2018 Submission

ACHA FELLOWSHIP NOMINATION

R. Wayne Estopinal | AIA, ACHA, LEED AP
May 30, 2018

Ms. Jennifer Aliber, FAIA, FACHA  
Chair, Fellowship Committee  
American College of Healthcare Architects  
4400 College Blvd, Suite 220  
Overland Park, KS 66211

RE: ACHA Fellowship Sponsor Letter – R. Wayne Estopinal, AIA, ACHA

Dear Jennifer and Distinguished Members of the Fellowship Committee:

I am honored to sponsor R. Wayne Estopinal for elevation to the Council of Fellows of the American College of Healthcare Architects. Wayne and I have been colleagues for more than 35 years since we first worked together for Humana when it was an owner/operator of health care facilities. Since that time, we have collaborated on the planning, design and implementation of many projects. It is there where he first learned the basic philosophy of being patient-centric and owner-focused in his process.

Since the founding of The Estopinal Group 29 years ago, the health care planning and design firm has evolved to become a firm with national perspective and impact. This impact is defined in a variety of ways which are identified in the summary of achievements and detailed in this submission. The summary below represents the value of these achievements to the health care industry.

- As a tireless champion for quality planning and design, he has improved outcomes, the patient experience and the caregiver environment.
- He has developed a collaborative clinical and design strategy to assist health care providers and caregivers with understanding how design can improve clinical process and add value.
- Utilizing a purposeful practice model, Wayne has utilized inspiration and leadership to inform health care professionals how to improve financial and clinical outcomes through facility design.
- He has introduced and taught health care planning and design principles to hundreds of interns and young professionals; many of whom have chosen to pursue health care design careers.
- Through a career as a competent health care planning and design professional, he has elevated the benefits of quality planning and design to a large national audience.

He has the highest respect from his peers, team members, clients and related professionals who comprise our health care planning and design community. Having known and been a colleague with Wayne over the majority of his career, I know him to be worthy of becoming a Fellow in the ACHA.

I strongly recommend R. Wayne Estopinal for elevation to Fellowship.

Sincerely,

Gary L. Vance, FAIA, FACHA
SECTION 1.0 | SUMMARY OF ACHIEVEMENTS

R. Wayne Estopinal has demonstrated exceptional contributions to health care design for 40 years: through collaborative research and national project engagement. Quality practice and education of future thought leaders in excellent harmony is his passion.

Through his practice, Wayne developed a planning and design strategy centric upon collaboration with clinicians, physicians, patients, leadership teams and communities creating impactful health care facilities. His 40 years of health care planning and design concentration has produced over 3,900 health care projects for over 290 clients nationwide with transformative outcomes. As an early ACHA member, since 2002, Wayne recognized the need to have specialized designers focused upon improving our health care system.

Tireless Champion for Quality Health Care Planning and Design
Wayne generously shares his time to mentor, educate and inspire others. Through involvement in publications, architectural education, university leadership, daily design charrettes with staff and clients, speaking to health care leaders and writings in his firm’s newsletters, Wayne strives to promote quality health care design. He continually elevates and promotes the benefits of high quality strategic alignment of health care facilities, planning of care delivery and flexible innovative facilities. Wayne has spoken to more than 2,000 health care leaders on these important design topics at state hospital associations, summits, conferences and webinars promoting collaboration amongst designers and health care providers throughout his career. A semiannual newsletter is in it’s 7th year and over 20,000 have been distributed over that period. Each newsletter expands the knowledge base of the readers regarding health care design on topics relevant to health care leadership.

Efficient Design+Productive Care…a collaborative clinical and design strategy
His early career at Humana and VHA Health Facilities Group started his interest in using data and collaboration to improve care delivery via efficiency, productivity and collaboration with clinicians to re-engineer care delivery with excellent outcomes. To date, Wayne has documented this strategy in six EFFICIENT DESIGN+PRODUCTIVE CARE (ED+PC) volumes, helping thousands of clinicians visualize how design can significantly improve every clinical process – demonstrating the value and importance of quality health care design practices across the country.

Practice has Purpose
Wayne leads projects and people with energy, inspiration and by example. Having founded TEG in 1989, Wayne has instituted a TEG training program that explores every clinical department. These sessions expand our knowledge base related to the blending of clinical practice and design, impacting our profession through better and more knowledgeable practitioners. A recent area of focus is with health care leadership by demonstrating the impact new innovative facilities can have on financial and clinical outcomes. One recent ED+PC publication Wayne wrote is titled, The ROI of Facility Design, promoting health care designers as being part of all future solutions.

Passion for Mentorship and Health Care Architectural Education
An inspiring mentor to hundreds of current and former staff, innovative community-based health care facilities remain his driving passion. Over 40 years of involvement as a highly-engaged alumni leader, and now a Ball State University trustee, Wayne has employed over 140 architectural student interns immersing each in all aspects of health care planning and design at TEG Architects (The Estopinal Group Architects). The impact of this mentorship has been to promote health care design as an opportunity to improve the lives of people across the world. Through Wayne’s mentoring and internships, the impact is to instill and inspire each intern to consider focusing their careers toward health care design. Wayne’s impact on the profession is through interns whom have become founders and principals of health care-centric firms across the country, expanding our health care design community with capable and qualified professionals.

National Perspective and Impact
As the architect of record on over 3,900 health care projects in 24 states, Wayne’s impact is far reaching. With his national perspective he elevates the benefits of quality planning and design to thousands of health care leaders across the country, Wayne has significantly expanded the knowledge-base to not only our own design community and health care engineers, but our national health care leadership audience.
SECTION 2.0 | ACCOMPLISHMENTS

2.1 WORK | HEALTH CARE PROJECTS

Bringing a national perspective in health care planning and design solutions to community-based health care projects has been a consistent element of Wayne’s career. Serving as architect of record on 3,900 completed health care projects, Wayne has implemented health care master planning and innovative facility solutions with demonstrable results.

Notable Projects
Community-centric, Innovative Care Delivery and Examples of ED+PC Strategies

Our Lady of Lourdes Regional Medical Center
Lafayette, Louisiana, Completed: 2013
Role: Master Planning, Architect of Record

In this nearly 400,000 square foot, 192 bed acute care hospital on a fully master planned 46 acre campus, Efficient Design+Productive Care is applied to every department and service line of this dynamic clinical platform. Wayne lead this project from initial assessment of the original campus, analyzing financial/staffing performance pre and post project and planning for future service lines and structures to be added to the campus. The ROI performance of the new campus was extremely positive and demonstrates the advantages of ED+PC, through collaborating with clients to re-engineer their clinical processes with impressive results.

Union Hospital
Terre Haute, Indiana | Completed: 2010
Role: Master Planning, Architect of Record

Recognizing that the existing hospital was not only a crucial service for this community in west central Indiana, but was also an engaged and welcoming part of the neighborhood fabric, Wayne explored how the new Union Hospital could create a very public gathering space for not only the delivery of care but also to serve as a community beacon for events in the city. Through collaboration with clinicians and all stakeholders, this new 492,000-square-foot facility exceeded expectations and projections on efficiency and productivity, while delivering the neighborhood and city an engaging atrium space for social and civic events.

