## **Academic Medical Centers 2007**

Integrated Planning for Integrated Programs: Research, Teaching, and Clinical Care



Two Special Site Tours Available!



Left ~ Photos Courtesy of Flad

ight – Medical Simulation Corporation's SimSuite® Education System, Center for Medical Education and Innovation™ at Riverside Methodist Hospital, Columbus, OH

## Get the new planning models and initiatives that are:

- Realigning the missions, infrastructures, and business models for the academic medical center of the future
- Delivering more rapid translation of research into patient-focused treatments
- Integrating capital, facilities, and operations
- Linking research, teaching, and clinical care programs
- Anticipating advances in medical equipment, research and teaching technologies
- Creating flexible infrastructure for long-term viability

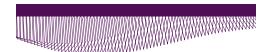
## **2007 TRADELINE** Facilities Conference Series



December 3-4, 2007

The San Diego Hilton Resort on Mission Bay

San Diego, California



## Our conference Session Leaders are industry leaders

#### **Participating Firms** and Institutions

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University of Massachusetts Med School University of Michigan Medical School

Univ of Michigan, Cardiovascular Center

University of North Carolina Hospitals

Univ of North Carolina, School of Med

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### **Exhibitors**

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**Environmental Growth Chambers** 

**Phoenix Controls** 

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#### **Session Leaders**

J. Ian Adamson, AIA

Payette

**Jennifer Aliber, AIA, ACHA, LEED AP** Principal, Healthcare Planning Shepley Bulfinch Richardson & Abbott

Charles T. Andrews, MPA

Associate Vice President Emory University Health Sciences Center

**Cynthia R. Atwood** Senior Strategic Facility Planner

James R. Bardsley, PhD Associate Vice President for Finance & Planning University of Utah Health Sciences Center

Mary A. Beck Senior Vice President for Planning University of North Carolina Hospitals

Susan M. Berget, PhD

Former Vice President & Vice Dean of Academic Planning Baylor College of Medicine

Paula Buick

Associate Payette

Matthew J. Cotton, AIA

Senior Project Manager Tsoi/Kobus & Associates, Inc.

John A. Coulter Associate Vice President for Medical Affairs and Executive Director Health Sciences(Ret)

University of Washington

Kim A. Eagle, MD, FACC

Clinical Director

University of Michigan, Cardiovascular Center

Timothy Fitzpatrick Associate Vice Chancellor for Master Space Planning University of Massachusetts Medical School

William K. Flemming

Senior Vice President

Skanska USA Building, Inc.

**Robert Fox** 

Chief Planning Officer St. Michael's Hospital

David S. Hefner

President University of Chicago Medical Center

Jay L. Hess, MD, PhD Carl V. Weller Professor and Chair University of Michigan Medical School

Raphael Hirsch, MD

Professor & Chief, Division of Rheumatology Children's Hospital Pittsburgh

Mic Johnson, AIA

Design Principal Ellerbe Becket, Inc.

Jonathan Kanda, AIA, LEED AP

Senior Associate

CO Architects

Michael Karpf, MD Executive Vice President for Health Affairs, CEO UK Healthcare

University of Kentucky Chandler Medical Center

Scott Kelsey, AIA Managing Principal

CO Architects

Richard L. Kobus, AIA, FACHA

Senior Principal

Tsoi/Kobus & Associates, Inc. Steven P. Krakoff

Former Associate Administrator

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Margaret C. Lacki, RN, BSN, CCRN Nurse Consultant Equipment Planner University of Michigan, Cardiovascular Center

**Linda R. Larin, CHE, MBA** Chief Administrative Officer University of Michigan, Cardiovascular Center

Michael C. Lauber, AIA

President

Ellenzweig

Jeffrey C. Lozon President and CEO

St. Michael's Hospital (University of Toronto, Li Ka Shing Knowledge Institute)

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Director of Information Technology, Faculty of Medicine

University of British Columbia

Jens Mammen, RA Principal, Senior Health Care Planner

SmithGroup, Inc.

Robert W. Marriott, Jr. Associate Dean, Planning, Resource Analysis & Management University of North Carolina, School of Medicine

Clay B. Marsh, MD

Professor & Director, Pulmonary, Allergy, Critical Care, and

Sleep Medicine The Ohio State University Medical Center

Judith D. Mitchell, AIA

Director of Planning Harvard Medical International

David G. Nichols, MD, MBA

Vice Dean for Education Johns Hopkins University School of Medicine

Mary I. Ockenden

Associate Vice President for Space Planning University of Rochester Medical Center

Roger A. Oxendale President & CEO Children's Hospital of Pittsburgh

Jerry Percifield, RA

Principal Lord, Aeck & Sargent, Inc.

**Bradley S. Pollitt** Vice President, Facilities Shands Healthcare

Michael Pukszta, AIA

Principal, National Healthcare Market Leader Cannon Design

Jeffrey L. Schantz, AIA

Senior Vice President & Strategic Director of Science + Technology Hellmuth, Obata + Kassabaum, Inc.

Charles Siconolfi, AIA, ACHA

Senior Principal, Director of Health Care Planning + Design Hellmuth, Obata + Kassabaum, Inc.

Aron Sousa, MD

Senior Associate Dean for Academic Affairs Michigan State University

Laura J. Stillman

Principal/Project Director Flad & Associates

Paul Szaszkiewicz

Diamond and Schmitt Architects, Inc. M. Kent Turner, AIA, AAA, AIBC, OAA

President, North America

Cannon Design

Andrew Vazzano, FAIA

Senior Vice President, National Science & Technology Practice SmithGroup, Inc.

Sidney Ward, AIA

Principal The S/L/A/M Collaborative

Derek G. Westfall

Vice President Tradeline, Inc.

