



**President’s Message**

Our Health Care Council successfully planned and executed participation in the Health Care Design 2010 Conference held November 14 to 17 in Las Vegas for 3700 attendees. Our role was to develop the FM track of eleven presentations. It was the HCC’s biggest and most high profile event we have ever planned and by all accounts it was a great success. After all the planning and excitement of doing an IFMA Council first-ever event like this, yours truly was not able to attend. In my nearly 30 years of attending or participating in IFMA events I had to miss one. The team went on and accomplished the mission. Gary Collins wrote a short article featured on page 2 of this newsletter capturing the essence of what we accomplished. Thank you Gary!

We had a good program for graduate students of Georgia Institute of Technology at World Workplace in Atlanta. One of our strategic goals is to help with the education of future healthcare Facility Managers. Brian Weldy assisted the effort along with Leo Gehring, and Kathy Roper (IFMA International board member and professor at Georgia Tech) and Glenn Fischer. The students were invited to participate in the “Energy, Economics & Environment: Making the 3Es Work Together in Healthcare” and meet with FMs for networking and mentorship following the program.

As 2010 comes to close I look back on the year and see an enormous amount of volunteer time, energy and effort going into making the year a success. If you want more detail on how and why we do this for our members please read the October *FacilityCare* magazine (excerpted below) where I was interviewed by the editor. I think it really captures the essence of the IFMA Health Care Council.

Bill

***See Facility Care Excerpt on page 2 !!***

**Health Care Council Premier's First-ever Facility Management Educational Track at HCD.10, Las Vegas, NV, November 13 – 16, 2010**

*By Gary Collins*

If you would have asked me to draw up a strategic plan seven years ago that had the IFMA-HCC organizing a major educational track at a significant health care industry conference, I could have only speculated what that path might look like. The results included the development of 9 educational sessions and 2 workshops for HCD.10 and our logo on the same line as The Center for Health Design and the AIA.

The HCC has accomplished many things over the past 3 – 4 years but this has to be at the top of our list and if you couldn’t make it to Las Vegas I want to share with you a little of what it was like to be on the main stage at one of the leading healthcare conferences in the country.

Our planning began 9 months ago and we really began to feel the excitement when HCD.10 began to launch their marketing efforts and highlighted that this was the first ever Facility Management Track.

With attendance at HCD.10 actually up this year, about 3,700, we began our workshops (room capacity of 125) on Saturday with almost 100 in the audience for each workshop.

Sunday was the opening of the exhibit hall where the HCC had a booth and we did our best to inform those on the floor who we are and what others are missing by not being a member. Jeff Tafel, Director of Councils, joined us in the booth to experience a little of what the HCC had accomplished in gaining this incredible opportunity.



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We had 6 sessions on Monday and 3 sessions on Tuesday in rooms that could seat up to 286. To the best of my counting we maintained a steady 250 – 270 in the audience for the majority of the sessions.

I thought the highlight of the FM educational track was “From Square Feet to Cash Flow: Bridging the Language Gap between Facilities and the C-Suite” with Todd Wilkening of Ridgeview Medical Center and Rob Casalou, President & CEO St. Joseph Mercy Hospital. These two did a stand up routine as if they were working in the same facility asking each other questions and providing the audience with an unusual upbeat and fun presentation. Casalou, the only CEO at the conference, really got into the session and enjoyed sharing what he and his board look for when it comes to capital projects and the business of healthcare.

When these two were done you really felt like you learned something about the strategies of communicating with the C-Suite when it comes to getting everyone on board to gain approval for a project.

Monday night we held our Speakers Reception to thank our speakers and gain an evening to network and promote our cause. Jeff Tafel spoke to the group and took a few minutes to share some of our successes.

I have to share with all of you that the HCC is perceived as a much bigger organization than what we really are and when you look at our track record you can see why. We do things on such a grand scale including the Green Patient Room, 23 City Seminar Series, and now HCD.10, that those who don't know us assume we are much larger, otherwise we couldn't accomplish all of this.

This speaks volumes for the marketing and ingenuity of the HCC and makes the point that you don't have to be a large organization to do big things. You just need a collection of talented and passionate people who love what they do.

