

Corbin Design – Focused on Improving Wayfinding Signage in Healthcare, Education and Civic Environments



Shelley Steele
President

Corbin Design

Interview conducted by:
Lynn Fosse, Senior Editor
CEO CFO Magazine

CEO CFO: Ms. Steele, how did you get interested in wayfinding?

Ms. Steele: I have a marketing background, so I started with the firm as their marketing director about 24 years ago. It was more of a marketing consulting and business development role. The only reason I found the company is that I am actually from Traverse City, Michigan, where the company is located. I thought I would stay here and see what happens with the job, and 24 years later, here I am.

CEO CFO: Why is it so difficult to get signage right?

Ms. Steele: Most people are not thinking about the content and trying to make it easy for that first-time or infrequent visitor to understand. If something is not right, they just keep adding more and more signs. What we do is come in and look at the big picture, developing a master plan for the sequence of signage that a user should encounter. Less is more, less information, and making sure that they can comprehend that information and the terminology is correct, is the most important part of signage. It is the information on the signage that is so important.

CEO CFO: When you or one of your people are going into a setting to evaluate, what might you look at that less knowledgeable people don't realize is important?

Ms. Steele: Most people are not looking for signs unless they don't know their way around an environment. Most users never think about the fact that somebody figured out what the messaging was and what the location was for that sign. When we are locating signs, we want to make sure they are in the most intuitive spots. As you are coming in an entrance there should be some kind of building directory there that gives you information about the floor you are on, the elevators, and the information and destinations that you can access from there. We don't want to clutter the area with signs and strive for a system of fewer, better signs located in intuitive spots. For example, if people don't know where they are going, they are generally going to turn right, so if we can't put a directory right in front of them, we are going to locate it to the right because intuitively it is easier for people to turn right and get out of the way.

As we are looking at locating signs from a pedestrian standpoint in an interior, like in a healthcare facility, we are looking at that. There are ADA requirements on heights that we have to locate identification or code signs, with the Braille so that they can access it from a wheelchair, or sight-impaired people know the level to look for that. We are always working to meet ADA requirements for room identification locations, but from the standpoint of wayfinding signage, it is the most intuitive spot. We just give the user enough information to get them to that next breadcrumb or decision point.

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CEOFCO: *Is it universal among different types of buildings or are there differences by type?*

Ms. Steele: In the hospital setting, unless you are going to see somebody that just had a new baby, you are not going there for something happy that you are celebrating, so you are stressed, there is some health-related concern, or you are visiting somebody with a health-related concern. It is just the stress that people are under that makes the healthcare setting very different than going to the mall or going to the zoo where you wander around and want to explore. Healthcare environments are where you want to get from point A to point B in the shortest amount of time.

CEOFCO: *Do you typically work with new buildings or refurbished buildings, and would it be the whole hospital or perhaps just a certain section?*

Ms. Steele: Generally, the biggest wayfinding challenge is a large existing hospital. What has happened is they continue to add on. They added new buildings, did an addition, or added new floors. It has organically grown into this complex beast that people need to find their way around.

We also do new construction, but new construction should be easy because the architects are designing these buildings to be intuitive to start and they usually are smaller. There is a thought about having a long wide corridor, and they thought about pathways that people navigate on. They look more public. They are bigger and lit better and hopefully, they are not hiding the elevators. We do new construction, but they are a lot easier than large existing hospitals.

CEOFCO: *What about the color of the signs and the style of lettering? How important is that, and do most of your clients pay attention to your recommendations?*

Ms. Steele: It is very important. Contrast is important and using the right font and size, so the messaging is legible. There are ADA requirements for contrast and fonts that are compliant. For the contrast, you may have a dark background with white letters, or you may have black with white, that high contrast makes it very legible as well.

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Our clients sometimes want to use their corporate font, their branding font. We have to explain to them they can use it in a header or footer where it may be a little more decorative or the top and bottom or back of a sign. However, when you are looking at the content and the messaging on the sign, then the font needs to be a certain size, it needs to have a certain contrast, and not all fonts are ideal or compliant in all signage applications.

CEOFCO: *How many projects might you be working on at one point and how long do some of these take?*

Ms. Steele: Generally, we are sending out somewhere between thirty and fifty invoices a month. Those are active clients that we have. It doesn't mean it is the same clients month, sometimes there may be months when there was no consulting done on select projects but that is generally the range. On average our projects last two to three years.