Steven L. Westfall, PhD

President Tradeline, Inc.

Steven M. Wiesenthal, AIA Associate Vice Chancellor and Campus Architect, Capital Programs & Facilities Management University of California, San Francisco Katya Wilson, MBA, PMP

Principal AMBiT Consulting, Inc.

Alexander K. Wing, AIA, LEED AP

Principal Burt, Hill

Elise F. Woodward, AIA, LEED AP Principal for Project Delivery Shepley Bulfinch Richardson & Abbott

Stephen Yundt, AIA, ACHA

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Dan Zollmann, P. Eng., PMP

Principal AMBiT Consulting, Inc.

## TRADELINE

### Your best resource for facilities planning and management

Academic medical and health centers are aggressively realigning their overall institutional visions, missions, and programs to produce more highly trained healthcare workers, better research outcomes, faster translation of research findings to patient treatment, and improved financial performance. These major realignment efforts are being built on new models of **integrated planning** (financial, facilities, and academic programs) for **integrated programs** (research, education, and clinical care).

At this conference you'll learn the specifics of the new integrated-program visions, and the thinking, processes, programs, and capital plans that are being put in place to turn those visions into thriving academic medical centers of the future.

In particular, you'll get the details on leading-edge initiatives for

- Developing strategic, integrated plans
- · Creating strong linkages between research, education, and clinical care
- · Breaking down organizational "silos"
- Aligning capital plans with long-term institutional vision
- · Reformulating financial models and business plans
- Anticipating the impact of technology changes

Attend this conference to benchmark your strategic plans, initiatives, capital projects, and processes against the thinking and programs of leading institutions, and to pick up specific planning and organizational data and lessons learned that your institution can build on.

I very much look forward to seeing you in San Diego on December 3rd.

Steven L. Westfall, PhD President

### Who should attend?

This conference is for senior staff involved in planning (facilities, financial and academic programs), administration, and operation of academic medical centers (i.e. teaching hospitals, research facilities, medical schools, and clinics).

This includes Deans, Vice Deans, Provosts, and Directors and Managers of Finance & Capital Planning, Real Estate Development & Facilities, Campus Planning, Medical Education, Hospital Operations, Research, Clinical Affairs, and all those who have major commitments to education, research and patient care in academic medical centers.



Tradeline is a Registered Provider with The American Institute of Architects Continuing Education Systems. Credit earned on completion of this event will be reported to CES Records for AIA members by Tradeline. Certificates of Completion for non-AIA members are available upon request.

There are a maximum of 7 Learning Units available at this conference. Sessions marked with the AIA CES logo have been registered with the AIA/CES Record.

### **2007 TRADELINE**

Facilities Conference Series



**Register Now!** 

www.TradelineInc.com/ AcademicMedicalCenters

Register with payment by **Nov. 2nd & Save \$150** 

## Agenda at a Glance

## Information-rich sessions and high-level networking

#### **Special Events and Features:**

#### **Hosted Pre-Conference Reception**

Sunday, December 2, 7:30 p.m. Attendees may sign in and pick up their conference materials at this time. Guests welcome.

#### **Hosted Reception**

Monday, December 3, 4:35 p.m. – 6:00 p.m. Guests welcome.

#### **Food and Beverage**

Registered attendees will be provided with lunch and refreshment breaks on both meeting days.

A continental breakfast will be served on the first meeting day and a full breakfast will be served on the second meeting day.

#### Conference Workbook

Your 300 page workbook will be a resource tool for this meeting. It includes the agenda, session notes and exhibits, and the attendee list.

#### Please note the following

Dress for this conference is business casual or resort wear. It is our goal to maintain the temperature of the meeting rooms at an acceptable level for all attendees. However, for your maximum comfort we suggest that you plan to dress in layers.

Audio or video recording devices are not permitted at this conference.

### 2007 TRADELINE

Facilities Conference Series



### Register Now!

www.TradelineInc.com/ AcademicMedicalCenters

Register with payment by **Nov. 2nd & Save \$150** 

### Sunday, December 2nd, 2007

#### Monday, December 3rd, 2007

Conference Overview

- A. Planning models to align long-term institutional vision and capital investment
- B. Integrated financial models and business plans for academic medical centers
- F. Integrating medical education facilities into the larger health sciences complex
- J. Integrated planning for new medical simulation learning technologies and facilities

 Hosted Luncheon
 12:10 p.m.

 Concurrent Forum Sessions (choose 1)
 1:15 p.m. - 2:10 p.m.

- C. Strategic planning models that integrate research, education, and clinical care
- D. An integrated planning method for multiple interests and dispersed operations
- G. Linkages for research, teaching, and clinical care planning for the global connection
- E. Integrated actionable masterplanning for building replacement scenarios
- H. Quantitative cost-benefit analysis on co-locating research labs with clinical facilities
- I. Realignment initiatives to achieve real program linkages with real payoffs
- L. New videoconferencing plans for geographically distributed medical education

Hosted Reception (Guests Welcome)......4:35 p.m. – 6:00 p.m.

### Tuesday, December 4th, 2007

 Hosted Breakfast
 .7:15 a.m. - 8:00 a.m.

 Special Sessions (choose 1)
 8:00 a.m. - 8:55 a.m.