Speaking as one of the officers who have been part of this incredible run I can only hope others in our organization feel the same pride of our successes and are sharing these successes with your colleagues. We still remain one of the best kept secrets in the health care industry but with success stories like HCD.10 not for much longer.

## **Excerpted from FacilityCare, October 2010, page 10**

### ***FacilityCare: What is the IFMA Health Care Council's mission for 2010 and 2011?***

**William Gregory:** Before I can tell you what our mission is, I must tell you a little about our council management and leadership. It is unique. We pride ourselves in making things happen. Others have told us we are like a “gazelle compared to a hippopotamus” when viewed by other organizations for innovative ideas, leading-edge programs and quickness to market benefiting our membership and healthcare facility managers at large. Since we are funded primarily from membership dues, we have to be creative in finding resources and partnership to advance our agenda. Healthcare employers are frugal with travel and expenses for administrative employees.

As a result, many of our officers have not been to a face-to-face meeting for a year or more. Last February the council was able to meet in Atlanta with minimal cost to the council because of the support of a generous sponsor! The event turned out to be an excellent planning session for us. We do a fast-paced, hour-long monthly conference call to move our agenda. You could say we are a dynamic “virtual council” at times. I am extremely proud of the group we have leading the council.

Our success stories are legendary. The Green Patient Lab (GPL) has been exhibited at 15 venues in four countries and viewed by 75,000 people. The GPL has appeared 85 times in industry publications. By co-sponsoring an innovative and educational half-day multi-year seminar, we've reached out to 23 cities and 2,500 participants. The seminar is currently titled “Energy, Economics and Environment: Making the 3 E's Work Together in Healthcare.” We just completed the first significant Facilities Operations Benchmarking project working with ASHE as one of our significant collaborative relationships. Recently a new collaborative agreement was signed with Practice Greenhealth to further our Sustainability agenda. We are extremely pleased with our latest endeavor, which is developing the first-ever Facility Management track for Healthcare Design 2010 in Las Vegas in November.



It is easy to see our mission and focus are networking and education with a strong emphasis on sustainability. Our members are seeking better ways to exchange ideas while networking and communicating more effectively with the “C-suite,” which is the mission of the facility manager and the “business within the business.” We want to engage all stakeholders in the global healthcare facility professional network while communicating the value proposition and importance of the facility professional. Our past and future success will be the continued strength and building of collaborative relationships.

**FC:** *What do you consider to be the toughest challenges facing healthcare facility managers today?*

**WG:** Healthcare facility managers continue to be challenged with finding new, innovative ways to accomplish their work and lead the staff while reducing the overall cost to the organization. Doing more with less has worn thin, as it has been around too long and has become trite. The new leader in healthcare facility management leverages technology for communications, business systems, distance learning for staff and organizational development. The person has a bachelor’s degree at a minimum and maybe a master’s degree in business administration. This person is recognized as a leader by the C-suite and easily shows financial results of their operation in terms of business metrics that other leaders understand. If you get a group of healthcare facility managers in a room, you may see an aging group to say the least! Our toughest challenge is developing the next generation of healthcare facility professionals to step into the shoes of those retiring. We are working actively in this area as well.



*Todd likening (HCC VP of Research and Director of Facilities, Ridgeview Medical Center) and Sean Goings (Schneider Electric) enjoy the evening at the Springs Preserve.*



*Jeff Tafel, Larry Parrett of NBBJ and wife Keli enjoy the reception.*

*In addition to developing the Facility Management track at HCD.10, the HCC also hosted a speaker’s reception, and exhibited a tradeshow booth.*



*Monday evening sponsors reception and transportation: Turner, Herman Miller Healthcare, Nora and SSR.*



*At the HCC’s Monday evening reception at HCD.10 IFMA’s Director of Councils, Jeff Tafel, greets speakers and sponsors.*

**REGIONAL DIFFERENCES,  
COST BOTTLENECKS  
STAND OUT IN HEALTHCARE SURVEY**

Regional differences in how healthcare professionals perceive progress on sustainability and bottlenecks on cost related issues stood out in a recently completed survey conducted by the IFMA Healthcare Council and Corporate Realty, Design & Management Institute (CRDMI). The survey was conducted as part of a seminar series on “Energy, Economics & Environment: Making the 3Es Work Together in Healthcare.” The seminar was given in 10 U.S. cities throughout 2010: Atlanta, Boston, Charlotte, Chicago, Dallas, Denver, Kansas City, Phoenix, St. Louis, and Tampa.

