Coming Together to Build Excellence

Register by January 15, 2013 for early-bird rates. Be part of the conversation. The 2013 PDC Summit offers exceptional networking opportunities, engaging sessions featuring timely topics, CEU credits, and much more.

www.pdcsummit.org
Dear Colleague,

As a former hospital administrator, I have a deep appreciation for the importance of the health care environment to the overall health care delivery process. That’s why I encourage you to attend the 2013 International Summit on Health Facility Planning, Design & Construction – the PDC Summit.

This conference will provide you with opportunities to meet and network with others who share your passion and commitment to advancing health care through the design of safe and effective patient care environments. The PDC Summit has a distinguished history of bringing together thousands of professionals representing various disciplines and professions to learn from each other, make valuable business connections, and lead change in the industry.

At this year’s Summit, you can expect to hear experts in innovation, design and the future of health care; regulatory issues; and the implications and challenges of health care reform. Featured presenters include Paul Keckley of the Deloitte Center for Health Solutions, who will discuss health care reform with Teri G. Fontenot, President and CEO of Woman’s Hospital in Baton Rouge, and 2012 Chair of the American Hospital Association Board of Trustees. Closing the Summit will be a plenary session with Harvard physician and well-known author and health care researcher Atul Gawande. In his most recent book, he argues that the use of simple checklists can improve our efforts in many fields—especially health care—in today’s complex world.

As President and CEO of the American Hospital Association, I am grateful for the ways in which your work to strengthen and advance the health care environment contributes to AHA’s vision of a society of healthy communities, where all individuals reach their highest potential for health. Working together, we can achieve great things.

I am confident the PDC Summit will deliver a rich and rewarding education and networking experience for attendees. Please join us at this year’s conference.

Sincerely,

Rich Umbdenstock
President and CEO
American Hospital Association
Why You Should Attend.

The PDC Summit is developed and produced by non-profit health care organizations. More than 3,000 health care professionals come together to learn, network, and define the future of the physical health care environment. The unique mix of PDC attendees allows for a rich and collaborative learning experience.

Attendee Mix:

- Health Care Facility: 24%
- Architectural/Design Firm: 28%
- Construction Firm: 27%
- Consulting/Other: 21%

Featured presenters:

- **Atul Gawande, MD**, Professor of Surgery, Harvard Medical School; Professor in the Department of Health Policy and Management at the Harvard School of Public Health; author of The Checklist Manifesto
- **Paul Keckley, PhD**, Executive Director for the Deloitte Center for Health Solutions
- **Teri G. Fontenot, FACHE**, President and CEO, Woman’s Hospital and 2012 Chair of the AHA Board of Trustees
- **Dan Rahn, MD**, Chancellor of University of Arkansas for Medical Sciences (UAMS)
- **Patrick Muldoon, FACHE**, President and CEO, HealthAlliance Hospital
- **Tom Clark, AIA**, Principal, Clark/Kjos Architects
- **Peter L. Bardwell, FAIA, FACHA**, Principal, BARDWELL+associates
- **Charles (Chuck) Cole**, President, HuntonBrady Architects, P.A.
- **Paul Whalen**, Partner, Robert A. M. Stern Architects

Continuing Education Units/Learning Units

Applications for learning units from the American Institute of Architects (AIA) and continuing education units from the American Hospital Association (AHA) and the American Academy of Healthcare Interior Designers (AAHID) have been submitted. Each attendee can attend 16 hours of learning at the PDC Summit. Also, an additional 4 hours for attending an ACHA Facility Tour, as well as 7 hours of credits for attending one of the preconference programs on Sunday.

From 2012 PDC Attendees . . .

“It validates that everyone involved in health care PDC is working with the same complicated issues, no matter where you are”

“Excellent networking opportunities”

“100% spot-on regarding the challenges and opportunities we face in planning, design, construction and operation of health care facilities.”

“As always the scope of education was excellent.”

“This conference focuses better than any other on what I do as an architect on the facility staff of a health care system.”
### 2013 PDC SUMMIT SCHEDULE AT A GLANCE

#### SUNDAAY, FEBRUARY 24, 2013

<table>
<thead>
<tr>
<th>Time</th>
<th>Session</th>
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</table>
| 8:00AM - 4:00PM | Preconference Sessions  
- Certified Healthcare Constructor (CHC) Exam Preparation Workshop  
- Infection Control During Construction and Operation of Health Care Facilities |
| 9:00AM - 11:00AM | EDAC Exam Prep Session                                                   |
| 11:00AM - 1:00PM | AAHID Exam Prep Workshop                                                 |
| 1:00PM - 2:15PM  | ACHA Exam Prep Seminar                                                   |
| 1:00PM - 5:00PM  | ACHA Health Care Facility Tours                                          |
| 6:00PM - 8:00PM  | PDC Summit Welcome Reception                                             |

#### MONDAY, FEBRUARY 25, 2013

<table>
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<tr>
<th>Time</th>
<th>Session</th>
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<tbody>
<tr>
<td>7:00AM - 8:00AM</td>
<td>AIA/AAH Sunrise Forums</td>
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| 8:00AM - 9:30AM | Vista Awards and Keynote Presentation  
- Health Care Reform: Implications and Challenges                           |
| 9:45AM - 10:45AM | Plenary Session  
- Future of the Health Care Built Environment  
- An Owner’s Perspective                                                    |
| 10:45AM - 1:45PM | Exhibit Hall, Lunch, and Gallery of Architecture for Health             |
| 1:45PM - 3:00PM  | Plenary Session  
- Celebration Health: A 20-Year Retrospective                             |
| 3:15PM - 4:30PM  | Concurrent Sessions (see session schedule)                              |
| 4:30PM - 6:00PM  | Exhibit Hall Reception                                                   |

#### TUESDAY, FEBRUARY 26, 2013

<table>
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<tr>
<th>Time</th>
<th>Session</th>
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<tbody>
<tr>
<td>7:00AM - 8:00AM</td>
<td>Concurrent Sessions (see session schedule)</td>
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<tr>
<td>8:15AM - 9:15AM</td>
<td>Concurrent Sessions (see session schedule)</td>
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</table>
| 9:30AM - 10:45AM | Plenary Session  
- CEO Panel: A Comparative Discussion                                      |
| 10:45AM - 1:45PM | Exhibit Hall, Lunch, and Gallery of Architecture for Health             |
| 1:45PM - 3:00PM  | Concurrent Sessions (see session schedule)                              |
| 3:15PM - 4:30PM  | Concurrent Sessions (see session schedule)                              |
| 4:30PM - 6:00PM  | Evidence-Based Design Accreditation and Certification (EDAC) Exam       |

#### WEDNESDAY, FEBRUARY 27, 2013

<table>
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<tr>
<th>Time</th>
<th>Session</th>
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<tr>
<td>7:30AM - 8:30AM</td>
<td>Concurrent Sessions (see session schedule)</td>
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<tr>
<td>8:40AM - 9:40AM</td>
<td>Concurrent Sessions (see session schedule)</td>
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<tr>
<td>9:50AM - 10:50AM</td>
<td>Concurrent Sessions (see session schedule)</td>
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</table>
| 11:00AM - 12:15PM | Closing Plenary Session  
- The Checklist Manifesto: How to Get Things Right                         |
| 1:00PM | Certified Healthcare Constructor (CHC) Exam                             |

### CONCURRENT SESSION SCHEDULE

**Track Key**

<table>
<thead>
<tr>
<th>Track Key</th>
<th>ACHA Masters Series</th>
<th>Fundamentals of PDC</th>
<th>Innovation in Design</th>
<th>Leadership</th>
<th>Performance Metrics</th>
<th>Regulatory Issues</th>
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<tbody>
<tr>
<td>Flexibility and Change in Health Care Facility Design</td>
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<td>Half-Time at the New Parkland Hospital: Visiting the Project Team’s Locker Room</td>
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<td>The Future of Rural Facilities: Do Investments Make Cents?</td>
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<td>One Year Later: Evaluating Capital Health’s Energy Consumption vs. Strategic Energy Model</td>
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<td>Patient Immobility Risk Assessment &amp; Design Implications</td>
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#### MONDAY 3:15–4:30PM

- Flexibility and Change in Health Care Facility Design
- Half-Time at the New Parkland Hospital: Visiting the Project Team’s Locker Room
- Sustainable Health Care Design: Current State, Existing Challenges, and Future Trends
- The Transformation of American Health Care: Strategies to Thrive the Next Five Years
- The Future of Rural Facilities: Do Investments Make Cents?
- One Year Later: Evaluating Capital Health’s Energy Consumption vs. Strategic Energy Model
- Patient Immobility Risk Assessment & Design Implications

#### TUESDAY 7:00–8:00AM

- Non-Traditional Project Delivery Models at UCSF Medical Center
- Future Trends in Thermal Comfort Systems
- Patient Protection and Affordable Care Act: Trends for the Future
- Deconstructing a Design-Build Project: Meeting Current and Future Needs of the Owner, Staff, and Patients
- Selecting Surfaces and Furnishings for Health Care Facility Projects: Accessing Current Evidence
- Implementation of an EOC Touring and Data Collection Tool at a Ten-Hospital Health Care System

