

New Hospital Addition Emphasizes The Human Touch

Welcome to the first edition of *New Building Update*, a publication dedicated to informing employees, physicians, and the community about Tampa General Hospital's exciting new expansion project.

Now in its earliest stages, the project is expected to be completed in the spring of 2006. As it moves forward, *New Building Update* will continue to keep you posted on its progress.

The Tampa Bay area is rapidly growing, and with it comes an escalating demand for healthcare services. That increased demand, as well as the continuing evolution of medical knowledge and technology, has made it very clear that this hospital, too, must grow.

This new project is being designed to not only provide the extra space needed to expand our services, but also to offer an attractive, efficient environment for patients, their families, physicians, and our staff.

The plans are to construct a five-story building on the northwest side of the hospital adjacent to the Cafeteria/Food Court and loading dock. The building will add approximately 250,000 square feet to the existing 1.3 million-square-foot campus.

This will allow us to more than double the size of our emergency and trauma center, expand our vascular services, provide larger, more comforting facilities for mothers in labor and women undergoing gynecological surgery, and expand our intensive care services.

Major Influences

In all construction projects, a building's design is influenced by budgetary considerations. With this project, we have additional factors to consider, namely the size

and shape of the area available for construction as well as regulatory codes.

The site – selected because it is the largest available area on the hospital's campus – is bounded by the West Pavilion on one side and Garrison Channel on the other. Thus the project has taken on an unusual half-moon shape to cover as much territory as possible.

In addition, regulatory codes mandate that occupied areas in Tampa must be at least 18 feet

above the mean high water line to protect from storm surges. So the patient care areas actually begin on the second floor. The first floor will contain an enclosed lobby with elevators and parking areas.

Another major consideration is our goal of providing a healing environment for everyone coming through our doors. For that reason, this new building will emphasize soft colors and natural lighting with lots of

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The Timeline

TGH's new expansion project is still very much in the beginning stages. Here are the various phases the project is to undergo over the next 2 1/2 years:

Program Development

NOW COMPLETED.

MDSTs develop general concepts for their areas.

Schematic Design

NOW THROUGH WINTER 2004

MDSTs and architects develop floor plans specifically identifying the size and location of rooms, equipment areas, and program areas.

Design Development,

WINTER-SUMMER 2004

The building's infrastructure, including such items as air handlers, plumbing, and electricity, are designed.

Construction Documents

SPRING-FALL 2004

The appropriate architectural, construction, and financial documents and permits are attended to.

Groundbreaking, Summer 2004

Construction completed and ready for occupancy, Spring 2006

Take A Tour

We invite you to take this tour with us through the new building as envisioned so far:

First Floor: Lobby

To meet regulatory codes, hospital services actually begin on the second floor. The building's ground floor will contain a lobby and parking areas.

Second Floor: Emergency & Trauma Center

The second floor will be dedicated to the Emergency and Trauma Center, which will be accessible to traffic by a ramp.

The new center will more than double the size of our emergency department – from its current 25,000 square feet to more than 52,000 square feet, allowing the department to vastly expand its capacity.

The center will include separate areas for pediatric emergency, medical code and trauma resuscitation, behavioral health, and minor emergency care.

While providing great benefits, the sheer size of the unit – almost two football fields long – does present some logistical challenges, according to Amy Paratore, director of emergency and trauma services and chairperson of the emergency planning team.

“There will be challenges with the large amount of space we'll have,” Amy says. “So as we design the floor, we'll need to provide equipment and supplies in close proximity to where staff is working and to ensure that staff and patients don't have to travel too far.”

Third Floor: Vascular Center

The third floor will be TGH's new Vascular Center. The new center will offer two big advantages over the current facilities: registration of vascular patients right on the unit and location of the various interventional procedures – including interventional radiology, interventional neuro-radiology, vascular procedures, and cardiology – in one location. This will allow vascular patients to receive all care in one location.

Currently, patients undergoing these procedures start on 4H but then may go to either the third or fifth floors for treatment. What's more, their families could be in waiting rooms on either the third, fourth, or fifth floors.

That will change when the new unit opens, explains Radiology Services Director Kathy Shackowsky, who co-chairs the vascular area planning team with Maureen Ogden, director of cardiac and transplant services.