What we are doing is design and planning, so after the plan is done, after we have designed the information for the system, we have done location planning, designed the sign array, and added specifications to the sign types, there is a plan that is then bid out for the fabrication and installation. After we get to the plan point, the client needs to raise the funds to then implement the signs to get them fabricated and installed. Sometimes there is a lag because they are trying to get the funds to implement it. Other times we may just go straight into that.

Two to three years is the average, the quickest is about a year. That may be a civic environment and there is some destination like maybe an event center that is opening, or we are trying to meet a deadline for some kind of new construction, or for funding requirements for grants that they are trying to spend the money by a certain date.

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CEOFCO: *Do most organizations you deal with recognize the importance of good signage or is it more of an afterthought?*

Ms. Steele: The majority of them understand the importance. It is a costly thing for them to do, not necessarily developing the plan but paying for the fabrication and installation of the identification and wayfinding signage. I think they realize the importance but, in some scenarios, a good wayfinding signage system is a nice-to-have but in healthcare, it is a must-have.

I am not saying that healthcare always does it right or that they have the funds to implement a good system, but if you think about the situation and the audience that is going to the healthcare facility, they may be very stressed and trying to get to an appointment. In addition, they may be unfamiliar with the environment, so it is a must-have and the clients understand that. It is just whether they have the budget money to implement the system.

CEOFCO: *When it is at the installation phase, how involved are you in making sure it is done right?*

Ms. Steele: If they have hired us for what we consider our fourth task of work, which is implementation, we assist with the bid process. They hold the contract with the fabricator, but once they get under contract with that fabricator, we are still there working for them on their behalf reviewing color samples, shop drawings, keystroke proofs, which is the messaging laid out on the sign, and then we come back and do a punch list inspection at the end. We are very involved when they hire us for that phase of work.

CEOFCO: *Do you do much outreach to new clients or does your reputation precede you or are many of your clients are coming to you these days?*

Ms. Steele: I go to four to five conferences a year that are in the primary client markets that we serve. They are healthcare marketing conferences, university planning conferences, and a civic conference for the International Downtown Association where the attendees are from cities and international business improvement districts. This year I am also going to be doing a trails conference to meet planners who work specifically on trail and park systems.

We also get referrals from current and previous clients and respond to RFPs. We get repeat business from our healthcare clients. Generally, it is just our healthcare clients where we are getting repeat business because once the other clients have the new wayfinding system designed, they have what they need to keep it going for ten to twenty years.

CEOFCO: *What have you learned about navigating some of the challenges working with the government over the years?*

Ms. Steele: Well certainly they move a little bit slower than other clients. There isn't the time sensitivity that we see with other clients who are working towards a specific deadline. If the project is funded by a grant and they have a deadline to use the funds, it is great. They often have a hard time getting the funding to implement the system if they don't already have that upfront. When we work with a government implementation there can be funding issues, and the speed of response is slower.

CEOFCO: *Are there newer technologies that you can use in the planning process today?*

Ms. Steele: The software that we use has advanced. AI has come in and helped a little bit with renderings and things like that. Some technologies are wayfinding navigational software and they certainly can support a wayfinding system but there is still that need for the static signage system in the environment so you are not counting on everybody using those technologies. At one point everybody wanted touch-screen (TS), and now with people not wanting to touch things after COVID, people are shying away from that technology.

We internally have developed a custom database program that helps us when developing sign messaging and when we go on-site to do audits of the existing signs or conduct the final punch list inspections of the signs that have been installed. The app speeds the process and can be used with iPhones or iPads.

CEOFCO: *What does 2025 look like for the Corbin Design?*

Ms. Steele: We have a very strong backlog. We are certainly seeing improvements in our primary markets which are healthcare, education, and civic. Civic includes parks and trails. We are seeing a big increase in parks and trails as they are getting funding for these types of things and encouraging people to get outside and be more active. With the

university work, we are seeing an increase in community colleges. In healthcare, there is a lot of new construction still going on with the health systems that we work with. We see 2025 as a strong year.

CEOCFO: *What if anything do people miss or misunderstand about Corbin Design that they should know when they take a look at the company?*

Ms. Steele: When people come to our website or stumble upon us, they think that we make signs. They don't understand that we are designers and planners of sign systems, similar to an architect for a building. The communication part of that is so very important but because we are showing implemented systems that carry the design and carry the information and are in the locations that we proposed, they just automatically assume that we fabricate and sell signs. We are so much more than that in the beforehand. We are giving a plan to a fabricator who then does what we have identified in the plan, so we are developing those plans versus implementing them. I think that is probably the biggest misconception of Corbin Design.