Each session is part of a larger track that categorizes the content and topics covered. Use this color key to quickly determine tracks that may be most important to you when scheduling concurrent sessions.
### 2013 PDC SUMMIT SCHEDULE AT A GLANCE

#### TUESDAY 8:15–9:15AM

<table>
<thead>
<tr>
<th>Session</th>
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<tbody>
<tr>
<td>How Technology and Innovation Ensure Efficiency and Transparency at the Largest Public Health Care Project</td>
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<td>Seven Layers to Maximize Value</td>
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<td>Capital Investment Decisions in Health Care</td>
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<td>Hurricane Sandy: Lessons Learned</td>
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<td>Verification of Life Safety Systems is Key Process, Not an End Game Task</td>
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<td>ASHE Advocacy Highway: Roadmap to Codes and Standards</td>
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#### TUESDAY 1:45–3:00PM

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<th>Session</th>
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<tbody>
<tr>
<td>Inpatient Care Units Improving Patient Care: New Research on Best Design Strategies for Effective Nursing</td>
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<td>Operating Room HVAC Setback Roundtable: Issues and Solutions</td>
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<td>Evolution of the Kaiser Total Health Experience Design Standard</td>
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<td>Innovative Applications of BIM Models in Solving Design and Construction Problems</td>
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<td>Designing Medication Safety Zones</td>
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<td>The Role of the Fire Protection Engineer in the Building Design and Construction Process</td>
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#### TUESDAY 3:15–4:30PM

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<th>Session</th>
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<tbody>
<tr>
<td>Hybrid Operating Rooms: The Challenge for Planning, Design, and Construction</td>
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<tr>
<td>The New Hospital Prototype: Small Hospitals, Big Ideas</td>
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<td>Making the Business Case for Using the ASHE HFCx Process for Health Facility New Construction and Renovation Projects</td>
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<td>Achieving High Performance Operation with Energy Alarms</td>
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<td>FGI’s New Guidelines for Residential Care Facilities - Creating a Person-Centered Approach to Elder Care</td>
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<td>The Big Gets Bigger: Effects of Regulatory Requirements on Health Care Space Planning</td>
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#### WEDNESDAY 7:30–8:30AM

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<tr>
<th>Session</th>
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<tr>
<td>Energy Efficient and Thoughtful Lighting Design for Health Care</td>
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<td>A Day in the Life: Health Care 2020</td>
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<td>Helping to Provide Access to Health Care in Developing Countries Around the World</td>
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<td>Show Me the Beef—Proving the Value of the HFCx Process</td>
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<td>Acoustics for Hospitals: FGI Guidelines, HCAHPS, and LEED</td>
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<td>Bad Medicine? How Prescriptive Energy Codes Will Ruin Architecture</td>
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#### WEDNESDAY 8:40–9:40AM

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<tr>
<td>Noise and Particulate Monitoring...We Have an App for That</td>
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<td>Using Fuel Cells in Health Care Settings</td>
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<tr>
<td>Understanding LEED for Healthcare: Comparing Previous Rating Systems, Highlighting Anne Arundel Medical Center, Annapolis, Maryland</td>
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<tr>
<td>Water Damage Loss Prevention During and After Construction of Health Care Facilities</td>
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<td>How Will the 2012 Editions of NFPA 101 and NFPA 99 Impact Design Projects?</td>
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#### WEDNESDAY 9:50–10:50AM

<table>
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<tr>
<th>Session</th>
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<tr>
<td>AHA Sustainability Roadmap Improves Financial, Patient Care, and the Environmental Bottom Line without Capital Expenditures.</td>
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<td>Are There Holes in Your Safety Net?</td>
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<tr>
<td>Developing a Framework for Health Care Facility Management Data Collection to Support Lifecycle Building Information Modeling</td>
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<td>Student Competition: Evaluation and Planning for improvement of the Environment of Care</td>
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<td>Lean Application Regardless of Project Delivery Method</td>
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<tr>
<td>New Theories on Plumbing and HVAC Systems</td>
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2013 PDC Summit Collaborators

The 2013 PDC Summit was developed and supported with input from nationally known health care associations.

2013 PDC Summit Planning Committee

The development of the PDC Summit program requires extensive planning and research by the PDC Planning Committee. The 2013 PDC was developed by industry leaders to ensure that the sessions and speakers are relevant, accurate, and engaging for health care leaders, designers, and contractors. Thank you to the following individuals for their time and effort in developing the 2013 PDC.

PDC Summit Strategic Planning Committee

- Dana Swenson, PE, MBA, Senior Vice President and Chief Facilities, UMass Memorial Health Care
- Art Kjos, AIA, NCARB, SASHE, Principal, Clark/Kjos Architects
- Tim Hyde, LEED-AP, DPR Construction Inc.
- W. H. (Tib) Tusler, FAIA, FACHA Emeritus
- Charles Griffin, AIA, FACHA, EDAC, Senior Principal, WHR Architects Inc.
- Rick Hermans, PE, HFDP, Director of Training and Advanced Applications, McQuay International
- Mark Kenneday, MBA, CHFM, FASHE, Vice Chancellor, Campus Operations, University of Arkansas For Medical Sciences
- Doug Erickson, FASHE, CHFM, HFDP, CHC, Senior Project Manager, Northstar Management
- Jocelyn Stroupe, AAHID, IIDA, ASID, EDAC, Principal Director, Cannon Design
- Peter Bardwell, FAIA, FACHA, Principal, Bardwell + associates
- Jonathan Flannery, CHFM, SASHE, Executive Director Engineering and Operations, UAMS Medical Center
- Michael Tchoukaleff, AIA, Principal, TKH, Inc.
- Mark Howell, Senior Vice President, Skanska USA Building, Inc.
PDC Summit Program Format

The PDC Summit program blends strategic vision with practical tools to offer professionals a lively learning experience. Monday’s sessions will provide a high-level, long-term view of the health care industry, delivery of care models, and strategic issues related to planning for design and construction. Tuesday’s focus will be on fresh and innovative approaches to health care facility design and construction. The scope for Wednesday’s sessions is operational sustainability practices that provide value back to the organization.

SUNDAY, FEBRUARY 24, 2013

8:00 AM – 4:00 PM [Preconference Program]
Certified Healthcare Constructor (CHC) Exam Preparation Workshop

Note: Attending this course does not register you to take the exam. You can register for the CHC exam at www.aha.org/certification/CHC. Additional fee required for this workshop.

This workshop provides test-taking tips and an overview of the topics identified in the CHC content outline as published in the CHC Candidate Handbook. The workshop will include practice questions based on the CHC topic outline. In addition, the class will incorporate the use of interactive polling technology that allows each participant to answer questions and compare their answers with averages from others in the class. At the completion of this program, you will be able to:

• Implement suggestions for preparing for the CHC exam.
• Identify which topic areas are your strengths.

8:00 AM – 4:00 PM [Preconference Program]
Infection Control During Construction and Operation of Health Care Facilities

Note: Additional fee required for this workshop.

This program provides critical information about infection prevention methods that will help you protect the population you serve during construction, operation, and maintenance of health care facilities. Through interactive discussions, your knowledge of the interrelationship between environmental infection control and construction will be strengthened. Case studies will present infection control measures that could be used by your institution. At the completion of this program, you will be able to:

• Apply infection control risk assessment (ICRA) principles to design, construction, renovation, and maintenance activities.
• Implement infection control risk mitigation recommendations based on ICRA.

9:00 AM – 11:00 AM
EDAC Exam Prep Session

This session will provide general information about the exam, the types of questions on the exam, a detailed review of the content from the three study guides, and an overview of the five domains included on the Exam Content Outline. The workshop will include a summary of key concepts, sample questions and time for your questions. To register, visit www.healthdesign.org/edac or email Catherine Ancheta at cancheta@healthdesign.org.

11:00 AM – 1:00 PM
AAHID Exam Prep Workshop

The American Academy of Healthcare Interior Designers (AAHID) Workshop will provide designers, architects, and administrators with valuable information about the AAHID certification process and the required knowledge base, materials, and procedures for achieving certification in health care interior design. In addition, the seminar covers application materials, exam topics, sample questions, scoring criteria, and the exam schedule. To register, visit www.aahid.org.

1:00 PM – 2:15 PM
ACHA Exam Prep Seminar

This workshop will provide health care architects with useful information to submit their portfolio and prepare for the ACHA Exam. The seminar covers application materials, exam topics, sample questions, scoring criteria, and exam schedules. Attendees earn 1.0 LU. To register for this free seminar, email your name and contact information to the ACHA at acha-info@goAMP.com by February 18, 2013.

1:00 PM – 5:00 PM
American College of Healthcare Architects (ACHA) Health Care Facility Tours

Note: Additional fee required. The fee includes transportation to and from the facility.

