

COMMUNITY HOSPITAL

Anshen+Allen Architects for Palomar Pomerado Health—An Association of CO Architects

LOS ANGELES, CA, AND **Anshen+Allen** SAN FRANCISCO, CA

Palomar Medical Center West

ESCONDIDO, CA



An imperative that was established early in the planning process of this 456-bed tertiary care center was to create a facility that would positively transform the experience that is normally associated with staying or working in a hospital.

Outdoor features include garden spaces, providing areas for dining, meeting, or relaxing; a pedestrian path and garden connecting all buildings; a green roof, bringing gardens up onto the building and providing outdoor space for dining and views from the patient rooms; and garden terraces on the nursing floor, providing a connection to nature. Courts punctuate the diagnostic and treatment facility, providing orientation and visual relief to the users of Emergency, Imaging, and Surgery departments. Inside, single-loaded corridors maximize exposure to the outdoors for general orientation and connection to nature. The gardens will set the tone of the experience for the facility—a hospital in a garden.

The principal objective that drove the design of the patient rooms and nursing units was to create a physical environment that would improve the quality of care, resulting in improved patient safety and satisfaction. Distributed care stations and storage located outside every patient room will allow the care teams to spend more time providing direct patient care. Private, same-handed patient rooms will

Project category: Project in progress (April 2011)

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Design team: Tom Chessum, AIA, Principal-in-Charge; Stephen Yundt, AIA, ACHA, Planning Principal; Dennis McFadden, AIA, Design Principal; Derek Parker, FAIA, RIBA, FACHA, Healthcare Strategist; Bill Rostenberg, FAIA, FACHA, Planning Principal

Illustration: CO Architects

Total building area (sq. ft.): 879,000

Construction cost/sq. ft.: \$549

Total construction cost (excluding land): \$483,000,000

provide consistent orientation of the room elements, which should have a positive impact on efficiency and safety. The design of the room also colocates the bed and bathroom on the same wall, shortening the distance and allowing for a handrail-supported route.

Several of the nursing units will be designed as acuity-adaptable units. The full realization of the acuity-adaptable units (once issues with the regulatory agencies are reconciled) will minimize or eliminate the need to transfer patients, provide better continuity of care and care teams, and reduce medical errors and treatment delays.

Anticipating the convergence of procedural medicine, the interventional platform colocates the invasive procedure rooms of Surgery and Interventional Radiology, allowing for the interchangeability of technology and equipment over time. Modular framework (similar sized rooms and pods of rooms) accommodates both "clean core" and "staff core" planning. Flexible red-line demarcation also allows for future flexibility, and consolidated Prep/PACU spaces flex by case type and recovery needs.

