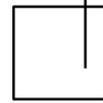




Healthcare Resilience Unveiled:
Insights, Actions, and Planning for Uncertainty





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INTRO

THE HEALTHCARE SECTOR IS FACING SIGNIFICANT CHALLENGES AMID UNPREDICTABLE ECONOMIC CONDITIONS AND THE INTENSIFYING IMPACTS OF CLIMATE CHANGE, COMPOUNDING EXISTING ISSUES, AND INTRODUCING NEW COMPLEXITIES.



In an era marked by shifting paradigms, uncertainties envelop inpatient and outpatient volumes, while escalating labor complexities further complicate the landscape. Simultaneously, the industry grapples with the intricate dynamics of mission-based services amid financial constraints. The strategic imperative of growth and scale emerges as a focal point, as healthcare systems navigate the complex terrain of network optimization and service-line prioritization. Meanwhile, challenges presented by climate change, biodiversity loss, and resource availability add layers of complexity and stress.

To address these interconnected vulnerabilities, collaboration, proactive planning, and strategic investments are imperative to create resilient healthcare environments capable of ensuring the continuity of healthcare services and safeguarding public health and wellness.



ENGAGING EXPERTS

As architects and planners specializing in the planning and design of healthcare environments, we are deeply committed to fostering innovation and resilience within the healthcare sector. With a rich history in crafting healthcare spaces that prioritize patient well-being and efficient functionality, Flad partnered with Sarasota Memorial Hospital-Venice to co-host

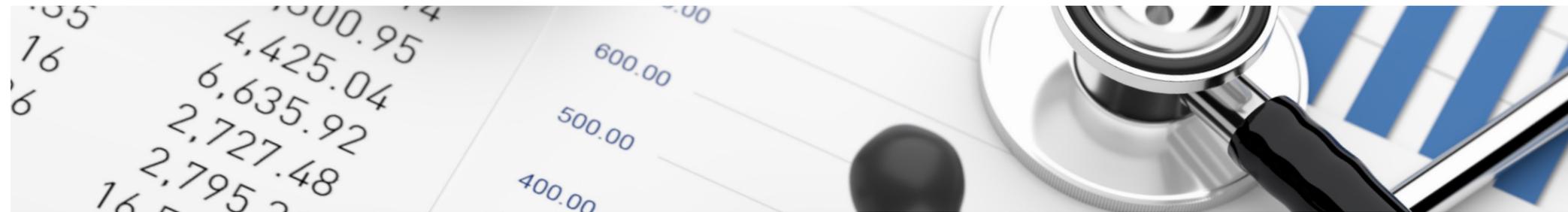
an insightful symposium featuring industry experts, healthcare professionals, and thought leaders to converge and exchange ideas on strategies for economic and climate resilience in healthcare. Here, we share key insights and takeaways from this collaborative exchange, as we collectively work towards shaping the future of healthcare environments.





FINANCIAL RESILIENCE IN HEALTHCARE

- >> ASSESSING THE MACRO LANDSCAPE
- >> NAVIGATING OPPORTUNITIES
- >> FUTURE CAPITAL ASSET / FACILITY EXPANSION



ASSESSING THE MACRO LANDSCAPE

The healthcare sector confronts a dynamic, challenging macro landscape heightened by the ongoing impact of the global pandemic. This confluence of factors has introduced an unparalleled level of uncertainty, with volumes shifting from inpatient to outpatient care, particularly in traditionally profitable services such as orthopedics, heart, and cancer.

SHIFT FROM INPATIENT TO OUTPATIENT CARE

VOLUME CATEGORY	2022 VS. 2021	2022 VS. 2019
Inpatient admissions	↓	↓
Emergency department visits	↑	↓
Inpatient surgeries	↓	↓
Outpatient admissions	↑	↑
Outpatient visits	↑	↔