Architectural tours of local health care facilities are being organized by the American College of Healthcare Architects (ACHA). Tours will depart at 1:00pm and return by 5:00pm. Space is limited, so be sure to preregister for one of the following tours:

- Tour 1 - UCSF Mission Bay
- Tour 2 - Stanford Outpatient Building
- Tour 3 - Kaiser Oakland
- Tour 4 - Sutter Eden Medical Center
- Tour 5 – John Muir Medical Center (New Tower)
6:00PM – 8:00PM
PDC Welcome Reception

All attendees, guests, and exhibitors, are invited to attend this event to kick off the 2013 PDC Summit! Plan to attend this fun event to enjoy food, drinks, and entertainment while networking with colleagues.

MONDAY, FEBRUARY 25, 2013

7:00 AM – 8:00 AM  [AIA/AAH Sunrise Session]
Codes and Standards Forum
Rebecca Lewis, AIA, ACHA, CID, Principal, DSGW; Scott Miller, AIA, ACHA, Associate Principal, MOODY-NOLAN, Inc.

The Codes and Standards Forum is a platform to review the latest updates from the Facility Guidelines Institute’s Guidelines for Design and Construction of Health Care Facilities as well as the interactive discussion from national health care experts regarding the integration of industry codes and standards in health care design. There will be additional AIA/AAH forums during this time. Visit www.pdcsuumit.org for forum descriptions.

8:00 AM – 9:30 AM  [Plenary Session]
Vista Awards and Keynote Presentation: Health Care Reform: Implications and Challenges
Paul H. Keckley, PhD, Executive Director, Deloitte Center for Health Solutions, a part of Deloitte & Touche

Although the Affordable Care Act was passed, implementation of health care reform continues to unfold. Paul Keckley will give an update on the latest developments in implementation and discuss the challenges and impact health care reform is expected to have. As a health economist, policy expert, and author, Mr. Keckley has been on the front lines of health care reform. In May, he facilitated a series of meetings for the White House Office of Health Reform that fostered collaboration among the major trade organizations. The group’s work was delivered to the White House in June and is an integral element of the health reform debate now underway.

8:00 AM – 9:30 AM  [Plenary Session]
Future of the Health Care Built Environment - An Owner’s Perspective
Teri G. Fontenot, FACHE, President and CEO, Woman’s Hospital and 2012 Chair of the AHA Board of Trustees; Paul H. Keckley, PhD, Executive Director, Deloitte Center for Health Solutions, a part of Deloitte & Touche; Ian Morrison, PhD, Author, Consultant, and Futurist

As a follow-up to the keynote presentation, this plenary session will dig deeper into health care reform as it relates to the physical environment. Panelists will address performance excellence and the metrics being used to measure it, delivery of value through efficient use of resources, and ways master planning translates into design and construction. In addition, attendees will hear the owner’s perspective of taking on a new construction project during an economic downturn, what the key criteria when deciding to build were, and how it was designed for clinical integration.

10:45AM – 1:45PM  [Exhibit Hall]
Exhibit Hall and Gallery of Architecture for Health
Lunch served in Exhibit Hall.

1:45PM – 3:00PM  [Plenary Session]
Celebration Health: A 20-Year Retrospective
Peter L. Bardwell, FAIA, FACHA, BARDWELL+associates, Columbus, Ohio; Charles (Chuck) Cole, President, HuntonBrady Architects, P.A.; Des Cummings, Executive Vice President, Florida Hospital; Paul Whalen, Partner, Robert A. M. Stern Architects

As one of the iconic health care facilities of the past two decades, Celebration Health has consistently served as a showcase of innovation and excellence in health care. Its reputation for delivering highly efficient, patient-focused and cost-effective care has allowed it to support optimum health and wellness for patients with an emphasis on healing the whole person—mind, body, and spirit. This session will combine the perspectives of visionaries and designers who have led the development of the Celebration Health campus over the past 20 years.

3:15PM – 4:30PM  [ACHA Master Series]
Flexibility and Change in Health Care Facility Design
Simon Bruce, RIBA, Associate AIA, Vice President, SmithGroup; W. H. (Tib) Tusler, FAIA, FACHA Emeritus

The one certainty we have in health care is that change will happen. It will come at different rates of intensity and magnitudes of order. As health care architects we are continuously challenged with the need to balance current and immediate priorities, including costs, with the consequence of this inevitable change. This presentation will briefly review previous initiatives and lessons learned as well as address how we can accommodate change from both a strategic and tactical perspective. This session will enable attendees to:

- Assess the implications of change in the context of hospital costs and operations.
- Explore strategies for accommodating change at the macro and micro level; propose tools for addressing each.
3:15 PM – 4:30 PM  [Fundamentals of PDC]

Half-Time at the New Parkland Hospital: Visiting the Project Team’s Locker Room

Hank Adams, AIA, ACHA, EDAC, Vice President and Director of Healthcare, HDR, Inc., Dallas; Walter Jones, AIA, LEED AP, Sr. Vice President, Facilities, Parkland Health and Hospital System, Dallas; Walt Massey, President, Consultancy Division, Balfour Beatty Construction, Dallas

Three years down and three years to go, it’s half-time at the New Parkland Hospital project. Join our multimedia tour of the largest hospital construction project in the country. See the buildings 60-cantilever, pre-fabrication and off-site logistics facility and Visualization, Collaboration, and Modeling Studio on the big screen while the owner, designer, and construction manager discuss the team’s achievements, challenges, and potential risks as they move toward the project finish line. This session will enable attendees to:

• Define a strategy to implement an integrated planning, design, and construction team without using a formal integrated project delivery contract.
• Identify operational efficiencies on behalf of the owner through building design.

3:15 PM – 4:30 PM  [Performance Metrics]

One Year Later: Evaluating Capital Health’s Energy Consumption vs. Strategic Energy Model

David Moreno, Partner, AKF Group LLC, Philadelphia

For this session, the project’s engineer and Capital Health’s facility manager will discuss the original design baseline for energy, the major impacts to the original design, and ultimately the final system protocols and operation analysis. They will present slides of the energy model and its results, report on energy usage for one year along with a comparative summary, and will share lessons learned with the audience. This session will enable attendees to:

• Describe the basis of an energy model and its specific relation to the Capital Health project.
• Compare the early model basis with that of the data generated for one year.

3:15 PM – 4:30 PM  [Innovation in Design]

Sustainable Health Care Design: Current State, Existing Challenges, and Future Trends

Mardelle McCuskey Shepley, DArch, FAIA, FACHA, EDAC, LEED AP, Texas A&M University; Rana Sagha Zadeh, PhD, MArch, Cornell University; Xiaodong Xuan, PhD, MArch.

Due to their complex nature, health care projects face multiple obstacles in achieving sustainability and reducing resource consumption. Improved quality and safety are usually accompanied by an increase in costs and consumption of natural resources, which may pose challenges to achieving sustainability objectives. This presentation explores the subject of sustainability in health care buildings by examining and analyzing national databases with new data consolidation and comparison techniques. This session will enable attendees to:

• Describe major existing barriers to instituting green trends in health care and potential solutions to removing these barriers.
• Explain the role of evidence-based design in accelerating the achievement of sustainable health care facilities.

3:15 PM – 4:30 PM  [Leadership]

The Transformation of American Health Care: Strategies to Thrive the Next Five Years

Marc Sauve, Vice President/Director of Healthcare Consulting, Gresham Smith & Partners

The next five years will be the most transformational time in the history of American health care. Providers must embrace a new business model, reconsider service offerings, and achieve a new level of clinical integration. This data-rich session will reveal mega trends and counter intuitive conclusions with key statistics. Marc Sauve weaves a consistent ribbon of humor between the usual “doom and gloom” projections for the
future. This session will enable attendees to:

• Visually review the evolution of health care; experience accelerating innovation from 2900 BC Egypt to 2050 and the Transplant Hospital of the future in a captivating multimedia experience.
• Quantify the driving forces of longevity, obesity, insurance reform, and the practices of the pharmaceutical industry.

3:15 PM – 4:30 PM  [Leadership]
The Future of Rural Facilities: Do Investments Make Cents?
Bob Gomes, FACHE, CEO, Prineville Memorial Hospital, Portland; Brian Haapala, MHSA, FACHE, Managing Director, Stroudwater Associates

Rural providers have tremendous capital needs and are increasingly affiliated with larger health care systems that face questions about what the facility strategy should be. The risk of investment can be mitigated by using the right approach: position the rural hospital as part of the system’s ambulatory care strategy to increase market capture and deploy accountable care strategies. The session will reveal the framework for planning and execution to achieve these outcomes. This session will enable attendees to:

• Identify the roles for rural health care providers that generate facility investment ROI in a post-reform delivery system.
• Review the data and best practices in developing facilities in non-urban locations and discuss the implications for facility leaders, managers, architects, builders, and developers.

