Building the Hospital of Tomorrow: Rehabilitate, Renovate or Replace

On Thursday, March 24th, the Local Program Council (LPC) of the Central Texas Chapter of the American College of Healthcare Executives (ACHE) hosted a panel discussion for 1.5 hrs of Face-to-Face education credit discussing current trends in healthcare architecture, design, and decision making towards capital investment. Lieutenant Colonel John Belew, FACHE, COO, Carl R. Darnall Army Medical Center moderated the panel discussion, featuring panelists Matt Maxfield, CEO, Seton Medical Center, Harker Heights; Colonel Mark Thompson, CEO, Carl R. Darnall Army Medical Center; Scott Liles, VP, Facilities and Construction, Baylor Scott & White, Killeen; and Angela Crum, Healthcare Architect, RTKL & Associates.

The panel provided insights into today’s competitive marketplace, how significant capital expenditure decisions can make or break a healthcare organization and the career of the executives tasked with such decisions. The significance of these decisions to construct a new facility or substantially renovate an existing one are some of the most important a corporation, hospital, or clinic can make.

With a special focus on current trends in healthcare design, Angela shared the phases healthcare leaders must go through from initial capital investment to construction culminating with patient care in the new or renovated facility. This provided a wonderful overview of the process that needs to occur in construction projects.

The panel and participants had in depth discussion about the effect of construction projects can have on bond ratings, patient safety concerns, patient satisfaction ratings, energy efficiency, and Joint Commission compliance. The expertise of the panel members offered valuable insight for participants as they prepare for future projects.

Additionally, following the panel discussion, the participants toured the newly constructed Carl R. Darnall Army Medical Center at Fort Hood Texas comprising 1 million square feet. Group tours were provided to see how concepts discussed in the presentation are implemented in construction including interstitial space, energy efficient design concepts, modern ORs with advanced technologies, patient lift systems on inpatient wards, virtual way-finding kiosks, patient check-in and tracking systems, power plant design, and advanced security technologies to name a few. Feedback from all involved was very positive on the program, tour, and networking opportunities provided.

The LPC of the Central Texas ACHE would like give a special thanks to the Command team at Carl R. Darnall Army Medical center for hosting the event and would also like to thank the presenters for sharing their insights and best practices and lessons learned for managing
construction projects. For more information on future events, please visit us at www.centraltexas.ache.org or send us an email at info@centraltexas.ache.org.