

# Facilities Update

## December 7, 2015

Citizens' Standing Advisory Committee  
Todd Johnson  
Jamie Cheney



# 2030 Master Plan

## Master Plan

600 Beds

2.25m SF

2,875 Cars



# Current Campus



# Forest A - 176 Beds!



# Forest A.8 Boeing Roof Garden



# Forest A.2 Workspace – Project Complete



# Bridges @ 11<sup>th</sup> - Open

- 180 units, 73% occupied
  - 66 Studios
  - 52 One-bedrooms
  - 58 Two bedroom/two bath
  - 8 Three bedroom/two bath
- 37 Subsidized apartments
- 31 UW/SCH faculty/staff residents
- LEED Silver designation
- Industry recognition



# PBMU - 41 Beds Operational





# PBMU Safety

- The PBMU treats children and adolescents ages 4-18 who have emotional, behavioral and neuropsychiatric disorders. Some common reasons for admission include mood and anxiety disorders, suicidality, disruptive behavior disorders, eating disorders, and autism.
- The PBMU is not a juvenile correctional facility and does not offer forensic services. Youth who have or are suspected of committing violent crimes are served by state-run facilities.
- The average length of stay in the PBMU is about one week. The majority of the children and youth served on the PBMU return home and reintegrate back into the community.
- Seattle Children's has evaluated and improved systems used to keep patients safely inside the locked unit, as well as response in the event a patient does leave the unit.
- Children's security staff works closely with the Seattle Police Department and SPD assumes primary responsibility for patient safety and recovery once they have left our campus.
- Children's staff strives to keep patients in sight and communication at all times, helping insure safety and serving as a location support for SPD.
- SPD serves as primary contact with local schools.

# 2020 Mid-Campus Plan Project Intent

## Cancer and Blood Disorders Center

- Clarity of Entry, Arrival and Identity
- Daylighting and Views of Outdoors and Nature
- Variety of Private and Open Infusion Bays for Patient and Family
- Connection to Inpatient Hematology Oncology Unit

## Ambulatory Clinics

- Flexibility in Clinic Configuration
- Easy Access, Clarity of Entry
- Dental Clinic
- Ophthalmology

## Workspace

### **Faculty Work Space**

- Adjacency to Inpatient and Outpatient Services
- Some Proximity to Staff Entry
- Flexibility and Team Building
- “New Breakthrough Work Space Design”

### **Decommission Modulars**

### **Medical Records etc.**

## Clinical Support Services

### **Pharmacy**

### **Clinical Laboratory**

## Family Services

- Location: Near Other Family Amenity Programs and Easy to Locate

## Diagnostic & Treatment

### **Rehab / OT/PT**

- Convenient Access to Entry
- Proximity to Parking
- Access to Rehab Inpatient Unit and/or Ortho Clinic
- Daylighting Opportunities in Treatment Areas

### **Radiology Expansion**

### **Hybrid Cath Lab**

### **Day Surgery / GI Procedure**

- Regional Growth Strategy
- Clarity of Entry and Arrival
- Adjacency to Operating Rooms and Recovery
- Flexibility with Imaging Preparation/Recovery

