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ACHA



QUARTERLY FALL 2019

Contents

- 2019 SLS 1-5
- President's Message 6
- ACHA Certificant Spotlight 7
- ACHA Annual Luncheon 7
- Calendar of Events 9

Highlights from the 2019 Summer Leadership Summit

The Summer Leadership Summit has been described as a collegial think tank, thought provoking, and includes Harvard-level presentations shared among the industry's leading healthcare architects. This year was no exception, and we hope you will enjoy some of the photos from the Summit on our multimedia page found [here](#).



NEWSLETTER CO-EDITORS

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continued on page 2

Highlights from the 2019 Summer Leadership Summit

continued from page 1

Returning to the Summit

ACHA Certificants returned to Chicago July 25-28, to attend the annual Summer Leadership Summit (SLS). Held in the Windy City since its inception, this event has become one of the mainstays of the College. It is also one of the few conferences that remains true to the participants' needs. In an era when most professional conferences have become overly-large in attendance, higher-priced and with few presenters outside our field, the SLS has purposefully remained smaller in scale, affordable in cost and only extends invitations to speakers outside our field to provide fresh insight and new perspectives not heard elsewhere in this profession.

Facilitating Engagement: Incorporating Modern Technology in Healthcare Environments

Presenter: John Barto, Microsoft Corporation

Understanding how advances in technology (that we all use without thought everyday) can positively affect Healthcare and their outcomes was the essence of Mr. Barto's discussion. As a self-proclaimed Healthcare Evangelist, he set the tone for how Microsoft, as a leader in technology solutions across multi disciplines, has and could drive innovation across Healthcare delivery. Utilizing advances such as AI, Speech Recognition, and NLP, he demonstrated how understanding the human condition could be aided in real time. A knowledge that analytics drives everything helps bracket the conversation of how technological advancements can assist the monitoring and evaluation of chronic condition assessments. Using examples of how partnerships such as between Epic and Ochsner have reduced codes outside the ICU by 44% by evaluation of real-time data, he illustrated how predictions and analytics living in the cloud can be the new normal. Although technology can greatly assist outcomes, he asserted that the biggest issue was the proper adoption and application of data. The advancement of the ability of the technology to assist (i.e. object recognition being twice as better as it was in 2016) is only limited by the allowance of those recognizing that data to use it in practical applications. He asserted that the embracement of technology and its use in the analysis of conditions will only be limited by the ability of the human condition to acknowledge and employ it.



Highlights from the 2019 Summer Leadership Summit

continued from page 2

Whole Mind Creative Problem Solving

Presenter: Russ Stalters, Clearpath Solutions

In keeping with the non-traditional topics on the agenda (rather than focusing on architecture, design or planning), the attendees were treated to a journey on how to release their sub-conscious minds in order to assist in problem solving. As part of the BP Deep Horizon response team in 2010, Mr. Stalters relayed his experience on how to respond to seemingly unresolvable conflicts. His assertion that most of our relevant information and ability to resolve issues were resident in our unconscious mind was evident by his treatise of problem solving: 1) Learn to use your whole mind; 2) Study creativity and innovation intentionally, and 3) Explore new modalities for gathering input. All told, the importance was on releasing your subconscious mind, which absorbs almost 90% of your allowable information, to aid in accomplishing tasks that seemed unachievable. Attendees participated in several relaxation exercises to free the mind in order to allow evaluation of decisions through the understanding of a change from the status quo to the emerging future. By realizing that the spectrum of decision making and understanding of conscious decisions relies on a very narrow band, and therefore being able to release our subconscious understanding to reach new levels, we might be in a position to more readily improve the human condition. Valuable resources were cited for applying the techniques presented in order to enable positive outcome patterning.

Health Inequalities in the USA

Presenter: Bonita Stanton, MD, Hackensack Meridian School of Medicine at Seton Hall University

Dr. Stanton is responsible for shaping young physicians and is the Dean of the Hackensack Meridian School of Medicine at Seton Hall University. The session focused on 3 main topics: The Status of Health; Why do these differences exist; What can we do to address the differences?

Life expectancy in the USA has been on the decline in 2015, 2016, and 2017. Every year prior the life expectancy had been increasing. However, even with the increase in life expectancy in the USA it has not been on the same pace as the other developed nations. The study looked at infant mortality rates across all nations and across multiple outcomes.

Currently in the USA expenditures for healthcare consume over 18% of the Gross Domestic Product (GDP). Of that expenditure, roughly 40% is attributed to individual behavior, ie, the choices we make relative to alcohol, smoking, drugs, etc. Roughly 20% is attributed to environmental conditions, ie, poverty, homeless, etc. Only roughly 10% is attributed to healthcare delivery.

