



AIA, EDAC, AAH

Candidate Application & Portfolio
American College of Healthcare Architects

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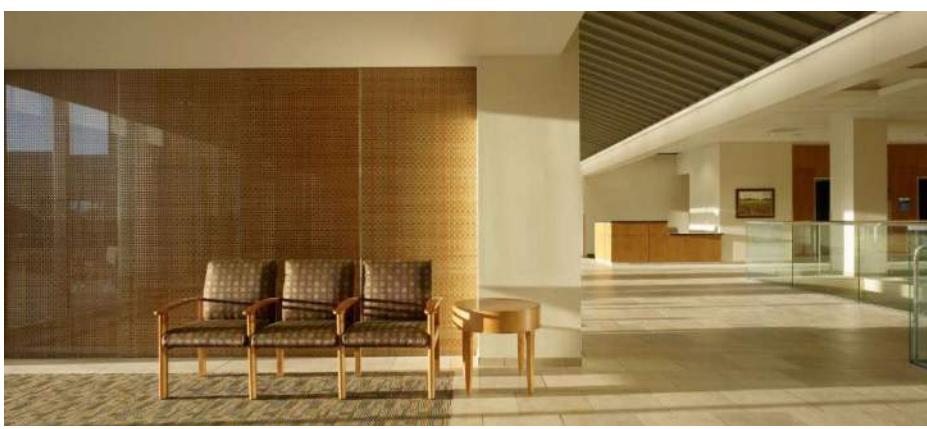


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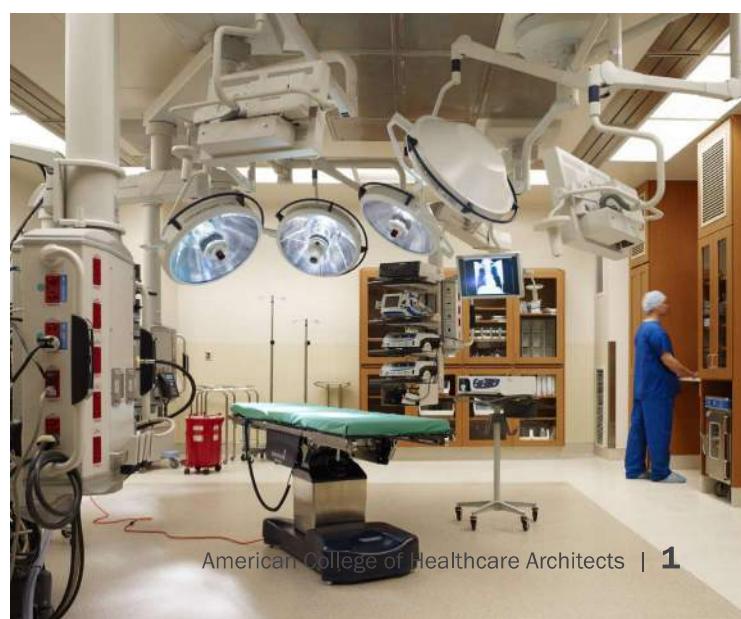
Application

Copy of Architecture License

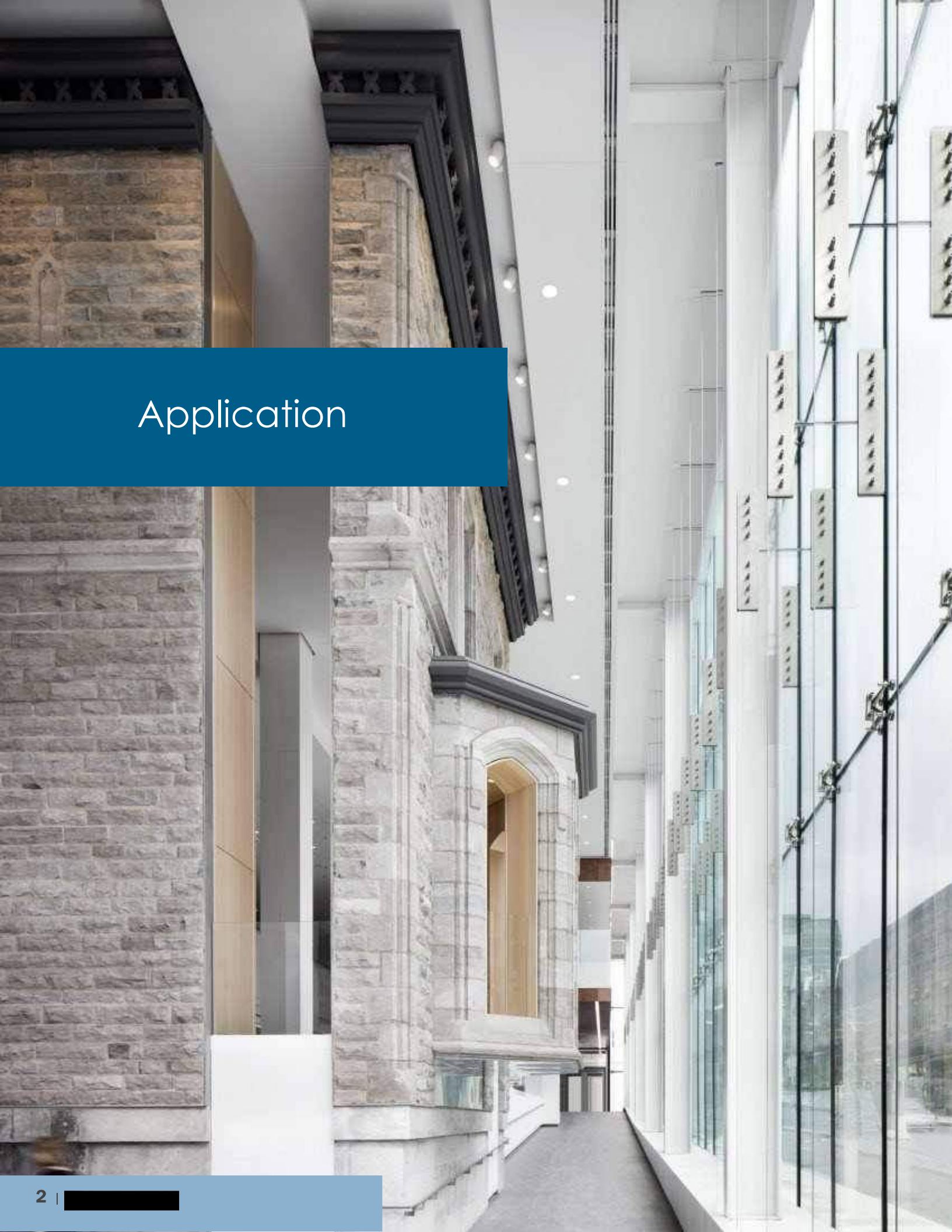
Client References

Architect References

Portfolio



Application



American College of Healthcare Architects Examination Application

GENERAL INFORMATION (Typewritten Only)

Name:
Last (Maiden) First Middle

AIA Member: Yes, Member Number: No

Mailing Address:
Company Street

Sacramento CA 95814 USA
City State/Province Zip Country

Telephone Number: Email Address:

Gender: Male Female Date of Birth: m/d/year Country of Birth: U.S. Canada Other _____ (specify)

Do you have, or have you ever had a restriction, condition, limitation, suspension, or revocation of a license to practice architecture in any state or jurisdiction of the United States, Australia, or provinces of Canada? Yes No

If Yes, you are required to submit along with your application your statement providing the details of any disciplinary action and restriction, condition, limitation, suspension, or revocation of your license, including the names of the disciplining agency or licensing board, the date thereof, the subject matter and sanctions.

Have you ever entered into a consent or similar agreement with a registration board in connection with a disciplinary action? Yes No

If Yes, you are required to submit with your application your statement providing the details of such consent/agreement including the names of the disciplining agency or licensing board, the date thereof, the subject matter and sanctions.

Have you ever been denied registration? Yes No

If Yes, you are required to submit with your application your statement providing the details of such denial including the names of the disciplining agency or licensing board, the date thereof, the subject matter and sanctions.

Degree: (1) BArch (2) MArch (3) DArch (4) No College
 (5) Other Date Conferred:
(specify) m/d/year

College/University: Art Center College of Design, Pasadena, CA

Additional University if necessary:

If you graduated from an architectural school outside the United States, its territories, Canada or Australia, you **must** submit comparable credentials from that institution.

QUALIFICATIONS:**License:**

Have you held a current license to practice architecture in at least one state or jurisdiction of the United States of America, its territories, or provinces of Canada or Australia for the past three years? Yes No

Indicate date and state of **current** registration:

Original Date: 5/31/2019 State/Province: CA Expiration Date: 5/31/2021

Indicate date and state of **original** registration:

Original Date: 11/12/2004 State/Province: CA Expiration Date: 5/31/2007

List all additional registrations: (attach additional sheets if necessary) _____

Practice:

I am currently employed by:

<input checked="" type="checkbox"/> A private architectural practice	<input type="checkbox"/> A private planning/consulting practice
<input type="checkbox"/> A healthcare organization	<input type="checkbox"/> A public institution
<input type="checkbox"/> I am retired from active practice	<input type="checkbox"/> Other _____

Name of firm: Stantec _____

Address: 555 Capitol Mall, Suite 560, Sacramento, CA 95814 _____

Phone No. and Contact: ██████████ _____ **Healthcare Principal, Western Region**

<input type="checkbox"/> Sole Proprietor	<input type="checkbox"/> General Partner	<input type="checkbox"/> Corporation Director/Shareholder
<input checked="" type="checkbox"/> Employee	<input type="checkbox"/> Other _____	

PREVIOUS PRACTICE SUCH AS PUBLIC INSTITUTION OR GOVERNMENT ORGANIZATION AND/OR NON-TRADITIONAL PRACTICE HISTORY NARRATIVE (OPTIONAL): ACHA wishes to encourage applications from the full range of architects with widely differing roles in the healthcare field. Some applicants may practice in non-traditional roles or may have been focused on a limited number of projects, project types or specialized practice roles over the past five years. In order to provide a better understanding of your healthcare architecture experience, attach a one page 8.5"x11" narrative summary of other healthcare experience from date of initial registration to present.

