2023

American College of Healthcare Architects

FELLOWSHIP NOMINATION

Steven M. Langston
AIA, ACHA, EDAC, LEED AP

Steven M. Langston

AIA, ACHA, EDAC, LEED AP

CATEGORY NOMINATION 1A

Advanced the art and craft of healthcare planning and design through:

Superior evidence of planning and design achievements.

2 EDUCATION + PRACTICE HISTORY

STEVEN M. LANGSTON, AIA, NCARB, ACHA, EDAC, LEED AP, GGP

1458 Campbell Street, Orlando, FL 32806 | 407.923.8549 | sml@rlfae.com

Having a passion for creating great places that enrich and elevate our existence, I have concentrated on designing meaningful building types over my 30 year career. Completing over 200 healthcare, educational, and cultural projects over the last 20 years, ranging from small clinical spaces to large medical campuses, I believe that a well-designed environment has the ability to aid in the healing process and nurture the human spirit.

EDUCATION

Auburn University
Bachelors of Architecture, 1986

LICENSURE

NCARB #52127
Florida Registration #AR13375

CERTIFICATIONS

USGBC LEED AP #48907
AIA # 30070734
ACHA #459
EDAC #CHD-05-u1929

EXPERIENCE

RLF (1995 - present)
Vice President of Design/Partner

Responsible for the design quality and direction of a medium size architecture-engineering-interior design firm specializing in healthcare, education + cultural projects. Projects range from 25,000 gsf fine arts museums to 1.5 million gsf hospitals.

HHCP (1994 - 95)
Design Architect

Responsible for the creation and development of design concepts for an architectural firm specializing in entertainment + hospitality projects. Projects ranged from 200,000 gsf indoor water parks/hotels to 300 acre resorts.

ADG (1992 - 94)
Studio Director

Responsible for the marketing, design and implementation of public, cultural + industrial projects for a small award-winning architecture firm. Projects ranged from 25,000 gsf public safety facilities to 150,000 gsf science centers/museums/research facilities.

Gee & Jenson (1988 - 92)
Architect

Responsible for the design, implementation and management of small public + cultural projects for a large engineering-architecture firm. Projects ranged from 1,000 gsf recreational pavilions to 50,000 gsf libraries/city halls/fire stations.

Scott, Gresham & Smith (1987 - 88)
Intern Architect

Responsible for the implementation and detailing of healthcare projects for a large architecture-engineering firm. Projects ranged from 50,000 gsf medical office buildings to 500,000 gsf specialty hospitals. Special emphasis on interior healthcare projects.

Cuhaci & Peterson (1986 - 87)
Intern Architect

Responsible for the design, implementation and detailing of commercial + housing projects for a small architecture firm. Projects ranged from 10,000 gsf office buildings to 200,000 gsf retail centers.

2 SPONSOR LETTER

30 May 2023
Fellows Jury
American College of Healthcare Architects
111 West Jackson Boulevard, Suite 1412
Chicago, IL 60604

Re: Fellowship Nomination for Steven M. Langston, AIA, ACHA, EDAC, LEED AP

Dear Distinguished Members of the Fellows Jury

It is my great honor and pleasure to sponsor Steven M. Langston for Fellow in Category 1.A, Having Advanced the Art and Craft of healthcare planning and design through superior evidence of planning and design achievements.

Steve and I are long term colleagues. Over the last three decades I have personally witnessed the course of his career as he has established himself as a talented expert in healthcare planning and design, wherein he has focused his efforts on elevating the quality of architecture in Military and Veterans healthcare.

At the time of Steve's first introduction to this area of healthcare architecture the typical projects were no frills, process centered, featureless facilities. With his driving passion for excellence Steve believed our service men, women and veterans deserved more patient centered care delivered with compassion in a comforting, uplifting, healing environment.

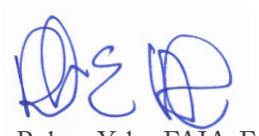
He knew the way to create this lasting change was to build long-term relationships of trust where he could incrementally introduce new ideas. He did this by focusing on exceeding expectations with each succeeding project and, overtime, raising the standard for others to follow. He introduced concepts of patient focused care, bringing best practices from the private sector to the government sector and conversely taking best practices from the government sector and applying them to the private sector.

Not satisfied with just doing the work, Steve has shared his successes in elevating design quality with the profession through his research, presentations and leadership in focused committees and task forces.

Steve has contributed extensively to the advancement of healthcare architecture and continues to make a lasting impression upon the planning and design of Military and Veteran's healthcare facilities.

Therefore, I most strongly urge your favorable consideration of Steven M. Langston for elevation to Fellow in the American College of Healthcare Architects.

Sincerely,



Robert Yohe, FAIA, FACHA, LEED AP BD+C

rlf
Places That Perform.
architecture + engineering + interiors
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3 SUMMARY OF ACHIEVEMENTS

Steven M. Langston's leadership has elevated the aesthetic quality of military and veteran's healthcare architecture. Innovatively integrating complex functional requirements to create groundbreaking healing places that inspire and nurture the human spirit.

Through a series of continual design contracts in place since 1995 Steve has **led the design effort to transform the character of military and veteran architecture** from typically featureless buildings devoid of human spirit to the World Class Facilities they are today. From the 11,000 sf Presidio Dental Clinic in Monterey, California to the 1.2 million sf VA Medical Center in Orlando, Florida, Steve has designed more than 40 military and veteran healthcare projects. Each project embraces Steve's philosophy of evidence-based design and patient centered care. He has built a steadfast reputation as a **dynamic leader who creates and delivers innovative designs** that have raised the standard of healthcare planning, design and aesthetics for the service men and women who have served our country so faithfully.

Elevated the design quality of military and veteran's healthcare architecture, aesthetically, functionally and sustainably.

- **Established** design principles focused on creating therapeutic healing spaces that incorporate and exceed both military and private healthcare criteria resulting in award-winning designs.
- **Developed** innovative planning models resulting in higher performing environments that meet the triple aim of improved outcomes, safety and costs.
- **Created** internationally recognized healthcare environments that have consistently set new standards and benchmarks resulting in higher quality healing spaces.
- **Designed** for the Department of Defense the first net-zero/carbon-neutral hospital in the country resulting in a Platinum LEED rating and establishing a new bar for sustainability.
- **Championed** the use of evidence-based design principles into the military and veteran's planning models and led multiple research projects aimed at improving the delivery of healthcare for both the patient and caregiver.
- **Developed Unique Design Tools** aimed at elevating design quality for use with military and non-military healthcare projects.
- **Pioneered** the use of the Facilities Analysis Concept Design (FACD) charrette process for the military resulting in improved design quality while reducing project schedule and costs.
- **Developed** the use of computerized simulation modeling merged with lean design principles resulting in optimized workflows.

Shared these outcomes, aimed at elevating design quality, with the profession through his research, knowledge sharing, and leadership in professional organizations.

- **Conducted** research projects on innovative planning models, unique design tools and operational models resulting in better solutions for the military, veterans and the broader healthcare industry.
- **Published and presented** these studies at national healthcare design conferences, webinars and panels sharing this knowledge to inspire the profession.
- **Served** on local and national boards and committees of the ACHA, AIA and the AIA AAH coordinating educational forums and the sharing of knowledge between professionals to strengthen this particular field of architecture.

Steve's sustained record of design achievement over time has systematically enriched, strengthened, and elevated the aesthetic quality of military and veteran's healthcare architecture, thus advancing the art and craft of healthcare design.

5.1 ACCOMPLISHMENTS
WORK




Steve's experiences over his 40-year career are varied and far-reaching. His last 25 years have been **focused on healthcare architecture and in particular the elevating of military and veteran's healthcare design**. The binding idea between all of these is what Steve terms "meaningful building types:" institutions that define our culture and serve our communities.

He has dedicated his career to creating an architecture of clarity and order, communicating its purpose and use in a simple manner; an architecture of serenity and beauty that inspires and nurtures the whole person in body, mind and spirit; an architecture of meaning that honors its users, providers and community; an architecture of performance that optimizes resources in a conscientious manner; an architecture of healing to those who have served us in the military and sacrificed to protect us.

The challenge of doing this within an industry that is highly regulated, technologically demanding, and exceedingly complex, coupled with a client (Department of Defense and Veteran's Administration) that is inherently change-resistant, is difficult. It only occurs through perseverance over time and a relentless dedication to improvement. **Steve has created a body of high-performing, holistically beautiful, elegant environments that demonstrate new possibilities and over time has "raised-the-bar" for this client and building type** that has set a path for others. Winning trust by first achieving the client's needs and requirements and exceeding expectation, has allowed him to subsequently explore new forms and operational models that optimize workflows and operations while lifting the spirits of those who need healing and the ones serving them.

ELEVATING THE DESIGN QUALITY OF MILITARY AND VETERAN'S ARCHITECTURE, AESTHETICALLY, FUNCTIONALLY AND SUSTAINABLY.

To improve the aesthetic quality of architecture and interior spaces, Steve established core design principles that have been universally applied to create healthy and inspiring spaces for our service men and women. This client has often focused on functionality and costs with little thought to the performance and quality of spaces. By meeting these needs first, has **allowed Steve to challenge and lead this client to better solutions**. Going beyond the basic design ideas of expressed purpose + place, clear + simple use and sustainable materials applied in an honest way, each healthcare project incorporates:

- Co-located waiting areas **that create large therapeutic public spaces** (that would otherwise be scattered and isolated) that open and clarify space, improve wayfinding and flexibility while reducing stress.
- Integrated light courts, skylights, and clerestories into deep functional work areas to provide natural daylight and exterior views for both patients and staff.
- Co-located traditionally separated offices and workspaces **creating a collaborative environment** that improves communication and social support for staff.
- Optimized circulation patterns that reduce walking distances for both patients and staff. More definitively separated "On-Stage and Off-Stage" circulation patterns to improve operational flows while improving both safety and function.
- Sustainable principles that **maximize resources and minimize waste** creating healthier environments.

5.1 ACCOMPLISHMENTS WORK

To improve the function and use of these complex healing environments, **Steve has led the effort in developing new planning models** resulting in higher performance environments that meet the triple aim of improved outcomes, safety and costs. These include:

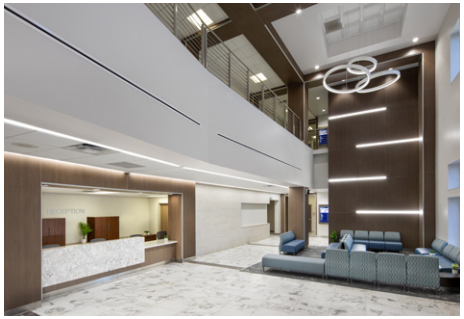
- **Developed the first VA collaborative clinic model** (Orlando VA Medical Center) that places caregivers including behavioral health, social workers, pharmacists and dietitians in an open workspace together with the goal of improving communication.
- **Improved, refined and applied the first Air Force Clinic-of-the-Future** (Spangdahlem Hospital and Clinic) by incorporating light courts between the clinic modules reducing the building mass, increasing natural light and views, clarifying circulation paths and incorporating sustainable principles while improving building efficiency, area and costs. **This model went on to become the patient centered medical home.**
- **Developed unique inpatient unit designs** (M.D. Anderson Cancer Center Orlando, Keesler AFB Hospital Addition, Orland Health Heart Hospital Expansion and Master Plan) utilizing a modified racetrack circulation pattern within a triangular form that reduced walking distances and improved workflows and patient contact time without sacrificing wayfinding.
- The Community Hospital addition at Keesler AFB is to this day the **most comprehensive incorporation** of **Evidence Based Design principles**, within an inpatient setting, in the DoD system. It **routinely ranks at the highest levels of inpatient satisfaction.**

These innovations have been internationally recognized and honored by professional and industry organizations through design award programs showcasing these healthcare environments as "best examples" and new benchmarks for other design leaders to follow.

RECOGNIZED DESIGN LEADERSHIP WITHIN THE HEALTHCARE INDUSTRY.

As a leading healthcare designer of military and veteran's healthcare facilities, Steve is recognized for several outstanding achievements.

- **Successfully implemented the first "World Class Healthcare" program** (Ft. Irwin Community Hospital and Ft. Riley Community Hospital) for the Department of Defense Health Agency which has become a standard for all military healthcare projects world-wide as set by the Department of Health Agency (DHA). The world-class healthcare program infuses evidence-based design principles and sustainable principles into a single design guideline for healthcare projects that addresses both the designed building environment and operations. The end result is improved operations, improved medical outcomes, reduced costs, and flexibility.
- **Designed the first net-zero/carbon-neutral hospital in the country** (Ft. Irwin Community Hospital) resulting in a platinum LEED rating and established a new model for sustainability for the military. This project located in the Mojave Desert incorporates an on-site 6.5-acre solar farm producing 2.5 gigawatts that exceeds the hospital's energy needs. Instead of utilizing a battery system (which can be a hazardous pollutant once disposed) to store excess energy for night use, the system feeds back into the surrounding utility system providing power for the surrounding community.



"Steve's leadership during design provided much needed clarity and imagination to the project delivery team. Army Medicine professionals appreciate Steve's candor and thoughtfulness when bringing new concepts to the project while still listening to the ideas and concerns of the hospital staff."

COL Christopher W. Kiss, PhD, AIA
Deputy Chief / Chief Architect, Facilities Enterprise, Defense Health Agency

5.1 ACCOMPLISHMENTS WORK

DEVELOPED UNIQUE DESIGN TOOLS + PROCESSES FOR USE WITH MILITARY, VETERANS AND NON-MILITARY PRACTICES.