In connection, social care spending in the USA is the lowest of all developed nations. And the only country below 50% of the healthcare expenditure. In large part, the differences in the status of health are related to “advantaged” compared to “disadvantaged”. That is the differences per the studies are not income based and not insurance based.

Ways to begin to address the differences were presented such as physician and caregiver by the same ethnicity. This represents a need to increase the under-represented ethnicities in Med School education. The estimated pace of medical knowledge by 2020 is doubling every 73 days. With all of this Med School education is looking for ways to shorten the length of time necessary to complete the degree process. The presenter represented their 3-year accelerated process and utilizing a more active learning approach instead of a lecture-based approach. This approach also involves significant community-based involvement leading to an empathetic understanding.



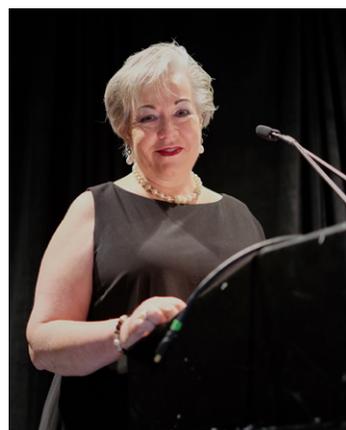
Highlights from the 2019 Summer Leadership Summit

continued from page 3

Moving the Needle in Healthcare Quality

Presenter: Michelle Schreiber, MD, CMS

Dr. Schreiber is the Director of Quality Measurement and Value Based Incentives Group Centers for Medicare and Medicaid. She came from private practice working in a hospital in Michigan. Having someone from CMS is a high mark for SLS and surely captivated the audience. She acknowledged, as we all know that in our system, we pay too much and don't get much for it. So, how do we move the needle? Bottom line; focus on primary care and shared responsibility for our healthcare. Aspects of interest to healthcare architects are; statistics which show that working in a hospital is less safe than building one. She stated that fixing this issue relies on design of systems, that practicality and efficiency has to be part of the equation. She cited the example of ventilation systems and ICRA. Changes to look for in the near future; move to value care, empowering patients and unleashing innovation. Also, the gathering of patient reporting outcomes and creation of innovative partnerships to ensure that patients are heard. The patient portal will be a game changer. A current challenge is the digital divide, specifically the lack of internet in rural areas. An interesting fact told was that public reporting on quality and statistics is not consistent, often misaligned leads to patient confusion. Patients and consumers believe their neighbors more than what they see reported. What CMS is looking for from us; planning and designing new environments - insuring the highest standards of safety and quality. What to look for as examples of change are; consortium of Haven, JPMorgan, Amazon, Berkshire revamp programs. Lastly, when asked about the current discussion regarding Medicare for all, she could not offer personal or administration position but noted that 50% of US covered by CMS and that rural health is a priority of administration.



Highlights from the 2019 Summer Leadership Summit

continued from page 4

The Tangled Web We Weave: The Internet of Things

Presenters: Brent Gatewood, consultIG & James Sherer, Esq., BakerHostetler

We learned that our industry is in the front line of cyber security. Healthcare in 2018 was the most targeted industry to the tune of 41%. The legal and consulting team discussed best practices in prevention, and the impact of current and near-future advances in technology. Who has the data, who sees it, where it is stored and what happens when breaches occur. This session was an eye opener as “data” is money and 64 billion IOT (Internet of Thing) devices are forecasted by 2025. The salient issues are; how to hold entities responsible and accountable for information management, from risk to assets. Challenges; the myriad of regulations across states and countries. Lastly, put on your radar an upcoming federal privacy act.

Designing and Delivering Person Centered Care: Understanding and Improving People’s Experiences

Presenter: Chris Graham, Picker Institute

Throughout this presentation, presenter Chris Graham illustrated the process of person-centered care through the history of medicine and nursing care based on history, understanding, and improving.

Graham noted that the ideal approach is a holistic approach referring to the Humoral Theory of wellness being a balance of the 4 vital bodily fluids. The historical view continued through the Miasma Theory of air quality up through the writings of the Nightingale Nursing wards. When the focus became Germ Theory is the beginning of medical practice focusing on the disease and not the person.

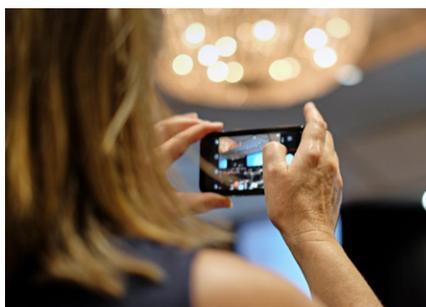
Throughout this process, the practice of medicine was viewed as the “old boy’s culture” where caregivers felt a need to keep secret the internal workings of the delivery of care. With the release of “To Err is Human” in 1999 there was a significant shift in making the delivery of care transparent and focused on the outcomes for the person be treated. In 2001 the term patient-centered care became widely defined and continued with the release of “Through the Patients Eye”.