IFMA-HC members can download the survey results for free at [www.squarefootage.net](http://www.squarefootage.net)

Among the key findings:

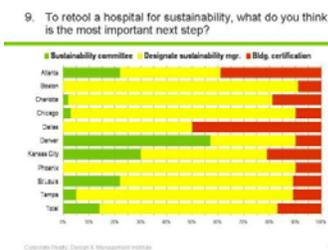
- Midwest healthcare pros (and Boston) think they’re just as sustainable as other industries. Other regions think they’re doing worse
- First cost dominates purchasing decisions with two notable exceptions
- Everyone thinks energy costs are going up. If their crystal ball is right, rates will jump twice as high as federal government forecasts
- Far too many underestimate financial impact of energy savings
- When retooling for sustainability? 69% say appoint a Sustainability Manager
- Green washing is worse than ever say 81%
- There’s stunning lack of confidence in new technology
- Reliability of infrastructure outweighs other concerns - except in Chicago
- Majority of healthcare pros take time to research scientific sources prior to buying

Sustainability is on virtually everyone’s radar screen, but a bottleneck on first cost issues continues to hinder progress. More than 80% said “initial cost” takes precedence in final selection of equipment and materials on recent projects. While facility professionals and their suppliers understand the need to emphasize value rather than low first price – there’s a gap in communicating that value proposition to the C-Suite. Rays of hope shine in two cities: Denver and Chicago.

One-third in Denver said durability/ expected life takes precedence. Nearly 50% in Chicago said sustainable features or durability/expected life were the critical criteria.

The survey indicated, however, that healthcare industry professionals are doing their homework. One-third said they research scientific sources prior to selecting new products or equipment, and over 60% said they conduct research at least occasionally.

Most respondents misjudge the positive financial impact of cutting energy costs. When asked, “Every dollar the average hospital saves on energy is equivalent to producing how much revenue?” Two-thirds answered \$10. This answer underestimates the correct answer of \$25 by a whopping 60%. Uncertain is whether this is the result of financial illiteracy or simply failing to understand the dramatic dollars and cents impact of energy savings? Atlanta and Denver were the only two cities where at least 50% of respondents answered this question correctly.



*Majority of interviewees in survey say appointing a sustainability manager is most important next step to retool a hospital for sustainability. Survey was conducted at 2010 “Energy, Economics & Environment: Making the 3Es Work Together”*

*seminars. Complete survey findings can be downloaded for free at website, [www.squarefootage.net](http://www.squarefootage.net)*

More than 60% of respondents think energy costs will rise 4-7% next year, and nearly 30% think they’ll climb 7% or higher. To put this in perspective, the federal government projects energy costs will double over the next 25 years. If energy rates rise at 4-7% yearly, the cost of energy will quadruple in this 25 year time span. Boston respondents were by far the most conservative in their projections, as 60% felt energy costs will rise 1-3% in the next year.

A trend that emerged in the first half of the year continued as nearly 70% think hospitals need a sustainability manager if the industry is to retool effectively for sustainability. Denver gave preference to creating a sustainability committee. Atlanta and Dallas gave equal weight to obtaining building certification such as LEED or Energy Star. The recent IFMA World Workplace conference in Atlanta reinforced that sustainability is becoming a core competency for facility professionals.

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Regional differences are evident in how the industry perceives itself. In the Midwest, over 60% feel that healthcare is implementing sustainable solutions as effectively as or better than other industries. Over 50% in Boston agreed. It was the opposite in the Southeast, Southwest and Rocky Mountain regions as 60-85% said, "We're doing worse." Yet, one executive mused, "Healthcare is also holding itself to a much higher standard than other industries."

### **Plans Underway for 2011 Seminar Series**

More than 600 healthcare professionals registered for the "Energy, Economics & Environment: Making the 3Es Work Together in Healthcare" seminar series during 2010.