EXPERIENCE

Employment Experience

(List experience chronologically, beginning with the most recent. Attach additional sheets as necessary.)

Firm Name	Dates of Employment
Stantec	Oct 2018-present
Lionakis	2017-2018
The Stahl Companies	2014-2017
HY Architects	2012-2014
CannonDesign	2011-2012

Experience in Healthcare:

(Demonstration of practice as a licensed architect of not less than a minimum 6,000 hours total healthcare practice/experience, within the last five years.)

Year	Estimated Number of Relative Annual Hours in the practice of Healthcare Architecture: indicate hours per year and five year total (based upon 2,080 available hours/year)		
2018	2080 hours	2015	2080 hours
2017	2080 hours	2014	2080 hours
2016	2080 hours	Total	10,400

Years of Healthcare Architecture Experience:

26 yrs

How many years have you been practicing Healthcare Architecture?

Project Experience:

(Provide a complete, chronological listing of all health facility projects over the past 5 years beginning with the most recent first. This listing should coincide with the portfolio submission per eligibility requirements. Attach additional sheets as necessary.)

Project Name/Location	Describe your Role	Phone Number and Position of Project Contact	Date of Project Completion	Total Cost – Construction (C) and Project (P)
Example: XYZ Hospital City, State	planner	555-555-5555 Jane Doe Facilities Director	12/2007	\$15 million C \$22 million P
University Health Network Integrated Master Plan (~ 11M SF)	Sr. Healthcare Planner		TBD	TBD ~ \$7.85B (P)
UC Davis Eye Center Sacramento, CA	Sr. PM		Unsuccessful RFP Design Competition (SD)	\$54.5M C
Kaiser Permanente Property Profiles 5 sites - Denver, CO	Project Director		2018	N/A
Mercy Hospital of Folsom Family Birthing Center & Surgery Expansion Study Folsom, CA (Dignity Health)	Sr. Healthcare Planner/Project Director		2018	N/A

See additional pages for more **Project Experience**

American College of Healthcare Architects
Exam Application
Additional Page for Project Experience

Project Name/Location	Describe Your Role	Phone No. & Position of Project Contact**	Date of Project Completion	Total Cost - Construction (C) & Project (P)**
Mercy San Juan Medical Center - New NICU Carmichael, CA	3rd Party PM		2020	\$40M (C)
Mercy San Juan Medical Center - LDRP Remodel Carmichael, CA	3rd Party PM		2020	\$40M (C)
Washington/UCSF Prenatal Diagnostic Center Fremont, CA	Sr. Healthcare Planner		2018	\$1.5M (P)
Washington Hospital, Center for Joint Replacement, Equipment Replacement Fremont, CA	Sr. Architect		2018	\$1M (P)
Dignity Health Specialty Clinic Woodland, CA	3rd Party PM		2016	\$2M (P) \$1.2M (C)
St. Helena Hospital 14-Bed Geriatric Behavioral Health Conversion St. Helena, CA	Sr. Architect/Sr. Healthcare Planner		2016	\$1.5M (C)
Kaiser Permanente Outpatient Endoscopy Center Renovation South Sacramento, CA	Sr. Healthcare Planner		2015	Unknown**
Kaiser Permanente Outpatient Behavioral Health Clinic Expansion Pleasanton, CA	Sr. Architect/Sr. Healthcare Planner		2014	\$1M (P)
Dignity Health Specialty Clinic Expansion Davis, CA	Sr. Architect/Sr. Healthcare Planner		2014	\$600K (C)

November 21, 2019 ACHA Exam Application - Teresa Endres, AIA, EDAC, AAH

**Not all Project Cost or Construction data is available for the project listed above. Some Project Managers are no longer with the healthcare organization & new contact information is not available.

American College of Healthcare Architects Exam Application Additional Page for Employment Experience	
Firm Name	Dates of Employment
Vanir Construction Management	2009-2011
HOK	2007-2009
Perkins + Will	2006-2007
Anshen + Allen	1998-2006
VBN Architects	1996-1998
VZM Architects & Engineers	1994-1996

APPLICANT CONSENT

After reading the following statement in its entirety, affix your signature and the date in the spaces provided.

I, the undersigned, in connection with my application for certification by the American College of Healthcare Architects, hereby authorize the American College of Healthcare Architects, now and in the future, to request, procure, and review any information regarding my professional practice, moral standing and character, including any information related to any disciplinary action related to the practice of architecture by any state licensing board in which I have practiced architecture.

I hereby authorize the American College of Healthcare Architects, now and in the future, to request and procure such information from any individual or institution, each of which shall be absolutely immune from civil liability arising from any act, communication, report, recommendation or disclosure of any such information even where the information involved would otherwise be deemed privileged so long as any such act, communication, report, recommendation or disclosure is performed or made in good faith and without malice.

I hereby authorize the American College of Healthcare Architects to supply a copy of this consent, which has been executed by me, to any individual or institution from which it requests information relating to me.

Name of Applicant (print or type)

Signature of Applicant Date



Copy of Architecture License



CALIFORNIA ARCHITECTS BOARD



CERTIFIES THAT



having given satisfactory evidence of competence, is hereby granted the right to practice architecture and use the title architect in the State of California as provided in the Architects Practice Act.

LICENSE NUMBER [REDACTED] GRANTED [REDACTED]

IN WITNESS WHEREOF WE SET OUR HANDS AND SEAL



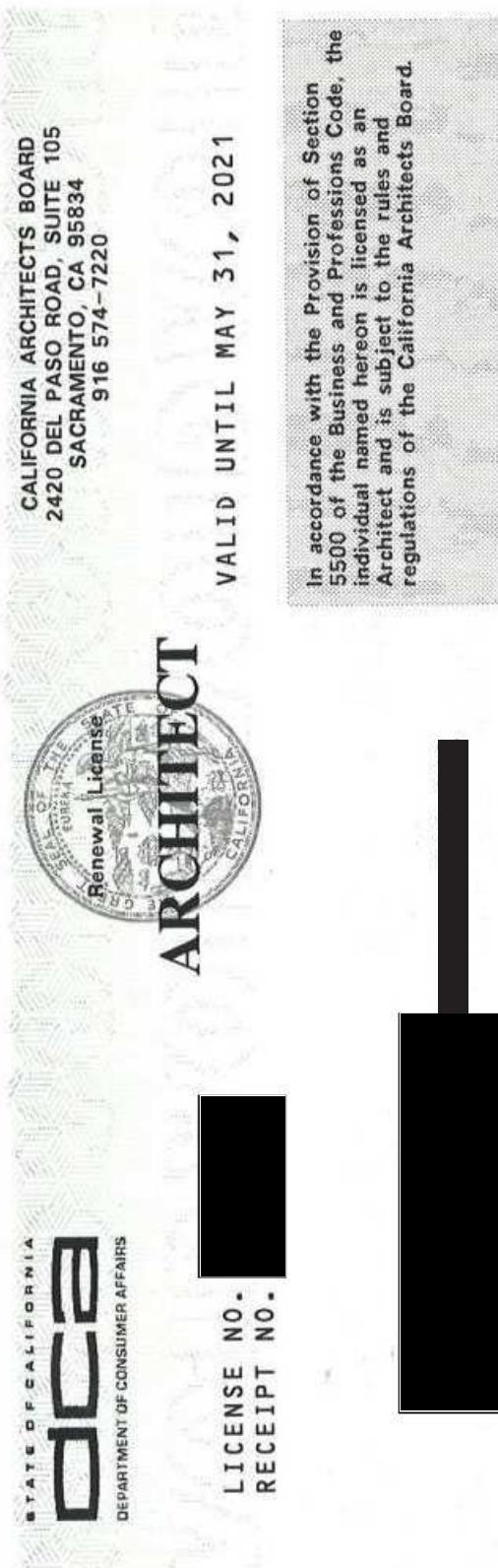
Original Architecture
License - Granted 11/12/04

