



CAPITAL IMPROVEMENT DEVELOPMENT PROCESS AT HOSPITALS

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DISCUSSION

- Brief Introduction
- Key Decision Making Around Benchmarking and Quality Indicators
- Capital Process and Implementation
- Owner's Expectation of Environment of Care Oversight

INTRODUCTION



- **Hospital of the University of Pennsylvania (HUP)**



- **Pennsylvania Hospital (PAH)**



- **Penn Presbyterian Medical Center (PPMC)**



- **The Chester County Hospital (TCCH)**



- **Lancaster General Hospital (LGH)**



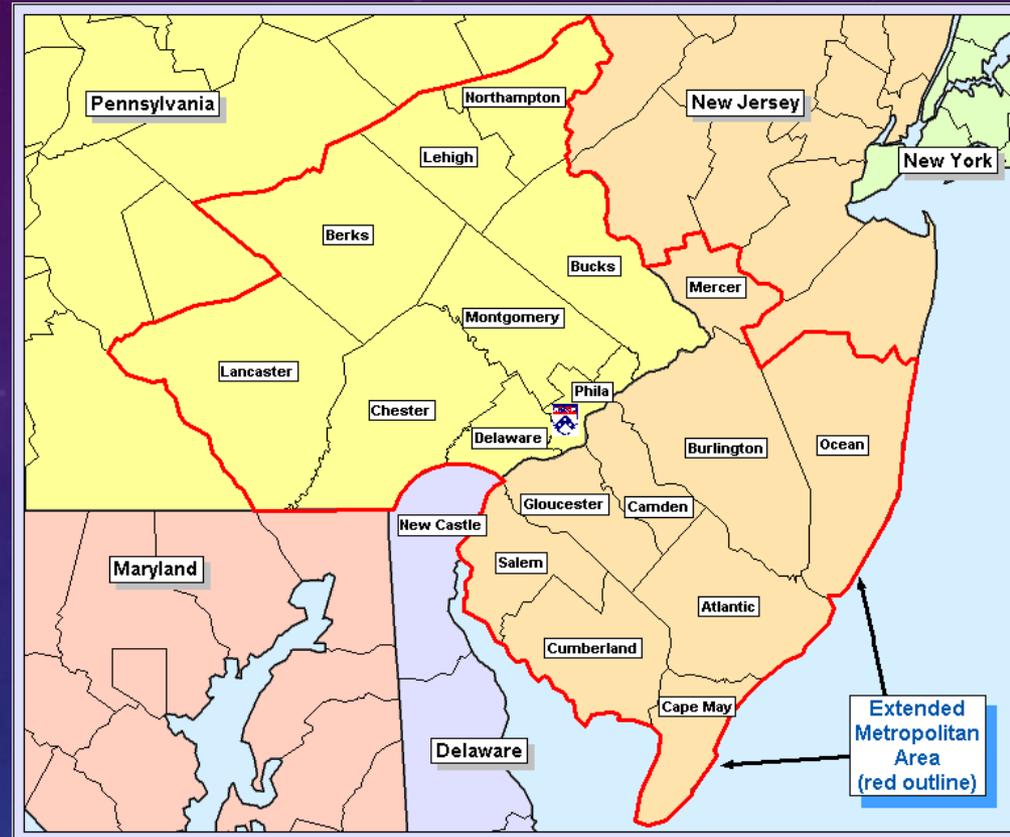
- **Clinical Practices of the University of Pennsylvania (CPUP)**



- **Clinical Care Associates (CCA)**

INTRODUCTION

- Beds: 2,146
- Square Footage: approximately 7,000,000
- Clinical Services: 74
- Covers Southeastern Pennsylvania, some in South Jersey
- Affiliated Hospitals: 15
- Business Model: Non-Profit



IT ALL BEGINS WITH.....