### **PACU / Recovery**

- Create Efficiency, Flexibility and Collaboration
- Proximity to Sedation Sites

### **Dialysis**

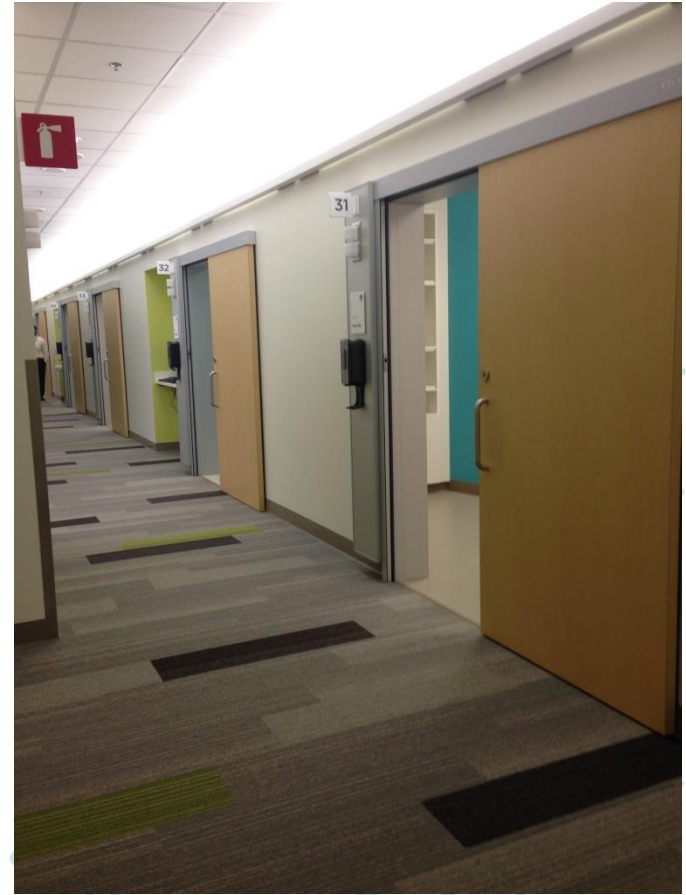
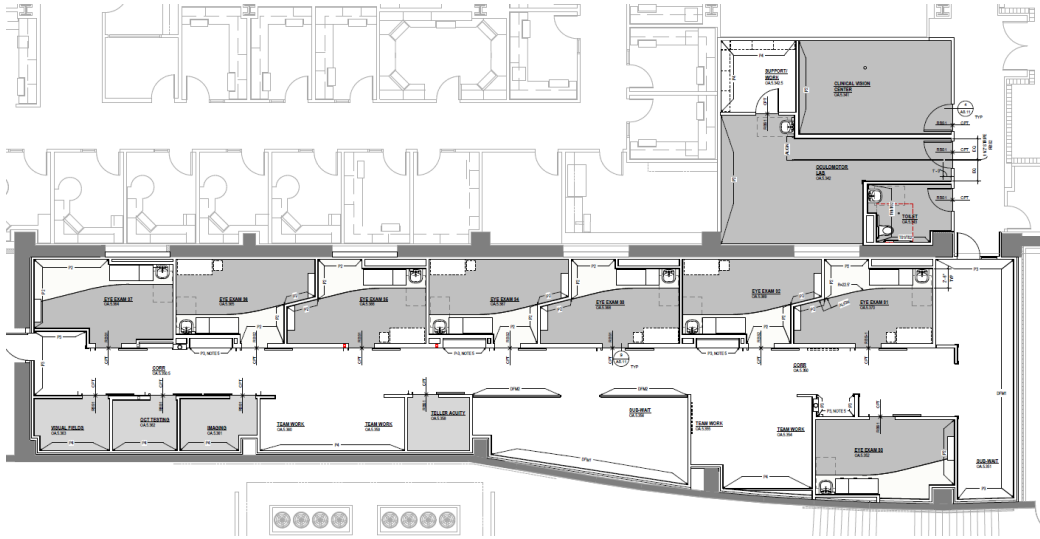
- Meet capacity for Certificate of Need
- Flexibility with Infusion

## Research Integration

# Cath Lab – Project Complete

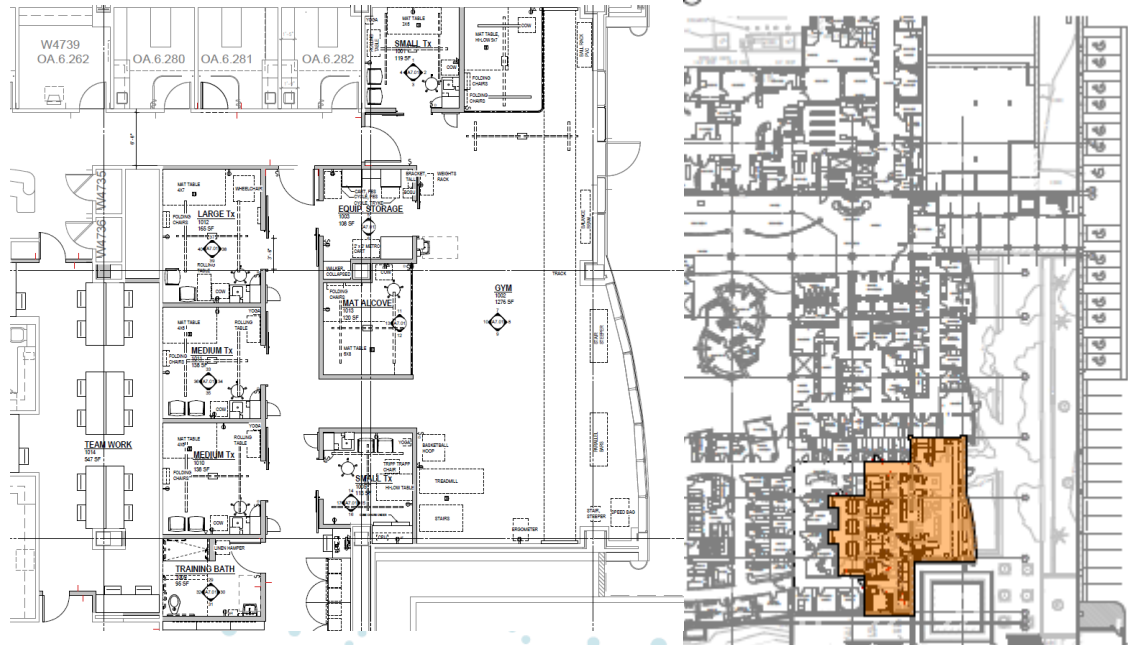
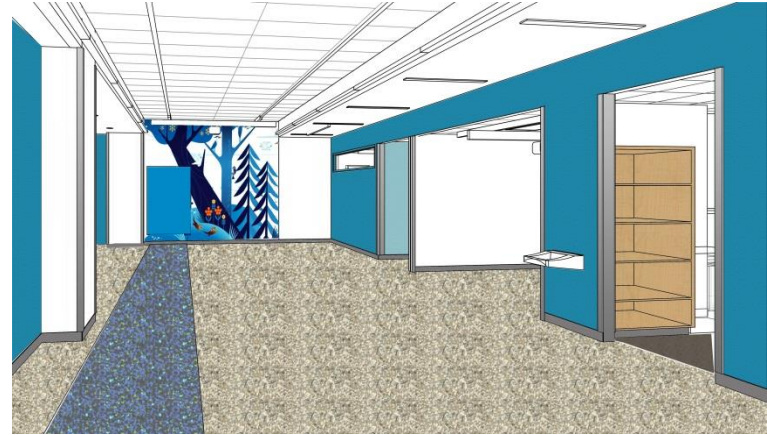