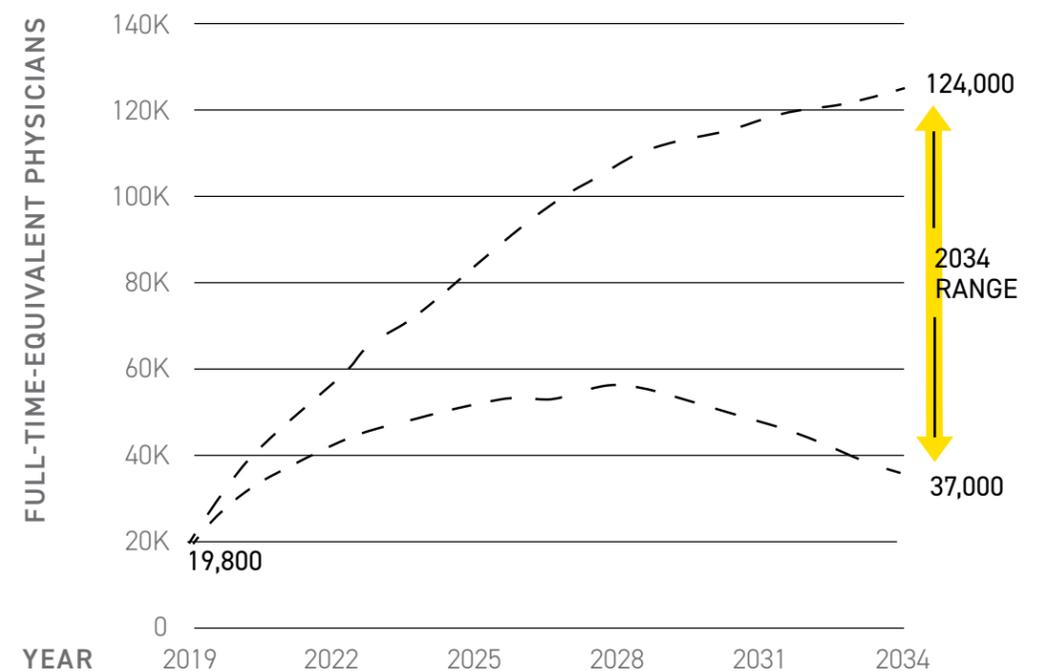
(Advisory Board, 2023)

Concurrently, a steady surge in professional discontent among staff, physicians, and providers since 2019 adds complexity, posing a significant threat to workforce stability.

Rising labor and supply costs compound these challenges, absorbing previous operating margin gains and intensifying price sensitivity among consumers and employers. With inflationary pressures, health systems face the strategic dilemma of judiciously investing in facilities to sustain growth while maintaining financial viability over the next 4-5 years. Meanwhile, the commitment to supporting the community with mission-based services, such as behavioral health, is increasingly challenging amid surging demand and dwindling resources.

Urgency deepens with mental health statistics: nearly 50 million Americans experience mental illness, 24.7% of adults report an unmet need for treatment since 2011, and over 60% of youth with depression lack treatment.

TOTAL PROJECTED PHYSICIAN SHORTAGE RANGE, 2019-2034



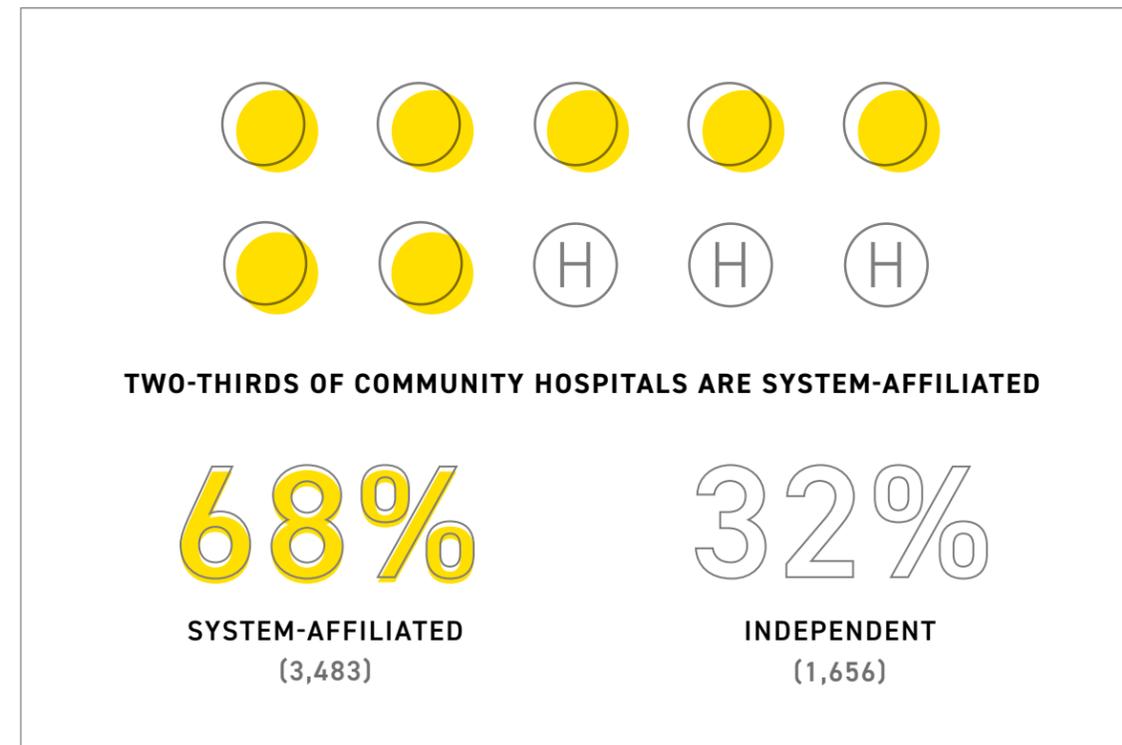
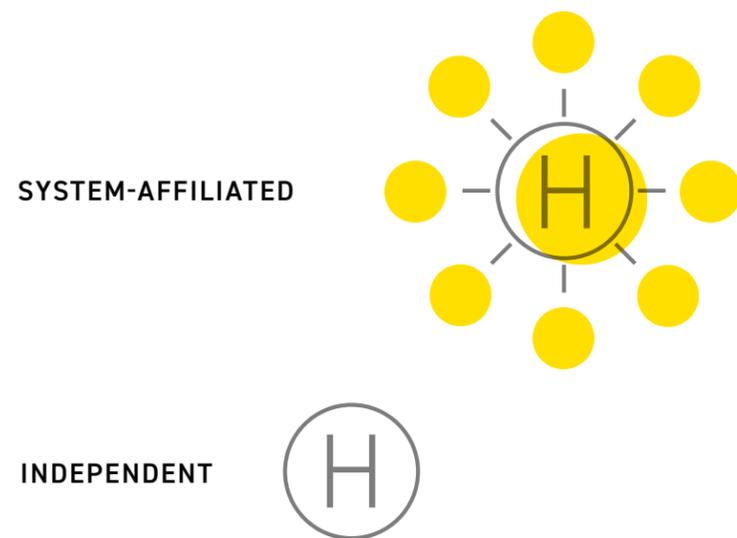
(AAMC, 2021)