However, the success or failure of patient-centered care has largely been informed by patient satisfaction and patient experience surveys. The presenter, representing the Picker Institute, referred to more evidence-based studies that are focused on individualized care. Noting that 2/3 of the surveyed population prefer private rooms, while nearly 20% (1 in 5) prefer the social benefit of a multi-bed ward.

Beyond the presentations, the AAH Foundation held a fundraising event Friday evening at the Chicago Architectural Center raising almost \$45,000 in funds to better healthcare design; the Design Awards were bestowed during Saturday’s luncheon presentation; future ACHA Certificants prepped for the examination; and attendees listened to updates to standards established by the Facilities Guidelines Institute (FGI). On Sunday, the ACHA Board of Regents met to discuss goals for growing the College and plans for the College’s 20th Anniversary.

Preparing to Return Again

As we left Chicago and the colleagues and friends we reconnected with, we can begin to look forward to attending next year’s Summer Leadership Summit. Please contribute any ideas or suggestions regarding what you would like to see become part of this tradition by emailing the ACHA Executive Office at acha-info@kellencompany.com to make SLS 2020 even more exciting and enjoyable, and to ensure this tradition continues for many years to come!



President's Message



John W. Rogers

Increasing Our Certificant Numbers

Having just attended this year's Summer Leadership Summit (SLS) in Chicago, I am very excited about the future of the American College of Healthcare Architects. The SLS always pumps me up and reignites my passion for our profession and specialty. This year certainly continued that tradition. For twenty-two years now, the

SLS has provided a unique experience for architects in Healthcare. The event started as an AIA Academy on Architecture for Health event, and it became a co-branded event when the College was started and continues today as a joint event between the College and the Academy. Recently, as the Pillars of Healthcare have formed, the event now features all four Pillars. FGI has a very well attended workshop at SLS focused on a current topic to engender a lively discussion and obtain feedback from SLS attendees that can inform regulatory issues. This year's topic was Critical Care & Micro Hospitals. The AIA AAH Foundation had another wonderful event this year at the Chicago Architecture Center in its new home. The reception raises funds to support research on healthcare issues and is always great fun as well as a networking and educational opportunity.

The ACHA Board of Regents continues exploring ways to grow our certificant base, a long-time goal of the College. We are having discussions with many of the colleges and universities across the country that provide an Architecture + Health curriculum or certificate program to better understand how to engage students in those programs earlier and identify a healthcare architect's career path en-route to certification at a younger age, very much what NCARB is doing with architectural licensure by compressing the time frame to accomplish that milestone. Understanding the changes in the architectural profession as well as licensure requirements will provide a key insight into how the College can enhance the professional path to our healthcare

specialty and provide the proper support to become a candidate and ultimately a certificant of the American College of Healthcare Architects.

We have also studied the demographics of our candidates, certificants, Fellows and Emeritus professionals from both a geographic distribution as well as an age distribution. We are experiencing the "silver tsunami" (aging & retirement of the baby boomers) affect that is significantly impacting many organizations. We find that our geographic distribution of those four classifications is relatively even, but from an age perspective, over 60% of our certificants are 51 years or older and 20% are 61 years and older. We also find that our candidate numbers and Emeritus numbers are almost the same. Our challenge is to grow our candidate pool as we deal with our aging certificants as they continue on their career path.

Other great news is that our social media following has grown over 25% since January this year, and we encourage you to follow the ACHA on our many platforms. We are also looking at expanding the portfolio submission process to provide more latitude for our candidates. Finally, we are committed to improving the annual certification renewal process with a better software interface to simplify applications and renewals. Working together and encouraging healthcare architects we know and work with to pursue ACHA Board Certification will certainly increase our visibility as well as grow our ranks. Join us in New Orleans at HCD19 to kick off our 20th Anniversary Celebration!

All the Best!



John W. Rogers, FAIA, FACHA
President, American College of Healthcare Architects, 2019

ACHA Certificant Spotlight: Emily Bateman, AIA, ACHA, LEED AP BD&C

How did you first get started in healthcare architecture?

I became involved in healthcare architecture during my Thesis year in college - studying Spaulding Rehabilitation Hospital, with Perkins+Will Chicago health experts as reviewers.

My career has come full circle since then; I'm now working at Perkins+Will with some of the very people that mentored and inspired me when I was a student.

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

Healthcare design has a tangible and obvious impact on humanity. I know without a doubt that the work we're doing every day will improve the lives of patients and their families. I'm motivated by work that has a greater meaning, is socially conscious and purposeful, and I've found that in healthcare planning and design.

The constant learning demanded by this ever-changing market sector keeps me intrigued and excited. No project is ever the same.

Which of healthcare's megatrends will have the greatest impact on your practice? Why?