Cynthia Choy, OAS

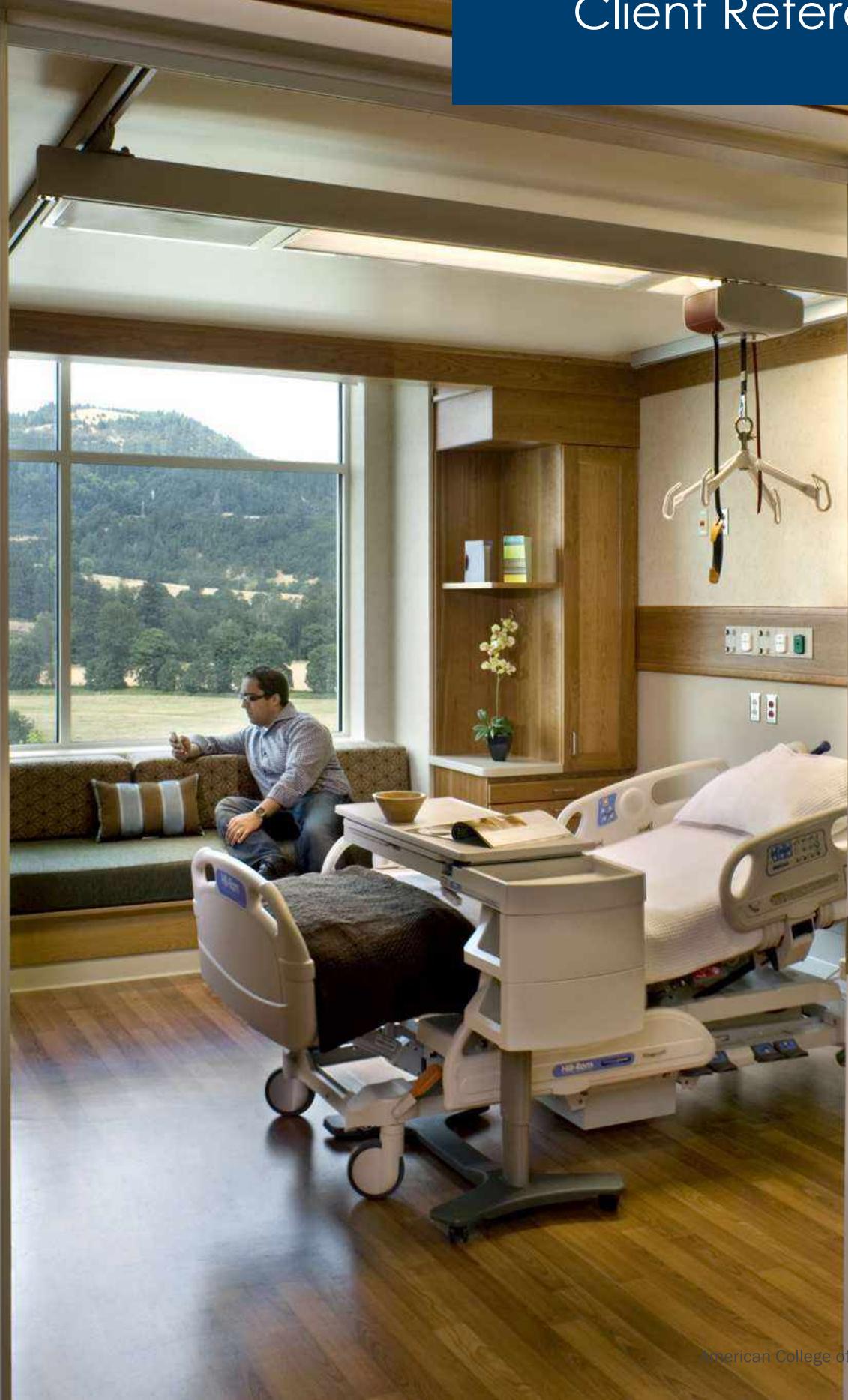
SECRETARY

John Hall

PRESIDENT



Client References



December 29, 2009

American College of Healthcare Architects
P.O. Box 14548
Lenexa, KS 66285-4548

RE [REDACTED] AIA

To Whom It May Concern:

This letter is a letter of reference for [REDACTED] as part of her membership application to the American College of Healthcare Architects. [REDACTED] was the lead planner for our Redwood City Replacement Hospital in her previous employment with HOK Architects. The Redwood City Hospital is the regional neurological center. The replacement hospital is planned at 265,000sf and 149 beds.

Prior to her employment at HOK, [REDACTED] worked at Perkins & Will where she worked on the planning of several Medical Office Buildings for Kaiser Permanente.

[REDACTED] commitment to healthcare planning and design make her an excellent candidate for the American College of Healthcare Architects.

Sincerely,

[REDACTED]
Strategy Planning & Design Principal Medical Architect/Planner

1800 Harrison Street, 19th Floor
Oakland, California 94612
(510)625-2600
Fax (510)625-2601

ALAMEDA COUNTY MEDICAL CENTER



*Highland Campus • Fairmont Campus
John George Psychiatric Pavilion
Ambulatory Healthcare Services*

10 December 2009

American College of Healthcare Architects
18000 W. 105th Street
Olathe, KS 66061-7543

To Whom It May Concern:

This letter is written as an endorsement of [REDACTED] AIA, for her membership application to the American College of Healthcare Architects (ACHA). [REDACTED] has been the Senior Medical Planner for the Alameda County Medical Center's new Acute Tower Replacement (ATR) project with HOK from July 2007 until December 2008. She is currently the Senior Medical Planner on the ATR project for Vanir Construction Management. While at HOK [REDACTED] was responsible for the design of the medical planning for the new 246,778 s.f. Acute Care Tower as well as a new 72,230 s.f. Satellite building which will house future clinics. As part of the Bridging Documents architecture firm, [REDACTED] led user group meetings during the Schematic Design of the ATR project. Since joining Vanir, [REDACTED] participated in the evaluation of the Design-Build proposals. She led the program and medical equipment evaluation teams and participated in the building aesthetics evaluation team.

As the Facilities Director for Alameda County Medical Center I have had the pleasure of working with [REDACTED] in the development of the ATR project. While leading the user group meetings she was able to keep all conversation on track and resolved any conflicts which arose. As such we were able to get 100% of the users to sign off on the Schematic Design.

Based on my experience working with [REDACTED] I recommend [REDACTED] for membership in the American College of Healthcare Architects.

Sincerely,

[REDACTED]

Alameda County Medical Center

[REDACTED]

Highland Campus

1411 East 31st Street • Oakland, California 94602 • (510) 437-4800



Architect References





Construction Management, Inc.

177 N. Church Avenue / Suite 315
Tucson, AZ 85701
TEL 520-628-7777
FAX 520-514-5389
www.vanir.com

June 22, 2010

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American College of Healthcare Architects
P.O. Box 14548
Lenexa, KS 66285

Dear Colleagues:

This letter of reference is provided for [REDACTED] AIA, and an applicant to the ACHA. [REDACTED] has been engaged in the areas of programming, planning and design throughout her professional career on a wide range of healthcare projects. She is already participating in community and professional activities that enhance the design experience for others.

My experience with her during the past two years ensures me that she is not only dedicated to improving the healthcare design experience with her clients, but by seeking ACHA certification, she is willing to make the commitment to our practice, her continuing education, and an ongoing participation in our ever growing specialized building type.

Sincerely,

[REDACTED]

Senior Healthcare Planner

Bellevue / Denver / Las Vegas / Los Angeles / New Orleans / Oakland / Orange County / Sacramento
San Bernardino / San Diego / San Francisco / San Jose / San Luis Obispo / Tempe / Tucson / Texas / Virginia
Abu Dhabi / Dubai / Saudi Arabia

SMITHGROUP

8 November 2019

American College of Healthcare Architects
4400 College Boulevard, Suite 220
Overland Park, KS 66211

To Certification Committee:

This letter is written as an endorsement of [REDACTED] AIA, EDAC, AAH for her application to the American College of Healthcare Architects. I worked with [REDACTED] on the Highland Hospital Acute Tower Replacement Project. As Senior Medical Planner for the County of Alameda's consultant team, she has shown great enthusiasm and dedication for our healthcare design profession through that project. [REDACTED] has demonstrated considerable knowledge about medical planning and an open mind when we, the design and planning team proposed new solutions to planning challenges.

[REDACTED] is the current Chair of the AIA Central Valley (AIACV) Academy of Architecture for Health (AAH) committee where she has grown the AIACV AAH events and seminars to not only to provide educational opportunities for architects, engineers, contractors and healthcare organizations, but has established a partnership with California's AHJ, OSHPD in which OSHPD presents a new topic at each monthly AAH committee meeting. The monthly OSHPD presentations are in addition to several OSHPD seminars, healthcare design seminars, and healthcare facility tours that [REDACTED] has established and coordinated as Chair of the AIACV AAH committee. Her enthusiasm for the AAH committee demonstrates her leadership within, and advocacy for, the healthcare design profession.

Based on my experience working with [REDACTED] I recommend her for certification in the American College of Healthcare Architects.

Sincerely,

[REDACTED]

[REDACTED]

SmithGroup

October 22, 2010

American College of Healthcare Architects
PO Box 14548
Lenexa, KS 66285

Dear Colleagues,

This is a letter of reference for [REDACTED] AIA, as an applicant to the American College of Healthcare Architects. While a Senior Medical Planner at HOK, [REDACTED] was the lead planner on the Alameda County Medical Center Acute Tower Replacement project and led the Kaiser Redwood City Replacement Hospital planning team. While on these projects [REDACTED] demonstrated a vast knowledge of healthcare design and operations which enhance the quality of our work. Even beyond her knowledge, [REDACTED] genuine devotion and empathy for her clients contributes immeasurably to her successful collaborative relationships with every team member.

[REDACTED] has devoted her career to healthcare design and conveys her enthusiasm for healthcare projects as a mentor to junior and intermediate staff. My experience with [REDACTED] has shown me that she is dedicated to the healthcare design community. By seeking ACHA certification she is proving her commitment to our practice.

