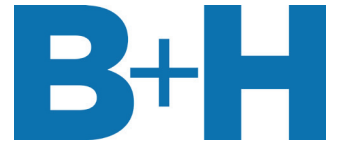


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- 1: Define EBD Goals and Objectives
- 2: Find Sources for Relevant Evidence
- 3: Critically Interpret Relevant Evidence
- 4: Create and Innovate EBD Concepts

Goal:

To strategically renew a 20-year old facility and maximize resources allocated to the new expansion while enhancing patient care and staff experience throughout both areas. To improve staff work environment and patient health outcomes through access to daylight and views, minimization of travel distances, and efficient patient room configuration and care stations.

Challenge:

Improving the patient and staff experience in inpatient units in both the existing and new structures required reviewing and implementing different strategies for each.

Maximizing existing construction in the existing cruciform-shaped facility resulted in a focus on optimizing care station functioning. New construction allowed exploration of patient room configurations and centralized versus decentralized care station options. Good family / friend space was planned within inpatient rooms as well as a high efficiency staff convenience zone thereby allowing clinical procedures, hand washing and waste management to take place without impact to the inpatient room conversation space.

The existing hospital had a large quantity of natural light and views of nature in the inpatient units and corridors. With the expansion, the challenge was to optimize locations of daylight and views for spaces occupied for lengthier periods and to assist wayfinding without sacrificing travel times and distances for maximum impact on patient wellness. In the refurbished spaces, planning adjustments were made to improve workflow; materials and lighting were replaced to improve maintenance and infection control measures - all to ensure that the existing facility was not deemed “second rate” to the new addition.

Solution:

Utilizing and integrating inpatient-unit research, the design decisions made that best supported staff while maximizing patient care were mirrored inboard rooms, modified centralized care stations for the existing building and decentralized care stations in new construction, and choosing partially open care station configuration (with only reporting and team rooms enclosed) for all existing and new areas.

Daylight and views were integrated into the building design by allowing natural light into operating rooms through the use of interior glazing. Daylight and views are now emphasized in large and small communal spaces and also support wayfinding. Easily accessible, secure courtyards, a green roof and plantings, along with a newly constructed community and wellness centre are visible from the building’s interior, providing a sense of nature combined with a feeling of community.