National Perspective
Wayne has provided this collaborative planning and design approach for 3,900 health care projects in 152 cities in 24 states across the nation.
Case Study | Our Lady of Lourdes Regional Medical Center

Based upon Wayne’s focus on using evidence-based design strategies and his EFFICIENT DESIGN + PRODUCTIVE CARE (ED + PC) planning approach, collaboration with leadership and clinicians at Our Lady of Lourdes Regional Medical Center offers an excellent case study of post-occupancy research. By examining 2011 utilization, staffing levels/composition, net revenues, etc., major departments were documented and archived for future reference. Comparative analysis of pre- and post-project data is critical to determining impact and benefits.

Through years of multiple poorly planned additions and renovations, OLOL had lost any qualities of a highly efficient medical center. At nearly 200 beds with extensive outpatient volumes, the inefficiencies compromised care/clinical effectiveness, produced low patient satisfaction and caused financial hardship.

In 2014, all operations were relocated to a new 46-acre site with a replacement hospital designed using Wayne’s clinical re-engineering strategies of ED + PC. The results have been exceptional. Patient satisfaction has risen to the 90th percentile, from the 60th percentile. Financial performance of every department has improved significantly. See illustrations on this page and for example, the Emergency Department reflects improvement similarly found in all departments, Total Gross Revenues up 89 percent, Net Revenues up 71 percent, Net Profits improved from a loss of $71,000 in 2011 to a profit of $2,100,000 in 2014. All while staffing in the Emergency Department declined 8%.

Individual Department Financials: Emergency Department

<table>
<thead>
<tr>
<th></th>
<th>2011</th>
<th>2014</th>
<th>% Change</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total Gross Revenue</td>
<td>$19,252,349</td>
<td>$36,462,680</td>
<td>89% Increase</td>
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<tr>
<td>Net Revenue</td>
<td>$6,512,409</td>
<td>$11,166,387</td>
<td>71% Increase</td>
</tr>
<tr>
<td>Net Profit</td>
<td>$(71,912)</td>
<td>$2,088,402</td>
<td>$2,160,314 Increase</td>
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<tr>
<td>Total Salaries/Wages/Benefits</td>
<td>$3,605,999</td>
<td>$3,310,259</td>
<td>8% Decrease</td>
</tr>
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</table>
Across the entire spectrum of clinical departments at OLOL, improvements of similar magnitude have been seen from 2011 through most recent financial reporting of 2016. The planning and design strategy employed is responsible, through efficiency of square footage, visualization studies using VR, designing support services at points of care, utilizing flexible/co-use spaces and re-engineering how design positively alters delivery of care, many hospitals Wayne plans and designs experience the same improvements.

Due to our national shortage of care providers, physicians, nurses, etc. a planning and design strategy such as EFFICIENT DESIGN+PRODUCTIVE CARE will continue to have profound impacts on assisting health systems by allowing their providers to provide improved care to more patients and families, all while creating community-focused hospitals of choice and workplaces of choice.

**Overall Facility Performance Research**
Wayne’s planning and design strategy is applicable across all departments of the health care facility as demonstrated by the dramatic increase from the former hospital in 2011 to the first year on the new campus 2014. The facility continues to see an increase post-occupancy as shown in the figure below.

**OLOL Net Revenue | FY11 to FY 2016**

<table>
<thead>
<tr>
<th>Fiscal Year</th>
<th>Revenue (Million)</th>
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</thead>
<tbody>
<tr>
<td>FY11</td>
<td>$139.7</td>
</tr>
<tr>
<td>FY14</td>
<td>$192.5</td>
</tr>
<tr>
<td>FY15</td>
<td>$200.3</td>
</tr>
<tr>
<td>FY16</td>
<td>$219.5</td>
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</table>

**OLOL Patient Satisfaction | FY11 to FY 2016**

Press Ganey Mean Scores | Percentile

<table>
<thead>
<tr>
<th>Fiscal Year</th>
<th>Mean Score</th>
<th>Percentile</th>
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<tbody>
<tr>
<td>FY 11</td>
<td>61</td>
<td></td>
</tr>
<tr>
<td>FY 14</td>
<td>87</td>
<td></td>
</tr>
<tr>
<td>FY 15</td>
<td>84</td>
<td></td>
</tr>
<tr>
<td>FY 16</td>
<td>81</td>
<td></td>
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</tbody>
</table>
SECTION 2.0 | ACCOMPLISHMENTS

2.1 WORK | HEALTH EDUCATION + PRACTICE

Building a Health Care Knowledge Base through Mentoring, Higher Education Impact and Workplace Quality.

Health Care Practice Mentoring/Student Internships

Health care architecture is challenging, complex, ever-changing and requires exceptional personal commitment. It is not the easiest or most immediately gratifying type of architecture to pursue as a career. Wayne Estopinal was mentored early in his career and recognized how important this was to developing his passion for health care architecture.

This lead to Wayne’s 30-year commitment to providing exceptional internships for architecture students in a collaborative and engaging studio environment that immerses each intern in all aspects of planning, design, construction documents and on-site activities. Such immersive internships with Fall engagement throughout the entire project delivery process, results in exceptional student experiences.

Providing opportunities for interns to experience the collaborative process of working with clinicians, observing medical procedures, working in design sessions using VR to reshape clinical spaces, developing construction documents, attending construction meetings and then tracking clinical performance of completed projects offers interns exceptional exposure to practicing health care architecture.

Such mentoring of the over 140 architectural interns, which Wayne has employed, has encouraged dozens of former interns to pursue their careers in health care planning and design with TEG and many other firms. Below are a few examples:

- Tyler Schwede; Researcher and Healthcare Designer, HKS Architects - Dallas
- Ashely (Wilson) Respecki; Account Director, Brand & Creative at AIA
- Kayo Takumyo; Project Architect, SGA Design Group
- James Zwissler; Principal/Partner, Stengel Hill Architects
- Marty Merkel; Director of BIM, JRA Architects
- Adriane McGillis; Associate Architect, Stevens & Wilkinson
- Noel (Trey) Randolph III; Senior Designer at Luckett & Farley Architects
- Matt Martin; Project Manager / Project Architect at DLR Group
- Todd Wieringa; Principal/Partner, Stengel Hill Architects

“I can honestly say that I would not be where I am today without TEG.”

— Adam Mow
Attorney, Jones Waldo
Recently Appointed to Utah’s Third District Court
Former TEG Intern
SECTION 2.0 | ACCOMPLISHMENTS

2.1 WORK | HEALTH EDUCATION + PRACTICE

Health Care Practice Educational Impact

Wayne Estopinal’s life was dramatically changed by the education he received at Indiana University and Ball State University. He has spent many years attempting to provide others similar opportunities. Since 2011, Wayne has sponsored a college scholarship for graduating high school students in Southern Indiana entering any design related major at any university in the country. For six years, Wayne has sponsored an annual design competition at Ball State University’s College of Architecture and Planning.

As a trustee at Ball State University since 2011, Wayne initiated and championed a campaign to re-establish a five-year Bachelors of Architecture degree at BSU CAP, after a 17-year absence. Wayne spent six years working with students, faculty, college leaders, university administrations and university trustees to finally accomplished the degree’s full reinstatement in 2017. The Indiana Commission for Higher Education approved this action in 2017 and the first students enrolled in the five-year program in August 2017. Ball State retains its six-year MArch program, but now offers a more cost-effective five year option that saves every student one full year’s tuition, fees and boarding, for most, a savings of over $25,000.

The impact of this effort is beyond the financial savings, it allows graduates to begin their architectural careers a year earlier and allows them to contribute to the profession’s impact on our built environment sooner.

