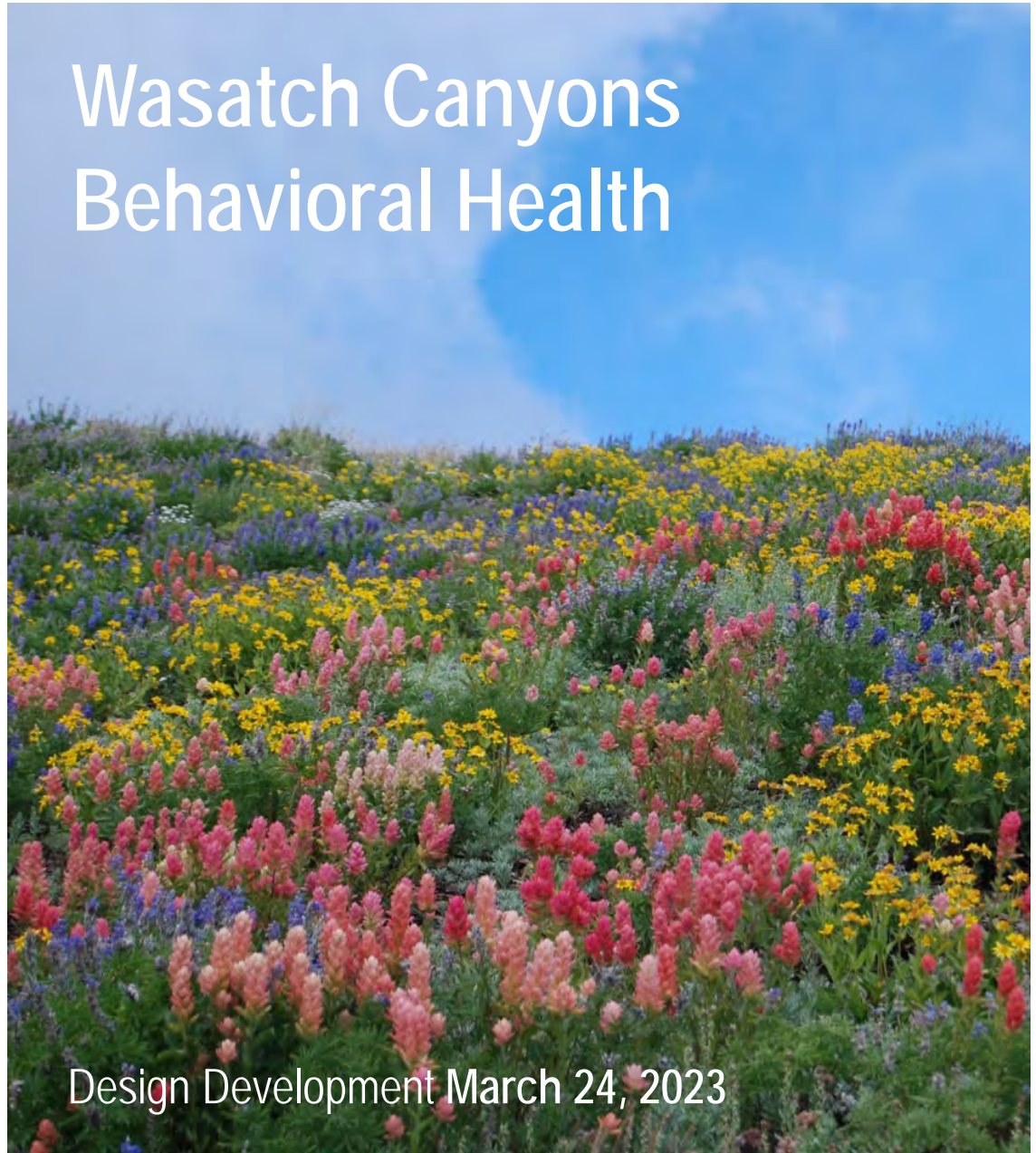




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Intermountain Primary Children's Hospital

Wasatch Canyons Behavioral Health



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Executive Summary

INTRODUCTION

The replacement, enhancement and expansion of Intermountain Primary Children's Wasatch Canyons Behavioral Health campus (WCBH) will be a vital step in serving the behavioral health needs of the families of Salt Lake County and throughout the state. Healthcare facilities dedicated to the needs of children and those dedicated to behavioral health each require unique approaches to care delivery. The overlap of these two specialties therefore demands the utmost sensitivity to the care environment.

The WCBH project aims to replace the majority of the facilities on the existing campus. Like many replacement projects for healthcare, this work must be accomplished without disrupting existing operations and services. A major objective of the Master Plan phase was to determine a location on the site that could accommodate the construction of a new facility without impacting the existing structures. Another objective was to strategize the redevelopment of the site such that access, wayfinding, parking and facility entrances can transition easily from current patterns to the new configuration.

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At the same time, the programming of the new facility was a major activity of the Master Plan. As is often the case with new and replacement projects, the initial program desires were not yet completely aligned with the capital resources assigned to the project. Every meeting of the Master Planning Phase, therefore, included a process of program consolidation and right-sizing to better align the scope with the project budget.

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THE EXISTING CAMPUS

The existing WCBH campus was developed in the 1980s. The architectural expression uses heavy, brick-clad volumes and deep overhangs. Many of the exterior materials are showing signs of wear and damage, while doors and windows need upgrades or replacement. Most critically, key infrastructure, such as HVAC, has reached the end of its functionality and is need of wholesale replacement. Most of the facilities are thus candidates for demolition once the replacement project is complete. The one important exception is the Recreational Services Building.