- **S-1.** Emory's vision, planning processes, and initiative for a fully integrated health sciences program
- S-2. Strategies for linking research, education, hospitals, and industry partners
- **S-3.** Dubai/Harvard makes a state-of-the-art information center its integrating feature
- **S-4.** Integrated flexibility plans for multi-user, high-technology imaging investments

- C. Strategic planning models that integrate research, education, and clinical care
- E. Integrated actionable masterplanning for building replacement scenarios
- H. Quantitative cost-benefit analysis on co-locating research labs with clinical facilities
- J. Integrated planning for new medical simulation learning technologies and facilities

- A. Planning models to align long-term institutional vision and capital investment
- D. An integrated planning method for multiple interest and dispersed operations
- I. Realignment initiatives to achieve real program linkages with real payoffs

- **B.** Integrated financial models and business plans for academic medical centers
- F. Integrating medical education facilities into the larger health sciences complex
- G. Linkages for research, teaching, and clinical care planning for the global connection
- K. How patient treatment models and new technologies are changing patient care and medical education

Open Forum/Town Hall Meeting

## **TRADELINE**

### Your best resource for facilities planning and management



#### Focus on end-users and owners

Tradeline conferences are facilities-focused industry meetings designed exclusively for building owners and end-users. A limited number of contracted architects, engineers, builders, and consultants may apply for registration if they are attending with an owner's management team. (Please contact Tradeline to receive a special application for your attendance Phone: (925) 254-1744 x12 or email registrar@tradelineinc.com)

Those involved with sales, marketing or business development from contracted architects, engineers, builders, consultants, or equipment manufacturers (other than exhibitors and speakers) will not be registered.

### Audience members are at the "Head of Their Class"

Tradeline conferences attract mid- to senior- level executives. Attendees are typically decision-makers responsible for their organization's capital projects, science programs and asset management portfolios. These are experienced professionals who are looking for leading-edge planning concepts, management ideas, and models.

## Meeting size maximizes peer-to-peer, productive networking

Tradeline conferences are intentionally scaled to promote an intense exchange of information between an intimate, dynamic group of peers. These meetings are "just the right size" to develop substantive interaction, benchmarking, idea sharing and spontaneous meetings eliminating the "marketing circus" so often found at large trade shows or other industry conventions.

### **Unique Town Hall Meetings**

Exclusive to Tradeline conferences is the Town Hall Meeting, a rich source of current data and contacts. This interactive session allows questions and commentary from the audience on key findings and lessons learned. Real-time note-taking displayed on the big screen builds a group-created planning document that identifies even more people with whom you'll want to benchmark on specific ideas and issues. Town Hall Meeting notes are compiled and distributed to all attendees after the conference.

"This was my first
Tradeline conference
and I want to commend
you on running such a
great event. I found all
the sessions I attended
and the general sessions
very valuable. It was well
paced and the speakers
were very high quality."

Judith Steinkamp Associate Director of Strategic Facilities Planning Pfizer Global R&D

"I've been to 4 or 5
Tradeline conferences
and have increased my
knowledge base with
each one. Keep up
the good work, your
conferences are well
worth the time out of my
busy schedule."

- Michael Walton Senior Associate Director, Space Planning & Operations University of Pennsylvania School of Medicine

## Monday, December 3rd, 2007

Attend all of the General Session Reports below.

## Searching for the right teaching, research, patient care integration formula

St. Michael's Hospital (University of Toronto, Li Ka Shing Knowledge Institute)

Jeffrey C. Lozon – President and CEO

Exactly how should teaching, research, and patient care be integrated in order to improve human health? That's the big question on everyone's mind, and it is the question that the St. Michael's Li Ka Shing Knowledge Institute has been established to answer. Here, Jeff Lozon profiles the charter of this leading-edge incubator initiative for testing and examining revolutionary new education techniques, knowledge exchange processes, research and care linkage mechanisms, and facility infrastructure strategies. In setting out the thinking behind this new initiative he reveals the major issues, opportunities, and barriers in developing successful integrated programs.

## Johns Hopkins' growth model for integrated planning and medical education

Johns Hopkins University School of Medicine

David G. Nichols, MD - Vice Dean for Education and Professor

A benchmarking axiom in the academic medical arena is to keep your eyes on Johns Hopkins. Dr. David Nichols sets out his views on where Johns Hopkins is headed with its science-based program and the integration of multidisciplinary medical practice with a collaborative learning curriculum. He examines the results of JHU's curriculum reform and its leadership initiative to integrate planning for programs, capital, facility use and operations, and budgeting across the institution (research, teaching, clinical care). He also gives current examples of JHU's commitment to medical technologies, information technology, and facilities for collaborative, interactive learning.

### Strategies for multi-site campus synergy

University of California, San Francisco

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Steven M. Wiesenthal, AIA – Associate Vice Chancellor and Campus Architect, Capital Programs and Facilities Management

Space constraints, town-gown relationships, natural geographical boundaries, and new programmatic initiatives are leading many academic medical centers to commit to multi-site campus models. What then happens to the intensely concentrated, collaborative, inter-disciplinary synergy essential to the academic enterprise? Steve Wiesenthal details the central issues, obstacles to overcome, and solutions that are being debated and implemented at UCSF and other institutions on this critical and timely subject. He chronicles the dialog, dialog participants, and proposals being put forth to create financial efficiencies, thread together academic and organizational linkages, and enhance or at least maintain institutional identity.

## Michigan State's Health Hill integrated, multi-player, development strategy

Michigan State University

Aron Sousa, MD - Senior Associate Dean for Academic Affairs

Michigan State's news-getting Health Hill initiative is built on an alliance of existing institutions to quickly create a major integrated health research, education, and patient care enterprise with a large regional economic impact. Aron Sousa profiles the vision and leadership formula for this initiative, and he chronicles early multi-institutional planning processes and decisions on financial linkages and program integration between multiple institutions prior to the development of capital programs. He also describes the ultimate capital program plan, and he renders verdicts on what is working really well, and what could have been done better.