# Ophthalmology – Project Complete



# Rehab Outpatient Therapy Upgrade

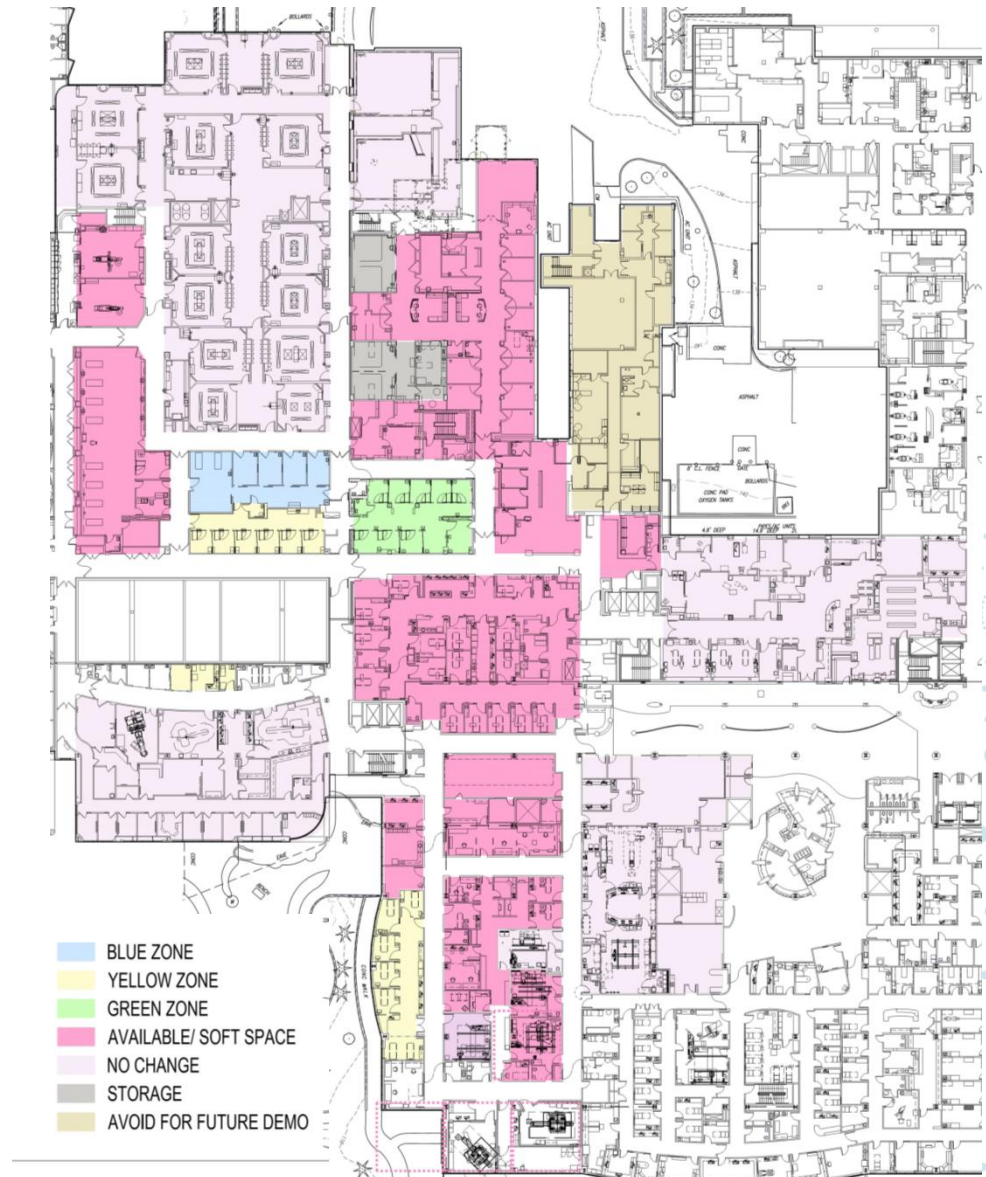
- Approach: IFD
- Phase: Pre-construction
- Work to date:
  - Musculoskeletal Center Alignment
  - Completed conceptual planning, schematic design and detailed design
- Current work:
  - Kicking-off Operational Readiness work
  - Preparing for construction