Architectural Practice Workplace Quality

Creating a studio that allows for sharing ideas, information and engaging every member of health care planning teams and project design teams has allowed Wayne’s firm to be recognized as one of the most innovative, dynamic and accomplished companies in the Louisville Metro area.

TEG has twice received the INCredible Award from Greater Louisville Inc. for the most incredible place to work. Wayne’s firm is the only architectural firm to have received this award and has actually received this award twice, in 2002 and 2011.
SECTION 2.0 | ACCOMPLISHMENTS

2.1 WORK

Speaking Engagements | Approximately 2,050 Attendees Total

By engaging physicians and health care leaders on the importance of collaboration amongst designers and health care providers, Wayne is able to demonstrate the incredible benefits of extraordinary planning and design that is well beyond simply providing space. Wayne consistently reveals that by providing clinical adjacencies as well as appropriately detailed and equipped spaces, clinical outcomes are significantly impacted.

marcus evans National Healthcare CXO Summit

**September 2012 | ED+PC: EMERGENCY DEPARTMENT DESIGN**

**April 2013 | ED+PC: RETURN ON INVESTMENT**

**October 2013 | MASTER CLASS**
Facility Design Impacts the Bottom Line
Willis-Knighton Health System Case Study

**May & August 2014 | ED+PC: RETURN ON INVESTMENT**

**April 2015 | WEBINAR**
Return on Investment of Facility Design: Design Process=Clinical and Financial Results

**May 2015 | MASTER CLASS**
Bud Barrow - Our Lady of Lourdes (OLOL)
ROI of Health Care Facility Design - OLOL Case Study

**October 2017 | MASTER CLASS**
ROI of Facility Design - Designing Health Care Facilities with New Results

**November 2017 | WEBINAR**
Healthcare Facility Design: Improve Patient Experience, Outcomes and the Bottom Line
Lyndon Fullen - The Medical Center of Southeast Texas

Louisiana Hospital Association

**17 July 2017 | KEYNOTE SPEAKER**
Annual Meeting + Summer Conference
Health Care Facility ROI: A New Planning and Design Idea

Institute of Healthcare Executives and Suppliers

**September 2011 | ED+PC**

**March & September 2012 | ED+PC**

**March 2013 | ED+PC: NURSING UNIT CONFIGURATIONS**

Additional Various Speaking Engagements

- Blue & Company 2011
- Midwest Healthcare Conference 2011
- Health Enterprises Network 2011
SECTION 2.0 | ACCOMPLISHMENTS

2.2 AWARDS, HONORS, AND RECOGNITION

Awards

AIA Kentucky

Merit Award
2015 | Big Four Station Park | Jeffersonville, IN

Jury Comments: “As the first public space in Jeffersonville in over a hundred years, this is clearly a project with all eyes on it. Public open space is often one of the key factors that contribute to the quality of life of any municipality. This park delivered a new type of public open space seemingly located within a primarily residential neighborhood. The park managed to create a civic presence by its scale and design for the community while tending to the needs of the individual.”

Associated Builders & Contractors of Indiana/Kentucky

Award of Merit
2016 | McMahan Retail & Office Building | Old Brownsboro Crossing | Louisville, KY

Louisville Business First

Commercial Real Estate Awards
2015 | UofL Lynn Soccer Stadium | Louisville, KY
2014 | Norton Healthcare Medical Office Building II | Louisville, KY

Top Philanthropist, 2013-2017
2013-2017 | Small Business Category

United Aqua Group (UAG)

Awards of Distinction, Best of UAG
2016 | New Albany Aquatic Center | New Albany, IN

Greater Louisville Inc.

Inc.credible Small Business of the Year Award
2002, 2011 (the only two-time winner)

Firm Rankings

Wayne founded and systematically expanded the practice to become one of the top-ranked healthcare architecture firms across the nation.

Building Design+Construction Giants 300

38th Largest Healthcare Sector A/E Firm
2017

Modern Healthcare

49th Largest Healthcare Architecture Firm
2017
SECTION 2.0 | ACCOMPLISHMENTS

2.3 PUBLICATIONS + ARTICLES

Published Works

Our Lady of Lourdes Regional Medical Center: Vision to Reality: The Design and Construction Process

Recognizing that many clients experience a major health care architecture project once or twice in their careers, Wayne archived many illustrations and project events and notes from one of the first opportunities to enlist Efficient Design + Productive Care planning strategies to create this publication.

The book illustrates and guides the reader through the entire project process from master planning through completion and clinical performance tracking. Our Lady of Lourdes Regional Medical Center serves many current TEG clients to better understand how impactful ED+PC will be for their organizations.

PRODUCTIVE CARE
EFFICIENT DESIGN®

In an attempt to collaborate with health care leadership and clinicians alike, Wayne has authored to date, six books that address his strategy of EFFICIENT DESIGN + PRODUCTIVE CARE (3,500 copies have been printed to date). These volumes deal with time and motion studies of clinical departments, the complexities and opportunities of health care master planning, nursing unit and patient room designs that help clinicians create better patient outcomes, how design and clinical re-engineering helps hospitals realize returns on their investments and how intelligent growth is critical to long term success of health care campuses.
SECTION 2.0 | ACCOMPLISHMENTS

2.3 PUBLICATIONS + ARTICLES

Articles | Total Reach: 30,000+

Wayne has contributed to several local and national healthcare publications to expand knowledge to health care leadership audiences.

“Facilities Benefit From Early Planning as USP 800 Deadline for Compliance Draws Near,” eTEG, February 2018
• Distributed via email to 415 Healthcare CXO recipients
• 90 unique pageviews on teg123.com

“Intelligent Growth is not Arbitrary Growth: Sustainable and Planned Clinical Efficiency/Productivity,” Kentucky Medical News, May 2017
• Circulation: 7,500

“The Strategic Role Healthcare Facilities Play,” Marcus Evans National Healthcare CXO, May 2017


“Aligning Health Facilities with Contemporary Clinical Efficiency,” Kentucky Medical News, May 2016
• Circulation: 7,500

• Circulation: 7,000

• Circulation: 7,000

INTEG Newsletter | Total Reach: 20,000

A semiannual newsletter is in its 7th year. More than 20,000 have been distributed over that period. Each newsletter expands the knowledge base of the readers regarding health care design on topics relevant to health care leadership.
### LIST OF EXHIBITS

<table>
<thead>
<tr>
<th>Exhibit</th>
<th>Project Name</th>
<th>Location</th>
<th>Year</th>
<th>Principal Architect</th>
<th>AOR</th>
<th>Notes</th>
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<tbody>
<tr>
<td>3.1</td>
<td>Our Lady of Lourdes Regional Medical Center Replacement Campus</td>
<td>Lafayette, Louisiana</td>
<td>2011</td>
<td></td>
<td>TEG Architects</td>
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<td>3.2</td>
<td>Union Hospital Replacement Campus</td>
<td>Terre Haute, Indiana</td>
<td>2010</td>
<td></td>
<td>TEG Architects</td>
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<td>3.3</td>
<td>Trinity Health Master Plan + Replacement Hospital</td>
<td>Minot, North Dakota</td>
<td>2011 Master Plan</td>
<td>2020 Replacement Hospital</td>
<td>TEG Architects</td>
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<td>3.4</td>
<td>LSU Health Sciences Center Master Plan</td>
<td>Shreveport, Louisiana</td>
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<td>Principal in Charge: TEG Architects</td>
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<td>3.5</td>
<td>Willis-Knighton Cancer Institute + Proton Therapy Center Addition</td>
<td>Shreveport, Louisiana</td>
<td>2000; 2013</td>
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<td>TEG Architects</td>
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<td>3.6</td>
<td>Willis-Knighton ICU/OR Addition and Renovation</td>
<td>Shreveport, Louisiana</td>
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<td>North Caddo Medical Center Replacement Hospital</td>
<td>Vivian, Louisiana</td>
<td>2017</td>
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<td>TEG Architects</td>
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</tbody>
</table>
SECTION 3.0 | EXHIBITS

3.1 OUR LADY OF LOURDES REGIONAL MEDICAL CENTER REPLACEMENT CAMPUS
LAFAYETTE, LOUISIANA

Vision to Reality
Following a thorough review of current facilities in terms of the services offered, location, condition and accessibility, TEG examined the key facility issues at the existing campus. The resulting facility master plan for the replacement hospital included a functional plan, detailed space programming and bubble diagrams indicating departmental functional relationships as well as intradepartmental circulation.

