

The Patient-Centered Ambulatory Facility

Designing for the New Health Care Consumer

Advisors to Our Work

With Sincere Appreciation

Alter+Care
John Driscoll

Array Architects Adrian Hagerty Noah Tolson

CannonDesign Rachel Bickel

Tonia Burnette Julie Dumser Mike Pukszta

Deb Sheehan

Davis Partnership Architects

Brian Champa Tina DuMond Andrew Kraemer Robyn Linstrom Melissa Piatkowski Fernanda Pires Frauenshuh HealthCare Real Estate Solutions

Eric Carmichael Kristie Wietrzykowski

FreemanWhite
Michelle Mader

Gensler Rod Vickroy

HDLTonya Mallory

K&L Gates Ruth E. Granfors

MDVIP
David Barrie
Scott Hutchens

NBBJ

Amelia Conrad

The Neenan Company

Miguel Burbano Dan Garofalo Roger Wedderburn Chris Wesche

Page

Hilary Bales-Morales Beth Carroll Kregg Elsass Josh Theodore Kurt Neubek

Stantec Nicole Cocolin Scott Huff

The Rise of Retail

Redesigning the Outpatient Clinic

An Evolving Ambulatory Environmen

Covered Lives New Metric of Success for Population Managers

Hospital Value-Based Growth Strategy



Attract Patient Populations



Provide a range of accessible, coordinated sites of care to draw in new patient populations

Retain Patients In-Network



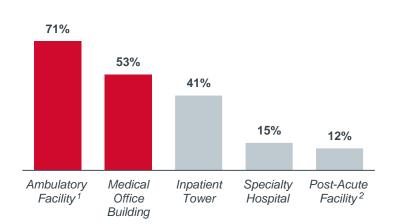
Capture patient share of wallet by ensuring consumers remain in-network across care continuum

Ambulatory Investments Underpin Future Growth

Outpatient Construction Projects Anticipated to Rise

New Construction Projects Planned in the Next Three Years

2014, n= 38 Hospitals and Health Systems



Outpatient Investment Goals for Population Managers

- Assemble Care Continuum
 - Extend reach beyond acute enterprise to bolster network access points, scope of services
- Secure Patient Populations
 Protect existing patient share
 - Protect existing patient share of wallet amid heightened competition, narrowing networks
- Manage Cost and Quality

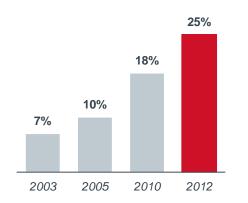
Drive patients to lower cost care sites, strengthen disease management and prevention

 [&]quot;Ambulatory Facility" includes retail clinic, urgent care, freestanding ED, imaging center, or ambulatory surgical center

 [&]quot;Post-Acute Facility" includes skilled nursing facility, long-term care hospital, hospice, rehabilitation, or senior living.

High-Deductible Plans Encouraging Price Sensitivity

High-Deductible Health Plan Enrollment Individuals with Deductible of \$1000 or More





A Surge of Tools to Compare Providers

Suddenly Subject to the Marketplace of Opinion

Tools to Search Health Care Consumer Ratings



Katy Watters, MD



285 reviews (read below)

Other available apps, websites:

- Consumer Reports
 Vitals
- HealthGrades •
- RateMDs

ZocDoc

yelp**

· PatientsLikeMe

Consumer Making Decisions Based on Reviews

N = 2,137

2014



Selected a physician based on a positive review



Avoided a physician based on a negative review



65%

Consumers aware of health-related reviews online

59%

Consumers find ratings somewhat or very important when choosing a provider

Competition Meeting Unmet Consumer Demands

Expanding Competitive Landscape

Retail Clinics



- Walk-in retail clinics treating routine health needs, chronic disease
- Clinics within 400
 Walgreens locations
 across the U.S.
- Full-service primary care clinics for routine health care needs
- Family health care accessible in 80 locations nationwide

Concierge Medicine



- Concierge-lite medical group with same-day access
- Available in 28 offices across six cities nationwide

Virtual Care



- Mobile application allowing patients to request house call
- Offering service in New York City, with expansion planned



Hospital Business in Peril

"Retail medicine is changing how consumers view value within healthcare services. Consumer focused delivery is helping redefine "high quality" as "convenient." This shift represents a serious threat to hospitals."