Steve led the design team which **pioneered the use of the first Facilities Analysis Concept Design** (FACD) **charrette process** (Capodichino/Naples and Sigonella Quality of Life projects) for the military resulting in improved design while reducing project schedule and costs. This on-site charrette process utilizes a unique value analysis system incorporated at key points during the design schedule to improve quality and reduce costs by eliminating waste. This process takes between 7 to 10 days merging the client and users, design professionals (architects, interiors designers, engineers), builders, construction schedulers, cost estimators and a variety of specialists together to work collaboratively toward this goal. Steve's design team received an international world-wide value engineering award given by the military for outstanding savings to the government. Steve's company was the only design firm to be honored with this award. He has since utilized this process for a variety of private healthcare and non-healthcare clients resulting in further substantial savings and reduced schedules.

Steve has **developed and refined the use of computerized simulation modeling developed for military projects and applied these to private healthcare projects.** Along with industrial process designers, computer modelers and clinical operational specialists, Steve has utilized this predictive operational tool (Health Central ED + Patient Tower Expansion, Florida Hospital East Master Plan, Winter Park Memorial Hospital Master Plan + Patient Tower Expansion and M.D. Anderson Cancer Center Orlando Post Occupancy Study) to help optimize workflows resulting in improved function and costs. Merging this tool with lean design principles has resulted in significant savings and improved operations. **Steve has led the effort to educate others on this effective tool and process** by presenting at multiple national healthcare conferences receiving high audience scores for this industry innovation.

Working on both government and private healthcare projects, **Steve has been able to incorporate the best practices of both realms**, improving the quality and performance of each.

PRIVATE HEALTHCARE TO MILITARY HEALTHCARE INNOVATIONS

- Incorporated hospitality inspired elements into the military environment elevating the patient experience for our active military and veterans resulting in reduced stress and increased engagement.
- Integrated evidence-based data and research into unique planning and programming models resulting in improved workflow and medical outcomes.
- Incorporated sustainable principles and features into 100% of all projects resulting in energy improvements of 30% over the ASHRAE 90.1 benchmark and achieved USGBC ratings extending from LEED Silver to Platinum.




5.1 ACCOMPLISHMENTS WORK

MILITARY HEALTHCARE TO PRIVATE HEALTHCARE INNOVATIONS

- Utilized the unique charrette based FACD process (a value-added focused charrette "on steroids" composed of the entire design and construction team) to go deeper into the early design process to holistically elevate design, reduce project schedules and project costs while improving coordination of building systems, construction and outcomes.
- Utilized computerized simulation modeling to more accurately predict future performance and refine workflows and design at a reduced cost.
- Incorporated "flex-clinic" planning models (a clinic that utilizes a universal planning module allowing rapid changes/alterations to its function) to increase both adaptability and flexibility and reducing time in changing function for different specialty care.

CONTRIBUTED TO THE PROFESSION THROUGH RESEARCH, KNOWLEDGE SHARING, AND LEADERSHIP IN PROFESSIONAL ORGANIZATIONS.

Steve has conducted extensive research on the healthcare industry to better understand how the designed environment affects the performance and user experience of a building. He has specifically **conducted and presented salient research** on:

- innovative planning models (the geometry of efficiency).
- unique design tools (computerized simulation modeling).
- regulatory design guide requirements on operational models (Univ. of Massachusetts Restorative Spaces).

Steve has served in multiple leadership positions within the Academy of Architects for Healthcare locally and nationally and within the AIA at the local level at the Orlando Chapter and nationally. He has been a **tireless advocate for the profession** and has volunteered by serving on student design juries, serving as a judge for design award programs, participating as a panelist and speaker for design issues conducted student design charrettes, organized local and state-wide lectures by other national leaders and has encouraged others to share their knowledge by mentoring younger professionals. His **efforts on the recently completed ACHA VA Task Force were invaluable** in arriving at their recommendations to improve Veteran access to healthcare.

"We can always recognize a design from RLF: they have clear wayfinding, large open lobbies, plenty of natural light, and are aesthetically pleasing… somehow always in budget and on schedule!"

Joanne Krause, RA
Director (retired)
Medical Facilities Design Office, Naval Facilities Engineering Commandy

5.2 ACCOMPLISHMENTS AWARDS

AIA

2018 AIA Florida Honor Award for Sustainability: Weed Army Community Hospital

2018 AIA Orlando Merit Award for Design: Weed Army Community Hospital

2018 AIA Orlando Merit Award for Design: VA Medical Center Orlando

2016 AIA Orlando Award of Merit for Built Project: Brown Art Museum, Daytona Beach, FL

2013 AIA Orlando Merit Award for Unbuilt Project: Net Zero Student Competition, California

2011 AIA Orlando Special Appreciation for Outstanding Service and Contribution: AAH Director

2010 AIA Orlando Award of Merit for Unbuilt Project: VA Medical Center Orlando, Orlando, FL

2010 AIA Florida Firm of the Year: RLF

2010 AIA Orlando Firm of the Year: RLF

2003 Modern Healthcare/AIA National Merit Award: MD Anderson Orlando Cancer Center Orlando Addition, Orlando, FL

2001 AIA Orlando Merit Award for Unbuilt Project: Mayport Medical Clinic, Jacksonville, FL

2000 AIA Florida Award of Merit for Built Project: Stetson College Hollis Wellness Center - Deland, FL

1999 AIA Orlando President's Award: Most Outstanding Member

1998 AIA Orlando People's Choice Award: Stetson University Hollis Wellness Center - Deland, FL

1996 Design Arts Awards (Florida): Florida Solar Energy Center – Cocoa, FL

1996 AIA Orlando Award of Honor for Built Project: Orange County Landfill Operations and Maintenance Facility – Orlando, FL

1996 AIA Florida Award of Excellence for Built Project: Florida Solar Energy Center - Cocoa, FL

1995 AIA Orlando Special Appreciation for Outstanding Service and Contribution: Director of Recognition Committee

1994 AIA Orlando Citation Award for Unbuilt Project: Daytona USA International Speedway - Daytona Beach, FL (while at HHCP)

1994 AIA Florida Award of Merit for Unbuilt Project: Orange County Landfill Maintenance and Operations Facility - Orlando, FL (while at ADG)

1994 AIA Orlando Merit Award for unbuilt Project: Orange County Landfill Maintenance and Operations Facility (while at ADG)

1994 AIA Orlando Merit Award for unbuilt Project: Florida Solar Energy Center – Orlando, FL (While at ADG)

1989 AIA Orlando Special Appreciation for Outstanding Service: Associate Director of YAF

MILITARY AWARDS

These awards are submitted by the design agencies and centers of design excellence that are responsible for the design quality of projects within their districts. To qualify to be submitted, they must meet minimum user satisfaction scores and to win must exhibit excellence in regards to the building design and operations.

2012 DoD Chief of Engineers Awards of Excellence, Honor Award for Conceptual Design: Weed Army Hospital - Ft. Irwin, CA

2010 USAF Citation Award: Spangdahlem AFB Medical Complex - Germany

2007 USAF Air Mobility Command Design Award: MacDill AFB Medical and Dental Clinic – Tampa, FL

2005 NAVFAC Design Awards Program, Merit Award for Built Project: NAS Sigonella Re-Capitalization Project - Sicily, Italy

2005 USAF Mobility Command Merit Award: Edwards AFB Medical-Dental Clinic – CA

2005 USAF Mobility Command Honor Award for Built Project: Eglin AFB Medical Clinic Addition – FL

2005 NAVFAC Design Awards Program Merit Award: NAS Chapel/Religious Building - Sicily, Italy

2005 NAVFAC Design Award Program, Merit Award: Mayport Medical Clinic - Jacksonville, FL

2004 Office of the Secretary of Defense, International Certificate of Appreciation for Outstanding Achievement through Value Engineering: Sigonella Re-Capitalization Program Team RLF – Sicily, Italy

5.2 ACCOMPLISHMENTS AWARDS

2003 Dept. of Defense Certificate of Appreciation for Outstanding Achievement through Value Engineering: Sigonella Re-Capitalization Program Team RLF – Sicily, Italy

2002 USAF European Division Honor Award for Conceptual Design: Spangdahlem Hospital - Germany

2002 USAF Regional Achievement of Design Excellence, Merit Award for Unbuilt Project: Edwards AFB Medical-Dental Clinic - CA

2002 USAF National Achievement of Design Excellence, Merit Award for Unbuilt Project: Edwards AFB Medical-Dental Clinic – CA

1998 Dept. of Defense International Award for Outstanding Achievement through Value Engineering: Public Works Facility – Naples, Italy

1998 Dept. of Defense, Value Engineering Award for Outstanding Achievement: Public Works Facility Naples, Italy

1998 AFMC Design Awards Design of Excellence Award: Robins AFB Medical-Dental Clinic – Warner Robins, GA

INDUSTRY AWARDS

2014 ABC EIC Awards, Eagle Award: VAMC Orlando Memorial, FL

2012 PCI Design Awards Best Custom Solution: VA Medical Center Chapel – Orlando, FL

2012 Soliant Health Top 20 Most Beautiful Hospitals in America (13) – MD Anderson Cancer Center Orlando, Orlando, FL

2009 American School & University Outstanding Award for Design: Harriett Coleman Center for the Arts - Orlando, FL

2009 SE Construction Best of Awards: All Souls Catholic Church - Sanford, FL

2009 SE Construction Best of Awards: RLF Office Renovation - Winter Park, FL

2005 IDEA Florida: MD Anderson Orlando Cancer Center - Orlando, FL

2003 HealthCare Design Award of Merit: MD Anderson Cancer Center Orlando Addition - Orlando, FL

2003 IIDA Florida Design Award: MD Anderson Cancer Center Orlando Addition - Orlando, FL

2003 ABC Excellence in Construction Eagle Award: MD Anderson Cancer Center Orlando Addition - Orlando, FL

2002 Downtown Partnership Golden Brick Award: Lake Highland Prep School Math and Science Building - Orlando, FL

2002 School Planning & Management/ CEFPI Impact on Learning Award: Lake Highland Prep School Addition - Orlando, FL

1998 ABC Excellence in Construction Eagle Award: Stetson University Hollis Wellness Center Deland, FL

1996 Metal Construction Association Award of Merit: Orange County Landfill Operations and Maintenance Facility – Orlando, FL

PRESENTATIONS

2023 May ACHA Town Hall, co-speaker: "VA Task Force on Improving Access & Equity for our Veterans" - virtual

HFI Symposium, Co-Speaker: "Changing the Wheels on a Moving Car: Designing an Operational Level One Trauma Center Expansion" – San Antonio, TX

2023 Trinity Health and Educational International Research Conference, co-speaker: "SPACES – An Innovative Framework to Assess the Palliative Home Environment for Patients with Chronic Obstructive Pulmonary Disease." – Dubin, Ireland

2023 Co-Teacher/Facilitator, NYU Nursing School of Nursing: "Designing and Creating a Respite Space for Nurses" – New York, NY - virtual charrette

2022 AIA Orlando, speaker: "Mickey's Top 10 Design Commands to Create World-Class Guest Experiences" Orlando, FL - virtual

"[Steve's] design [of the] 'Replacement Clinic' for MacDill Air Force Base exemplifies our continuing focus on quality facilities and work environments for our people."

Leonard A. Patrick, Colonel, USAF
Dir of Installations & Mission Support

5.3 ACCOMPLISHMENTS
PUBLICATIONS

2022 HCD Presentation/Roundtable, co-speaker/facilitator: "Design in the Time of Cholera: reinfusing humanity back into a post-pandemic healing environment" - San Antonio, TX

2022 Clemson Conference International Nursing for Excellence in Healthcare Design: "(re)infusing Humanity in a Post-Pandemic Healing Environment" – Greenville, SC

2021 HCD, speaker: "Mickey's Top 10 Design Commands to Create World-Class Guest Experiences" – Cleveland, OH

2021 Clemson Conference International Nursing for Excellence in Healthcare Design, co-speaker: "Utilizing Visualization Technology to Improve User Communication in the Design Process" - virtual

2021 Clemson Conference International Nursing for Excellence in Healthcare Design: "A Study of Multiple ICUs and Caring Behavior: Does Layout and Bed Size Matter?" - virtual

2020 HCD Conference, speaker: "Mickey's Design Commands on Creating World-Class Transformative Environments" - virtual

2019 AIA Orlando, co-speaker: "Military Architecture and Other Works of RLF"- Orlando, FL

2017 AIA National Convention – Coordinator/Leader/Presenter - Tour of VA Orlando - Orlando, FL

2017 HCD Conference – Coordinator/ Leader/Presenter - Tour of VA Orlando - Orlando, FL

2017 HCD Conference - Educational Session, co-speaker: "Using Simulation Modeling and Macrocognitive research to Redesign PICUs" - Orlando, FL

2017 Health Facilities Symposium – Educational Session, co-speaker: "A Focused Ethnographic Study of 'Neighborhoods' in a Pediatric Intensive Care Unit: Macrocognition in the Health Care Built Environment" - Orlando, FL

2016 HealthCare Design Conference - Programming + Planning Forum, facilitator: "Military Healthcare: A peek behind the Curtain" - Houston, TX

2016 ACHE Central Florida Chapter, Annual Meeting – Hospital of the Future - Orlando, FL

2016 Health Facilities Symposium Education Seminar, speaker: "Utilizing Simulation to Predict the Future: Improving Performance + Costs" - Chicago, IL