Utilizing this information, the team developed floor plans and strategies for the new six-story, 388,000 SF replacement hospital to maximize staff efficiency and minimize travel distance. This saved time and staffing costs while improving patient outcomes.

One of the strategies developed is the unique Clinical Procedural Platform on the second floor, which unites the Surgery, Radiology/Imaging and Emergency Departments. Ten special procedure rooms directly flex for surgery or ER, depending on patient volume. A 24-room ICU is located directly above on the third floor. This compact floor plan is designed to improve teamwork, organization, patient flow, and communication. This also saved our client more than $2,600,000 in construction and equipment alone, without losing clinical staff efficiency or productivity.

Patient room design was another crucial aspect. Every patient room is same-handed, meaning the bed, as well as all of the equipment, are placed identically in each room so that the caregiver is immediately oriented. Evidence-based design principals show that this layout can assist in reducing medical errors.

The Replacement Hospital was programmed to be the epicenter of the TEG-designed 46-acre campus, which will additionally include a Cancer Center (in planning), Heart Hospital, Ambulatory Surgery Center (complete), Convent, Spa/ Fitness Center, Outpatient Clinic and Medical Office Building (complete).

R. Wayne Estopinal’s role centered upon the lead planner and designer of this project. Creating a flexible campus to respond to the needs of this fast-growing service area was Wayne’s goal.

I have personal knowledge of the nominee’s responsibility for the project listed above. That responsibility included:

☑ Largely Responsible for Design and/or Planning
☐ Project Under Direction of Nominee
☐ Nominee’s firm executed project
☐ Other: (specify) ____________________________

Surendra Ramanna, P.E. | Engineer of Record
Name/Role (print)

Signature/Date

05.16.2018

SUMMARY

Architect of Record/Design Firm
TEG Architects

Associate Architect (Concept)
HOK - St. Louis

Completion Date
June 2011

Role of Nominee
Principal-in-Charge
Architect of Record

Featured Publications
“Our Lady of Lourdes Regional Medical Center, Vision to Reality: The Design and Construction Process.” TEG Architects; 2012

“Holistic Healing: Our Lady of Lourdes Regional Medical Center provides holistic care throughout the hospital’s community.” Jeff Ferenc; Health Facilities Management; April 2012

“ROI of Facility Design: Decision Process = Clinical and Financial Results,” TEG Architects; Efficient Design+Productive Care Volume 5; May 2015
SECTION 3.0 | EXHIBITS

3.1 OUR LADY OF LOURDES REGIONAL MEDICAL CENTER
LAFAYETTE, LOUISIANA

PHOTOS BY WILL CROCKER
SECTION 3.0 | EXHIBITS

3.1 OUR LADY OF LOURDES REGIONAL MEDICAL CENTER
LAFA YETTE, LOUISIANA

SITE PLAN

SECOND FLOOR | CLINICAL PROCEDURAL PLATFORM
Clinical Volume Adaptability
SECTION 3.0 | EXHIBITS

3.2 UNION HOSPITAL REPLACEMENT CAMPUS
TERRE HAUTE, INDIANA

Master Plan Vision Carried Out in Phased Renovation

Union Hospital initially contracted TEG to perform a site and facility master plan of its 271-bed hospital. TEG proposed the addition of a private patient tower, maternal services, ambulatory surgery center, surgery expansion, and clarification of internal circulation. The urban campus plan included several properties and hospital-owned buildings as well as a new professional office building, cancer center, physical plant, and wellness center.

The initial phase of the Master Plan was to design and construct the 5-floor, 144,000 SF Professional Office Building, located on campus and across the street from the main hospital. The first and second floors house physician’s offices, while the wellness and fitness center is located on the fifth floor. Hospital administration and support services presently occupy the remaining space.

Phases 2 and 3 took place in August of 2006, when TEG completed design of the Union Hospital Central Energy Plant Addition/Renovation (of nearly 20,000 sf) and HUX Cancer Center projects.

Phase 4, a 4-story, 492,000 SF Major Addition, was completed in January 2010. The Major addition focused around a natural-light atrium and includes the following services: public dining, physician’s dining, chapel, gift shop, satellite materials resource, and central sterile, emergency services, diagnostic imaging, surgery, pre- and post-operation recovery, endoscopy, registration, satellite pharmacy, pre-admissions testing, café, an Intensive Care Unit and Telemetry Nursing Unit, medical/surgical units and oncology. Overhead pedestrian walkways connect the addition to the existing hospital, the Professional Office Building to the south, and the HUX Cancer Center to the north. Renovations of the existing hospital include specialty patients, maternal services, and a new Cath Lab Suite where ER, surgery and registration were previously located.

R. Wayne Estopinal’s role began as the lead planner for the site and facility master plan, creation of a campus aesthetic palette and ultimately as the lead designer for the HUX Cancer Center, Professional Office Building and the Acute Care Replacement Hospital.

I have personal knowledge of the nominee’s responsibility for the project listed above. That responsibility included:

☑ Largely Responsible for Design and/or Planning
☐ Project Under Direction of Nominee
☐ Nominee’s firm executed project
☐ Other: (specify) __________________________________________

Surendra Ramanna, P.E. | Engineer of Record

Name/Role (print)

Signature/Date

05.16.2018

SUMMARY

Architect of Record/Design Firm
TEG Architects

Completion Date
Cancer Center: 2008
Major Addition: 2010
POB: 2014

Role of Nominee
Architect of Record
Principal-in-Charge

Project Awards
“20 Most Beautiful Hospitals 2011,” Soliant; July 2011
“The 30 Most Architecturally Impressive Hospitals in the World,” Online Masters in Public Health; 2014

Featured Publications
“A Major Addition to Union Hospital,” Design Cost Data; July-August 2010

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SECTION 3.0 | EXHIBITS

3.2  UNION HOSPITAL REPLACEMENT CAMPUS
TERRE HAUTE, INDIANA

Community-Centric Public Spaces + Visual interest with Exceptional Clinical Capabilities

PHOTOS BY TERRY WIECKERT, ABSTRACT PHOTOGRAPHY
SECTION 3.0 | EXHIBITS

3.2 UNION HOSPITAL REPLACEMENT CAMPUS
TERRE HAUTE, INDIANA

FIRST FLOOR

SECOND FLOOR
SECTION 3.0 | EXHIBITS

3.2 UNION HOSPITAL REPLACEMENT CAMPUS
TERRE HAUTE, INDIANA

UNION PROFESSIONAL OFFICE BUILDING - PHASE .01
– Established the Architectural Palette for all Phases of the Campus Revitalization
– Integrates Multi-Disciplinary Physician Suites into the Campus
– Provided Transition Space for Displaced Services Lines, Remedied in Phase 3.