Leading projections anticipate that physician demand will continue to outpace supply, leading to a potential total physician shortage of between 37,800 and 124,000 by 2034.

NAVIGATING OPPORTUNITIES

In response to the turbulent macro landscape, healthcare systems need to identify strategic opportunities that can foster growth and scale, making these factors paramount. The average size of acquired facilities is on the rise, reflecting the necessity for health systems to outpace inflation through consolidation. Over half of physician groups now affiliate with larger entities, and independent hospitals are becoming increasingly rare. Investment decisions are now intricately tied to the creation and optimization of networks, with a focus on distributing services across expansive networks to facilitate growth and lower the overall cost of care.

The challenge lies in the delicate balance between consolidating services for efficiency and maintaining a diverse array of offerings to meet community needs, particularly in service lines where the tension between margin and mission is most palpable.



(AHA, 2022)

FUTURE CAPITAL ASSET / FACILITY EXPANSION

The roadmap for future capital asset and facility expansion in the healthcare sector necessitates a nuanced approach. Joint ventures and joint operating networks emerge as predominant pathways, although their success is noticeably market dependent. The Federal Trade Commission plays an increasingly entrenched role in these decisions, underscoring the importance of regulatory considerations. Partnerships must strike a delicate balance, allowing flexibility without committing entirely to joint ventures, a trend notably observed in behavioral health.

Health systems must strategically prioritize investments in high-margin clinical service lines, with oncology, orthopedics, and cardiology services taking center stage to support service lines that may face financial challenges, like behavioral health. The sustainability of the cancer reimbursement market remains a key consideration, particularly in the context of the evolving dynamics in government funding and the uncertain trajectory of the insurance industry.

AMID THESE UNCERTAINTIES, HEALTH SYSTEMS ARE COMPELLED TO FORMULATE AGILE 2-3-YEAR STRATEGIC PLANS, RECOGNIZING THE NEED FOR ADAPTABILITY IN A RAPIDLY EVOLVING LANDSCAPE.



CLIMATE RESILIENCE IN HEALTHCARE

- >> ADAPTATION TO CLIMATE CHALLENGES
- >> ADAPTATION PLANNING
- >> FUNDING FOR CLIMATE RESILIENCE



OUR CURRENT INFRASTRUCTURE WAS BUILT FOR A WORLD THAT NO LONGER EXISTS. WE HAVE TO START THINKING ABOUT THE WORLD WE ARE ACTUALLY LIVING IN, RATHER THAN THE WORLD WE WERE IN.

PATRICK MARCHMAN, KM SUSTAINABILITY



ADAPTATION TO CLIMATE CHALLENGES

Adapting to climate challenges in healthcare requires a comprehensive strategy, given the interlocking crises of climate change, biodiversity loss, and resource availability. The industry faces an increasingly uncertain macro landscape with extreme weather events and climate-related hazards becoming more frequent. The establishment of a 1.5-degree Celsius safe limit is now in jeopardy, with current temperatures already at 1.15 degrees above preindustrial levels. Hospitals and healthcare facilities need to prepare for more random and chaotic events, recognizing the need for resilience in response to unexpected challenges.

The 18 separate weather and climate disasters in the United States in 2022, causing at least \$1 billion in damages each, exemplify the urgency for healthcare systems to navigate this evolving landscape proactively. (NCEI, 2023)

ADAPTATION PLANNING

In addressing the multifaceted challenges climate change poses, healthcare organizations need to engage in comprehensive adaptation planning. This involves a multidisciplinary approach, bringing together engineers, scientists, landscape architects, and other relevant experts to assess risks, determine impacts, and develop actionable plans. Climate adaptation planning, often coupled with climate action, should be integrated into zoning codes and comprehensive planning, accounting for the specific vulnerabilities of communities. An essential tripartite analysis must answer critical questions: *What could go wrong? What will be impacted? What can we do about it?*

This approach ensures a holistic understanding of potential risks, allowing healthcare systems to tailor their resilience efforts to the unique challenges presented by their specific geographic locations and the communities they serve.