Building on this success, planning is underway for 2011 including selection of cities. In addition to selecting 10 U.S. cities, an event is being planned in Toronto to serve IFMA-HC's Canadian members. If you want your region included in the 2011 tour, speak up now.

Anyone wishing to get involved in the 2011 seminars can contact Glenn Fischer, IFMA-HC Vice President of Education: email: [gfischer@squarefootage.net](mailto:gfischer@squarefootage.net) or phone: 503-274-7162.

The range of opportunities include sponsorship, table-top displays, sharing your expertise on panel discussions, recommending qualified speakers, and helping promote the event when it's in your region.

### **Speakers Share Expertise, New Projects Info**

In 2010, an amazing group of speakers and panelists shared their expertise and gave attendees an inside look at a multitude of new hospital projects:

#### **Atlanta, GA**

**Stephen Ferrin**, Project Manager at Stanley Beaman & Sears

**Alison Levino Jones**, AAHID, ASID, IIDA, LEED AP, Principal at Levino Jones Medical Interiors

**Brian Weldy**, VP/Engineering & Facility Management Services at HCA Services, and VP/Sustainability, IFMA Healthcare Council

#### **Boston, MA**

**Patrick Lepski**, Energy Solutions Manager, Schneider Electric

**Andrew Coffin**, Program Manager, Energy Efficiency Services, NSTAR

**Todd Manegold**, Market Intelligence Healthcare Leader, Philips

**George Player**, Director Engineering, Brigham & Women's Hospital

**Roland Serino**, System Engineering Manager, Dryvit Systems, Inc.

**Todd D. Smith**, Energy Solutions Manager, Tremco

#### **Charlotte, NC**

**Timothy Spence**, Principal, Healthcare Practice Leader, BBH Design

**Phil Stephens**, Director/Facilities Management Services, Carolinas Medical Center-Northeast and ASHE Region 3 Director

#### **Chicago, IL**

**Aimee Platt**, Associate, RTKL Associates

**Rey Tuazon**, Utilities Manager, Adventist Hinsdale Hospital

**David Urschel**, Senior Associate Principal, Healthcare Practice of Loebel Schlossman & Hackl

#### **Dallas, TX**

**Sonya O'Dell**, Associate Principal at BOKA Powell

**Lou Saksen**, VP of Facilities Planning & Development, Parkland Health & Hospital Systems

#### **Denver, CO**

**Rob Reid**, Director/Facilities Operations, The Children's Hospital

**Derek Shockley**, Trade Relations Manager and Demand Side Energy Management, Xcel Energy

**Margie Snow**, Principal at Gallun Snow Associates

#### **Kansas City, MO**

**John DeWitt**, Director of Engineering, Children's Mercy Hospital & Clinics

**Jacqueline Foy**, HMN Architects

**Penny Johnston**, Interior Designer, Visions in Architect

#### **Phoenix, AZ**

**Frederic Lastar**, Director of Facility Services for Phoenix Children's Hospital

**Bill Sheely**, Managing Partner & Healthcare Leader at Orcutt Winslow

#### **St Louis, MO**

**John Farnen**, Regional Director, Planning Design & Construction Mercy Health System

**Anne Hill**, Director of the Energy Solutions Group Murphy Company

**Tim Koenig**, Director Electrical Heideman Associates

#### **Tampa Bay, FL**

**Laura Guinan**, Project Manager, St. Joseph's Hospital -North

**Heather Langford**, Sustainable Solutions Group, SSRcx

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## Infection Control Covered at 3Es seminar in Dallas



Joining seminar leader Alan Whitson as guest speakers at “Energy, Economics & Environment: Making the 3Es Work Together in Healthcare” seminar were Sonya Odell of AAHID and Associate Principal at BOKA Powell, and Susan Raterman Easley, Founder of Raterman Group. Raterman gave a bonus presentation to attendees on “Infection Control: Creating a Safe Environment for Healing.” Seminar was co-hosted by Texas Health Presbyterian.

Pictured left to right: Odell, Whitson, Raterman

## Parkland Expansion Featured at 3Es seminar in Dallas.



Design, sustainability and community goals for Parkland Health & Hospital’s new \$1.2 billion campus were laid out by Lou Saksen, VP/Planning & Development, at “Energy, Economics & Environment: Making the 3Es Work Together” in Healthcare seminar.