### University of Washington's governance model for Medical Affairs and Health Sciences

University of Washington Health Science Administration

John Coulter - Retired Associate VP Medical Affairs, Executive Director Health Sciences

Integrated, interdisciplinary health science programs are a function of willing faculty, an effective governance model, and strong leadership from health science deans. That's where University of Washington's Health Sciences excels. John Coulter sets out the vision for an integrated academic health center of the future and examines the workings and results of the school's governance model. He also profiles particular program integration examples including a six-school, shared simulation learning center, a unique non-dedicated space approach to multi-disciplinary teaching, and the long range plan for a truly integrated, large scale, academic health sciences center in multiple locations.

### University of Rochester's plan for the integration of clinical and translational science

**University of Rochester Medical Center** 

Mary I. Ockenden - Associate Vice President for Space Planning

Long before it received a \$40million NIH Clinical and Translational Science Award (CTSA), the University of Rochester's School of Medicine and Dentistry was doing strategic planning to integrate clinical and translational science into a single new discipline. Mary Ockenden examines the process and governance structure for that coordinated planning effort, including the main planning agenda items and the methods used and lessons learned in engaging, rallying, and focusing the key players. She also illustrates decision-making on a new 150,000-sf CTSA-focused infrastructure investment for shared technology core facilities, teaching, community engagement, and interdisciplinary research.

## Tuesday, December 4th, 2007

Attend all of the General Session Reports below.

### U of C Medical Center's transparent planning for a more focused, integrated care/teaching program

**University of Chicago Medical Center** 

David S. Hefner - President

The University of Chicago Medical Center is deploying the precepts and tools of Mission-Based Management (MBM) to have department Chairs thinking and acting like Deans and CEOs with respect to a new, focused, efficient, integrated, patient care and teaching business model. David Hefner outlines policies and practices for open, transparent, financial planning processes and methods for building staff commitment and focus for an integrated institutional vision of the future. He also profiles key initiatives targeting the shared use of facilities and resources, a more distinctive research focus, increased community-based education, and increased interdisciplinary collaboration.

# University of Kentucky's new governance model for integrated planning and growth

**University of Kentucky Chandler Medical Center** 

Dr. Michael Karpf - Executive VP for Health Affairs, CEO UK HealthCare

While many AMCs are struggling toward program integration with seemingly never-ending streams of successive, slow, and confusing reorganizations and planning initiatives, the University of Kentucky has made a single leap to a totally new organization and governance model. Michael Karpf details the vision, implementation methodology, and the management structure of UK's new, integrated UK-HealthCare corporate enterprise. He illustrates special governance and organizational features such as the primacy of financial planning, transparent decision-making, and integrated planning processes for a \$2.5Billion medical campus of the future. He also catalogues early successes and lessons learned.

### Open-Forum/Town-Hall Meeting

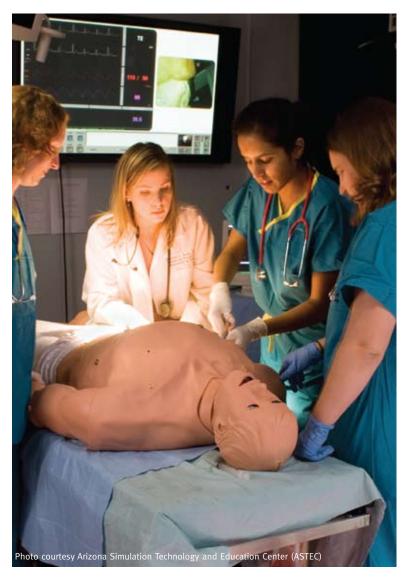
Tradeline, Inc.

Facilitators:

Steve Westfall – President

Derek Westfall - Vice President

Here you'll learn what others are doing with respect to space allocation management systems, capital spending planning processes and criteria, total cost of ownership (life-cycle) planning, specific plans and features to create collaboration linkages, planning for future technologies, green/sustainability policies and decision-making, and more. Also, this is an opportunity to put specific questions to the group for a group response. This session uses audience testimony and big-screen projection of real-time computerized note-taking to build a useful body of information on key and problematical issues. Session notes will be sent to all attendees.





## Monday, December 3rd and Tuesday, December 4th

Attend seven of the sixteen Sessions from pages 8-10.

### ► Integrated Planning (A - S-1)

## A. Planning models to align long-term institutional vision and capital investment

#### Cannon Design

Michael Pukszta, AIA – Principal, National Healthcare Market Leader M. Kent Turner, AIA, AAA, AIBC, OAA – President, North America

To align capital plans with institutional missions today requires a new way of thinking. Concepts must be adopted to meet the translational demands of the future of medicine. Traditional planning begins with today, and moves forward. Here, Kent Turner and Mike Pukszta demonstrate how to imagine the future and work backwards. They examine a methodology for basing plans on the futures of health demand, technological advances, scientific discovery, and resource supply, and then illustrate how this process is being used at Washington University, University of Chicago, and Indiana University.

Monday – 11:15 a.m. – 12:10 p.m.; Tuesday – 11:45 a.m. – 12:40 p.m.

## B. Integrated financial models and business plans for academic medical centers

Lord, Aeck & Sargent, Inc.

Jerry Percifield, RA – Principal

**Baylor College of Medicine** 

Susan M. Berget, PhD – Former Vice President & Vice Dean of Academic Planning University of Utah Health Sciences Center

James R. Bardsley, PhD – Associate Vice President for Finance & Planning
At the core of successful, integrated planning for academic medical centers is a strong, innovative business planning function that deals in the financial realities of future funding sources, revenue streams, and the growing costs of recruitment, technology investments, construction, and operations. Here, session leaders examine examples of the increasingly complex, sophisticated business planning processes, non-traditional funding strategies, and innovative business systems that are being employed to grow robust academic medical center research programs. They examine specific integrated financial planning and modeling processes and illustrate outcomes in terms of institutional vision and capital project initiatives.

Monday - 11:15 a.m. - 12:10 p.m.; Tuesday - 1:40 p.m. - 2:35 p.m.