KEY DECISION MAKING

- The old way.....
 - ✓ Fee for service
 - ✓ Volume Driven



KEY DECISION MAKING

- Quality
 - ✓ Mortality
 - ✓ Length of Stay
 - ✓ Hospital Aquired Infections
 - ✓ Environment of Care
 - ✓ Speed to Service



P A T I E N T S A F E T Y

KEY DECISION MAKING

- Benchmarking



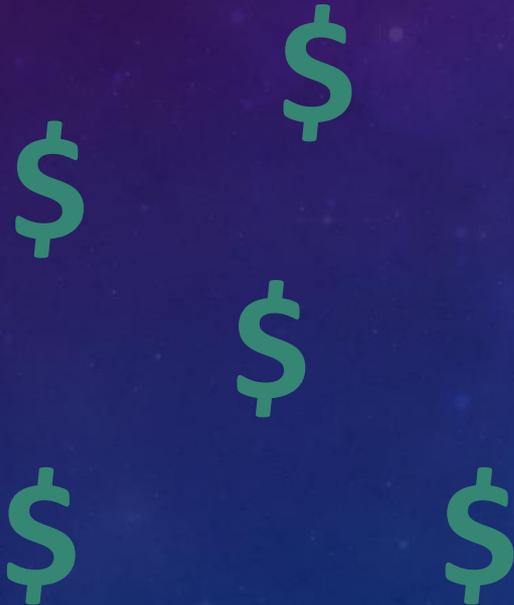
CAPITAL PROCESS

- Inception
 - Response to quality measures
 - Strategic Plan



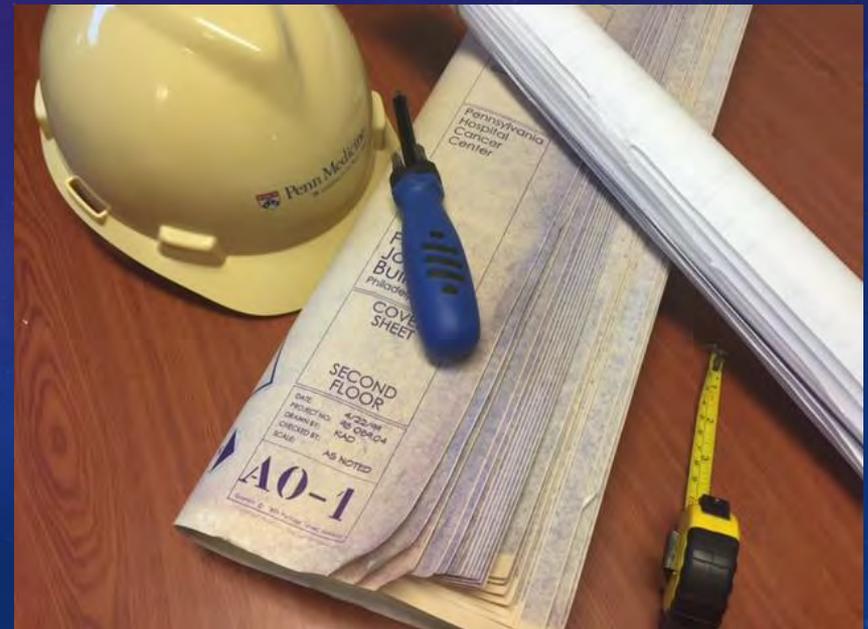
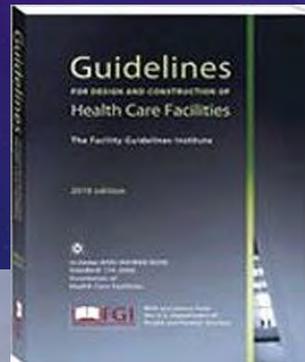
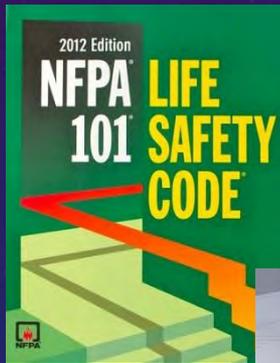
CAPITAL PROCESS

- Approval
 - Many competing priorities



CAPITAL PROCESS

- Development
 - Design, regulatory review, construction, regulatory acceptance



CAPITAL PROCESS

- Delivery of Care
 - Utilization of the new space to support the mission



OWNERS EXPECTATIONS

- Achieving Patient Safety

! SAFETY FIRST !

OWNERS EXPECTATIONS

- Ongoing relationship with regulatory



OWNERS EXPECTATIONS

- Need Consultants / Designers / Contractors to Lead the Process



OWNERS EXPECTATIONS

- We expect a lot of ourselves



OWNERS EXPECTATIONS

- Timing is key!



.....AND IT ENDS WITH.....





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