2016 AHCA Conference - Educational Seminar, speaker: "Becoming a Board Certified Healthcare Architect" - Orlando, FL

2016 Smart Hospital Conference – keynote address speaker: "New Tools for a New Healthcare Reality" - Dallas, TX

2015 AIA Orlando - project tour, speaker: "New VA Medical Center Orlando" - Washington, DC

2015 HCD Conference – Planning + Programming Forum, Roundtable facilitator: "Silent Partners in Managing Population Health" - Washington, DC

2015 Health Facilities Symposium – Educational Session, co-speaker: "Less is More…but when is enough DATA really enough?" -Washington, DC

2015 AHCA Conference Educational Seminar, co-speaker – "Becoming a Board Certified Healthcare Architect" - Dallas, TX

2015 FEFPA Winter Conference – Educational Seminar and Research Project, co-speaker: "If Faculty Ruled the World, What would Learning Space Look Like?" - Jacksonville, FL

2015 NYU Nursing School - Research Project and Lecture, co-presenter: "Population Health: Nursing and Healing Spaces" - New York City, NY"

2014 AIA Orlando - Project Tour, Speaker – "New Orlando Health Proton Center" - Orlando, FL

2014 PDC Conference - Project Tour and Speaker: "New VA Medical Center" - Orlando, FL

2014 HCD - Planning and Programming Forum, roundtable leader – "Conducting Research within your Firm" - San Diego, CA

2014 HCD - Educational Seminar, co-speaker – "Becoming a Board Certified Healthcare Architect" - San Diego, CA

2014 Health Facilities Symposium – Educational Seminar, co-speaker – "Utilizing Simulation Modeling to Improve Healthcare Delivery" - Chicago, IL

2014 Vendome HCD - Educational Webinar Session, Co-Speaker: "New Tools for a New Healthcare Reality"- Orlando, FL

2014 No Name Conference (Education) – Research Project and Educational Seminar, co-speaker: "If the faculty ruled the world, what would education space look like?"- Jacksonville, FL

2014 DBIA Florida Conference – Educational Seminar, panelist: "Process vs. Results: Third Party Risks in Design Build" - Orlando, FL

2013 University of Massachusetts, Worchester Nursing School - Lecture and Research Project, co-presenter: "Population Health: Nurses and Healing Spaces" - Worchestor, MA

2013 HCD Conference - Project Tour and speaker: "New VA Medical Center Orlando" - Orlando, FL

5.3 ACCOMPLISHMENTS
PUBLICATIONS

2013 HCD Exchange - Keynote Address, co-speaker: "New Tools for a New Healthcare Reality" - Orlando, FL

2013 HCD Conference - Educational Seminar, co-speaker: "A Decade of Operations, A Moment of Clarity Revisited: Where Perception Meets Reality"- Orlando, FL

2013 HCD Conference – Planning + Programming Forum, Facilitator: "As the Future Catches Us" - Orlando, FL

2013 HCD Conference, Project Tour and speaker: "New VA Medical Center Orlando" - Orlando, FL

2012 HCD Conference - Education Seminar, speaker: "Geometry of Clinical Efficiency"- Phoenix, AZ

2012 HCD Conference - Education Seminar, co-speaker: "A Decade of Operations, A Moment of Clarity" - Phoenix, AZ

2012 HCD Conference - Planning and Programming Forum, Facilitator: "Looking through the New 2014 FGI Guidelines" - Phoenix, AZ

2011 Vendome HCD Webinar Series – Educational Session, co-speaker: "Master Planning in the 3rd Dimension: You don't need the Glasses Anymore." - virtual

2011 HCD Conference - Education Seminar, co-speaker: "Master Planning in the 3rd Dimension"- Nashville, TN

2011 HCD Conference - Planning + Programing Forum, facilitator: "How Simulation Modeling is used in the Design and Planning Process" - Nashville, TN

2010 HCD Conference - Planning + Programming Educational Seminar, facilitator: "Pre-Design Planning" - Las Vegas, NV

2010 USGBC Central Florida Annual Gala – Educational Forum, panelist: "The New USGBC LEED for Healthcare Guide" - Orlando, FL

2009 HCD Conference - Project Tour and co-speaker: "New Florida Hospital Winter Park Medical Center Women's Center" - Orlando, FL

2007 ACHE Central Florida – Educational Seminar, co-speaker: "Healthcare Trends of the Future" - Orlando, FL

2006 PDC Conference - Project Tour and co-speaker: "New Florida Hospital Winter Park Medical Center Women's Center" - Orlando, FL

2006 PDC Conference - Project Tour and co-speaker: "New Orlando Health MD Anderson Cancer Center Orlando" - Orlando, FL

ARTICLES

2023 Contributor, Journal of Palliative Medicine (23(1), 149-152): "Assessing SPACES in Patients with Chronic Obstructive Pulmonary Disease Helps Identify Unmet Needs"

2018 Contributor/Researcher, HERD: Health Environments Research & Design Journal, 11(2), 104-123 – "Macrocognition in the Health Care Built Environment (m-HCBE): Focused Ethnographic Study of Neighborhoods in a Pediatric Intensive Care Unit.

2015 Healthcare Design Magazine: "Good Taste" (featuring FH Altamonte Springs Café by RLF)

2015 Healthcare Design Magazine Sept. Showcase: Martin Community Hospital Replacement at Ft. Benning*

2014 Critical Care Nursing Quarterly (Vol.37): "Planning Intensive Care Unit Design Using Computer Simulation Modeling" (Researched, Assisted, Reviewed using Keesler AFB ICU by RLF)

2014 Healthcare Design Online, 18 Nov: Health Central Breaks Ground on Bed Tower, ED*

2014 Healthcare Design Online, 20 June: Spreading the Word about Simulation Modeling

2013 Healthcare Design Online, 18 Nov: "A Building to Heal and Honor"*

2013 Healthcare Design Magazine Ja/Fb: "Transformations: uptown café at Florida Hospital Altamonte"

2013 Healthcare Design Online, 23 Feb: "Transformations: Uptown Café at Florida Hospital Altamonte"

"Steve's innate ability to clarify abstract concepts and give them perspective has been an invaluable resource to the success of my doctoral thesis and subsequent research."

Susan O'Hara, PhD, MPH, BA, RN, EDAC, FNIHD
Assistant Clinical Professor, College of Nursing
The Ohio State University

**written by others about Steve's work*

5.3 ACCOMPLISHMENTS
PUBLICATIONS

2012 Healthcare Design Online, 06 Sept: "Fort Irwin Replacement Hospital wins National Award"*

2012 Healthcare Design Online, 20 June: "A Solar Powered Oasis"*

2012 Healthcare Design Magazine, Sept Showcase: SimLEARN National Center

2012 Healthcare Design Magazine, Sept Showcase: Annapolis Medical Clinic

2011 Healthcare Design Online: "LEED for Healthcare"

2010 AIA Orlando Newsletter: "Introducing New LEED for Healthcare Rating System to Florida-based Companies"

2010 DoDOEA Report to Congress on the DoDOEA Activity's Design Process and Procedures for Outstanding Schools: featured Sigonella Elementary-High School, Sigonella, Italy and Vicenza Middle School-High School Vicenza, Italy

2010 Healthcare Design Magazine, Sept Showcase: Veterans Affairs Medical Center Orlando

2010 Healthcare Design Online, Sept: "Obstacles and Solutions"*

2009 Healthcare Design Magazine, Sept Showcase: Keesler AFB Hospital Addition

2007 Healthcare Design Magazine, Sept Showcase: Federal Healthcare Facility, North Chicago, IL

2006 Healthcare Design Magazine, Sept Showcase: Enhanced Health Service Center at Vicenza, Italy

2003 Healthcare Design Magazine, Sept Showcase: MD Anderson Cancer Center Orlando

RESEARCH

2022 ACHA VA Task Force Report, Co-Writer/Researcher: Providing Better Access to and Equity for VA Healthcare.

2021 Advisor, Grant Submission to DHHS Agency for Healthcare Research and Quality – "Rapid Deployment to Protect Alternate Care Sites to Temporarily Care for Nurisng Home Residents with Transmissible Respiratory Infections in the Healthcare Built Environment" – status: not funded

2020 Advisor, Grant Submission to DDHS Agency for Healthcare Research and Quality – "Rapid Deployment Housing to Temporarily Foster At-Risk Nursing Home Residents"– status: not funded.

2018- Clemson University College of Behavioral, Social and Health Sciences Grant, co-investigator – "Using Predictive Agent based Simulation to improve ICU metrics related to interactions between teams, technology, and the healthcare built environment space"

2016 HERD Magazine (16-0004), peer reviewer: "Exploring Environmental Variation in Residential Care Facilities for Older people"

2015 HERD Magazine (15025), peer reviewer: "Can Hospital Form Trigger Fear Response?"

2014 Education Research @ UWG, Co-Presenter + Researcher: "If Faculty Ruled the World, What Would Learning Spaces Look Like?"

2014 Nursing Research @ New York University, Co-Presenter + Researcher: "Population Health: Nursing + Healing Spaces"

2013 Nursing Research @ University of Massachusetts/Worchester, Co-Presenter + Researcher: "Population Health: Nursing and Healing Spaces"

2012 Post Occupancy Research Study @ MD Anderson Orlando: "Utilizing Simulations - Can Small Interventions Have a Big Impact?" (presented at HCD13 national conference in Orlando, FL)

2011 Post Occupancy Pilot Study @ MD Anderson Orlando: "Utilizing Simulation – Which is better, Centralized or De-Centralized Nursing Stations?" (presented at HCD 12 national conference in Phoenix, AZ

2011 Research Study on Triangular Patient Units: "What is the most triangular patient unit configuration?" (presented at HCD 12 national conference in Phoenix, AZ)

"Steve brought a deep understanding of the issues facing the VA Healthcare system. His contributions were key in developing the proposed new model of care."

Sheila Cahnman FAIA, FACHA
ACHA / VA Task Force

**written by others about Steve's work*

5.4 ACCOMPLISHMENTS
SERVICE & REGISTRATIONS

SERVICE

2023 AIA AAH C2C Mentorship Program, Co-Leader

2016 - 2019 AIA AAH National Forum Leader/Coordinator for HCD and PDC Conferences

2015 - 2020 GGP member

2012 - 2020 ACHE member (# 817788)

2012 - 2016 AIA AAH, National Representative for Florida Region

2011 – Present EDAC member (CHD-05-u1929)

2010 – 2019 AIA AAH Planning + Programming Forum Leader (HCD Conference)

2010 - 2011 AIA AAH Orlando Chair

2010 – Present ACHA member (# 459)

2006 - Present AIA AAH Orlando member

2003 – Present USGBC member (# 48907)

1999 - 2000 AIA Orlando Programs Chair

1995 AIA Orlando Recognition Committee Chair

1990 – present NCARB member (# 52127)

1987 - 1988 AIA Orlando IDP/YAF chair

1986-Present AIA Orlando member (# 30070734)