Moody's Investor Service Report, 2014

Current Facilities Not Meeting Consumer Demands

Rethinking the Traditional Approach to Outpatient Design



Facility Challenges

Bottlenecks in Patient Flow

- Unnecessary patient wait time from intake through check-out
- Patients may get lost finding right physician in larger MOBs



Planning Imperatives **Enhance Patient Journey Within Clinic**



Episodic Care Delivery

- Facilities designed around care episodes, not health and wellness
- Insufficient care team collaboration to support patient follow-up



Drive Ongoing Patient Engagement



Inconvenient Site Location

- Facilities centralized on hospital campus, rather than in the community
- Few alternatives to the traditional MOB for routine primary care



Extend Access to Care, Anywhere

Supporting Patients At Every Touchpoint

Facility Assets Impact Preference During Visit and Beyond

Optimize Clinic Visit

Promote Continued Health & Wellness

Enhance Patient Journey Within Clinic

Configure facility layout to streamline the patient flow through facility

Drive Ongoing Patient Engagement

Strengthen care management for high-risk patients after an outpatient visit

Extend Access to Care, Anywhere

Broaden non-traditional primary care alternatives within the community

The Rise of Retail



An Evolving Ambulatory Environmen

Meeting the New Consumer Mandate

Imperatives to Impact Preference During Visit and Beyond

Optimize Clinic Visit

Promote Continued Health & Wellness

Enhance Patient Journey Within Clinic

- Perfect the Registration, Check-in Experience
- 2. Streamline the Patient Rooming Process
- 3. Eliminate Clinic Check-Out Lines

Drive Ongoing Patient Engagement

- 4. Reinforce Self-Management with Team-Based Care
- 5. Accommodate Dedicated Education Space
- 6. Equip Outpatient Clinic for Group Visits

Extend Access to Care, Anywhere

- 7. Broaden Off-Campus Retail Locations
- 8. Expand Worksite Clinic Alternatives
- Connect Patients and Providers Via Telehealth

Patients Demanding Greater Convenience

On-Demand Appointments Preferred Attribute for Primary Care

Top 5 Preferred Primary Care Clinic Attributes

Average Utility

n=3.873

- I can walk in without an appointment, guaranteed to be seen within 30 mins
- If I need lab tests or x-rays, I can get them done at the clinic instead of going to another location
- The provider is in-network for my insurer
- 4 The visit will be free
- The clinic is open 24 hours a day, 7 days a week



Convenience is King

63%

Patients that indicate wait time "very" or "extremely" important



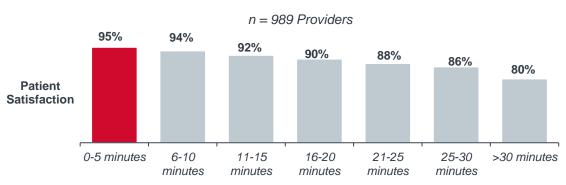
Survey-in-Brief: Primary Care Consumer Choice

- Nationwide survey of nearly 4,000 consumers to determine preferred primary care clinic attributes when seeking routine care
- Respondents prioritized preferences across 56 attributes related to access, cost, service, quality, & reputation

Longer Wait Times, Lower Patient Satisfaction

Time Spent Waiting Central to Positive Visit Experience

Time Spent Waiting and Patient Satisfaction



Time Spent Waiting

"

When you think about value from a patient's perspective, waiting is a waste. We need to get the patient to the care — whether it's the provider or the procedure — in the shortest amount of time possible.

