

NEW UHC – UPDATE

As plans for the new UHC proceed, staff are working closely with the architectural engineering firm of Gresham, Smith and Partners (GSP) to plan and design the facility.

“Gresham, Smith is one of the nation’s leading healthcare design consultants,” said Geoff Marshall, vice president of Support Services at UHC. Based in Nashville, Tenn., the firm has over 30 years of specialization in health care design and are currently ranked 8th in the nation based on their volume of work.

The following provides a glimpse of the various phases of the project and what is involved in each one.

Phase I

The first phase of the project, called **Programming**, involved

an extensive study of state-of-the-art work systems and space design utilized at other U.S. hospitals,” Marshall said.

“In many cases this process involved staff visiting other hospitals to see firsthand what works and what doesn’t,” he continued. “This evaluation is helping us develop what we hope will be an ‘ideal’ system that is more efficient for both patients and staff in today’s environment.”

In addition to having all private rooms – a standard for hospitals built today – newer hospitals all have sophisticated patient care communication systems. They also group outpatient services in a convenient and centralized location, something that is difficult to achieve in an older hospital.

An example of this trend is the centralized system that will be used in the same day procedures area. Although it does not have an official name yet, this area is where patients will be prepared for same day surgery, cardiac catheterization and endoscopy. Patients will also spend a portion of their recovery time in the area prior to discharge. In addition to centralizing services (and therefore providing more efficiency), the layout offers more privacy for patients, fewer transfers from one department to another and more bed availability.

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In another system improvement, patients will find they will be able to easily access a “quick



test” area that will be located adjacent to the registration/admission department. This area will offer basic lab, x-ray and EKG services and is a definite benefit in that patients won’t have to walk from department to department for these tests.

Newer hospitals also place a strong emphasis on creating a better atmosphere for care and healing. Even sunlight is a “feature” to be considered, as windows and natural daylight are very important to helping a patient recover.

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“We will be able to take advantage of this at our new site,” said Marshall, “because many of the rooms will face a beautiful wooded area.”

In addition, it’s important for patient rooms to be large enough to handle all the new bedside technology required today and include furniture for family members that converts to beds. As families are playing an increasingly larger role in patients’ recoveries they need to be accommodated in patient rooms.

Marshall also noted other interesting features being used include nurse-call systems that do not utilize bells and speakers in the hallways.

As Phase I wound up in late January, decisions were made on optimal patient care systems. This process helps the architects create a layout that will meet UHC staff and patient needs.

Other work being completed at this time involves an analysis of the equipment that will be needed in the new facility. UHC already has a large amount of relatively new equipment that can be relocated to the replacement facility, and the analysis will help identify what existing equipment can be moved and what has to be purchased.

Phase II

Phase II or **Schematic Design** is currently underway. As part of this phase the architects are using information gathered in Phase I to create general designs showing relationships between departments and services. This phase will start to detail what departments are on each floor and will start to show actual room and corridor layouts.

Phase III

According to Marshall, the more detailed **Design Development** Phase will start in August and last

about 4 months. This particular phase will include the designing of every single room in the new hospital. By fall, there will be lifesize models of a patient room, exam room, operating room suite and nursing station. These “rooms” will be constructed in vacant retail space the hospital has rented.

“These models will allow staff to tour the most duplicated rooms in the facility and give input as to where light switches, electrical and medical gas outlets should be located, and actually view what the finished product will look like,” Marshall said. “By the end of the design development phase, the rooms will have the appearance, down to the paint and decorations, of what the new UHC rooms will look like on move in day.”

Although no date has been set as this issue of House Call went to press, UHC plans to schedule a groundbreaking ceremony in the spring or summer.

Site work is scheduled to begin in July, with an estimated 60 percent of that work to be completed by the end of the year. Construction on the building will begin in the summer of 2005. ■■■