

January 28, 2014

Hon. Meenakshi Srinivasan  
Chair  
New York City Board of Standards and Appeals  
250 Broadway, 29th Floor  
New York, NY 10007

Re: New York Methodist Hospital  
Center for Community Health  
505-525 6th Street (Block 1084, Lots 25, 26, 28,  
39-44, 46, 48, 50-59, 164, 1001, and 1002)  
Brooklyn, New York 11215

Dear Chair Srinivasan and Commissioners:

We are writing this letter in connection with the proposed development of a new ambulatory care facility (the "Center for Community Health" or the "Center") on the campus of New York Methodist Hospital ("NYM" or the "Hospital"). The Center for Community Health would address the Hospital's need for adequate and appropriate space for ambulatory care facilities. It would also facilitate the expansion and repositioning of inpatient facilities in the Hospital's existing buildings.

## **I. New York Methodist Hospital**

NYM is a voluntary, acute-care teaching hospital, founded in 1881 in Park Slope, Brooklyn. It is affiliated with Weill Cornell Medical College, one of the nation's leading medical schools, and is a member of the NewYork-Presbyterian Healthcare System. Since the Hospital's founding, its mission has remained the same: to provide excellent healthcare services in a compassionate and humane manner to the people who live and work in Brooklyn and its surrounding areas.

NYM's affiliation with Weill Cornell Medical College supports the Hospital's function as a major teaching hospital. NYM has ten graduate medical education programs and five schools that provide training in allied health professions. Medical students, residents, and fellows across many specialties—including primary care, surgery, pediatrics, obstetrics and gynecology, anesthesiology, and emergency medicine—receive focused training that teaches these new clinicians to feel comfortable practicing medicine in any setting. The Hospital's experienced faculty not only supervise and educate these young doctors at the patient bedside,

but they also promote learning through weekly conferences and rounds, including professional rounds, morbidity and mortality conferences, journal club, quality improvement seminars, subspecialty seminars, book reviews, and service rounds.

The Hospital's main campus is located on two adjacent blocks bounded by 7<sup>th</sup> Avenue, 5<sup>th</sup> Street, 8<sup>th</sup> Avenue, and 7<sup>th</sup> Street in Brooklyn. The campus contains 651 beds and admits over 40,000 inpatients each year, and the Hospital logs an additional 350,000 outpatient visits annually. During the past 20 years, NYM has enjoyed growth in all services and has more than doubled its inpatient volume. Today it is one of the City's most successful hospitals, with the highest market share of private insured patients in Brooklyn.

NYM's success is due in large part to its highly qualified staff of medical professionals, as well as to its commitment to investing in modern facilities with up-to-date clinical technology. Programs and services that the Hospital has recently introduced include a new state-of-the-art birthing center; an advanced interventional pulmonology program; a sleep disorder center; an extensive robotic surgery service; a broad neuroscience program, with centers for the treatment of Parkinson's disease, epilepsy, neuropathy, and strokes; and the New York Methodist-Cornell Heart Center, which contains the most modern cardiac surgery and interventional cardiology facilities in Brooklyn and is one of only three such services in the Borough.

Despite a challenging healthcare climate that has negatively affected hospitals elsewhere in New York City and throughout the State, NYM has remained a stable and successful institution. NYM has been acknowledged by both the State Department of Health and independent financial rating agencies as a well-managed, well-financed hospital. This commitment to responsible management, coupled with the Hospital's continued focus on modernizing its facilities, has translated into high-quality medical care for the Hospital's patients. NYM has received numerous accolades for its healthcare services, including recognition by the National Research Corporation as "Consumer Choice #1" in Brooklyn for seven consecutive years.

## **II. The Hospital's Programmatic Needs**

Notwithstanding NYM's role as a leading healthcare service provider in Brooklyn, the Hospital has a programmatic need for adequate and appropriate space for ambulatory care facilities, located on its main campus. As the nation's healthcare system has evolved over the past two decades—with advances in technology, an aging population, and shifting economic forces—medical treatment has transitioned increasingly from inpatient to outpatient care. Currently, NYM lacks the amount and type of space it needs to provide ambulatory care to its growing patient population.

