

Advance Strategy™

NIAGARA HEALTH WORKPLACE STRATEGY

SOUTH NIAGARA HOSPITAL PROJECT

NOVEMBER 2019



**BOLD
THINKING
CREATES
INSPIRED
DESIGN**

01

EXECUTIVE SUMMARY

a.	Project Background	4
b.	Roadmap/ Activities Performed	5
c.	Vision Statement	6
d.	Project Goals	6
e.	Key Findings Snapshot	7
f.	Top Priorities	8
g.	Summary Recommendations and Change Management	9

02

MOBILIZE

a.	Schedule + Timeline	13
----	---------------------	----

03

UNDERSTAND

a.	User Engagement Outline	14
----	-------------------------	----

04

ANALYSIS

a.	Interpretation of Engagement	16
i.	Culture & Community	16
ii.	Workspace Function	21
iii.	Wellness	29
b.	Harmonization with Existing Functional Program	31
c.	Site Visits	32

05

SYNTHESIS

a.	Kit of Parts	34
b.	Workspace Typologies	35
c.	Test Fits	36
i.	Departments for Test Fit	36
ii.	Area Requirements + Assumptions	37
iii.	Building Configuration + Planning Concepts	37

06

DESIGN GUIDELINES + RECOMMENDATIONS

a.	Design Guidelines & Performance Metrics for PSOS	38
b.	WELL AP Considerations	46

07

APPENDICES

a.	Appendix A - Workplace Typologies	51
b.	Appendix B - Test Fit Floorplans	61
c.	Appendix C - Client Engagement Process and Detailed Findings	67
d.	Appendix D - Brock University Student Workshop	130

1

EXECUTIVE SUMMARY

1A

PROJECT BACKGROUND

NIAGARA HEALTHCARE

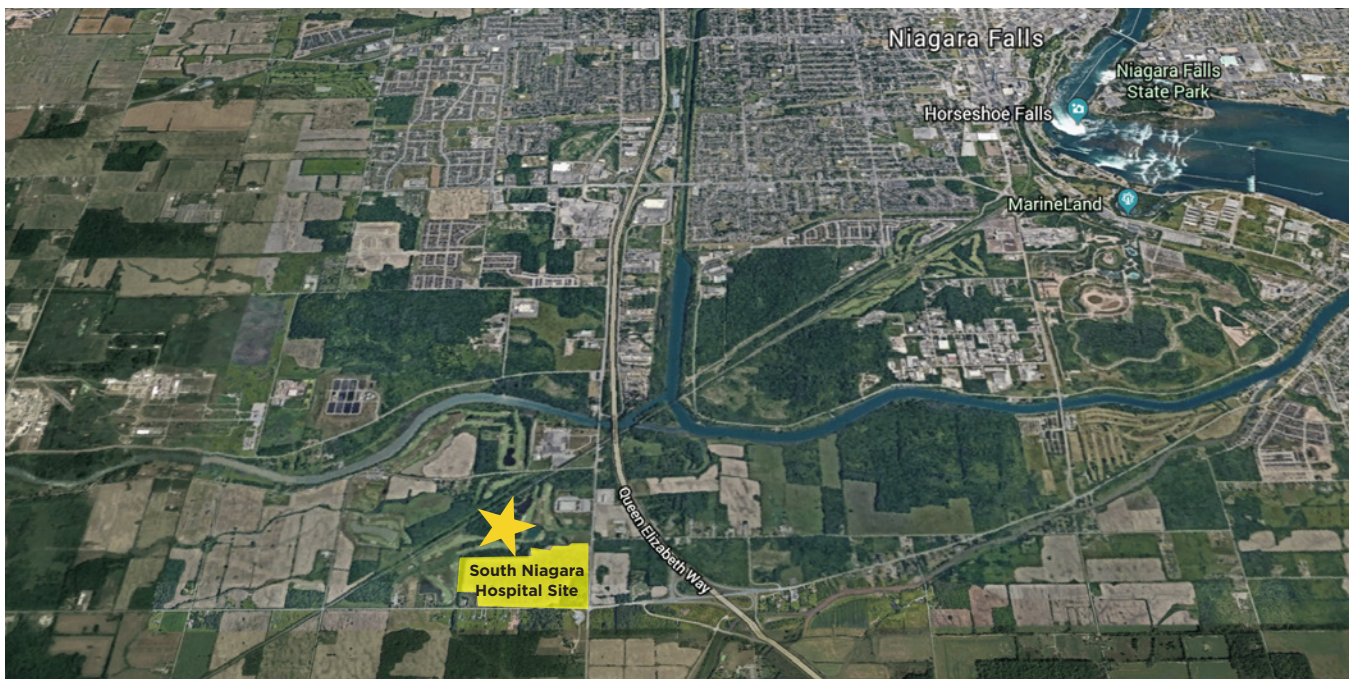
Niagara Health is a regional healthcare provider with multiple sites and a growing network of community-based services. It serves more than 450,000 residents across 12 municipalities that comprise the Regional Municipality of Niagara. Its workforce consists of 4,800 employees, 600 physicians, and 850 volunteers.

SOUTH NIAGARA
HOSPITAL PROJECT

Niagara Health is planning a new South Niagara Hospital, a 49.8 acre greenfield site (at the intersection of Lyons Creek Road and Montrose Road) that will consolidate and rationalize services from four older facilities located in Niagara Falls, Port Colbourne, Welland, and Fort Erie. The 1.3 million square foot hospital will house full acute care services, ambulatory services, post-acute Complex Continuing Care (CCC) inpatient services, and a full complement of non-clinical support services.