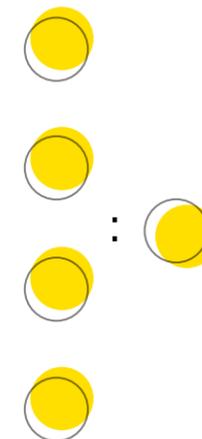
FUNDING FOR CLIMATE RESILIENCE

While recognizing the imperative for climate resilience in healthcare, securing adequate funding remains a challenge. The widening gap in financial resources requires urgent attention, with up to \$14 billion potentially saved for every \$1 billion spent now on adaptation. Despite the increasing acknowledgment of the need for resilience, the majority of funding in the healthcare sector is directed towards mitigation rather than adaptation. The public sector assumes a predominant role in providing adaptation financing, emphasizing the need for collaborative efforts to bridge the funding gap. The return on investment (ROI) for adaptation is widely recognized, with an overall hazard-benefit-cost ratio of 4:1.

Health systems must advocate for increased funding for adaptation initiatives, aligning financial priorities with the critical imperative to build resilience against the escalating impacts of climate change.

THE ROI FOR ADAPTATION IS WIDELY RECOGNIZED, WITH AN OVERALL HAZARD-BENEFIT-COST RATIO OF 4:1.

(FEMA, 2018)





RESILIENCE IN ACTION

- >> INSIGHTS FROM FRONTLINE EXPERIENCE
- >> INFRASTRUCTURE DYNAMICS & BUY-IN
- >> TRANSFORMATIVE APPROACHES TO RESILIENCE





INSIGHTS FROM FRONTLINE EXPERIENCE

Real-world insights shed light on valuable lessons learned from healthcare leaders who have weathered both literal and metaphorical storms. These experiences underscore the importance of early preparations and strategic planning for natural disasters and weather-related events, with events as far back as Hurricane Andrew in 1992 catalyzing substantial changes to building codes in the state of Florida to prioritize resilient infrastructure.

Key takeaways stress collaboration with municipal services, recognizing that challenges like water and sewer systems often fall outside the control of healthcare institutions. Engaging with communities emerges as a central theme, acknowledging the inadequacy of emergency shelters, especially in coastal areas vulnerable to storm surges. The imperative for proactive community engagement, infrastructure development, and the integration of industry-wide lessons learned shapes the roadmap for future resilient developments.

ISLANDS FACE UNIQUE CHALLENGES. SPECIFIC CONSIDERATIONS INCLUDE:



self-sustainability, requiring a minimum of two weeks to a month



shelter in place

water storage & water treatment



microgrid solutions

solar farms

INFRASTRUCTURE DYNAMICS & BUY-IN

Success stories in transformative infrastructure dynamics highlight the crucial role of both large and smaller incremental improvements in enhancing healthcare resilience and driving carbon-footprint-reducing projects forward. The focus shifts towards not only the reduction of the physical footprint but also energy consumption, aligning infrastructure decisions with a broader climate-friendly approach.

Stakeholder engagement proves instrumental for health systems engaging in this paradigm shift toward fostering sustainability and innovation. Overcoming resistance to change, especially from entrenched perspectives, requires strategic communication and a commitment to listening. Some savvy leaders, such as Duke Health, have found success in holding back budget approvals unless/ until funds are allocated for designers to explore energy-saving and innovative climate impact options, highlighting the importance of persistence in driving infrastructure improvements. These success stories underscore that a combination of visionary leadership, community engagement, and ongoing training initiatives paves the way for transformative infrastructure changes.



A success story in incremental change, Flad recommended high-performance window systems and insulation upgrades as part of a hospital floor renovation at Penn State Health Hershey Medical Center.

This resulted in significant energy savings and allowed for the complete elimination of the radiant heating panel system. The upgrade nearly paid for itself immediately and is expected to reduce operating costs by \$5,000 a year, while also improving comfort, sustainability, and resiliency.

