

## CASE STUDY: NORTHWEST COMMUNITY HOSPITAL

*Project completed in 2013*



Our client, a Pacific Northwest community hospital with approximately 250 licensed beds, recently completed a new building that included an emergency department for 54,000 annual visits, 90 private medical/surgical inpatient beds, 300-car underground parking garage, and 190,000 square feet of shell space. Stroudwater's Strategic Master Facility Planning team, led by John Downes, Janet Porter, and Marc Voyvodich, was hired to explore how best to utilize the shell space within an overall site development strategy.

Whereby the newest building was a positive step towards eventual on-site hospital redevelopment, significant facility issues remained. The historic expansion of the campus had been horizontal from east to west, resulting in two major site and building entry points, wayfinding challenges, and decentralized surgery, imaging, and inpatient beds. The original core buildings have infrastructure issues and have outlived their useful life to house patient care services, most notably the Intensive Care Unit.

Stroudwater's planning team explored three development options that fit out the new building's shell space: (A) added a new west expansion on levels P1, 1, and 2 and utilizing the P1 parking level for clinical support functions: CSS, lab, and pharmacy, (B) essentially option A without the new west expansion, and (C) does not use the P1 parking for support. Option B was selected as a flexible compromise (for it did not preclude a west expansion at a future date) and provided a flexible framework to begin the phased redevelopment of the campus and the rebuilding of the inpatient services in an efficient way within the new building.