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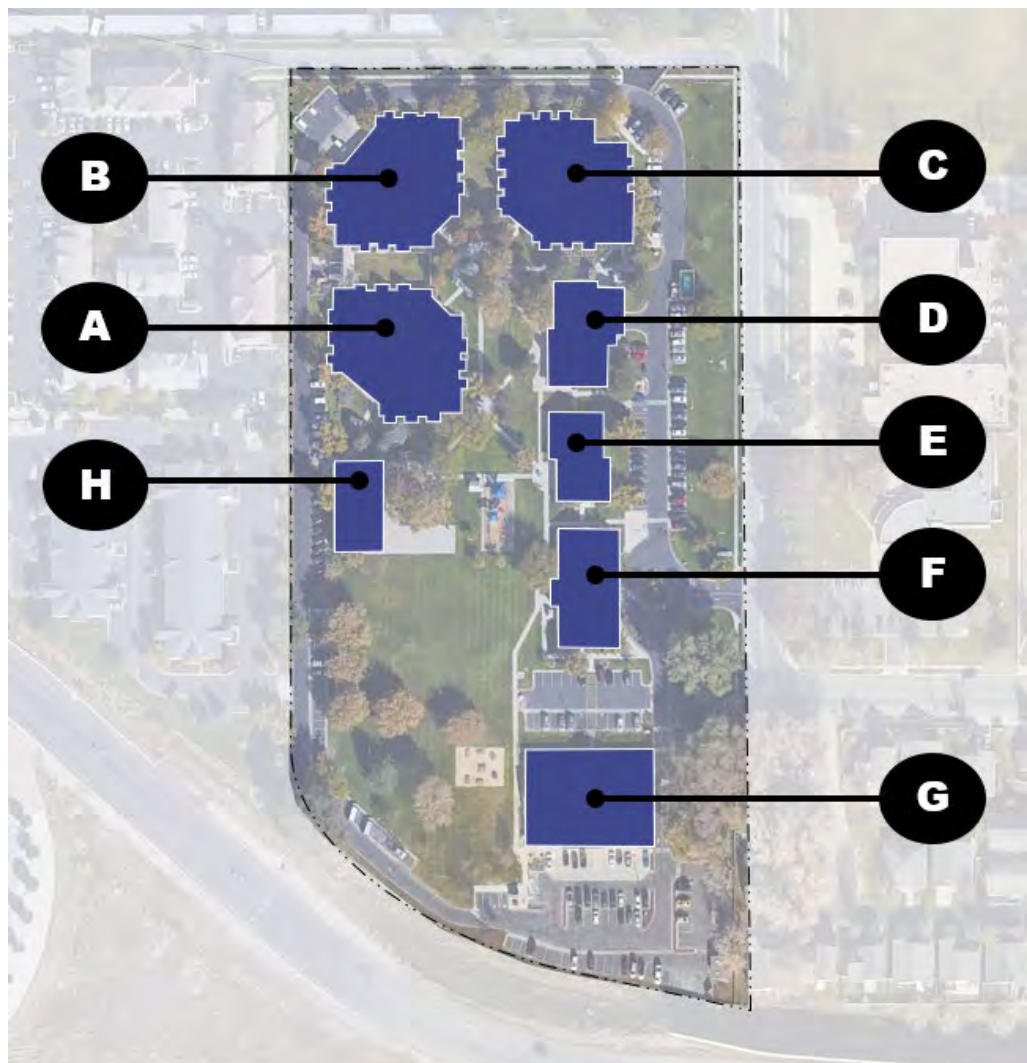




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KEY TO CAMPUS FACILITIES:

- A:** Adolescent Residential + Day Treatment
- B:** Inpatient Psychiatric Unit Building
- C:** Child Residential + Day Treatment
- D:** Wasatch Auditorium Building
- E:** Educational Services
- F:** Administrative Services
- G:** Primary Children's Center for Counseling
- H:** Recreational Services



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THE EXISTING CAMPUS

As can be seen in this aerial view, the WCBH campus is organized in two north-south rows a facilities which frame a central open space. Most of the campus is too densely developed to accommodate new construction without the prior demolition of one or more existing facilities. The southwest corner of the site, however, is relatively unencumbered, and is thus the starting point for locating development.