[Learn more >](#)

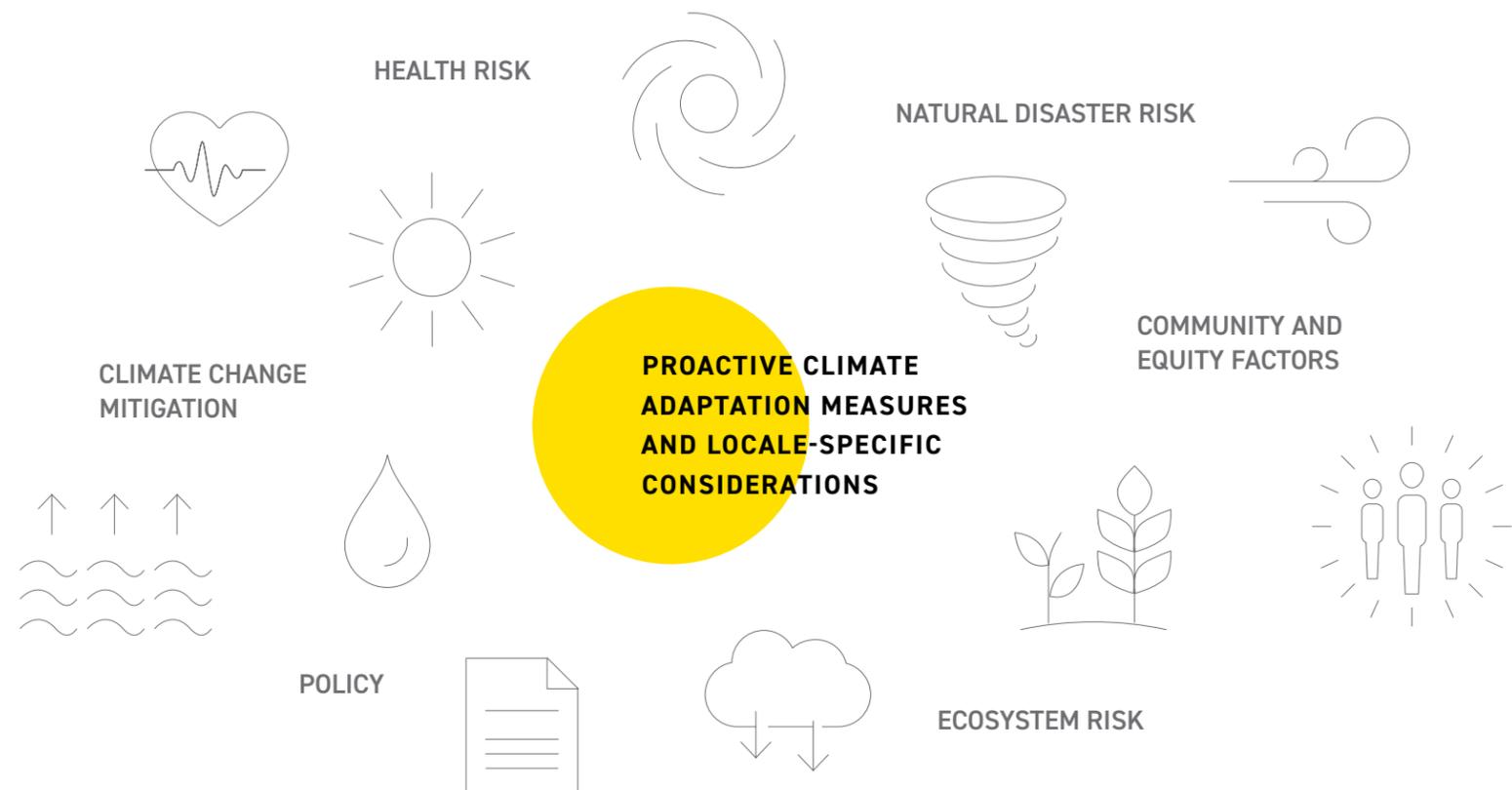
IT TAKES A LOT OF COMMUNICATION TO GAIN TRACTION IN PRIORITIZING SUSTAINABILITY. YOU HAVE TO STEP BACK AND REALLY LISTEN – AT EVERY LEVEL – TO WHAT THE BARRIERS ARE, OR YOUR GOOD PLANNING WILL GET CUT OUT FROM UNDER YOU AT THE IMPLEMENTATION PHASE.

ROBIN THOMAS, DUKE HEALTH

TRANSFORMATIVE APPROACHES TO RESILIENCE

Transformative resilience integrates proactive climate adaptation measures and locale-specific considerations. The integration of renewable energy sources and resilient microgrid solutions provides a road map for achieving long-term sustainability. Balancing political processes and scientific imperatives is a delicate yet crucial consideration, with ongoing goals like reducing the carbon footprint showcasing the tangible benefits of such an approach. Partnership-driven and community-engaged approaches offer a vision for resilient healthcare infrastructure.

UW Health's approach involves annual capital funding for maintenance and special projects, with a focus on increasing Building Automation System (BAS) connectivity. The journey towards AI-driven systems is fueled by strategic partnerships, including collaboration with community-owned utility companies. Continuing goals include reducing the operational carbon, as demonstrated by UW Health's remote work policies, which resulted in a 95 percent satisfaction rate and substantial energy savings.



TO REDUCE OUR FOOTPRINT, WE ASSIGNED MOST OF OUR 2,700+ ADMINISTRATIVE FTES AS FULLY REMOTE. THIS REDUCES OUR ANNUAL OFFICE SPACE COST FROM \$4,870 TO \$892 PER FTE, SAVES EACH EMPLOYEE ~\$3,500 PER YEAR, AND REDUCES OUR CO2 EMISSIONS BY 12,142 METRIC TONS PER YEAR ON ELIMINATED COMMUTES ALONE.