# Radiology/Perioperative Services

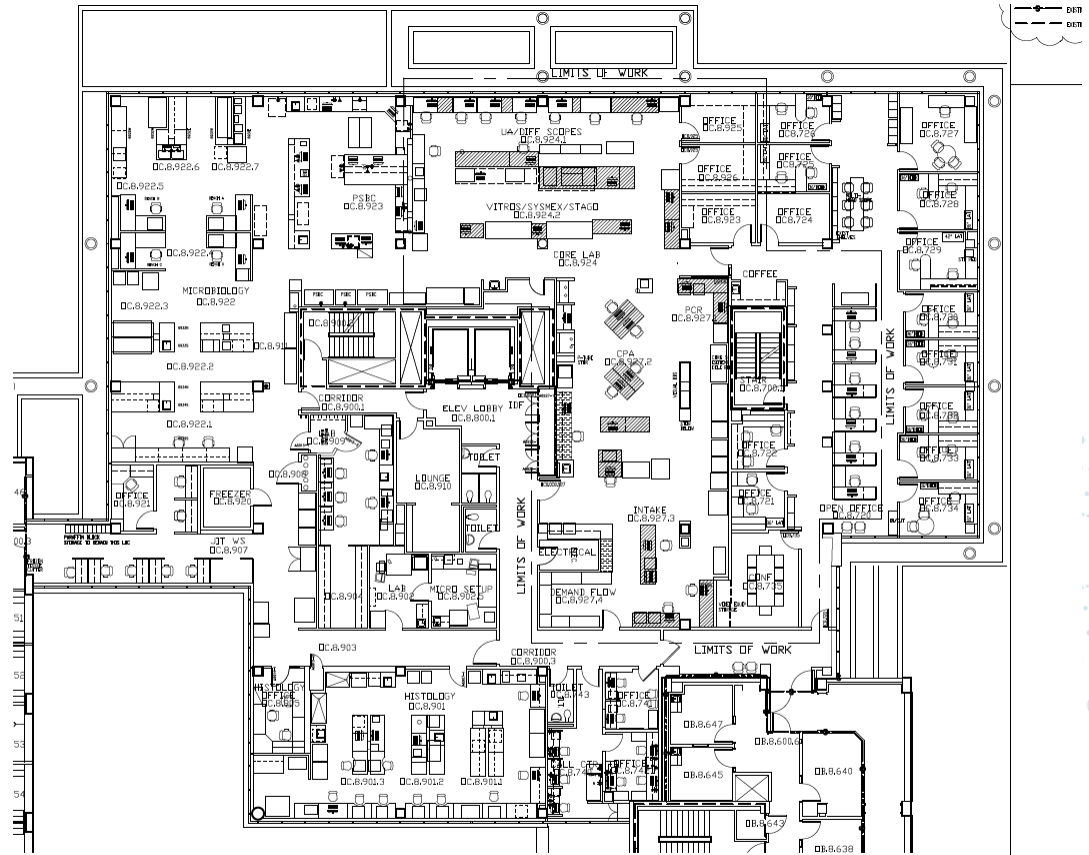
## Flow

- Approach: IFD
- Phase: Design
- Work to date:
  - Future state value stream designed
  - Completed conceptual planning
  - Started schematic design
- Current work:
  - Operational assessment for both Radiology and OR,
  - GI and Block Room relocations, Family Feedback,
  - dynamic modeling to confirm schematic design