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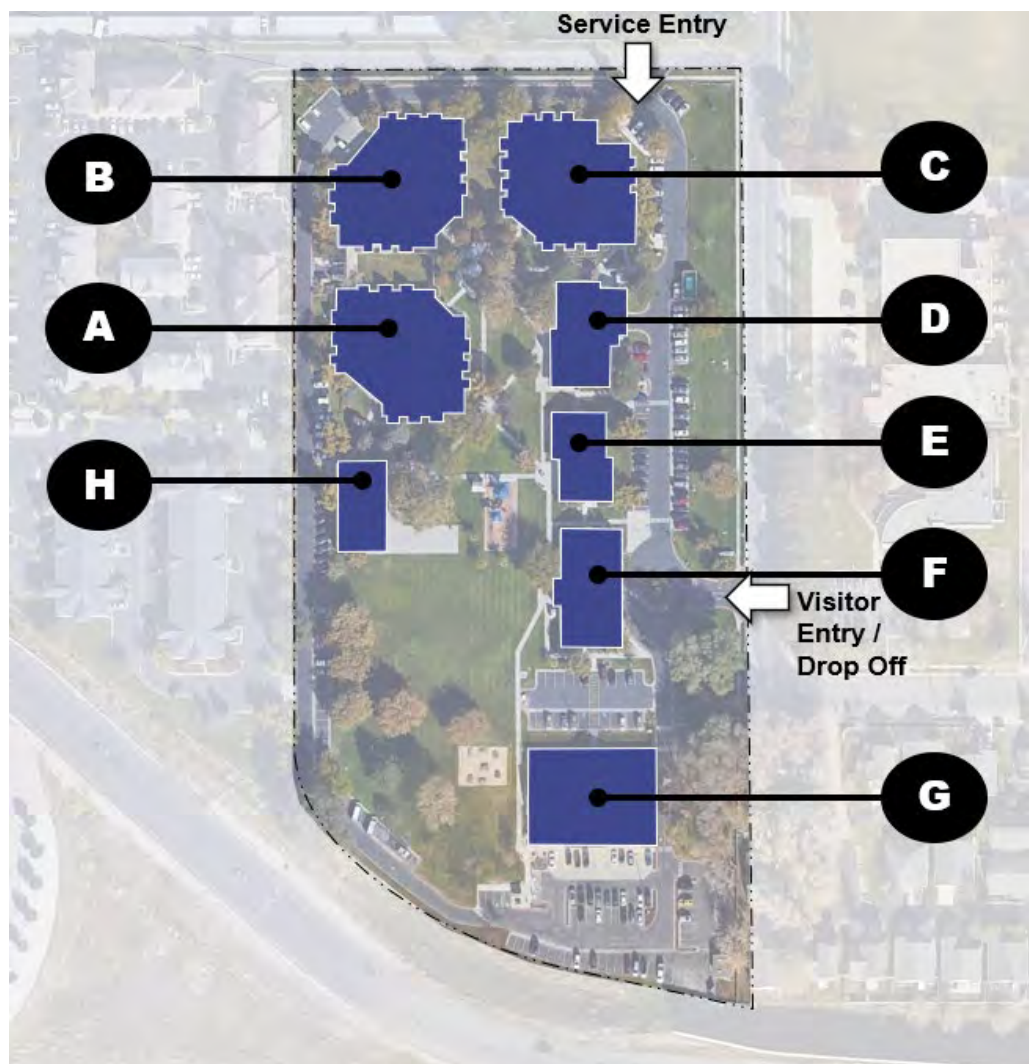




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CAMPUS ACCESS

As shown on the plan below, visitors and outpatient families enter the WCBH campus from the east. The facility currently located at that portion of the campus is the Administrative Building (F). Demolition of that structure would allow for a main entrance to the new facility to be aligned with the existing entrance drive and be accessible from day one.



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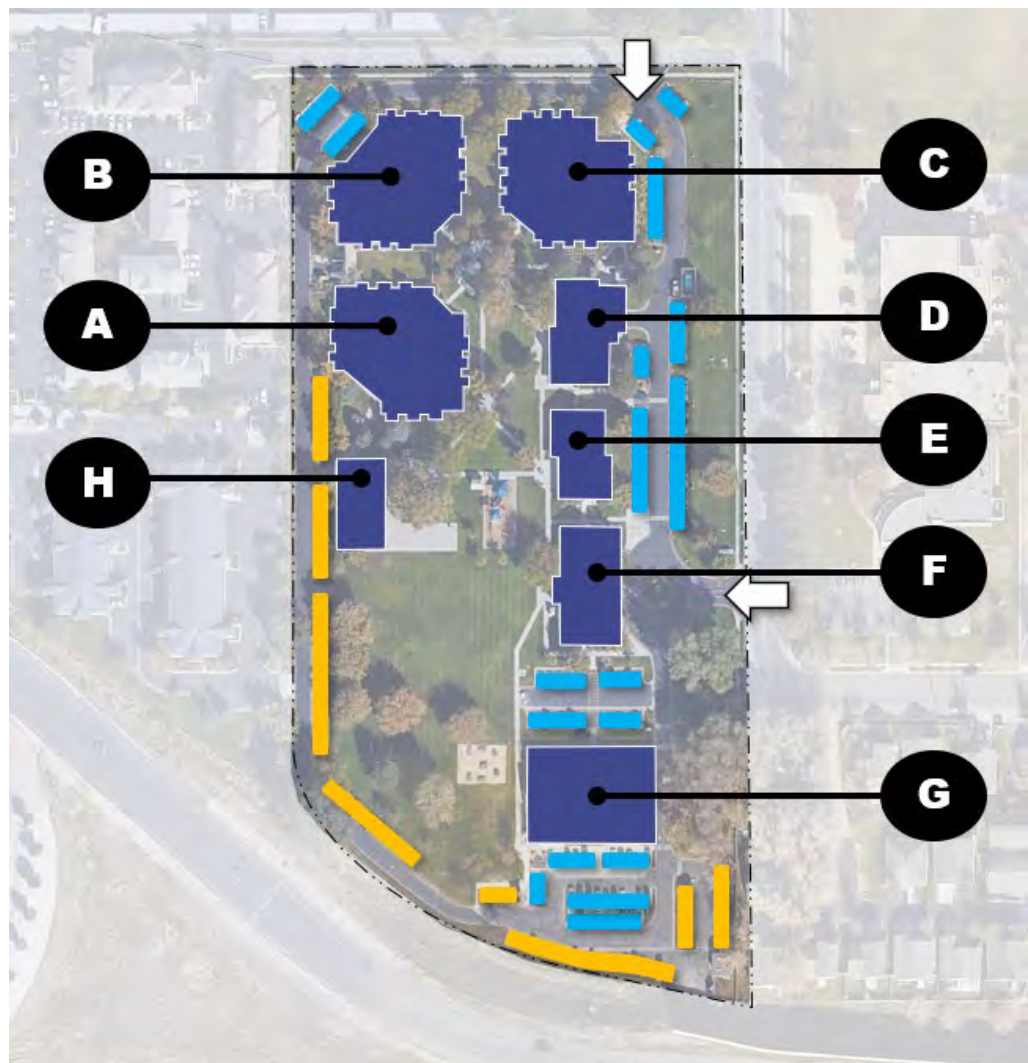