## University of Colorado Anschutz Medical Campus



Located in Aurora, CO was one of ten venues for “Energy, Economics & Environment: Making the 3Es Work Together in Healthcare” seminar series. Anshutz campus encompasses 31 buildings totaling more than 3.6 million square feet. Rob Reid, Director of Facilities Operations for The Children’s Hospital at Anshutz campus, was guest panelist. IFMA-HC educational programs have been given at multiple medical campuses over the past four years

## Catch the buzz!

As a Facility Manager (FM) have you caught on to what so many have? We are not talking about the Operations of Facilities Management, but rather the “Business of Facilities Management”. Not revolutionary but rather phenomenally spectacular to say the least.

In the spring of 2010, IFMA’s Health Care Council and the American Society for Healthcare Engineering (ASHE) released a 1<sup>st</sup> time national benchmarking study for health care FMs that brought the operational language of facilities management and the health care business language of health care together. The name of the report is titled “Operations and Maintenance Benchmarks for Health Care Facilities”. This report has inspired the attention of many health care professional organizations. This includes the American Hospital Association (AHA) and Practice Green Health. It has also been well received during formal presentations at IFMA’s World Work Place and Health Care Design and Construction Conferences held this year. You can easily obtain this report at [www.ifma-hc.org](http://www.ifma-hc.org).

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FMs around the country have begun to leverage this key strategy as a means to getting their needs met despite pressures of “going green”, health care reform, and reduction in resources. Buildings are being constructed, renovated, or retrofitted with greater momentum and ease than ever before. Staff satisfaction is increasing. Yes even during economic challenging times.

In the last year, many FMs who have embraced this sound approach are getting their needs met, are doing so with less stress and far few headaches. Additionally, they are becoming rapidly perceived as a serious and solid business partner at the financial executive table influencing change that not only benefits their own departmental needs, but also the needs of the C-Suite. Why has this become such a key need for the C-Suite? You are assisting them in the business’s success in terms they use and understand each day. Today’s C-Suite is concerned more than ever. This comes from the healthcare reform act; they need to justify the cost of health care to the consumer, increased competition, social expectations, and more.

*“A little smile, a word of cheer, A bit of love from someone near, A little gift from one held dear, Best wishes for the coming year.”*  
~John Greenleaf Whittier~

By assisting the C-Suite in meeting these business concerns, you are helping yourself tremendously. The C-Suite values the “Triple Bottom Line”. This clearly mandates that business’s success lies in economic, ecological and social benefits. Some identify the triple bottom line in terms of the 3 pillars. People, Planet, and Profit.

Embracing this into the FM world easily means better working environments and reliability (People), reduction in our carbon foot print (Planet) while reducing energy consumption (Profit, to say the least). This logic ultimately improves bottom line of the organization through numerous direct or indirect means.

By using this approach as identified in the Operations and Maintenance Benchmarks for Health Care Facilities report, you are making a stand as to what the cost of health care is at a micro level. For example, you will bring delight to the C-Suite to have data that shows that for each and every patient we see, the cost of electrical usage is \$22.50.

You will be able to make the claim that “by supporting my recommendation of improved efficiency of 5%, I will bring additional cash flow into to the organization by \$1.13 per patient (*value*). Do not confuse this with a FMs history of “take aways” meaning lowering our budgets (expense).

The stars of health care are aligned like never before for FMs to grasp and further assist in the advancement of your organizations success, not to mention your own. These stars are bright if paid attention to. Pursue them. But keep in mind, stars can quickly fade.

FMs need to continue not only be pursuing these stars, but also be a star themselves.

In today’s economic times and while the health care reform act is in its infancy, as a fellow FM do all you can to focus on the *value* of the audience you are accountable to. Remember a health care organization cannot deliver its mission of excellent patient care without financial strength. You indeed represent pillars of success which ultimately means accomplishing your FM goals. *Catch the Buzz!*

By Todd Wilkening



**Todd Wilkening**, Director of Facilities has more than 25 years of experience in health care facilities management and the facility director at Ridgeview Medical Center, Waconia, Minnesota while leading Ridgeview’s Green Team. He is currently the VP of Research for the International Facility Managers Association Health Care Council (IFMA-HCC) and was integral to developing the 2010 Operations & Maintenance Report described above. Ridgeview Medical Center is a 4 time winner of the Practice Green Health Environmental Leadership Award, has received the Minnesota Governor’s award for Pollution and Waste Reduction, and is among the nation’s top 5% for Patient Safety Excellence according to **HealthGrades**.