# Interim Clinical Lab

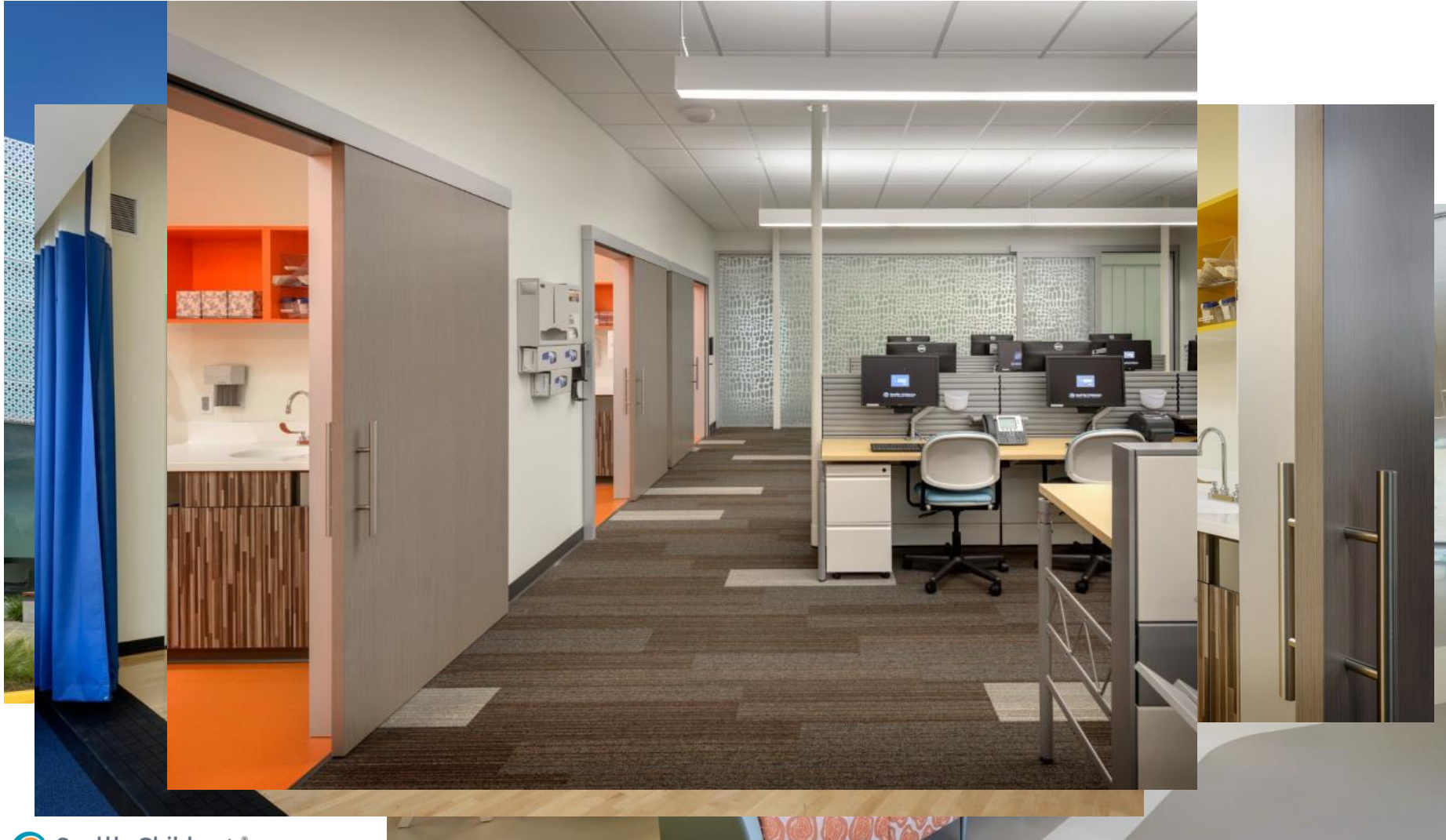
- Approach: IFD Light
- Phase: Construction
- Work to date:
  - Completed design phase
- Current work:
  - OB.10 – Complete
  - OC.10 – Under construction
  - OC.8 – Under construction



① OC.8 CORE LAB LIFE SAFETY PLAN  
1/16" = 1'-0"