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CAMPUS PARKING

Parking on the WCBH campus is currently disbursed around the site, with the majority of visitor and outpatient parking on the east and northern portions (shown in blue), with staff parking located on the south and west (shown in yellow). Note the volume of outpatient parking clustered around the Center for Counseling (G).



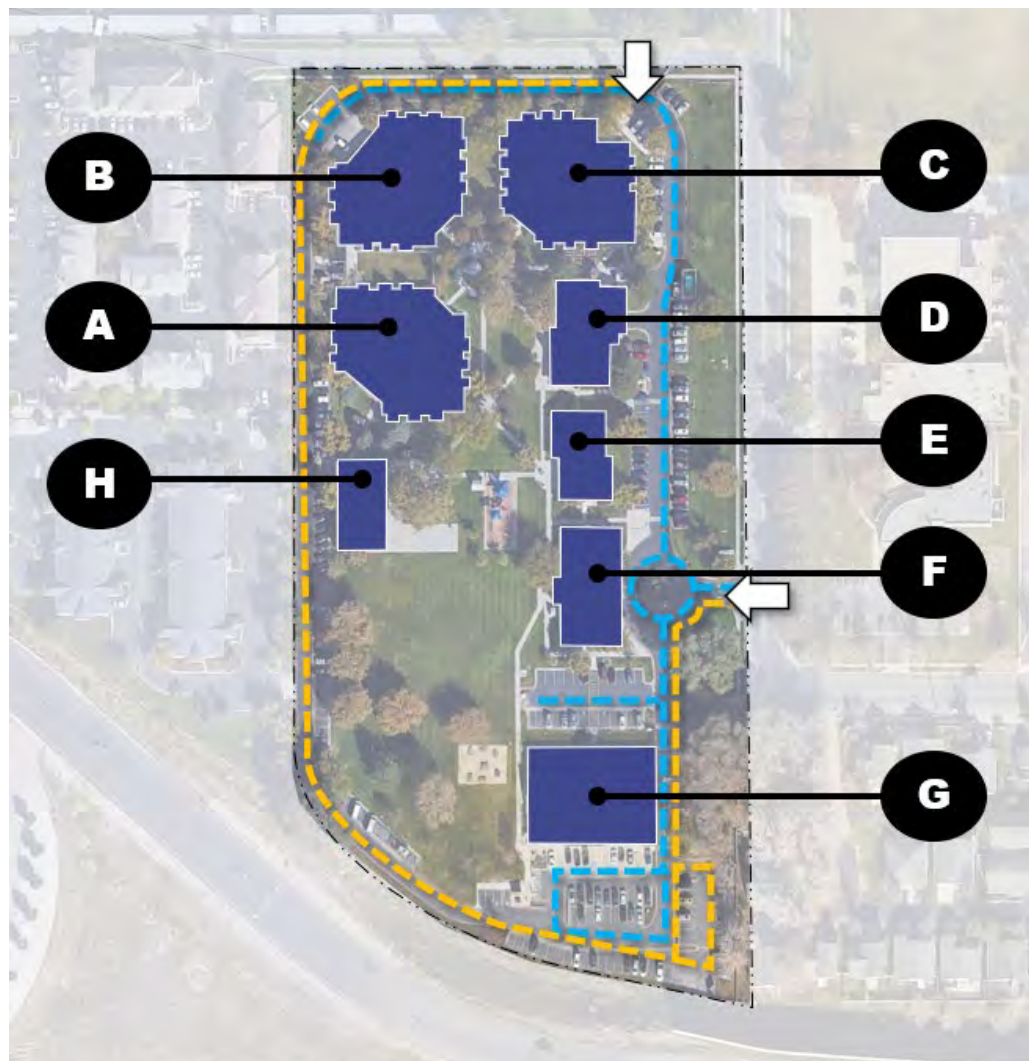
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VEHICULAR ROUTES

While the WCBH campus is ringed on all sides by vehicular drives, their utilization varies. As in the parking allocations, staff and service vehicles are concentrated to the west and south, with visitors and outpatients to the east and north. With the staff access at the northeast corner of the site, however, the northern drives must accommodate both types of traffic. Additionally, some staff access occurs at the entry on the east.