4:30 PM – 6:30 PM  Exhibit Hall Reception

TUESDAY, FEBRUARY 26, 2013

7:00 AM – 8:00 AM  [Performance Metrics]
Deconstructing a Design-Build Project: Meeting Current and Future Needs of the Owner, Staff, and Patients
William Alton , Vice President Facilities and Construction, Mountain States Health Alliance; Dennis Georgatos, LEED AP BD+C, Project Executive, Skanska USA; Rob Johnson, Senior Superintendent, Skanska USA; Tara Myers, AIA, NCARB, EDAC, LEED AP BD+C, ESa, Senior Design Manager, Earl Swensson Associates

Presenters will provide lessons learned and best practices that can be carried over to any project through a case study on Smyth County Community Hospital. The information covered will assist executives as they respond to growing demands in an increasingly complex environment. Particular emphasis will be placed on the benefits of design-build, the impacts of BIM and prefabrication on the construction process, as well as the decision to pursue LEED Silver and its long-term benefits. This session will enable attendees to:

• Identify key short and long-term benefits of the design-build project delivery approach.
• Describe techniques and examples on the design-build approach and lean construction as it relates to schedule, quality, and safety through the utilization of prefabrication and BIM.

7:00 AM – 8:00 AM  [Innovation in Design]
Future Trends in Thermal Comfort Systems
James Moler, ASHE, LEED AP BD&C, NFPA, ASHRAE, Manager Engineering Systems, Turner Healthcare; Jim Crabb, President, PerryCrabb; Michael Hatten, Principal Engineer, Solarc Architecture and Engineering; Ron Holdaway, PE, CEM, LEED AP, Senior Mechanical Engineer Healthcare Divison, SSR; Michael Sheerin, PE, LEED AP, Principal, Director of Healthcare Engineering, TLC Engineerinfor Architecture; Arash Guity, Leader, Environmental Performance Team, Mazzetti Nash Lipsey Burch

This session highlights innovative thermal comfort strategies for hospitals that meet guidelines and standards with
dramatically improved energy performance. Industry thought leaders will speak about their experience and impressions of these new and recycled system concepts applied to current work. Audience members will have ample opportunity to ask questions as we consider alternatives to the “dinosaur” central plant. This session will enable attendees to:

- Recognize the underlying dynamics leading to the changing landscape of potential thermal comfort systems for health care.
- Understand the climate and program conditions that favor certain approaches.

7:00 AM – 8:00 AM [Regulatory Issues]

Implementation of an EOC Touring and Data Collection Tool at a Ten-Hospital Health Care System

John Alsterda, Manager of Regulatory Compliance, Advocate Health Care; Theodore Pappas, Vice President, Facility Services Division, Advanced Technologies Group, Inc.

This presentation will demonstrate how Advocate Health Care, through a consistent system-wide approach, has streamlined the EOC touring process and corresponding knowledge sharing on all of its ten hospital campuses. The session will be highly valuable to hospital personnel who wish to have a more proactive approach to regulatory and safety compliance on their campuses. Real-time utilization of the Advocate web-based EOC touring platform will be demonstrated. This session will enable attendees to:

- Identify how a properly structured EOC solution can effectively interface with other critical functions including life safety management, preconstruction risk assessment, and maintenance management processes.
- Learn how customized web and mobile technologies can increase communication among responsible departments involved with the EOC process.

7:00 AM – 8:00 AM [Fundamentals of PDC]

Non-Traditional Project Delivery Models at UCSF Medical Center

Alan Laurlund , Vice President, XL Construction; Katy Merwin , Director, Project Management Services, UCSF Medical Center, Office of Design and Construction; Kevin Ng, Project Manager, XL Construction; Scott Sypult, Construction Manager, CBRE Project Management at UCSF Medical Center

The increasingly complex, technical, and risky nature of health care construction projects has led to an increased need for a collaborative team approach to construction and preconstruction to ensure project success. This session will examine new non-traditional delivery models implemented by the UCSF Design and Construction team, and consider both the pros and cons of each delivery model. The presentation will feature a panel of participants in the IMRIS intra-operative MRI project, which was executed utilizing a non-traditional delivery method. This session will enable attendees to:

- Identify new and non-traditional project procurement and delivery methods being utilized by UCSF for their most difficult and challenging projects.
- Describe the benefits to construction, compliance, and project cost that are achieved by these delivery methods.

7:00 AM – 8:00 AM [Leadership]

Patient Protection and Affordable Care Act: Trends for the Future

Gerard Colman, FHFMA, FACHE, CPHIMS, MHA, Senior Vice President and Chief of Clinical Operations, University of Texas MD Anderson Cancer Center; Kelly Cuddeback, MBA, PMP, Associate Project Director, The University of Texas MD Anderson Cancer Center

This session will discuss the impacts of the Patient Protection and Affordable Care Act on overall clinical operations while exploring future trends emerging due to the legislation. Impacts on hospital strategic planning and construction will be discussed as they relate to the health care reform legislation. Supporting data on trends discussed will be presented throughout the session along with actual examples. This session will enable attendees to:

- Identify key points of the Patient Protection and Affordable Care Act that impact hospital strategic planning.
- Recognize future trends in operational planning that impact construction and design.

8:15 AM – 9:15 AM [Regulatory Issues]

ASHE Advocacy Highway: Roadmap to Codes and Standards

Chad Beebe, AIA, CHFM, CFPS, CBO, SASHE, Director, Codes and Standards, American Society for Healthcare Engineering (ASHE)

The regulatory environment in hospitals is a tangled web of codes and standards enforced by multiple authorities having jurisdiction. Future codes and standards must be streamlined and work together without conflict to ensure good stewardship of hospital resources. Cruise the ASHE Advocacy Highway to learn about ASHE codes and standards initiatives, major changes coming down the pike, and how you can get involved. The code development process, federal reimbursement systems, and pending changes in regulations will be addressed. This session will enable attendees to:

- Discuss the code development process.
- Describe the federal reimbursement system and how it applies.
8:15 AM – 9:15 AM [Leadership]

Capital Investment Decisions in Health Care
Frederick A. Hessler, Managing Director, Health Care Group, Citigroup, New York City

The volatility of financial markets, the unpredictability of cash reserves and tighter access to debt have caused health care organizations to become more conservative in their capital spending. Mr. Hessler will share his perspective on the current economic climate and how health care reform will affect the health care construction market. This session will enable attendees to:

• Discuss a long-term view of the bond markets and how this will affect health care construction.
• Describe the key performance measures that are critical if health care organizations are to successfully acquire capital.

8:15 AM – 9:15 AM [Fundamentals of PDC]

How Technology and Innovation Ensure Efficiency and Transparency at the Largest Public Health Care Project
Hank Adams, Vice President, Director of Healthcare, HDR Architecture; Patrick Casey, RA, Senior Program Controls Manager - New Parkland Campus, Parkland Hospital; David Graham, Project Director, BARA Joint Venture, Dallas; Shelly Sipes, Director, Program Management Solutions, Critigen

The Parkland Campus project is redefining public health care with a facility that will provide more patient-centered care in a second-to-none healing environment. Now three years into a six-year construction cycle, the Parkland Campus is on schedule and on budget. The Parkland program team will present successful technologies and innovations employed on the program over the past three years as well as lessons learned. This session will enable attendees to:

• Identify technologies that have contributed to cost-savings, transparency, and management efficiencies at Parkland.
• Describe how an innovative project controls methodology has ensured the program has remained on schedule and under budget.

8:15 AM – 9:15 AM [Innovation in Design]

Seven Levers to Maximize Value
John Chory, Principal, Trinity Health Group; Robert Gesing, AIA, Principal, Trinity Health Group

While the planning and design of health care facilities represents only a small part of the overall cost of a building over its lifetime, if properly leveraged, these efforts offer an outstanding opportunity to move an organization into a better business-centered position. Using real-life examples, this presentation will outline where and how to place seven “levers” that can benefit a health care system and maximize profitability in a constantly changing environment. This session will enable attendees to:

• Present metrics on the lifetime cost of buildings on a health care organization in order to provide perspective on opportunities to increase the value of planning, architectural, and engineering services.
• Describe examples of analyses that can be used to assess opportunities and maximize value streams.

8:15 AM – 9:15 AM [Performance Metrics]

Verification of Life Safety Systems is Key Process, Not an End Game Task
Dale Terry, CMGV, ASSE 6010, 6020, 6030, 6040 and 6050, CEO, FS Medical Technology

Health care facilities, by the very nature of their design, pose both unique and common hazards to successful building commissioning. Life safety systems form a key ingredient in hospital commissioning, and the incorrect timing of their certification can delay, increase cost, and add stress to the process. A case study describing two contrasting life safety system verification approaches as experienced in two large northern California health systems will be presented. This session will enable attendees to:

• Assess the importance of early involvement of life safety commissioning inspectors.
• Develop improved team concepts with life safety commissioning vendors.

