ACHA Certificate Holder's Directory – Is it working for you?

Did you know that over 3,000 people visit the ACHA website each month?

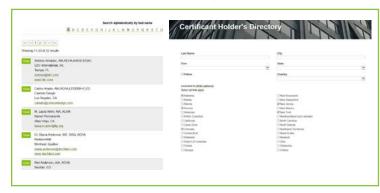
What would they find if they looked you up by name, firm or state in the Directory?

Is your profile up-to-date?

We have updated the Directory and it now allows visitors to view lists of certificants by alphabet as well as specific names. Visitors can also select all of the states they are searching rather than searching state by state.

More work is needed, though, and we need your help.

- Make sure your photo is showing properly. If not, check the size (must be a .JPG with a width of 150px and a height of 185px)
- Do your "Recent Projects" appear with photos and description? If not, use this opportunity to market yourself and your projects.
- How should the firm name be consistently displayed for all



certified members of your firm? You will notice that firm names often display differently depending on who is adding that information to their profile. We will be cleaning this up in early 2018, but we will need your help. Have your firm representative contact the ACHA Executive Office with the proper name as it should appear in the directory.

If you need help, contact the ACHA Executive Office at acha-info@kellencompany.com.

Welcome New Board Members

David Allison

David Allison FAIA, FACHA is an Alumni Distinguished Professor and has served as the Director of Graduate Studies in Architecture + Health [A+H] at Clemson University since 1990.

Professor Allison is a registered architect in South Carolina and North Carolina, and is NCARB certified. His scholarly focus is centered on healthy community planning and design, design prototyping and research related to health care environments. He has served on numerous national health environments design award juries and is a founding member and Fellow of the American College of Healthcare Architects and the Coalition for Health Environments Research. He is also an active member of the AIA Academy of Architecture for Health where he served a three year term as an AIA/AAH National Advisory Board member. He was selected in 2007 as one of "Twenty Making a Difference" nationally by Healthcare Design Magazine and identified again in 2009, 2010 and 2012 by a national poll conducted by the magazine as "one of the most influential people in healthcare design." Design Intelligence Magazine named him one of the nation's 30 Most Admired Design Educators in 2013-14.



Jon Paul Bacariza, AIA, ACHA, is the Tampa Office director of HKS Architects and is one of the healthcare practice leaders in Florida. He was raised in Madrid, Spain and during his professional career has practiced throughout the southeast. Jon Paul was a founding member of the South Florida Green Building Council Chapter and served on the ACHA exam committee for five years prior to joining the board. Jon Paul received his Bachelors of Architecture from Cornell University.

Clyde "Ted" Moore

Clyde "Ted" Moore III, AIA, ACHA, is a Project Design Principal for Haskell Architects and Engineers. As of January 2018, his title changed to Operations Manager for FreemanWhite (a Haskell Company), in the Jacksonville office. Ted's experience includes leading several fully integrated project delivery teams, as an AEC team leader, in the delivery of new and/or renovated medical centers in several states. His passion is in the creative planning and design of a comforting patient, family, and staff experience that is an ideal environment for the efficient delivery of healthcare. Ted has served on ACHA's Communications and Outreach Committee for more than six years and has been Chair for the past three years. Ted is currently licensed in California, Texas, Oklahoma, and Vermont, and attended the University of North Florida.





Jon Paul Bacariza



ACHA White Paper: Simulating Evolutions in Emergency Department Design: Three Case Studies

By Omri Kenneth Webb IV, AIA, ACHA; Sheila Ruder, AIA, ACHA; David Klahn; Kate Renner, AIA

Simulation can accurately show the quality of interactions between processes and people and provides a depth of insight and accuracy into the validation of results during the early design process. Future-state designs can predict responses to changing factors and justify design decisions. Simulation ensures that estimated savings are realistic, reveals additional savings, and quantifies the implications of decisions on the customer/patient experience. In Emergency Department (ED) design, simulations help to solve many of the challenges within these complex environments during the design phase. These 3 case studies of ED expansion and renovation took unique approaches to simulation.

Wake Forest Baptist Medical Center ED

At the early concept phase of the project, a Paper Simulation was conducted to test the patient flow, placement and staffing allocation throughout a typical busy day. The simulation revealed the higher than typical percentage of ESI 2 & 3 patients, resulting in the addition of more Major Treatment rooms to accommodate these patients to maximize the throughput of the department.

WellSpan York Hospital ED

To ensure proper flow of patients between key areas in the ED and adequate staffing, a dedicated Lean Process Improvement team simulated conditions in real-time using card board mock-ups of the department. Hired actors simulated several scenarios, with the design team onsite to reconfigure the department as the scenarios revealed the design challenges.

Christiana Care Health System ED

Challenged with treating more patients in less time and in less space, the project team analyzed a recently completed Freestanding Emergency Department to simulate the key design and operational concepts in a physical space. New concepts were tested using live simulation to test possible processes and strategies for system improvement, and quantify their resulting impact.

These projects will be analyzed post-occupancy to understand the actual impact of design strategies tested through simulation.

Read the full white paper on the ACHA website at this link.



Calendar of Events

Mentor Opportunities

MARCH 25-28, 2018

PDC Summit Nashville, TN

JUNE 18-20, 2018

Cleveland Clinic Patient Experience Summit Cleveland, OH

JULY 26-28, 2018

Summer Leadership Summit Chicago, IL



INTERESTED IN MENTORING AND MAKING A DIFFERENCE?

Contact the ACHA Executive Office at 913-222-8653 or ACHA-Info@kellencompany.com

THE ACHA VISION

» Transforming healthcare through better built environments

THE ACHA MISSION

» To distinguish healthcare architects through certification, experience, and rigorous standards

THE ACHA EXISTS

» To enhance the performance of the practice of healthcare architecture through its certification, continuing education and other programs

THE ACHA PROVIDES CERTIFICANTS

» The distinguishing credentials of a specialized healthcare architect to clients, prospective clients and other architects as well as advanced continuing education

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