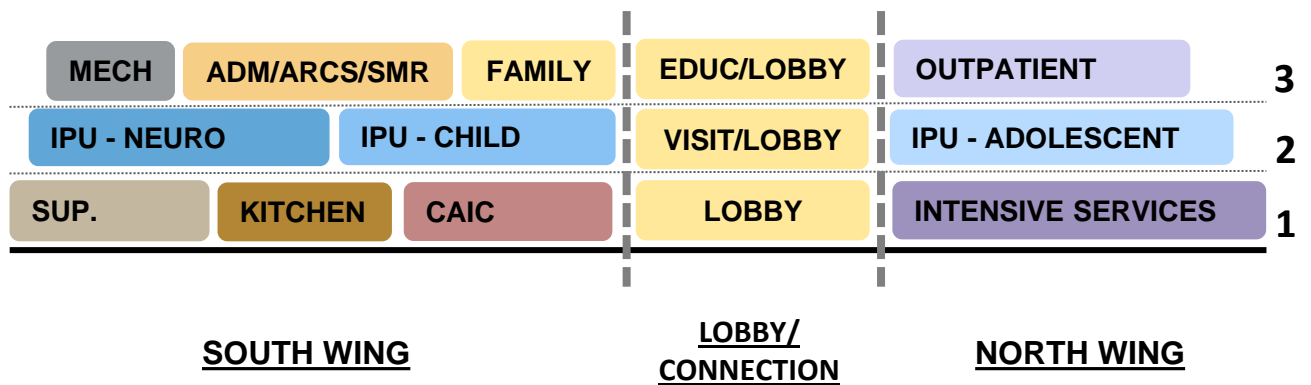




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BLOCKING AND STACKING

The size of the project is such that the facility will require two or three levels to fit on the site. During the pre-design meetings, an arrangement of the program by floor was developed, based on desired adjacencies and flows. This diagram was a useful launching point for the Schematic Design Phase of planning and design.



NOTE: The above diagram is not to scale.
Departmental blocks are for reference only and do not indicate relative size.

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PROGRAM SUMMARY BY FLOOR

CURRENT (DGSF)					
Level 1	Area	Level 2	Area	Level 3	Area
South Wing		South Wing		South Wing	
CAIC	6,966	Child	7,758	Admin, SMR & Intake	4,423
Facilities/Bldg Support	8,005	Neuro	5,758	Emergency Management	350
Kitchen	3,575	Pharmacy	208	Family Suite	1,296
		IPU Shared	1,914	Meditation	324
				DAS Room	125
TOTAL	18,546	TOTAL	15,638	TOTAL	6,518
Central Connection/Lobby		Central Connection/Lobby		Central Connection/Lobby	
Entrance and Lobby	1,512	IPU Shared	1,500	Education	1,350
TOTAL	1,512	TOTAL	1,500	TOTAL	1,350
North Wing		North Wing		North Wing	
Intensive Services	18,519	Adolescents	9,230	Outpatient	9,879
Pharmacy	104	High Acuity support	448	Blood Draw	481
		IPU Shared	1,914	Pharmacy	104
TOTAL	18,623	TOTAL	11,592	TOTAL	10,464
SUBTOTAL - LEVEL 1	38,681	SUBTOTAL - LEVEL 2	28,730	SUBTOTAL - LEVEL 3	18,332
BGSF Factor	1.13	BGSF Factor	1.13	BGSF Factor	1.13
				Penthouse	3430
TOTAL - LEVEL 1	43,710	TOTAL - LEVEL 2	32,465	TOTAL - LEVEL 3	24,145
BUILDING TOTAL					100,320

NOTE: Departmental programming is detailed on the following pages.

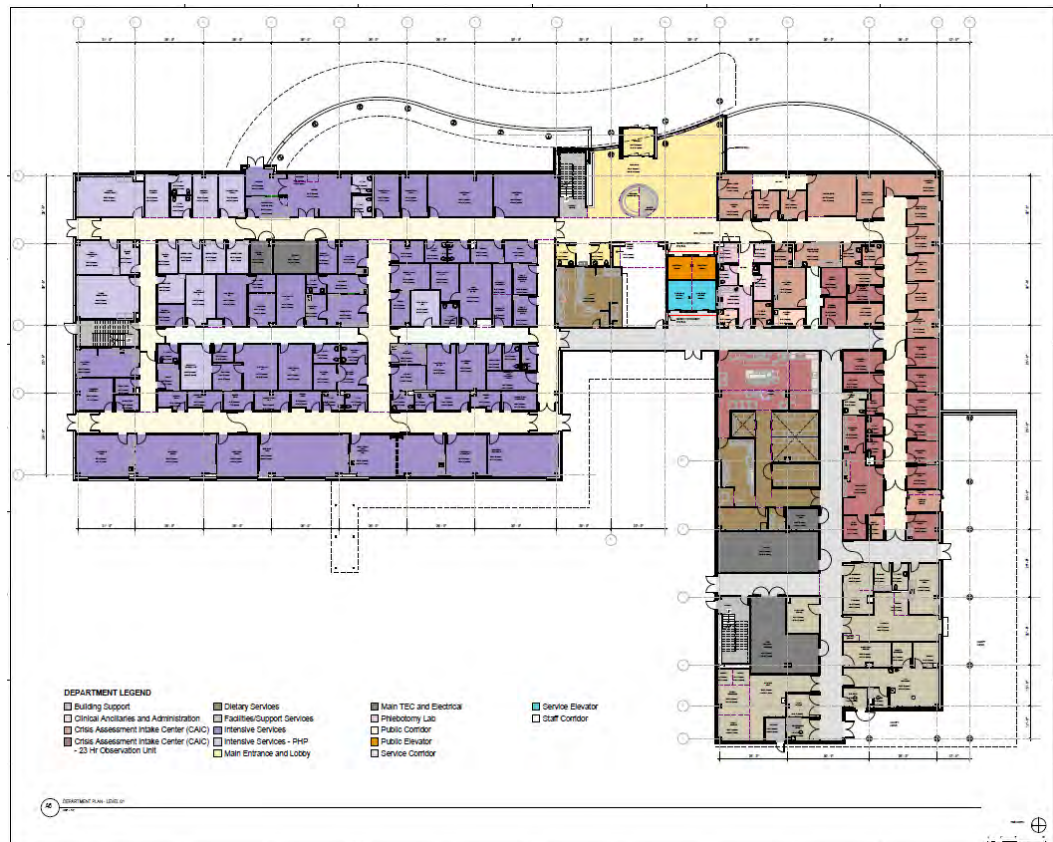
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LEVEL ONE