WORKPLACE
STRATEGY REPORT

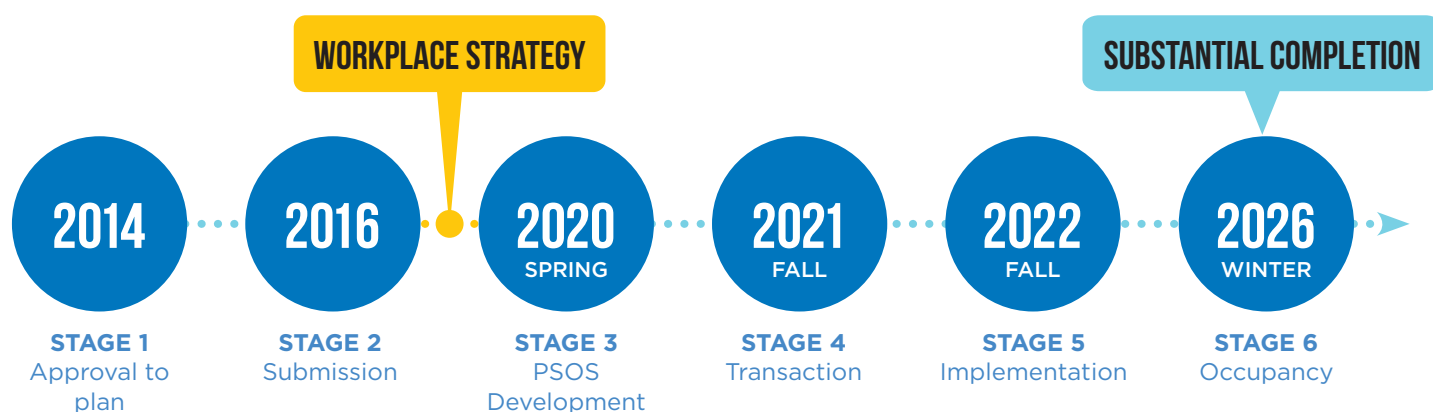
This report focuses on strategies to build a high performance workplace as it relates to workspace (offices, workstations, collaborative and staff only areas, etc.). It excludes direct patient care areas as part of its scope. Workplace Strategies outlined herein are project specific to South Niagara Hospital, and define opportunities and tools to provide a supportive, safe, collaborative and flexible workplace for Niagara Health staff in their support of departmental functions.



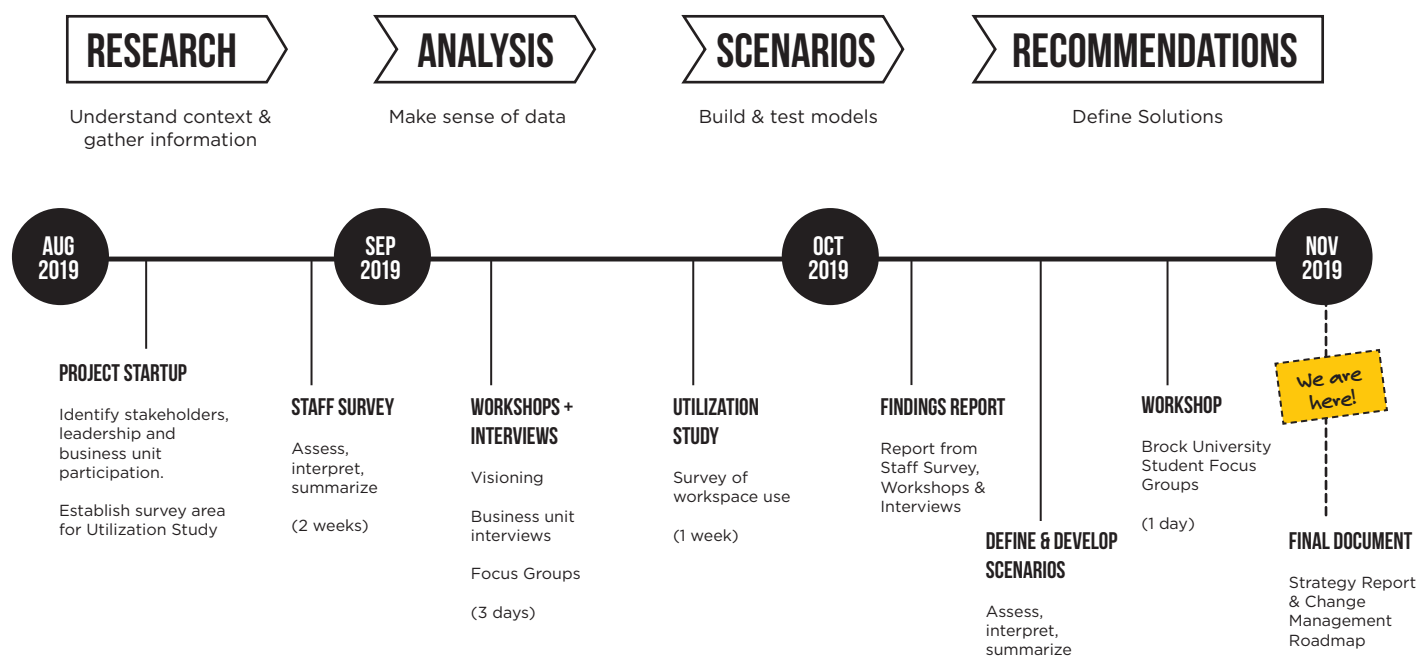
1B ROADMAP + PROJECT SCHEDULE

i. NEW SOUTH NIAGARA HOSPITAL PROJECT TIMELINE

This Workplace Strategy Report is a short - 3.5 month - engagement in a multi-year process. This important phase of the timeline has been expedited, as to not delay the larger South Niagara Hospital project process.



ii. WORKPLACE STRATEGY ROADMAP



1C VISION

The overarching Project Design Vision was still under development at the beginning of the workplace strategy engagement. The following vision statement is offered as a suggestion:

Extraordinary Care, Extraordinary Environments

Build a workplace that embodies the Niagara Health culture of caring and empowers its people to lead productive and healthy lives.

1D PROJECT GOALS

- 1 Optimize space utilization and efficiency
- 2 Support the organizations flexibility to grow and transform as departments contract/expand
- 3 Enhance employee productivity, satisfaction collaboration, and innovation
- 4 Support each individual with a flexible and supportive environment that accommodates variation in individual abilities and work styles
- 5 Considers the demographics of the current and future workforce
- 6 Express Niagara Health's culture and brand identity
- 7 Design workspace strategy to include principles of LEED® and WELL®
- 8 Change Management Strategy that supports user to buy into the recommended concepts and standards



KEY FINDINGS SNAPSHOT

PRIVACY + OFFICES

Private office space dominates culture, expectations and patterns of work, including collaboration.



People with private offices are **23%** more satisfied with their workspace.



74% of all activity is focused work. At minimum, a third of offices are not used at any point during a day.



61% said there is a culture of expecting private offices.