Sincerely,

Atlanta

Berlin

Brisbane

Chicago

Dallas

Hong Kong

Houston

Kansas City

London

Los Angeles

Mexico City

New York

Orlando

Ottawa

St. Louis

San Francisco

Tampa

Toronto

Washington, DC

[REDACTED]
Senior Associate



Project History & Portfolio



Project History

██████████ brings over 25 years of professional experience as a project director, healthcare architect, healthcare planner, healthcare planning manager, and Owner's PM dedicated to specialized and ultra-specialized healthcare projects in the United States and internationally. Her projects have received awards from the AIA, Healthcare Design Magazine, the ASHE Vista award, Construct Tech, American Architecture Prize, and Grands Prix du Design among others. She is an expert in healthcare design and OSHPD compliance, with projects totaling over 21 million SF with a construction cost over \$17.85 billion. Her projects range from small renovations to new medical centers in excess of 3M SF. ████████ also brings extensive experience in Lean healthcare programming and planning, code compliance of healthcare design, healthcare planning and programming - including interfacing with stakeholders and medical equipment planners, leading stakeholder meetings, and building relationships with facility executives - to design state-of-the-art healthcare facilities that promote healing and wellness. ████████ projects have been published in a number of journals and magazines including Healthcare Design and Contract.

QUALIFICATIONS

EDUCATION

B.S. Environmental Design
Art Center College of Design
Pasadena, CA

REGISTRATION

Registered Architect
██████████

Evidence-Based Design Accreditation & Certification (EDAC)
Center for Health Design

AFFILIATIONS

American Institute of Architects

AIA COMMITTEES

Chair, Academy of Architecture for Health (AAH), Central Valley Chapter

Member, Academy of Architecture for Health (AAH), National Chapter

ACADEMIC MEDICAL CENTERS

University Health Network - Integrated Master Plan

Toronto, Ontario, Canada
University Health Network
New 11M GFA, (gross floor area) 1,942-Bed Academic Medical District - includes a total of eight sites, four of which are located in the downtown University medical district
Sr. Healthcare Planner, programming & strategic planning/projections

Centre Hospitalier de l'Université de Montréal

Montréal, Quebec, Canada
CHUM Collectif Consortium/Université de Montréal
New 3.5M SF, 770-Bed Academic Medical Center - at 22 stories tall and more than 3.5M SF, the CHUM is the largest healthcare construction project in North America
Planning Manager for Chicago office (1.5M SF) & Sr. Healthcare Planner for Nuc Med & CATH/EP

UC Davis Health - Eye Institute Design-Build Competition

Sacramento, CA
75,500 SF Eye Institute on the UC Davis Medical Center campus
Design-Build competition in which the project was designed through Schematic Design
Sr. Project Manager

Alameda County Medical Center | Highland Hospital

Oakland, CA
New 500,000 SF, 169-Bed Acute Tower Replacement & New Clinic Building
Owner's rep from the selection of the Design-Build team through user/stakeholder meetings
Sr. Medical Planner, planning lead, programming & planning from pre-design through bridging documents

King Faisal Specialist Hospital & Research Center

Jeddah, Kingdom of Saudi Arabia
New 2M SF Specialist Hospital & Research Center
Owner's PM/peer review

Center for Comprehensive Orthopedic and Spine Care, Northwestern Medicine

Chicago, IL
Two-story musculoskeletal clinic within Northwestern's new 26-story Outpatient Care Pavilion (OPC). The clinic houses orthopedics, spine, hand, rheumatology, physical and occupational therapy, and pain clinic with radiology and POC lab embedded into each Clinic Module.
Sr. Healthcare Planner

ACUTE CARE

Sacred Heart Medical Center at Riverbend

Springfield, OR
New 1.2M SF, 388-Bed 10-story Medical Center campus
Medical Planner for the 250K SF Heart Lung & Vascular Institute, 100K SF surgical floor, frozen section lab, ED, and imaging

Project History



Intermountain Medical Center Salt Lake City, UT

New Intermountain Medical Center is Intermountain Healthcare's 468-bed flagship medical center that consists of five Centers of Excellence on a 110-acre brown field site
Designer & Medical Planner of the Heart Lung & Vascular Institute

Intermountain Healthcare, Dixie Regional Medical Center St. George, UT

New 500,000 SF, 245-Bed 5-Story Regional Medical Center including New Hospital and Medical Office Building
Project Designer

Mills Peninsula Hospital Burlingame, CA

Sutter Health's new 630,000 SF, 241-Bed Hospital & Medical Office Building, *Medical Planner*

Kaiser Permanente Medical Campus Santa Clara, CA

New 1M SF, 327-Bed Medical Center Campus
Medical Planner

Kaiser Permanente New Hospital Redwood City, CA

New 283,000 SF, 149-Bed 10-story replacement hospital
Sr. Medical Planner

Kaiser Permanente Inpatient Endoscopy Procedure Room Renovation Walnut Creek, CA

Sr. Healthcare Planner/Architect/PM

St. Bernadine Heart, Lung & Vascular Institute Conceptual Design San Bernardino, CA

Conceptual Design and feasibility study for a 250K SF Lung & Vascular Institute at Catholic Healthcare West's St. Bernadine Medical Center
Sr. Medical Planner, Planning Lead - programming & planning, master planning

Mercy San Juan Medical Center New NICU Carmichael, CA

Dignity Health, Mercy San Juan Medical Center, New 40-bed NICU
Owner's 3rd Party Project Manager

Mercy San Juan Medical Center LDRP Renovation Carmichael, CA

Dignity Health, Mercy San Juan Medical Center, Major renovation of existing LDRP
Owner's 3rd Party Project Manager

Mercy General Hospital, Emergency Department Expansion Master Plan Sacramento, CA

A master plan feasibility study for expansion of existing ED for Dignity Health
Sr. Healthcare Planner, Planning Lead - programming & planning, master planning

Mercy General Hospital, Site Capacity Study Sacramento, CA

A master plan site capacity study for Dignity Health to determine options for replacement of the 8-story South Wing, which was built in the early 1900's
Project Director, Planning Lead - programming & planning, master planning

Mercy General Hospital, New South Wing Stair and East Wing Demo Sacramento, CA

Sr. Healthcare Architect/Planner

Mercy General Hospital, Continuing Care Conversion into Med/Surg Unit Sacramento, CA

Sr. Healthcare Architect/Planner

Project History

Mercy General Hospital, New Daily Living Activities Sacramento, CA
Sr. Healthcare Architect/Planner - programming & planning through construction

Mercy Hospital of Folsom, Family Birthing Center & Surgery Expansion Study Folsom, CA
Project Director, Planning Lead - programming & planning, master plan/conceptual design

Mercy Hospital of Folsom, New MRI Suite Folsom, CA
Sr. Healthcare Architect/Planner - programming & planning through construction documents

Mercy Hospital of Folsom, Conceptual Design for New NICU, LDRP Renovation Folsom, CA
Sr. Healthcare Architect/Planner - programming & planning, conceptual design

Center for Joint Replacement, Equipment Replacement Fremont, CA
Director of Healthcare Architecture

Sutter Health Pharmacy Renovation Crescent City, CA
Project Director

BEHAVIORAL HEALTH

Oregon State Hospital New 620-Bed Behavioral Health Hospital Salem, OR
Sr. Medical Planner

Oregon State Hospital New 360-Bed Behavioral Health Hospital Junction City, OR
Sr. Medical Planner

Kaiser Permanente Behavioral Health Clinic Expansion Pleasanton, CA
Sr. Healthcare Architect/Planner/PM

St. Helena Hospital 14-Bed Geriatric Behavioral Health Conversion St. Helena, CA
Director of Healthcare Architecture, Healthcare Planner, Architect of Record

MEDICAL OFFICES AND OUTPATIENT SURGICAL CENTERS

Kaiser Permanente New 250,000 SF Multi-Disciplinary Medical Office Buildings & Ambulatory Surgery Center Redwood City, CA
Sr. Medical Planner, Planning Lead

Kaiser Permanente New 45,000 SF Ambulatory Surgery Center Folsom, CA
Sr. Medical Planner

Kaiser Permanente Family Medicine Clinic Expansion Fairfield, CA
Sr. Healthcare Architect/Planner/PM

Kaiser Permanente Outpatient Endoscopy Center Renovation South Sacramento, CA
Sr. Healthcare Architect/Planner/PM

Kaiser Permanente Property Profile Surveys, Five MOBs Greater Denver Area, CO
Project Director, Sr. Healthcare Architect/Planner

Santa Clara Valley Health & Hospital System, New 60,000 SF Medical Office Building
Milpitas, CA
Medical Planner

Project History

Washington Hospital/UCSF Prenatal Diagnostic Center, New Prenatal Diagnostic Center
Fremont, CA
Director of Healthcare Architecture, Healthcare Planner/Architect

Dignity Health New 35,000 SF Specialty Clinic Woodland, CA
3rd Party PM

Dignity Health New 10,000 SF Clinic Conceptual Design Stockton, CA
Sr. Healthcare Architect/Planner/PM

Dignity Health New 10,000 SF Clinic Conceptual Design Redwood City, CA
Sr. Healthcare Architect/Planner/PM

Dignity Health New 6,000 SF Clinic Conceptual Design El Dorado Hills, CA
Sr. Healthcare Architect/Planner/PM