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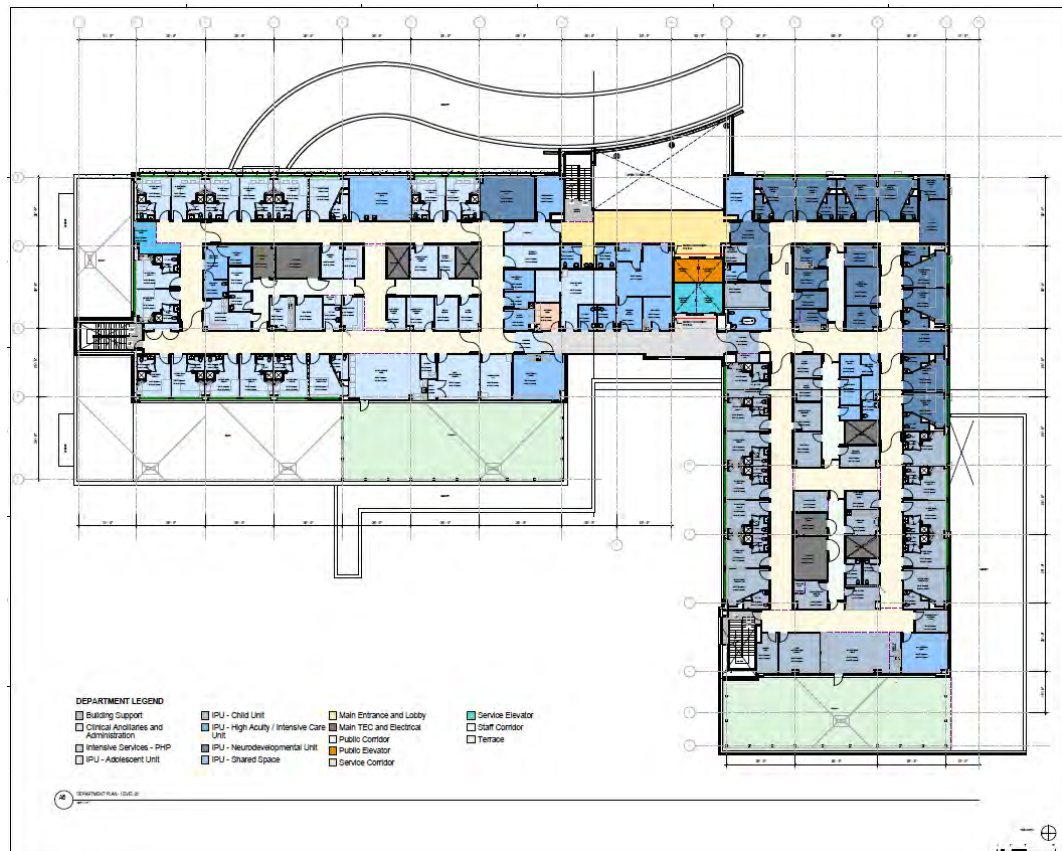
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LEVEL TWO



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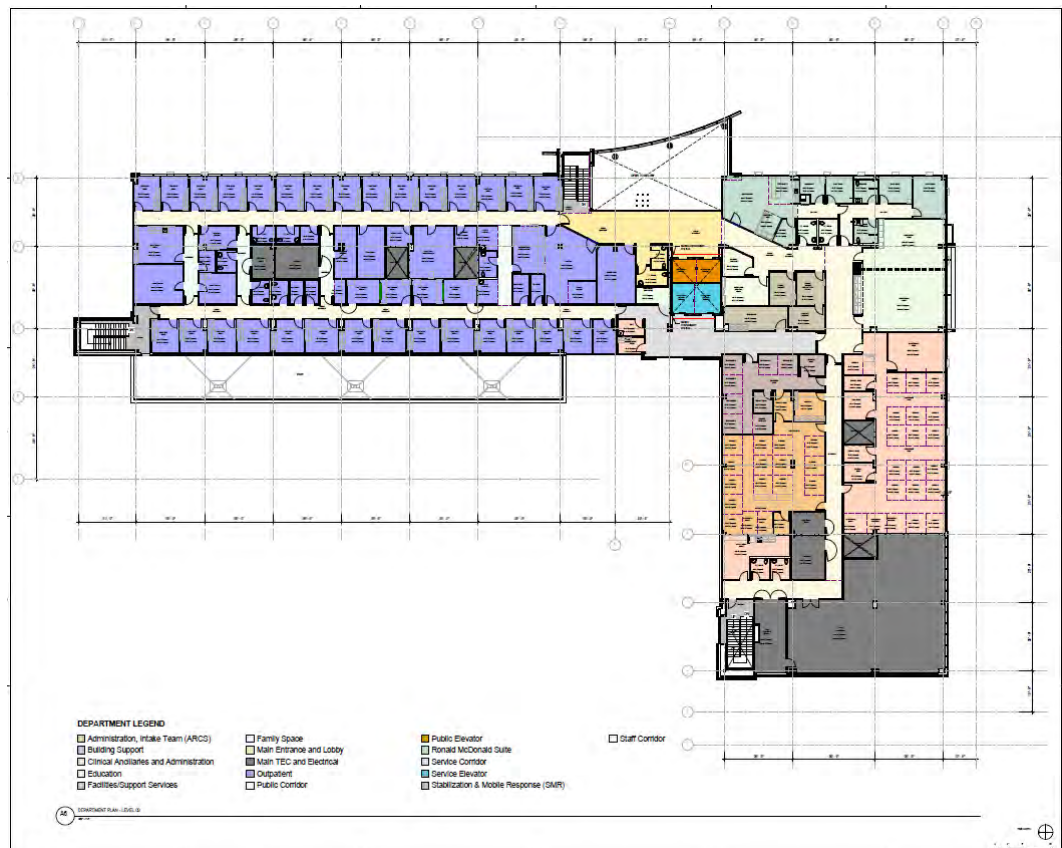
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LEVEL THREE



