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# Early Collaboration Key in Health Care Design and Construction: Forum

*Commercial Observer gathered the experts from engineering, architecture and hospital administration for a daylong debate about what works best*

BY **MARK HALLUM** JUNE 8, 2023 4:14 PM



KOHN PEDERSEN FOX'S GEORGINA LALLI, HUNTER ROBERTS CONSTRUCTION GROUP'S ANTONIO CABRERA, MOUNT SINAI HEALTH SYSTEM'S COLIN BARRETT, GROUP PMX'S JENNY FREEMAN AND WEILL CORNELL MEDICINE'S DMITRI KONON. (LEFT TO RIGHT)

PHOTO: GREG MORRIS

estate today. Right along with housing, it's something we all need at intermittent points in life — as opposed to office space, which we've learned from the pandemic that we don't need as much.

So the major hurdle these days for hospital executives is how to expand and modernize health care's built environment in a way that meets the needs of patients while retaining staff. Those were the topics discussed June 7 at Commercial Observer's latest design and construction health care forum titled "The Innovation Race: Building The Healthcare Institutions of Tomorrow."

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It was held before an often standing-room-only audience at the **City University of New York's** Graduate Center at **365 Fifth Avenue**.

The first of seven panels called "The Next Generation of Healthcare Leaders: Bridging the Generational Divide in Staffing Challenges" kicked off the event with professionals such as design and architecture firm **HOK's Nsenga Bansfield**, **Northwell Health's Jonathan Cogswell**, **Montefiore Health System's Tina Macica**, **Mount Sinai Health System's Jacobie Ricard** and engineering firm **Jaros, Baum & Bolles's Christopher Prochner**. **LF Driscoll Healthcare's Andrew Weinberg** moderated the panel.

For Ricard, retaining talent and creating a deeper pool of in-house candidates to draw from and promote boils down to more than salaries and flexibility. Coaching and mentoring young employees plays a major role, too.

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“I do remember thinking that I knew it all, walking into the office and thinking I was God’s gift to architecture coming out of design school,” Ricard said. “But I really had to take my bumps and bruises, and be empathetic to them as they’re making that same transition. So, if you have that approach, it makes it easier to deal with their challenges, and they open up to you.”

The following keynote panel, “The Future of the Existing On-Campus Care Experience,” included **NewYork-Presbyterian Hospital’s Rick Evans** and **Joe Ienuso**, and was moderated by **Sciame Construction’s Joseph Mizzi**.

Components of the built environment that boost communication between professionals regarding patient care is something that Evans said is overdue for change. Moreover, better communication can give patients more confidence in their health care professionals.

“There’s a lot of production pressure upon our staff, nurses, transporters and doctors,” Evans said. “We’re using virtual pharmacists. So, when a nurse delivers medication at the bedside, there are other people waiting. So can you deliver that med properly, safely, and provide basic information? If the patient still has questions, we can tee up a pharmacist who can go live with a patient in real time. ... The built environment should facilitate that — connectivity in all

The panel “Repurposing & Converting Existing Buildings for Long-Term Planning,” which came next, had speakers such as **Mount Sinai Health System’s Colin Barrett**, **Hunter Roberts Construction Group’s Antonio Cabrera**, construction manager **Group PMX’s Jenny Freeman**, **Weill Cornell Medicine’s Dmitri Konon** and architecture firm **Kohn Pedersen Fox’s Georgina Lalli**. Construction safety consultancy **Otoos’s Yonathan Ron** moderated the discussion.

The panel explored each professional’s experiences converting buildings into modern health care centers and the challenges that go along with it.

“Ultimately, it’s the building’s [mechanical, electrical and plumbing] infrastructure that — I don’t want to say limits — but plays a key factor in the project with regard to cost, schedule and logistics,” Cabrera said. “Your best opportunity to address challenges is with pre-construction. Every project requires proper planning and cost certainty, but, when you’re doing an adaptive reuse project, the stakes are higher, the scope is more complex. The means and methods are just more challenging.”

The “Navigating the Regulatory Process in Healthcare Construction” panel was filled by **MG Engineering’s Steven DiFlora** and **NYC Health + Hospitals’**

one of the ways Gonzalez deals with challenges in the approval process of a new project, which can often involve several agencies and local politicians — not to mention consultants.

“Getting them all in line to initially hash out what the vision is going to be is crucial because at that point we can set the expectations, we can make the commitments that we need to be able to make in order to be able to deliver,” Gonzalez said. “Everybody has a certain level of expertise, and if we can collaborate in a certain manner from very early on, there’s a lot of stuff consultants can do when it comes to the regulatory process.”

**Suzen Heeley of Memorial Sloan Kettering Cancer Center and Arthur Metzler of AMA Group** discussed “Development and Upgrading Existing Infrastructure — The Owner’s Perspective” with **Wayne Lawrence of Shawmut Design & Construction** moderating.

Heely turned the discussion back to retaining staff through making the jobs of health care workers easier through technology. She referenced a 2022 **McKinsey** survey that found 75 percent of nurses leaving the health care field noted they did not feel supported by employers.

and materials to the nurses and staff,” Heely said. “It’s not an easy thing to implement. It takes a backbone of infrastructure to make that happen along with the space.”

Next at the forum came the panel called “Planning and Design Strategies for Modern Patient Care.” Panelists included **George Abdilla** of **Gilston Electrical**, **Clayton Mitchell** of **Jefferson Health**, **Peter Mulcahey** of **JRM Construction Management** and **Elizabeth Sullivan** of **Northwell Health**, with **Jack Conway** of HVAC service and provider **Gil-Bar** as moderator.

All the new accommodations for patients and staff discussed in the day’s previous panels could drive up the costs and prolong the construction phases of projects, according to Mulcahey, who said that more collaboration between parties can streamline processes.

“A lot of the time, normal processes will dictate that the owner will go to the designer, who will draw up a bunch of stuff, then it will go to the builder and be priced. All of a sudden the cost and schedule is blown,” Mulcahey said. “We have to be able to rapidly adapt to that. ... We talk about collaborative environments, and I think New York City is probably the worst at it, to be honest with you.”

**Mark Healey** and **Melissa Kiefer**, both from **Hospital for Special Surgery** (HSS), and **Ryan McCarthy** of JB&B. **Gregory Kochoumian** of construction firm **Lendlease** moderated.

HSS's master plan calls for the construction of what will be called **Kellen Tower** as a joint replacement and spine conditions clinic at **541 East 71st Street**. Kiefer says the project looks 15 years into the future and should prepare HSS for breakthroughs and industry changes in the coming decades. Flexibility in the design is supposed to allow HSS to pivot if the industry makes any dramatic shifts itself in the meantime.

“We need to be nimble and ready for the next idea that our team comes up with that our clinical team is thinking about and how to facilitate the innovative ideas that they come up with,” Kiefer said. “Being able to change our mind and with different projects as we define them is part of the portfolio, and the other piece is making sure that we are very inclusive with which people we include in the process.”

*Mark Hallum can be reached at [mhallum@commercialobserver.com](mailto:mhallum@commercialobserver.com).*

**KEYWORDS:** [Baum & Bolles](#), [City University of New York](#), [HOK](#), [Hospital for Special Surgery](#), [LF Driscoll Healthcare](#), [Memorial Sloan-Kettering Cancer Center](#), [Montefiore Health System](#), [Mount Sinai Health System](#), [Northwell Health](#), [otoos](#), [Simon & Schuster](#), [Stantec](#), [The McGraw-Hill Companies](#)