# South Clinic Opened 8/18/15

## North Clinic Opening 2017





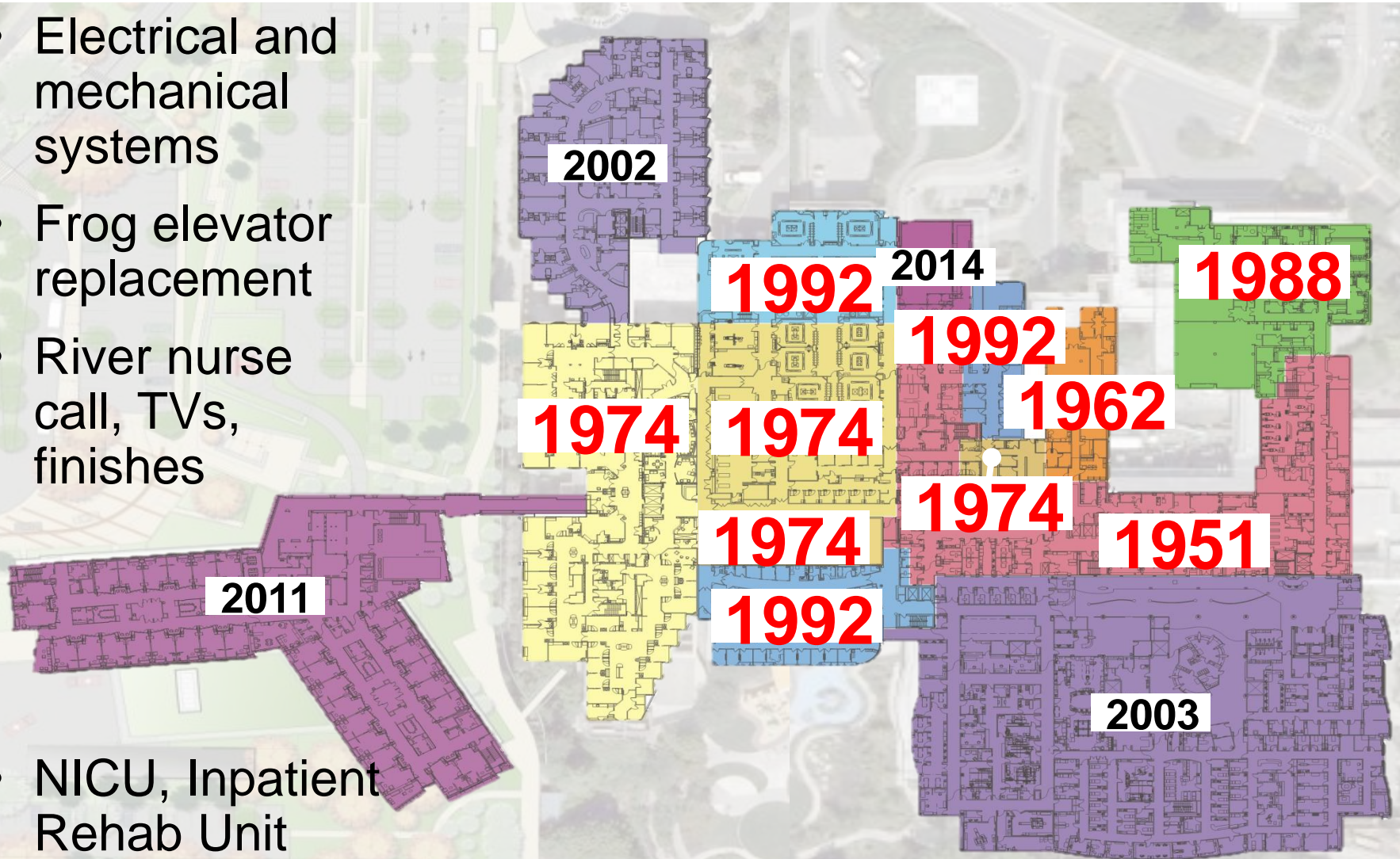
# Forest A Kitchen & Room Service

Opening Late 2016



# Infrastructure & Functional Upgrades

- Electrical and mechanical systems
- Frog elevator replacement
- River nurse call, TVs, finishes
- NICU, Inpatient Rehab Unit
- OBCC



# Transportation Update

Jamie Cheney | Director, Transportation



# 2015 CTR Survey Results: Share of drive alone commuting



↑  
The majority of Children's staff do not drive alone to work

Survey methodology: City of Seattle's biennial CTR survey methodology is based on staff who arrive at work between 6am-9am

