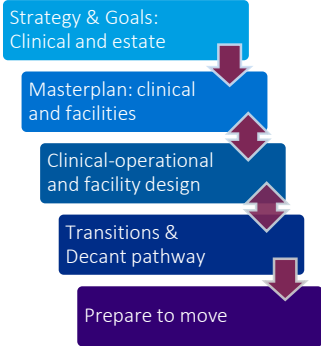
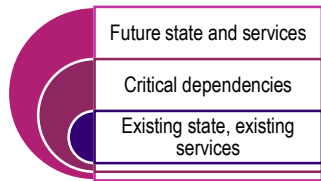


Achieving a seamless transition and making the best use of a new facility



"Is there an opportunity to pre-load some of the changes, particularly in digital innovation into the 'old' environment / systems, to reduce the overall change load at decant?"
Tanya Hughes (CTG)

"In my experience managing patient expectations is crucial (...) it's incredibly difficult to discharge patients before the move because they suspect they are getting second best care"
Mando Watson" (CTG)



PLANNING PROCESS

The decant plan is informed by the clinical and facility plans which may in turn be tweaked for a better transition. Usually a years-long iterative process. To avoid going off track or doing abortive work, take the time to firstly define goals, priorities and guiding principles.

CHANGE MANAGEMENT

Most new facility plans involve changes to models of care, operational models, equipment and communications. Some changes may be radical. Team may change. The transition to the envisioned future state begins well before clinical services are decanted to a new facility.

DECANT PLAN

An adaptable and updateable plan permits response to change without excessive disruption. A methodology is required to help minimise the number of moves while ensuring that no orphan services are left behind, and that relationships between clinical services and between clinical services and their support services are preserved.

INTERIM MEASURES

Temporary expansions: e.g. modular extensions, mobile units, off site solutions, lease space locally
 Existing space reuse: e.g. generic spaces set aside for interim uses by multiple clinical services.
 Working differently: e.g. digitally enabled remote working

SIMULATION AND TRAINING

Multi-method training includes hands on, online training, virtual reality and mock ups. Simulation can be used for 'a day in the life' at the new facility and for simulating the move to detect and address risks.

COMMUNITY ENGAGEMENT

Effective communication ensures expectations are managed and individuals understand processes and what is expected of them.



"Could we have an army of volunteers help with preparation for the move and community familiarisation with the new facility?"
John Black (CTG)



"Really interesting to think about how we can use the decant process as a rehearsal for the changes required to facilitate working differently in the new building."
Deirdra Orteu (CTG)

"Planning stakeholder communication (beyond staff training) is obviously vital to successful decant. We need to be careful not to frame patients as a 'barrier' to decant. Understanding as much as we can from past patient issues is an opportunity for open, kind communication."
Tanya Hughes (CTG)

Awareness, engagement, and preparation

Images clockwise from top: (1) Iterative process diagram (2) Cadolto prefabricated modular building (3) cartoon, shutterstock ("I think it's a hardware problem") (4) Hamad Medical Corporation clinical and facilities masterplan sample stage phasing plan version dated 2015.