8:15 AM – 9:15 AM [Performance Metrics]

Just Added! Hurricane Sandy: Lessons Learned

Hurricane Sandy wreaked havoc for health care facilities on the east coast. The aftermath provides us with critical lessons learned for disaster preparedness. Attend this session to learn about what went right and went wrong for health care facilities during hurricane Sandy. Visit www.pdcsummit.org for session details.
9:30 AM – 10:45 AM
[Plenary Session]
CEO Panel – A Comparative Discussion

Ian Morrison, PhD, Author, Consultant, and Futurist; Dan Rahn, MD, Chancellor of University of Arkansas for Medical Sciences (UAMS); Patrick Muldoon, FACHE, President and CEO, HealthAlliance Hospital

Strategic planning, health care reform, reimbursement and the geographic delivery of services all have an effect on design and construction of health care facilities. This plenary session will be a moderated discussion of these impacts – a comparison of differences from across the country from the CEO’s perspective. Ian Morrison will moderate this session. Each panelist will discuss the effects from his point-of-view, then it will be opened up for discussion and Q&A.

10:45 AM – 1:45 PM
Exhibit Hall and Gallery of Architecture for Health

Lunch served in Exhibit Hall.

1:45 PM – 3:00 PM
[Performance Metrics]
Innovative applications of BIM models in solving design and construction problems

Russ Alford Business Manager Medical & Research Solutions, Turner; Chad Clow, Principal, Cuningham Group Architecture, Inc.; Alex Hill, Partner, Clark/Kjos Architects LLC; Wayne Hunter, AIA ACHA NCARB, Partner, NTD Architecture

Specific applications of BIM models will be showcased as case studies. Cases will be either design or construction solution. For example one study will highlight the use for documenting zoning information and another will show underground utilities were mapped for a utility tunnel to be bored under public ROW. This session will enable attendees to:

- Describe BIM beyond its use as a drafting tool.
- Recognize specific uses that are dependent on the database capabilities of BIM.

1:45 PM – 3:00 PM
[ACHA Master Series]
Inpatient Care Units Improving Patient Care: New Research on Best Design Strategies for Effective Nursing

Kerrie Cardon, RN, AIA, ACHA, Healthcare Knowledge Consultant, Herman Miller Healthcare; Tom Clark, AIA, Principal, Clark/Kjos Architects, LLC

Architects have seemingly tried everything to create the ideal inpatient care unit, but which ones work best to increase nurses’ direct patient care time? This session will present findings from a recent nationwide study of twenty different inpatient units with various typologies and numerous approaches to decentralization. Results of the study are immediately usable by architects in designing or remodeling effective acute care units. This session will enable attendees to:

- Identify which inpatient unit typologies are most effective for nurses.
- Obtain 10 best practices for Lean IPU design for effective nursing practice.

1:45 PM – 3:00 PM
[Innovation in Design]
Evolution of the Kaiser Total Health Experience Design Standard

Barbara Denton, Director National Facilities Services Facilities, Planning Kaiser; Willy Paul, Executive Director, NW Region Capital Projects, Kaiser

Kaiser is an innovative healthcare provider and has taken this attitude of innovation to standardizing the appearance of their facilities. The goal of the standard is to enhance the total experience of a patient in each facility in a consistent way. This session will enable attendees to:

- Discuss why a standard is needed.
- Describe the design elements that are in the Kaiser standard.

1:45 PM – 3:00 PM
[Regulatory Issues]
Designing Medication Safety Zones

John Kouletsis, Executive Director of Strategy, Planning and Design, Kaiser Permanente; Eileen Malone, RN, MSN, MS, EDAC, Senior Partner, Mercury Healthcare Consulting, LLC

The 2014 Guidelines for Health Care Facilities: Design and Construction of Hospitals and Outpatient Facilities will address the need to create safe environments to promote safe medication use. As a major patient safety consideration, the Health Guidelines Revision Committee is dedicated to supporting all facets of this process. The speaker will link the safety rule’s importance to CMS’ Value-Based Purchasing Program, which will begin in 2013. Attendees will learn about new ideas, equipment, and techniques in medication safety. This session will enable attendees to:

- Discuss facilities-based environment basics for promoting safe medication use in an effort to reduce the risk of medication errors.
- Name three medication safety practices that are supported by implementing the 2014 Guidelines.
1:45 PM – 3:00 PM  [Fundamentals of PDC]

Operating Room HVAC Setback: Roundtable: Issues and Solutions

Linda Dickey, RN, MPH, CIC, Manager-Infection Control and Epidemiology, University of California Irvine Medical Center; Christy Love, LEED AP, Senior Mechanical Designer; Michael Hatton, MBA, CHFM, SASHE, System Executive, Memorial Hermann; Jon Inman, Principal, Mazzetti Nash Lipsey Burch

Operating Room HVAC setback has the potential to save significant energy and operating costs but has not yet been widely implemented for a variety of reasons. Discover the most successful strategies for addressing this challenge from a design and operation perspective, discuss ongoing issues that impede implementation, and get your questions answered as facilities staff, designers, and users share and compare their experiences in a roundtable format. This session will enable attendees to:

• Describe the benefit of implementing HVAC setback.
• Understand the requirements and considerations that will impact the type of strategy and control chosen.

3:15 PM – 4:30 PM  [Leadership]

Making the Business Case for Using the ASHE HFCx Process for Health Facility New Construction and Renovation Projects

Mark Kenneday, MBA, CHFM, FASHE, Vice Chancellor, Campus Operations, University of Arkansas for Medical Sciences; Ed Tinsley, PE, LEED AP, HFDP, CHFM, Managing Principal, TME, Inc.

Conventional commissioning practices designed to produce high performance health facilities frequently fail to yield their intended results. The newly developed ASHE HFCx process contains additional steps specifically designed to fill gaps...
in the conventional process. This presentation identifies the unique features of the ASHE HFCx process, its incremental cost as a function of project size and complexity, and its expected benefits including lower energy costs, lower infection rates, and improved clinical outcomes. This session will enable attendees to:

• Understand the average U.S. hospital cost structure and the common metrics used by the health facility C-suite including operating income, return on equity, capitalization structure, and cost per admission.
• Discuss how the ASHE HFCx process was specifically tailored to reduce the hospital cost structure, improve HCAHP scores, and improve clinical outcomes.

3:15 PM – 4:30 PM  [Regulatory Issues]
FGI’s New Guidelines for Residential Care Facilities—Creating a Person-Centered Approach to Elder Care.

Jane Rohde, AIA, FIIDA, ACHA, AAHID, LEED AP, Principal, JSR Associates, Inc.; Robert Mayer PhD, President; Hulda B. and Maurice L. Rothschild Foundation

In 2014, the Facility Guidelines Institute will be issuing a new guideline to support the national movement integrating person-centered practice and built environments into residential care communities. The transformation of elder services based on person-centered values and practices has significant implications for the design and construction of the residential communities where those services are delivered. This session will highlight person-centered care and its impact on the design and construction process. This session will enable attendees to:

• Create effective and efficient designs for residential care built environments, reflecting person-centered values.
• Identify current trends and initiatives based on the national movement to create and maintain built environments that promote quality elder care.

3:15 PM – 4:30 PM  [Regulatory Issues]
The Big Gets Bigger: Effects of Regulatory Requirements on Health Care Space Planning

Eric Lautzenheiser, Director of Health Facilities Planning, Francis Cauffman; Jeffrey O’Neill, AIA, ACHA, Senior Project Manager, University of Pennsylvania Health System

Have you noticed that when renovating a space in an existing hospital that a function does not fit into the same amount of space it used to? That is due to increased space requirements mandated by the FGI Guidelines, ADA, technological advances, and other codes and standards that affect the built environment. This presentation will compare programmatic elements and facilitate an interactive discussion on how these requirements affect hospital planning and programming. This session will enable attendees to:

• Identify comparisons to older model codes and their current requirements.
• Review building component programs and how they have grown in space need, while treating the same number of patients and using the same amount of staff.

3:15 PM – 4:30 PM  [Innovation in Design]
The New Hospital Prototype: Small Hospitals, Big Ideas

Robin Guenther, Principal, Sustainable Healthcare Design Leader, Perkins+Will; Sunil Shah, Executive Director - Capital Projects Group, Kaiser Permanente; Walter Vernon, PE, MBA, JD, LEED AP, Principal, Mazzetti Nash Lipsey Burch, San Francisco

Kaiser Permanente issued a worldwide call for ideas to create a generation of hospitals that will support a leaner, more environmentally effective, financially sound health care system. This session by Kaiser Permanente’s Executive Director for National Facilities Services and the leaders of one of the competition finalists will examine Kaiser’s goals for the project, the kinds of responses received, and the thinking embedded in the three final submissions. This session will enable attendees to:

• Discuss the pressures Kaiser Permanente anticipates as a result of health reform, and learn about outlines of its facility strategy.
• Cite some of the key insights to emerge from the thinking of the various teams, including the winning submission, which can help to inform your planning for the future.