The shift toward outpatient care is being experienced throughout the healthcare industry. Medical and surgical innovations, combined with the increasing expenses involved in a

hospital stay, make it essential that hospitals provide inpatient care only when that care cannot be rendered in any other setting. More and more medical conditions are being effectively treated without an overnight hospital stay or with a hospital stay that is significantly shorter than would have been required just a few years ago. A number of hospitals in New York City have recently expanded their facilities to accommodate a dedicated outpatient center, including Lenox Hill Hospital, Montefiore Medical Center, Memorial Sloan-Kettering Cancer Center, NYU Langone Medical Center, Mt. Sinai Medical Center, the Hospital for Special Surgery, and NewYork-Presbyterian Hospital, Weill Cornell Medical Center.

This transition is related to other trends. Major surgical procedures that require days or weeks of inpatient hospital follow-up care are increasingly being replaced by minimally invasive procedures, which can often be performed on an outpatient basis. Such procedures, although representing state-of-the-art medical care, require space that exceeds the size of current operating rooms because of the need for specialized equipment. Imaging devices and robotic systems, for example, are often large and may require additional personnel to operate them. The Hospital's existing facilities are incapable of meeting this need, and current operations are constrained as a result.

The Hospital has a particular need for appropriate, modern space for its radiation oncology center. The radiation oncology center has long been recognized for its excellence, in large part because of the Hospital's continuing investment in its treatment facilities. NYM was a pioneer in the use of stereotactic radiotherapy and has acquired state-of-the-art technologies for intensity modulated radiation therapy, brachytherapy, and three-dimensional conformal radiotherapy. These modern technologies, however, are currently housed in the basement of a 1950s-era campus building that cannot accommodate the types of amenities that are appropriate for cancer patients—many of whom visit the Hospital on a daily basis over a period of several weeks. The Center for Community Health would allow the Hospital to provide its patients with levels of comfort and convenience that are standard in the medical industry today and to expand services to include additional advanced technologies, such as respiratory gated 4-dimensional stereotactic radiotherapy for lung and liver cancers and intraoperative brachytherapy for breast cancer.

The medical industry's emerging focus on prevention, healing, and chronic care, efficiently delivered in an ambulatory care setting, has required a greater integration of primary and specialty care. This model, along with changes in insurance reimbursement systems, has led an increasing number of physicians to switch from private practice to institution-partnered practices. In part because of its affiliation with the NewYork-Presbyterian Healthcare System and its ability to offer clinical faculty positions at the Weill Cornell Medical College, NYM has been able to attract highly qualified faculty physicians with training and expertise in numerous specialties. Today, the Hospital is affiliated with more than 1,400 doctors and allied health professionals, including well over 200 faculty physicians. As the Hospital continues to integrate and build patient-centered primary care, keeping care accessible to and convenient for patients in local communities, there is increasing demand for more advanced specialty care and for

additional state-of-the-art space for physician offices, examination rooms, and treatment/procedure rooms. These specialty facilities must be consolidated in a location that is proximate to the Hospital's other medical care facilities so that faculty physicians have efficient access to needed equipment and enhanced opportunities for collaboration.

NYM has created a number of institutes, such as the Institute for Neurosciences, the Institute for Orthopedic Medicine and Surgery, and the Institute for Cancer Care. These Institutes will function most effectively when the Hospital is able to locate all of the facilities needed to care for the patient in one area. Each institute requires exam rooms, diagnostic facilities and procedure rooms, along with physician and staff offices, reception areas and waiting rooms. Assembling all of the necessary services and care providers in a single location will allow the entire episode of care—from diagnosis to treatment—to be centered around the patient and will provide the highest level of service.

NYM also has a need for modern inpatient facilities. The consolidation of outpatient facilities and faculty physician practices in the Center, relocated from other parts of the NYM campus, would allow for the expansion and repositioning of inpatient facilities in the Hospital's existing buildings. Specifically, shared patient rooms could be replaced with private rooms, which are now the standard of care for inpatients. Inpatient rooms on campus may also be enlarged to remain up-to-date with applicable standards and to provide more light and air to patients. Support spaces, including dedicated patient and service elevators and storage and maintenance space, would be expanded as well. Generally, with the outpatients no longer sharing inpatient testing and treatment areas, there would be increased efficiency in inpatient care, with inpatient tests and treatments being completed in a more timely manner. These needed updates cannot occur without the construction of the Center.