1. An Aging Patient Population

I've observed the impact of an aging patient population on healthcare in countries like Singapore, where the number of citizens aged 65 and above is increasing rapidly, as population growth slows and life expectancy rises. We can expect to see the same trends happening here in the US, as the number of Americans age 65 and older will make up 25% of our population by 2060. This will change the type of work we're doing – I expect to see health and wellness facilities more deeply embedded in communities and urban design, and for health to be more frequently considered in all types of space design.

2. Digital Health

And of course, digital healthcare – but I cannot begin to fathom the potential positive impact that it will have on our practice. We'll all have to wait and see!



Emily Bateman,
AIA, ACHA,
LEED AP BD&C
Perkins+Will

Join Us at the ACHA Annual Luncheon

Join us to celebrate ACHA's 2019 accomplishments and award winners on Sunday, November 3, 2019 at the Healthcare Design Expo & Conference in New Orleans. The luncheon is complimentary and exclusive to ACHA Certificants and candidates. Please be sure to RSVP through the Healthcare Design [registration system](#).

The Annual Luncheon will feature the presentation of the ACHA Lifetime Achievement Award and the announcement of the new ACHA Fellows. We will also take time to celebrate our newly certified colleagues.

Be sure to join your colleagues and help us kick off ACHA's 20th Anniversary – this is a memorable event that you will not want to miss!



ANNIVERSARY



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Exam Prep Seminars

The Seminar provides healthcare architects with useful information to submit their portfolios and prepare for the ACHA exam. The seminar covers application materials, exam topics, sample questions, scoring criteria and exam schedules. Attendees will earn 1 Learning Unit.

Below is a listing of upcoming in-person Exam Prep Seminars:

Wednesday, September 18, 2019

Click [here](#) to RSVP to the Exam Prep Seminar at HFS in Boston, Massachusetts.

Sunday, November 3, 2019

Click [here](#) to RSVP to the Exam Prep Seminar at HCD in New Orleans, Louisiana.

Sunday, March 17, 2020

Click [here](#) to RSVP to the Exam Prep Seminar at 2020 PDC in San Antonio, Texas.

Exam Prep On Demand

For your convenience, the Exam Prep Seminar is now available digitally on [YouTube](#). If you know of colleagues who are interested in pursuing ACHA certification, they can attend one of our live seminars or they can access the webinar format at their own convenience.



ACHA is proud to be among those ASHE recommends for certification in the industry!



ASHE RECOMMENDS A CERTIFIED TEAM



FACILITY MANAGERS



ARCHITECTS



CONTRACTORS



LABORERS

Health care facilities are complex and require specialized knowledge to design, build and operate. ASHE recommends the entire team be certified in the health care field.

ashe.org/certifications



Important Dates:

57th ASHE Annual Conference and Technical Exhibition

August 2-5, 2020
Chicago, Illinois

The 2020 ASHE Annual Conference Call for abstracts will open on September 1, 2019 and close on September 30, 2019.

Calendar of Events

NOVEMBER 2-5, 2019

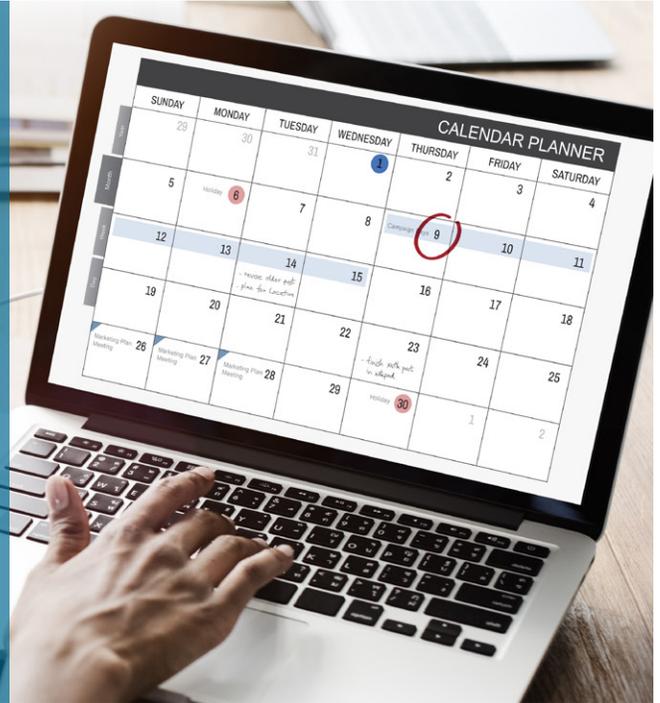
Healthcare Design Expo+Conference
New Orleans, LA

MARCH 22-25, 2020

PDC Summit
San Antonio, TX

JULY 24-27, 2020

Summer Leadership Summit
Chicago, IL



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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