Christy Dempsey, Chief Nursing Officer, Press Ganey

Bottlenecks at Every Step in the Process

Opportunities Abound to Improve Patient Flow, Save Space

Registration and Check-In



- Patients lack check-in options outside in-person registration within clinic
- Decentralized registration results in multiple waiting lines for patients

Patient Rooming



- Staff work flow, clinic space can hinder rooming process
- Patients may get lost finding an appointment in larger MOBs

Clinic Check-Out



- Check-out lines add unnecessary wait time following visit completion
- Separate check-out reception space results in larger clinic footprint



22 min

Average time waiting to see doctor at a clinic

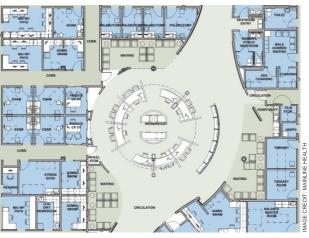
42 min

Average total visit length for primary care

Centralize the Registration Desk

Main Line Health Designs 'One Stop' for Patient Check-In

Main Line Health, Exton Square Mall



Work Flow Advantages of Central Registration



Avoids multiple check-ins across physician practices



Expedites patient referrals, scheduling



Serves as integration hub for services within outpatient center



Case in Brief: Main Line Health, Exton Square Mall

- 32,000 square-foot, \$4.5 M health center located in mixed-use mall
- Designed central registration for co-located primary care, specialty care, and imaging and lab to streamline patient referrals, improve patient experience

Weighing the Advantages of Central Registration

Understanding When to Consolidate Outpatient Check-In

Major Considerations for Central Registration Implementation

- Assess Service Mix
- Understand the mix of services and associated patient population
- Consider decentralized registration for high volume departments

- 2 Evaluate Patient Flow
- Project impact of central registration on patient queuing, clinic workflow
- Align number of check-in stations, waiting seats with anticipated volume

- 3 Estimate Space Requirements
- Determine space savings from consolidated registration desk
- Review downstream impact on department layout, clinical areas

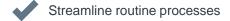
- 4 Review Appropriate Staffing
- Calculate required staffing levels to meet annual demand of appointments
- Develop and provide standard training for scheduling, registration

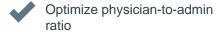
Self-Service Check-In Expedites Throughput

Goals of Kiosk Check-In at Vanguard Urology Institute











2 min

Average check-in time achieved



4:1

Physician-to-administrative staff ratio



Vanguard Urology Institute

- Outpatient provider in Houston, TX
- Implemented self-service kiosk to streamline patient intake and registration process within the clinic, minimize wait time
- Kiosk also expedites copayment and bill collection by capturing patient payments prior to appointment

Tailor Approach to Cater to Different Visitors

Segmenting Patients By Preferred Method of Registration

Former Standard Model

Patient Registration



In-Person Check-in for all Patients

- Complex visits
- Routine visits
- New patients
- Long-standing patients

New Tailored Model

Patient Registration





- New patients
- Complex visits requiring face-toface discussion



Mobile Tablet

- Long-standing patients
- Routine visit to clinic



Electronic Kiosk

- Long-standing patients
- Routine visit to clinic



Factors Driving Kiosk Utilization

- Frequency of Appearances: Long-standing patients returning to the clinic more comfortable with self-service check-in process
- Reasons for Visiting: Routine visits, follow-ups may not require face-to-face check-in

Employ Waiting Room Space for Patient Education

Kiosks Encourage Portal Sign-Up and Utilization During Wait

Hands-On Patient Education



Kiosks available to patients in waiting room to review portal features, encourage sign-up

Kiosks in Waiting Room:



Review portal features



Encourage patients to sign-up



Educate about other care offerings



Case in Brief: Veterans Affairs Black Hills Health Care System

- Health system based in Fort Meade, South Dakota
- Launched "My HealtheVet", the VA's online personal health record, 10 years ago
- Installed kiosks in waiting rooms to encourage My HealtheVet participation and education

Allowing Patients to Room Themselves

UW Health Improving Patient Satisfaction, Eliminating Wait

UW Health's Patient Self-Rooming Process











Upon arrival, patient notifies receptionist and proceeds directly to exam room

Receptionist alerts caregiver via a note in the EHR, activates red light over exam room

Caregiver proceeds to exam room from back-of-the-clinic door for staff



UW Health—Yahara Clinic

- 32,000-square-foot family medicine clinic in Monana, Wisconsin
- Leverages unique patient self-rooming process to reduce waiting, enhance privacy



25%

Increase in patient satisfaction following implementation

Designing the Facility for Self-Rooming

UW Health's Clinic Module Supports Seamless Flow

"On-Stage, Off-Stage" Design Streamlines Patient Flow



- Uses "double door" exam rooms, providing patients dedicated corridor
- Minimizes congestion at front of clinic, improves privacy, reduces noise level

