



Queensland Children's Hospital



QCH Project Status September 2008

Queensland Health with Conrad Gargett Lyons



we're building a
healthier
community

Fast Facts

Fast Facts

1. QCH will provide secondary, tertiary and quaternary services
2. Act as the hub of a statewide tertiary network
3. 437 beds including 359 public beds
4. To be opened in stages from 2011-2014
5. Committed budget of \$1.1B

Fast Facts- Bed Numbers

		<i>In New Building</i>	<i>In MCH Building</i>	<i>Private Beds</i>	<i>TOTAL Beds</i>
CRITICAL CARE BEDS	PICU/HDU	36	-		
	NICU	12	-		
		48	-	0	48
MULTIDAY BEDS	Inpatient	144	-		
	Babies Inpatient	24	-		
	Rehabilitation	-	12		
	Mental Health	20	-		
		188	12	60 approx	260
SAME DAY BEDS	Renal Dialysis	6	-		
	Oncology	22	-		
	Other Day Medical	8	-		
	Sleep Lab	-	6		
	Day Rehab	-	12		
	ED Short Stay	18	-		
	CYMHS	12	-		
	Same Day Surgery	27	-		
		93	18	18	129
		359		78	437

Fast Facts- Operating theatres

New, Fully Fitted Out	14
Future	6
<i>TOTAL</i>	20

Note:

- *All theatres 2 x 64sqm, 8 x 52sqm, 4 x 36sqm*
- *All theatres have an induction room (18sqm)*
- *Includes 1 Cath lab*
- *Includes 1 MRI serving two theatres (MRI available for diagnostics)*
- *Includes 4 Theatre- Procedural Suite*
- *Additional procedure rooms (36sqm) are provided in emergency, oncology and burns areas*
- *Compares to 12.5 current*

Fast Facts- ED Numbers

- Provision made for 70,000 attendances
- Strategies being explored to further improve through puts:
 - *Patient streaming into Short and Long flows*
 - *Short flows to facilitate quick turnaround*
 - *Long flows to be adjacent Short Stay Ward*

Note:

- *Expansion capacity planned adjacent emergency department*
- *Brisbane north side emergency option being explored*
- *Enhancements planned to ED departments in SE QLD to accommodate paediatrics*