## C. Strategic planning models that integrate research, education, and clinical care

Hellmuth, Obata + Kassabaum, Inc.

Jeffrey L. Schantz, AIA – Senior Vice President & Strategic Director of Science + Technology Charles Siconolfi, AIA, ACHA – Senior Principal, Director of Health Care Planning + Design

#### The Ohio State University Medical Center

Clay Marsh, MD – Professor & Director, Pulmonary, Allergy, Critical Care & Sleep Medicine It is one thing to write a vision statement for your integrated academic medical center of the future, and quite another to have a workable strategy that actually drives current initiatives in creating a future reality that aligns with that vision. In this session you'll see how real-time, vision-aligning strategies are being developed at leading institutions across North America. Session leaders examine vision statements, strategic planning methods, and capital program initiatives for institutions that are making evolutionary changes, adopting disruptive technologies, and developing totally new entities for integrated research, education, and clinical programs.

Monday - 1:15 p.m. - 2:10 p.m.; Tuesday - 10:30 a.m. - 11:25 a.m.

## D. An integrated planning method for multiple interests and dispersed operations

#### Flad & Associates

Laura J. Stillman - Principal/Project Director

Skanska USA Building, Inc.

William K. Flemming - Senior Vice President

#### Shands Healthcare

Bradley S. Pollitt – Vice President, Facilities

New, non-traditional integrated planning models are required for academic medical centers challenged with large capital projects involving multiple user interests, multi-building campuses, and split-campus operations. Here, session leaders detail a unique, tested and proven, iterative planning process that quickly builds multiple stakeholder consensus on optimum solutions for meeting requirements of technology, collaborative processes, space allocations, flexibility, and financial resources. They use the recent four-month, multi-stakeholder planning exercise for University of Florida's major Shands Teaching Hospital project to illustrate integrated planning communication tools, planning governance methods, planning outcomes, lessons learned, and process refinements.

Monday – 1:15 p.m. – 2:10 p.m.; Tuesday – 11:45 a.m. – 12:40 p.m.

## E. Integrated actionable masterplanning for building replacement scenarios

Tsoi/Kobus & Associates, Inc.

Matthew J. Cotton, AIA – Senior Project Manager Richard L. Kobus, AIA, FACHA – Senior Principal

University of North Carolina, School of Medicine

Robert W. Marriott, Jr. - Associate Dean, Resource Analysis, Planning & Management

#### **University of North Carolina Hospitals**

Mary A. Beck - Senior Vice President for Planning

#### The Ohio State University Medical Center

Steven P. Krakoff - Former Associate Administrator

The replacement of buildings is a big component of academic medical center planning. If not done from an integrated, on-going operations point of view, long-term institutional objectives of building stronger linkages between research, clinical, and teaching activities will be severely compromised. Here, session leaders demonstrate planning methods, outcomes, and lessons learned in master planning for the long-range vision in the context of on-going operational requirements during what can be decades of building-by-building replacement activities. In particular, they examine actionable master plans involving building replacement programs at Ohio State, UNC, and the Cleveland Clinic.

Monday - 2:30 p.m. - 3:25 p.m.; Tuesday - 10:30 a.m. - 11:25 a.m.

# S-1. Emory's vision, planning processes, and initiative for a fully integrated health sciences program

The S/L/A/M Collaborative

Sidney Ward, AIA - Principal

#### **Emory University Health Sciences Center**

Charles T. Andrews, MPA - Associate Vice President

Emory University is building three new buildings for its Health Sciences Center that are the foundation of the school's strategy for a premier academic health sciences program built on the true integration of research, clinical programs, and teaching. Sidney Ward and Charles Andrews examine the organization and governance of stakeholder

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planning and decision-making processes for this vision and plan, along with deliberations and final decisions on critical facility investments to achieve specific objectives in translational medicine, the use of new teaching modalities and technology platforms, and the creation of working, effective, integrated inter-professional partnerships.

AIA

Tuesday – 8:00 a.m. – 8:55 a.m.

#### ► Integrated Programs (F – S-3)

## F. Integrating medical education facilities into the larger health sciences complex

#### Ellenzweig

Michael C. Lauber, AIA - President

#### Michigan State University

Aron Sousa, MD - Senior Associate Dean for Academic Affairs

New planning concepts are shaping the way medical education facilities are being integrated into larger health sciences complexes. Here, Michael Lauber and Aron Sousa examine specific planning and policy decisions for two common challenges – integrating educational facilities into clinical and research activities (Michigan State University), and centralizing shared educational facilities (University of Utah). They illustrate the impact of medical education integration decisions on funding, resource sharing, and building operations, and they profile planning issues, processes, and final siting and facility solutions involving multiple stakeholders such as medicine, nursing, pharmacy, and allied health.

Monday - 11:15 a.m. - 12:10 p.m. Tuesday - 1:40 p.m. - 2:35 p.m.

## G. Linkages for research, teaching, and clinical care – planning for the global connection

Diamond and Schmitt Architects, Inc.

Paul Szaszkiewicz – Principal

#### St. Michael's Hospital

Robert Fox - Chief Planning Officer

Build to make your institution a vital part of a shared international healthcare community of research, education, and clinical programs. That's the thesis of this session, as well as that of the planners at St. Michael's Hospital (University of Toronto) and the Li Ka Shing Knowledge Institute. Paul Szaszkiewicz and Robert Fox demonstrate how planning for the new 240,000-sf Li Ka Shing Knowledge Institute is forging new models for international research and teaching connectivity, investments in technology, student demographics and cultural diversity, research and education environments, and space planning.

Monday - 1:15 p.m. - 2:10 p.m.; Tuesday - 1:40 p.m. - 2:35 p.m.