Dignity Health New 6,000 SF Specialty Clinic Conceptual Design East Davis, CA
Sr. Healthcare Architect/Planner/PM

Dignity Health West Davis Specialty Clinic Expansion Davis, CA
Sr. Healthcare Architect/Planner/PM

Dignity Health Mercy Hospital of Folsom, Folsom Sierra Endoscopy Center
New Endoscopy Center Folsom, CA
Sr. Healthcare Architect/Planner/PM

SKILLED NURSING

Edgemoor Skilled Nursing Facility San Diego, CA
New 180,000 SF, 192-Bed Skilled Nursing Facility
Medical Planner

Casa De Las Campanas, Skilled Nursing Facility Expansion Design Rancho Bernardo, CA
Owner's OSHPD Liaison & Peer Reviewer

City & County of San Francisco, New Laguna Honda Campus San Francisco, CA
New 650,000 SF Skilled Nursing Facility
Project Coordinator

The Meadows at Napa Valley Skilled Nursing Facility Expansion Napa, CA
Owner's OSHPD Liaison & Peer Reviewer

University Retirement Community Skilled Nursing Facility Expansion Davis, CA
Owner's OSHPD Liaison & Peer Reviewer

Largest Healthcare Project in North America

CHUM | Centre Hospitalier de l'Université de Montréal
University of Montreal Health Center
Montréal, Canada

Project data:

Size 3,597,000 SF | 772 Beds

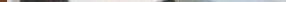
Construction Cost \$2.5B

Completion Date: Phase I - 2017; Phase II - 2021

Client | CHUM Collectif Consortium/Université de Montréal

P3 Team | CannonDesign in association with NEUF Architect(e)s (architecture & interior design), HH Angus (engineering), Obrascón Huarte Lain, Laing O'Rourke (construction manager/general contractor)

Image credits - CannonDesign + DCYSA



CHUM | Centre Hospitalier de l'Université de Montréal
University of Montreal Health Center

PROGRAM SUMMARY

A new 3 million-square-foot academic medical center that opened in September, 2017, is the merger of three of Montreal's oldest healthcare institutions, Hotel-Dieu de Montreal (1861), Notre-Dame (1924), and Saint-Luc (1928), into one organization and bring all three institutions under one roof in downtown Montreal. The project was structured as a public-private partnership (P3), with construction management and general contracting services delivered through a joint venture between Obrascón Huarte Lain (Madrid, Spain) and Laing O'Rourke (London), along with Cannon-Design and NEUF Architect(e)s as architect/interior designer.

The CHUM represents one of the largest healthcare construction projects in North America, with 15 inpatient departments and 40 specialty outpatient clinics that had to be planned and designed across five buildings on the new campus—from emergency, imaging, and surgery to a mother/baby unit, blood bank, and one of the largest radiation oncology treatment centers in Canada. The program requirements called for 442 exam rooms, 39 operating rooms, and 772 private patient rooms; accommodations for more than 10,000 employees and 6,000 medical students and interns; and the ability to serve 345,000 ambulatory patients, 22,000 inpatients, and 65,000 emergency patients annually. The new hospital is comprised of three buildings: a diagnostic and treatment podium and two bed towers with all 772 beds; the ambulatory clinic building; and a logistics tower housing laboratories and pharmacy services. Phase 2, which is scheduled to be completed in 2021, will add an office building and 500-seat amphitheater with a conference center for medical education and an outdoor plaza. When Phase 2 is complete, the campus will be comprised of five buildings covering three city blocks.

ROLE & RESPONSIBILITY

██████████ was the Healthcare Planning Manager for the Chicago office responsible for managing the healthcare planning, planning staff, and coordination with the design and technical teams to ensure a seamless connection between planning, interior design, exterior building design, and building systems.

The Chicago planning team was responsible for the diagnostic and treatment podium which included designing the specialized and ultra-specialized D&T (diagnostic and treatment) floors (Ophthalmology, Endoscopy, Dermatology Clinic, Imaging, Nuclear Medicine, Cath/EP, Surgery, and Hybrid Surgery) as well as patient units for Mother-Baby Department (LDR, LDRP & postpartum), NICU, ICU, Cardiac ICU, Major Burn Unit, Palliative Care, Satellite Pharmacy, and Respiratory Therapy, Lung & Vascular Department (Nuclear Medicine, Cath/EP), and Cardiac ICU., ICU, mother-baby, major burn, and the Logistics Tower which houses clinical laboratories, pharmacy services, and materials management.

In addition to being Healthcare Planning Manager the Chicago office, [REDACTED] was also the Sr. Healthcare Planner for the planning of the Heart, Lung & Vascular Department (Nuclear Medicine, Cath/EP).

PROBLEM & SOLUTION

Problem: Coordination of the stakeholder meeting materials and elaborate meeting schedules for all 12 healthcare planners in the Chicago office, including extensive coordination with the Montreal office, where all offices contributing to the project was being coordinated

Solution: Daily check-ins with planning staff, weekly planning meetings, including QC in the schedule for every round of stakeholder meetings, and one very extensive spread sheet in which each round of stakeholder meetings were one month in duration and as one round of stakeholder meetings ended, the next round began.

Problem: How to incorporate evidence-based design (EBD).

Solution: Use of EBD whenever possible; this included bringing daylight into nursing units and treatment spaces to reduce stress, improve healing, and reduce patient recovery time; creating spaces that limited noise to reduce patient stress; the use of art as a positive distraction to reduce stress. [REDACTED] incorporated her years of experience with EBD as a Healthcare Planner, including experience on a Center for Health Design Pebble Project, to incorporate EBD principles in the planning that she managed and designed.

Problem: Due to the short half-life of the radioactive isotope used in specific imaging studies, the facility needed to find a way to get the radioactive isotope from the cyclotron in the basement of the R&D building across the street to one, dedicated PET/CT room in the high dose radiation section of Nuclear Medicine on the 8th floor of the D&T podium.

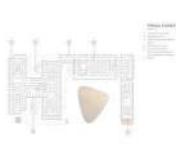
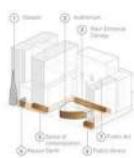
Solution: Through extensive research, many meetings, and exhaustive coordination, Teresa lead the effort to include a dedicated pneumatic tube system (PTS) for one of the high dose PET/CT rooms in Nuclear Medicine. This was achieved with numerous coordination meetings with technical architects, facility physicist, project stakeholders, PTS vendor, construction consortium staff and facility staff to develop a dedicate PTS which included a lead-line PTS capsule.

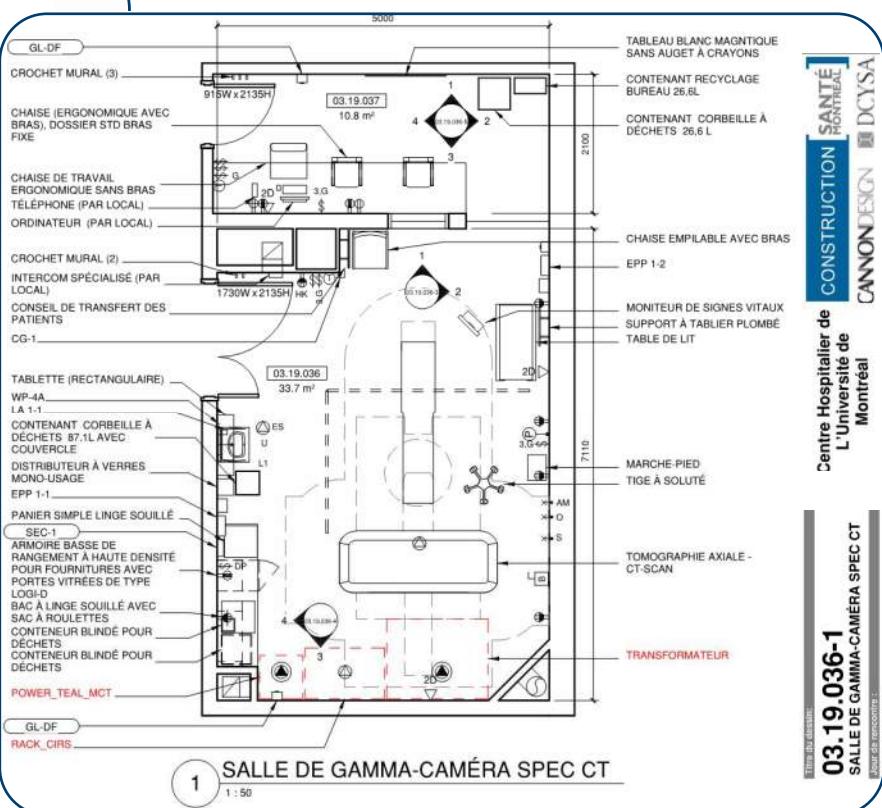
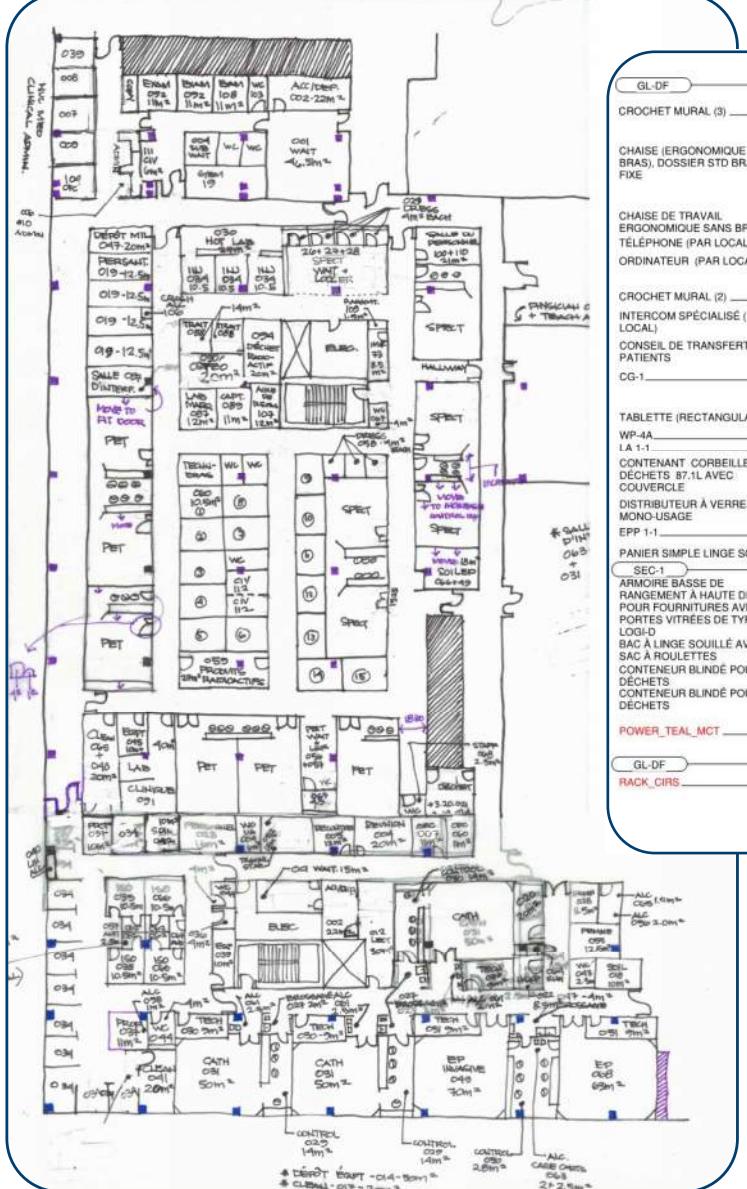
Confirmation of Participation:

Somevaloigau

MARIA ROMEEA IONESCU, OAR, OAA

Sr. Healthcare Planner & Architect





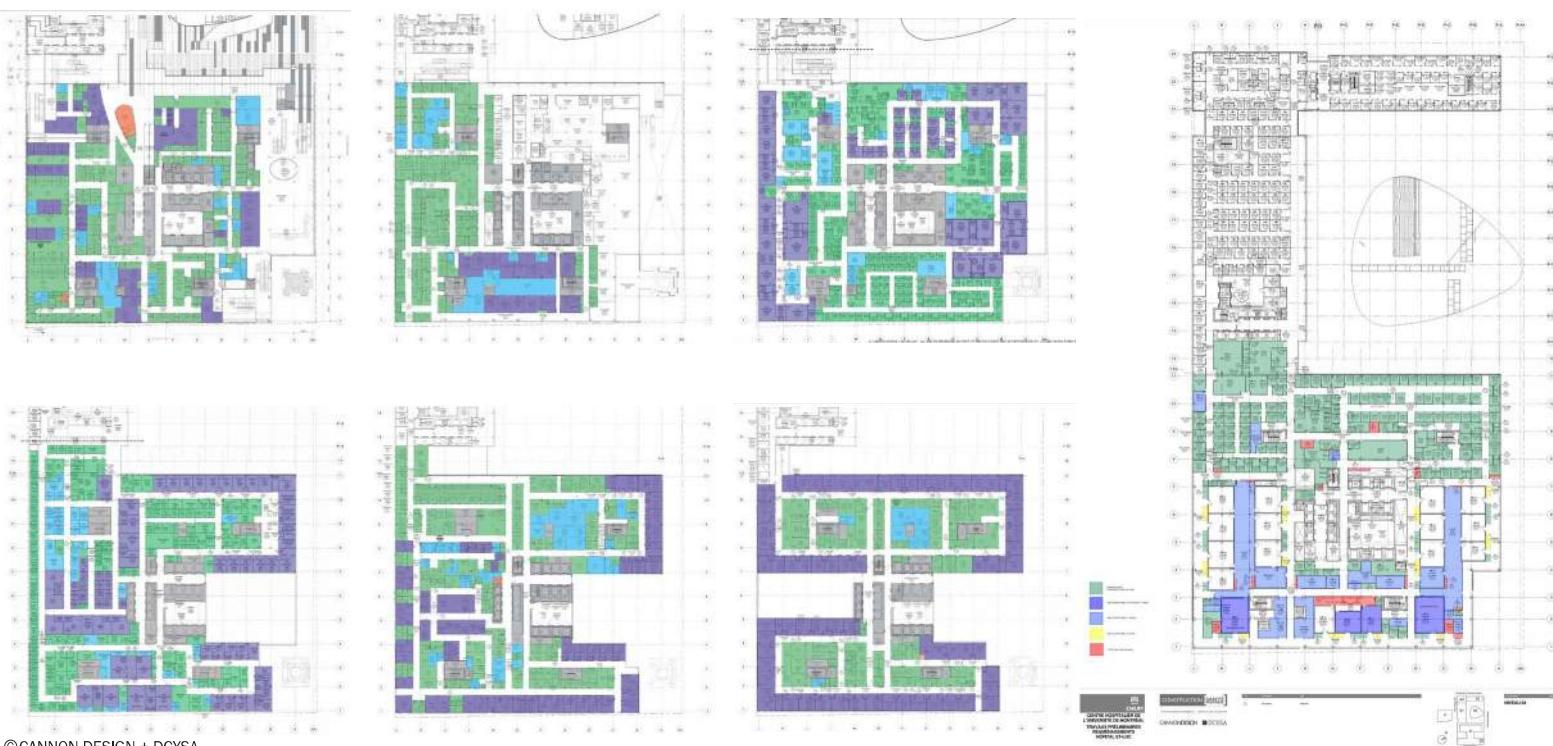
CONSTRUCTION
CANNON DESIGN

Centre Hospitalier de
L'Université de
Montréal

03.19.036-1
SALLE DE GAMMA-CAMÉRA SPEC CT
Ajour de rencontre

early planning sketch & room layout plan

All meetings and documentation were required to be provided in French and utilize the metric system





Jewel of Alameda County Health System

Highland Hospital | New Hospital & Clinic Building
Oakland, CA

Project data:

Size 500,000 SF | 169 Beds

Construction Cost \$668M

Completion Date: 2017

Client | Alameda County

CM | Vanir

Design-Build Team | Clark/SmithGroup/Ratcliff

Image credits - Clark Construction, SmithGroup & Ratcliff



Alameda County Medical Center | Highland Hospital New Hospital + Clinic Buildings

PROGRAM SUMMARY

Part of a three phase replacement project to upgrade the County public health system's main campus. The project consists of an Acute Care Tower (ACT) replacement (OSHPD 1) and a Medical Office Building (OSHPD 3), called the Satellite Building (SAT). The site is an elevated site located between the San Francisco bay and the Oakland hills, so the ACT was sited to maximize views of the bay and the hills. During the design of the tower, many building shapes were proposed and the project stakeholders chose the triangle to maximize the number of beds on the exterior and provide common support space with shorter travel distances in the interior of the triangle.

ROLE & RESPONSIBILITY

Bridging Architect | Sr. Medical Planner
Owner's Rep | Sr. Medical Planner

████████ was a lead Senior Medical Planner at the Bridging Documents firm, HOK, and later served as Senior Medical Planner with Alameda County GSA through a staff augmentation contract with the PM/CM firm, Vanir Construction Management.

While at HOK, █████ was the Senior Medical Planner in charge of the planning of the Patient Units, Imaging, Interventional Services, Clinical Lab, and Women's & Newborns departments, including an 8-bed NICU and eight LDRPs in the ACT, and was the sole medical planner in charge of planning on the SAT. Included in her medical planning responsibilities, she was responsible for the space program reconciliation for all departments in both buildings, and the blocking and stacking of both the ACT and SAT buildings. She used her background in evidence-based design (EBD) to create spaces that promote wellness and healing using techniques such as daylighting corridors and increased window size in patient rooms to enhance natural daylight and views.

PROBLEM & SOLUTION

Problem: Maintain consistency between the Bridging Documents and the design of the Design-Build team awarded the project.

Solution: As the Sr. Medical Planner for the blocking and stacking of the new patient tower, inpatient diagnostics and treatment platform, and the clinic building for the bridging architect, █████ had a thorough understanding of the stakeholders' priorities and the operational efficiencies of the planning. Therefore, after transferring to represent the County as their Sr. Medical Planner she was able to ensure the County's criteria were maintained by the Design-Build planning team.

Problem: OSHPD 3 plan review of the medical clinic building (SAT) when the County's building department didn't have experience with OSHPD 3 projects.

Solution: Expedited permitting of the OSHPD 3 medical clinic building using a 3rd party OSHPD 3 plan review consultant.

Problem: Ability for Alameda County to manage the medical planning stakeholder meetings during the Design-Build design phase.

Solution: As a representative of Alameda County, █████ attended all DD planning meetings and leveraged her established relationships with key stakeholders (as the Sr. Medical Planner during bridging documents) to ensure the County's interests were safeguarded.