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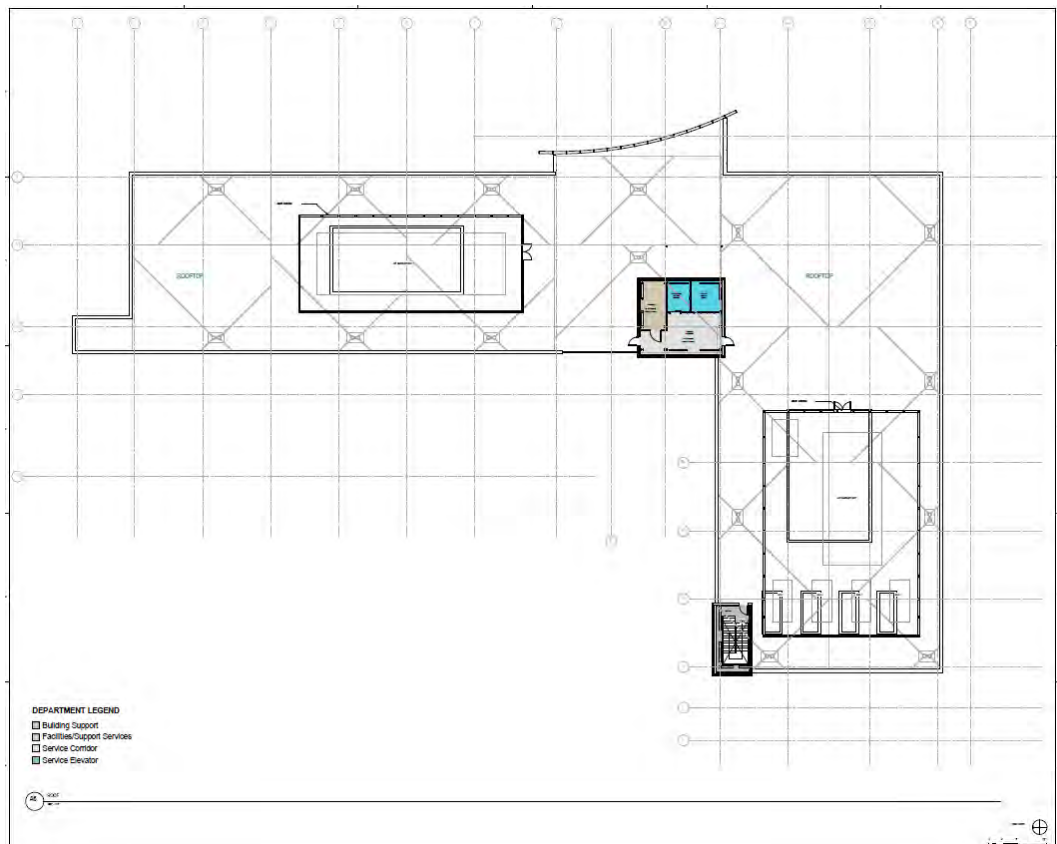
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ROOF



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On the main level, patient and visitor will arrive at the main entry lobby at the main entry drive. Our day use program patients can use a separate entry drive off 1500 West. Some of the key program spaces on this level include an arrival lobby, crisis assessment intake center, intensive service (day use), cafe, kitchen, blood draw, material management, loading dock and support spaces.

Crisis assessment and intake center (CAIC)

Functional statement:

The Crisis Assessment and Intake Center (CAIC) program offers behavioral health services to children and adolescents experiencing a behavioral health crisis in a therapeutic setting. The unit accepts both walk-ins and patients arriving by EMS or law enforcement. The CAIC provides three triage, six consultation rooms, and six observation rooms. The CAIC will be licensed as an Emergency Department. The CAIC will be located on the ground floor of the new facility with walk-in access from the main lobby and a discreet back of house vehicle drop-off.