Fast Facts- Building Area

Current MCH	23,529 m2
	GFA

Current RCH	38,327m2
	GFA

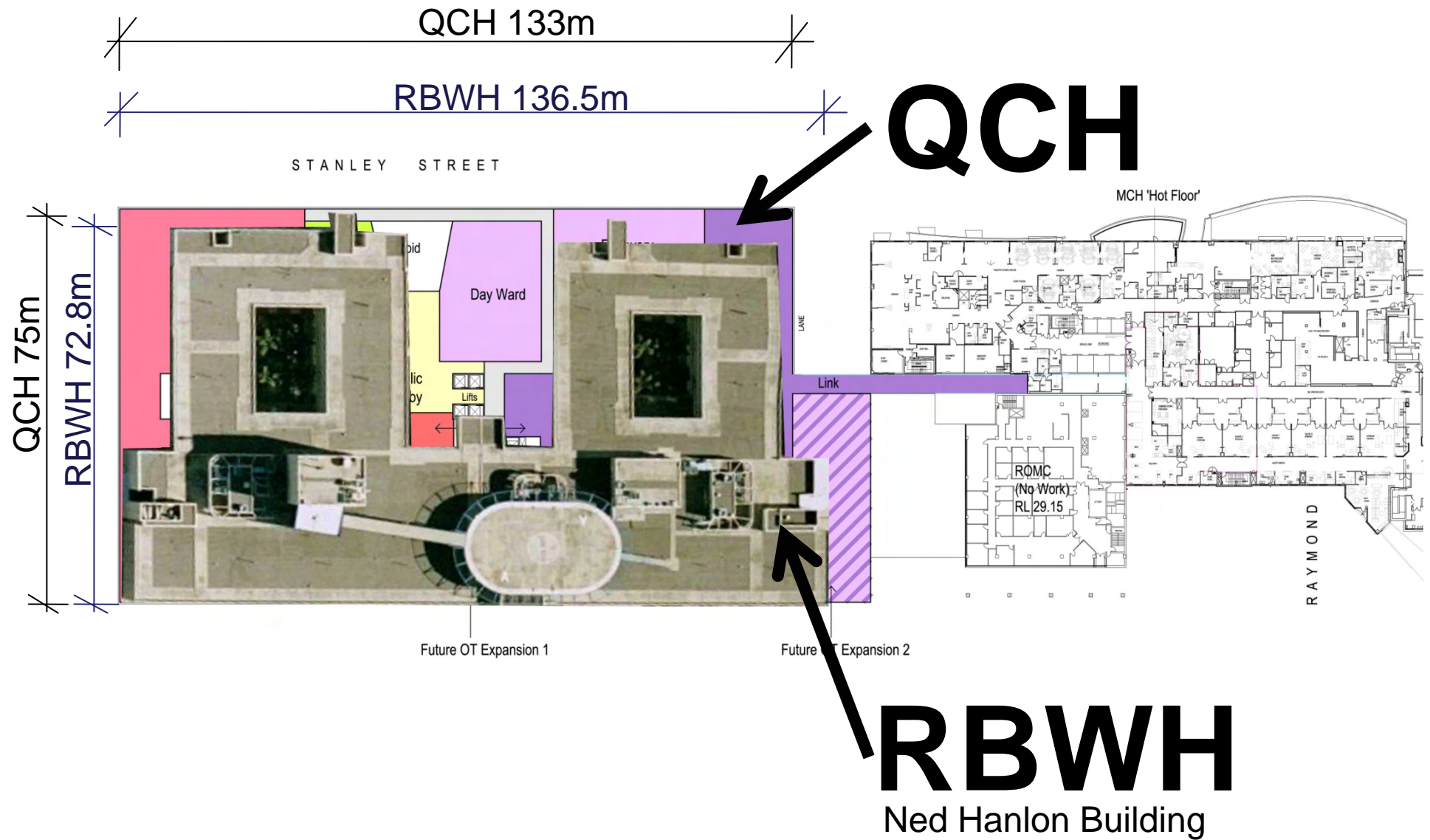
Total	<u>61,856</u> m2
	GFA

Fast Facts- Building Area

Proposed QCH:

74,510_{m2} GFA

Fast Facts- Building Size

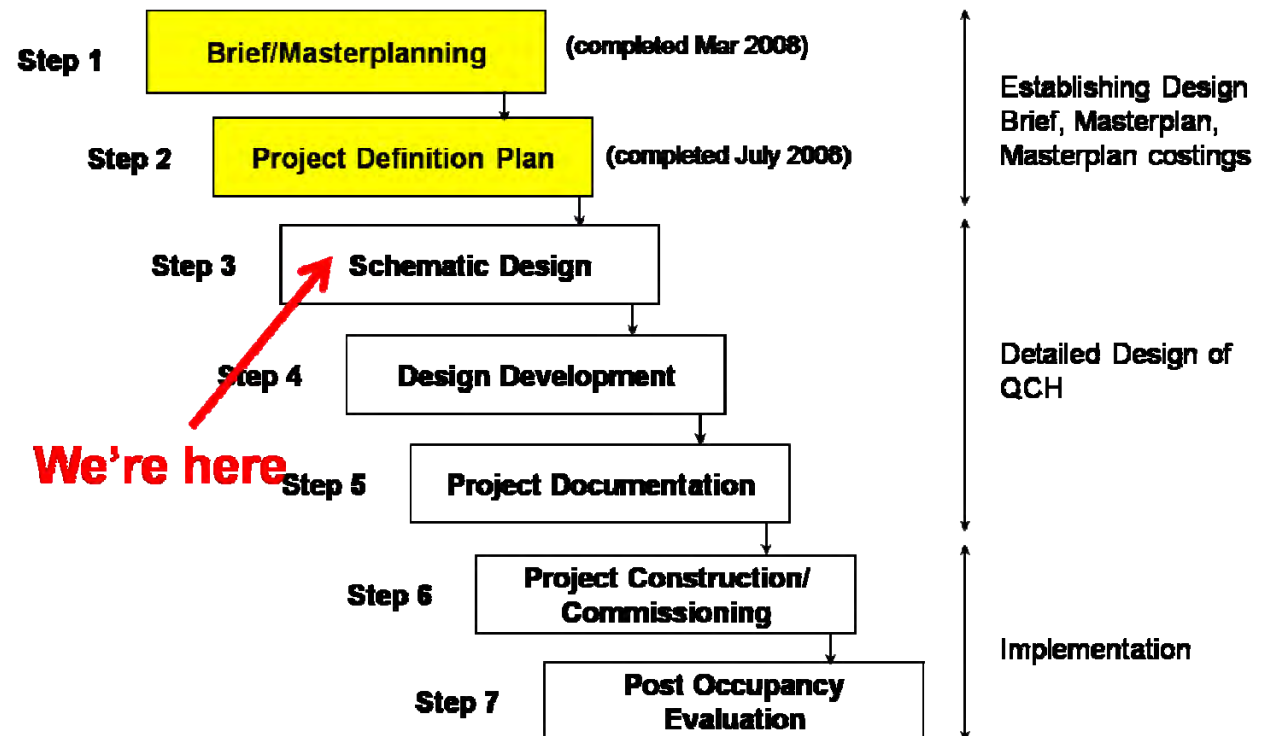


The process

Mellis Report

Government Announcement

Health Services Plan- SIG/ SAG process



Design a children's precinct

Build a community building

The patient journey, supported by interconnected services should be the focus of QCH

Build brand

Green and Outdoor-QLD feel

Not a Hospital

High quality (coordinated) health care

24/7 access to (support) services

Small feel, BIG place

Building a culture that brings together partners and their respective parts into a sum that's greater than the whole

Access to Continued Learning

Culture of Teamwork

Legible campus with a clear front door

QCH must support people to achieve their greatest potential

Culture of Leadership

'Positives' We'd Like to Retain in the New QCH

..commitment to **research**..

..*relationship between **staff, patients, families***..

..**patient** focussed, **family** focussed..

..***working together**; team culture; interaction*..

..sense of **pride**; **commitment** to
what we do..

..continuous improvement; **innovation**..

..***end to end** co-ordinated care*..

..our commitment to our vision to be among the **world's best**..

..***outreach and support** to our rural and
regional Queensland communities*..

..**friendly for kids**; caring, nurturing environment..

Things We Want to **Avoid** in the new QCH/Major Challenges

..silo thinking (silo service delivery)..
..poor accessibility; poor legibility..

..lack of integration of services;
fragmented care model..
..overwhelming scale..

..poorly defined governance structure..

..not enough space..

..not enough resources (money,
people, CT, etc) to do the job properly..
..inability to grow/expand; inflexibility..

..lack of integration between QCH, secondary hospitals
and primary/community care..
..change management..

..hanging on to old discipline centric models of care..