COLLABORATION

Collaboration appears to be limited to occasional interactions, yet staff consistently expressed a desire to have greater connections to teams and space for small breakouts.



Only **18%** meeting are utilized.



#1 source of inspiration was from positive teamwork and people (from Focus Group results).



Face-to-face interactions were observed **42%** of the time in private offices.

NATURAL LIGHT



Majority of focus group respondents are **dissatisfied** with their level of access to natural light.

"We are like bats in a cave."

HEALTH + WELLNESS



Staff Survey respondent rated **access to healthy food and to fitness center** as most important.

COMFORT



"Gen-Z Focus Group: 'Comfy' and 'Cozy' spaces preferred." 47% of staff without an office and 45% of clinical staff were unsatisfied with ergonomics and temperature

GREEN SPACE



#2 source of inspiration was natural light & views among all staff

DOWN TIME



60% disagree that staff should be at their desks to be considered working. Many have had a hard interaction with a patient, and then are approached during break

CULTURE + BRAND



100% describe Niagara Health as the "Protector" archetype. Values include: compassion, care, support, kindness, and love. Yet, the current state is described as too sterile, too broken up.

CAPACITY



In an open-ended response, **21%** state the one thing they would change would be to add more workstations and collaboration space at nursing stations.

ANCHORED



90% of respondents stated **wireless** as an important tech tool (#1 overall). Gen-Z Focus Group noted that mobile devices to be supported with large surface area and adequate power outlets.

1F

TOP PRIORITIES



Access to natural light, views and greenspace



An ethos of wellness and health: space, furniture, fitness & healthy food amenities to support



Greater connections to teams, having space for small breakouts



Staff only space a work lounge to support respite, comfort, and food



Greater flexibility to grow and contract, variety of workspace and balance of open / enclosed space



Add capacity in clinical workspace for workstations, medical equipment and privacy



Drop-in & touchdown space to support travel between sites



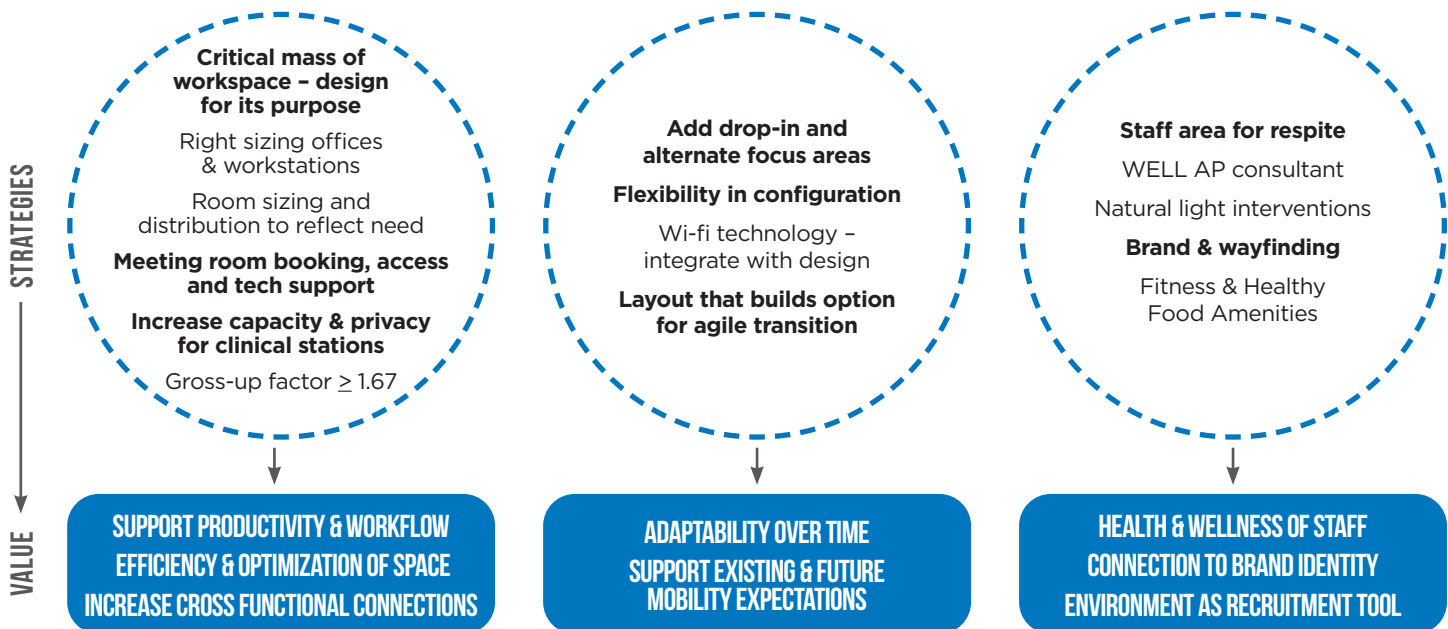
Technology to support mobility within the workspace: Wi-Fi and digital support in conferencing are priorities



Enhance wayfinding, connect to the brand & values of “Extraordinary Care” at Niagara Health in the physical environment

1G

SUMMARY RECOMMENDATIONS



Note: Strategies in bold font are the most essential for executive review due to the degree of change from the existing state and/or may have operational impacts.

CRITICAL MASS OF WORKSPACE - DESIGN AS A WORKSPACE

Designate contiguous area or wing of hospital strictly for non-clinical office functions

Benefits include:

- Alleviate erosion of workspace for clinical functions with building critical mass of area
- Gain efficiency for collaborative, alternate focus & support spaces
- Maximize natural light in configuration
- Reduce organizational barriers & silos - workspace no longer broken into parts



ADD DROP-IN AND ALTERNATE FOCUS AREAS

Tactics Include:

- Add touchdown workspace in open work area for staff that work between sites.
- Add alternate focus areas to open work environment and ensure Wi-Fi reliability.
- Determine simple etiquette norms outlining acceptable behaviours in open office environments (i.e. - establish quiet zones in alternate focus work areas).
- Add kitchenettes with multi-functional uses – food prep and gathering space; space could also function as alternate work area.



STAFF AREA FOR RESPITE — REASSIGN PROGRAM

Sized for 20 to 40 people comfortably, this is a multi-purpose space to support staff in relaxation, to meet casually, socialize & form connections in a restorative atmosphere.