PHOTOS BY TERRY WIECKERT, ABSTRACT PHOTOGRAPHY

HUX CANCER CENTER - PHASE .02

FIRST FLOOR | RADIATION ONCOLOGY
SECTION 3.0 | EXHIBITS

3.3 TRINITY HEALTH
MASTER PLAN + REPLACEMENT CAMPUS
MINOT, NORTH DAKOTA

Re-Engineering Clinical Processes to Serve Portions of Three Sites was the Master Plan and Project Goal.

In order to explore multiple options for Trinity Health System, TEG examined Trinity Hospital’s urban site as well as a suburban site approximately 6 miles from the current facility. The question to relocate the hospital involved not only examining strategic and clinical decisions by he health system, but also included the many variables associated with the impact of moving away from the existing urban campus and downtown fabric so vital to the community.

The complexities of an inpatient center, high outpatient utilization, cancer center, medical office building needs and extensive parking facilities combined with a sloping urban site, make this a very good example of TEG’s clinical and practical facility understanding and problem-solving abilities.

The suburban campus solution offers a less expensive option due to avoiding parking structures, but radically changes the accessibility and visibility of the health system due to the remote location. This site and facility solution provided the opportunity to implement the project in a more expeditious manner as it avoids extensive phasing and the special needs of maintaining operations on the existing campus.

The new health care campus, currently under construction, will facilitate recruitment of the best physicians and nursing staff to improve the level of care for Minot and the surrounding 21 counties. The design provides flexibility between clinical departments, integration of diagnostic and surgical procedures and demonstrates collaboration to deliver exceptional patient care with optimal outcomes — impacting the lives of thousands of residents.

The project team is being led by TEG principals, R. Wayne Estopinal and Ernie Dreher, IV, with support from the firm’s planning and design personnel, illustrators and modeling teams.

R. Wayne Estopinal’s role has spanned over 11 years of health care planning on the Trinity Health Campus, exploring replacement facilities on the existing campus and new growth-focused. Wayne serves as the lead planner and design principal of this $280 Million construction project. Positioning this medical center for decades of growth, without losing the efficiency of the initial project, was the goal.

I have personal knowledge of the nominee’s responsibility for the project listed above. That responsibility included:

☑ Largely Responsible for Design and/or Planning
☐ Project Under Direction of Nominee
☐ Nominee’s firm executed project
☐ Other: (specify) ____________________________

Surendra Ramanna, P.E. | Engineer of Record

Name/Role (print) 05.16.2018
Signature/Date
3.3 TRINITY HEALTH
MASTER PLAN + REPLACEMENT CAMPUS
MINOT, NORTH DAKOTA

SITE PLAN

Future MOB 2
MOB
MOB Rear Entry
Emergency Entry
Acute Care Tower
Oxygen Farm
CEP
Helipad

MOB Canopy
Atrium
Main Entry Canopy
Mental Health Entry
Ancillary Base
Patient Discharge Canopy
SECTION 3.0 | EXHIBITS

3.3 TRINITY HEALTH MASTER PLAN + REPLACEMENT CAMPUS
MINOT, NORTH DAKOTA

COMPOSITE SECOND FLOOR PLAN | CLINICAL PROCEDURAL PLATFORM
SECTION 3.0 | EXHIBITS

3.3 TRINITY HEALTH MASTER PLAN + REPLACEMENT CAMPUS
MINOT, NORTH DAKOTA

– Identity/ Clarity of Access
– Community Gathering
SECTION 3.0 | EXHIBITS

3.4 LSU HEALTH SCIENCES CENTER MASTER PLAN
SHREVEPORT, LOUISIANA

Comprehensive and Collaborative Planning Process
TEG was engaged by LSU Health Sciences Center to update the master plan for the campus, which includes multiple tenants, numerous clinical missions and varied stakeholders. This required an organized and collaborative approach to provide an outstanding learning environment for students and also to reflect a commitment to multi-discipline collaboration, institutional partnerships and the exchange of ideas in research and education.

TEG developed and facilitated an intense visioning work session involving architects, health care planners, high level administration, hospital staff, outpatient services, medical school and neighboring entities. The end result created valuable information that serves the micro and macro campus decisions that will take place for years to come. Understanding management issues such as property holdings/acquisition strategies to locating major campus additions now can be made with the entire campus’s and stake holder’s future in mind.

In addition, growth strategies were developed that complemented adjacent neighborhoods and commercial properties, while maintaining good neighbor relationship. Parking as well as vehicular and pedestrian access were consistently aligned with planned growth.

Challenges included property acquisition and ensuring pedestrian crossings and facility adjacencies would not overly tax staffing efficiencies.

This is an excellent example of a complex campus being analyzed and planned to help solidify a campus-wide strategy for future development. TEG’s talented staff and our process were valuable partners in the future of this campus.

R. Wayne Estopinal’s role in this large, multi-faceted Academic Medical Center Master Plan centered upon establishing the planning effort’s alignment with LSUHSC’s educational, clinical and community services strategic plan. This alignment and detailed planning guide will serve this medical center for decades.

I have personal knowledge of the nominee’s responsibility for the project listed above. That responsibility included:

☑ Largely Responsible for Design and/or Planning
☐ Project Under Direction of Nominee
☐ Nominee’s firm executed project
☐ Other: (specify) ____________________________

Surendra Ramanna, P.E. | Engineer of Record
Name/Role (print)

Signature/Date 05.16.2018
3.4 LSU HEALTH SCIENCES CENTER MASTER PLAN
SHREVEPORT, LOUISIANA

— New Facilities Highlighted Above
SECTION 3.0 | EXHIBITS

3.5 WILLIS-KNIGHTON MEDICAL CENTER 
CANCER CENTER + PROTON THERAPY CENTER ADDITION 
SHREVEPORT, LOUISIANA

This Cancer Center is a 70,500 SF, four-story, free-standing addition to the Willis-Knighton Medical Center Campus. An open lobby, infused with natural daylight, adds to the ambiance of patient wellness and healing. The Cancer Center was sensitively designed to support the unique needs of patients and specialized work-requirements of staff. Brick veneer and pre-cast concrete form the two-story building base, while the upper two floors are comprised of an aluminum curtain-wall with a pre-cast cap, rotated axially to address interstate orientation.

Aggressive Client Demands Dynamic New Solution

Once the Cancer Center was complete in 2000, Willis-Knighton engaged TEG to design the addition of a three-story, 49,800 SF Proton Therapy Center. TEG, in collaboration with IBA (Ion Beam Applications), designed the first installation of the ProteusONE®, with Pencil Beam scanning technology, in the world. At the time, the actual equipment was still in design.

The proton therapy system is housed in a 1.5 story concrete vault, consists of a cyclotron, beam transport system and gantry treatment delivery system. The first floor of the new addition houses the Proton Therapy Center and includes exam rooms, dressing areas, a special procedure room, administrative space, offices, training/ conference room, consultation rooms, facility support areas and the treatment room/vault. The second and third floors are shelled construction for future clinical/ physician use. A portion of the third floor provides equipment support and storage areas for the proton unit. A separate entry and canopy gives the Proton Therapy Center its own identity.

The impact of this project centers on the fact that highly specialized proton therapy is being delivered via a $35 Million project instead of cost prohibitive & zoom Projects — allowing access to care on a regional basis.