# 2011-2015: Commute Patterns

2011 Survey

Drive Alone 39.3%

60.7%

Non-Drive Alone

# 2011-2015: Commute Patterns

2011 Survey



2013 Survey



# 2011-2015: Commute Patterns

2011 Survey



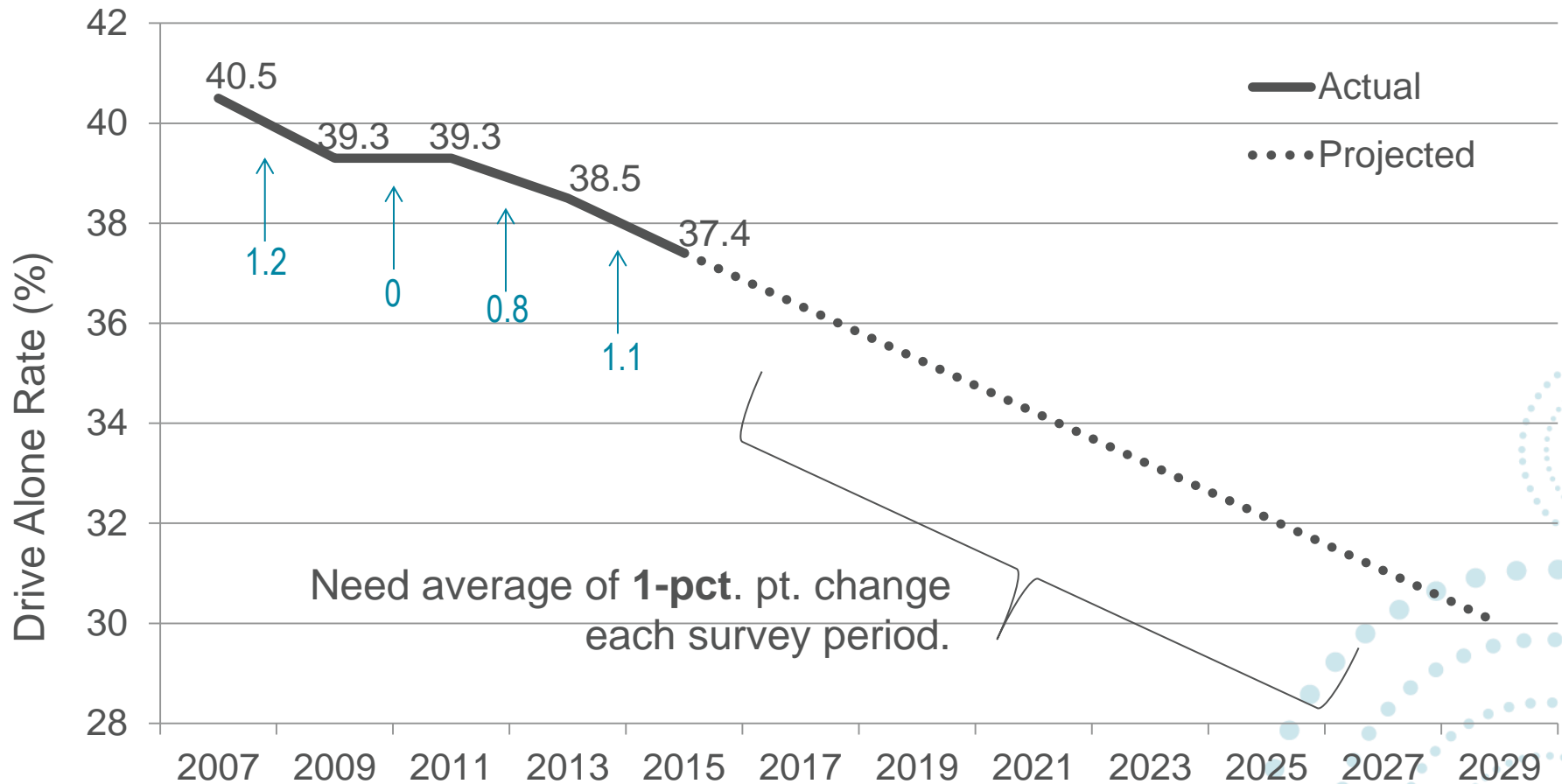
2013 Survey



2015 Survey



# CTR Survey Drive Alone Rate & Trend Line to 2029



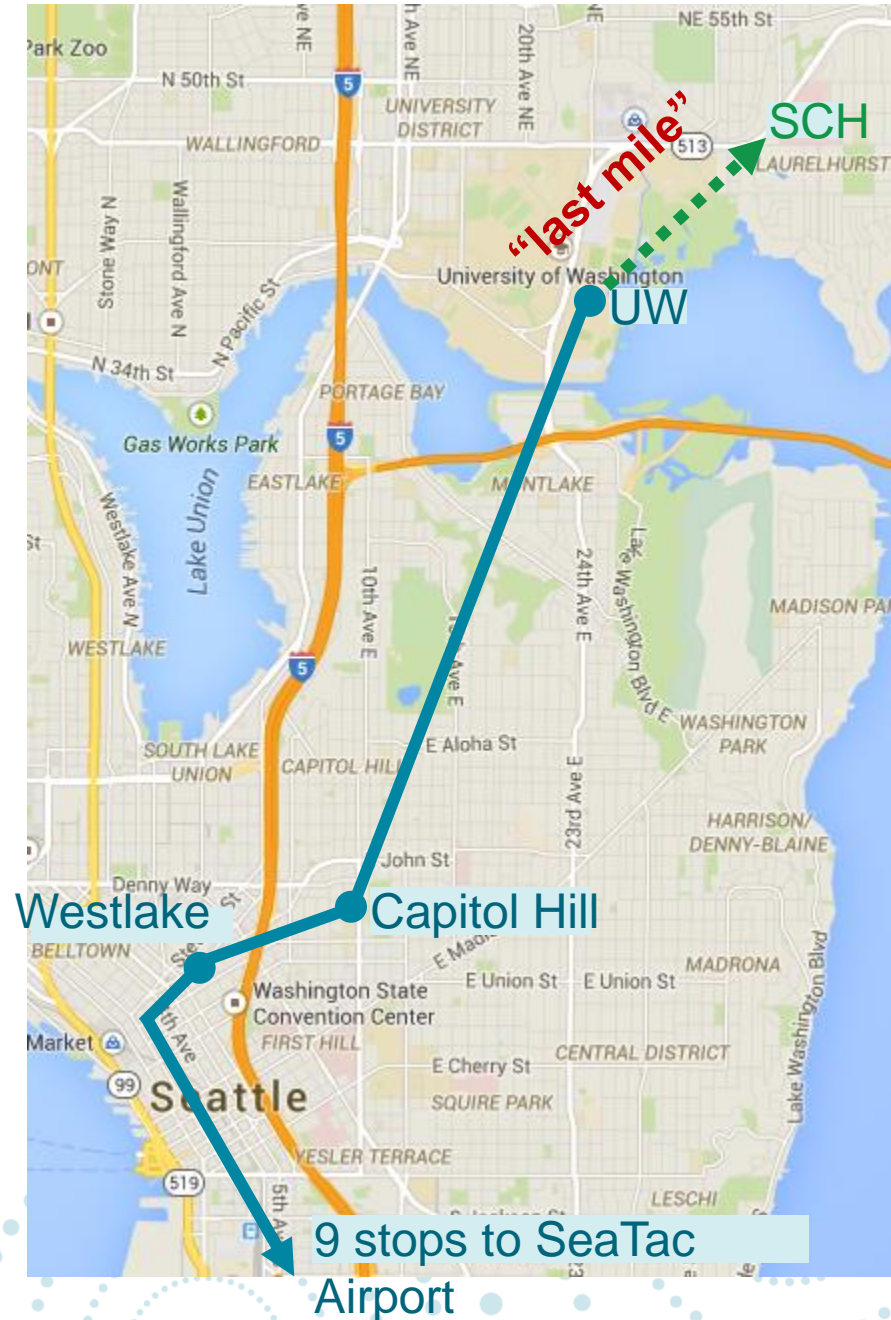


# Link at UW Station



# Link Light Rail to UW

- UW Station opens Q1 2016.
  - 8 minute trip from downtown
  - Trains every 6 min at peak
- Game changer: fast, frequent service for employees who live/work south of ship canal.
- **Strategy:** Leverage Link and Metro to make progress toward strategic goal
- Link is only as promising as the “**last mile**” connection to the hospital is strong.



# Metro Transit Improvements

- All day frequent service to NE Seattle
  - 10-15 minute frequency at peak
  - 15 minute frequency off-peak
- More service on Sand Point Way
  - 65, 75 and 78
- Better, closer bus stops to Link and the Hospital
  - 65 and 78 stop at Link on Montlake
  - 65 on NE 40<sup>th</sup> St at Hospital



# Seattle Children's Shuttle Service Changes

- New shuttle service between Children's and Link at UW station
- Eliminate Children's Downtown shuttle service during AM and PM commute



# Strategic Planning at Children's



# Goals and Objectives: System Wide 2010 - 2015

Provide the  
safest, most  
effective care  
possible

Control and  
reduce the  
cost of  
providing care

Find  
cures and  
educate  
clinicians and  
researchers

Grow  
responsibly and  
provide access  
to every child  
who needs us