Benefits Include:

- Wellness & recovery of staff during break-time
- Alternate work area for productivity
- Capacity for drop-in space
- Social and collaborative connections

Possible spaces from functional program to be used for this purpose (clinical & non-clinical workspace):

Space Type	Sq. Ft.	Count
Open work area / commons	8,020	7
Co-creation spaces that are not meeting rooms or team rooms – 25 classifications / naming conventions	220,665	57
Kitchenette / Nutrition Areas	600	11

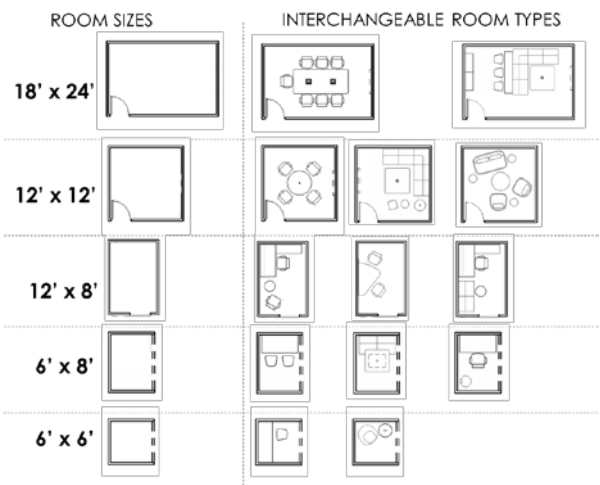


FLEXIBILITY IN CONFIGURATION

Examine all options to build flexibility into the work environment.

Tactics Include:

- Sit-to stand desks (height adjustable) for all workstations.
- Demountable wall systems in workspace where possible (as mechanical & ceiling systems allow) to aid need for reconfiguration over time.
- Kit-of-parts space typologies –
A menu of room sizes to be interchangeable for multiple uses.
- Convert private offices to unassigned rooms as new generation enters workforce. This strategy will accommodate multiple generational preferences.



KIT-OF-PARTS ROOM SIZES AND TYPES

INCREASE CAPACITY & PRIVACY FOR CLINICAL STATIONS

Clinical stations should have space for privacy nearby and adequate space for the personnel traffic

Tactics Include:

- Add workstation capacity – create dedicated space for visitors (Dr.'s, students, clinical support)
- Build in a space for privacy at or near the clinical station with a door to that is not accessible to the public for uses such as
 - Patient discussions with other clinical staff
 - Space to collect oneself when on the unit
 - Other short-term privacy needs, such as a phone call

LAYOUT THAT BUILDS OPTION FOR AGILE TRANSITION

Once the organization transitions to a more paperless state, it would open the possibility for a more agile work environment.

Tactics include:

- Unbookable private space within reasonable access of majority of workstations
- Balance of individual space with shared space and circulation
- Adding adequate alternate work areas for people to go to
- Storage for paper artifacts (i.e. filing cabinets) could be replaced with lockers. Size and location of storage to consider the transition
- Include ample volume of power outlets to support use of mobile technology devices

MEETING ROOM BOOKING, ACCESS AND TECH SUPPORT

Build shared conferencing area where large and some medium meeting rooms are located.

Conferencing area should be in a centralized location that all have access to and no department “owns.”

Meeting room scheduling on centralized booking system – not owned by department. Set reasonable rules for time limits for reoccurring meetings (i.e. no more than 3 months at a time) and set reminders to owner of reoccurring meeting to free room if not going to use it.

All meeting rooms should have some transparency into the room.

Minimum requirement of technology in meeting rooms:

- Monitor / display
- Telephone conferencing
- Ample electrical outlets / charging areas
- White board

BRAND & WAYFINDING

Tell the story of the organization, orient staff to their location, and reinforce desired culture.

Infuse environmental graphics and interactive moments in high impact locations.

Tactics include:

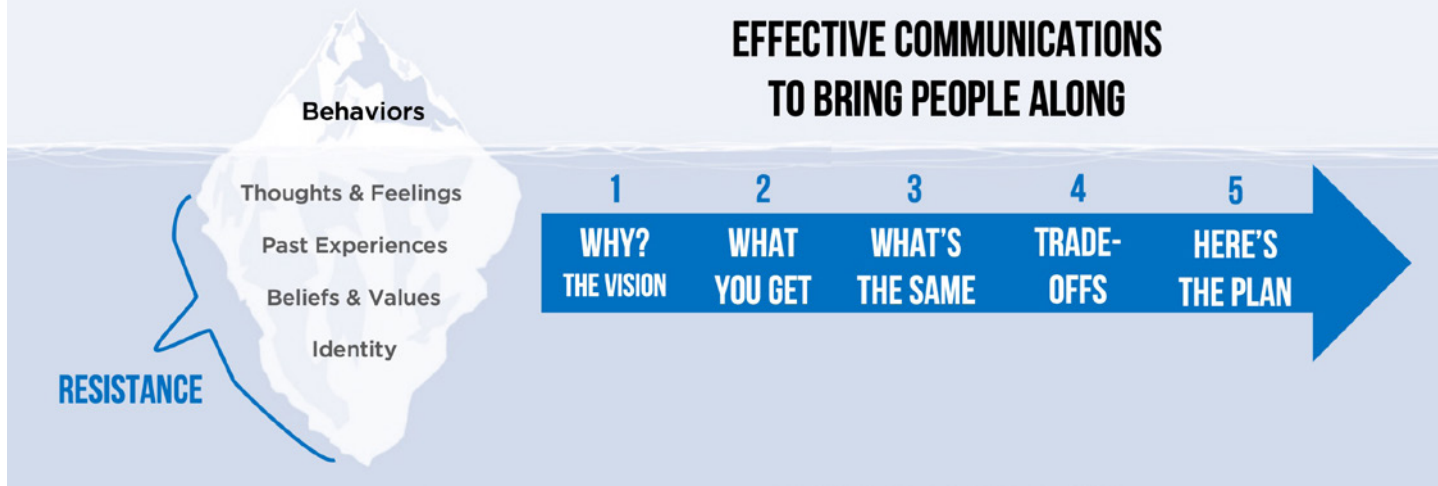
Destinations should be easy to find without excessive use of signage. Memorable experiences, branded moments, and spaces for respite or play all create effective landmarks. More subtly, places should express an individual sense of identity through implicit references like color, typeface, art or artifacts specific to culture or brand.