R. Wayne Estopinal’s role in the initial cancer center (2000) and the more recent Proton Therapy Addition (2013) were identical: lead health care planner, designer and architect of record. Creating a comprehensive oncology center with dynamic technologies and treatments was Wayne’s primary goal for this project.

I have personal knowledge of the nominee’s responsibility for the project listed above. That responsibility included:

✓ Largely Responsible for Design and/or Planning

☐ Project Under Direction of Nominee

☐ Nominee’s firm executed project

☐ Other: (specify) __________________________________________

Surendra Ramanna, P.E. | Engineer of Record

Name/Role (print)

Signature/Date

05.16.2018
SECTION 3.0 | EXHIBITS

3.5 WILLIS-KNIGHTON MEDICAL CENTER CANCER CENTER + PROTON THERAPY CENTER ADDITION
SHREVEPORT, LOUISIANA

PROTON THERAPY ADDITION

LEVEL 1

• Existing Cancer Center - 27,919 GSF
• First Floor Addition - 26,490 GSF

PHOTOS BY NEIL JOHNSON
SECTION 3.0 | EXHIBITS

3.6 WILLIS-KNIGHTON MEDICAL CENTER ICU/OR ADDITION AND RENOVATION
SHREVEPORT, LOUISIANA

Renovation Prepares Facility for Future Expansions
Willis-Knighton Medical Center has a long established and extensive cardiology service line. The complexity of their patient acuity required new operating suites and a post-surgical ICU. As part of a commitment to provide the best patient care, Willis-Knighton pursued the expansion of ICU/OR services at their main campus. The 86,000 SF, 3-story addition + renovation was designed to meet immediate needs and allow for future vertical expansions.

In order to maintain appropriate clinical adjacencies, Wayne developed a design for this project, which elevated the ICU over valuable vehicular parking areas and immediately adjacent to existing surgical services and the expansive cardiovascular surgical suites were positioned. The adjacencies of this particular services line are incredibly important due to the acuity of the patient and the critical nature of emergency interventions.

Level 1 renovations included parking, waiting area and Day Surgery. Level 2 hosts a 20-bed patient wing and five ORs – two of which are sized to accommodate future hybrid ORs. To increase patient/staff flow, the construction of a new pedway connects the facility to the adjacent Willis-Knighton Heart & Vascular Institute. And although Level 3 will be shelled, Willis-Knighton plans to utilize this floor for additional patient rooms.

The project was impactful to the entire region as Willis-Knighton is the primary cardiovascular provider in Northern Louisiana. It allows patients from nearly 100 miles away access to state-of-the-art procedures and post-operative care.

The project was critically important to the cardiovascular services in the area and the entire project was developed via an integrated design and construction program, which allowed accelerated schedule development - allowing WK to begin utilizing the upgraded areas as quickly as possible.

In addition to design, Wayne served as the planner and architect of record for this project.

I have personal knowledge of the nominee’s responsibility for the project listed above. That responsibility included:

☐ Largely Responsible for Design and/or Planning
☐ Project Under Direction of Nominee
☐ Nominee’s firm executed project
☐ Other: (specify) ____________________________

Surendra Ramanna, P.E. | Engineer of Record
Name/Role (print)

05.16.2018
Signature/Date
SECTION 3.0 | EXHIBITS

3.6 WILLIS-KNIGHTON MEDICAL CENTER ICU/OR ADDITION AND RENOVATION
SHREVEPORT, LOUISIANA

REPLACEMENT HOSPITAL

PHOTOS BY NEIL JOHNSON
SECTION 3.0 | EXHIBITS

3.7 NORTH CADDIO MEDICAL CENTER REPLACEMENT HOSPITAL
VIVIAN, LOUISIANA

New Vision Accomplished without Disruption
The components of this 72,000 SF critical access hospital are similar to most hospitals of this nature with the exception of a 9,000 SF Clinic attached to the facility. The clinic and NCMC serve to educate future rural physicians through their LSU/NCMC Rural Residency Program, a unique asset to the community as well as the university.

The challenge of this replacement project centered upon a community in dire need of a new hospital and clinic for their very community-focused services on an exceptionally limited budget. A new greenfield replacement hospital was not possible due to the property acquisition costs and infrastructure expenses. Knowing this, Wayne developed a solution which involved a complete replacement hospital on the same limited site as the existing hospital with exceptional results and minimal disruption to operations.

Development of the clinically appropriate solution involved six distinct phases of construction. The process was repeated multiple times when new clinical areas were constructed immediately adjacent to existing areas that would then be demolished. Services to the community were critical and could not be disrupted. This strategy for development of the facility allowed full services — at all times — to serve the community.

Today, North Caddio medical center is a modern hospital with extensive critical access services, even OB/GYN, serving this community in Northwestern Louisiana.

Wayne’s primary impact involved allowing this project to happen on a limited budget with USDA funding and never interrupting services to the community. He served as the planner, design architect, and architect of record.

I have personal knowledge of the nominee’s responsibility for the project listed above. That responsibility included:

☑ Largely Responsible for Design and/or Planning
☐ Project Under Direction of Nominee
☐ Nominee’s firm executed project
☐ Other: (specify) ________________________________

Surendra Ramanna, P.E. | Engineer of Record
Name/Role (print)

Signature/Date 05.16.2018
SECTION 3.0 | EXHIBITS

3.7 NORTH CADDO MEDICAL CENTER REPLACEMENT HOSPITAL
VIVIAN, LOUISIANA

REPLACEMENT HOSPITAL

LEVEL 1

PHOTOS BY NEIL JOHNSON
SECTION 4.0 | REFERENCE LETTERS

LIST OF REFERENCES

4.1  
JOSEPH G. SPRAGUE, FAIA, FACHA, FHF1  
Principal and Senior Vice President, Director Health Facilities  
HKS, INC  
350 N. Saint Paul Street, Suite 100, Dallas, TX 75201  
214.696.5599  
jsprague@hksinc.com  
Relationship: Architectural Colleague

4.2  
WILLIAM J. HERCULES, FAIA, FACHA, ACHE, LEED AP  
President  
WJH Architect, LLC  
Orlando, Florida 34761  
407.312.1065  
wjharch@earthlink.net  
Relationship: Architectural Colleague

4.3  
WILLIAM F. “BUD” BARROW, II  
Chief Executive Officer  
Beauregard Health System  
600 South Pine Street, DeRidder, LA 70634  
377.462.7100  
b.barrow@beauregard.org  
Relationship: Past/Present Healthcare Client

4.4  
DAN WOODFIN  
Professor Emeritus of Architecture  
Ball State University  
College of Architecture and Planning  
950 Nevelle Lane, Carmel, Indiana 46032  
765.748.9499  
danwoodfin8@gmail.com  
Relationship: Architectural Colleague and Mentor

4.5  
WAYNE BARGER, AIA, LEED AP  
Sr. Vice President  
CallisonRTKL Inc.  
1717 Pacific Avenue, Dallas, TX 74201  
214.468.7600  
Wayne.Barger@crtkl.com  
Relationship: Architectural Colleague
May 29, 2018

ACHA Jury of Fellows
American College of Healthcare Architects
18000 W. 105th Street
Olathe, KS 66061

RE: ACHA Fellowship Letter of Recommendation for R. Wayne Estopinal, AIA, ACHA, LEED AP

Dear Jury of Fellows,

It is an honor to write a letter of recommendation to support the nomination of Wayne Estopinal, AIA, ACHA, LEED AP for fellowship in the American College of Healthcare Architects (ACHA).

