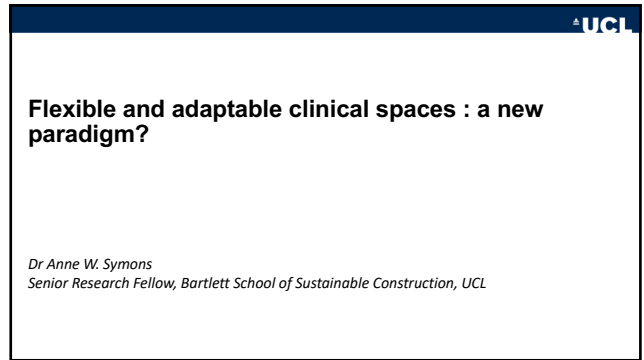




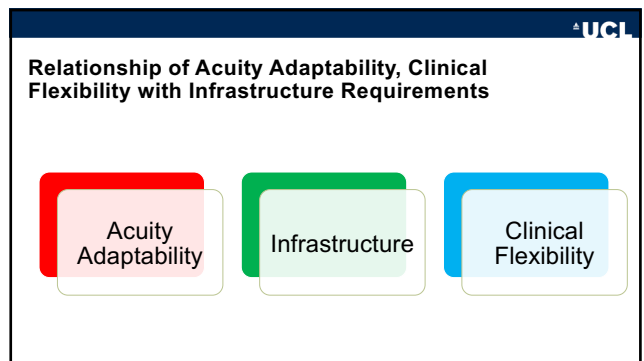
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	Definitions	References
Layering	Separation of the building into 4 layers: hot floor (high tech), hotel (patient accommodation), offices and industry (supporting facilities)	Netherlands Board for Healthcare Institutions
Open Building Concept	Design levels: Primary (Structure and core), Secondary (Departmental), Tertiary (Room Level)	Habraken and Stephen Kendall
Adaptability	Ability to alter/change spaces as in Open Building – not time constrained	-
Acuity Adaptability	The acuity-adaptable patient room concept is an emerging care model in which a patient is cared for in the same room through discharge regardless of the patient level of acuity.	National Library of Medicine
Clinical Flexibility	Clinical Flexibility refers to a single space where different types of medical care can be delivered	-

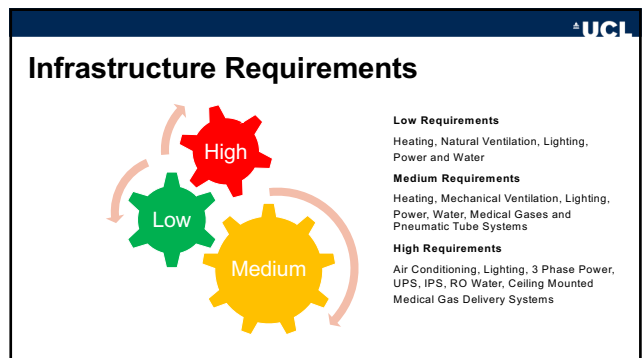
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	Single Rooms	Issues
Advantages	Patient remains in the same room/space throughout changes in acuity through low, medium and high	Reduces patient transfer
Disadvantages	Room/space requirements need to be capable of servicing high acuity facilities	Room area maximised Potentially a 'Hot Room' Staffing issues
	Split Acuity	
Low to Medium	Creation of room delivering Levels 1 to 2 care	Room area 19 sq.metres Reduced services requirements Reduced staffing issues
Medium to High Acuity	Creation of room delivering Levels 2 to 3 care	Room area 26 sq.metres Full ICU services requirements Reduced staffing issues

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Infrastructure Requirements

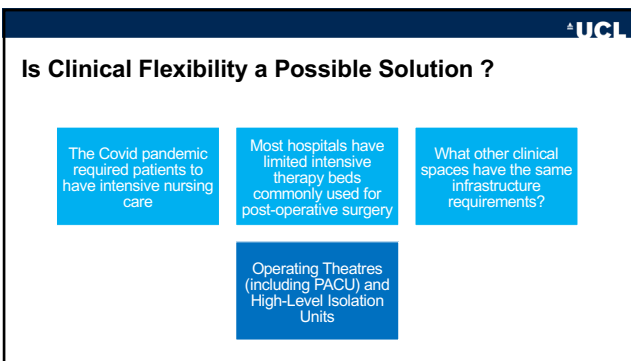
Category	Room Types
Low	Offices, waiting areas, rest facilities, teaching facilities, storage
Medium	Inpatient beds Levels 1 and 2, consulting/examination, treatment rooms, clinical support (clean and dirty utilities)
High	Operating theatres, Level 3 and 4 ICU beds, catheter labs, major imaging, resuscitation areas, post mortem, radiotherapy