1G

CHANGE MANAGEMENT

BRING PEOPLE ALONG THROUGH THE TRANSITION

MOVING THE CHANGE ICEBERG



CHANGE MANAGEMENT: PILOT SPACE

Pilot by reconfiguring some space in existing environment

Invite groups to try the environment in rotating schedule & configure for drop-in work area

Benefits Include:

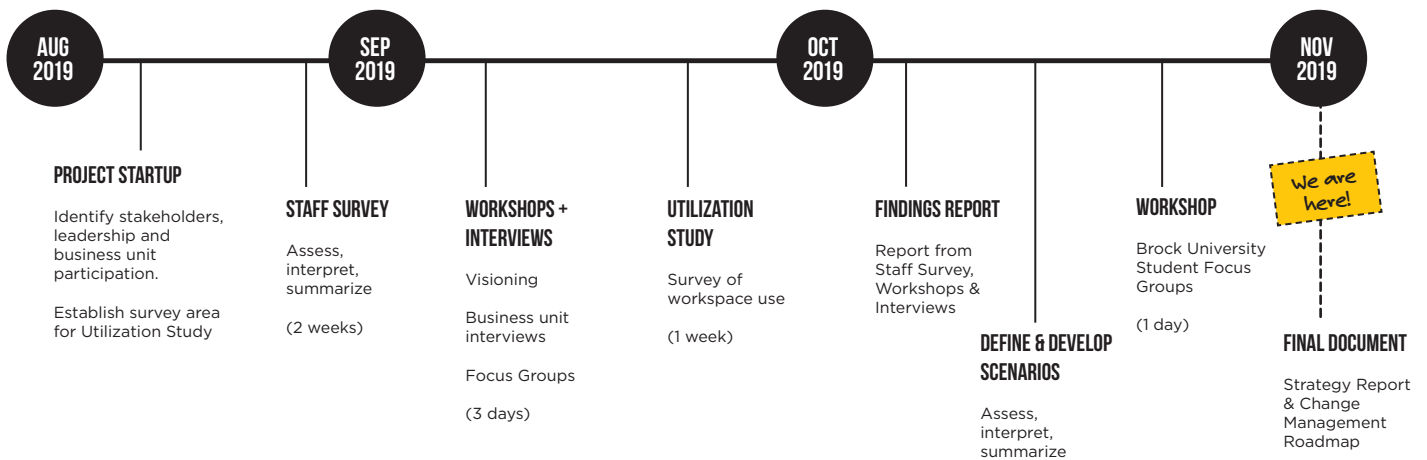
- Validate and test products and configurations before large scale investments are made
- Allow staff to preview the future environment and contribute to future experience by providing feedback
- Aid change communication to staff of new workspace with testimonial from peers
- Help solve an immediate challenge / need for drop-in space before the new hospital is built

- 1 **Pilot Space** to test and communicate experience.
- 2 Communication plan – set **multiple modes / methods of communication** that provide progress updates and reasoning of decisions such as:
 - Project website with images, plans, FAQs
 - Intranet announcements
 - Email announcements
 - Town halls with executive team
 - Establish change network - staff representatives to disseminate & collect information
 - Project Milestone Celebrations
- 3 During design phase – build and **share 3D virtual models with staff** in “tours” of space; sessions specifically organized to share progress.
- 4 Design team to present major design milestones to change network

2

MOBILIZE

Mobilization for this project commenced in early Aug. 2019 with final report completion required prior to issuance of the RFP for PDC consultant. As a result of this fixed timeline, typical time frames for the digital staff survey and utilization study periods had to be compacted to ensure completion by Oct. 31, 2019.



3

UNDERSTAND

3A

UNDERSTANDING YOUR WORKPLACE

Over 600 people were engaged through various interactive strategies to collect the data underpinning this report

TOOL	INTENT	AUDIENCE
Visioning	To understand strategic vision and discuss workplace environment's role in achieving goals	Typically, Executive Management or an advisory committee
Leadership Interviews	To understand team function, work patterns & business goals	Individuals who are senior enough in the organization to have familiarity with strategic objectives but are also close enough to work patterns of staff. Often, Directors and Senior Managers fall into this category.
Staff Focus Sessions	To capture staff perceptions and solicit feedback on design or typology elements	The intent is to capture qualitative data of staff perceptions of the current work environments and their aspirations for the future.
Staff Survey	To assess cultural dynamics & measure workplace performance & future expectations	All staff, across all levels of the organization who has a workspace in the hospital, should have the opportunity to submit their feedback.
Utilization Study	Measure workplace use and activity (workstyles)	On-site observational study to quantify current utilization and collect qualitative data about how employees use the workplace on a typical work week.


TOOL	METHODOLOGY	PARTICIPANTS
Visioning	A dialogue and workshop in a 2 to 3-hour session	Executive Team, Working Group
Leadership Interviews	Group or one-on-one discussions lasting 45-minutes to 1-hour to discuss operations.	29 Managers and Supervisors across clinical, support and corporate functions
Staff Focus Sessions	Group workshops with a cross section of clinical, non-clinical and health science university students. Sessions last 2 to 3-hours with up to 20 participants.	34 people representing clinical, corporate, support and student perspectives
Staff Survey	A web-based survey sent to all staff. Survey was open for 2-weeks and communicated via web-portal.	589 responses from staff across departments, sites and seniority within Niagara Health.
Utilization Study	Data collectors walk through the workspace four times a day for one week to record use of space, activities people are engaged in, and number of occupants. Communication to staff about the study was made prior to the data collection.	5,361 records collected across 298 spaces in four locations over 4.5 days.

3A

USER ENGAGEMENT OUTLINE

Approximately 71 people were in attendance across two (3) workshops and four (4) group interviews. Below is the agenda of information that was presented and activities that solicited participant feedback. Presentation content is included in the appendix.

