TOP 8 WAYS
OUR NEW MENTAL HEALTH BUILDING WILL BE BETTER FOR PATIENTS

There’s a lot for patients and their families to like about our future Mental Health and Substance Use Wellness Centre.

1. **150% MORE BEDS**
   - With 4½ more beds for a total of 75, and with 4½ times more space, we’ll be able to treat 100 more inpatients each year.

2. **PATIENT-CENTRED DESIGN**
   - Our new Wellness Centre will be designed specifically for mental health and be a welcoming, beautiful space to help patients feel better, faster, and for longer.

3. **SPECIAL UNIT FOR OLDER ADULTS**
   - One entire floor will house Fraser Health’s first Older Adult Psychiatric Unit with 20 beds to care for seniors dealing with acute depression, anxiety or psychosis.

4. **PRIVATE PATIENT ROOMS**
   - For improved privacy each patient will have their own room and ensuite bathroom with some of the comforts of home in a personal retreat.

5. **OUTDOOR PATIOS**
   - If people want to enjoy the morning sun there will be an outdoor patio on every inpatient floor, that’s safe and secure, to allow them to connect with nature.

6. **SPACE TO BE SOCIAL OR ALONE**
   - Every inpatient unit will have a lounge to visit with family, friends, and other patients, plus a comfort room for solitude or quiet time.

7. **LOTS OF NATURAL LIGHTING**
   - Windows, natural lighting, and art will all help to create a mood of sanctuary, well-being, and positivity to help patients know they’re valued and respected.

8. **A PLACE TO EXERCISE**
   - Patients will be able to use an exercise room and life skills assessment room on each floor to help them get into shape for life, work, and the road to recovery.

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Patient-centred design is an overarching principle that guides the decisions we make for our new facilities, says Mark Welch, the Project Planning Leader of Clinical Programs for the Royal Columbian Hospital Redevelopment. In our Summer Project Update Mark shared how patient-centred design is influencing the requirements for our new Mental Health and Substance Use Wellness Centre (see the infographic on page 4).

“Staff-centred design is also important,” adds Mark. “When a workspace makes it easy for doctors, nurses and employees to provide a high level of care, staff are happier and more engaged, there’s less job turnover, and the ultimate result is good patient care.”

“One big change will be our new Wellness Centre will have appropriate space for delivering patient care,” emphasizes Mark. “We’ll have four and a half times more space than in our current Sherbrooke Centre. Today staff work rooms are the size of an average dining room. We manage to crowd in a dozen people, plus desks and chairs, but when eight conversations, three phone calls, and patient drop-ins happen all at once, it’s hard to have a private discussion about patient care. The new building will be roomy enough to have large multi-disciplinary care team bases, consult rooms, therapy rooms, and staff lounges on every floor, plus bigger patient rooms.”

The layout will be designed to help people be safe and feel safe. Having better sight lines from the care team base to the public and patient areas, corridors without blind spots, and video monitoring will help staff, patients, and visitors feel both physically and psychologically safe in the space. “When everyone feels safe, they can focus on recovery,” notes Mark.

A building that has WiFi will allow us to introduce advanced medical and safety devices. “Sherbrooke Centre has no wireless system,” says Mark. “But in our new Wellness Centre staff will wear devices that send coworkers and Security a location-based distress call if they need assistance. And devices in patient rooms will allow people to signal for help, even from the bathroom floor if they’ve had a fall.”

Live video capabilities will help transform patient care. A psychiatrist will be able to video consult with a patient staying at a community site, or a community site’s care team will be able to interact with their patient staying at our hospital. Also, our team of nurses, psychiatrists, psychologists, social workers, and therapists will be able to consult remotely with care partners at a patient’s discharge plan and on-going care. “We think this will bring more specialized services to our communities and make our patients’ transitions into community care more seamless, so fewer people fall through the cracks,” says Mark.