SERVICE - OTHER

2016 UF Architecture School - Spring Juror

2015 AIA Palm Beach Chapter - Design Awards Program Judge

2015 UCF Architecture School - Spring Juror

2013 HCD Student Charrette Competition Host Firm Coordinator/ Contact

2013 UCF Architecture School – Spring Juror

2012 Valencia College Architecture Program – Fall Juror

2009 AIA AAH Orlando Student Competition/Charrette Committee/ Juror (Homeless Healthcare Clinic in Orlando, FL)

2008 AIA AAH Orlando Student Competition/Charrette Committee/ Juror (Homeless Healthcare Clinic in Orlando, FL)

2007 AIA AAH Orlando Student Competition/Charrette Committee/ Juror (Healthcare Clinic in Haiti)

2006 University of Florida Architecture School – Spring Juror

2006 Valencia College Architecture Program Juror

2002 ABC Central Florida Awards of Excellence Judge

REGISTRATIONS + CERTIFICATIONS

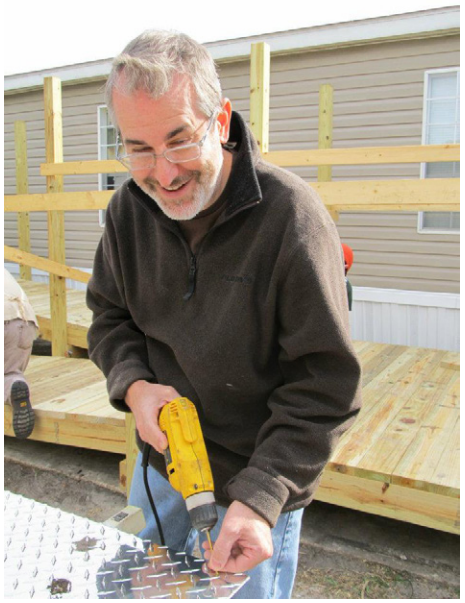
2011 EDAC certified
#CHD-05-u1929

2010 ACHA certified
#459

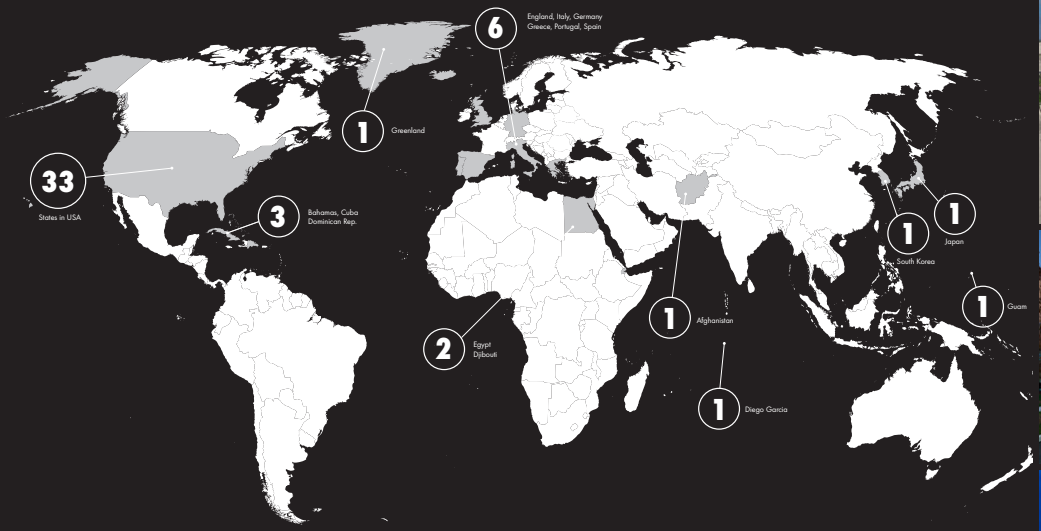
2003 USGBC LEED BD+C accredited
#48907

1990 NCARB certified
#52127

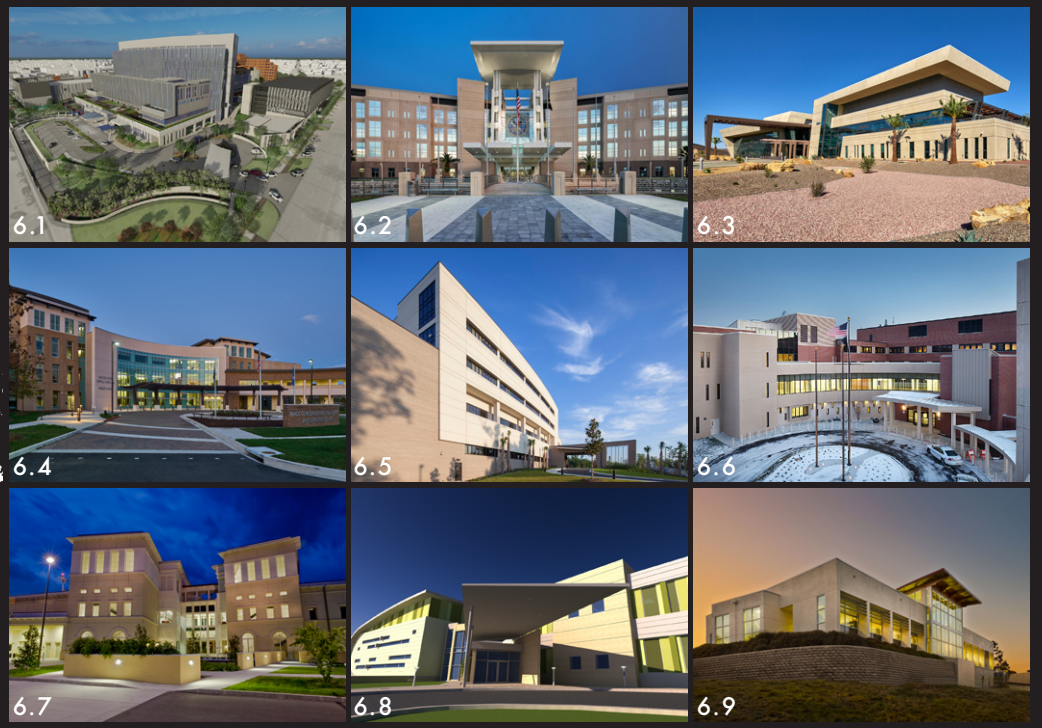
1989 Florida Registered Architect
#AR13375



6 EXHIBITS



Steve's career portfolio contains projects spanning across 33 states, 19 countries, and 4 continents.



6.1 John J. Cochran VA Medical Center; 6.2 Orlando VA Medical Center; 6.3 Weed Community Hospital; 6.4 Malcolm Grow Medical Clinics and Surgery Center; 6.5 Community Hospital Addition; 6.6 Captain James A. Lovell Federal Health Care Center; 6.7 Enhanced Health Service Center; 6.8 52nd Medical Group Clinic; 6.9 Presidio of Monterey Dental Clinic

6.1 EXHIBITS

1

JOHN J. COCHRAN VA MEDICAL CENTER

FIRM OF RECORD: RLF
DESIGN FIRM: RLF
YEAR COMPLETED: 2028 (est.)
SIZE: Phase I 711,000 SF; Phase II 880,000 SF (total)
LOCATION: St. Louis, Missouri
ROLE: Design Lead/Director

I have personal knowledge of the nominee's responsibility for the project listed above. That responsibility included being largely responsible for design.

John Schreiner, PE, PMP

Program Manager - VA STL John Cochran Major

U.S. Army Corps of Engineers – Kansas City District

Steve is the lead designer and design director for this project to Master Plan the full replacement and expansion of the VA's, 75-year-old, main St. Louis facility and to design its initial phase of redevelopment. The existing urban site occupies 11 saw-toothed acres on five separate blocks immediately north of the Arts District. The **main challenge is to design and phase a new replacement hospital twice the size of the existing facility on a tight urban site without disturbing the ongoing operations** of the medical center. Additionally, portions of the site were isolated and unusable due to the saw toothing, making the site too small to accommodate the expansion requirements. Steve's innovative solution was for the VA to acquire the underutilized neighboring parcels, square the property and vacate the intervening streets between four of the adjoining blocks. Thus, creating a VA and city approved 24.5-acre site capable of efficiently incorporating the full program in a logically phased sequence. The first major phase will provide a 498,000 sf replacement hospital, a 85,000 sf central utility plant, three parking garages totaling 1,900 cars, and multiple support buildings totaling 128,000 sf. The second phase totaling over 880,000 sf replaces the outpatient clinics and removes the bulk of the existing facility.

Additional challenges with the first phase of design included the design of a new generation Spinal Cord Injury inpatient unit and the incorporation of a flexible epidemic mode to address future biological threats.

Unique design features and innovations Steve incorporated are:

A complete rehabilitation and restoration of the existing site providing a series of internal gardens within, on and surrounding the new facility. A new secure perimeter will weave existing pedestrian paths with new pocket parks and artwork creating a new gateway into the Central Arts District. This new layout will increase the open green space on the site by over 300%.

A new inpatient and outpatient Spinal Cord Injury Unit (SCI) will provide therapeutic gardens for outpatient use and a garden terrace on the second level for the 30-room inpatient unit. **Prototypical same-handed nested inpatient bedrooms** provide direct access to the terrace and secure views with natural light. Dedicated underground parking will provide a direct path for patients into the SCI entry lounge.

A new surgical center with a flexible interventional platform is located on the fourth level providing a direct horizontal connection to the existing facility. Roof monitors will provide natural light into the recovery areas. Four levels of new inpatient bed wings with adjoining clinical support are provided above the diagnostic and treatment block.

A first of its kind "epidemic mode" engineering system coupled with a system of ante areas will provide safe, separated clean air systems to provide a **resilient and flexible lock down system to incrementally meet future biological threats as they surge and recede.**

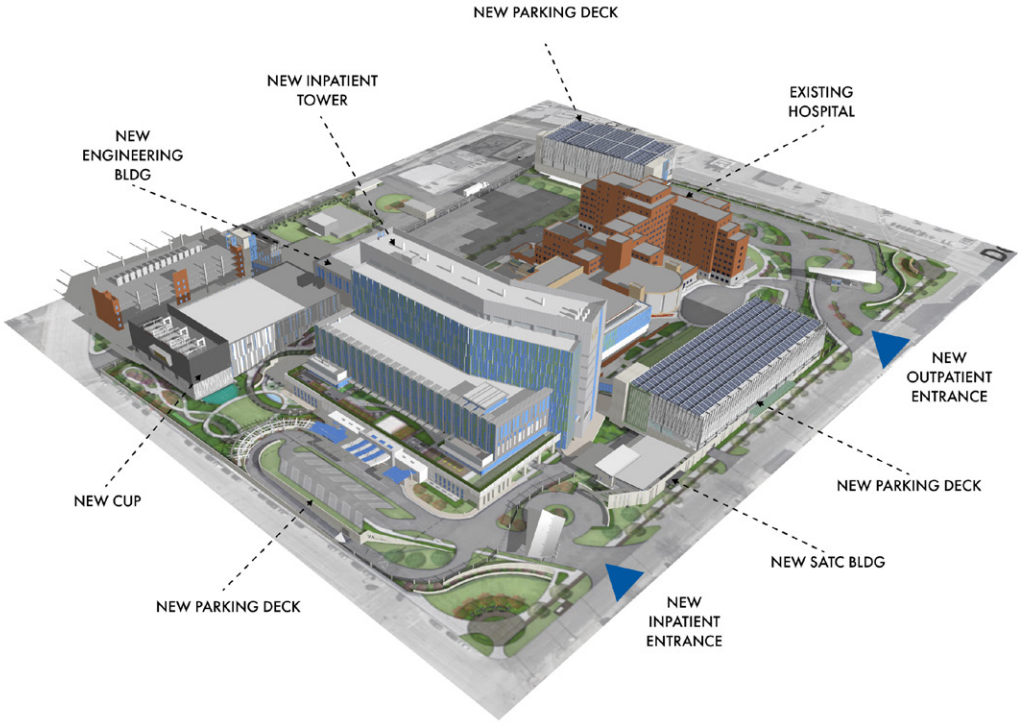
The new facility will be earthquake and tornado resistant providing enhanced resiliency. A solar energy system will be mounted on the roofs of the parking structures. A LEED silver rating is projected.

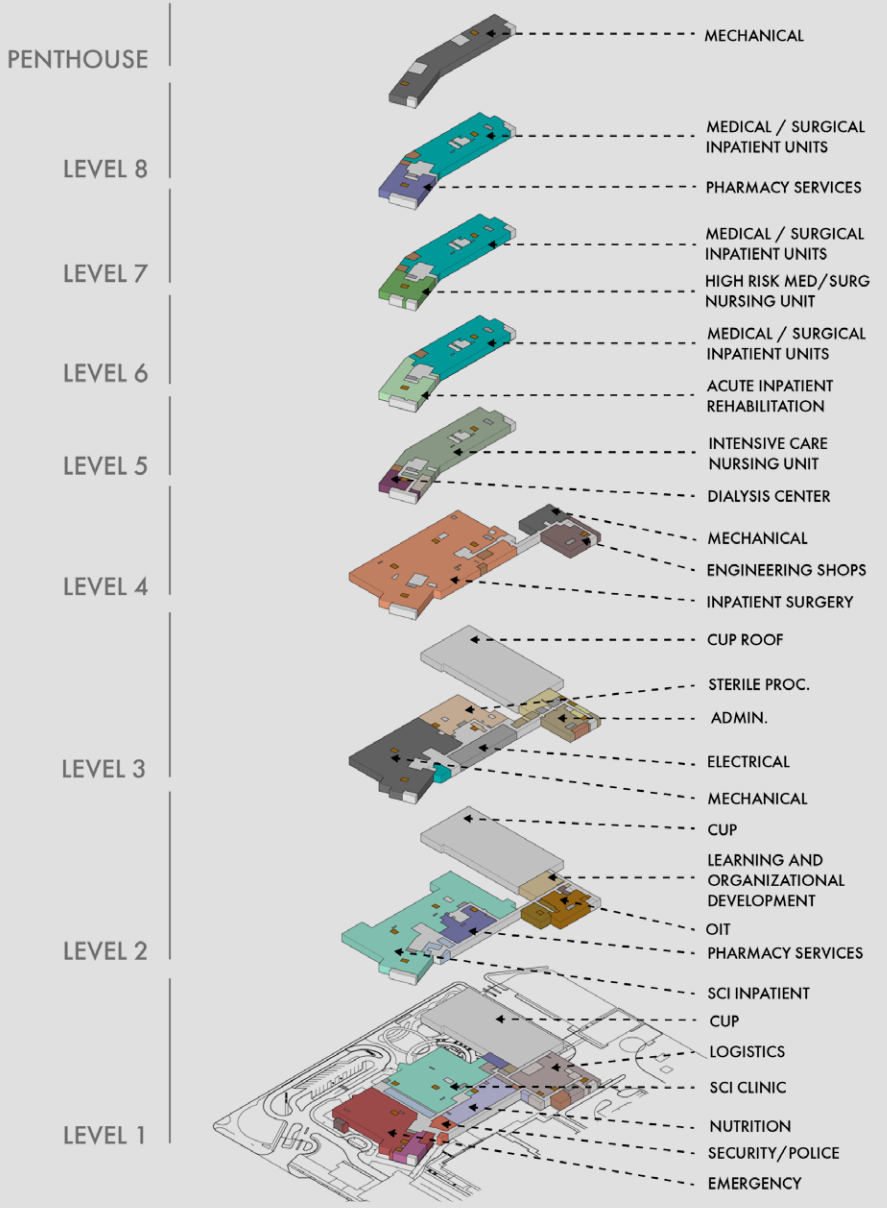
Results: This replacement facility will provide a new paradigm in resiliency from disease and natural disasters and a prototypical new generation inpatient bedroom for our SCI veterans.

6.1 EXHIBITS

JOHN J. COCHRAN VA MEDICAL CENTER

ST. LOUIS, MISSOURI





6.2 EXHIBITS

2

ORLANDO VA MEDICAL CENTER

FIRM OF RECORD: RLF | Ellerbe Becket JV
DESIGN FIRM: RLF
YEAR COMPLETED: 2016
SIZE: 1.16 M SF
LOCATION: Orlando, FL
ROLE: Design lead/Director

I have personal knowledge of the nominee's responsibility for the project listed above. That responsibility included being largely responsible for design.