Open Layout Increases Visibility Across Clinic



- Employs a hub-and-spoke model with reception desk at center
- Allows receptionist to have clear lines of sight down corridor



Innovation in Brief: "On-Stage, Off-Stage" Design

- Provides separate space for care team and patients, with the goal of reducing bottlenecks in the clinic
- Employs dual access exam rooms where patient enters from public corridor and medical staff enters from the back areas

Determining the Right Number of Exam Rooms

Perfect Ratio Often Elusive in Medical Office Buildings

Four Major Factors Driving Exam Rooms Required



Physician Specialty

Consultative specialties with longer visits require a lower exam room ratio than specialists



Room Scheduling and Utilization

Practice scheduling patterns impact total utilization, exam space needed



Type of Care Model

Team-based care models may extend clinic capacity, increase the ratio of exam rooms per provider



Patient Volumes

Rightsizing the number of exam rooms requires accurate patient volume forecasts

The Digital Age of Patient Navigation

Mayo Clinic Invests in Electronic Wayfinding Device

Mayo Clinic Patient Application

Electronic Wayfinding Features

- Provides real-time, turn-by-turn navigation to facilities across Mayo clinic campus
- Offers directions within any building on campus with sophisticated interior mapping technology
- Works together with existing patient services, including a network of information desks





Innovation in Brief: Mayo Clinic's Patient Application

- Free patient application with location-based navigation on smartphones and other devices, helping patients find their way to appointments
- Directs patients to and through facilities within Mayo Clinic campuses nationwide, which includes 16 million square feet and 59 different buildings

Make Check-Out Lines A Thing of the Past

Colorado Springs Orthopaedic Group Employs Exam Room Check-Out

New Exam Room Check-Out Process Colorado Springs Orthopaedic Group





Case in Brief: Colorado Springs Orthopaedic Group

- Largest orthopedic group in Southern Colorado, offering outpatient surgery in sports medicine, spine, joint replacement, foot and ankle, hand and upper extremity, hip and knee
- Clinic designed to offer patient check-out in the exam room, minimizing standing wait times and reducing congestion at the front end of the office

Meeting the New Consumer Mandate

Imperatives to Impact Preference During Visit and Beyond

Optimize Clinic Visit

Promote Continued Health & Wellness

Enhance Patient Journey Within Clinic

- Perfect the Registration, Check-in Experience
- 2. Streamline the Patient Rooming Process
- 3. Eliminate Clinic Check-Out Lines

Drive Ongoing Patient Engagement

- 4. Reinforce Self-Management with Team-Based Care
- 5. Accommodate Dedicated Education Space
- 6. Equip Outpatient Clinic for Group Visits

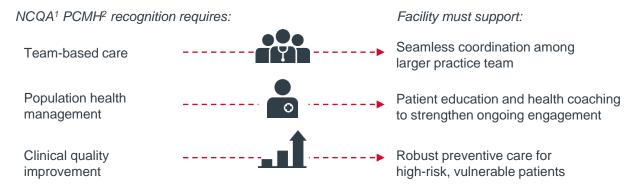
Extend Access to Care, Anywhere

- . Broaden Off-Campus Retail Locations
- 8. Expand Worksite Clinic Alternatives
- Connect Patients and Providers Via Telehealth

Supporting Care Transformation Efforts

Design Must Adapt to Medical Home Practice Model

Medical Home Practice Changing Facility Requirements





National Committee for Quality Assurance.

Patient-centered medical home.

Balancing Shared Lounges With Private Space

Touchdown Areas Encourage Team Coordination

UW Health—Yahara Clinic Integrated Team Center



Goals of Clinic Design



Draw physicians out of private office environment



Encourage face-to-face communication amongst care team



Provide informal space for confidential patient cases



Case in Brief: UW Health - Yahara Clinic

- Primary care clinic in Monona, WI offering primary care services, health and wellness offerings, and imaging and diagnostics
- Invested in an Integrated Care Team (ICT) space to foster collaboration among physicians and the broader care team

Optimizing Use of Limited Physician Offices

Rationalizing Private Work Areas Among Caregivers

Private Office Eligibility Considerations



Physician is in office delivering patient care 75% of the time



Physician has academic or teaching responsibilities



Physician is a subspecialist requiring consultative space



Physician uses facility as primary work site



Eliminating Private Offices Not Always Option

"At a time when maximizing the ROI of every square foot is of critical importance, hospitals cannot afford historical levels of private office space; but sometimes their culture hasn't caught up with reality."