DEVELOPING THE DESIGN BRIEF – Guiding Design Principles

Our Care Model

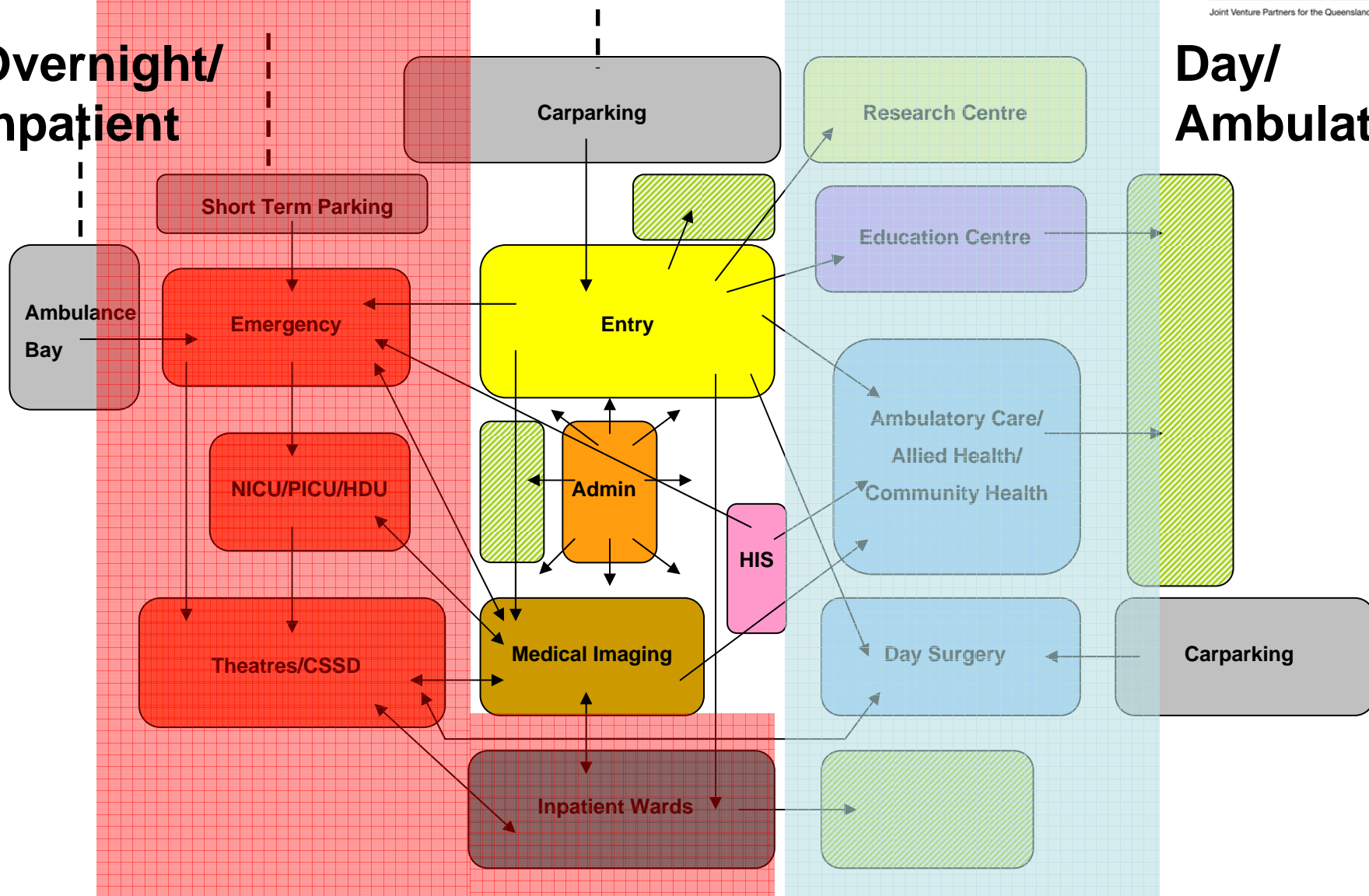
- patient and their families at the centre
- continuum of care, seamless
- a clear 'care journey'
- care across all QCH age groups Statewide
- responsiveness
- efficient
- timely
- provision of information
- shared decision making
- respecting people's time
- **'one stop shop'** (vs. distributed, fragmented services)
- services readily navigable and linked
- connected back to the community



[illegible]