		Workshop 1	Workshop 2	Interview 1	Interview 2	Interview 3	Interview 4	Workshop 3
Audience, Attendance, Session Length		Clinical, 4 people, 2 hours	Working Group, 13 people 2.5 hours	Leadership/ Managers, 11 people 1 hour	Leadership/ Managers, 7 people 1 hour	Executive Team, 6 people, 45 minutes	Clinical Leaders, 11 people, 1 hour (phone)	Brock University Health Science Students, 17 people, 3 hours
AGENDA ITEMS	Introduction	✓	✓	✓	✓	✓	✓	✓
	Future of Healthcare	✓	✓					
	Current & Future State	✓						✓
	Identity Archetypes		✓					
	Future of Workspace	✓	✓	✓	✓	✓	✓	
	Rapid Prototyping	✓	✓					✓
	Space Type Voting	✓	✓					✓
	Wild Card	✓	✓					✓
	Group Interview			✓	✓	✓	✓	

 Presentation

 Activity / Dialogue

4

ANALYSIS

4A

INTERPRETATION OF ENGAGEMENT OUTCOMES

The broad range of user engagement exercises resulted in an extensive array of individual and group feedback, aggregate data, metrics and observations. Refer to Appendix C for detailed listing of user engagement data. This information was then organized, reconciled and grouped by topic. Several common themes began to emerge from across all modes of user interaction. The information naturally falls into three primary categories:

- i. Culture/ Community
- ii. Workplace Function
- iii. Wellness

4A

i. CULTURE / COMMUNITY

Culture of caring, community and roots

Place for families to settle, people who want to contribute in a meaningful way to their neighbors, families and friends.

Common path: Finish school, enter workforce at Niagara Health, stay for the long term.

EXTRAORDINARY CARE



Fragmented, siloed, and confidential whispers

Place for having a place and sticking to it, troubleshooting sensitive topics with a need for confidential conversations.

Common scenario: An impromptu and discreet discussion to resolve an internal issue.

OPEN DOORS FOR CLOSED DOOR CONVERSATIONS



4A

i. CULTURE / COMMUNITY

CULTURE

INTERVIEW THEMES

- Community minded, people with deep roots in area – like a small town
- Fractured work culture across departments, and across sites
- Concern that resources are not shared fairly across sites, territorial aspects
- Desire to create a more welcoming / inviting work culture

SMALL COMMUNITY VIBE

Small community/ small hospital vibe

Everybody knows everybody, - it helps with team dynamic + makes NH special

Both: small town & family atmosphere

Folks trust each other if they know them better

Sometimes the small town feel helps you seek people out vs. seeking out a department

CULTURAL GOALS

Inspire people to do their best & provide extraordinary level of care. Space should enable that vs. be a barrier

When teams come back and say 'thank you for listening to us and providing us with what we asked for'

SILOS + FRAGMENTATION

Fragmented – in silos

People want to be together – is it a bad thing?

Feeling like a team is good – be more open to other departments and students / casual staff

Territorial in terms of team rooms and lunch rooms

PERCEIVED IMBALANCE OF RESOURCES

Its perceived that St. Catharines gets every resource.

Each site is different

4A

I. CULTURE / COMMUNITY

VISITOR EXPERIENCE

INTERVIEW THEMES

- Not sufficient wayfinding for both staff and patients
- Users feel that time is wasted in navigating around / giving directions

WAYFINDING, LOST TIME + RESOURCES

Visitors are often lost

Staff often have to help patients find their way

Sales reps / vendors are also getting lost – staff have to go out to meet them

Signage is solely placed on the ceiling ... people don't look up to see signs

Wayfinding is currently challenging – many volunteers used for wayfinding

VISITOR EXPERIENCE:
INSTITUTIONAL + IMPERSONAL

Acoustics problems. Patients have a hard time hearing through the speaking hole. A sit-to-stand desk couldn't be used because the speaking hole is fixed. Feels very institutional

Employees have to constantly reach over desk to put hospital band on admitted patients. This is a workplace hazard for the employee

When midnight staff are by themselves they have to eat at their workstation so they can monitor the waiting room, and attend the desk if someone new shows up. Currently they have a blind over the reception window that they pull down when they want to eat

4A

i. CULTURE / COMMUNITY

RECRUITMENT

INTERVIEW THEMES

- Many recruits come as students and stay for a career
- Users seem resistant to engaging with a younger demographic that might work well in a more flexible environment

COMPETITION + WORKSPACE SELLING POINTS

Belief they are maybe losing potential employees to bigger hospital systems in Toronto, Hamilton

Most workforce is younger than 40; SCS is more popular than the older sites

Modern & connected technology would assist will ability to attract and retain younger talent

Ergonomics; height adjustable desks seen as benefit in recruitment

PERCEIVED RIFT BETWEEN GENERATIONS

"I'm not a Millennial" (response to: What is your strategy to attract the next generation workforce?)

Doesn't see it ever changing that managers will need an enclosed space

They find that millennials are always question the ways things are being done

They're finding new employees don't want to "pay their dues", but perhaps Millennials expect better working conditions and more work/life balance

STUDENTS + PEOPLE WITH FAMILIES APPLY

They see less external applicants, more students moving their way up within the NH system - maybe this will change with area demographics changing, maybe more young families will move into the area.

4-5 new grads are hired every year; primary source of recruitment

The team believes there are great opportunities for those with education

Space for students could be good - treat students well - it will be easier to recruit them later

4A

i. CULTURE / COMMUNITY

AREA FOR RESPITE

INTERVIEW THEMES

- Space for staff, particularly clinical staff, to get away from the public during breaks
- Kitchens / eating areas inadequate

CURRENT SPACE INADEQUATE

BREAK ROOMS:

- Too small, not ample seating
- First come, first serve
- Shuffling by others
- 36 people might use this room in a day
- GNG site doesn't have a break room
- Blurred lines between relaxing space and people working

STAFF AREA FOR RESPITE

Area of respite: would look like kitchen facilities, refrigerator / microwave, comfortable for peoples breaks

Should be able to get away from work

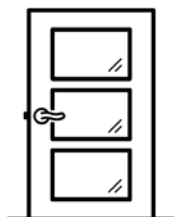
They don't feel that they have their own space to eat. They like to eat in the work area, but this creates bad optics for patients waiting for care in the waiting room

*We need good resting team respite spaces
Dr.'s' lounge in the past has been an afterthought - its not close to units
The chairs with head canopies are nice*

4A

ii. WORKPLACE FUNCTION

SUMMARY FINDINGS: OFFICE SPACE VS. WORKSPACE



Private office space:
managers desire it for
confidentiality, sensitive
conversations and ability
to be “present” for team.