MIKE MCKAY, UW HEALTH



PLANNING FOR TOMORROW

- >> PREDICTIVE AI-DRIVEN SYSTEMS
- >> BUILDING PARTNERSHIPS AND COMMUNITY ENGAGEMENT



PREDICTIVE AI-DRIVEN SYSTEMS

In this rapidly evolving landscape, design technology, particularly artificial intelligence (AI), has emerged as a game-changer in optimizing healthcare facility operations, maximizing provider efficiency, and addressing resiliency concerns. The linchpin of this technological evolution is the integration of digital building twins, dynamic virtual representations of physical structures that simulate and analyze various scenarios, thereby enhancing the efficiency of healthcare facilities.

AI algorithms, powered by vast datasets, can predict patient flow, energy consumption patterns, and operational bottlenecks, aiding in the design of spaces that streamline workflows and minimize resource usage—fortifying healthcare infrastructure against a variety of challenges. Furthermore, AI-driven energy management systems contribute significantly to reducing the operational carbon of healthcare facilities by optimizing lighting, heating, and cooling systems.

The future holds the promise of sustainable and technologically advanced healthcare environments that prioritize patient well-being, efficiency, climate adaptation, and resiliency. The ongoing evolution of design technology is poised to usher in a new era where architecture meets the functional needs of healthcare and aligns with broader ecological imperatives and financial resiliency.



*THE DIGITAL TWIN IS THE
OPUS. INSTEAD OF A HUMAN
WALKING AROUND THE
BUILDING, SPENDING AN
HOUR AND A HALF CHECKING
SOMETHING, THE COMPUTER
CAN HANDLE REAL-TIME
MONITORING AND EVALUATION,
ALLOWING HUMANS TO FOCUS
ON TASKS WHERE THEIR
EXPERTISE IS BEST ALIGNED.*

BRAD POLLITT, MOFFITT CANCER CENTER

THE ONLY WAY THAT HEALTHCARE IS GOING TO GET BETTER IS BY [HEALTHCARE LEADERS] BECOMING PARTNERS – NOT COMPETITORS – TO SOME EXTENT. IF WE'RE GETTING BETTER AT SOMETHING, LET'S SHARE IT, RATHER THAN HOLDING IT BACK FROM OTHERS.

DAVE KISTEL, LEE HEALTH



BUILDING PARTNERSHIPS AND COMMUNITY ENGAGEMENT

A resounding call to action emerges from the wealth of insights on economic and climate resilience—healthcare institutions must integrate locale-specific resilience measures while balancing capital and operational costs. This imperative extends an invitation to a collaborative journey, where leaders guide the course toward a healthcare landscape fortified for current and future challenges. Recognizing the pivotal role of design in this process, Flad unites with health systems to shape a resilient and adaptive future in healthcare facilities. The time for unified action is now.

Success stories emerging from collaborations that transcend organizational boundaries and include partnerships with thought leaders in climate adaptation underscore the importance of community engagement in this process. The careful navigation of vendor challenges and the establishment of alliances with local utility companies provide invaluable lessons. As health systems strive for resilience, the emphasis on strategic planning remains constant, highlighting that transformative change is a collaborative endeavor.



*THE SHARED WISDOM AND
COLLABORATION OF VISIONARY
HEALTHCARE LEADERS LAYS
THE FOUNDATION FOR A FUTURE
LANDSCAPE FORTIFIED AGAINST
UNCERTAINTIES, WHERE
ARCHITECTS PLAY A PIVOTAL
ROLE IN GUIDING INSTITUTIONS
TOWARD RESILIENCE AND
ADAPTIVE FUTURES.*

LAURA STILLMAN, FLAD ARCHITECTS





THE TIME FOR COLLABORATIVE ACTION IS NOW, AND I AM INVIGORATED BY THE PROSPECT OF NAVIGATING THIS TRANSFORMATIVE JOURNEY WITH LEADERS COMMITTED TO SHAPING A HEALTHCARE FUTURE THAT THRIVES IN THE FACE OF CHALLENGES.

STEVE JACKSON, FLAD ARCHITECTS





CONTRIBUTORS

Safeguarding Care



THE IDEAS AND CONTENT IN THIS WHITE PAPER ARE DERIVED FROM THE ROUNDTABLE EVENT “SAFEGUARDING CARE: STRATEGIES FOR ECONOMIC AND CLIMATE RESILIENCE.”

EVENT HOST



SHARON ROUSH MSHA, MBA

President,
Sarasota Memorial Hospital – Venice Campus

Before taking the helm as president of the multi-award-winning Sarasota Memorial Hospital-Venice, Sharon served as CEO of three other Florida hospitals – South Bay Hospital in Sun City, Capital Regional Medical Center in Tallahassee, and Columbia Hospital in West Palm Beach. A seasoned hospital executive, Sharon has successfully led the development and design of a replacement hospital, implemented strategies that resulted in a hospital’s substantial turnaround, and expanded multiple service lines.