“Patients will arrive on the unit, get registered, and be escorted to their rooms. They'll have the procedure, then go back to their rooms, and then home – all in the same location. This will be an enormous patient satisfier. Meanwhile, their families will have a dedicated waiting room on that unit,” Kathy says.

Patient beds will be adjacent to new cardiac catheterization labs and interventional radiology labs. These new labs will be substantially larger than the current cath and interventional radiology labs.

Fourth Floor: Women's Center

On the fourth floor, the Women's Center will be dedicated to women who are delivering babies or who come for gynecological surgery.

Record numbers of babies have been delivered at Tampa General in recent years; last fiscal year, more than 4,000 infants were born in this hospital, creating a huge demand for Labor/Delivery/Recovery rooms. So when the new unit opens, the number of LDR rooms is slated to nearly double.

The LDRs will also be more spacious than those now being used in the West Pavilion, and they'll be more attractive and comfortable for patients and their families.

For example, each room will have a seating area for family members and a private bathroom with a shower. Large windows will provide natural light,

and much of the equipment will be hidden behind cupboards, creating a more homelike atmosphere.

“We want to focus on families,” says Claudia Mahoney, director of women's and children's services and chairperson of the team planning the Women's Center. “In addition to sofas in the LDRs, we plan on having comfortable family waiting rooms and consultation rooms where physicians can talk to families in private.”

Post-partum will remain on 4A, where mothers and their infants will go after delivery. That area may eventually expand to accommodate more patients.

Fifth Floor: Critical Care

The new fifth floor area will enable Tampa General to also expand the number of intensive care beds.

Initially, one new critical care unit will be built in this new area, and over time, two more critical care units can be added as needed.

Like the other areas, the rooms are being designed to accommodate patients' family members. Each patient room will have a place for families to sit, and the unit itself will have family-focused areas,

including comfortable waiting rooms, kitchenettes and, possibly, lockers.

The idea behind these amenities is to bring the human element to critical care, says Janet Davis, vice president of acute care services and chair of the critical care planning team.

“We wanted to create an atmosphere that was both high touch and high tech and also to take care of the family so that we create a healing environment for both patients and their families,” Janet says.

A Careful Process Involving Numerous People

Hundreds of people will have provided input by the time Tampa General Hospital's new five-story addition is completed in 2006.

Employees, physicians, and community residents all are involved in the planning of this project, as the process proceeds in a series of phases aimed at making sure that everyone's needs are met while staying within the \$110 million budget.

Guiding this process is a 16-member steering committee of hospital managers, directors, and vice presidents along with staff from Gresham, Smith and Partners, a nationally renowned architectural and engineering firm.

In addition, teams of employees and physicians have been organized around services to be included in the new expansion. The teams – known as multi-disciplinary study teams, or MDSTs – are researching and discussing issues specific to their areas, including emergency, surgery, vascular, obstetrics, intensive care, and non-clinical spaces.

Over 100 employees and more than 60 physicians have participated in MDST meetings so far. To help in the process, many of them also conducted site visits to other hospitals last summer to gather ideas to incorporate in their areas.

The planning process involves a continuous series of negotiations and compromises. As each team determines what it wants for its area, it then has to consider how to configure these ideas into a framework fashioned by space, budget, and the needs of other MDSTs.

In November, the MDSTs came up with general proposals for their areas, including the types of services and equipment, the number and sizes of rooms, and general concepts of where things should go and how they should look in the various areas.

Then, in several internal and external focus groups, the teams asked employees and the public what they thought about the proposals. Many of the ideas coming out of these sessions will further influence the finished product.

The MDST proposals came at the end of the project's first phase: Program Development. But the project still has more phases to go through, and further refinements are likely to occur.



TGH Assistant Administrator David Robbins (left) and Dr. David Orban review preliminary plans for the hospital expansion project during a recent internal focus group session. Looking on is Amy Paratore, director of emergency and trauma services.

By the process's end, Tampa General will have a building that's not only beautiful and efficient, but one that reflects Tampa General's culture of excellence and compassion, says David Dement, TGH's project director for the hospital expansion.

“Every organization has its own culture and works in its own way. This building needs to reflect that,” he says. “By everybody having input, the building can address their needs and become a unique building reflecting the culture of Tampa General Hospital.”