NYM has a need for space in the new building to accommodate approximately 118,200 net square feet of clinical programs. The building as described in our letter dated December 20, 2013, contained an additional 34,141 net square feet of supportive programs, for a total of 152,361 net square feet, which required a building of approximately 365,667 gross square feet exclusive of space associated with parking. See attached Space Planning and Allocation Summary – Original, dated as of December 20, 2013.<sup>1</sup> The building envelope has since been modified in response to conditions set forth in Community Board 6's positive recommendation of the application, resulting in a reduction of the building's non-clinical support programs. As indicated in the attached Space Planning and Allocation Summary – Revised, dated January 28, 2014, the proposed Center would still contain 118,200 net square feet of clinical programs but would now contain 32,190 net square feet of supportive programs, which equates to 358,500 gross square feet exclusive of space associated with parking.

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<sup>1</sup> The Space Planning and Allocation Summary attached to the prior version of this letter, dated December 20, 2013, was a preliminary draft of the document and was submitted to the Board in error. The Space Planning and Allocation Summary – Original, attached hereto, dated as of December 20, 2013, is the Summary that the Hospital intended to submit and accurately reflects the proposed building program as of that date.

The specific programs that are to be included in the new building, identified by current location (if relevant) and amount of net square footage, are described in the attached Relocated and New Program Space table. The table also describes the Hospital's plans for use of any existing space to be vacated. Approximately 30% of the building area in the new building will be for new programs or the expansion of existing programs. The balance of the space is for programs that are currently located on the Hospital's main campus or in leased space in the neighborhood.<sup>2</sup>

### **III. The Center for Community Health**

The Center for Community Health would be developed on the eastern portion of the block bounded by 7<sup>th</sup> Avenue, 5<sup>th</sup> Street, 8<sup>th</sup> Avenue, and 6<sup>th</sup> Street, adjacent to two existing Hospital buildings to the west: the Medical Pavilion, a five-story building fronting on 7<sup>th</sup> Avenue, containing hospital-related facilities, ground-floor retail space, and a below-grade accessory parking garage with surface parking; and the Wesley House, a 12-story building containing hospital-related facilities and staff dwellings. The Center would be configured in a U-shape around a number of contiguous out-parcels on 5<sup>th</sup> Street that are not owned by NYM. The Center's primary presence, and entrance, would be on 6<sup>th</sup> Street, across from the existing Hospital facilities to the immediate south.

The Center would satisfy the Hospital's needs by providing an ambulatory surgery center with 12 operating rooms; a new endoscopy suite with six special procedure rooms; a cancer center with both radiation oncology and chemotherapy facilities; diagnostic radiology services; institutes providing comprehensive patient care; an urgent care center; and conference rooms. These facilities would be located on large floor plates that allow for adjacencies, thereby promoting comprehensive, coordinated caregiving and the efficient provision of services. The Center would also contain a below-grade parking garage with direct connections to the Hospital's existing parking garage to the west.

In addition to providing the community with an appropriate and enhanced 21st-century medical facility, the Center for Community Health will offer an opportunity to improve the physical relationship of the Hospital campus with its surrounding neighborhood. NYM has hired Perkins Eastman, a leading architecture firm with experience in the design of modern, contextually-sensitive ambulatory care centers in New York City, including the Mount Sinai Center for Advanced Medicine (an adaptive reuse project), the NYU Langone Medical Center Clinical Cancer Center, the Evelyn H. Lauder Breast Center at Memorial Sloan-Kettering, and the Josie Robertson Ambulatory Surgery Center at Memorial Sloan-Kettering. A letter from

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<sup>2</sup> The transportation analyses in the EAS were completed using projections from NYM of the incremental number of patients, visitors and staff associated with the new building and were not based on square footage of new or expanded programs.

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Perkins Eastman, describing its approach to designing the Center and the manner in which the building satisfies the Hospital's needs, is included with the application.