Yet, feedback in workshops and interviews state that there are a number of needs not currently being met, likely due to an imbalance of space going toward private offices and existing infrastructure. Items desired are:



Greater connections to
teams, having space for
small breakouts



Workstations with generous
surface area and orientation that
avoids approach from back



Greater flexibility to grow
and contract, and variety
of workspace



Technology to support mobility
within the workspace



Access to natural light,
views and greenspace



Balance of multi-functional space
for gatherings and alternate focus



Drop-in &
touchdown space



An ethos of wellness and
health: space, furniture &
fitness amenities to support

4A

ii. WORKPLACE FUNCTION

SUMMARY FINDINGS: CLINICAL WORK AREAS



Clinical functions, particularly inpatient areas, struggle with having enough workstations to accommodate the people who use it (nurses, doctors, students, other clinical support).



No privacy on units. Staff occasionally need time to collect themselves emotionally after intense moments of care, but can't leave units.



Medical supplies, equipment, carts and other large bulky items crowd clinical workspace, which accentuates space issues.



Need for respite. Currently there is no space for most clinical staff to get away from being “on” during breaks from the public.

ADDITIONAL CHALLENGES TO GRAPPLE WITH



Hospital is still very paper based, as it has not yet transitioned to a digital health record system. Eventually the Ministry of Health will release funding for the transition, but it is not likely to be fully implemented by the time the hospital is built in 2026.



Workspaces tend to be gobbled up and converted to other clinical areas. Historically, workspace has been “fit in” to leftover areas that previously housed clinical functions in spaces never meant to support office functions.

Beyond pure physical limitations, this has resulted in fragmentation of departments and organizational silos.

4A

ii. WORKPLACE FUNCTION

PRIVACY CONCERNS

INTERVIEW THEMES

- Managers “need” to be in enclosed, private offices
- Fear of it “looking bad” when you schedule meetings outside of the offices space with managerial staff
- HR being enclosed – sensitive conversations with staff that they don’t want others to see / overhear

CONFIDENTIALITY + SHUTTING A DOOR

One of the biggest challenges: Confidentiality

Desires the ability to shut the door and have a private conversation

- *Protecting financial security*
- *Protecting organizations names*

Location and privacy for security is a main concern

As private as possible

MANAGERS' PREFERENCES + BEHAVIOUR

Managers will just take over a private room anyway – acoustics and visual privacy is desired

Operations:

I have to be present in department

Do not see myself being successful in a flexible workspace, needs privacy and four walls

When people come to our area, they need to discuss a problem, and people wonder why they are there. It needs to be discreet.

PHONE CONVERSATIONS, NOISE + SENSITIVE INFORMATION

On the phone most of the day, with staff out sick, sensitive information.

Currently might be 2 in a room. Talk in the room all day long, asking questions of each other

50% of staff sit at desk the whole day, 40% are not working a predictable 8-5

4A

ii. WORKPLACE FUNCTION

COLLABORATION, INTERRUPTED

INTERVIEW THEMES

- Interpersonal disconnection
- Meeting rooms “owned” by departments, create bottlenecks
- Workspace distracts, doesn’t adequately need for person-to-person interactions

MEETING ROOMS OWNED

Booking meeting rooms is a major challenge

Need to “make space” don’t want to be lacking in space on opening

Bookable rooms cannot be under ownership of particular department

SET-UP DISRUPTS FACE-TO-FACE

Need more collaboration

Current set-up has pod of 4 with one outside the room

INTERPERSONAL CONNECTIONS LACK

Facilitate close working relationships within teams, and between teams: HR team for example, feels like a family, and is a close-knit group. Often these smaller teams work collaboratively with other departments

Facilitate close interpersonal relationships between team members, increasing engagement, meaning, and employee retainment

Sometimes people don’t know what other people do, and what they are working on. Unless people make an effort to talk to those outside their departments. They could be working on the same project/outcome but they wouldn’t know

Volunteer – on site 90% supporting volunteers at the site & need to feel part of a team

How / where do people gather / socialize?

- *At desks – very distracting for others who are working*
- *Informal gatherings are distracting*

4A

ii. WORKPLACE FUNCTION

DROP-IN SPACE

INTERVIEW THEMES

- Concern of lack of desks/touchdown spaces for mobile employees, or remote workers in the event they have to report to site
- Perceived lack of parking for permanent employees, and employees visiting multiple sites

PARKING A CHALLENGE

Parking lot issue – when they go to the new location, more people will commute by driving.

MULTIPLE SITE RESPONSIBILITIES

Every staff member frequents multiple clinical areas

Site-to-site – space is an issue

Drive back and forth from sites, end up working in the break room, not a great spot to work

TOUCHDOWN SPACE

In the future can they have Hotelling stations? They don't currently use paper

Need to have touchdown stations in clinical areas (charts, billing, student research)

Afternoons can get busy – demand for space is at the same time, results in scarcity in space

4A

ii. WORKPLACE FUNCTION

PAPERLESS TRANSITION

INTERVIEW THEMES

- Tethered by paper
- Users do not seem hopeful that they will be paperless – do not see a flexible work environment being conducive if paper storage is still a requirement
- Concerns about storage for work material
- Concerns about storage for personal items (i.e.: coats, boots)

IN TRANSITION

Working towards paperless

Hope to see computerized nurse charting

Will be needing less space for paper/charting

CURRENT PAPER SYSTEMS

Currently still paper charting; documents are on paper and scanned electronically

Health Records – they do a lot of scanning paper. They foresee more electronic documentation before new build. Should be 85% paperless

SOME programs have electrical documentations but most not.

PREFERRED FUTURE

Everyone can have portable technology – so you can access patient data easily

Spaces that support mobile technology – wireless capabilities

Either computer in room or iPad that staff is carrying around – we don't know yet what this looks like but it has to be a quick / easy & secure access point in these spaces

4A

ii. WORKPLACE FUNCTION

TECHNOLOGY TO MANAGE MATERIALS + CHANGE WORK

INTERVIEW THEMES

- New technology introduced will change the type of work people do; bring efficiency
- Desire to be mobile – remote technology needed
- New tech will manage materials

MATERIALS MANAGEMENT

With the new site, more automation for moving carts and supplies, waste collection, linen collection, materials management

Technology will be used for tracking equipment. Bariatric Beds, wheelchairs move around a lot and it will be good to have a system that keeps track of them and their locations

Need to be able to track pick-ups and drop offs

BASICS LACK & CHALLENGE FUTURE

Not everyone gets a laptop – how will IT be handled?