## H. Quantitative cost-benefit analysis on co-locating research labs with clinical facilities

Burt. Hill

Alexander K. Wing, AIA, LEED AP – Principal

#### University of Michigan Medical School

Jay L. Hess, MD, PhD – Carl V. Weller Professor and Chair

One theory holds that by co-locating research laboratories with clinical facilities the translation of discovery to application will happen faster and more frequently. Before you plan on that, learn here how that idea actually tested out quantitatively for the University of Michigan's Department of Pathology. Alex Wing and Jay Hess illustrate how to quantify physical constraints, people linkages, operational costs, the time-value of research, opportunity costs, and organizational factors.

They quantitatively analyze several different planning scenarios and draw conclusions on optimal siting and co-location decisions that meet the "lean management" tests. AIA

Monday - 2:30 p.m. - 3:25 p.m.; Tuesday - 10:30 a.m. - 11:25 a.m.

## I. Realignment initiatives to achieve real program linkages with real payoffs

CUH2A, Inc.

Cynthia R. Atwood - Senior Strategic Facility Planner

#### Children's Hospital of Pittsburgh

Roger A. Oxendale - President & CEO

Raphael Hirsch, MD – Professor & Chief, Division of Rheumatology

Getting the big payoffs of new funding streams, patient care reputation, educational excellence, financial strength, and regional economic growth depends on breaking through organizational, cultural, and physical barriers to forge real, working linkages between research, patient care, and teaching programs. How is that being done? Here, session leaders detail realignment initiatives at the University of Pittsburgh Medical Center illustrating changes in administrative thinking, planning processes, and facility infrastructure to deliver better patient healthcare and create new financial opportunities through public/private partnerships and an intellectual property program.

Monday - 2:30 p.m. - 3:25 p.m.; Tuesday - 11:45 a.m. - 12:40 p.m.

## S-2. Strategies for linking research, education, hospitals, and industry partners

SmithGroup, Inc.

Andrew Vazzano, FAIA – Senior Vice President, National Science & Technology Practice Jens Mammen, RA – Principal, Senior Health Care Planner

Learn here how expectations about future technologies, multi-disciplinary collaboration, distance learning, and other forces are shaping initiatives to forge linkages between biomedical research, medical education, hospitals, and in some cases, biotechnology industry partners. Andy Vazzano and Jen Mammen distill interviews with over three dozen deans, research directors, senior administrators, and scientists to illustrate planning principles and innovative solutions for effectively linking satellite campuses, jointly planned sub-campuses, and groups within fully integrated buildings. They examine the pros and cons of integrated planning scenarios, and they set out a framework for developing a workable integrated program strategy.

Tuesday - 8:00 a.m. - 8:55 a.m.

## S-3. Dubai/Harvard makes a state-of-the-art information center its integrating feature

Ellerbe Becket, Inc.

Mic Johnson, AIA – Design Principal

#### **Harvard Medical International**

Judith D. Mitchell, AIA – Director of Planning

The joint project between Dubai University Hospital and Harvard Medical School holds keen interest to academic medical center planners worldwide as a benchmark for "clean-slate" thinking about program and infrastructure planning. Of particular interest is the concept of making a patient and family education center and state-of-the-art information resources library the primary linkage concept for clinical, education, and research programs. Session leaders profile the organizational and operational vision for this new complex, and they illustrate key planning metrics, innovative features, fit-ups, costs, and utilization concepts for the critical integrating element of the information hub.

Tuesday - 8:00 a.m. - 8:55 a.m.

## Monday, December 3rd and Tuesday, December 4th

Attend seven of the sixteen Sessions from pages 8-10.

### ► Technology Initiatives (J – S-4)

### J. Integrated planning for new medical simulation learning technologies and facilities

#### **Payette**

J. Ian Adamson, AIA - Principal Paula Buick - Associate

#### University of Massachusetts Medical School

Timothy Fitzpatrick – Associate Vice Chancellor for Master Space Planning The use of advanced medical simulation tools is becoming a major component of medical education to the extent that they now command planning attention in the form of full-scale "skills and simulation centers." Here, session leaders examine integrated program and facility plans for shared-use, multi-disciplinary simulation centers making use of the hi-fidelity mannequin technologies. They detail the range of services offered by simulation centers and clinical skills centers, and operating models. They also set out space planning metrics, and they examine plans for maximizing the utilization of these learning environments. AIA

Monday - 11:15 a.m. - 12:10 p.m.; Tuesday - 10:30 a.m. - 11:25 a.m.

### K. How patient treatment models and new technologies are changing patient care and medical education

#### **CO Architects**

Scott Kelsey, AIA - Managing Principal Stephen Yundt, AIA, ACHA - Principal Jonathan Kanda, AIA, LEED AP - Senior Associate

New advances in the approach to patient care and associated technologies are blurring traditional lines between clinical and educational programs. Here, session leaders profile how several academic medical centers are grappling with advancements in surgical intervention, acuity adaptable patient care and "disruptive technologies" such as robotic surgery. They examine the impact that these initiatives are having on institutional planning for clinical and teaching programs as well as the physical environments. They demonstrate new thinking about program interrelationships, and they will detail innovative facility planning solutions that address the emerging patient care and medical education models. AIA

Monday - 1:15 p.m. - 2:10 p.m.; Tuesday - 1:40 p.m. - 2:35 p.m.

