## **Dartmouth General Hospital** Redevelopment & Expansion QEII New Generation

## An update from Heather Francis, Director of Health Services and Dr. Todd Howlett, Site Medical Lead.

In our June newsletter, we'd like to provide an overview and update of the ongoing perioperative services operational readiness work.

This crucial process prepares the perioperative team to work in their new spaces in the hospital's addition openining this fall. It's led by QEII New Generation Project Director of Operational Readiness Will Oud, Manager of Construction and Facility Planning Bill Levangie, and biomedical engineer Michael Barton. Dartmouth General's Site Chief of Surgery Dr. Scott Mawdsley, Site Chief of Anesthesia Dr. Kevin Bent, Health Services Manager Archie Mackinnon and nurse leaders Chris Underhill and Sue Betts form the rest of the team.

The work began last June with a thorough and critical look at how the perioperative team works in their current environment, then moved to how best to work in their new environment with new tools and technology. The team's work focused on:

- 1. Required adjustments to the design of the new environment for safe and efficient work.
  - For example, the team uncovered necessary design changes to use OR 5, 6 and 7 as temporary PACU space, while the preexisting PACU is renovated.
- 2. Identifying process and human resource changes required to successfully work in the new spaces.
  - For example, the flow of supplies and waste to and from the new space had to be redesigned because of the location of the new MDR and clean and soiled elevators.
- 3. Changes in processes that will result in improvements to quality, safety, efficiency and/or patient experience.
  - For example, the plan to introduce an elec-

tronic system to notify physicians when patients are ready for surgery to minimize delays in the operating room.

From there the group then turned their attention to understanding and accounting for the many ways the new spaces would challenge them to work differently, and how these changes would affect other departments in the hospital. Now the group is developing plans to address the department's changes with other staff, physicians and patients. This includes focusing on orienting and training colleagues on the new environment's equipment and processes - prior to its first clinical use.

This has been a tremendous amount of work, over and above regular clinical and administrative requirements. Yet, it is a crucial undertaking that supports the team's goal of having the first patient's experience in the new environment to feel like the thousandth patient: delivered by a confident, experienced, well-prepared team. We'd like to thank the perioperative operational readiness team for their dedication to patient care.

## **CONSTRUCTION UPDATES**

- Road work has begun in the approach to the Emergency Department (ED) and its parking lot. As a result of this work, the patient transfer entrance opening will now occur at the end of June.
- Once road work outside of the ED is completed, construction will begin on the thoroughfare that leads to the main parking lot, ring road and new entrance. We ask that you remind patients to plan on needing extra time to arrive at appointments. This will complement our advertising and patient awareness campaign.
- We continue to ask staff and physicians not to park in the main lot during this period of construction. We appreciate your support and dedication to patient care. Thank you.



