

HARBORVIEW MEDICAL CENTER

UW Medicine  King County

King County Council Committee of the Whole

Briefing: Recommended Program Plan for Harborview Medical Center Health and Safety Improvements

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As required by King County Ordinance
19583



OVERVIEW



- As is common with facility projects around the country, the Harborview (HMC) Bond Program faces financial pressures from cost escalation, labor, and supply chain issues.
- A January Bond Program consultant cost study identified costs for the envisioned 2020 HMC Bond Program exceeded expected revenues by about \$880 million.
- In late March, the Council passed Ordinance 19583 calling for a workgroup of ten UW Medicine, Harborview Trustees, and County representatives, to identify a recommended Program Plan for Harborview's bond-funded health and safety improvements that can be accomplished within the existing \$1.74 B revenues.

ORDINANCE 19583 REQUIREMENTS

Topics Covered in Today's Briefing	Topics Included in Written Report	
<ul style="list-style-type: none">• OWG members and process overview• OWG Bond Program Plan recommendation• Harborview's need for expanded bed capacity• Engagement summary• Analytical criteria and EJS analysis overview• Additional findings by the OWG	<ul style="list-style-type: none">• Estimated square feet, use of space, and timeline for construction and milestones• Factors that could adversely impact planned use, size, timeline, and cost• Legally available funding tools• Implementation of the Program Plan in accordance with King County Code	<ul style="list-style-type: none">• Recommended process for the Executive's notification of the Council should changes to the Program Plan be needed• The OWG's process and engagement activities as directed by Ordinance 19583• Plus topics covered in today's briefing

ORDINANCE WORKGROUP MEMBERS-OWG

Workgroup Member	Organization
April Putney	King County Deputy County Executive
Dwight Dively	Budget Director, King County Office of Performance, Strategy, and Budget
Joe McDermott	King County Councilmember, District 8
Claudia Balducci	King County Councilmember, District 6
Steffanie Fain	President, Harborview Board of Trustees, District 7
Clayton Lewis	Harborview Trustee, District 5
David McDonald	Harborview Trustee, District 4
Sommer Kleweno-Walley	Chief Executive Officer, Harborview Medical Center
Jacque Cabe	Chief Financial Officer, UW Medicine
Cynthia Dold	President of Hospital Systems, UW Medicine

OWG PROCESS

- Hulet Consulting provided facilitation services for the OWG meetings and assisted the OWG to achieve consensus on its recommended Harborview Bond Program Plan over the 12 weeks the OWG met.
- The OWG established a shared understanding that the work produced for the OWG would be conceptual and high level, serving as benchmarks, not final nor firm estimates due in part to many moving pieces and timelines which may impact costs.
- The OWG received briefings from consultants and staff on a wide range of matters ranging from the planned Bond Program components identified by the HLG, to the landscape of Harborview's current needs, to various Bond Program scenarios.

OWG PROCESS

- OWG members engaged in robust discussions as they scrutinized information, discussed organizational priorities and needs, and identified further analytical questions for staff and consultants to address.
- The OWG reviewed and updated the HLG analytical criteria it would use to guide its work and identified key assumptions.
- The recommended Program Plan was determined by the OWG after considering the operational needs of Harborview and the shared priorities of King County, the Board of Trustees, and UW Medicine.
- The OWG recommendation was informed by 12 weeks of data analysis, information, and discussion on HMC's and the County's needs and priorities.
- The transmitted report will provide meeting materials and notes from the OWG meetings.

OWG PROGRAM PLAN RECOMMENDATION

- At its June 23 meeting, the Ordinance Work Group (OWG) unanimously supported a Harborview Bond Program Plan to be constructed with the available funds as authorized by Ordinance 19117 (the bond Ordinance).
- The recommended Program Plan has two key components:
 - 1) construction of a new 10-story tower (base tower) with a minimum of 224 beds and parking with seven finished and three shelled floors; and
 - 2) expansion of County spaces: Medical Examiner, Involuntary Treatment Court, PH Clinics and Lab.
- Data provided by consultants to the OWG shows that the two components can be built for the \$1.7 billion bond amount.

OWG PROGRAM PLAN RECOMMENDATION

The OWG's recommended Program Plan reflects the priorities of:

- Adding single patient room capacity in a modern new building;
- Increasing operating room and emergency department capacity;
- Expanding behavioral health services through psychiatric emergency services (PES) and crisis stabilization unit (CSU)
- Right-sizing of essential services (e.g., pharmacy, lab, clinical engineering, environmental services, kitchen)
- Achieving greater operational efficiencies
- Expanding space for County services (e.g., PH Lab and Clinics; Medical Examiner's Office, TB Clinic, ITA Court)

In this context, "right sizing" means updating the size and location of key services that are needed for a new patient tower and expanded emergency department (ED). For example, an expanded ED and new beds require additional environmental services; more ORs require additional clinical engineering, etc.