Confirmation of Participation:



CHEE KEONG LIN, AIA

Principal
SmithGroup





ACT SUMMARY

Level 0: Morgue, Sheriff, IT, Bio Med Equipment

Level 1: Materials Management, Patient Transport

Level 2: Food Service, Inpatient & Outpatient Physical Therapy, Occupational Therapy & Speech Therapy

Level 3: Clinical Lab, Interventional Services, Imaging, Nuclear Medicine

Level 4: LDR, C-Section, LDRP, Post-partum, NICU & Well Baby

Level 5: ICU, Inpatient Endoscopy, Respiratory Therapy

Levels 6-9: Acute Care Patient Units

SAT SUMMARY

Level 3: Cafeteria, Conference & Education Center, Non-Invasive Diagnostics, Cardiac Clinic, Executive Administration

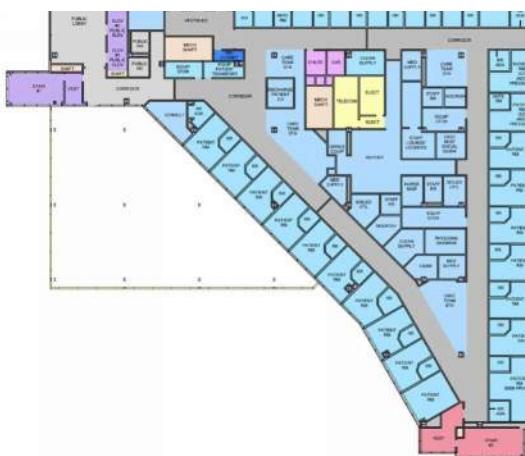
Level 4: Admitting & Registration, Medical Records, Urgent Care, Imaging, Blood Draw

Level 5: Outpatient Respiratory Therapy, GI Clinic, Hem/Onc Clinic, Infusion Center, On-call, IT



Legend for the floor plan:

- BIO MED ENGINEERING
- ENDOSCOPY
- ENVIRONMENTAL SERVICES
- ICU
- KU SUPPORT
- PATIENT VERTICAL CIRCULATION
- PUBLIC CIRCULATION
- PUBLIC VERTICAL CIRCULATION
- RESPIRATORY THERAPY
- SHAFT
- STAFF CIRCULATION
- STAFF VERTICAL CIRCULATION
- TELECOM/ELECTRICAL



Legend for the floor plan:

- BIO MED ENGINEERING
- ENVIRONMENTAL SERVICES
- PATIENT VERTICAL CIRCULATION
- PUBLIC CIRCULATION
- PUBLIC VERTICAL CIRCULATION
- SHAFT
- STAFF CIRCULATION
- STAFF VERTICAL CIRCULATION
- TELECOM/ELECTRICAL

Mercy San Juan Medical Center

New 40-Bed Neonatal Intensive Care Unit

PROGRAM SUMMARY

The existing NICU was located in a space that was no longer functional and lacked spaces required by the California building code. In order to address the rise in average daily census, and provide a code-compliant NICU, Mercy San Juan Medical Center (MSJMC) elected to build-out a new 40-bed NICU in shell space located across a corridor bridge in a newer building adjacent to the existing family birthing center. MSJMC has a diverse mix of NICU patients and the new design addresses the acuity and security issues the existing NICU cannot.

The new NICU consists of 16 Level III private beds and 24 Level I & II semi-private beds to best serve the diverse mix of patients. The design provides space for family members, including a family lounge, and the private Level III rooms include space for family member overnight stays.

ROLE & RESPONSIBILITY

Dignity Health 3rd Party Project Manager - specializing in design phase planning, code compliance and licensing.

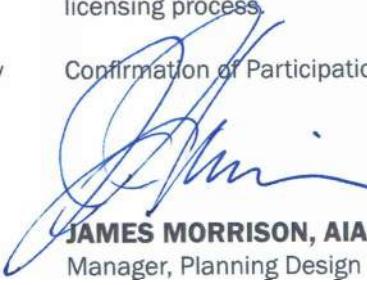
In addition to managing the design-build team (scope, schedule, budget & contracts), [REDACTED] also attended stakeholder meetings, coordinated with the project stakeholders to ensure the design

team provided a layout/design that met the needs of the end users, and facilitated the licensing consultant's participation in stakeholder meetings and design reviews.

PROBLEM & SOLUTION

Problem: Ensure code and licensing compliance of the new NICU.
Solution: During the design phase, we incorporated a 3rd party peer review for the medical planning and the code compliance of the design, as well a 3rd party licensing consultant to assist the design team during stakeholder meetings, ensure the design met licensing requirements, and assist the facility with the entire licensing process.

Confirmation of Participation:

 8.22.19

JAMES MORRISON, AIA, EDAC

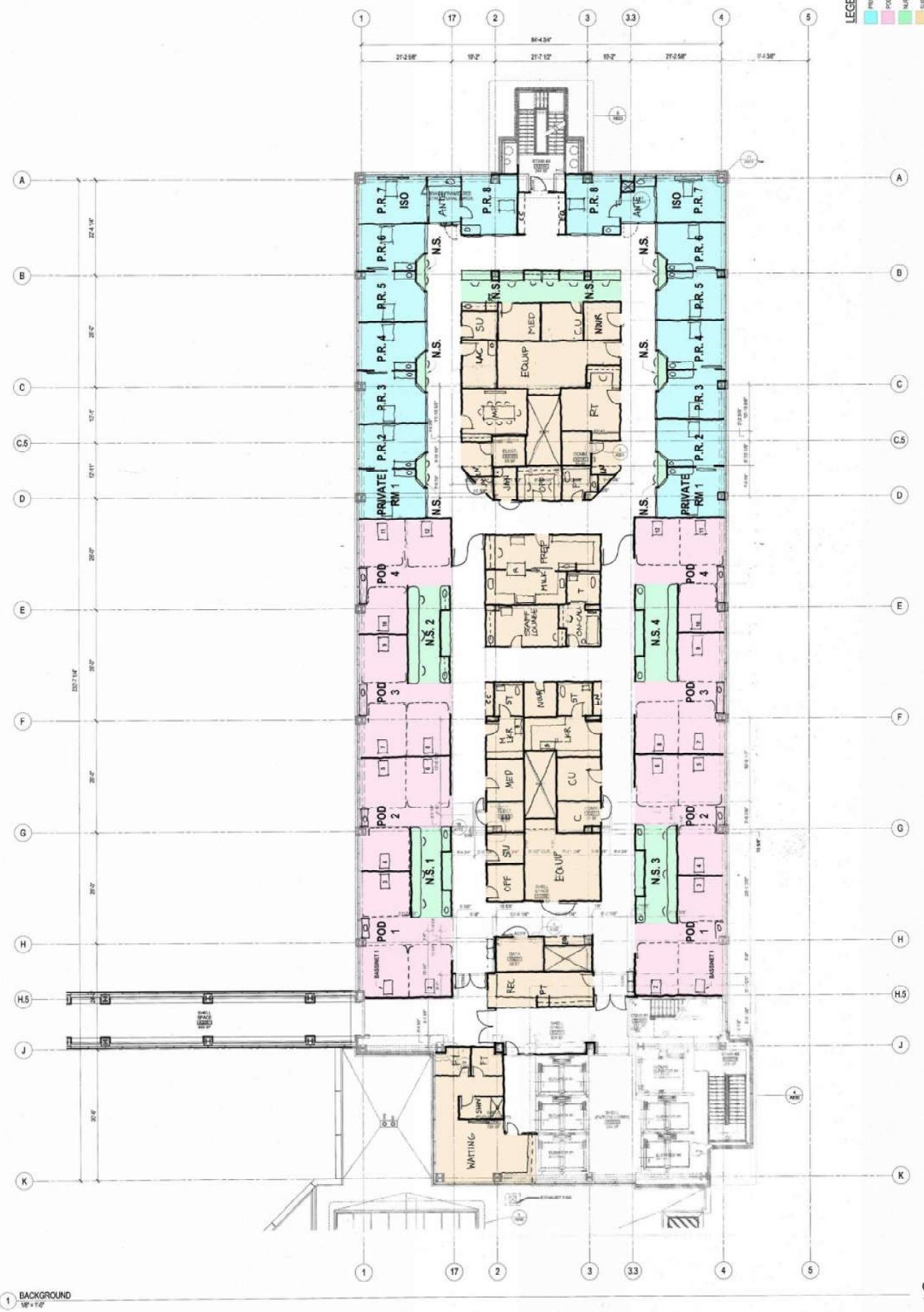
Manager, Planning Design & Construction
Corporate Real Estate
Dignity Health

New NICU to Serve the Community

Mercy San Juan Medical Center | New 40-Bed NICU
Carmichael, California

Project data:

Size 18,000 SF | 40 Beds
Construction Cost \$40M
Completion Date 2020
Client | Dignity Health
3rd Party PM | Stahl Companies
Design-Build Team | Unger Construction, HGA, Capital Engineers & ECOM
Image credits - HGA





The Canthus

UC Davis Health | Eye Institute
Design-Build Design Competition
Sacramento, CA

Project data:

Size 75,500 SF
Construction Cost \$54.5M
Completion Date: Unsuccessful design competition
Client | UC Davis Health
Design-Build Team | DPR/Stantec/Acco/Collins Electric
Image credits - Stantec



UC Davis Health Eye Institute Design-Build Competition

PROGRAM SUMMARY

The proposed project constructs an approximately 58,000 SF four-story addition on the north side of the existing Ambulatory Care Center (ACC). The project will also renovate 17,500 SF of the existing ACC first floor creating seamless clinical space, and a contiguous modern clinic, from the new addition. The total area of improvements is anticipated to be approximately 75,500 SF. The clinical space will meet OSHPD 3 Clinic requirements. Site work includes relocating the Y Street east lane, relocating and connecting utilities from the existing ACC facilities, developing a new ACC drop-off and canopies, and providing new site architectural landscaping.

