

Hospital Wraps up Drama-Free Move to New Tower

By Tyler Smith

Dave Comeau slowly inspected his new room. He liked what he saw.

Bright sunlight shone through a large window looking out on a bright blue Colorado sky and flawless views of downtown Denver and, beyond, the Rocky Mountains. A flat-screen television hung from the south wall. The spacious bathroom was conveniently positioned near the bed. A hand-held call system allowed him to order what he needed.



Team of providers looks on as the first patient inspects his new room in the Oncology Unit in AIP 2.

The gleaming accommodations would help soften the blow of being hospitalized for Comeau, 65, the first patient to move into University of Colorado Hospital's new Oncology Unit on the 11th floor of Anschutz Inpatient Pavilion (AIP) 2 the morning of June 8.

Comeau once stood on the opposite side of the patient-provider divide. He worked at UCH for five years, serving at both the Ninth Avenue and Anschutz Medical campuses as a nurse anesthetist. Asked how his new room compared with the hospital rooms on Ninth Avenue, he chuckled.

"These are half again larger," Comeau said as clinical nurse Johanna Crock, RN, showed him around.



Oncology nurse Johanna Crock, RN (center, right), demonstrates call system to patient Dave Comeau.

The wrap-up. Comeau's move, a little after 8 a.m., kicked off phase two of the hospital's move to the AIP 2 tower, which included opening 36 beds on the new Oncology/Gynecologic Oncology/Medicine Unit; moving the Medical Intensive Care Unit (MICU) from the second floor of the AIP to a 24-bed unit on the 10th floor of AIP 2; and transitioning the 6 East Medicine Specialties Unit to a 36-bed home on the ninth floor of the new tower.

By 9:15 a.m., Oncology had brought nine patients to AIP 2. The MICU followed immediately, moving all 17 patients by 11:30 a.m., well ahead of schedule. Medicine Specialties kicked off its move of 23 patients at 10:30 a.m. and finished before 1:30 p.m.

"It was flawless," said Support Services Manager Pat Conroy, who worked the hospital command center, helping to coordinate resources units needed to make the move. Teams easily resolved IT, phone and monitor issues and the like, he said. "Nothing we encountered had an impact on our ability to provide patient care."

Continued

The choreographed transitions to AIP 2, led by captains on the sending and receiving units who communicated via walkie-talkie, were preludes to a space reshuffling, now complete, in the AIP. With the exodus of Medicine Specialties from 6 East, General Surgery moved downstairs from 9 East to take over the vacated space. That departure allowed 9 West Pulmonary Medicine to add another 18 beds, making it a 36-bed unit that occupies the entire floor.



UCHealth CEO Bruce Schreffel checks out the new Oncology Unit with staff.

Patients on the 7 East Internal Medicine Unit, meanwhile, will be absorbed by the new Medicine Specialties Unit, with 7 West Neurosciences expanding to the entire seventh floor. The 36 beds will be for neurosciences and neurosurgical patients, said Internal Medicine clinical nurse David Jimenez, RN, as he stood near a nurse's station the morning of the move. The unit will continue to take medical/surgical overflow patients, he added.



Staff in the 10-bed unit of the MICU before the move June 8. Left to right: Sara Rosalies (on the phone); Kristin Aubuchon; Darren Boivin; Courtney West; Amanda Sanchez; Melanie Shepard-Bourneman; Andrea Mendez and Marty Monahan.

Neurosciences Nurse Manager Shelly Limon, RN, said five of the 24 neuroscience beds will be dedicated to the hospital's Epilepsy

Monitoring Unit. All Internal Medicine beds were deactivated Wednesday, June 12, she said.



Kathleen Combs, RN, sending team captain for the MICU, speaks with Facilities Management manager Pat Conroy shortly before move to AIP 2 begins.

Not-so-fond farewell. The move also allowed the hospital to close surge areas it had reluctantly opened to handle heavy patient volume that overran capacity even before construction of the new tower began.

The two Express Admit units on the second floor of the Anschutz Outpatient Pavilion closed the evening of Friday, June 7. Patients in the Medical Surgical Holding Unit (MSHU), carved out of the old Emergency Department to accommodate inpatients waiting for beds upstairs, had all found homes on units by 3:30 p.m. on June 8. MSHU staff marked the closure with celebratory slugs of Sierra Mist, said Kelly McDevitt, RN, nurse manager of the Orthopedics/Burn/Surgery Unit.



Staff head out of the MICU with the first patient bound for AIP 2.

The Critical Care Surge Unit, hastily pressed into service to take advantage of 10 vacant beds in the old Neuro ICU on the third

Continued

floor of the AIP critical care wing, closed late Saturday afternoon, McDevitt said.

Business as usual. The [extensive preparations](#) for the move were evident on moving day. Despite having both its seven- and 10-bed units full Saturday morning, the atmosphere in the MICU was calm. Medical Director Ellen Burnham, MD, and Nurse Manager Mark Yoder, RN, were on hand, but staff in the seven-bed unit went about their business shortly before 9 a.m., preparing the first patient for transfer in routine fashion.



Staff set patient up in the new MICU in AIP 2.

The transport team had the patient ready to go when Kathleen Combs, RN, captain for the sending side, called out that there would be a delay as Oncology finished up its move.

"We're not ready to roll yet," she said.

About 9:15 a.m., Conroy walked into the unit, carrying a walkie-talkie, which he handed to Combs along with brief instructions for using it to communicate with the receiving unit and the command center. The MICU could proceed with the move, Conroy said.



The Medical Surgical Holding Unit, carved out of the old ED, shortly before the last patients moved out.

"All hands on deck," Combs called. "We have a green light."

With that, a team of nurses, respiratory therapists and a certified nursing assistant, accompanied by Burnham, rolled the heavily sedated patient out of the unit to an elevator for the ride to the new tower, where a second team awaited to settle him into his room. Within a matter of minutes, they completed their work and the second patient was ready to move.

Up and running. The welcome lack of drama meant the new units were up and running quickly and ready to handle plenty of volume. By the morning of Monday, June 10, the MICU had filled all its 24 beds, Yoder said. The new Oncology unit, only dotted with patients Saturday morning, had 31 of 36 beds occupied Monday, reported Nurse Manager Jennifer Zwink, RN. Medicine Specialties Nurse Manager Marcee Paul, RN, said all but two of the unit's 36 beds had patients at that point.

Filling hospital beds rapidly at UCH hardly seems remarkable today, but there were no guarantees of success when the project began, said University of Colorado Health CEO Bruce Schroffell as he stopped by the new Oncology Unit Saturday morning.



The waiting room outside the MSHU/old ED was strangely quiet as phase 2 of the move to AIP 2 neared completion.

Schroffell was CEO of the hospital in September 2009 when the Board of Directors gave the go-ahead to plan the project.

"It was a risk at that time," he said, smiling. "It's hard to believe that we've finally done it."

The phase 2 move punctuates the tower expansion project, at least for now. Attention now shifts to the AIP, where work remains to complete a new OR lounge and locker room and build out the Perioperative Services area.

Continued

Erik MacDonald, an Information Services project manager who worked on installing phones and the call systems in AIP 2, was in a work area in the new Oncology Unit Saturday morning, making sure systems were up and running. A heavy workload lies ahead for him and others as the hospital continues its makeover.

"It's now on to renovation," MacDonald said.