Joe D. Battle

Joe D. Battle
VA Project Executive
Associate Medical Center Director
Orlando VA Medical Center

Steve acted as lead designer and director of the design effort for this joint-venture project located within the Lake Nona Medical City in Orlando. The new Veterans Administration Medical Center campus is composed of multiple facilities within a 65-acre site accommodating a 134-bed hospital, 120- bed nursing home, 60-bed residential rehabilitation unit, 24 general/ specialty clinics, a shared diagnostic and treatment platform and two 1,300 car parking structures. This new campus provides a full spectrum of inpatient and outpatient services to the Veterans within Central Florida. The overall site has been designed to allow for 50% more expansion including additional parking and research laboratory facilities. **The challenge was integrate a new operational paradigm while designing a complex of this magnitude and have it perform and feel as if it was a much smaller facility.**

Major design innovations include:

The pioneering and development of the new VA collaborative medical home clinic which places all of the doctors, nurses and other caregivers in a central open work environment surrounded by patient exams rooms. This layout separates staff and service from patient routes enhancing the patient experience while improving safety and optimizing workflow. Caregivers enter the back of the exam room from the collaborative work area allowing the doctor full access to all sides of the patient without violating VA protocols. Each clinic module is complete hosting not only doctors and nurses, but social workers, psychiatrists,dietitians and pharmacists along with minor treatment rooms to allow for a holistic approach to patient care greatly improving medical outcomes.

Walking distances from the parking structures were reduced by over 400% by placing two decks (one for patients and one for staff) between and immediately adjacent to the hospital/diagnostic- treatment core and clinic. This flipped the front of the clinic inward and the back outward further reducing the distances from the parking deck to the main lobby to 50' (minimum VA AT/FP setback). With the average age of patients at 59 years old, this eliminated the need for motorized assistance improving their health, dignity and reducing long term costs of transportation. The short travel paths, simplified circulation system and interjection of natural light and views to all public routes and areas truly gives this facility a reassuring and comforting feel.

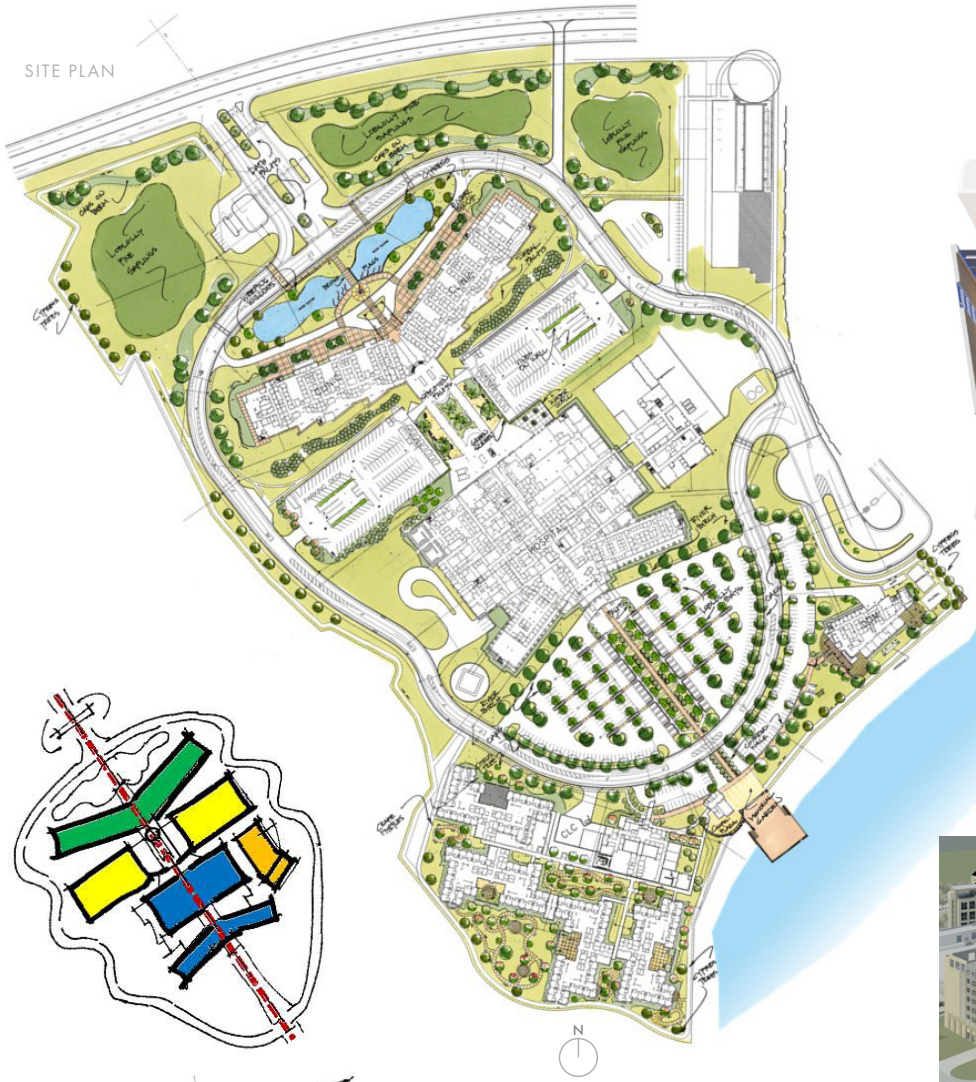
Integrating a robotic delivery system completely separating service paths from patient paths allowing for the hidden delivery/retrieval of supplies, waste and engineering support. This allowed for 24-hour operations, greatly improving the efficiency of staff/services and increasing safety for the patient.

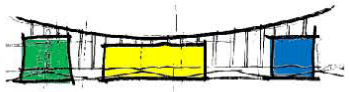
Sustainable features such as solar panels are integrated on the large swooping central roof. The building is also designed to harvest rainwater and condensing equipment water for cooling. Energy savings of 35% over the ASHRAE 90.1 baseline is accomplished and recycled materials are used throughout. This project earned a LEED Silver rating.

The project substantially elevated the standard for the VA and has become the prototypical model for subsequent VA medical facilities.

6.2 EXHIBITS

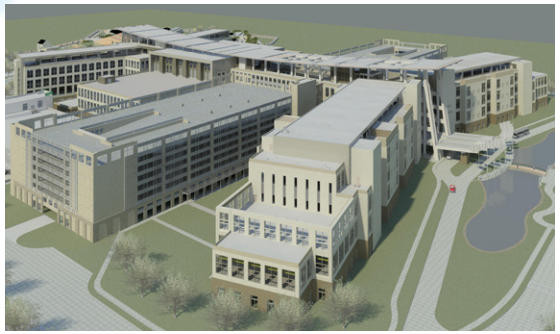
SITE PLAN



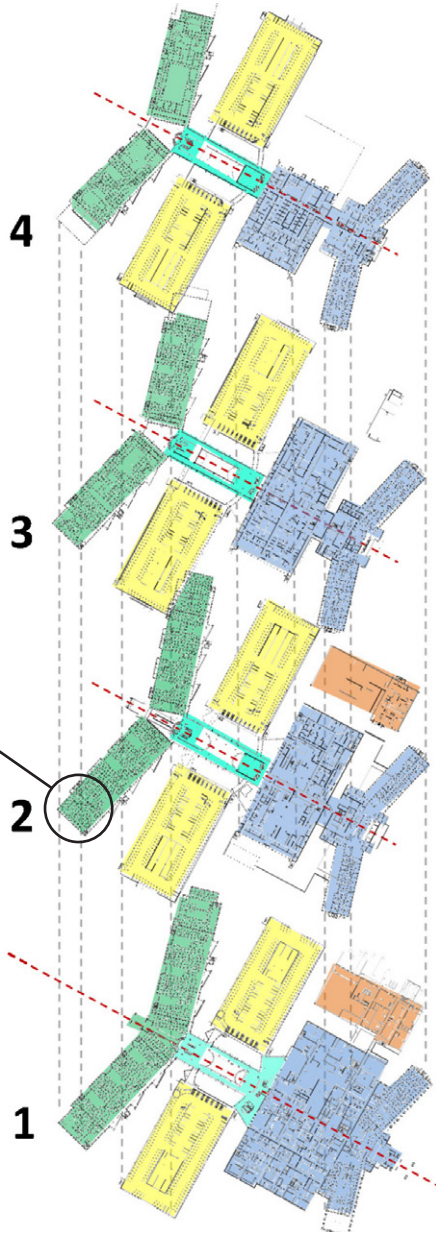


PARTI SKETCH

MEDICAL HOME CLINIC POD



OVERALL MASSING



6.2 EXHIBITS

ORLANDO VA MEDICAL CENTER

ORLANDO, FLORIDA

AWARDS

2018 Built Award of Honor, AIA Orlando

2014 Eagle Award Veterans Memorial, ABC Central Florida

2012 PCI Design Awards Best Custom Solution: VA Medical Center Chapel – Orlando, FL

2012 Eagle Award Excellence in Construction, Healthcare, ABC Central Florida

2010 Award of Merit, Unbuilt Category, AIA Orlando

2010 AIA TAP BIM Awards, Creating Stellar Architecture through BIM, AIA National

PUBLICATIONS

2013 Healthcare Design Online, 18 Nov: “A Building to Heal and Honor”*

2010 Healthcare Design Magazine, Sept showcase: Veterans Affairs Medical Center Orlando

6.3 EXHIBITS

3

WEED COMMUNITY HOSPITAL

FIRM OF RECORD: RLF | Ellerbe Becket JV
DESIGN FIRM: RLF
YEAR COMPLETED: 2017
SIZE: 216,000 SF
LOCATION: Barstow, CA
ROLE: Design lead/Director

I have personal knowledge of the nominee's responsibility for the project listed above. That responsibility included being largely responsible for design.

COL Christopher W. Kiss, PhD, AIA, PMP

Dep. Chief, Facilities Enterprise

Defense Health Agency

Located in a remote area of the southern Mojave Desert at Ft. Irwin, CA., the **challenge here was to provide a life-affirming healing environment in one of the harshest desert environments in the country**. Steve led the design and charrette team for this 216,000 gsf comprehensive medical center located Utilizing a modified FACD process, Steve and his team were able to design, document and permit this facility within 13 months. The project includes a fully functioning hospital with integrated emergency, surgical, birthing services along with full diagnostic/ treatment support and 20 general/specialty clinics. Utilizing the sloping site, the main entrance is located on the middle level with services brought into the lower level separating these two traffic streams.

Major design innovations include:

Pioneered the first use of the military World Class Healthcare System utilizing evidence-based design principles to inform the design leading to better medical outcomes, better patient safety, reduced medical errors, improved work performance and reduced costs. Features include integrated ceiling lifts for a "no-lift" hospital environment, integrated anti-microbial surfaces and heap-filtered air filtration systems to reduce hospital infections, separated service/ staff circulation paths from patient paths improving safety and efficiencies, and **integrated a new medical home model clinic** that provides holistic care to the patient and allows rapid adaptability of clinics to multiple specialty services at minimal cost.

Created the first net-zero, carbon-neutral hospital in the country by generating its entire energy needs through a 2.5 megawatt clean-source solar farm. This power source generates more power than needed feeding the surrounding power structure during the day and then utilizing this same source at night reducing the need for an integrated battery system. This project is projected to achieve a platinum LEED rating.

Utilized the unique FACD charrette process on site with the client and consultants completing schematic design in 8 days with full architecture, interiors and engineering reducing this phase by 3 months.

AWARDS

2018 AIA Florida Honor Award for Sustainability: Weed Army Community Hospital

2018 AIA Orlando Merit Award for Design: Weed Army Community Hospital

2012 DoD Chief of Engineers Awards of Excellence, Honor Award for Conceptual Design: Weed Army Hospital - Ft. Irwin, California

PUBLICATIONS

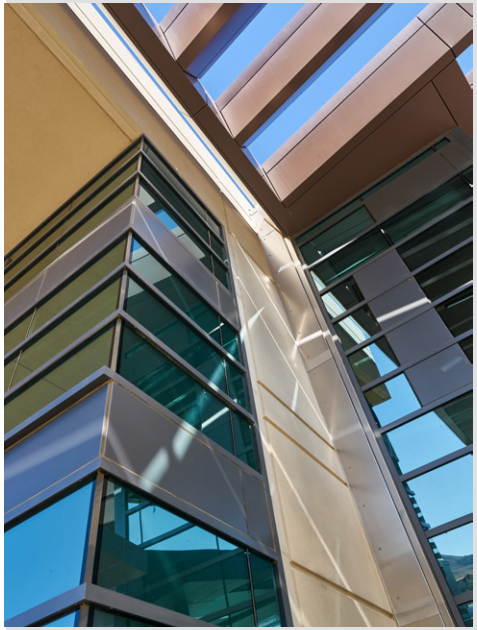
2012 Healthcare Design Online, 06 Sept: "Fort Irwin Replacement Hospital wins National Award"*

2012 Healthcare Design Online, 20 June: "A Solar Powered Oasis"*

6.3 EXHIBITS

WEED COMMUNITY HOSPITAL

FT. IRWIN,
CALIFORNIA



"The Weed Community Hospital represented a major paradigm shift for the Department of Defense and its precedent-setting design and objectives set the bar for future project endeavors."

–COL Christopher Kiss, PhD, AIA, PMP, Deputy Chief / Chief Architect, Facilities Enterprise, Defense Health Agency

U.S. GREEN BUILDING COUNCIL
LEED PLATINUM
USGBC

First NET-ZERO,
carbon-neutral hospital

6.4 EXHIBITS

4

MALCOLM GROW MEDICAL CLINICS AND SURGERY CENTER

FIRM OF RECORD: RLF
DESIGN FIRM: RLF
YEAR COMPLETED: Phase I 2017; Phase II 2018
SIZE: 345,000 SF
LOCATION: Joint Base Andrews, MD
ROLE: Design lead/Director

I have personal knowledge of the nominee's responsibility for the project listed above. That responsibility included being largely responsible for design.

