

Designing for Many: Renovation of the Retina Space at Wills Eye Hospital

Combining ideas from other retina centers may improve efficiency in practices considering renovation projects.

By Scott Krzywonos, Associate Editor

The retina field changes at a breakneck pace, and, as the field advances beyond the status quo, new methodologies, technologies, medications, and imaging modalities offer physicians the opportunity to better treat patients for retinal diseases—so long as the physical practice keeps pace with those changes.

The physical space in which retina physicians practice does not always mirror the field's rapid growth. Retina practices, like all buildings, need renovation from time to time. When it came time for the Wills Eye Hospital in Philadelphia to undergo a facelift, the directors of the program saw it as an opportunity to craft a space that accommodates current concerns in patient care and future trends in the developing field.

The committee that designed the renovated retina center at Wills Eye Hospital knew that creating a dynamic space to accommodate current concepts that was also flexible enough to adapt to changing trends would entail more than a simple paint job. Instead, each aspect of the new space would have to be carefully conceived so as to maximize staff efficiency while instilling confidence in patients that they would be receiving top-notch care at a world-class facility.

"The field of retina has changed immensely over the past decade, mainly with optical coherence tomography as a new diagnostic tool and anti-VEGF injections as the new standard treatment for our most common vision-threatening retinal diseases," Carl D. Regillo, MD, FACS, director of retina service at Wills Eye Hospital, said at the opening of the facility. "In order to utilize these new diagnostic and therapeutic approaches in the most efficient and effective manner, our space at the retina service at Wills Eye Hospital needed to be redesigned. The changes reflect not only what is needed now but also what we think will be emerging in our field in the future."



All photographs courtesy of Roger Barone/Wills Eye Hospital

Figure 1. Designing a space with doors that sit on sliding rails saved enough room to add 14 new examination and treatment rooms.



Figure 2. One of the subwaiting rooms, where patients wait for a physician after check-in.

DESIGNING FOR PHYSICIANS

Before designing a suitable new space for the physicians at Wills Eye Hospital, Rhonda Ceretelle, the director of the renovation project, began by taking multiple road trips to well-known, established retina practices. These research trips proved invaluable in creating a new practice setting that could accommodate additional physicians without increasing overall square footage.

“We visited the Bascom Palmer Eye Institute, the Massachusetts Eye and Ear Infirmary, and the Emory Eye Center, all of which had recently undergone a renovation project in the retina department,” Ms. Ceretelle said. “We felt that learning about the successes and challenges of other institutions would help streamline our project. It did.”

Ms. Ceretelle studied architectural innovations at each institution and presented to the committee those she felt were most conducive to helping Wills Eye Hospital achieve its goals. “Our finished product is a conglomeration of the finest ideas we gathered from these institutions,” she said.

Each physician now has his or her own area, consisting of 2 examination rooms and 1 treatment room. All of the testing rooms are centrally located in the facility, and patients enrolled in research trials are only a few feet away from where researchers work. These obvious changes to the practice setting immediately improved patient throughput and staff efficiency, but the more subtle upgrades to the facility made the most significant impacts.

The doors to each examination and treatment room slide along rails located above the door frame, lending the hospital a modern aesthetic (Figure 1). This change, though seemingly small, had big consequences: The move from conventional doors to sliding doors gave the retina center enough extra space to accommodate an additional 14 examination and treatment rooms and gave each physician extra space to practice.

The doors are wider than they were in the previous design.



Figure 3. The front doors, as seen from inside the large waiting room, where the staff checks in patients.

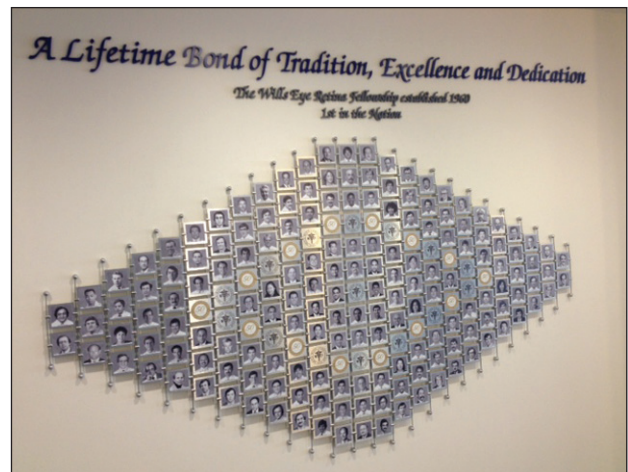


Figure 4. Individual plaques honor current and former fellows in the Wills Eye Retina Fellowship.

Wider doors allow patients with low vision a larger margin for entering the room, and they better accommodate larger patients and patients in wheelchairs.