I have known Wayne since his days at Humana and VHA Health Facilities Group where he got started in health facilities planning, design and construction with the importance of the owner’s side view in critical issues. He has always impressed me with his efficient, productive and collaborative approach in the design process to produce excellent outcomes, a key measure in today’s professional practice in the field of healthcare architecture.

His passion for mentoring young professional architects and being active as an alumni and trustee of his university, speaks volumes in his commitment to promoting future professional careers toward healthcare design.

Wayne Estopinal deserves the highest respect from his peers, which fellowship in ACHA signifies. I urge your approval of his nomination.

Sincerely,

Joseph G. Sprague, FAIA, FACHA, FHF
Principal and Senior Vice President
Director Health Facilities
HKS, INC
25 May 2018

Ms. Jennifer Aliber, FAIA, FACHA, LEED AP  
Chair, Fellowship Committee  
American College of Healthcare Architects  
4400 College Blvd Suite 220  
Overland Park, KS 66211

RE: Fellowship Recommendation for Mr. Wayne Estopinal, AIA, ACHA, LEED AP

Dear Jennifer and Distinguished Members of the Fellowship Committee,

I am very happy to recommend Mr. Wayne Estopinal, AIA, ACHA, LEED AP to you, and I ask that he be elevated to the American College of Healthcare Architects’ Council of Fellows. I have known Wayne and his work for more than two decades, as we first competed for projects in the midwestern U.S., and we have remained in close contact as our careers developed in parallel. Even a cursory review of his work and impact over his four-decade career will demonstrate key patterns of best practices in healthcare design, clear evidence of sharing knowledge, and strong client testimony about his personal interactions with them over many years.

Many national firms rely upon the work of their partners to bolster the firm’s credibility, enhance pursuits, and share their design methods. Wayne IS his firm. He remains engaged in the firm’s approach to planning and design based on principles he developed and which have stood the test of time. He has focused his architectural mantra on clinicians and administrators by publishing periodical volumes specifically for them to understand how to measure design outcomes and synchronize design with their missions. His national practice isn’t merely a few projects in multiple states, but he was the architect of record for thousands of healthcare projects across half of the U.S. Beyond his immediate practice, he has invested in scores of interns from his Ball State alma-mater by submerging them into healthcare design early in their careers, and then watching them develop into principal healthcare architects across the U.S.

Wayne’s understated but progressive approach to practice over his career has advanced the profession of healthcare architecture. He is a man integrity, respected by his colleagues, and his national client community. I urge your approval of his nomination as Fellow of the American College of Healthcare Architects.

Sincerely,

William J. Hercules, FAIA, FACHA, ACHE, LEED AP  
President, WJH Architect, LLC  
2018 President, American College of Healthcare Architects  
wjharch@earthlink.net
May 15, 2018

To Whom It May Concern:

As I appreciate the high standards of professional excellence associated with FACHA, there is no doubt that Wayne Estopinal has earned the right to be part of this notable group.

Having worked with numerous architects and construction leaders in my thirty-plus year healthcare career, with project values nearing half billion dollars, Wayne stands at the top of the list for his combination of talent, drive, creativity, commitment to excellence and to unsurpassed customer service. He is the gold standard by which I measure all other contract service individuals in each of the five mentioned categories of personal talent.

Wayne literally raises the bar in every project. Not only is the project better for his involvement, he also lifts the team around him. Whether by challenging, cajoling, mentoring, leading, advising or teaching, he creates human as well as project synergy.

Should he be awarded this recognition, it will be because he has so richly earned it.

Regards,

William F. “Bud” Barrow, II
Chief Executive Officer
Beauregard Health System
May 30, 2018

Recommendation letter for R. Wayne Estopinal
WAYNE ESTOPINAL’S CONTRIBUTIONS TO HIGHER EDUCATION

These comments come from my perspective of 50 years as an architectural educator, the last 46 years at Wayne’s alma mater, the College of Architecture and Planning, “CAP”, Ball State University.

There have been two major influencers in the life of CAP, the founding dean Charlie Sappenfield and today, at a critical time in CAP’s life, Wayne Estopinal, through his role as an alumnus of CAP and as a Member of the Board of Trustees of BSU. Offhand that may seem like an exaggeration but I assure you it is not. Dean Sappenfield’s role as the founding dean is well-known and celebrated. Wayne’s role in helping rebuild CAP is known to only a few.

Dean Sappenfield set the school on the path to train first-rate design professionals in a 5-year Bachelor of Architecture program and in parallel programs in Landscape Architecture and Planning. The Architecture program and the Landscape Architecture program achieved high national rankings by “Design Intelligence,” the recognized ranking entity in our field.

The Architecture Department changed its program about 9 years ago, abandoning the traditional 5-year Bachelor of Architecture degree and its traditional focus on training architects. The results were disastrous for the school, its students and the profession. Wayne has been actively involved in CAP since his student days and did not sit by idly to see its demise.

Wayne became a behind-the-scenes leader as an alumnus of CAP and as a Member of the Board of Trustees of BSU. The future of our program depends on the successful outcome of his leadership initiatives and they are already bearing fruit. Here is a brief overview of the large and pervasive problem Wayne has been successfully grappling with:

- With its changed program and focus the Architecture Program immediately dropped from the national rankings while its sister program in Landscape Architecture and Planning, tellingly, continued to flourish and improve its national ranking against top-drawer schools nationally.
- Our best students, with few exceptions, left after 4 years with un-accredited 4-year degrees to enter 2-year master degree programs elsewhere, becoming alums of top drawer schools, with realties accordingly shifted, some wearing shirts from their new schools before leaving CAP. Students unable to afford this leave and enter a professional limbo where many will remain the rest of their lives, unable to become licensed.
- CAP was simultaneously failing to attract top parking garages and specialty level students. I remember when we had 3-4 and even more applicants for every undergraduate opening. Today we admit all who apply. We used to have 40% of the students in Honors College and today our numbers are closer to 15%.

The restarted 5-Year Bachelor of Architecture program is fully-operational Fall 2018. Freshmen students in my first-year design classes Fall 2017 were excitedly talking about applying to this program. This is a sea change. It bodes very well for our future. Students now see their future at CAP and not elsewhere. Wayne is the primary person responsible for this, and he paid a great price in time, effort, and a great price physically and emotionally to achieve this, for us at CAP, and for our profession! It was a very important job and it was a very selfless job expertly done. We are deeply indebted to Wayne.

Wayne’s support of CAP’s Architectural Internship Program is singular. TEG has employed 140 architectural student interns including some of our top students. Most interns work on healthcare projects, the principal work of the firm. Interns are well-paid and most work directly with partners and project architects in hospital master planning, design of replacement hospitals, hospital renovations/additions, MOBs, cancer centers and clinics. Because interns work directly with project architects on all phases of the projects, they learn a great deal about healthcare design, even as interns. Because of a strong internship experience many interns return after graduation. And eventually, because of their healthcare design expertise they are targeted for recruitment by firms wanting to establish or enhance their healthcare design expertise. A number of TEG trained architects are now partners in firms specializing in healthcare work. That is a tribute to TEG’s healthcare design expertise, and its nurturing of its employees.

