

Our Approach to the Programming Process:

Balancing Vision and Expectations with the Reality of Healthcare Construction Costs

Programming and implementing a major building project in a large city is always a complicated process. When the project is a hospital, the intricacy is amplified by the innate complexity of the building type and by the important role these institutions play in the community.

We believe that the strategies we would employ during the programming phase would help facilitate the process, especially in managing expectations of the faculty, staff, and the community at large, are critical to achieving the best outcome for the hospital.

I. The Visioning Process

- Involve many constituents in the planning process to build support - the Client, PM and Industry Professionals.
- Engage the community in an open partnership to help plan the project
- Set high standards for the project to achieve
- Immediately share the concern that there is a major disconnect with program and budget
- Provide accessible information on the internet for all to follow
- Provide "benchmarks" with other comparable institutions

Start the process with a realistic understanding of the potential project costs and resources and, while not minimizing vision or creativity, contain it within reasonable limits.

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II. Project Programming

The programming process for the project will be both fascinating and very engaging.

We will develop a detailed project program that would include:

- Functional and Operational Narratives
- Space Program
- Room Template

A. Team Organization

Most institution's clinical care follows the service line model supported by a traditional hospital department organization.

We will structure our programming teams to reflect the matrix organization for both Hospital, Ambulatory Care and Research, Education and Amenities.

This matrix organization would:

- Allow for sharing of information across service lines and departments
- Support interaction between each modality as needed
- Respect and celebrate service line identity

Our process would be iterative with multiple rounds of user meetings concentrated into short time frame and conclude with an Executive Team Meeting to review issues and provide direction.

B. Working Assumptions

We will develop a running list of "working assumptions" to keep the process moving forward.

- The programming process would be intense and to avoid delays caused by incomplete information we would formulate the idea of the "working assumption".
- This would be a tabulation of assumptions, by service line or department that the users with programmers could use to keep their individual processes moving forward.
- These assumptions would be continuously updated as better information became available and regularly reviewed by the Management Team. 2



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C. Data Based Methodology

We will Develop Excel Data Based methodology of space programming with room ID codes link to template diagrams and room data sheets.

This tool will provide:

- Consistency of space definitions and unit areas
- Consistency of program content across all teams
- Comprehensive control of editing across all programming teams
 - Provide efficient methodology to update program revisions
 - Facilitate the program scope reduction process
- Room template diagramming as a tool to test the appropriateness of net room area.

D. Benchmarking

Benchmarking is tool we use to compare the proposed program to other major medical centers.

This will be done at three levels of comparison:

- Gross unit area per bed
- Department gross area per driver
- Room net area





E. Program Results

Medical Center will be asked to provide updated workload projections that reflected the strategic vision of each of the service lines that aligned with the individual service line vision and goals.

Two programs will be developed:

- The first program would represent a no holds barred, the out-of-the-box vision. It would identify best ideas of all staff to re-engineer themselves to support the project goals.
- The second program would rationalize scope of the project but hold to the original goals and vision.

We will be able to make considerable space savings by restructuring department organization, by off-loading selected support department services, and by reassessing the net areas of every space.

(This is where both the data base and the template process would prove to be a valuable tool.)

- F. The Programming Process
- Involve many in the process with clearly defined leadership of each group
- Host an expectation kick off session for each major group of Users to define expectations & process
- Follow each session with an immediate end of week "wrap up" with the project leadership to identify issues and reach consensus
- Provide ongoing feedback on costs and benchmarks
- Provide written, timely summaries of each meeting
- Utilize best practice examples throughout the process



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- Concentrate the User Groups in a short week session with number of weeks in between, to process and summarize the data
- Create responsibility on the senior leadership to address the Disconnect between program and budget at every step of the process.
- Obtain leadership approval of workload projections prior to user group involvement.
- G. Strategies to Respond to the Disconnect Between Program, Expectations and Budget Reality
- Educate and engage the project leadership in developing creative solutions for a tighter program
 - Create Flexible assignment
 - Short stay Touchdown and Hotelling space vs. Offices occupied only hours per day
 - Incorporate "Integrated Care Model" and "Interdisciplinary Care Model"
 - Incorporate LEAN Strategies
 - Incorporate Modular Programming
- Strive to achieve a sq. ft. / bed ratio with established benchmarks that have been proven models of success
- Eliminate major components vs. squeezing all spaces that may result in efficiencies for the future
- Maintain the ability to provide fast turn around when reviewing program reductions or options
- Plan a project that can grow as additional funds become available
 - Shell space
 - Add alternates
 - Flex sideways



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