Richard J. Onken, Lt Col (ret), USAF, BSC, AIA, EDAC
(Former) Chief of Design
Air Force Health Facilities Division
Office of the Surgeon General

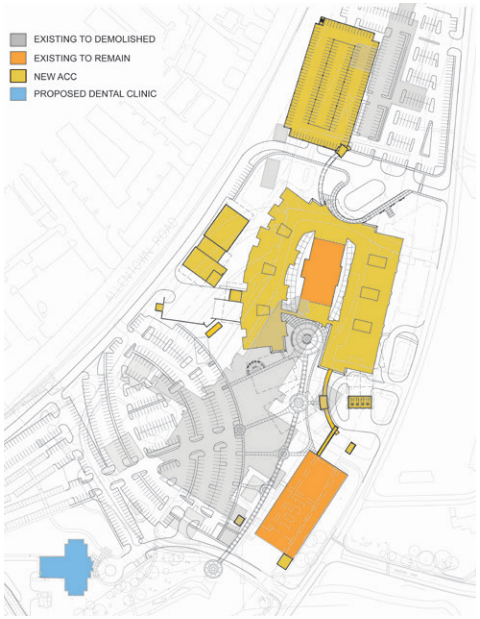
The Malcolm Grow Medical Clinic & Surgery Center was the capstone in integrating the medical services of the National Capital Region initiative. **Challenges were abundant.** The ambulatory care center **replacement occupies the same site as the existing facility. Safely maintaining operations during construction was significantly important and consistently influenced planning and phasing**. Another major consideration was the 40,000 SF existing two story out building centered in the available open land and congressionally mandated to be retained. Although the facility was to retain no inpatient beds, the surgeon general's representatives didn't rule out the possibility inpatient care could return to Andrews in the future and necessitated the incorporation of that flexibility in the design.

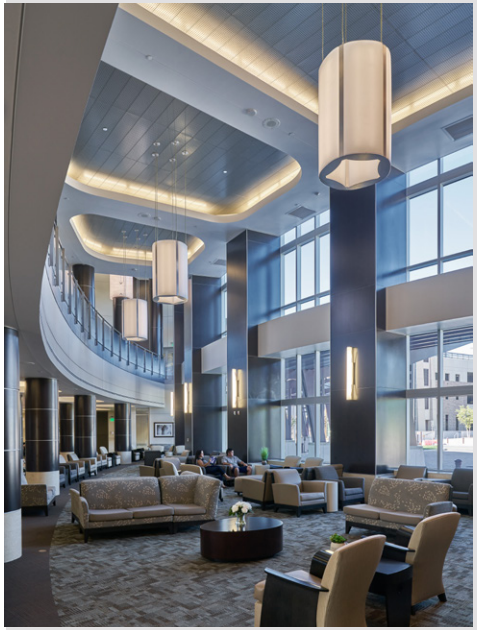
In addition to a robust surgical program, the new ambulatory care center accommodates primary care and a complement of specialty clinics. The new facility is organized into two major three-story wings surrounding a central courtyard and the building to remain. A 500-car patient and visitor parking structure is located to the north with pedestrian connections to the ACC on the ground and second level. Upon entry, a three story, hospitality focused, central lobby provides a connecting element and orientation point for all patient destinations. **Patient centered care principles and EBD considerations guided design.** Departments are organized in care centers with waiting areas opening inward onto the central courtyard to allow natural light penetration into the waiting and public spaces of every patient's destination. The east wing is designed as an ambulatory care occupancy accommodating surgery, PACU, pre-op / post-op, emergency services, related specialty clinics and ancillary services. The west wing is a business occupancy and houses primary care, specialties, materials management and administration. The retained building accommodates patient admin and mental health. Multiple light wells were created inside each wing allowing natural light to penetrate each department. Passive and active meditative gardens are established to support each wing. **The unique configuration, placement and phasing of the wings allowed for existing operations to proceed unhindered during construction and provides for future expansion that could accommodate future clinical needs as well as a potential inpatient tower, truly the chassis of a "hospital without beds".** The project was designed to meet LEED Silver

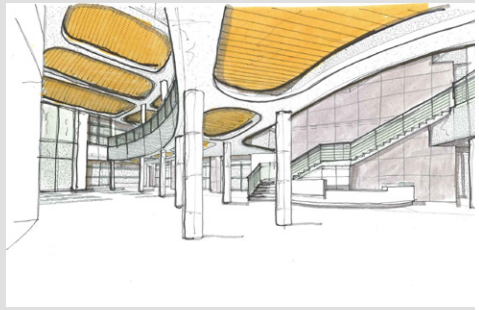
6.4 EXHIBITS

MALCOLM GROW MEDICAL CLINICS AND SURGERY CENTER

JOINT BASE ANDREWS, MARYLAND







AWARDS

2023 IIDA Central Florida Chapter Interior Design Excellence Award in the Government category

6.5 EXHIBITS

5

COMMUNITY HOSPITAL ADDITION

FIRM OF RECORD: RLF
DESIGN FIRM: RLF
YEAR COMPLETED: 2012
SIZE: 144,000 SF
LOCATION: Keesler AFB, Biloxi, MS
ROLE: Design lead/Director

I have personal knowledge of the nominee's responsibility for the project listed above. That responsibility included being largely responsible for design.

Richard J. Onken, Lt Col (ret), USAF, BSC, AIA, EDAC
(Former) Chief of Design
Air Force Health Facilities Division
Office of the Surgeon General

The Community Hospital Addition is an inpatient extension of the base hospital in response to the 2005 BRAC initiative to return this facility to community hospital status. This project provides 48 new med/surg beds, 14 critical care beds, surgery expansion, PACU, pre-op / post-op, cath labs, PT/OT, emergency services and central sterile. A replacement central energy plant was provided as part of an early phase to accommodate the existing facility and the planned expansion. **The challenges included integrating an addition on a tight site along a secured perimeter, creating a new entrance that improved wayfinding, and bringing in natural light to new services while not blocking natural light to the existing ones.**

The existing facility's location with various views of Back Bay Biloxi provided unique design opportunities. An initial goal-setting meeting with surgeon general and hospital staff indicated the desire to exceed expectations, reviewing a range of potential patient centered care and EBD features identified a desire to exceed expectations in this area as well. Coupled with the constraints of available land and tie-in points to the existing hospital, a four-story solution was generated with two med/surg floors at levels three and four. The surgical expansion, PACU, pre-op / post-op, cath labs were located on the second level directly tying into the existing surgery. The ground floor accommodated PT / OT, and ED, with central sterile located directly below surgery. The inpatient floors were driving factors in determining the footprint and several configuration options were explored. A triangular unit was selected as having the most compact footprint and offering the most desirable views of the Back Bay. Several patient room iterations identified a preferred same handed room configuration with adequate toilet / patient proximity to minimize falls and patient lifts. Other features included nurse servers and charting areas with direct patient observation and family respite areas. A light court was placed between the new and the existing building maintaining natural light to the existing building and providing a healing garden. This project was the **first DoD inpatient facility to embrace EBD principles in a significant way and to this day represents the most comprehensive adoption of those principles within the system**. The project was designed to meet LEED Silver.

This facility routinely ranks as the top-rated DoD inpatient facility in patient satisfaction.

AWARDS

2015 Rated #1 for in-patient satisfaction within the DoD healthcare system

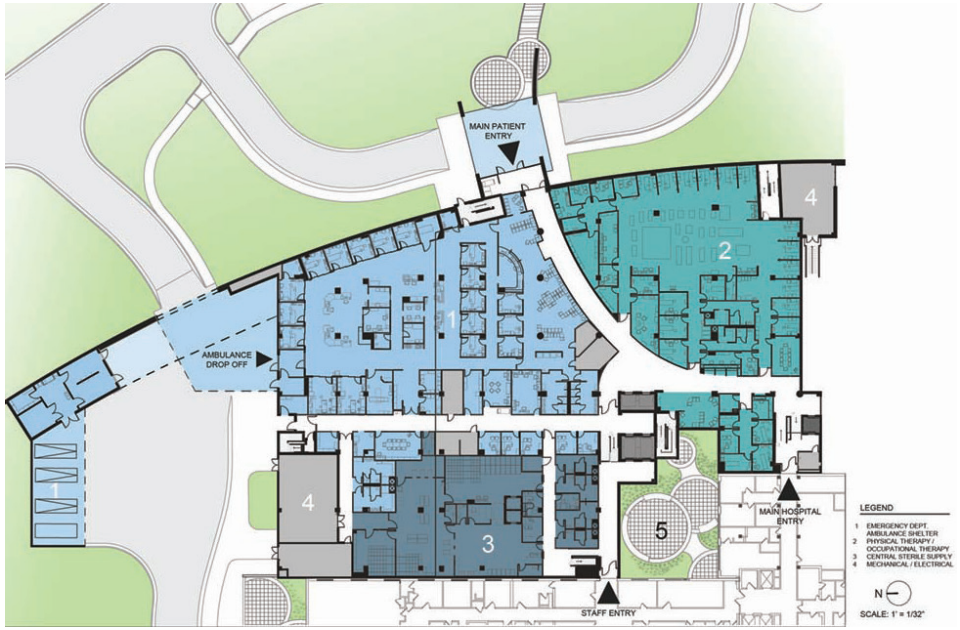
PUBLICATIONS

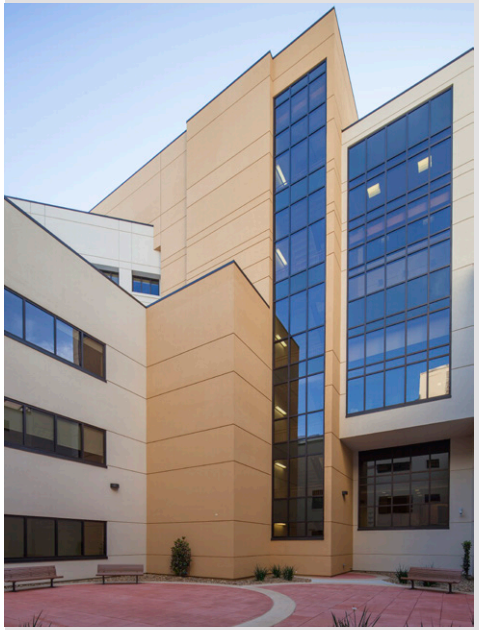
2012 HCD Conference - Education Seminar, featured in: "Geometry of Clinical Efficiency"

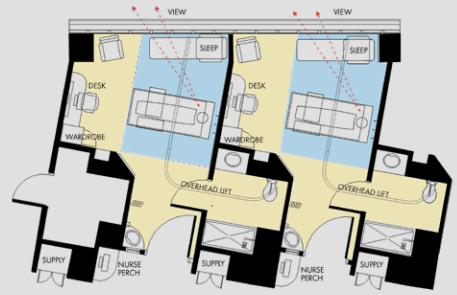
6.5 EXHIBITS

COMMUNITY HOSPITAL ADDITION

KEESLER AFB BILOXI, MISSISSIPPI







6.6 EXHIBITS

6

CAPTAIN JAMES A. LOVELL FEDERAL HEALTH CARE CENTER

FIRM OF RECORD: RLF
DESIGN FIRM: RLF
YEAR COMPLETED: 2012
SIZE: 208,000 SF new, 40,000 reno, 500 Car Parking Structure
LOCATION: North Chicago, IL
ROLE: Design lead/Director

I have personal knowledge of the nominee's responsibility for the project listed above. That responsibility included being largely responsible for design.

Ann B. Miller, P.E. (Retired)
(Former)Head, Project Management
NAVFAC Atlantic, Capital Improvements
C12 Component Support Branch

The Captain James A. Lovell Federal Health Care Center project is an outpatient addition and conversion of the existing VA Medical Center. The updated facility is the **first of its kind, joint DoD and VA, fully integrated Federal Health Care Center** and combines and consolidates the former Navy Hospital Great Lakes with the VA Medical Center North Chicago. The full medical center provides inpatient and outpatient services, including primary care and the full range of specialty care services for the respective patient populations of the Naval Training Center, Great Lakes and the VAMC. **Challenges were to integrate a modern clinic addition into a 50-year- old VA hospital without affecting on-going operations and enhancing the patient experience.**

As a groundbreaking project for both Departments, the medical center required collaboration from agency representatives to define project goals and objectives, establish operational models, determine requirements, mesh criteria, program space and define a course of action for implementation. The agencies involved RLF early in this pre-planning process as a collaborative partner, and **Steve spearheaded the design effort in this process.** Often the focus of the work was to facilitate and build consensus between differing parties. The approved project builds on the existing north/south spine of the medical center, establishing a new main entry, patient concourse and outpatient pavilion. Design concepts reflect incorporation of EBD and patient centered principles. Taking advantage of the existing hillside, the outpatient pavilion is **innovatively organized around a four-story light court with views of Lake Michigan on the four-story side and a lower scale three-story element on the entry side.** Patient waiting areas surround this open space bringing in natural light, improving wayfinding and giving the client extreme flexibility in patient throughput. **Modular planning components provide great flexibility In addressing the unknown nature of the new partnership.** The organizing light court establishes a high level of physical and visual connectivity. In addition to the open ends of the light court, the roof is a series of folded clerestory planes that further flood the hall with natural light. Meditative gardens are established internally adjacent to the patient concourse and exterior to the building entries. This project was designed to meet LEED Silver.