Large light fixtures hang at each intersection, and small lights adorn the length of the hallways, a design that passes as a trendy style choice to even the most observant patient. But the fixtures, like the sliding doors, serve a purpose: Physicians instruct patients with low vision to use the large light fixtures—conveniently situated above adjoining hallways—as landmarks while they navigate the hospital’s halls.

DESIGNING FOR PATIENTS

In redesigning the space, the committee in charge of renovation constantly kept patient care at the forefront of its focus. Any interruption in patient flow or volume was viewed as a failure.

“Something we are most proud of is that all of the construction phases were conducted without interruption

“If you go to a place that is beautiful and that works with streamlined efficiency, it makes it feel like your medical experience is as perfect as possible.”

—Julia Haller, MD

to patient care or patient volume,” Ms. Ceretelle said. “Patients were aware of the project. We had signage informing the patients of construction. A model of the finished product showed patients what to expect. They enjoyed it. They felt that they were part of the project.”

The retina center now has 3 waiting rooms: a large waiting room where staff members check in patients and review the business end of patient care; and a pair of small, subwaiting rooms, located on either side of the patient area, where patients wait to be seen by a physician (Figure 2). The committee members designated a different color for the each subwaiting room so staff could easily reference the rooms to each other.

The practice’s improved patient flow helps patients feel that they are participants in their own treatment, according to the Wills Eye Hospital Ophthalmologist-in-Chief, Julia Haller, MD.

“When patients move from the large waiting room to the subwaiting rooms, they understand that they are part of a practice that operates in a logical, controlled, and efficient manner,” Dr. Haller said. “Patients become aware of this movement and better understand their progression along a diagnostic and therapeutic timeline by moving from space to space.”

DESIGNING FOR TRADITION

A shining silver rhombus to the left of the front door greets patients and staff entering the facility (Figures 3 and 4). Protruding a few inches from the wall, the diamond is composed of a series of small plaques, each featuring the face and name of a former or current fellow of the Wills Eye Retina Fellowship, which was established in 1960 as the first retina fellowship program. The plaques remind patients and staff walking through the doors of Wills Eye Hospital of this proud tradition.

When the redesigned facility opened, Arunan Sivalingam, MD, director of the retina fellowship at Wills Eye Hospital, reminded his colleagues, “Fellows are the lifeblood of why we practice. That is why we have a series of plaques dedicated to them: to remind our patients how proud we are of our retina fellowship, and to remind everyone here of the important role they play at Wills Eye Hospital.”

Images of the city of Philadelphia decorate the walls of the waiting rooms and the subwaiting rooms. The images might seem trite to residents of the city, but to the many patients who visit Wills Eye Hospital from outside of the city, the images serve as a reminder that they are in the center of a major metropolis home to a state-of-the-art eye hospital. The cityscapes complement the sense of history and tradition patients first encountered with the fellowship plaques.

“It was important that we show the history of Wills Eye Hospital to our patients,” Dr. Haller said. “They know that Wills takes pride in its academic and medical product, but the institution also wanted to emphasize its pride in our history and tradition.”

The retina center at Wills Eye Hospital has already welcomed visitors who are planning renovation projects of their own. Attendees of the Atlantic Coast Retina Conference in January 2014 took interest in the renovations, asked many questions, and discussed borrowing some ideas from the Wills Eye Hospital renovation project for their own redesign efforts.

“Many of our graduating fellows can take what they learned from this renovation project and apply it to their own practices when they move along their career path,” Ms. Ceretelle said.

PULLING IT ALL TOGETHER

Orchestrating a renovation plan that balanced physician needs, patient concerns, and a narrative of tradition—all while easing patient anxiety and avoiding interrupting patient volume and flow—proved challenging, and attention to detail and to large-scale concerns were equally important.

“There are so many little touches that make a difference in our logistical operations, and our facility runs very efficiently because of our attention to detail during the renovation process,” Dr. Haller said. “And the visual upgrade translates to greater patient confidence in our institution.”

Dr. Haller noted that patient confidence in the quality of care at Wills Eye Hospital has always been high, but the renovation project was an opportunity to spruce up the hospital’s façade. Inspired by the philosophy of Apple CEO Steve Jobs, Dr. Haller explained that the modern, professional appearance of an institution like Wills Eye Hospital strengthens patients’ perceptions of the facility.

“If the packaging is beautiful and elegant, and if what you find inside is beautiful and elegant, then it makes patients feel like what is on the inside is of the highest quality,” Dr. Haller explained, paraphrasing Mr. Jobs. “If you go to a place that is beautiful and that works with streamlined efficiency, it makes it feel like your medical experience is as perfect as possible.”

She added, “We want to show our patients and staff that we think highly of them and of this institution, and that our pride in the work we do is reflected in the facility in which we practice.” ■