Function program detail:

- Patients will not receive a full medical screening. Patients will be triaged to the extent capable at the location and will be stabilized to the best of capability/capacity and if necessary, transfer to another facility. When determined that it is not a medical emergency by medical staff, a patient will be triaged, evaluated and observed, before admission into the inpatient unit for over night care.
- Providers on site will consist of a Physician or APP to provide MSE

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- Walk-in services will be provided 24 hours/day.
- The Observation Unit will operate 24 hours/day.
- Patients will have a consultation with a behavioral health provider.
- Patients determined to need extended observation status will be admitted to the 23-hour observation unit.
- A care plan will be provided to each patient prior to check-out or discharge.
- A secure holding room is provided for patients in need of a safe room outside of the observation room.

Services offered:

Triage, consultation, and 23-hour observation for behavioral health patients in crisis.

Ancillary services provided:

All mechanical, electrical, and plumbing will be a part of the new facility and serviced by the Engineering Department.

Clinical Engineering:

All clinical supplies and services will be maintained and serviced by the Clinical Engineering department of Wasatch Canyons Behavioral Health.

Information Systems:

All computer and data networks will be services and maintained by the Wasatch Canyons Behavioral Health Information Systems department.

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Environmental Services:

This service will be provided by the Wasatch Canyons Behavioral Health Environmental Services department.

Nutritional Services:

This service will be provided by the Wasatch Canyons Behavioral Health Nutritional Services department. Meals will be served in the Dining/Day Activity Space.

Materials Management:

This service is provided by the Wasatch Canyons Behavioral Health Materials Management Department.

Departmental relationships:

Creation of an intake/admission center and crisis observation/stabilization unit on this campus. This would be an intake and triage center for patients. This space consists of consultation rooms and observation bays/beds and functions similar to an emergency department with a behavioral health needs focus. Rather than gurneys, patients often sit in recliners or couches with a 'living room' like feel. The consult room and observation bays/beds spaces should accommodate ~8-10 patients each at any given time.

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Intensive services

Functional statement:

The Intensive Services Program at Wasatch Canyons will provide day treatment, partial hospitalization, and intensive outpatient services to children and adolescents. The Intensive Services component will be located on the ground floor of the new facility with a dedicated front door separate from the main building entrance.

Functional program detail:

- The Partial Hospitalization Program (PHP) and the Day Treatment Program will provide one meal (lunch) per day, serviced from the facility's dietary services.
- Education services will be provided in the PHP and Day Treatment programs by licensed teachers.
- Staff will give prescription medication to patients as prescribed throughout the day.
- No medical care beyond first aid will be provided in the Intensive Services program.

Services offered:

Crisis Partial Hospitalization (PHP) - Provide therapeutic environments for children and adolescents as an alternative for youth at risk of inpatient psychiatric hospitalization, but are safe to be home at night and on weekends. The program is held during school hours, Monday through Friday, after which a patient returns home. this is a short-stay program with an average length of stay of 5-7 days.

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Day Treatment Program - Provide therapeutic environments that include education for children and adolescents who are not being successful in school. This program is held during school hours, Monday through Friday. This is a longer-stay program with an average length of stay of 6 weeks. For adolescent day treatment, it is anticipated to accommodate 24-30 patients at a time. For child day treatment, it is anticipated to accommodate 20-24 patients at a time.

Intensive Outpatient (IOP) - Provide therapeutic group intervention for children and adolescents who require more than an outpatient level of care but are not in acute crisis and are still successful in school and their activities. This program is held after school for 2-hour sessions and held 3 days a week. The average length of stay in these programs is 5 weeks. Because these programs are held after school, flexible space from the day treatment programs or PHP programs could be utilized instead of building out separate dedicated space.

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Inpatient Unit

Functional statement:

The inpatient behavioral health program offers Inpatient Psychiatric services to children and adolescents. The inpatient program is divided into three units: 12-bed Child Unit, 16-bed Adolescent Unit, and 8-bed Neurodevelopmental Unit. Each patient care unit has support spaces which includes group rooms, eating areas, quiet rooms, consultation rooms, and caregiver workstations.

Functional program detail:

- We will provide safe high-quality care to those admitted to the inpatient unit.
- All bedrooms are private bedrooms with a day bed for visitors to stay overnight as determined appropriate by the clinical team.
- Dining will occur on the unit in the combined Dining/Day Activity space.
- Both the child and adolescent units will have direct access to outdoor space utilizing an adjacent outdoor terrace. Neurodevelopmental patients will access the outdoor terrace via the child unit when determined appropriate by the clinical team. The terraces will have a 14'-0" high non-climbable perimeter.

Services offered:

Safe milieu, group and individual therapy, recreational activities, psychotherapy.

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Level 3 consist of outpatient clinic, Ronald McDonald House, ancillary behavioral health support and administration spaces.

Outpatient Clinic

Functional statement:

The Outpatient Clinic at Wasatch Canyons will provide outpatient behavioral health services to children and adolescents.

Functional program detail:

- Patients and families will receive outpatient services such as outpatient therapy, med visits, PCIT, and psych testing.
- Staff will not provide medication to patients.
- No medical care beyond first aid will be provided in the Intensive Services program.

Services offered:

The Outpatient Psychiatric clinic provides a variety of services including individual therapy, group therapy, medication management, and psychological testing. The clinic also specializes in play therapy and Parent Child Interaction Therapy (PCIT) which requires more specialized rooms. The clinic space accommodate approximately 18-22 providers at any given time. In the new facility, treatment room designed with emphasis on flexibility use of spaces between treatment areas and provider/car giver work spaces.

Departmental relationships:

The Outpatient Clinic will have direct access to the third-floor lobby and a back of house connection to services.

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