4:30 PM – 6:00 PM
Evidence-based Design Accreditation and Certification (EDAC) Exam

EDAC certified individuals must demonstrate a clear understanding of the concepts and the ability to use an evidence-based design process to meet and/or exceed the recommended minimum requirements. Pre-registration for the exam is required by January 18, 2013. For registration details, visit www.pdcsummit.org and click on the “Exams” page.
In the quest for more sustainable facilities and increased energy efficiency, energy codes have developed elaborate requirements—presenting owners and designers with restrictive design parameters in many cases. This presentation will identify the challenges posed in present energy codes and explain how the new ASHRAE/ASHE 189.3: Standard for the Design, Construction, and Operation of High-Performance Sustainable Health Care Facilities will benefit health care facilities while providing accessible paths to compliance. This session will enable attendees to:

- Determine the applicability of prescriptive paths for complying with or achieving improved energy performance.
- Apply a checklist approach to design planning to ensure compliance with sustainability and energy standards.

7:30 AM – 8:30 AM [Leadership]

Helping to Provide Access to Healthcare in Developing Countries Around the World

Rick Berger, Senior Director, Site Planning/Design, BSA Life-Structures; David Martin, Vice President of Development and CareLink Board Chair, Duke Realty; Mary Owens, Director, TriMedX Foundation

CareLink attempts to find used medical equipment, furniture, and other needed items to give to front-line providers of health care in mission hospitals and clinics around the world. CareLink also leverages relationships with architectural and engineering firms that will provide technical expertise in these remote locations. Learn more about CareLink programs and how your facility/company could make a global impact for positive change. This session will enable attendees to:

- Identify what equipment is appropriate to donate and what is not.
- Discover how thinking creatively can solve problems when you don’t have clean power, air-conditioned environments, etc.
recommendations for lighting levels, glare control, and flexibility, a clever and inspired lighting design was created and implemented. This session will enable attendees to:

- Identify criteria for lighting for people with disabilities.
- Discuss options for energy-saving solutions while maintaining required usage lighting levels.

Show Me the Beef—Proving the Value of the HFCx Process

Gerry Kaiser, PE, LEED-AP, Director, Ascension Health; Damian Skelton, PE, CHFM, Executive Director of Facilities, St. Thomas Health; Robert Sharpe, CHC, Director Hospital Construction, The University of Alabama at Birmingham, UAB Hospital

The ASHE processes for health facility commissioning and retrocommissioning represent a sea change from conventional commissioning and retrocommissioning practices. Does the ASHE process work? Is it worth the additional cost? This presentation includes three case studies of real-world applications of the ASHE process including a new hospital on a greenfield site, an existing urban medical center, and an existing critical access hospital. The presentation identifies the actual scope, costs, and benefits for each application. This session will enable attendees to:

- Understand the basic components of the ASHE health facility commissioning and retrocommissioning process.
- Learn how the ASHE health facility commissioning process yielded the first ENERGY STAR-rated hospital in Alabama.

Noise and Particulate Monitoring...We Have an App for That

Anthony Colonna, Director - Innovation, Skanska USA Building Inc.; Bryan Durkin, Project Executive, Skanska USA Building Inc.; Pamela Sanders RNC-NIC, MSN, Nurse Manager - Neonatal ICU and Transition Nursery, Tampa General Hospital

Maintaining patient safety during the expansion and renovation project at the Tampa General Hospital Neonatal Intensive Care Unit was absolutely paramount. And that goal became the driving factor behind the development of an application that allowed the project team to remotely monitor noise, negative pressure, and particulate matter at the site. This presentation will address the challenges associated with working in an operational NICU and describe the development and implementation of an innovative monitoring application. This session will enable attendees to:

- Apply strategies to address the concerns of the hospital NICU staff when working in such a sensitive area of a hospital.
- Discover some lessons learned associated with the development of new technology.

Understanding LEED for Healthcare: Comparing Previous Rating Systems, Highlighting Anne Arundel Medical Center, Annapolis, Maryland

Carolyn Core, Senior Vice President for Corporate Services, Anne Arundel Health System and President of Anne Arundel Diagnostics Imaging, Anne Arundel Health System; Peter Doo, AIA, LEED AP, Founder, Partner, Doo Consulting LLC; Michael Moraz, MBA, LEED AP BD+C, Project Manager, The Whiting-Turner Contracting Company; Melissa Gallagher-Rogers, Director of Technical Solutions, U.S. Green Building Council

As of January 2012, health care projects are required to register under the LEED for Healthcare rating system. The LEED for Healthcare rating system includes differences from previous rating systems that will affect the level of certification a project team achieves and thus the planning and design process itself. This presentation will provide a comparison of the Healthcare rating system to previous rating systems using the examples from the Anne Arundel Medical Center (AAMC) projects. This session will enable attendees to:

- Understand the LEED for Healthcare rating system.
- Identify how the LEED for Healthcare rating system will affect planning, design, and construction for future projects.

Using Fuel Cells in Health Care Settings

Ron Bourgault, PE, LEED AP, Principal, Mazzetti Nash Lipsey Burch; Walter Vernon, PE, MBA, JD, LEED AP, Principal, Mazzetti Nash Lipsey Burch

Fuel cells have been developing slowly as an energy supply system for health care, despite the clean, reliable power they produce and their low emissions. Many environmentalists suggest fuel cells as strategies for replacing emergency generators. Yet hurdles of cost, system performance, size, and lack of familiarity have prevented the effective implementation in health care settings. This session will examine the barriers and suggest opportunities and developments that will render this a viable future technology. This session will enable attendees to:

- Distinguish between fuel cell technologies and their performance characteristics.
- Define financial strategies for implementing fuel cell technologies.
### 8:40 AM – 9:40 AM  |  [Performance Metrics]

**Water Damage Loss Prevention During and After Construction of Health Care Facilities**

Jennifer Fortunato, ARM, AIS, CRIS, Risk Engineering Consultant, Zurich Services Corporation; William Franklin, PE, CRIS, PMP, Senior Risk Engineering Consultant, Zurich Services Corporation; Kevin Imming, Project Manager, Linbeck Group, LLC; David Kubicki, Senior Risk Engineering Consultant, Zurich Services Corporation

Water damage is a leading cause of losses in health care projects both during construction and after occupancy. This session will present loss statistics, case studies, and lessons learned related to both water-related property damage and construction defect claims. After the loss discussion, the presenters will discuss best practices to prevent such losses.

This session will enable attendees to:

- List principal causes of water damage losses during construction.
- Describe the features of a plan to prevent water intrusion and potential damage during construction.

### 8:40 AM – 9:40 AM  |  [Regulatory Issues]

**How Will the 2012 Editions of NFPA 101 and NFPA 99 Impact Design Projects?**


The resounding question in the design community is: “How will applying the changes to NFPA 101 and NFPA 99 affect our design project?” With the possibility of adoption of NFPA 101 and NFPA 99 in the coming years the application of these changes to current design is a must. This presentation will provide an outline of the changes while providing application suggestions and pitfalls.

This session will enable attendees to:

- List reasons why design teams and owners should apply the newer editions of NFPA 101 and NFPA 99.
- Discuss how the changes to the code and standard might negatively affect a design.

### 9:50 AM – 10:50 AM  |  [Performance Metrics]

**Developing a Framework for Health Care Facility Management Data Collection to Support Lifecycle Building Information Modeling**

Allan Chasey, PhD, PE, LEED AP, Professor, Arizona State University; Arundhati Ghosh, Graduate Research Assistant, Arizona State University; Scott Root, AIA, LEED AP, VDC Director - Healthcare, Kitchell Contractors

The link between data collection and the use of the information is still an open question for facility operators. There is either too much or too little information or no defined process exists. The accuracy of the data collected is a defining factor of how successful this integration can be. This session addresses a structure for determining the appropriate information that should be available for data mining by facility managers.

This session will enable attendees to:

- Identify the sources of data and how to organize facility data for efficient and effective use by a facility manager.
- Assess the impact of BIM on the collection and organization of data.

### 9:50 AM – 10:50 AM  |  [Fundamentals of PDC]

**AHA Sustainability Roadmap Improves Financial, Patient Care, and the Environmental Bottom Line without Capital Expenditures.**

Laura Brannen, Sr Environmental Consultant, Mazzetti Nash Lipsey Burch; Steven Cutter, CHFM, MBA, Director - Biomedical and Facilities Engineering, Dartmouth-Hitchcock Medical Center; Bob Gance, CHFM, Director of Engineering, Children’s Hospital Dallas; Michael Hatton, MBA, RPA, SMA, CHFM, SASHE, System Executive, Memorial Hermann; Dick Moeller, PE, SASHE, HFDP, CHC, LEED AP, Principal-in-Charge, CDi Engineers

Members of ASHE’s Sustainability Task Force will share stories of energy, water, and waste stream management and other sustainable programs that have improved the bottom line and created a culture of change with surprising impacts beyond savings on utility bills. Learn how to use the AHA Sustainability Roadmap’s comprehensive set of projects to guide you through each project from creating the right teams, codes and standards compliance, using calculators, identifying LEED synergies, and more. This session will enable attendees to:

- Learn about the Sustainability Roadmap and the tools provided to then also know how to contribute to it and become a part of the solution.
- Integrate the tools of commissioning and retro-commissioning into your facility’s operating strategies.
New Theories on Plumbing and HVAC Systems

Bob Gulick, PE, LEED AP, Principal, Mazzetti & Associates, Portland, Ore.; Rick Hermans, PE, HFDP, Director of Training and Advanced Applications, McQuay International

The 2014 Guidelines for Health Care Facilities: Design and Construction of Hospitals and Outpatient Facilities is proposing to add language that will permit handwashing stations to be supplied by water at a constant temperature between 70°F and 85°F using a single-pipe supply. This change will assist in reducing Legionella, saving energy, and reducing first cost installation. This session will also highlight the major ventilation changes of ASHRAE 170: Ventilation of Health Care Facilities. This session will enable attendees to:

- Discuss solutions to designing water supplies for hand-washing facilities that can be cost-effective and assist in reducing energy consumption.
- Configure HVAC systems to deliver high-quality ventilation, heating, and cooling services at reasonable cost with low energy consumption.