The blue area shows where Tampa General's five-story addition will be built on the northwest side of the hospital, adding approximately 250,000 square feet to the existing 1.3 million-square foot campus.

The Construction Team

Introducing Tampa General's project director and the firms that are shaping our new expansion project:

David Dement, TGH Expansion Project Director

David Dement is responsible for the day-to-day proceedings of the expansion project. His role is to make sure everyone involved stays on schedule, keeps within the budget, makes appropriate decisions, and abides by their contracts.

It's no small job, but David has decades of construction experience to back him up. An architect for 18 years, he has designed projects such as Lincoln Plaza in downtown Orlando and the World Expo Center in Osceola County. In addition, he was the architect and project manager for the recently completed, \$130 million expansion of Moffitt Cancer Center.

But his experience in construction began even before he earned his master's degree in architecture from the University of Florida. Between college graduation and graduate school, David learned about the building trade from the bottom up, starting as a laborer, then advancing to the position of superintendent. Eventually, he became a contractor and practiced that trade for seven years.

His overriding role on this project, he says, is to ensure that the process runs as smoothly as possible.

"The idea is to take prudent steps all along the way," David says. "We want to make sure the project is done on time, that decisions are made

in a timely manner, and that they're the right decisions. That way, we can avoid the pitfalls that can make a project fail."

Gresham, Smith and Partners, Architects and Planners

Gresham, Smith and Partners is responsible for designing the new building and its infrastructure.

As part of that process, architects from Gresham, Smith have been actively involved members of the hospital's multi-disciplinary study teams and of the steering committee to develop the best possible facility for Tampa General.

Gresham, Smith and Partners was founded in 1967 in Nashville, TN. Since then, the firm has opened numerous offices around the country, including a Tampa office in 1997.

Among its many distinguished healthcare projects, the firm built Osceola Regional Medical Center, in Kissimmee, a new hospital and medical office building for Miramar Hospital in Broward County, and a new replacement hospital, ambulatory center, and medical office building for Florida Hospital in Flagler County.

Skanska USA Building Inc.

If you've ever shopped at International Plaza, enjoyed the vista from the 42-story AmSouth Building in downtown Tampa, or

waited for an airplane at Tampa International Airport's Airside E terminal, you've experienced the work of Skanska USA.

Skanska USA is the expansion project's contractor, responsible for working with subcontractors and making sure the project meets the architect's specifications.

The company is also providing important pre-construction services: with each planning phase, Skanska will present cost estimates on proposals to that point, which will markedly enhance our ability to stay within budget.

Based in Parsippany, NJ, Skanska USA is one of the largest contractors in the nation and is part of Sweden-based Skanska, AB, one of the world's largest construction companies. In Florida, the firm has offices in Tampa, Orlando and Jacksonville.

Among its numerous healthcare projects, Skanska has built St. Anthony's Carillon Outpatient Center, in St. Petersburg, a 69,000-square-foot expansion to Bon Secours St. Joseph Hospital, in Port Charlotte, and a five-story medical office building with clinic and an 800-car garage, the two linked by a stylized atrium, for Bayfront Medical Center, in St. Petersburg.

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windows. There also will be accommodations made for patients' families, efficient layout to benefit patients, staff and physicians, and the ability to "flex" rooms and public spaces if needed.

Looking to the future, we also wanted to have the capability for expansion if needed. Toward that end, we've included undeveloped "shell" space that can be built out at a later time in every new unit except the emergency floor, which will be completely developed.

In addition, the building itself will be constructed for expansion – up to four extra stories can be added, if needed, in the future.

Overall, it will be a building that will be an important landmark for the Tampa Bay community, says Maureen Ogden, director of cardiac and transplant services.

"Our goal is to integrate services and to provide patient- and family-focused care in as pleasing an environment as possible," Maureen says. "We think that with this new building, we're going to meet that goal."



Front row, from left: Gresham, Smith Project Manager Alan Prestigiacomo, Skanska Project Director Rip Graham, TGH Administrative Intern Angelique Tsau, and Gresham, Smith Designer Tamara Rice. Back row: Skanska VP Business Development Fred Hames, TGH Hospital Expansion Director David Dement, TGH Assistant Administrator David Robbins, and Gresham, Smith Healthcare Design Principal Jim Kolb.