This project has become a model for healthcare partnering between the VA and the Department of Defense.

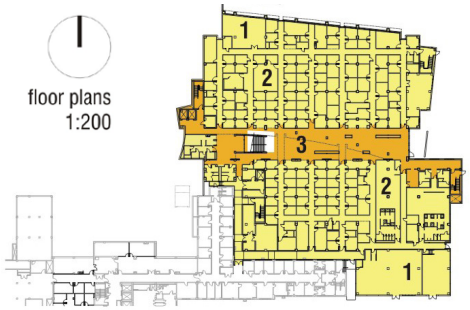
"It is not unusual to hear (VA) patients say, 'This is the best facility I have ever been to', and the military patients echo those sentiments as well."

–Dr. Stephen Holt, Director Lovell FHCC

6.6 EXHIBITS

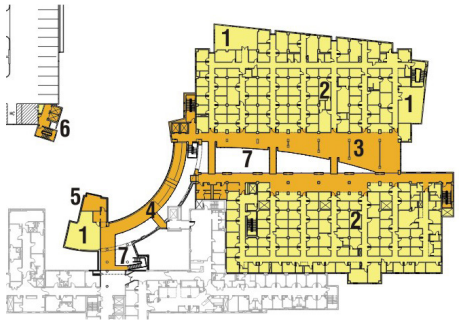
CAPTAIN JAMES A. LOVELL FEDERAL HEALTH CARE CENTER

NORTH CHICAGO, ILLINOIS

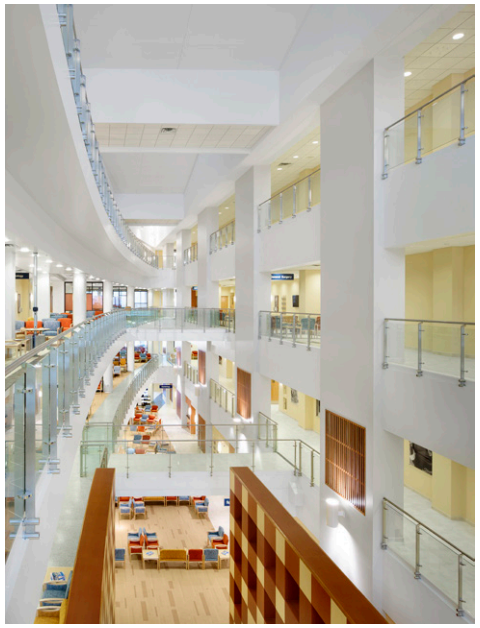


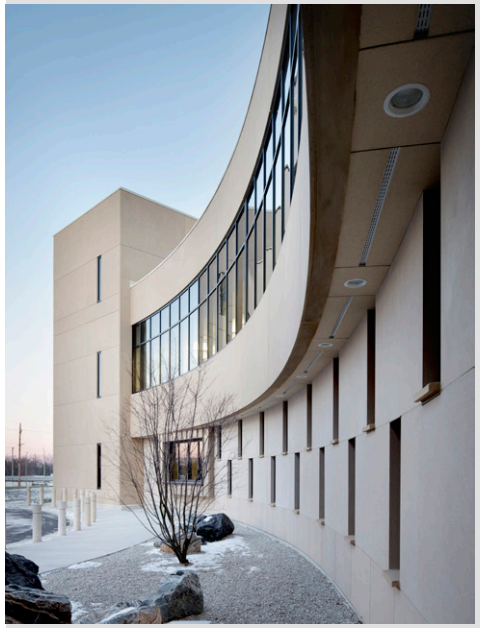
LOWER LEVEL

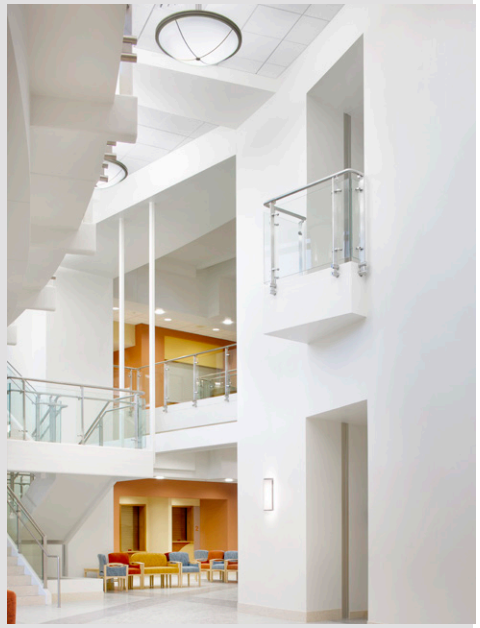
GROUND FLOOR



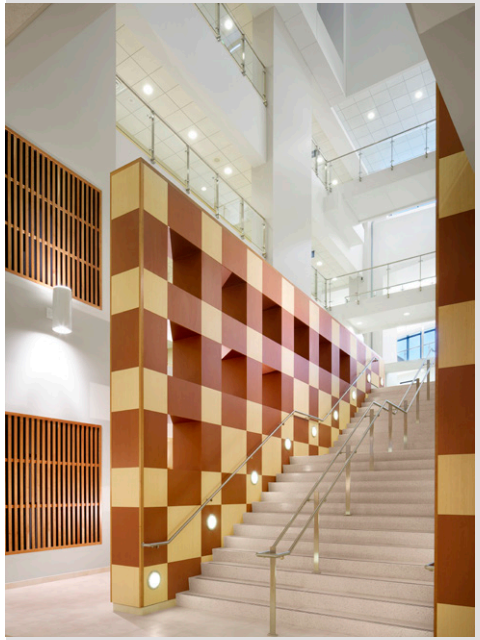
SECOND LEVEL







1 mechanical
2 clinics
3 atrium waiting area
4 elevated connector
5 meditation area
6 garage elevator tower
7 open to below



AWARDS

2011 Meritorious Unit Commendation for efforts leading up to the Oct. 1, 2010, integration

6.7 EXHIBITS

7

ENHANCED HEALTH SERVICE CENTER

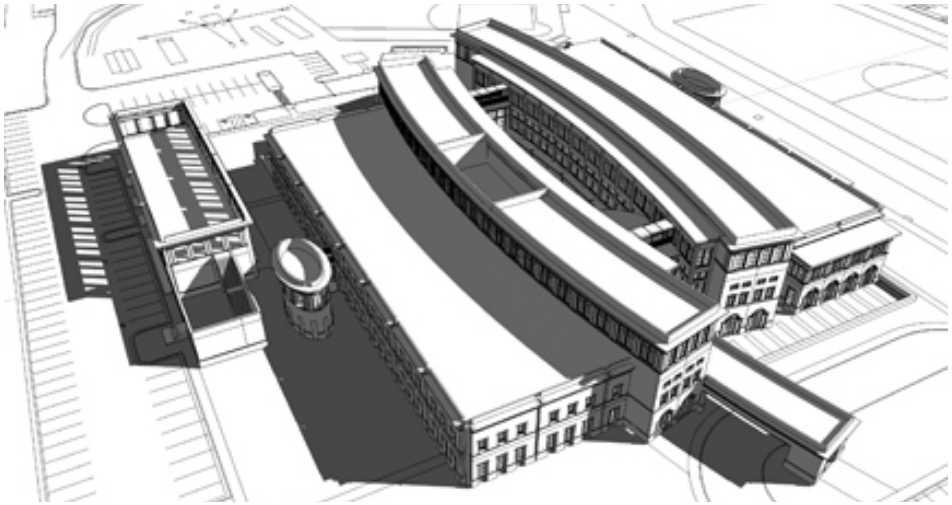
FIRM OF RECORD: RLF
DESIGN FIRM: RLF
YEAR COMPLETED: 2010
SIZE: 130,000 SF
LOCATION: Camp Ederle, Vicenza, Italy
ROLE: Design lead/Director

I have personal knowledge of the nominee's responsibility for the project listed above. That responsibility included being largely responsible for design.

Ann B. Miller, P.E. (Retired)
(Former)Head, Project Management
NAVFAC Atlantic, Capital Improvements
C12 Component Support Branch

The Enhanced Health Service Center is a replacement U.S. Army community hospital accommodating inpatient, primary and specialty care outpatient services for the military and dependent population of Vicenza Italy. This new facility consolidates and expands three separate existing facilities: a medical clinic, dental clinic and birthing center. Camp Ederle is significantly built-out and available land was at a premium. A relatively small, restricted site near the athletic fields was the only available property. **The challenge was how to fit a hospital and clinic on a small site without hampering future flexibility.**

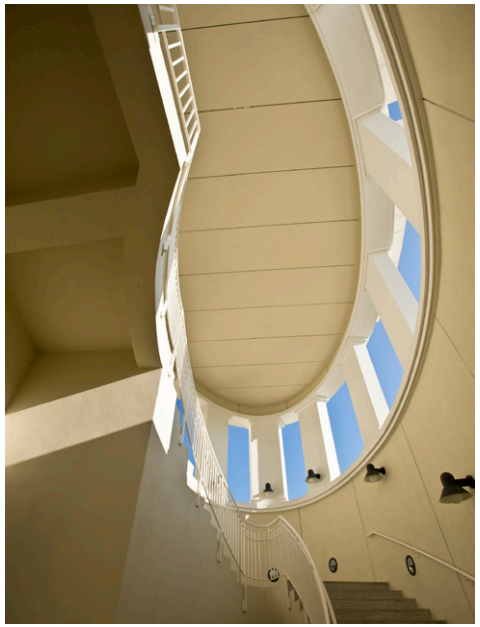
This site-conserving two-story design solution consists of two wings overlooking a central light court and meditative garden that **incorporates the culture of the region and blends it with the functionality of the facility.** The meditative garden is a primary organizing element, on axis with the main patient and visitor entry to the south and the staff entry to the north- separating the facility into two wings. The east wing is a healthcare occupancy housing the Hospital functions. The west wing is constructed as a business occupancy and accommodates the clinical services. The clinical blocks are functionally arranged to maximize future flexibility while allowing for the clinic portion to be shut down during night operations saving energy and resources. The waiting and public areas are centralized for flexibility and located with a direct view of the meditative garden. The window wall along each side of this internally focused façade brings abundant natural light into the building core. This project was designed to meet LEED Silver. **This is one of the highest rated facilities for patient satisfaction in the Army system overseas.**

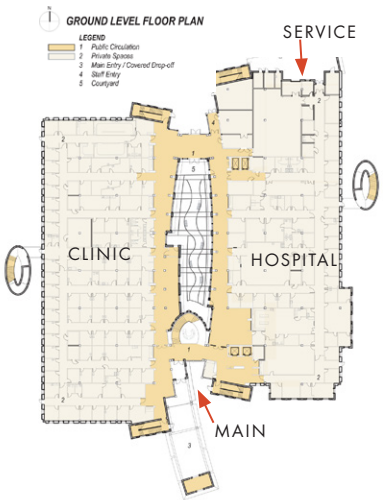


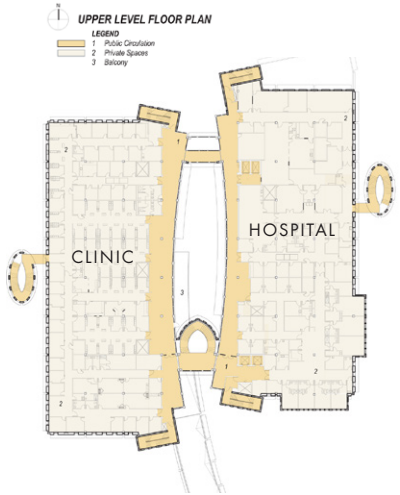
6.7 EXHIBITS

ENHANCED HEALTH SERVICE CENTER

CAMP EDERLE, VICENZA
ITALY



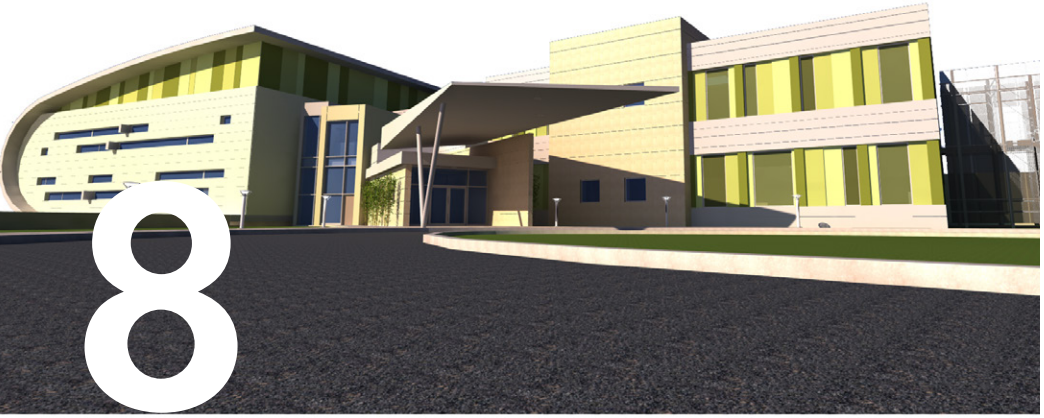




PUBLICATIONS

2006 Healthcare Design Magazine, September Showcase: Enhanced Health Service Center at Vicenza, Italy

6.8 EXHIBITS

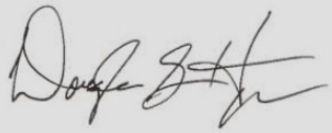


8

52ND MEDICAL GROUP CLINIC

FIRM OF RECORD: RLF
DESIGN FIRM: RLF
YEAR COMPLETED: 2010
SIZE: 143,000 SF
LOCATION: Spängdahlem AFB, Germany
ROLE: Design lead/Director

I have personal knowledge of the nominee's responsibility for the project listed above. That responsibility included being largely responsible for design.