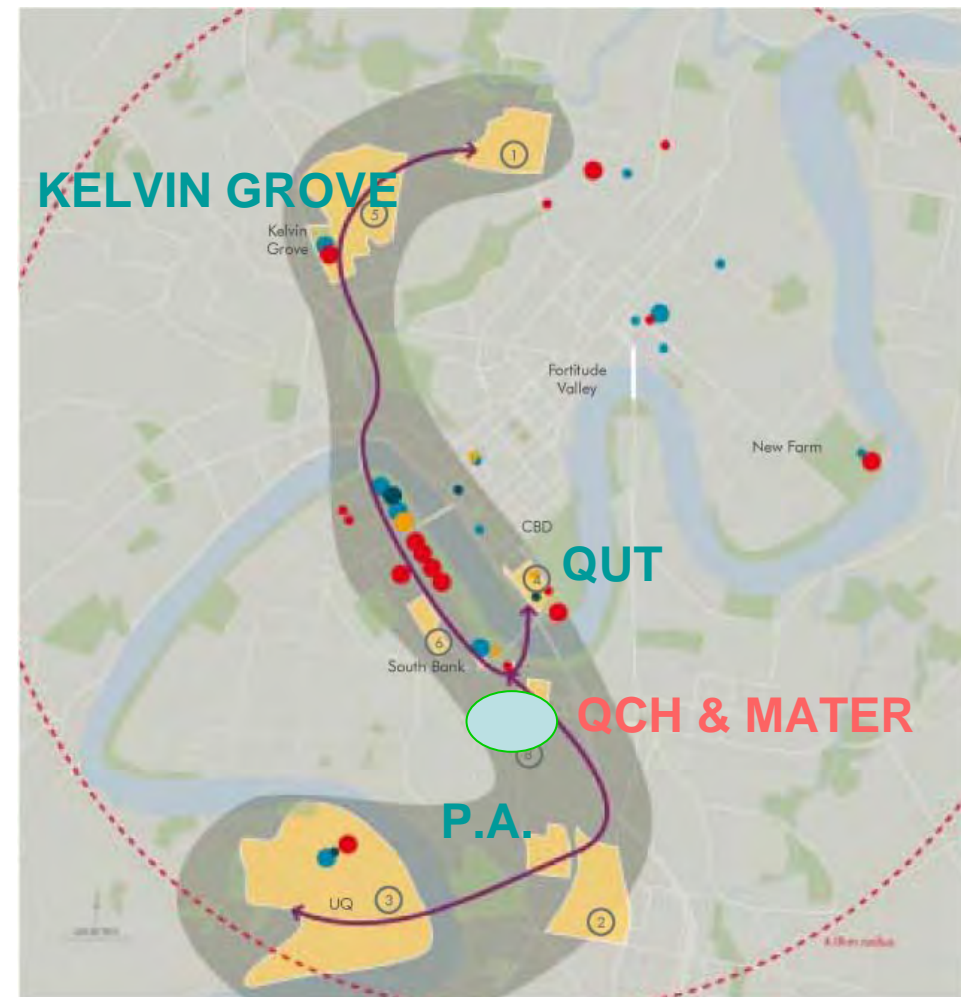
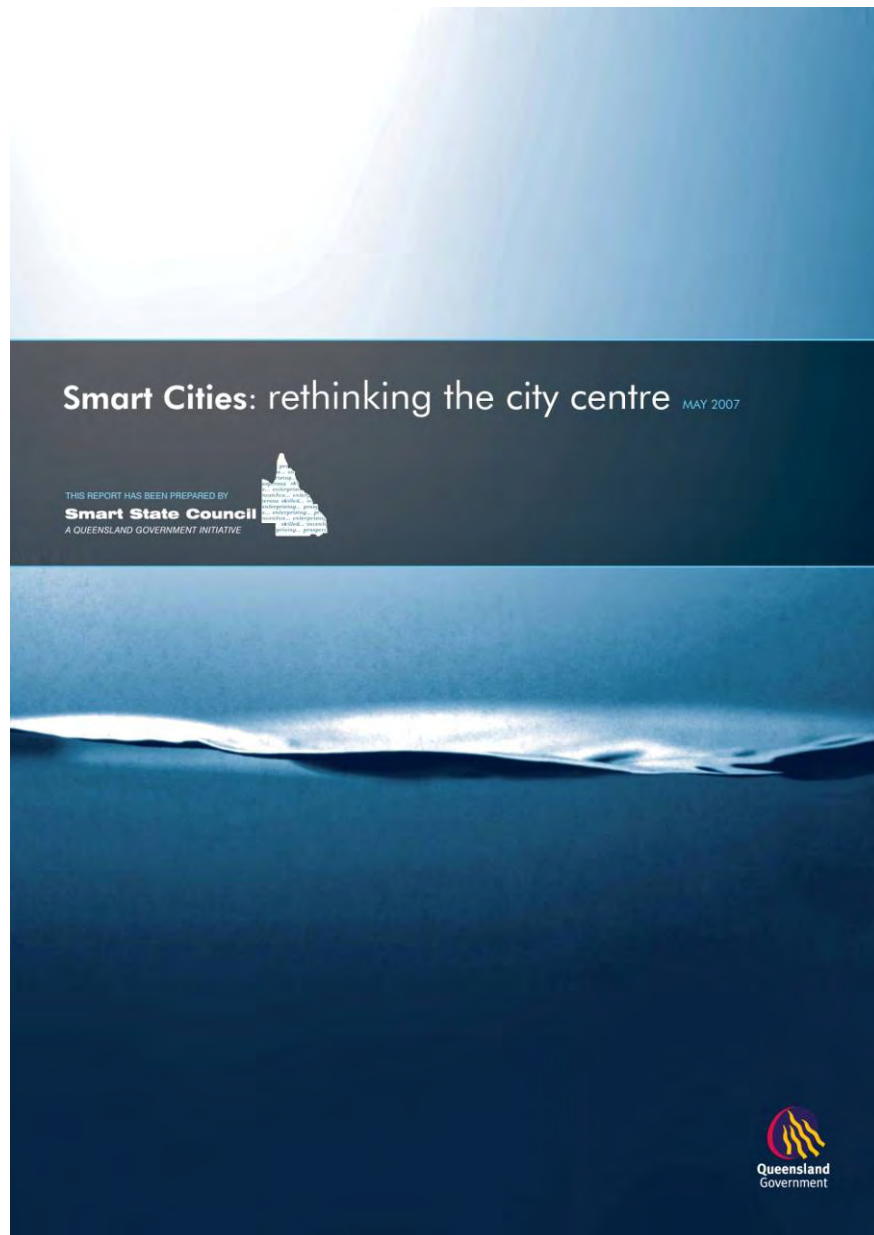
Overnight/ Inpatient