# Heartfelt Thanks To Healthcare Solution Leaders

Thanks to our 2010 partners, sponsors, and supporters for making the *Energy, Economics & Environment: Making the 3Es Work Together in Healthcare in Healthcare* seminar series a smashing success. These companies and organizations are leaders in their industries. Their innovative solutions, technological breakthroughs, and dedication are resulting in the best healthcare facilities in the world.

## Platinum Partners

Forbo Georgia Pacific Philips Schneider Electric

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Dryvit Sika Sarnafil  
Dupont Building Innovations Tremco  
KONE Wausau Window & Wall Systems

## Silver Sponsors

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North Kansas City Hospital, Kansas City University of Colorado Anschutz Medical  
St. Joseph's Hospital-North, Tampa Bay Campus, Aurora, CO

## Supporting Professional Organizations

AIA Academy of Architecture for Healthcare • American Academy of Healthcare Interior Designers (AAHID) • ASHE Chapters: Central Arizona, Colorado, Florida, Georgia, Kansas City Area, Missouri, North Carolina, Northern Illinois, Texas • Georgia Tech School of Building Construction • IFMA Chapters: Atlanta, Boston, Charlotte, Chicago, Dallas-Ft. Worth, Kansas City, Phoenix, Suncoast • Metro Chicago Healthcare Council • USGBC Chapters (multiple regions)

## Where Seminar Viewed 2010

Atlanta • Boston • Charlotte • Chicago  
Dallas • Denver • Kansas City • Phoenix  
St. Louis • Tampa

## Coming Soon 2011 Schedule

Watch for 2011 schedule of healthcare  
educational seminars at  
[www.squarefootage.net](http://www.squarefootage.net) and [www.ifma-hc.org](http://www.ifma-hc.org)

Seminar Series of  
IFMA Healthcare Council and Corporate Realty, Design & Management Institute  
[www.squarefootage.net](http://www.squarefootage.net) 503-274-7162

Energy, Economics  
& Environment

Making the 3 E's Work Together  
in Healthcare

2010



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**Welcome to our newest members  
(August to October 2010)**

**Facility Professionals**

Calvin Abraham, University of Michigan Health Systems

Kelly Christopher, Carroll Hospital Center

Gregg Collison, SBM Site Management

Keith Einsmann, Mission Hospital

Guy Fehr, Saskatoon Health Region

Marvin Kemper, Daughters of Charity

Jason Lackner, BAE Systems

Richard Ledford, Monarch HealthCare

Ilie Murica, Revera Crofton Manor

John Paras, Harvard Medical School

Scott Rice, Powerlink Facilities Management Services

Eric Sholty, Masonic Homes of California

Todd Upton, Saskatoon Health Region

William Van Skiver, Spectrum Health

Elizabeth Vonesh

**Associate Members**

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Courtney Cummins, CWC

Marcel Dennert, IMD Consultancy

Denis Fleury, Contemporary Office Interiors Ltd.

Michael Hodgins, Steelcase Canada, LTD

Mary Joslin, TRO Jung/Brannen

Gene Layne McDonough Bolyard Peck, Inc.

Richard Messerschmidt, Dick Messerschmidt Inc.

Robert Morgan, Prism Electric Inc.

John Sartori, Mannington Commercial

Heather Somerstein, Bana Electric Corporation

Michael Quinlan, TRO Jung/Brannen

Deborah Breunig, OFS Brands

Nicole Applegate, Western States Fire Protection Co.

Joseph Terzigni, Patcraft Carpet

Jeannotte Seath, L/R Construction

James Breitenfeld, Schneider Electric

Alfred Der Ohanessian, Total Concept Sales

Stacy Friederich, Miller & Assoc. Testing & Balancing

Rachel Kessler—Park, CUH2A

Scott Goodwill, SMRT

Heidi Boger, SDA Security Systems, Inc.

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