Multi-disciplinary approach to planning

Staff, operational leaders and physicians participate in design sessions

Creating a space that is flexible for the future, yet meets current needs and standards requires careful thought and planning. That is what the current design sessions for the new Richmond Hospital Acute Care Tower (ACT) are all about. In November, frontline staff, operational leaders, and physicians reviewed the high-level layout of their spaces, discussed options and considered priorities for safe, efficient, and innovative care.

These design sessions were built on planning activities held last summer, where clinical teams came together to discuss critical adjacencies, layouts and design priorities. Perioperative services planning sessions focused on everything from patient flow to administrative space requirements.

“Stakeholders have imagined their workflows and provided critical feedback on some of the design elements proposed by the architect,” said Rich Dillon, Director, Richmond Hospital Redevelopment Project. “These engagement sessions have given stakeholders a sense of what is possible in the future ACT and the excitement is growing.”

Flexibility is a key planning element to ensure the ability to grow and adjust over time as needs change. For example, much of the new administrative space is likely to be “touch-down”, creating a work environment that promotes collaboration and dialogue among different disciplines. Private offices will be reserved for roles that require space for patient/family conferences and HR-related meetings. This arrangement provides flexibility and aligns with future trends that reflect the growing use of technology.

Clinical adjacencies and the Seven Flows of Medicine

Planners need to understand what happens in the space as well as how staff, patients and families move between spaces. Design elements must reflect the Seven Flows of Medicine (flow of patients, family, providers, medications, supplies, information, and equipment), and consider what needs to be where in terms of efficiency, infection control/quality, and practicality. For example, who supports patient movement to other inpatient or outpatient areas? Where should the elevators be located? How does equipment move in/out of the sterile core? And, how can patient movement be minimized?

Planning examines the patient journey from the moment they enter the hospital to through until discharge. The people, equipment, and processes required to support that journey are complex and require a variety of viewpoints to ensure all aspects are appropriately considered, which is why a multidisciplinary approach is required.

Design sessions will continue into January 2019 and ensure all pertinent stakeholders have had the opportunity to participate. This input will guide the design of the new ACT and inform cost estimates for construction, equipment, technology, and operations within the new facility. This information will form the foundation of the business case that will be submitted to the Ministry of Health next year.