ROLE & RESPONSIBILITY

During the six month Schematic Design competition phase, [REDACTED] was responsible for coordinating the design team with the contractor and the contractor's trade partners. The Stantec design team included architecture, healthcare planning, interior design, structural engineering, landscape architecture, civil, sustainability LEED, and energy modeling.

PROBLEM & SOLUTION

Problem: Provide an iconic building with a "place" that captures the spirit and culture of the Eye Center in the site, and building design to identify and celebrate the Eye Center as unique and identifiable.

Solution: Formulated by the building function and the profession of Optometry and Ophthalmology, the inspiration for the project is the "Canthus," a place near the eye. It is this nexus point of an ellipse that frames the basis of the idea and the Canthus Tower that serves as the iconic element, providing a marker for entry points into the building and delivering a "ray of light," symbolic of the slit lamp. These two elements, one in form, and the other in light, establish a distinct location on the campus and are instantly visually recognizable.

Problem: Provide flexibility for future expansion

Solution: Our floor plans represent an optimal layout, not only in terms of patient experience but also in staff experience and efficiency. Departments are located appropriately to utilize adjacencies that maximize staff efficiency, while also taking advantage of amenities such as access to natural daylight for both patients and staff. Team rooms are centrally located to each department, sub-wait areas are placed to take advantage of both department and staff adjacencies as well as natural daylight.

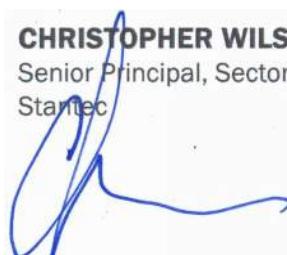
Problem: Provide intuitive way-finding
Solution: The Main Lobby is immediately understandable and clear for a patient arriving for the first time; circulation is a single line from the east entry to the west entry. All reception areas are lined up along the north side, and the spacious waiting area seating is along the south side. The greeter station is prominently visible from both entries, right near the elevators. All first floor department entries, public restrooms, and elevator/stairs are directly off of the main circulation spine, creating incredibly simple and clear navigation, and a clear Mental Map for the vision-impaired. The entirety of waiting area seating is visible from every department entry and reception on level one - allowing quick location of patients and family members.

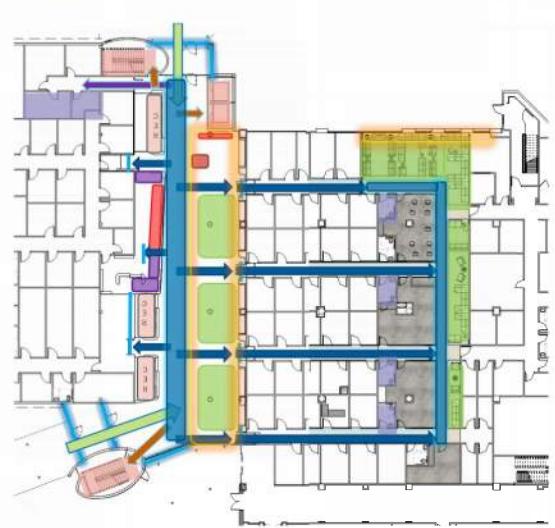
Confirmation of Participation:

CHRISTOPHER WILSON, AIA, LEED AP, NCARB

Senior Principal, Sector Leader

Stantec







A New Specialty Clinic for a Rural Community

Dignity Health | Specialty Clinic Expansion Davis, CA

Project data:

Size 6,000 SF

Construction Cost \$600

Completion Date 2014
Client: L. D. Smith & Co. with

Client | Dignity Health
Design To Scale | UX Architects, Turkey | ECOM

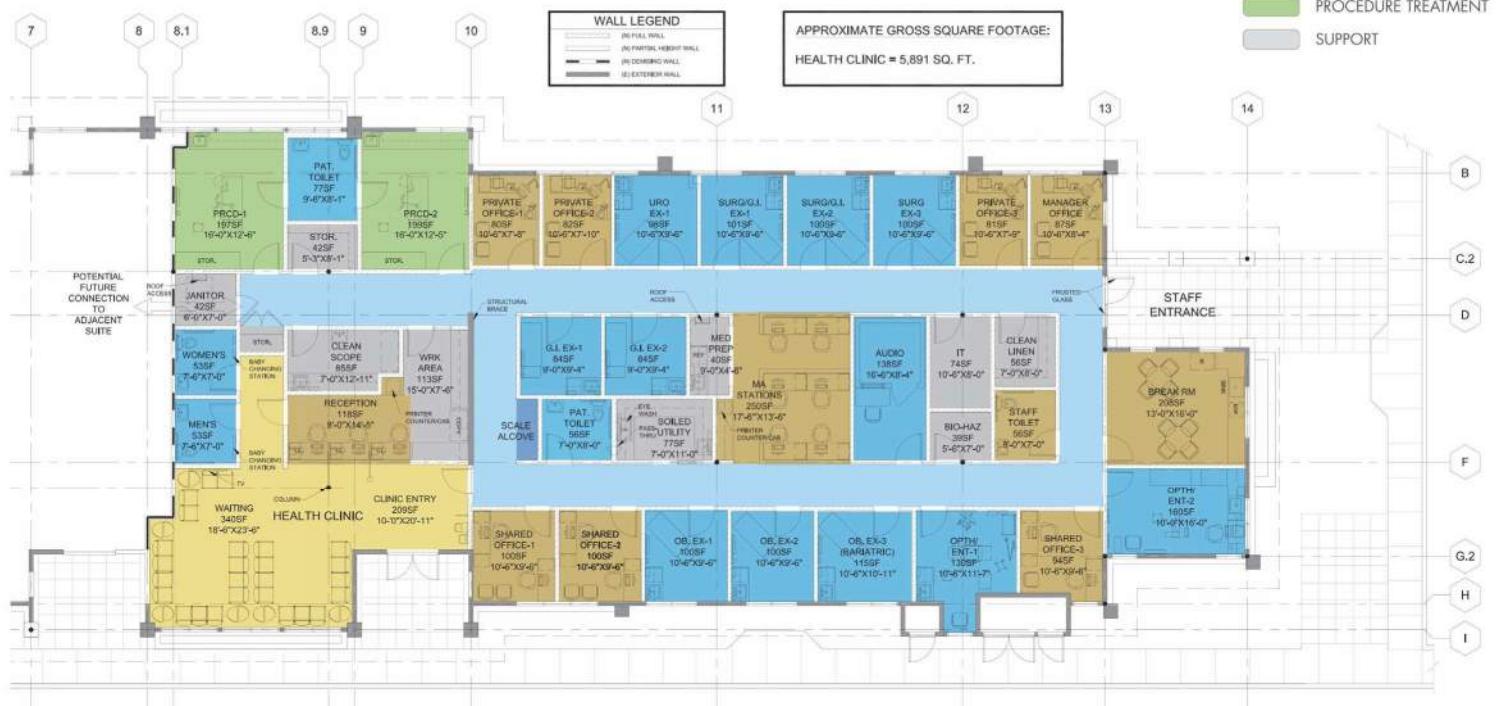
Design Team | HY Architects
Contractor | Ascent Builders



Proposed Revisions to Davis MOB

Clinic Module Elements:

Legend



Dignity Health | Woodland Healthcare New Specialty Clinic



PROGRAM SUMMARY

In order to address changes in healthcare that focus on prevention, Dignity Health Medical Foundation is building clinics throughout the communities they serve. This project was an expansion of an existing specialty clinic, in an adjacent building. The specialties included ear, nose and throat, dermatology, audiology including audiology booth, general surgery, urology, OB/GYN, procedure rooms, scope cleaning room, and physician offices. Since the expansion was in an adjacent building, the clinic also provided staff amenities, including a staff break room.

ROLE & RESPONSIBILITY

Sr. Healthcare Planner & Sr. Architect/PM

████████ responsibilities during the design phase were as the Sr. Healthcare Planner, providing programming/planning and leading the stakeholder meetings, Sr. Architect managing the construction documents, city submittal and permitting, and construction administration, and Sr. PM managing the in-house staffing, invoicing, and contracts for the project.

PROBLEM & SOLUTION

Problem: Providing a wide variety of specialty clinics, and their associated support spaces, in a compact layout.

Solution: During stakeholder meetings █████ created several blocking diagrams to facilitate the stakeholders in developing the final concept, which was to group the physician offices around the specialty exam rooms to reduce travel distances and improve efficiency; procedure rooms were grouped and located away from the exam rooms, with access from reception that did not require passing through the exam areas.

Confirmation of Participation:

JAMES MORRISON, AIA, EDAC

Manager, Planning Design & Construction
Corporate Real Estate
Dignity Health





[REDACTED], AIA, EDAC, AAH

Candidate Application & Portfolio | American College of Healthcare Architects