# Facilities Objectives: 2010 - 2015

## SAFE & EFFICIENT SPACE

- Consolidate, renovate, and upgrade existing facilities to optimize operational efficiency.
- Replace aging infrastructure that has reached the end of useful life and may pose risks of system failure.

Provide  
the safest,  
most effective  
care possible

## CONTROL & REDUCE SPACE COSTS

- Phase the approach to space consolidation, interior fit-outs, and expansion.
- Identify and select real estate and facilities alternatives to minimize long-term capital costs.
- Invest in infrastructure to reduce long-term operating costs and operate more sustainably.

Control  
and reduce  
the cost of  
providing care

## RESEARCH SPACE

- Expand highly specialized research and lab space that meets growth projections for attracting and retaining leading clinicians, faculty, and researchers.
- Invest in growing clinical trial/immunotherapy manufacturing space (GMP space) to expand programs that lead to cures.

Find cures  
and educate  
clinicians and  
researchers

## RESPONSIBLE SPACE GROWTH

- Expand to support patient growth projections and provide a bed to every child who needs one.
- Establish new regional facilities to improve access.
- Renovate and repurpose sustainably, where possible, to provide backfill space to grow strategic programs.

Grow  
responsibly and  
provide access  
to every child  
who needs us

# Development of a New Strategic Plan

- Underway now – estimated completion May 2016
- Broader perspective – population health, accountable care
- Balance of research and hospital needs
- Some current needs call for space solutions
  - Cancer care
  - Clinical laboratory
  - Operating rooms





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