Are There Holes in Your Safety Net?

Jain Malkin, CID, AAHID, EDAC, President, Jain Malkin Inc.

Health care leaders are facing huge challenges that demand a fresh and innovative strategy to deliver high quality care in response to as yet undefined reimbursement and quality performance measurements in the ambulatory setting. This presentation will challenge the traditional ways we view the design of ambulatory care facilities. This session will enable attendees to:

- Identify best practices and national models of “safety net” community health centers.
- Assess the evidence-based research for design of ambulatory care facilities.

Lean Application Regardless of Project Delivery Method

Mark Linenberger, Vice President/Division General Manager, Linbeck; Spencer Seals, Senior Construction Project Manager, Cook Children’s Medical Center; and Stewart Trapino, Vice President of Learning & People Development, Linbeck

Waste takes on many forms (discrete, synergistic, and systemic) in the project delivery processes that have been instilled in us over the past 100 years. The design and construction industry must recognize the need to change how projects are delivered to create real value for our clients and for ourselves.

This session will explore and identify opportunities to employ lean principles effectively in health care project development and delivery. This session will enable attendees to:

- Recognize opportunities to remove waste during delivery of current and future projects.
- Describe how to begin using lean principles to increase value for the customer

Just Added! Student Competition: Evaluation and Planning for Improvement of the Environment of Care

A team of students was invited to evaluate a hospital’s compliance with Joint Commission environment of care (EOC) guidelines. Visit www.pdcsummit.org for session details.

Closing Session and Keynote Presentation: The Checklist Manifesto: How to Get Things Right

Atul Gawande, MD, MPH, Professor of Surgery, Harvard Medical School; Professor in the Department of Health Policy and Management, Harvard School of Public Health; author of The Checklist Manifesto

Dr. Gawande offers a unique perspective on the practice of medicine, ethics, health care and the human struggle to do better. In his most recent book, The Checklist Manifesto, he argues that the use of simple checklists can improve our efforts in many fields—especially health care—in today’s complex world. Dr. Gawande is a practicing surgeon, a staff writer for The New Yorker and an associate professor at Harvard Medical School. He served as a senior health policy adviser in the Clinton presidential campaign and White House from 1992 to 1993. He has authored three bestselling books and is recognized as one of the world’s most influential thinkers. He has won two National Magazine Awards, Academy Health’s Impact Award for highest research impact on health care, a MacArthur Award, and selection by Foreign Policy magazine and TIME magazine as one of the world’s top 100 influential thinkers.

Certified Healthcare Constructor (CHC) Exam

Earn your CHC and enjoy the pride of recognition of being among the elite in a critical field of health care. The CHC is a premier credential based on a sound assessment that provides distinction in an increasingly competitive marketplace. For information on the deadline for applications and how to apply, go to the “Exams” page at www.pdcsummit.org.
PDC SUMMIT PRICING

ASHE, AIA/AAH, ACHA, ASHRAE, and AAHID members
Earlybird: $800
After January 15, 2013: $900

Non-members
Earlybird: $980
After January 15, 2013: $1,080

Department of Defense/Veterans Administration (DOD/VA)
Earlybird: $525
After January 15, 2013: $525

Students
Earlybird: $300
After January 15, 2013: $325

One-day Registration
This fee includes all the activities for the day.
ASHE, AIA/AAH, ACHA, ASHRAE, and AAHID members: $350
Non-members: $450

One-day Exhibit Hall Only
Admittance to the exhibit hall on the selected day only.
Fee: $75/day

Guest Registration
Guests can participate in the PDC Summit for an additional fee. The guest fee includes the receptions on Sunday and Monday evenings, lunches in the exhibit hall on Monday and Tuesday, and admission to the opening and closing sessions. Please note: no one under the age of 16 will be allowed on the exhibit floor.
Guest fee: $100

Preconference Program Pricing
Preconference Infection Control Workshop
ASHE, AIA/AAH, ACHA, ASHRAE, and AAHID members: $375
Non-members: $475

Preconference Certified Healthcare Constructor Exam Review Workshop
ASHE, AIA/AAH, ACHA, ASHRAE, and AAHID members: $375
Non-members: $475

ACHA Health Care Facility Tours
ACHA Tour fee: $50

AAHID Exam Preparation Workshop
Visit www.pdcsummit.org for pricing and registration information.

REGISTRATION

Online Registration
Submit your online registration form at the PDC Summit website at www.pdcsummit.org. All online registration requires credit card payment (Visa, MasterCard, or American Express). Online registrations will be accepted until Sunday, February 24, 2013.
Please note: For your name to be included on the attendee list distributed on site, your registration must be received by 5:00 PM Central Time on Friday, January 24, 2013.

Registrations by Mail
Complete both sides of the registration form and mail it with your check or credit card authorization (Visa, MasterCard, or American Express) to:
ASHE/AHA
75 Remittance Drive, Suite 1976
Chicago, IL 60675-1976
Mailed registrations must be received by January 15, 2013.

Faxed Registrations
All faxed registrations require credit card payment with Visa, MasterCard, or American Express. Fax both pages of the registration form to 805-654-1676. Fax registration closes on January 15, 2013.

On-Site Check-in
Registration and conference materials will be available when you arrive at the conference registration desk. If you register under the DOD/VA or student rates, a valid photo ID, indicating your status as a DOD/VA staff member or a full-time student, must be presented at the registration desk. All registrants with unpaid balances will be asked for payment with a check or credit card prior to admittance to the sessions.

Substitutions
Registrants unable to attend may send an alternate. If the alternate is not an ASHE, AIA/AAH, ACHA, ASHRAE, and AAHID member, the non-member differential must be paid on site.

Restrictions
By their participation, program participants agree to refrain from marketing products or services during the course of the program.
HOTEL INFORMATION

Hotel Reservations
Book your reservation by February 1, 2013, 5:00 PM Eastern Time to receive the PDC Summit discounted room rate. Please note that only one reservation can be booked per registrant.

PDC Summit Hotel
Hilton San Francisco
333 O’Farrell Street
San Francisco, CA 94102

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The rates above do not include tax (subject to change without notice).

The official housing/travel provider for the 2013 PDC event is the San Francisco Hilton Union Square. By using the official travel provider you can ensure that you are being booked in the housing block reserved by AHA and take advantage of the group discounted rates. Please make your reservations and direct any inquiries related to hotel reservations for the 2013 PDC event to the hotel at the link on this website. Reservations can only be made on this link.

Be aware that you may be solicited by other companies to book your hotel room or make travel arrangements for the 2013 PDC event. Such companies are not affiliated with and are not sponsored or approved by AHA to provide travel arrangements for the 2013 PDC. AHA will not be responsible for any actions or omissions of such companies.

Make Your 2013 PDC Summit Hotel Reservation Online
Hotel reservation online booking is available 24 hours a day, seven days a week. Visit www.pdcsummit.org and click on the “Hotel & Travel” page to access the online hotel reservation link.

Convention Center
Moscone Center West
800 Howard Street (at the corner of Fourth & Howard Streets)
San Francisco, CA 94103

AHA TRAVEL PLANNING SERVICE

Air Travel
ASHE is offering special air travel discounts for all attendees of the 2013 PDC Summit. Simply call one of our preferred airlines directly to receive these special fares.

For Delta Airlines reservations and ticketing, please call Delta Meeting Network reservations at 800-328-1111, Monday through Friday, 7:00 AM – 7:30 PM Central Time. Refer to Meeting Code NMEXP. You may also go to www.delta.com and input the Meeting Code into the Meeting Event code box to obtain the discounted fare and avoid any service fees.

For United Airlines ticketing, please call their Special Meeting Desk at 800-521-4041 and refer to Meeting ID Number ZNN2237398 to receive a 2 – 15% discount off applicable fares, including First Class.