Douglas G. Harper, PE
LtCol, USAF, BSC (Retired)
(Former) Deputy Chief of Design & Construction
Air Force Health Facilities Division
Office of the Surgeon General

The 52nd MDG Clinic is a replacement clinic accommodating primary and specialty care services for the beneficiary population of Spängdahlem AFB. **Challenges were to meet stringent German laws for natural light and ventilation while meeting all Air Force design criteria for their new "clinic of the future".**

Originally designed as a new hospital (before construction), this project was operationally downgraded to an outpatient clinic and surgery. Conceived as the first application of the Air Force's "clinic of the future", this design established a collaborative teaming environment for providers, nurses and techs. **Innovations were to divide the clinic planning modules into smaller units matching staffing ratios and then splaying these along the natural contours of the site to bring in natural light and create garden views** from the exam rooms and offices. Numerous options were developed as this paradigm-shifting concept was vetted through AF Surgeon General Representatives, command and clinical user groups. The clinical wings are centered around a central healing garden with ancillary services and a surgical wing on one side while the centralized main entry and the clinical pavilions are on the other side. The design reflects an early incorporation of EBD and patient centered principles. Located on a hillside, services are located at a lower level offering

A fully uncompromised on-stage / off-stage circulation system. The clinical pavilions are sized and organized to maximize both natural light and views into all continually occupied interior spaces. Wayfinding and access was simplified to allow self-checking in of patients. Designed for ease of future growth, the diagnostic and treatment core area is expandable and multiple clinical pavilions may be added to support the changing nature of the Air Forces overseas mission. This project was designed to meet LEED Gold.

The design of this "clinic of the future" prototype became the forerunner for the MHS later adoption of the "patient centered medical home" model.

AWARDS

2010 USAF Citation Award:
Spangdahlem AFB Medical Complex – Germany

2002 USAF European Division
Honor Award for Conceptual Design:
Spangdahlem Hospital - Germany

6.8 EXHIBITS

52ND MEDICAL GROUP CLINIC

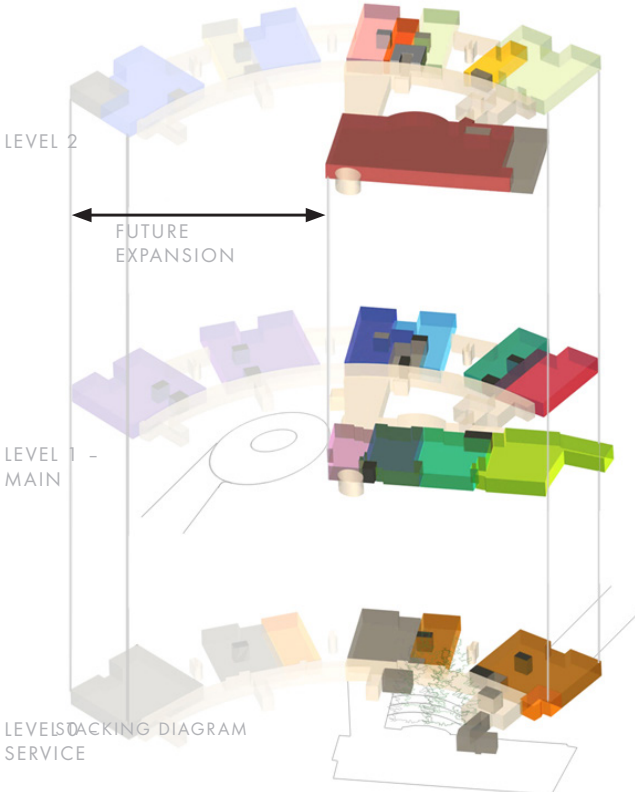
SPÄNGDAHLEM AFB, GERMANY

main entry floor plan

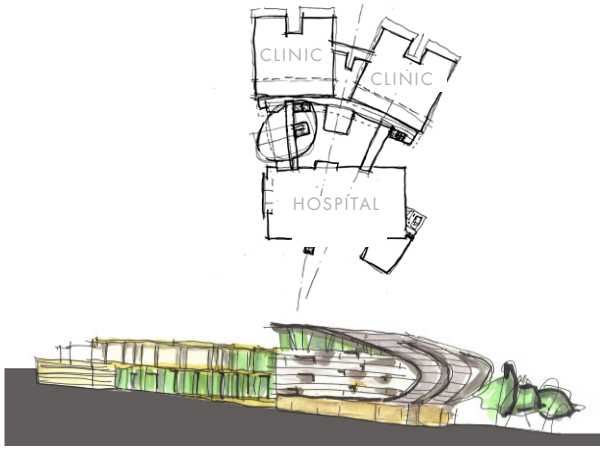
1	patient drop off	6	waiting
2	entry vestibule	7	clinics
3	reception	8	courtyard below
4	lobby	9	mechanical
5	terrace	10	staff entry

ground floor plan
1:50

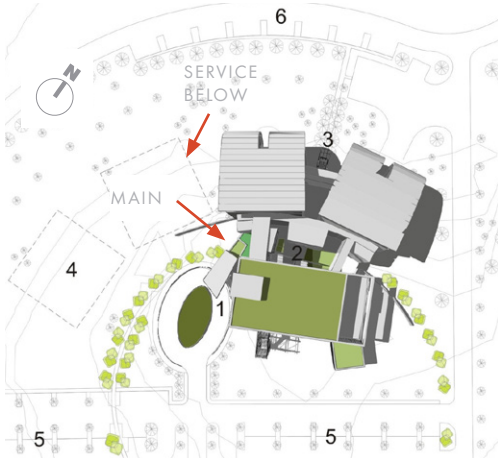
FLOOR PLAN



STACKING DIAGRAM



PARTI SKETCHES



SITE PLAN

MASSING

6.9 EXHIBITS

9

PRESIDIO OF MONTEREY DENTAL CLINIC

FIRM OF RECORD: RLF
DESIGN FIRM: RLF
YEAR COMPLETED: 2011
SIZE: 11,000 SF
LOCATION: Monterey, CA
ROLE: Design lead/Director

I have personal knowledge of the nominee's responsibility for the project listed above. That responsibility included being largely responsible for design.

Robert Yohe, FAIA, FACHA

Senior Medical Planner

RLF Architecture Engineering Interiors

Located on Monterey Bay overlooking the Pacific Ocean on the Presidio Army Base, Steve was the lead designer and medical planner on this ground-breaking dental clinic. **The challenge was to create a clinic that would help with dentist retention, extend the dentist to patient ratio and create a stress reducing environment for both patient and caregiver.** The program consists of 16 dental chairs, imaging/support spaces, staff offices and break/waiting areas. Steve created a four-chair open bay configuration that allowed a single dentist greater observation to monitor four patients simultaneously. This also allowed natural light and views deeper into the dental treatment areas. Staff areas were separated from the patient areas by a singular volumetric patient waiting area overlooking the bay and ocean. Utilizing the natural slope of the site, engineering systems were placed on a lower level separating services and reducing energy transportation costs (heat for most of the year). The architecture was simple and straightforward, incorporating passive solar shading at the large windows overlooking the natural views. A large sweeping roof was placed over the patient waiting areas signifying the entry and creating a comfortable therapeutic space.

Design innovations include:

Created a unique dental planning module for the Army that reduced the number of dentists required to treat patients and increased visibility thus improving caregiver efficiency and patient safety.

Created therapeutic public and staff spaces that reduced patient stress levels by over 50% (in satisfaction surveys) and has improved dentist retention by 10%.

Integrated passive and active sustainable features by utilizing built-in shading devices responding to the site placement, a natural green roof on all low-slope areas and views and utilizing an energy efficient engineering systems to reduce energy consumption by 40% over the ASHRAE 90.1 baseline. Natural light and views are brought into 100% of occupied spaces. This facility was designed to meet LEED Gold.

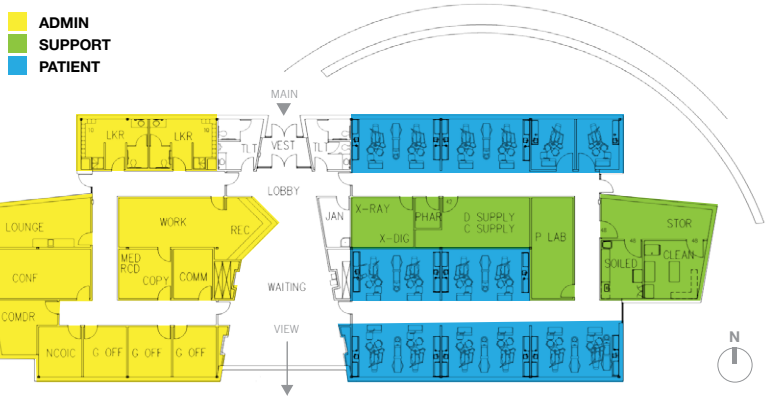
Utilized the unique FACD charrette process completing schematic design in 5 days reducing this phase by 3 months.

This facility is consistently ranked as one of the best dental clinics for both staff and patients within the Army system.

6.9 EXHIBITS

PRESIDIO OF MONTEREY DENTAL CLINIC

PRESIDIO MONTEREY, CALIFORNIA



FLOOR PLAN

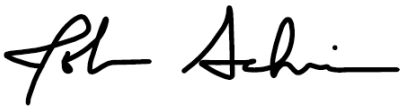
NOMINEE'S OTHER ACKNOWLEDGMENTS, AFFIRMATIONS, + RELEASE COPYRIGHT + INDEMNIFICATION

6.1

JOHN J. COCHRAN VA MEDICAL CENTER

ST. LOUIS, MISSOURI

I have personal knowledge of the nominee's responsibility for the project listed above. That responsibility included being largely responsible for design.



John Schreiner, PE, PMP

Program Manager - VA STL John Cochran Major

U.S. Army Corps of Engineers – Kansas City District

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6.2

ORLANDO VA MEDICAL CENTER

ORLANDO, FLORIDA

I have personal knowledge of the nominee's responsibility for the project listed above. That responsibility included being largely responsible for design.

Joe D. Battle

VA Project Executive

Associate Medical Center Director

Orlando VA Medical Center

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PHOTOGRAPHY: KEN WEST

6.3

WEED COMMUNITY HOSPITAL

FT. IRWIN, CALIFORNIA

I have personal knowledge of the nominee's responsibility for the project listed above. That responsibility included being largely responsible for design.

COL Christopher W. Kiss, PhD, AIA, PMP

Dep. Chief, Facilities Enterprise

Defense Health Agency

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NOMINEE'S OTHER ACKNOWLEDGMENTS, AFFIRMATIONS, + RELEASE COPYRIGHT + INDEMNIFICATION

6.4

MALCOLM GROW MEDICAL CLINICS AND SURGERY CENTER

JOINT BASE ANDREWS, MARYLAND

I have personal knowledge of the nominee's responsibility for the project listed above. That responsibility included being largely responsible for design.

Richard J. Onken, Lt Col (ret), USAF, BSC, AIA, EDAC
(Former) Chief of Design
Air Force Health Facilities Division
Office of the Surgeon General

PHOTOGRAPHY: KEN WEST + CHAD BAUMERSON

6.5

COMMUNITY HOSPITAL ADDITION

KEESLER AFB BILOXI, MISSISSIPPI

I have personal knowledge of the nominee's responsibility for the project listed above. That responsibility included being largely responsible for design.

Richard J. Onken, Lt Col (ret), USAF, BSC, AIA, EDAC
(Former) Chief of Design
Air Force Health Facilities Division
Office of the Surgeon General

PHOTOGRAPHY: KEN WEST

6.6

CAPTAIN JAMES A. LOVELL FEDERAL HEALTH CARE CENTER

NORTH CHICAGO, ILLINOIS

I have personal knowledge of the nominee's responsibility for the project listed above. That responsibility included being largely responsible for design.

Ann B. Miller, P.E. (Retired)
(Former)Head, Project Management
NAVFAC Atlantic, Capital Improvements
C12 Component Support Branch

PHOTOGRAPHY: MICHAEL ROBINSON

NOMINEE'S OTHER ACKNOWLEDGMENTS, AFFIRMATIONS, + RELEASE COPYRIGHT + INDEMNIFICATION

6.7

ENHANCED HEALTH SERVICE CENTER

CAMP EDERLE, VICENZA
ITALY

I have personal knowledge of the nominee's responsibility for the project listed above. That responsibility included being largely responsible for design.

Ann B. Miller, P.E. (Retired)

(Former)Head, Project Management

NAVFAC Atlantic, Capital Improvements

C12 Component Support Branch

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6.8

52ND MEDICAL GROUP CLINIC

SPÄNGDAHLEM AFB,
GERMANY

I have personal knowledge of the nominee's responsibility for the project listed above. That responsibility included being largely responsible for design.

Douglas G. Harper, PE
LtCol, USAF, BSC (Retired)
(Former) Deputy Chief of Design & Construction
Air Force Health Facilities Division
Office of the Surgeon General

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6.9

PRESIDIO OF MONTEREY DENTAL CLINIC

PRESIDIO MONTEREY,
CALIFORNIA

I have personal knowledge of the nominee's responsibility for the project listed above. That responsibility included being largely responsible for design.

Robert Yohe, FAIA, FACHA

Senior Medical Planner

RLF Architecture Engineering Interiors

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American College of Healthcare Architects

FELLOWSHIP NOMINATION

Steven M. Langston
AIA, ACHA, EDAC, LEED AP