### L. New videoconferencing plans for geographically distributed medical education

#### AMBiT Consulting, Inc.

Katya Wilson, MBA, PMP - Principal Dan Zollmann, P. Eng., PMP - Principal

#### University of British Columbia

Susan G. Mair - Director of Information Technology, Faculty of Medicine

An attractive strategy for growing medical enrollment quickly and cost-effectively is program distribution via videoconferencing technology, including synchronous delivery of lectures and laboratories across multiple sites. However, given the rapid change in videoconferencing technologies, the complexities and pitfalls in system implementation, the priority of maintaining accreditation, and the high cost of implementation failure, these initiatives demand focused, specialized planning. Here session leaders reveal curriculum, financial, facility, and IT planning details for UBC's new state-of-theart system illustrating planning processes, time horizons, purchasing and implementation decisions, physical infrastructure plans, capital and operating budgets, and pitfalls to avoid. AIA

Monday - 2:30 p.m. - 3:25 p.m. Tuesday - 11:45 a.m. - 12:40 p.m.

### S-4. Integrated flexibility plans for multi-user, high-technology imaging investments

#### Shepley Bulfinch Richardson & Abbott

Jennifer Aliber, AIA, ACHA, LEED AP – Principal, Healthcare Planning Elise F. Woodward - Principal for Project Delivery

#### University of Michigan, Cardiovascular Center

Kim A. Eagle, MD, FACC – Clinical Director Linda R. Larin, CHE, MBA - Chief Administrative Officer

Margaret C. Lacki, RN, BSN, CCRN - Nurse Consultant Equipment Planner

The new technology planning model for patient care is the large, shared, high-technology, high-investment procedure area. While you may be planning for multi-department sharing of technology investments such as a Stereotaxis Niobe MRI guided navigational system, CT Angiography, hybrid vascular surgery and interventional radiology, and more, what about 7 years from now? Here, session leaders examine flexible, multi-user, technology planning for the University of Michigan's new cardiovascular center. They profile capital and multiuser collaborative planning processes, equipment vendor strategies, and the specifics of infrastructure plans that anticipate future technologies and changes in equipment sharing practices. AIA Tuesday - 8:00 a.m. - 8:55 a.m.



## **Facility Site Tours**

### See these innovative facilities!

### Sunday, December 2

Tour #1: Departs hotel at 1:00 p.m.; Returns to hotel by 4:30 p.m.

### Skaggs School of Pharmacy and Pharmaceutical Sciences Building

This 76,000-sf Pharmaceutical Sciences Building provides state of the art facilities for pharmaceutical research and instruction with features that promote interaction between researchers and connectivity with other universities and institutions. Here you'll see both wet and dry research lab space, shared lab support facilities, computer-intensive computational research areas, faculty offices, meeting spaces, administrative offices, instructional spaces (some with provisions for distance learning capabilities), and an auditorium.

#### **UCSD Biomedical Library**

The \$17-million expansion and renovation of the Biomedical Library entails the addition of 43,454 square feet of new space and the renovation of an existing 32,950-sf facility to accommodate more than 4,000 students, faculty, and visitors. The expanded library features a 24-hour graduate study lounge; high density movable shelving; specialized research collaborative areas for semi-private study; research and group study/consultation rooms; networked computer stations and training facilities; and wireless Internet access throughout the building. The renovation brings in more natural light and includes new ceiling domes as well as an open-air walkway through the building.

#### Leichtag Biomedical Research Building

The Leichtag Family Foundation Biomedical Research building is a 146,000-gsf, \$45-million facility that houses the biomedical research components for UCSD's School of Medicine. It has 40,000 square feet of wet and dry lab space with 30 lab modules per floor, cold rooms, procedure rooms, and dedicated dark



rooms. Open lab areas are in the middle of the building. A special feature of this building is the use of outside walkways that also serve as window sunshades and allow for a very open interior lab circulation scheme. The facility is complemented with a 2,000-sf conference center, and a five-story atrium, known as the Scholarly Interaction Space, which is open from the first floor to the roof level.

Tour #2: Departs hotel at 1:30 p.m.; Returns to hotel by 4:00 p.m.

## Rebecca and John Moore's UCSD Cancer Center

The largest project ever undertaken by UCSD Health Sciences, the \$105-million, 273,000-sf Cancer Center is a patient-friendly environment which fosters a culture of interaction by bringing researchers, clinicians, prevention specialists, and educators under one roof in a "bench-to-bedside" approach to conquering cancer. The center is comprised of a three-story clinical service and administration/education facility, and a five-story

research center. The clinical care features you will view are twenty-four exam and procedure rooms, chemotherapy, radiation, oncology, a 30-chair chemotherapy/infusion center, imaging, a pharmacy, physician offices, and support spaces. A shaded bamboo court and a series of smaller gardens, called the Healing Gardens, offer relaxing settings for patients and their families. Functioning as spaces to meet and exchange ideas, there is an outdoor space for dining and interaction, as well as a "living room" space for staff, clinicians, and researchers. The research and education facilities feature wet-bench research laboratories, support, and associated office space, a shared resources lab for biostatistics, molecular pathology, DNA sequencing, and other equipment and technology. You will also view space for the latest imaging technology housed at the Center - the Trilogy linear accelerator, (one of only 12 nationwide), intensity-modulated radiation therapy (IMRT), functional magnetic resonance imaging equipment, and a full field digital mammography (FFDM) machine.

### **Important Tour Notes:**

Attendance is limited. Space on each tour will be filled on a first-come, first-served basis.

YOU MUST SIGN UP IN ADVANCE (SEE REGISTRATION FORM) AND HAVE WRITTEN CONFIRMATION FROM TRADELINE, INC. IN ORDER TO ATTEND THE TOUR.

All tour participants must arrive at site on the tour bus with the tour group. For security reasons, no one may meet the group at the tour site. We cannot make any exceptions.

A \$25 bus transportation fee will be charged to your registration fee. This fee is non-refundable for cancellations made within 2 weeks of the tour date.