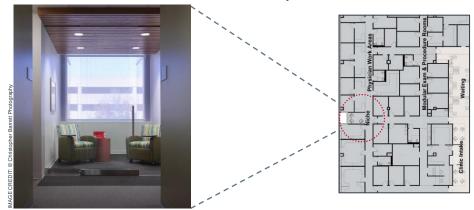
Tonia Burnette, Principal

CannonDesign

Adopting Hoteling Space for Impromptu Huddles

Fostering Collaboration Through Informal Work Areas

IU Health, Neuroscience Center of Excellence Touchdown Spaces





Case in Brief: IU Health – Neuroscience Center of Excellence

- Comprehensive neuroscience center in Indianapolis, Indiana home to IU Health medical faculty, independent physicians, and owned neuroscience practices
- Clinical floors have been specially designed with collaborative niches for impromptu
 meetings and discussions of patient status

Moving Conversations Out of the Exam Room

Substituting Exam Rooms with Multi-Purpose Education Space

USF Health's Diabetes Home for Healthy Living



Education Space

- Provides a less clinical setting for visits not requiring an exam table
- Offers flexible space for customized nutrition and exercise planning, phone calls, waiting area for families
- Enables patients, family, care team to sit side-by-side, promoting participation



Case in Brief: USF Health Diabetes Home for Healthy Living

- USF Physicians Group leasing space in retail shopping center to develop a medical home for patients with diabetes, opened in August, 2013
- Designed with open, welcoming consultation areas for patient education and treatment planning

Anchoring the Clinic Around Group Visit Space

HDL Going Beyond Diagnostics and Testing to Include Patient Education

HDL Hub—Group Visit Space



HDL - Available Services



Education sessions for chronic disease reversal and prevention



Personalized fitness plans for patients' bodies and schedules



Nutrition guidance for grocery shopping and dining out



More Than Just Lab Testing

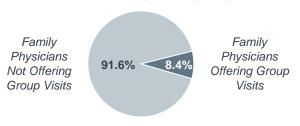
"My HDL Hubs are not only a place to receive our comprehensive lab testing, but also a **health community**, a place to engage and take control of your health, and help you take steps to improve your life."

Tonya Mallory, HDL, Inc.'s Co-founder, President and CEO

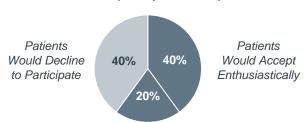
Limited Implementation Despite Patient Interest

Group Visits Remain Underutilized in Traditional Physician Practices

Use of Group Visits by Family Physicians



Patient Receptivity to Group Visits



Patients Would Agree with Encouragement

Key Considerations for Group Visit Space



Does clinic have the resources to support group visit model?



Is there a relatively standardized care plan for the condition?



Are there enough patients in the clinic to reach critical mass?

Supporting Comprehensive Care Management

The Villages Dedicating Four Adjacent Spaces for Learning Center

Spaces Within the Villages "Learning Center"



Seminar Room

- Built for larger group classes, practice orientation sessions for new patients, or "in-service training" for staff
- Accommodates up to twenty patients and providers



Small Group Room

- Designed for activities that involve discussion, such as physician-led group visits or support groups
- Accommodates groups between 6-10 individuals



Health Coach Office

- Supports small (one-on-one or one-on-two) sessions with care manager
- Offers room for telephone and electronic contact with patients between visits



Knowledge Pharmacy

- Provides patient access to library of educational content to better understand proper medication use
- Houses briefings, videos, and audio presentations focused on health education

Meeting the New Consumer Mandate

Imperatives to Impact Preference During Visit and Beyond

Optimize Clinic Visit

Promote Continued Health & Wellness

Enhance Patient Journey Within Clinic

- Perfect the Registration, Check-in Experience
- 2. Streamline the Patient Rooming Process
- 3. Eliminate Clinic Check-Out Lines