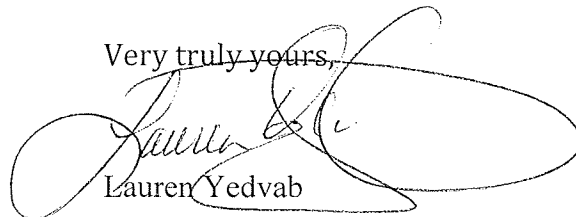
The design of the Center for Community Health incorporates input from members of the surrounding community. NYM presented preliminary plans for the Center to community leaders, to groups of neighborhood residents, and at a public meeting hosted by the Park Slope Civic Council and Community Board 6 in June and July of 2013. At those meetings, NYM solicited comments, and NYM also invited e-mail comments from community members. The proposed plans were modified in response to comments that were provided in these forums, and they were again presented to the community at two public meetings in September 2013. The revised plans differ from the original plans in a number of respects. Among other modifications, the Center's vehicular pick-up and drop-off area has been reconfigured to minimize traffic on 5<sup>th</sup> Street; the building massing has been reconfigured to reduce the height and volume of the building on the eastern end of the block, adjacent to 8<sup>th</sup> Avenue and 5<sup>th</sup> Street; and the building's green spaces have been enhanced. These design modifications are described in greater detail in the Perkins Eastman letter.

#### **IV. Conclusion**

The development of the Center for Community Health would satisfy NYM's need for adequate and appropriate space for ambulatory care facilities and faculty physician practices, and would allow for the expansion and repositioning of inpatient facilities in the Hospital's existing buildings. The location of the Center on the NYM campus would allow for the efficient integration of its ambulatory care facilities and faculty physician practices with the Hospital's existing campus facilities. NYM is confident that the design of the Center accomplishes these goals while remaining sensitive to the architectural character of the surrounding area and minimizing the impact of the building on the surrounding community.

We would be pleased to provide the Board with any additional information needed to process the application for the requested variances. Thank you for your consideration.

Very truly yours,



Lauren Yedwab

## Center for Community Health: Space Planning and Allocation - Original

Clinical Programs (Sq Ft)	118,220
Lobby	4,060
Security	300
Grab and Go Amenity	600
Staff Dining	2,000
Staff Lockers	1,500
Lactation Room	121
Bicycle Storage	360
Materials Management	3,100
BioMedical Services	1,000
Plant Operations	170
Loading Dock	2,770
IT Training Room	350
IT Telecom	1,330
Electrical Closets	2,600
Shared Floor Support (Janitor, Environmental, Trash Chutes)	4,140
797 USP Pharmacy	1,300
Rapid Response Lab	400
Frozen Section / Surgical Pathology	440
Central Sterile Supply	3,550
Conference Center	1,950
Environmental / Maintenance	2,100
SUM of Used Square Footage	152,361
Gross Factor of 2.4*	x 2.4
Subtotal	365,667
Drive Through / Drop Off	18,167
Parking	114,666
TOTAL	498,500

*\*Gross Factor includes mechanical, electric, plumbing, corridors, waiting spaces, elevators, staircases, etc*

## Center for Community Health: Space Planning and Allocation - Revised

Clinical Programs (Sq Ft)	118,220
Lobby	4,060
Security	300
Grab and Go Amenity	600
Staff Dining	2,000
Staff Lockers	1,500
Lactation Room	120
Bicycle Storage	360
Materials Management	3,100
BioMedical Services	1,000
Plant Operations	170
Loading Dock	2,770
IT Training Room	350
IT Telecom	1,330
Electrical Closets	2,600
Shared Floor Support	
<i>(Janitor, Environmental, Trash Chutes)</i>	4,140
797 USP Pharmacy	1,300
Rapid Response Lab	400
Frozen Section / Surgical Pathology	440
Central Sterile Supply	3,550
Conference Center	0
Environmental / Maintenance	2,100
SUM of Used Square Footage	150,410
Gross Factor of 2.4*	x 2.4
Subtotal	358,500
Drive Through / Drop Off	18,160
Parking	114,660
TOTAL	491,320

*\*Gross Factor includes mechanical, electric, plumbing, corridors, waiting spaces, elevators, staircases, etc*