These kind of staff-centred design criteria will influence the construction partner we choose. Over the summer Bird Construction, EllisDon, and PCL Constructors, who are competing to build Phase One of our Redevelopment, have used these and other criteria to craft their design proposals which they’ll share with us this October. We’ll announce our successful candidate in early 2017 and begin construction next Spring.
In early 2017 we have to close a 300 stall surface parking lot located on hospital grounds between Keary and Allen Streets. This is where we'll build our new Mental Health and Substance Use Wellness Centre, Energy Centre, and underground parkade all expected to finish by early 2020. The parking lot is used mostly by hospital staff and some SkyTrain park and riders; visitors and patients tend to park near our Main Entrance.

Before then, in late 2016, we’re planning to start work on a new parking lot for employees who’ll need replacement parking once the Keary/Allen Street lot closes. This parking lot will be temporary and also used by construction crews building Phase One.

The new parking lot is planned for 97 Braid Street, next to the Braid SkyTrain Station and a few blocks from the hospital. It’s a vacant grassy lot now, but once the City of New Westminster approves our Temporary Use Permit, we’ll begin transforming the site by adding 450-500 parking stalls, a lighted bus shelter, pay stations, panic stations, patrols, and landscaping. When the new Braid lot opens, we’ll close the Keary/Allen Street parking lot.

The Braid lot would be provided to staff as a better alternative to parking in the neighbourhood. It’s for use while Phase One is under construction, during which time the City of New Westminster will provide regular parking enforcement in the neighbourhood. Other local parking options were investigated for distance, access, security and cost. Keeping employee parking rates the same was especially important and since fees at some of the closer parkades are up to three times what employees pay now, the Braid lot was our best option.

A free shuttle would drive staff and construction workers between the Braid lot and the hospital during peak day shift hours, Monday to Friday. Even though the ride is a short 3 to 5 minutes to the hospital depending on traffic, the shuttle’s schedule, frequency, and route could be adjusted to optimize people getting to work.

For the fitness-minded, it would be a nice 10 minute walk through a safe, quiet neighbourhood from Braid to the hospital. Fader Street even provides direct access to the hospital’s entrance and is on the City’s Crosstown Greenway.

The new Braid employee lot is a better option than parking in the neighbourhood. The Braid lot is intended for day shift hospital and construction staff. Employees with parking passes for the Keary/Allen Street lot who work an evening, night, weekend, or extended shift would be allowed to park on hospital grounds since the demand for visitor and patient parking is lower after-hours.

We expect when the Braid lot first opens there would be plenty of empty stalls. Those stalls would gradually fill up once construction crews are hired to build our new Mental Health and Substance Use Wellness Centre, Energy Centre, and underground parkade. Our construction partner would be mandated to use the Braid Street lot to deter their crews from parking in the neighbourhood.

Although there may be empty stalls, the Braid lot would NOT BE A PUBLIC PARKING LOT. Anyone parking there without a valid parking hanger would be towed and/or ticketed. Transit park and riders will have to find somewhere else to park once the Allen/Keary Street lot closes.

The Braid lot would be used by Royal Columbian for approximately three years, until the hospital’s new underground parkade opens on hospital grounds. Bentall Kennedy, the property owner, eventually plans to use the land for its Sapperton Green development. But for now, the corner of Braid and Brunette is temporarily slated to become a hospital employee parking lot.

New parking stalls were added at the hospital’s Main Entrance.

Our Main Entrance parking lot expansion is now complete. Thank you to everyone for your patience during our four stage expansion that started in May and finished September 1st. The result is about 100 new parking stalls for patients and visitors, added temporarily, near the hospital’s front doors.

Our goal is to maintain our parking supply while our hospital is being redeveloped so staff, visitors, and patients aren’t tempted to park in the neighbourhood. This required adding more visitor parking on hospital grounds before we close the Keary/Allen Street parking lot in early 2017.

A new multi-level underground parkade is coming in Phase One below the new Mental Health and Substance Use Wellness Centre. When it opens, and if Phase Two and Three are approved by government, the parking stalls we added temporarily near the Main Entrance will likely be replaced with construction trailers and equipment needed to build Phase Two’s new acute care tower.

The acute care tower proposed for Phase Two also includes a second new underground parkade. By the end of our Redevelopment we expect to have added approximately 50% more parking on hospital grounds.
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Fall 2016 Project Update Vol 4

Royal Columbian Hospital Redevelopment

MAKEING WORKSPACES BETTER
in our new Mental Health and Substance Use Wellness Centre

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