Drive Ongoing Patient Engagement

- 4. Reinforce Self-Management with Team-Based Care
- 5. Accommodate Dedicated Education Space
- 6. Equip Outpatient Clinic for Group Visits

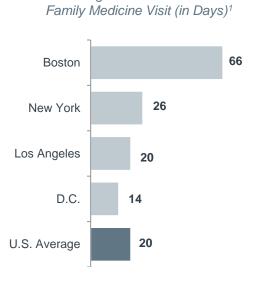
Extend Access to Care, Anywhere

- . Broaden Off-Campus Retail Locations
- 8. Expand Worksite Clinic Alternatives
- Connect Patients and Providers Via Telehealth

Access to Primary Care Major Challenge

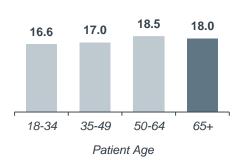
Provider Shortage Resulting in Long Waits, Travel Time

Patient Barriers to Access for Routine Primary Care



Average Time to Schedule

Average Travel Time for Routine Care (in Minutes)





Patients in rural areas that travel outside county for physician services

Site the Clinic with Patient Access in Mind

Outpatient Clinic Location Strategy

Patient Population

- Demographics: Growing population, high concentration of families
- Service Utilization: High use rate of health care services in general market
- Unmet Demand: Local population lacks access to primary care and proposed offerings

Patient Population

Care Site

- Reliable Consumer Traffic:
 High foot traffic, clinic in neighborhood with prime medical office space
- Convenience: Ample parking, available transportation options, and pedestrian circulation
- Community Adjacencies: Close proximity to shopping and business centers, residential areas

Care Site



Doctors Without "Borders"

Kelsey-Seybold Securing Retail Location Through Adaptive Reuse

Kelsey-Seybold Clinic—Meyerland Plaza



Benefits of Facility Reuse

Speed to Market

Expedites project delivery by retrofitting existing retail location

Construction Cost

Offers reduced first-cost of construction compared to built-to-suit option

3 Clinic Visibility Provides Kelsey-Seybold a visible storefront image in proximity to community



Case in Brief: Kelsey-Seybold Clinic

- · 365-physician multispecialty group based in Houston, Texas
- Opened a 72,000-square-foot two-story neighborhood clinic in retail setting which formerly housed a Borders bookstore in Spring, 2013 in Houston, Texas.

Pitfalls of Retrofitting Often Overlooked

Proper Due Diligence Essential Prior to Project Launch

Main Considerations for Adaptive Reuse



Real Estate Availability

Repurposing existing building stock most advantageous when excess supply of real estate, low-cost financing options



Access and Parking

Modifications may be needed to enhance building entrance and access features, install any required elevators



Space Configuration

Existing facility configuration, floor plan may not be readily adaptable for health care use, insufficient structural support



Clinical Infrastructure

Building lacks appropriate MEP and HVAC systems, medical gas, emergency power, and life safety features for health care



Regulatory Compliance

Careful consideration of state regulations governing facility licensure and occupancy type¹ required prior to space planning

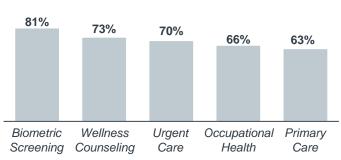
Business versus health care occupancy requirements vary

Employer-Based Clinics Becoming Mainstream

Offering Wide Range of Onsite Health Services



n = 74 Employers





Companies with Onsite Clinic









2014 Employees

7,185

116.000

50,250

52,069

Source: Towers Watson, "2012 Onsite Health Center Survey Report", available at: www.towerswatson.com/en-US/Insights/I/C-Types/Survey-Research-Results/2012/07/Onsite-Health-Center-Survey-2012; Fuld & Company, "The Growth of On-Site Health Clinics", 2009, available at: http://www.yourhealthstat.com/; National Business Group on Health, "Annual Health Survey", 2013, available at: www.businessgrouphealth.org/pressroom/pressRelease.cfm?ID=214; Facility Planning Forum interviews and analysis.