CRITICAL NEED: MORE BED CAPACITY

- During the OWG process, Harborview requested additional single patient beds beyond the number originally planned in the 2020 Bond due to growing and projected single patient room demand and the ability for the hospital to meet needed vital surge capacity.
- Notably, the COVID-19 pandemic's impact on Harborview's projected need for increased bed capacity was unexpected and significant.
- Harborview's licensed bed numbers have increased since passage of the bond measure by voters in 2020.
 - ✓ 2018-2020 bond planning assumed 360 new single patient beds;
 - ✓ In 2020, HMC was licensed for 413 beds;
 - ✓ As of 2023, it is licensed for 540 beds; and
 - ✓ It projects a need for 684 beds in 2031 and 740 by 2040.
- As observed during a recent OWG tour, patient beds are in hallways and in conference rooms turned into makeshift wards, with no privacy, adversely impacting infection control.

ENGAGEMENT OVERVIEW

- A total of eight virtual and in-person engagements were held
- The OWG leveraged existing forums to brief labor organizations representing Harborview employees, residents of the First Hill neighborhood, and members of the Harborview mission population. Existing forums included:
 - King County Immigrant and Refugee Commission (5.2.23)
 - Healthcare for the Homeless Network Governance Council Advisory Group (5.3.23)
 - First Hill Neighborhood Association Urban Design and Space Committee (5.3.23)
 - King County Behavioral Health Advisory Board (5.4.23)
 - Yesler Terrace Community Council (5.17.23)
 - City of Seattle MIMP Implementation Advisory Committee (5.18.23)
 - King County Harborview Bond Pioneer Square Clinic (5.10.23)
 - Harborview Labor Partners (5.24.23)

ENGAGEMENT INPUT

- Engagement themes generally echoed input received during the HLG engagement process:
 - ✓ More and better behavioral health facilities and resources are vital;
 - ✓ Infection control and privacy are concerns;
 - ✓ Respite care beds are crucial and should be expanded;
 - ✓ Pioneer Square Clinic provides essential services to vulnerable, neighborhood specific population;
 - ✓ Accessibility and way finding are priorities; and
 - ✓ Patient and employee safety is essential.
- OWG meeting public comment themes centered on the importance of the Respite Program and the need to provide space to expand the Respite Program.



















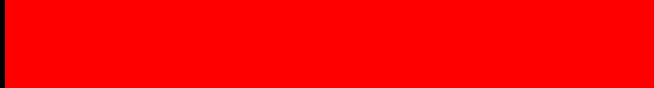



ANALYTICAL CRITERIA

- The 2018-2020 Harborview Leadership Group (HLG) established analytical criteria to guide and inform its decision making, covering four key areas: people impact, service/operational impact, equity and social justice, and financial impact.
- The OWG updated the HLG criteria, adding two additional criterion under *Area 2 Service and Operational Impact* to reflect current needs:
 - ✓ Increases bed capacity and space to meet current/future patient needs at HMC responds to the evolving capacity needs of Harborview.
 - ✓ Improves utilities, infrastructure, and other key facility systems to enhance the campus' long-term resiliency responds to the need to improve the medical center's infrastructure and facility systems from the operational and environmental perspectives.
- The OWG reviewed the analytical criteria in its meetings. The results of applying the analytical criteria show that, as it did in the HLG process, not building a new tower would have a negative impact on each criteria area.

ANALYTICAL CRITERIA: AREAS 1 AND 2

* Denotes OWG added criteria

Criteria Area	No Action	Base Tower Package*	 Negative Impact	 Positive Impact
Area 1: People Impact				
Mission population				
Patients and clients				
Labor and employees				
Neighbors and community				
Area 2: Service/Operational Impact				
Delivery of emergency services				
Addresses facility deficiencies and needs				
Supports innovation, best practices, and/or new models of care				
*Increases bed capacity and space to meet current/future patient needs at HMC				
*Improves utilities, infrastructure, and other key facility systems to enhance the campus' long-term resiliency				

ANALYTICAL CRITERIA: AREAS 3 AND 4

Criteria Area	No Action	Base Tower Package
Area 3: Equity and Social Justice		
Service models that promote equity	Negative Impact	Positive Impact
Influenced by community priorities	Negative Impact	Positive Impact
Addresses Determinants of Equity	Negative Impact	Positive Impact
Access to healthcare and improved health outcomes	Negative Impact	Positive Impact
Area 4: Fiscal/Financial Impact		
The long-term financial position of Harborview and King County	Negative Impact	Positive Impact
Existing facilities	Negative Impact	Positive Impact
Opportunities for other funding	Negative Impact	Positive Impact