Car Rental
ASHE has negotiated special car rental rates from Hertz for attendees of the 2013 PDC Summit. To reserve your special meeting rates, please provide CV#033L0017 to your corporate travel department or your travel agent when making reservations. You can also make reservations online at www.hertz.com or call Hertz directly in the United States and Canada at 800-654-2240. At the time of reservation, the meeting rates will be automatically compared to other Hertz rates, and you will be quoted the best comparable rate available.

GENERAL INFORMATION

Recordings
ASHE may electronically record portions of this program. By attendance or participation in discussions, the registrant agrees that ASHE may electronically copy and distribute registrant’s attendance at and involvement in program discussions and question/answer periods. No individual or entity other than ASHE may electronically record or copy any portion of this program for any purpose without prior written consent from ASHE.

Americans with Disabilities Act Information
We want you to enjoy your participation in the conference. If you have any special needs or requirements due to disability or if you need any auxiliary aids or services, please let us know on the registration form or contact ASHE at 312-422-3800.

Continuing Education Units/Learning Units
Applications for learning units from the American Institute of Architects (AIA) and continuing education units from the American Hospital Association (AHA) and the American Academy of Healthcare Interior Designers (AAHID) have been submitted. Each attendee can attend 16 hours of learning at the PDC. Also, an additional 4 hours for attending an ACHA Facility Tour, as well as 7 hours of credits for attending one of the preconference programs on Sunday.
2013 PDC SUMMIT REGISTRATION MAIL/FAX FORM

Mailed and faxed registrations are accepted until January 15, 2013. Only online registrations will be accepted after that date. Online registrations will be accepted until February 24, 2013. The early bird rate will apply only to registrations mailed, faxed or received online by January 15, 2013. For additional registrants, please duplicate both sides of this form. Representatives from exhibiting companies must use the Exhibitor Registration Form included in the Exhibitor Service Kit.

If you would like to pay with Visa, MasterCard or American Express, please register online at www.ashe.org/pdcsummit.

Attendee Information ASHE Code #312PDC2013

(Please type or print clearly.)

Last Name: ____________________________ Middle Initial: ____________________________
First Name: ____________________________ Last Name: ____________________________

Organization: ________________________________________________________________
Mailing Address: ______________________________________________________________
City: ________________________________ State/Province: ____________________________
Zip/Postal Code: ______________ Phone: ______________________ Fax: _________________________
Cellular Phone: ______________________ Evening Phone: _________________________

E-mail: ____________________________________________
Designation: ☐ FASHE ☐ SASHE ☐ CHC ☐ FAIA ☐ FACH ☐ CHFM ☐ AIA ☐ ACHA ☐ OTHER
If applicable, select which organization you are a member of:
☐ ASHE ☐ ACHA ☐ AIA/AAH ☐ AAHID ☐ ASHRAE
Member ID: ____________________________________________

Do you want future mailings sent to the above addresses? ☐ Yes ☐ No

FACILITY TOURS - $50 (You can only sign up for one tour):
☐ Tour 1 - UCSF Mission Bay
☐ Tour 2 - Stanford Outpatient Building
☐ Tour 3 - Kaiser Oakland
☐ Tour 4 - Sutter Eden Medical Center
☐ Tour 5 - John Muir Medical Center (New Tower)

Payment Information

Payment must accompany this form. You will not be registered until payment is received. Please allow 2-3 weeks for your registration to be processed. Confirmation will be mailed within 3 weeks of receipt of form and payment. Cancellation must be received in writing no later than February 4, 2013, for a refund less a $100 cancellation fee.

If you would like to pay with Visa, MasterCard or American Express, please register online at www.pdcsummit.org.
## Attendee Profile

Please assist ASHE by answering the following questions. Exhibitors, please skip these questions.

1. **Is this the first time you have attended the PDC Summit?**
   - Yes
   - No

2. **Please indicate your level of responsibility:**
   - Principal/owner/chief executive officer (P)
   - Vice president/director (multiple department responsibility) (V)
   - Manager/supervisor/coordinator (responsible for area(s) within the department) (M)
   - Staff (no management responsibility) (S)
   - Contractor (C)
   - Architect (A)

3. **Please indicate all functional areas in which you have direct involvement:**
   - Facilities management (F)
   - Construction (CS)
   - Clinical biomedical engineer (CL)
   - Design (D)
   - Safety management (SA)
   - Support services (SU)
   - Technology integration (T)
   - Consulting (CD)

4. **What is your role in purchasing decisions:**
   - Final decision maker on all products
   - Final decision maker on some products
   - Recommend products
   - Investigate products
   - None

5. **Which best describes your organization:**
   - Health facility
   - Architectural / Design firm
   - Construction firm
   - Manufacturing
   - Consultant
   - Other

6. **Please answer if you are a health facility based employee:**
   - Yes
   - No

7. **Would you like to receive communications via email from exhibitors prior to the PDC?**
   - Yes
   - No

## Concurrent Sessions

For our planning purposes and to determine room size, please let us know which sessions you are most interested in attending:

### Concurrent Sessions I

**Monday, February 25 – 3:15-4:30PM**

- Half-Time at the New Parkland Hospital: Visiting the Project Team’s Locker Room
- Sustainable Health Care Design: Current State, Existing Challenges and Future Trends
- The Transformation of American Health Care: Strategies to Thrive the Next Five Years
- The Future of Rural Facilities: Do Investments Make Cents?
- One Year Later: Evaluating Capital Health’s Energy Consumption vs. Strategic Energy Model
- Patient Immobility Risk Assessment and Design Implications
- Flexibility and Change in Health Care Facility Design

### Concurrent Sessions II

**Tuesday, February 26 – 7:30-8:00AM**

- Non-Traditional Project Delivery Models at UCSF Medical Center
- Future Trends in Thermal Comfort Systems
- Patient Protection and Affordable Care Act: Trends for the Future
- Deconstructing a Design-Build Project: Meeting Current and Future Needs of the Owner, Staff, and Patients
- Implementation of an EDC Touring and Data Collection Tool at a Ten Hospital Healthcare System
- Selecting Surfaces and Furnishings for Health Care Facility Projects: Accessing Current Evidence

### Concurrent Sessions III

**Tuesday, February 26 – 8:15-9:15AM**

- How Technology and Innovation Ensure Efficiency and Transparency at the Largest Public Health Care Project
- Seven Levers to Maximize Value
- Capital Investment Decisions in Health Care
- Verification of Life Safety Systems is a Key Process, Not an End Game Task
- ASHE Advocacy Highway: Roadmap to Codes and Standards
- Hurricane Sandy: Lessons Learned

### Concurrent Sessions IV

**Tuesday, February 26 – 1:45-3:00PM**

- Operating Room HVAC Setback Roundtable: Issues and Solutions
- Evolution of the Kaiser Total Health Experience Design Standard
- Innovative Applications of BIM Models in Solving Design and Construction Problems
- Designing Medication Safety Zones
- The Role of the Fire Protection Engineer in the Building Design and Construction Process
- Inpatient Care Units Improving Patient Care: New Research on Best Design Strategies for Effective Nursing

### Concurrent Sessions V

**Tuesday, February 26 – 3:15-4:30PM**

- Hybrid Operating Rooms: The Challenge for Planning, Design, and Construction
- The New Hospital Prototype: Small Hospitals, Big Ideas
- Making the Business Case for Using the ASHE HFXc Process for Health Facility New Construction and Renovation Projects
- Achieving High Performance Operation with Energy Alarms
- The Big Gets Bigger: Effects of Regulatory Requirements on Health Care Space Planning
- FGI’s New Guidelines for Residential Care Facilities: Creating a Person-centered approach to Elder Care

### Concurrent Sessions VI

**Wednesday, February 27 – 7:30-8:30AM**

- Energy Efficient and Thoughtful Lighting Design for Health Care
- A Day in the Life: Healthcare 2020
- Helping to Provide Access to Health Care in Developing Countries Around the World
- Show Me the Beef—Proving the Value of the HCFx Process
- Acoustics for Hospitals: FGI Guidelines, HCAHPS, and LEED
- Bad Medicine? How Prescriptive Energy Codes Will Ruin Architecture

### Concurrent Sessions VII

**Wednesday, February 27 – 8:40-9:40AM**

- Noise and Particulate Monitoring...We Have an App for That
- Using Fuel Cells in Health Care Settings
- Water Damage Loss Prevention During and After Construction of Health Care Facilities
- Understanding LEED for Healthcare: Comparing Previous Rating Systems, Highlighting Anne Arundel Medical Center, Annapolis, Maryland

### Concurrent Sessions VIII

**Wednesday, February 27 – 9:50-10:50AM**

- AHA Sustainability Roadmap Improves Financial, Patient Care, and the Environmental Bottom Line without Capital Expenditures
- Are There Holes in Your Safety Net?
- Developing a Framework for Health Care Facility Mangement Data Collection to Support Lifecycle Building Information Modeling
- Lean Application Regardless of Project Delivery Method
- New Theories on Plumbing and HVAC Systems for Health Care Facilities
- Evaluation and Planning for Improvement of the Environment of Care