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Focus: Hospital Construction

## Thinking outside the white-walled box, new Bay Area hospitals strive for integration

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It's the San Francisco Bay Area hospital version of one of those popular real estate or home improvement shows on HGTV.

You know the drill: Everyone wants marble countertops, stainless steel appliances, Jack-and-Jill bathroom sinks, hardwood floors and an open concept design.

When it comes to the latest wave of new or rebuilt Bay Area hospitals, there's a similar must-have list in virtually every instance.

All the cool CEOs, doctors and architects gotta have them: All-private rooms, sleek TV/computer monitors, "green" design, murals, paintings and photographs galore, lots of natural light and outdoor gardens where staffers, patients and families can take a break from the stress or just contemplate through a dramatic window.

If you're not green, not "natural," not open floor plan, you're not with the program.

In earlier eras, when many of the region's hospitals were originally built, "hospital construction wasn't all that visually attractive," acknowledges Warren Browner, M.D., CEO of California Pacific Medical

evidence sterile-looking white walls are any cleaner than any other colors.

multi-campus San Francisco system's St. Luke's Hospital.

TODD JOHNSON | SAN FRANCISCO BUSINESS TIMES
"Every room has a window," says S.F. General COO
Iman Nazeeri-Simmons of the hospital's new tower.

In those long-ago days, "the emphasis was on cleanliness and sterility," he said, even though there was no

Center, which is pouring roughly \$2.7 billion into new hospital structures at Geary and Van Ness and at the

But the tide has shifted, and hospitals are using art, design, "way-finding" tools like theme colors for specific floors or departments, and other elements to make facilities visually appealing, easier to navigate and more pleasing, more "healing" and more comfortable environments than earlier iterations.

Not only that, Browner notes, it's actually "important that hospitals not be really different, one from the other," so that physicians who practice in different settings aren't confused by unnecessary variations. "For

reasons of delivering better care," a certain amount of standardization and design cross-fertilization is actually a plus, he said.

## Beyond the cool factor

Hospital design is far more than a matter of esthetics, of course, although looks do matter.

California Pacific's new Geary/Van Ness campus features North America's first viscous wall dampers, which act like shock absorbers during an earthquake, preventing lateral shaking, officials say. The technology has been in common use in Japan for decades, however.

San Francisco General Hospital's new \$887 million inpatient tower, slated to open next spring, uses base isolators, a different seismic safety technology, which let the new building "move 30 inches in every direction" during a quake, according to Iman Nazeeri-Simmons, S.F. General's chief operating officer.

And seismic safety is a primary reason that many of the region's largest hospitals have either completed huge rebuilds or new construction projects in recent years, or have massive projects under way.

That includes the two California Pacific projects, two huge projects at Stanford (the \$2 billion Stanford Medical Center rebuild and a \$1.1 billion expansion at Lucile Packard Children's Hospital), the S.F. General tower, a major expansion, upgrade and seismic project at Alameda Health Services' Highland Hospital, and other big rebuilds at Marin General Hospital and UCSF Benioff Children's Hospital Oakland.

Seismic work is required by a state mandate. But the design wave rolling through the region's hospital construction world is driven by other factors as well.

Use of natural light, landscaped garden areas and fresh air has healing qualities for patients, but is also beneficial for staffers, family members and other visitors, proponents argue.

The same is true for esthetic touches. Thanks to city requirements, S.F. General devoted 3 percent of its project budget to public art, including dynamic mosaics, murals, photographs and other colorful features by San Francisco artist Rupert Garcia and others.

Stanford Health Care, meanwhile, plans to merge esthetic with functional design, using an exterior glass curtain wall made of "beautiful blue glass" louvres that will add a dramatic visual element while helping to prevent bright sunlight from overheating patient rooms, said Mark Tortorich, vice president of planning, design and construction for both Stanford and Lucile Packard.

Another nifty feature that links to the popular roof-top gardens found at many of the new wave hospitals is a system that will divert condensation from the new Stanford facility's air conditioning equipment into underground cisterns. That water "is used to irrigate the roof gardens," he said.

At S.F. General, the nine-story (one of them underground) inpatient tower has an extra advantage.

"Every room has a window," said Nazeeri-Simmons. "That's the beauty of being in a round building."

**Chris Rauber** Reporter