Designing a Medical Home Where Patients Work

Cisco Systems' Health Center Offers Full-Service Primary Care

Cisco's LifeConnections Health Center



W

45 K

Total covered lives that have access to Cisco's health center

80%

Employees that report higher productivity and less time away from work from using health center

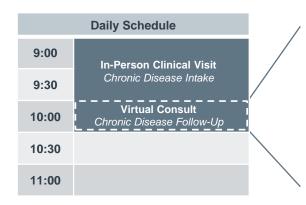


Case in Brief: Cisco Systems' LifeConnections Health Center

- 26,000 square-foot, \$16 M worksite clinic with primary care, lab services, physical therapy, pharmacy and vision care, behavioral health, fitness center, and day care in San Jose, CA
- Offers on-demand access to Cisco's 18,000 employees and their families in the region, including walk-in appointments and longer physician visits

Virtual Visits Extending Physician Capacity

Massachusetts General Saving Time, Resources With Telemedicine



Offers Virtual Follow-Up Option for Ongoing Chronic Disease Management

- Both phone and video virtual visits are conducted for chronic disease management and follow-up
- In-person clinical visits booked for 60 min, typically run 30-40 min
- 10-20 min virtual consults slotted into excess time throughout the work day



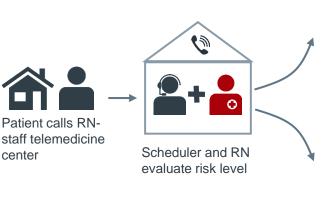
Case in Brief: Massachusetts General Ambulatory Practice of the Future

- Primary care innovation pilot clinic located in Boston, MA
- Uses multidisciplinary care teams and technology to support both in-person/in-practice visits as well as virtual visits; virtual visits replace in-person visits for disease monitoring/management, weight management, blood pressure monitoring, etc.

Centralize Telemedicine Capabilities Off-Site

Making the Most of Medical Office Building Space

Holmes¹ Moves RNs from Primary Care Practice to Call Center





If patient or complaint is complex, scheduler finds in-person appointment with physician



If low-risk or complaint is simple, RN deals with issue over the phone



50%

Decrease in messages to PCPs following RN call center



Institution in Brief: Holmes Physician Network¹

- 700-physician group based in the Southwest
- Employs dedicated RNs to offer telemedicine in nine regional call centers;
 centers soon to incorporate virtual visits

The Rise of Retail

Redesigning the Outpatient Clinic

An Evolving Ambulatory Environment

Expanding Access at Both Ends of the Spectrum

Outpatient Facility Models Moving in Two Directions

Outpatient Facility Models

Facility Square Footage



Retail Walk-In Clinic

Market Growth

- Satellite clinic offering routine care, physicals, health screenings
- 1,500-2,250 SF



Traditional Primary Care

- Neighborhood center with basic primary care, limited labs, ancillaries
- 10,000-15,000 SF



Full-Service Medical Office Building

- Community facility with multispecialty care, onsite labs, imaging services
- 30,000-50,000 SF



Specialty Diagnostic and Treatment

- Focused factory co-locating surgical specialties, labs, advanced imaging
- 50,000-100,000 SF

Market Growth



"Hospital Without Beds"

- Regional hub with full suite of services; serving expansive catchment area
- 100,000-150,000 SF

Remote Access

Practice Integration

Planning a Community for Health, Not Health Care

Blue Zones Aspiring to Improve Population Health

Completed and Ongoing Blue Zones Projects

2014



Beach Cities, California

Experienced a 14% drop in obesity and a 30% decrease in smoking across the community



"We're starting to ask our clients, 'Why don't we start looking at all the **health**resources within the community, not just health care?' Many hospitals are thinking about how they can get ahead of population health instead of just surviving the next 24 months."

Michael Pukszta, Principal CannonDesign



Case in Brief: Blue Zones

- Approach to strengthen population health through state and local programs that support community transformation
- Over a dozen locations have been designated "Blue Zone" communities in the U.S.

Building the Patient-Centered Ambulatory Facility

Designing for the New Health Care Consumer

Optimize Clinic Visit

Promote Continued Health & Wellness

Enhance Patient Journey Within Clinic

Imperative

Streamline the patient journey across registration, rooming, and check-out

Drive Ongoing Patient Engagement

Imperative

Support care management, expanded education offerings for high-risk patients

Extend Access to Care, Anywhere

Imperative

Bring care into community within retail settings, the workplace, and at home