■ Negative Impact
■ Positive Impact

EQUITY AND SOCIAL JUSTICE ANALYSIS: BALANCING NEEDS

- The OWG leveraged the equity and social justice (ESJ) analysis that the HLG conducted on the list of the original projects envisioned in 2020.
- The OWG's analysis recognized that meeting the operational needs of the hospital furthers access to health services, one of the County's determinants of equity.
- The OWG's Program Plan recommendation addresses Harborview's bed capacity issues and affords more efficient use of space, which directly influences improved health outcomes for patients and communities: if Harborview is unable to provide beds due to lack of space or reduces services due to financial constraints, marginalized community members will be the most impacted.
- While unfunded planned improvements also bring negative ESJ impacts, the OWG strove to balance the myriad of extreme facility needs and growing service needs with community impacts and a shrinking dollar to meet the broadest needs possible.

ADDITIONAL FINDINGS

- During its work, the OWG recognized that a number of the 2020 HLG facility improvement recommendations are unable to be funded with the \$1.74 billion authorized by voters due to cost escalation.
- In addition, Harborview is requesting additional single patient beds beyond the number originally planned in the 2020 Bond.
- Given these unmet needs and availability of new funding, the OWG identified a tiered prioritization of facility improvements.
- The tiers were informed by the operational needs of Harborview and the shared priorities of King County, the Board of Trustees, and UW Medicine.

ADDITIONAL FINDINGS-TIER 1 PROJECTS

Tier	Component Summary	Description	Estimated Cost/Range* <i>*Subject to modification</i>
First Tier	A. Build four additional shelled inpatient floors in a larger tower	<ul style="list-style-type: none"> • Build a larger 14 story tower instead of 10 story base tower • Provides additional single patient room capacity • Possible if funding is identified before August 2025 	<ul style="list-style-type: none"> • \$80M for four shelled floors • Additional \$72M to finish four shelled floors
	B. Finish the three shelled inpatient floors in the base new tower	<ul style="list-style-type: none"> • Finish three shelled inpatient floors in 10-story base tower • Provides additional single patient room capacity 	<ul style="list-style-type: none"> • \$54M
	C. Expand outpatient behavioral health space in new or existing space	<ul style="list-style-type: none"> • Build a new building OR renovate Pat Steel building • Expand outpatient behavioral health services and programs 	<ul style="list-style-type: none"> • \$250M new building • \$130M to renovate
	D. Renovate or adaptive reuse of Harborview Hall	<ul style="list-style-type: none"> • Provides space for expanded Respite Program and office space • Addresses life safety and seismic issues 	<ul style="list-style-type: none"> • \$170M adaptive reuse • \$80M partial renovation • \$320M full renovation

ADDITIONAL FINDINGS-TIER 2 PROJECTS

Tier	Component Summary	Description	Estimated Cost/Range* <i>*Subject to modification</i>
	E. Address life safety and seismic issues and increase space in Center Tower	<ul style="list-style-type: none"> Addresses life safety and seismic issues Increases office space 	<ul style="list-style-type: none"> Costs TBD
Second Tier	F, Address life safety and seismic issues and improve clinical operations at Pioneer Square Clinic	<ul style="list-style-type: none"> Renovate existing space OR relocate Improves clinical operations Addresses life safety and seismic issues 	<ul style="list-style-type: none"> \$30M to renovate \$9M+Market to relocate
	G. Address life safety and seismic issues with East Clinic	<ul style="list-style-type: none"> Demo or mothball Addresses life safety and seismic issues 	<ul style="list-style-type: none"> \$12M to demolish TBD mothball cost

CONCLUSION: BALANCING NEEDS

- The OWG focused on bringing forward a Program Plan recommendation that best serves the mission population, the hospital, and broader community needs.
- During its work, the OWG confronted the very tough and multipronged challenges of a shrinking dollar, growing costs, and expansion of needs since the 2020 Harborview Leadership Group completed its work.
- Understanding that Harborview's mission and serving mission population are paramount, and that each decision impacted the mission population in one way or another, the OWG identified a recommendation that maximizes what the \$1.74 billion can do now to serve the highest needs of the hospital and the County.
- Finally, the OWG recognized that pressing facility needs remained unfunded. In response, this report includes additional guidance that the OWG provided to the County as to the order in which unfunded facility needs could be addressed should new funds become available.