# Relocated and New Program Space for the Center for Community Health

December 20, 2013

Program	Program Type <sup>1</sup>	Current Location	Current Space	Proposed Space in New Bldg (net)	Need for Space allocation	Plans for Existing Space (if relocated)
Pre-Admission Testing	Fully Relocated	Hospital - Kirkwood 1	1,714 sf	First Floor - 1,513 sf	Slightly smaller than existing space, despite anticipated growth in volume. This is primarily due to a shared general waiting area. The exam room sizes will be 121 sf each to provide a better patient experience, accommodate family members, and enable physicians and nurse practitioners to comfortably examine and consult with patient in the same room.	Accommodate overflow and improve patient experience for the adjacent emergency department
Ambulatory Radiology / Imaging	Relocate Outpatient Services	Hospital - Kirkwood 1	6,639 sf	First Floor 6,041 sf	Ambulatory radiology services are needed in the new building to support pre-admission testing, urgent care, and other practices in the building. It will also serve as a patient-centered radiology practice for patients who require more advanced radiology tests such as CT or MRI scans. Radiology in the new building is beneficial because ambulatory patients are not co-mingled with inpatients - it's a better experience and more efficient for both inpatients and outpatients.	The existing radiology space will be used to support both inpatient radiology as well as the emergency department. This will improve wait times for tests, decrease length of stay in the hospital and ED, improve patient experience, and decrease costs.
The Institute for Cancer Care - Radiation Oncology	Relocate Outpatient Services	Hospital - Miner Basement	11,338 sf	Basement 13,779 sf	Radiation oncology is a key component of building a comprehensive cancer center of excellence. The square footage has been assigned to accommodate a CT scan, two linear accelerators, and room to add a third linear accelerator as demand increases or technology evolves. It will also have space for patients to consult with their doctors, as well as space for family members that often accompany a loved one.	The existing radiation oncology space will remain for inpatient care. Separating inpatients and outpatients is more efficient and provides a better patient experience for all involved. It also improves length of stay and decreases costs.

1 - "Fully Relocated" : entire service will move to new building

"Relocate Outpatient Services": service will be separated into discrete inpatient and outpatient locations

"New": service does not exist

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Hyperbaric and Wound Care	Fully Relocated	1 Prospect Park West	1,500 sf	2nd Floor 2,610 sf	The space assigned to hyperbaric care in the new building will support four oxygen chambers - the existing space at Prospect Park West only has three oxygen chambers. The additional oxygen chamber is being added to accommodate the increased volume as this service is being more routinely used to treat a variety of wounds, particularly foot wounds in the diabetic population, urology patients, and cancer care. The existing space does not allow for adequate oxygen storage and requires daily deliveries, which are very costly and not always available.	There are other practices in the existing space (including podiatry, and pediatrics) that are expected to utilize the existing space to improve the patient experiences.
The Institute for Cardiology and Cardiac Surgery	Relocate Outpatient Services	Hospital - Kirkwood 2	14,979 sf	2nd Floor 6,925 sf	The cardiology space in the new building will be for office-based cardiology care, including non invasive, comprehensive diagnostic workups. The more complex cardiology tests and procedures will still occur in the existing space. The space in the new building will be more patient-friendly, with rooms large enough to accommodate a patient and a supportive companion. Cardiology is a growing service line and trends show that the demand will continue to increase. Over the past several years the Hospital has attracted high quality cardiologists to meet this growing demand, however, there is not enough space to accommodate the physicians, which can lead to long wait times to get appointments.	The existing cardiology space will enable the Hospital to build much needed procedures rooms for electrophysiology and cardiac catheterizations. Additionally, there are new life saving technologies emerging that can improve quality of life that will be done in similar procedure rooms. The Hospital has begun performing these cutting edge procedures, including Trans-Aortic Valve Replacements, or TAVR.

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The Institute for Orthopedic Medicine and Surgery	Fully Relocated	Medical Arts Building, 2	4,950 sf	5th Floor 9,575 sf	The growth in square footage for orthopedics reflects the volume increases for this department. As a result of the increased demand for orthopedic services, as well as strong clinical leadership, the Hospital has developed a world class orthopedics program which has attracted many new orthopedists who need space to see patients. These high quality physicians specialize in joint replacement, sports medicine, spine and arthritis, upper extremity, and scoliosis. Due to a very busy OR schedules, proximity to the Hospital is absolutely necessary.	The existing orthopedics space in the Medical Arts Building will be used to enlarge the existing physical therapy area, creating a more patient friendly department that can also support both cardiac rehabilitation and pulmonary rehabilitation. This space may also be utilized to create an employee health and wellness center that will encourage and support the Hospital's initiatives to create a healthier workforce.
The Institute for Neurosciences	Fully Relocated	Medical Arts Building, 4	6,174 sf	5th Floor 7,715 sf	The increase in space reflects the initiative to establish a patient centered medical home for neurologic health. This includes larger patient rooms, as well as the addition of a neurosurgery practice. The space will be split into patient-centered, functional pods that focus on stroke care, pain management, Parkinson's disease, epilepsy, electromyography/neuropathy, and multiple sclerosis.	The existing neurosciences space in the Medical Arts Building will be used by existing internal medicine / primary care practices in the building. The demand for these services has grown with the implementation of the Affordable Care Act, as well as other anticipated changes to the reimbursement system that will promote primary and preventive care.

