

## **How to Replace a Dysfunctional Emergency Department without Building Additional Treatment Places**

**Topic & Subject:** *Facility Design and Planning  
Renovation, Rehabilitation and Expansion*

**Length:** 1.5 Hours

**Primary target audience:** Senior Executives

**This session would be appropriate for Student Associates:** Yes

**Target audience organization type:**

Hospitals/Healthcare Systems

Nurse Executives

Physicians or Medical Group Practices

**Seminar Description:**

This session will address the Emergency Department replacement at University Hospitals, which was an inadequate facility marked by the use of "hallway beds." The ED had to be redesigned due to outside circumstances affecting the ability to expand, and had to use space more efficiently. The development of the suburban healthcare marketplace, through the construction of several new hospitals, is changing the patient mix at UHHS, which is at the urban core of Cleveland. The local county hospital is often on bypass and therefore the amount of underserved patients seeking treatment at UHHS has increased. UHHS is an academic medical center with significant competition from Cleveland Clinic, Rainbow Babies, and Children's Hospital as part of the University Hospitals campus, serves as the quaternary pediatric trauma center for the region. This discussion will speak to the disposition of high acuity patient protocol and flow, decentralized resuscitation rooms between adults and pediatrics, and the use of Universal Room design, all which allow for distribution of patient populations by acuity in response to physician/attending/staffing levels. Low acuity and fast track sequences will be discussed. Explanations of "quick registration," Rapid Care, swing capacity in the rapid care rooms, and the use of double access doors on treatment rooms will be demonstrated. The solution includes embedded diagnostic/laboratory services, which are adjacent to treatment spaces, for reduction of error and patient transport time. The CT unit is paired with a resuscitation room to facilitate stroke care expeditiously. Thoughtful planning allows the department to expand clinical care services and phase adjacent support areas to the department as future capital funding allows. Standardization is applied to yield savings in both design and construction of treatment spaces. Construction cost premiums are avoided for non-priority program functions that could be deferred to later opportunities. Planning for future expansions of clinical treatment spaces by positioning growth corridors allow for future construction.

**Teaching Methodology:** Lecture with Q and A

**Executive summary:**

This seminar illustrates how a large urban academic center responded to the needs of the community in the redesign of their Emergency Department. Discussions will include high acuity patient protocol and flow, use of Universal Room design and planning for future expansion. Participants will see the results of a revenue/square foot assessment that demonstrates that the expansion not only met the community's request but provided a good return on investment for the organization.

**Learning Objectives:**

- Learn how to adjust the scope of a project and budget in the shadow of an uncertain economy and future.
- Learn to implement and adjust the operational philosophy of the department in order to improve the volume of services to be provided.