

DALLAS

## Parkland project on track

Replacement hospital is on schedule, under budget, officials say

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Kye R. Lee/Staff Photographer

A year after ground was broken on the new Parkland Memorial Hospital, construction on the massive \$1.27 billion project appears to be on schedule and under budget, officials say.

“We might even be a little ahead of schedule because the rains have been holding off,” said Walter Jones, Parkland’s senior vice president over facilities planning and development.

“Everybody is real happy with the progress.”

Such good news comes at a time when the hospital is struggling to hang on to its government funding because of serious problems with patient care.

The new hospital, being built across Harry Hines Boulevard from the current campus, is estimating an \$8 million savings so far on the project and the creation of 2,814 jobs since the

dirt started flying.

“Most of these are new construction jobs, mainly employing people from low-income areas of Dallas,” said Lou Saksen, the hospital’s vice president for facilities development.

The 862-bed facility is the largest hospital construction project under way in the U.S. It is slated for completion in late 2014 or early 2015.

Dallas County voters overwhelmingly approved a \$747 million bond issue in 2008 to cover about 60 percent of the construction cost. The project also will consume about \$350 million in hospital cash reserves and \$150 million in donations.

Hospital board members have remarked in recent months that planning the facility has become the most enjoyable part of their job.

“This is the best part of being a board member right now,” Dr. Roberto de la Cruz said as he gazed across the sprawling construction site.

He and his colleagues had adjourned a recent board meeting and regrouped on an upper floor of the current hospital’s main parking garage to get the clearest view of the site. They spent about a half-hour marveling at how quickly the hospital was taking shape.

### *Board ‘not distracted’*

Nowadays, the board mostly meets behind closed doors to discuss how to fix assorted patient-safety problems at the old hospital.

Federal and state regulators conducted several inspections last summer after The Dallas Morning News revealed that a patient’s death had occurred in the psychiatric-emergency department. The death had not been reported to state officials.

Inspectors found widespread problems throughout the hospital, including conditions of “immediate jeopardy” to patient safety in emergency care and infection control.

The findings were so serious that Parkland could have lost all of its Medicare and Medicaid funding — more than \$400 million annually, or nearly half its patient revenues.

Instead, the Parkland board hired an independent company Tuesday at a cost of up to \$6.9 million to oversee improvements in patient care. The hospital had signed an agreement last month with the U.S. Centers for Medicare and Medicaid Services promising to make systemic improvements by mid-2013.

Jones said the hospital’s problems have had no adverse effect on the construction project other than to absorb more of the board members’ time. But he stopped short of calling them

distracted.

“I say they’re multi-tasking, not distracted,” he said. “A lot of the oversight of this project happens at the committee level. Those meetings have continued, as has the project itself.”

This week, construction crews were starting on the 10th floor of the new 17-story medical-surgical tower, and the new hospital’s three-story atrium entrance also was clearly visible to observers. A new eight-story parking garage will be finished in December.

“You realize the future is here,” said board member Cobie Russell, head of the facilities committee, which is overseeing the project. “Parkland 3.0 has arrived. It’s beautiful.”

Parkland’s third incarnation will replace the current structure, which opened in 1954. The original hospital was in a cluster of buildings at Oak Lawn and Maple avenues that dated to 1894.

The new hospital will be roughly twice the size of the current one and will include a separate facility for women and infants, a medical clinic and an administrative building.

Jones noted that the new hospital was planned to serve Dallas County’s indigent population for the next 50 years. Anticipating those needs and the type of medicine that will be available in the future has been a major design challenge, he said.

“We’ve made it very, very flexible,” he said of the design. “All the patient rooms are the same size and design so they can be changed as needed. We could change a 72-bed patient floor to another service by moving the staff, even overnight.”

In fact, patients’ demands on the county hospital have shifted in just the past year, including a dramatic increase in the number of emergency-room patients and a dramatic decline in births.

Patient visits to Parkland’s main emergency room were up 31 percent in fiscal 2011 from the previous year. That included 54,337 visits to an urgent-care clinic that was set up for ER patients with minor ailments.

However, in the recent inspections, the hospital got into trouble for sending those patients to a clinic outside the ER without adequately screening their medical conditions or providing escorts.

Officials have pointed to the new hospital as the ultimate solution to such shortcomings. With features including an emergency department twice the size of the current one, such transfers will not be necessary, they said.

Responding to the declining deliveries might not be as simple in the new building. It was designed to handle as many as 18,000 births, but the number had slipped to 12,391 in fiscal

2011, an 8.5 percent drop from the previous year.



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### *Room to grow*

For a variety of reasons, births are expected to drop to 10,000 in fiscal 2012 from a Parkland peak of 16,489 in 2006.

In response, the hospital recently converted a maternity ward in the current facility into a patient-observation area for the ER. Likewise, Jones predicted the decline would result in a portion of the new Women and Infants Specialty Health, or WISH, building not being finished out.

“The plan was to leave one of the 36-bed WISH units unfinished,” Jones said. “If we were to open this hospital tomorrow, there probably would be more rooms that we wouldn’t occupy.”

Other parts of new facility also would remain unfinished but available for future use, he said. Jones compared it to how the current hospital had only seven floors when it was completed in the mid-1950s. Three floors were later added as needed.

Parkland’s leaders also may decide to move some of the hospital’s specialty clinics from the

main campus to community settings, which would ease patient access, Jones said.

Previously, such a move was opposed by physicians at UT Southwestern Medical Center, who supervise Parkland's doctors in training.

Jones said Parkland would have to decide the best setting for training its doctors based on future patient needs.

"But that's a discussion that goes way beyond me," he said.

Some elements of the new hospital's design are changing, including the type of glass that will clad the exterior of the hospital tower.

On Tuesday, the board approved the use of clear glass, instead of glass with an opaque pattern, in the windows of patient rooms. The change will save about \$700,000.

"We're trying to create a patient-centered, healing environment, and in that context, the view from a patient's window is important," Jones said.

"Seeing nature and having a connection to the outside can promote healing and could reduce their length of stay."

Parkland senior vice president Walter Jones says the hospital's patient-safety problems haven't slowed construction of the new campus.

Parkland officials say the new hospital was planned to serve Dallas County's indigent population for 50 years. "We've made it very, very flexible," senior vice president Walter Jones said of the design. "All the patient rooms are the same size and design so they can be changed as needed. We could change a 72-bed patient floor to another service ... overnight."

#### *AT A GLANCE Construction highlights*

‡ The new campus is on schedule to be completed in late 2014 or early 2015. ‡ The project has added 2,814 jobs, mostly in construction. ‡ Construction is \$8 million under budget so far. ‡ Work has reached the 10th of 17 floors on the main tower. ‡ An eight-story garage will be completed in December. ‡ Part of the Women and Infants Specialty Health area will not be finished because of a drop in the number of births. ‡ Some of the hospital's specialty clinics might be moved into the community. ‡ A larger emergency room will accommodate more patients and reduce regulatory problems.

SOURCE: DallasMorningNewsresearch