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Men's Health Center (Includes Urology Faculty Practice)	Fully Relocated	1 Prospect Park West	1,300 sf	3rd Floor 2,935 sf	The increase in space reflects the development of a men's health center. The existing urology space at 1 PPW can not accommodate all urologists on staff, leading to long wait times for appointments and decreased access to care. The new space will be focused on urology, but will also serve as a way to reach out to male patients and promote general health and well-being and education.	There are other practices in the existing space (including podiatry, and pediatrics) that are expected to absorb the vacated space.
The Institute for Women's Health	Fully Relocated	Medical Arts Building, 5	6,174 sf	7th Floor 6,290 sf	The women's health center in the new building will include mammography, ultrasound, and bone density. There will also be a dedicated space for urogynecologic exams and procedures. The existing space layout only allows 2 physicians to see patients simultaneously, the new space will allow for 8 physicians to see patients at any given time.	The existing space will be used to accommodate existing visits from medical clinic patients, who are currently seen on the 6th floor of the Hospital. The new space may also be used to build private and semi-private inpatient rooms, and enable the hospital to eliminate 4-bedded inpatient rooms.

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Ambulatory Surgery	Relocate Outpatient Services	Hospital - Kirkwood 3	8,670 sf	3rd Floor 21,055 sf	There are currently 7 ambulatory operating rooms that average 380 sf each. This will increase to 12 operating rooms in the new building, each 550 sf. The increase in ORs is to accommodate growth in ambulatory surgery procedures. The growth is driven by current trends of shifting from inpatient to outpatient surgeries, as well as growth in specialties that have a lot of same day surgery procedures, including orthopedics, general surgery, head and neck, ENT, and urology. New technology and techniques are also driving the shift from inpatient to ambulatory as well as the need for larger ORs. Ultimately, this is better for the patient. Using current utilization and projected growth rates, NYM anticipates that 10 ORs will be operating when the building opens, with the additional 2 available for future demand.	The existing space will be used for surgical procedures, particularly pediatric surgeries which will not be done in the new building. The existing ORs are adjacent to the Pediatric Intensive Care Unit and other inpatient pediatric services. The Hospital can renovate the space to create a pediatric center of excellence, providing better patient-centered care geared to children and their families. The Hospital will also explore reconfiguring these operating rooms to build inpatient ORs of the future, including a hybrid OR that can support cardiovascular and cardiac surgical procedures using emerging, life saving technologies.

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Ambulatory Post Anesthesia Care Unit (PACU)	Relocate Outpatient Services	Hospital - Kirkwood 3	1,928 sf	4th Floor Included in Ambulatory Surgery	By code, the building must have 3 recovery spaces for every 1 operating room, for a total of 36 recovery rooms (FGI Guidelines for Design and Construction of Healthcare Facilities: 3.7-3.4.2.2) Post-anesthesia recovery positions. The plan includes private recovery areas for patients, with enough space for family members to sit with recovering patients. The PACU in the new building will also have space for anesthesiologists and surgeons to remain on site and be available to their patients.	The existing Ambulatory PACU space will be used to support the surgeries that will still be done in the Hospital.

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The Institute for Cancer Care - Infusion Center and Hematology / Oncology	Fully Relocated	4th Avenue Wesley 1	11,200 sf	6th Floor 15,005 sf	<p>The majority of the space for the cancer center will be dedicated to chemotherapy and infusions. The current space has 30 infusion bays, and this will be expanded to 60 private chemotherapy/infusion rooms for patients. The increase in size and infusion chairs is to accommodate growing demand. The new space will also encompass a compounding pharmacy that will mix the complex drug formulas for this compromised patient population. The new space will be patient-centered, allowing patients to have friends and family with them during these extended treatments. There will also be exam and consult rooms so that patients can meet with their physicians, allowing patients to save time and have improved experiences.</p>	The current infusion center is one mile away from the Hospital and the proposed building. The Hospital has not decided whether to renew its lease for this location.