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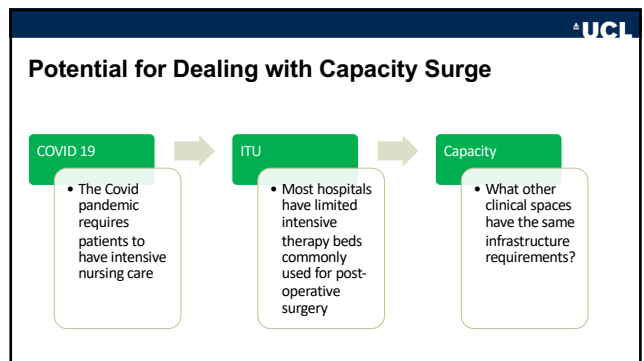
Do Common Clinical Requirements Exist?

Clinical Facility	Room Area (m2)	Medical Equipment: Ceiling Delivery	Specialist ventilation	Gowning/ Isolation	Adjacent Clean Supplies	Adjacent Dirty Disposal
ITU Bed	26	Essential	Essential	Desirable	Close Proximity	Close Proximity
Isolation	26	Potentially	Essential	Essential	Desirable	Desirable
ED Resus Bay	26	Essential	Desirable	Potentially	Close proximity	Close Proximity
Operating Room	35 - 55	Essential	Essential	Essential	Essential	Essential

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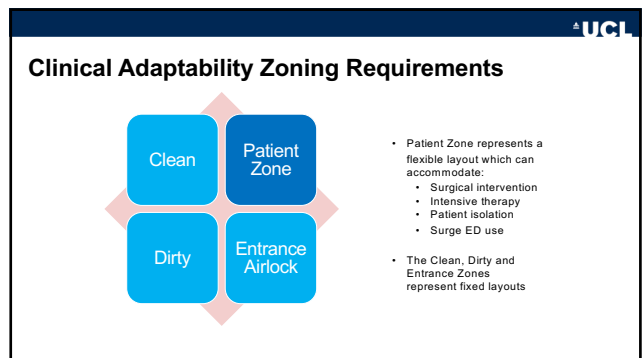


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What would be the advantages of creating a suite with flexible clinical space?

Clinical Activities	Potential Use
ITU Bed	Opportunity to carryout surgical procedures on post operative patients without transferring back to theatre
Isolation Bed	Can be used for patients with various infectious diseases and burns patients
Resus Room	In the event of surge capacity in ED can accommodate more serious trauma patients
Operating Suite	Can be used to address backlog surgery for conditions which do not require large theatres

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Flexible Surgical/Nursing Suite

Interventional Therapy Suite

- Multi-purpose Therapy Room:
- Operations
- Intensive Therapy
- Isolation Nursing Care
- Surge capacity for the Emergency Department

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Room Adaptability Process

Fixed Core Requirements

- Common denominators based on most onerous requirements

Environmental Change Controls

- Ability to adjust environmental conditions to suit different functionality

Use of mobile equipment

- Equipment changed to suit functionality

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Adaptability of Interventional Therapy Room

Interventional Therapy Room

- Core Requirements
- Environmental Change Controls
- Solid architectural enclosure
- Fixed Equipment
- Fixed Infrastructure
- Change of mobile infrastructure
- Support Infrastructure
- Mobile Storage
- Tables
- Emergency Resuscitation

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Examples of Spaces and Common Equipment

The following slides indicate examples of the four spaces in the proposed suite together with some of the equipment which is currently used in all the areas and some which although currently only associated with one particular clinical activity could prove advantageous in the other settings

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Intensive Care Room

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Operating Room

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Operating Theatre to Isolation Room



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Emergency Department: Resuscitation Bays



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Clean Preparation



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Automatic Dispensing Cabinets (ADC)



Nurse opening controlled drugs compartment

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Dirty Disposal Room

Adding a small macerator to a traditional theatre dirty utility allows this to service a patient bed area



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Any thoughts?

Thank you!

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