Day/ Ambulatory









'KNOWLEDGE' CORRIDOR

Health Services Plan



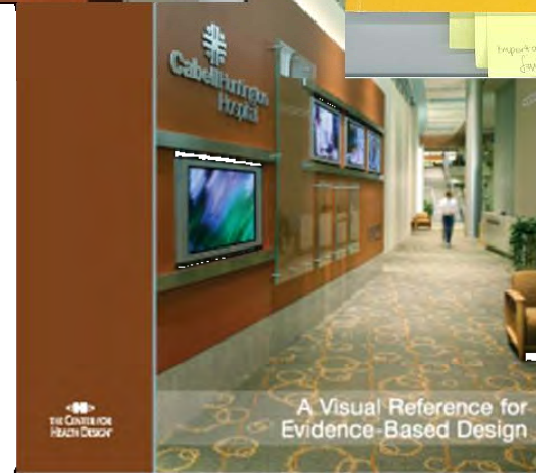
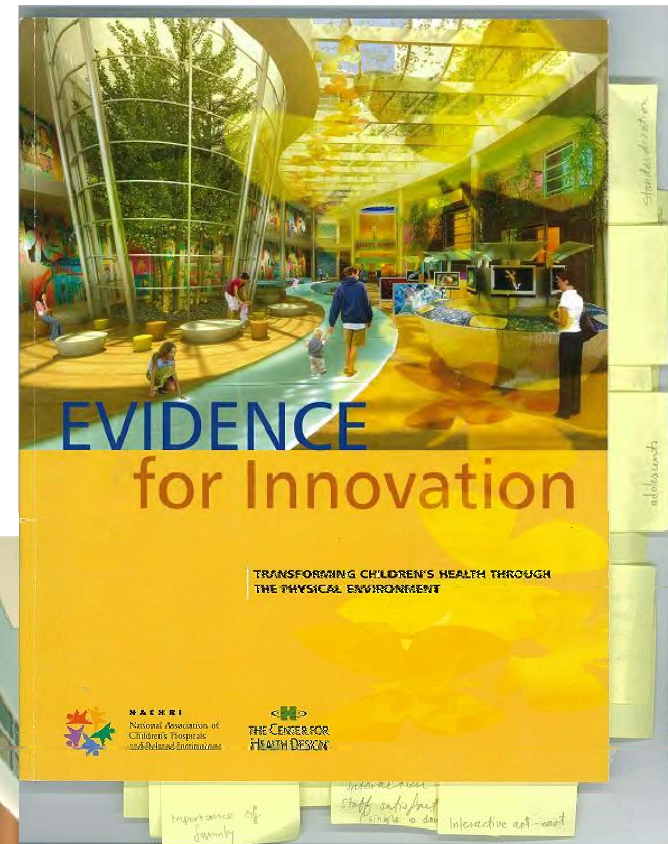
+ Benchmarking/ Review

Royal Children's Hospital,
Melbourne

National Paediatric
Hospital, Dublin



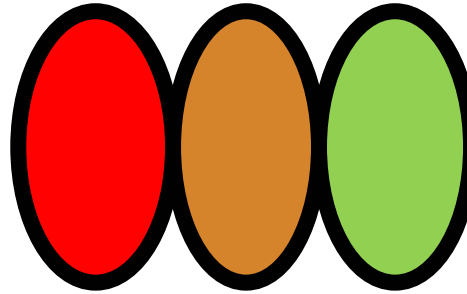
Masterplan, Departmental Area Schedules





GROUP LEARNING

- 150 pp flat floor theatre
- Access to breakout space



Learning environments (Education Centre)....

COLLABORATION HUB

- Conference style rooms for 24 and 50pp
- All rooms divisible into smaller areas
- ICT rich environments
- Tutorial rooms

SPECIALIST TRAINING ROOMS

- Mock ward
- Generic space for multipurpose training
- Subdivisible
- ICT rich

SELF PACED LEARNING

- Carrels
- Quiet reading area

RESOURCE AREAS

- Computer labs
- Computers fixed in conference rooms