SPEAKERS



MATT COX

Partner
Whitecap Health Advisors

A skilled healthcare consultant known for his deep subject matter knowledge in health system strategy, Matt has worked with community, academic, and NCI-designated cancer providers to develop comprehensive strategies and solutions. As Vice President of the Northside Hospital Cancer Institute from 2020 to 2022, he also has experience running one of the largest community cancer networks in the country. His expertise includes service line development and strategic planning, hospital-physician integration, health system network development and facility optimization, and financial due diligence.



JARED AVERBUCH

Partner
Whitecap Health Advisors

A seasoned healthcare advisor with 17 years of experience, Jared began his career at a hospital turnaround firm, assisting hospitals in operational and financial improvement. He then transitioned to consulting healthcare clients in transformational institutional strategy. Specifically, Jared specializes in strategic, organizational, financial, and capital asset planning at academic medical centers and public health and community health systems. As a dynamic leader, Jared brings invaluable insights to the forefront of healthcare transformation, showcasing a remarkable ability to drive positive change.



**PATRICK MARCHMAN,
AICP, SCR**

Principal, KM Sustainability

A trusted, passionate leader, Patrick has 20 years of experience working in the intersection of climate adaptation, resilience, and hazard mitigation planning. After 16 years of public-sector experience working for the U.S. government, including five years with FEMA in hazard mitigation and early climate resilience work, he moved to the private sector. Supporting climate risk assessments, adaptation planning, and renewable energy projects, his range of clients includes hospitals, local governments, airports, and transportation infrastructure. Since 2011, Patrick has been a member of the American Institute of Certified Planners. He has also served as a leader of numerous climate and resilience-focused nonprofit organizations.

PANELISTS

DAVID BARTO | DAVE KISTEL | MIKE MCKAY | BRAD POLLITT | DARRYL SMALLS | ROBIN THOMAS



DAVID BARTO, PE, CHFM

Vice President, Facilities
Penn State Health

David began his career as a consulting engineer designing healthcare facilities. He leveraged those experiences in his role as Director, Planning & Construction at the Penn State Health Milton S. Hershey Medical Center before his current position as Vice President, Facilities at Penn State Health. In this role, David coordinates design and construction, maintenance and operations, and building life safety activities. A licensed professional engineer and Certified Healthcare Facility Manager, he serves as a board member of the local Pennsylvania Society for Health Facility Engineering chapter.



DAVE KISTEL

VP & Chief Facilities Executive
Lee Health

Recognized nationally as an industry leader, Dave has been with Lee Health for over 35 years. In his role as VP & Chief Facilities Executive, he is responsible for integrated facilities and support service operations of Lee Health's multi-hospital system. This includes four acute care hospitals and two specialty hospitals with a total of 1,865 beds and 4.4 million square feet of physical plants. His division oversees facilities management administration, plant operations, facilities planning and design, construction, facilities asset management, strategic capital construction projects, and environmental safety.



**MIKE MCKAY, AIA, ACHE,
EDAC, LEED AP, NCARB**

Director, Planning Design Construction
and Real Estate, UW Health

A registered architect with decades of experience in healthcare, Mike's leadership supports the UW Health system's vision and mission by managing all matters concerning space across their system, which cares for more than 700,000 patients each year at over 140 locations. An evidence-based design accredited professional, he supports the application of research to planning, design, and construction, including sustainable design in the architecture and engineering of the built environment.



BRAD POLLITT, AIA, NCARB

Vice President of Planning,
Design and Construction
Moffitt Cancer Center

Before his current role overseeing the planning, design, and construction efforts for all of Moffitt’s campuses and facilities, Brad served as Vice President, Facilities at UF Health. During his tenure there, he oversaw the development of over \$1.5 billion of construction, renovation, and capital improvement and managed more than 6 million square feet of facilities. A licensed architect and frequent lecturer on facility management topics, he is a trusted healthcare facilities leader with over 35 years of experience.



DARRYL SMALLS, PE

Executive Director, Territorial Hospital
Redevelopment Team, Government Hospitals
and Health Facilities Corporation

An accomplished engineering executive, Darryl serves as the Executive Director of the Territorial Hospital Redevelopment Team, a newly formed entity in the U.S. Virgin Islands under the Government Hospitals and Health Facilities Corporation. In this role, he is responsible for the management and oversight of the redevelopment and reconstruction of the Territorial Health Facilities that were severely damaged during Hurricanes Irma and Maria. These facilities include the Gov. Juan F. Luis Hospital on St. Croix, the Roy Lester Schneider Hospital and Charlotte Kimelman Cancer Institute on St. Thomas, and the Myrah Keating Smith Community Health Center on St. John.