## Registration and Accommodations



The conference will be held at: **San Diego Hilton Resort on Mission Bay** 1775 E Mission Bay Dr. San Diego, CA



Online

www.TradelineInc.com



Fax

925.254.1093 From outside the U.S. 1.925.254.1093



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#### **Register Now!**

www.TradelineInc.com/ AcademicMedicalCenters

Register with payment by **Nov. 2nd & Save \$150** 

### How to Register:

**Conference Registration Fees** 

Payment must accompany registration to receive early discount.

**\$1340** single registration with payment by 11/2/07

\$1490 single registrations after 11/2/07

#### **Team Discounts!**

Save an additional \$100 per person for groups of 2 or more from the same organization. For groups of 5 or more, please call Tradeline for additional discounts available.

#### Registration fee includes:

All general sessions, selection of forums/ workshops, a dessert and coffee reception, two lunches, one breakfast, a wine and hors d'oeuvres reception, refreshments and a conference workbook of speakers' presentations.

#### **Registration Information**

#### Make checks payable to:

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All cancellations and changes to registrations must be received by Tradeline, Inc. in writing.

You may make substitutions at any time; please notify us as soon as possible.

Full refunds will be given for cancellations received in writing 14 days or more prior to the event. A \$150 service fee will be charged for cancellations received between 14 and 6 days prior. No refunds will be given for cancellations received within 5 days of the event.

## Hotel and Travel Information:

#### **Room Reservations**

Tradeline has reserved a block of sleeping rooms for this event at The San Diego Hilton Resort. For registrations received by Nov. 9th, 2007, Tradeline will handle and confirm room reservations [based on availability] according to your instructions on the registration form.

This is a 100% non-smoking hotel.

## After November 9th, 2007, please call Tradeline for room availability.

#### Changes

All room reservations and changes must originate through Tradeline, Inc. to obtain the special rate. If you contact the hotel directly, you may be informed that they are sold out, or you may be charged a higher rate.

#### **Room Rate**

The discounted room rate for this event is \$179/night single or double occupancy.

#### **Room Payment**

Tradeline does not accept payment for room reservations. Hotel charges are paid to the hotel directly upon checkout.

#### **Travel Information**

#### **Airport-to-Hotel Transportation**

The San Diego Hilton on Mission Bay is just 15 minutes from the San Diego International Airport.

Several shuttle companies leave from outside the baggage claim area of the airport. Taxis are also available.

#### **Travel Assistance**

For one stop shopping, Tradeline's official travel agency, AVB Travel, can assist you with all your airline and rental car reservations. Call them at 1-800-508-9133 9am – 5pm Pacific Time.

## **Academic Medical Centers 2007**

## December 3-4, 2007, The San Diego Hilton Resort on Mission Bay

#### 1. Please Type or Print Clearly (or register online at www.TradelineInc.com/AcademicMedicalCenters)

- Conference registration is not complete until confirmed by Tradeline, Inc.
- Please confirm airline reservations only after confirmation of registration.

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Title/Position				
Institution				
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Phone	Fa	ıx		
Attendee Contact Email				
Alternate Contact Email				
2. Register with Pay	yment Befor	e November	2nd, 2007 and	Save \$150
	Payment by 11	1/2/07 Full price	With site tour a	add:
Single Registration Team Registration Discount		□ \$1,490 □ \$1,390	□ \$25 □ \$25	
*Name of other team regist	trant(s)			
☐ Canadian Organizations :☐ Vegetarian meal request		urrency par-value	adjustment)	
3. Select a Method	of Payment			
To receive early discount, preceived by conference dat			tion. Payment or P.O. a	# must be
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Arrival Date:	Dep	parture Date:		
*Special Requests:				
This is a 100% non smokin	g hotel.			

☐ No, I will not require a hotel reservation.

All rooms are guaranteed. For changes or cancellations, please notify Tradeline at least 72 hrs. prior to your scheduled arrival. No-shows and cancellations within 72 hours of arrival are subject to a charge equal to one night's stay.

#### 5. Site Tours

Sunday, December 2 ☐ Tour #1 Skaggs School of Pharmacy; UCSD Biomed; Leichtag Biomed ☐ Tour #2 UCSD Cancer Center (Choose 1)



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Todd Reynolds, Facilities Manager, GE Healthcare

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Conferences on the Tradeline 2008 schedule (www.TradelineInc.com/Conferences):

## Mark your calendars for these 2008 conferences:

□ Lean Management Models for FM & Capital Projects

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☐ Biocontainment Facilities 2008

April 21-22 – Washington, DC

□ Research Buildings 2008

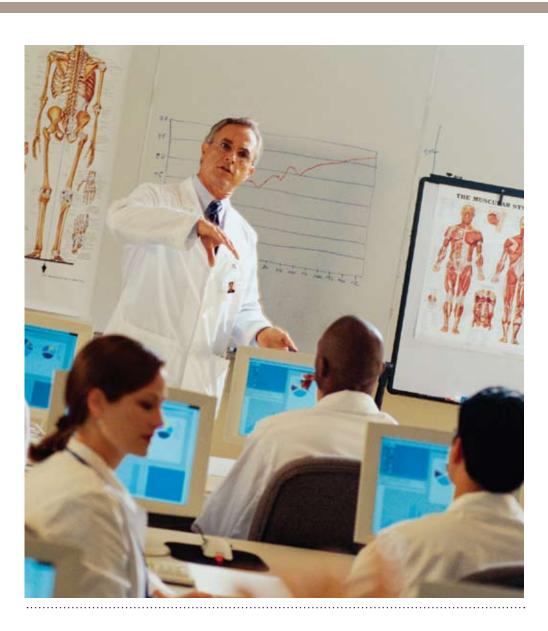
May 5-6, 2008 — Boston

□ College & University Science Buildings 2008

October 27-28, 2008 — San Diego

☐ Animal Research Facilities 2008

December 8-9 - St. Petersburg, FL



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Please send me complete program information on the conferences I've indicated above.

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