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Phlebotomy / Outpatient lab services	Patient Support Service	Medical Arts Building, 1	128 sf	Ground Floor 1,765 sf	The growth in square footage for phlebotomy reflects a more efficient patient flow and centralized approach to blood drawing for the new building. Patients who require blood tests as part of their appointments can have their blood drawn at a centralized location before moving on to their physician appointments. As a result, many blood test results will be available when the patient meets with his/her physician. It also includes a patient-centered waiting space that does not currently exist.	The existing phlebotomy space in the medical arts building will remain to support clinical services in the building.

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Special Procedures Suite (Includes Endoscopy, Bronchoscopy, Pain Management)	Relocate Outpatient Services	Hospital - Carrington 3	4,936 sf	4th Floor 10,012 sf	There are currently 4 endoscopy rooms in the Hospital that serve both inpatient and outpatient populations. Comingling these two patient populations causes inefficiencies and creates a suboptimal patient experience for both groups. There is a great demand for these services which leads to longer lengths of stay for inpatients, and limited access/longer scheduling wait times for outpatients. The new building will have a special procedures suite with 6 rooms that will accommodate endoscopies and any other special procedures such as pain management. In addition, the special procedures suite will have 18 recovery rooms that are required by code, as well as 10 preparation rooms. (FGI Guidelines for Design and Construction of Healthcare Facilities: 3.7-3.4.1. Preoperative Patient Holding Area; 3.7-3.4.2.2 Post-anesthesia recovery positions)	The existing endoscopy space in the Hospital will be used for inpatients only, decreasing length of stay, and decreasing costs. Separating inpatient and outpatient populations will greatly improve the patient experience for both groups.
Urgent Care	New	Not Applicable	Not applicable	1st Floor 5,700 sf	The urgent care center will share space with pre-admission testing. There are growing trends to providing urgent care/walk in as an alternative to more costly emergency department visits. Urgent care will be open outside of regular faculty practice hours which increases access to care. Additionally, with the resources in the new building, such as radiology, pharmacy, and a rapid response lab, patients will still have a patient centered, convenient, "one stop shop" experience to ensure all of their medical needs are quickly and efficiently met.	Not applicable

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December 20, 2013

Program	Program Type <sup>1</sup>	Current Location	Current Space	Proposed Space in New Bldg (net)	Need for Space allocation	Plans for Existing Space (if relocated)
Pharmacy	Patient Support Service	Hospital - Carrington 1	400 sf	Ground Floor 2,000 sf	<p>The pharmacy will support all medication needs for patients in the building. Although it's primarily a convenience for patients being cared for in the new building, it also improves quality of care by ensuring that patients comply with their medication orders. Additionally, there is a patient safety factor as all prescriptions will be sent electronically from patient care areas to the pharmacy through the single electronic medical record that will connect the whole building.</p>	The existing pharmacy in the Hospital will remain to support inpatients, primarily providing them with their discharge medications. This improves patient compliance with discharge instructions, which improves patient outcomes and patient satisfaction, while decreasing admissions that can occur from non compliance with medication orders.
ENT / Head and Neck Institute	New	Not Applicable	Not applicable	3rd Floor 5,300sf	<p>The Hospital has just recruited a busy, high quality head and neck practice. This group brings a higher level of service that can care for more complex and specialized head and neck problems. Previously, patients who obtained the care at NYM had to go elsewhere if they had complex ENT or head and neck issues. With this added service there will be continuity of care for patients. Services include head and neck cancers, pediatric ENT issues, laryngology clinics (for voice and breathing issues), rhinology, allergy treatments, and reconstructive plastics (eg. cleft palate treatment)</p>	Not applicable
<b>TOTAL</b>			<b>82,030 net sf</b>	<b>118,220 net sf</b>		

1 - "Fully Relocated" : entire service will move to new building

"Relocate Outpatient Services": service will be separated into discrete inpatient and outpatient locations

"New": service does not exist