ROBIN THOMAS, LEED AP BD+C

Executive Director of Engineering & Operations
Duke Health

With 25 years of experience as a healthcare executive, Robin has extensive expertise in healthcare planning, design, construction, clinical operations, infrastructure master planning, and regulatory compliance. In her role at Duke Health, she leads a team of over 300 skilled tradespeople, project managers, and engineers, overseeing facility services and renovations across seven million square feet of healthcare space. Before joining Duke Health, she gained invaluable healthcare construction insights during her tenure at Skanska, where she served as a construction manager in Tampa, Florida; Stockholm, Sweden; and Raleigh, North Carolina.

FLAD ARCHITECTS MODERATORS & AUTHORS



STEVE JACKSON
LEED AP BD+C

Principal
Flad Architects

A principal and designer focusing on client management, Steve helps clients execute their vision through the language of architecture. Primarily focused on healthcare, he helps guide hospital administrators and clinical and operational staff through the translation of operational efficiencies, functionality, and design aesthetics. As a healthcare leader at Flad, he strives to create a platform for the design and client teams to form a partnership of trust, so that strategic processes and innovations can be developed, leading to an ultimate design that fully meets the client's needs.



LAURA STILLMAN MPH

Flad Architects

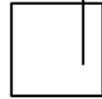
A 30-year veteran healthcare partner, Laura understands that the industry is facing a complex set of variables. Demographic demands are shifting. Technology is changing. Many hospital buildings are outdated and obsolete. As Flad's healthcare practice leader, she understands these challenges and leads clients through the process of finding solutions and planning proactively for resilient futures. Clients across the country and abroad rely on her as a knowledgeable strategic partner as well as an exceptional design partner.



**JODIE THILL ASID,
WRID, LEED AP ID+C**

Sustainable Design Specialist
Flad Architects

With over 20 years of design experience, Jodie specializes in sustainable design. She is a valuable resource for green building concepts and the LEED rating system, with a focus on designing for a circular economy. Her interior design background enhances her ability to create spaces that align with clients' visions, emphasizing team connectivity, flexibility in work styles, and well-lit, healthy environments. Jodie is passionate about improving lives through sustainable design, educating stakeholders on its benefits, and optimizing occupant well-being.



ABOUT THE HOST SITE



Sarasota Memorial Hospital-Venice is a cornerstone of Sarasota Memorial Health Care System's dedication to providing healthcare services that excel in caring, quality, and innovation. It stands as the system's most substantial expansion in almost a century, addressing the growing population's emergency and medical needs with distinction.



The gracious and inviting five-story hospital includes 110 private patient rooms, encompassing medical/surgical care, an intensive care unit, and women's health services with LDRP suites. In addition, it features eight leading-edge operating rooms, two C-section rooms, and two cardiac catheterization labs. A connected, state-of-the-art medical office building facilitates seamless access to outpatient services, prioritizing patient care and physician accessibility in a one-visit care setting.

Strategically, the hospital aims to be a welcoming destination known for delivering superior care. The Flad team meticulously considered the entire patient and visitor journey, focusing on clear campus wayfinding and visible entry points. Internally, the design prioritizes intuitive wayfinding and consistent, direct access to daylight throughout the facility to provide a calming, low-stress environment for all ages.

Planned Expansion

Flad planned and designed the campus, site, and building to accommodate another 500,000 square feet of future growth. The expansion includes three patient towers on the backside of the hospital, protecting the front door and patient experience from any future disruption. The first such expansion, also designed by Flad, is in construction and is anticipated to open in the fall of 2024. It will accommodate an additional 102 acute care inpatient rooms, a floor of associated support space, and one floor dedicated to MEP infrastructure.





BIBLIOGRAPHY & REFERENCES

“2023 Health System Sector Industry Trends” – Advisory Board, 2023

<https://www.advisory.com/content/dam/advisory/en/public/success-pages/providers/2023-health-system-industry-trends-preview.pptx.coredownload.pptx>

“Fast Facts on U.S. Hospitals, 2022” – American Hospital Association (AHA), 2022

<https://www.aha.org/system/files/media/file/2022/02/Fast-Facts-2022-Infographics.pdf>

“The Complexities of Physician Supply and Demand: Projections from 2019 to 2034” – Association of American Medical Colleges (AAMC), June 2021

<https://www.aamc.org/media/54681/download>

“Natural Hazard Mitigation Saves Interim Report Fact Sheet” – Federal Emergency Management Agency (FEMA), June 2018

https://www.fema.gov/sites/default/files/2020-07/fema_mitsaves-factsheet_2018.pdf

“Safeguarding Care: Strategies for Economic and Climate Resilience” – Flad Architects, December 2023

<https://www.flad.com/content/epubs/Safeguarding-Care-Roundtable.pdf>

“U.S. Billion-Dollar Weather and Climate Disasters” – NOAA National Centers for Environmental Information (NCEI), 2023

<https://www.ncei.noaa.gov/access/billions/>

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