C. Daniel Woodfin
Registered Architect, NCARB Certified
Professor Emeritus of Architecture
May 22, 2018

ACHA Jury of Fellows
American College of Healthcare Architects
18000 W. 105th Street
Olathe, KS  66061

RE: ACHA Fellowship Sponsor Letter for R. Wayne Estopinal, AIA, ACHA, LEED AP

Dear Jury of Fellows:

Please strongly consider my recommendation for the elevation of Wayne Estopinal to Fellowship in the American College of Healthcare Architects.

My professional history with Wayne dates to 1989 when I joined him at VHA Health Facilities Group (VHA/HFG) in Irving, Texas. Although Wayne left VHA/HFG shortly after I joined to launch his own practice, my brief time with him convinced me of his passion for Quality Health Care Planning and Design. With clients, he promoted sound Health Care planning principles and concepts; and in the office, he stressed the importance of mentoring and educating our staff on those same principles and concepts.

Although it was early in my career at the time – and my focus was typically directed towards a singular project or task – Wayne impressed upon me the necessity of learning how to balance multiple demands and priorities if I was ever going to advance in my career as an architect. I took this advice to heart, and it has served me well in my own professional journey.

Over the years since our time together at VHA/HFG, I’ve watched Wayne channel this passion into a hugely successful practice – a practice that VHA/HFG and its successor companies such as ServiceMaster FDS, RTKL and CallisonRTKL has collaborated with, and continues to collaborate with, on multiple projects. Wayne’s impact to Health Care Planning and Design has reached well beyond his own home state and region, and it has touched a significant cross-section of architects, clients and healthcare professionals across the country.

I look forward to seeing Wayne achieve this significant milestone in a very noteworthy and impactful career.

Kind regards,

Wayne W. Barger, AIA, LEED AP
Sr. Vice President
SECTION 5.0 | NOMINEE PERSONAL INFORMATION

Nomination
R. Wayne Estopinal, AIA, ACHA, LEED AP
President/Founder
TEG Architects LLC
903 Spring Street, Jeffersonville, Indiana 47130
502.552.3700 Cell
rwestopinal@teg123.com

Category of Nomination:
Category Two: To advance the science and art of planning and building by advancing the standards of architectural education, research, training and practice. Fellowship in this category is granted to ACHA certificants who have made notable contributions through their work in healthcare education, healthcare research, healthcare literature, or the practice of healthcare architecture. Work in education may be teaching, research, administration, or writing and should have a lasting impact, be widely recognized, and demonstrate inspiration to others in the field and the profession. Research areas may include planning or design efficacy, building codes and standards, etc. Practice may include firm leadership, administration, and project management within healthcare architecture.

Sponsor
Gary L. Vance, FAIA, FACHA, LEED AP
President - Vance Consulting
15466 Bridgewater Club Blvd
Carmel, IN 46033
317.753.2819
gvancefaia@gmail.com

Nominee’s Statement of Eligibility
Wayne has accumulated 38 years as a licensed architect and has been an ACHA certificant in good standing for 16 years with excellent project involvement in challenging healthcare facility solutions across the country.

Having founded TEG Architects in 1989, Wayne has lead the firm by strategically positioning the firm to focus solely on healthcare design and clinician collaboration, to produce optimal healthcare facilities.

Involvement at the university level has allowed Wayne to positively impact architectural education. As a member of the Board of Trustees at Ball State University, he has helped shorten the time and expense to achieve a degree. The TEG internship program has also been a significant part of over 140 student’s educational experience.

Education
Ball State University | Muncie, Indiana 5 Years Bachelor of Architecture
Ball State University | Muncie, Indiana 5 Years Bachelor of Science/Environmental Design

Professional Registrations
Alabama, Arizona, Arkansas, Colorado, Florida, Georgia, Illinois, Indiana, Kentucky, Louisiana, Massachusetts, Mississippi, Missouri, Nebraska, New Mexico, North Dakota, Ohio, Pennsylvania, Tennessee, Texas, Utah, Vermont, Virginia, West Virginia

Civic Involvement
Wayne is actively involved in communities throughout the region, as well as local organizations including: the Health Enterprise Network, Greater Louisville Inc., One Southern Indiana, and with numerous philanthropic efforts centered on education and health care.
SECTION 5.0 | NOMINEE'S OTHER ACKNOWLEDGMENTS, AFFIRMATIONS AND RELEASE

Copyright and Indemnification:
For good and valuable consideration, the exchange of which is hereby acknowledged, I grant The American College of Healthcare Architects (ACHA) a non-exclusive license to use my copyrighted Work, including any text, brochures, drawings, photographs, graphics, plans, slides, books, transparencies or other copyrightable material, (the “Work”) submitted in connection with the (award year) Fellowship submission. This license shall permit limited rights to use, reproduce, crop or resize, publicly display, distribute and transmit worldwide the Work during the full term of the copyright in all media, now known or hereafter devised, including the internet, without payment of any royalty or license fee; in connection with the announcement of any awards under the awards program and the promotion of the awards program itself; in connection with efforts to educate architects through various ACHA programs, different media, in which ACHA certificants, only, have access to view the Work; provided, however, that ACHA shall implement reasonable technological measures to ensure that access is limited to ACHA certificants, shall provide written notice accompanying each access to the Work specifying the conditions under which the Works may be used and that any other use requires additional permissions from me, and shall provide the written contact information supplied below so that the ACHA certificant can contact me for permission for further use. This license applies when the entrant has not secured greater rights to copyrighted material by a license or other agreement, which are stated herein. I acknowledge that all copies of the Work submitted in connection with any entry shall remain the property of the ACHA but that the copyright to the Work remains mine and is not transferred to the ACHA. The ACHA agrees to include in reproductions of the Work a reasonable copyright and credit, provided that the necessary copyright and credit information is identified within this submittal. I also represent that I have obtained all permissions that I believe are necessary to grant rights to the American College of Healthcare Architects (ACHA), and that the use or reproduction of the Work by the ACHA shall not, to the best of my knowledge, information and belief, infringe or violate any other copyrights.

I AGREE TO INDEMNIFY AND HOLD HARMLESS THE ACHA FROM AND AGAINST ALL CLAIMS OR DAMAGES ARISING OUT OF ANY BREACH OF THESE REPRESENTATIONS. THE ACHA AGREES TO INDEMNIFY ME AND HOLD ME HARMLESS FROM AND AGAINST ALL CLAIMS OR DAMAGES ARISING OUT OF ITS USE OF THE WORK.

Reliability and Release:
Information and illustrations for any project receiving an award or chosen for inclusion in any award citation will be taken from the information and materials submitted by the nominee. There may be no further communication with a nominee prior to the announcement of an award. Accuracy, therefore, is essential. By making a submission, the nominee agrees that the information contained in its nomination package are complete and accurate. The nominee further agrees that it shall indemnify and hold harmless The American College of Healthcare Architects (ACHA) from and against all claims or damages arising out of the use of any information or other materials supplied by the nominee. All errors or omissions are the sole responsibility of the nominee. The nominee further certifies that the nominee has obtained all permissions necessary to permit ACHA to publish, without financial or other obligation, any information, photograph or other materials submitted by the nominee, including any permissions required from any individual, architect, contractor, owner or photographer, and such grant will include the necessary permissions to include the same in the ACHA’s designated publication(s) for purposes of any announcements for this awards program. The nominee certifies that the ACHA is authorized to use all such materials as they deem appropriate in connection with this awards program, including publicizing the program itself.

Intern Architects:
I affirm that I do not have unpaid intern architects, including working students, and neither does any firm of which I am an owner or manager.

R. Wayne Estopinal
Nominee Name

Signature/Date

06.01.2018