Inconsistent / lack of technology in meeting spaces

Connectivity is important (WiFi)

TECH TO INFLUENCE FLOW OF WORK + STAFFING

Coding technicians, work at home already, and will continue to do so. Some coders work on site.

12 or 13 transcriptionists work from home currently. They used to be dictated to directly by doctors. In the future doctors will speak out loud and it will be recorded by AI. Transcriptionists will mainly do data quality checks.

Other departments may grow the number of workforce who work from home. There might be some resistance from other departments

Software will have to communicate workflow to employees who are deployed on work throughout the site

4A

ii. WORKPLACE FUNCTION

CLINICAL WORKSPACE

INTERVIEW THEMES

- Workstations are crowded with people and equipment
- Privacy needed at workstation – can't get away on shift

PRIVATE SPACE ON UNIT

It is hard to get away from the unit

There is a conference room on the unit for a private area; we use that when we can.

Sometimes you need to take a minute to collect yourself. There isn't any good place to do that right now

Employees feel like they're working in a fishbowl. Everything they do is visible to the public in the waiting room. They need the glass for security

There are students there all the time, doctors too. Noise level gets high and there's aren't enough workstations.

The number of workstations need to increase. It could be on wheels. Currently, we're sitting at bedside tables.

EQUIPMENT + MATERIALS GET IN THE WAY

Never enough storage, wheelchairs, walkers in hallways

CLINICAL WORKSPACE IN HIGH DEMAND

Room near nurse station to meet is handy, close to nurse work not far away down the hall

In general: we need more computers than we ever did. 8-9 computers are in nurses' station and in the team room behind. All are used.

4A

iii. WELLNESS

The Identity Archetype focus group exercise revealed goals for the preferred Future state: adopt more values from these secondary identity archetypes

- **1. Source** – where things are moving: centre of knowledge, truth
- **2. Purist** – truth, ethics, moral values

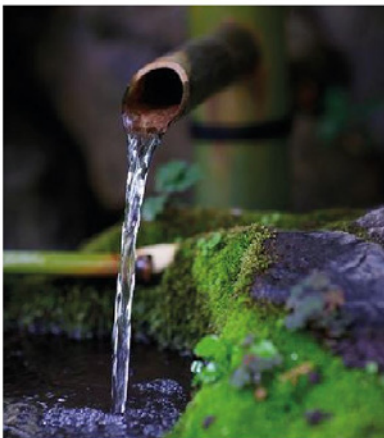
SOURCE

Sources champion values including truth, clarity, objectivity, commitment, education, insight, enlightenment, and discipline.

As a Source, guests rely on you as a beacon of knowledge and truth. Your project is objective and less emotional, though you provide comfort to your guest through providing an understanding within an otherwise complicated world. You are an expert in the knowledge the guest seeks; while at the same time encouraging them to think.

Examples:

World Health Organization, TED, Bloomberg, and Oprah



PURIST

The Purist champions values including morality, nostalgia, simplicity, wholesomeness, ethics, and (of course) purity.

As a Purist, your ethics and moral values are held in high regard by consumers. You are expected to be open and transparent with your practices and behaviors. Consumers may feel a deep and warm sense of security and connection with your project, knowing what they can expect from you.

Examples:

Lululemon, Coca-Cola, Dove, and Toms



4A

iii. WELLNESS**AREA FOR RESPITE**

INTERVIEW THEMES

- Desire for a work environment that promotes health, wellness, balance
- Access to daylight / views
- Outdoor space for socializing highly desirable
- Adjustability / ergonomics at workspaces
- Work / life balance

**NATURAL LIGHT, OUTDOORS
+ GREEN SPACE**

Ideal workspace: airy, open, natural light, bright

Bring outdoors in - natural light, windows are important, elements of nature

Aesthetics so office should have window (currently my office doesn't have window)

Lighting - people complain it's too bright or so dark

FLEXIBILITY, ADJUSTABILITY + COMFORT

Ergonomics + Sit-stand desks

Works stations should be fully adjustable for multiple body types

Room temperature - some places are too hot, others are too cold - there is not control over it

**PROMOTE HEALTH, SAFETY
+ WELLNESS THROUGHOUT**

#1 priority has to be safety & protect staff from injury

It should look functional and not institutional

Leave the space with a sense of peace/ calming

FITNESS + MOVEMENTS WITHIN SPACE

Personal wellness, daylight, fitness - really excited about gym

Integrating fitness and wellness into the building such as orienting staircases near entrance to encourage people to take the stairs.



HARMONIZATION WITH EXISTING FUNCTIONAL PROGRAM

There is an existing Functional Program for Niagara Health's South Niagara Hospital Project, created before the workplace strategy. The Functional Program is an important step in the development process with its content to remain for the life of the project.

In the Functional Program spaces and assignments are listed individual by department, with seat assignments by role. This framework assumes space is assigned to individuals and not departments while also assuming organizational structure of the hospital will remain constant.

This strategy report recommends that a 'Kit-of-Parts' planning strategy be adopted in the design process. This approach assumes space should be assigned to departments and typologies interchangeable based on a particular group's needs (as opposed to individuals). While it is recommended that the planning strategy is amended, the total space allocation for the project would result in a net neutral space gain.

High level suggestions include utilizing categories of spaces budgeted in the functional program such as collaborative or team areas for

needs that have been uncovered in this report's research. For example, the report recommends the addition of a staff-only area for respite that would accommodate at least 30 to 40 people. Space to fulfill that need should come out of spaces listed in the Functional Program, such as Open Work Area, Commons, Collaboration Area, Project/Multi-purpose Area, Kitchenette, Nutrition Areas, etc. All of these example spaces serve a similar purpose.

Lastly, these net-neutral recommendations are for spaces only, and do not account for inadequate gross-up factors documented in section 6.a.vi of the report. The Functional Program assumes a gross up factor of 1.35 in administrative space, which will cause planning challenges if not adjusted when building code requirements, such as aisle widths and mandated AODA accessibility requirements, are factored in. The industry standard, and recommendation herein, for spaces with workstations and modular collaboration spaces is 1.67.

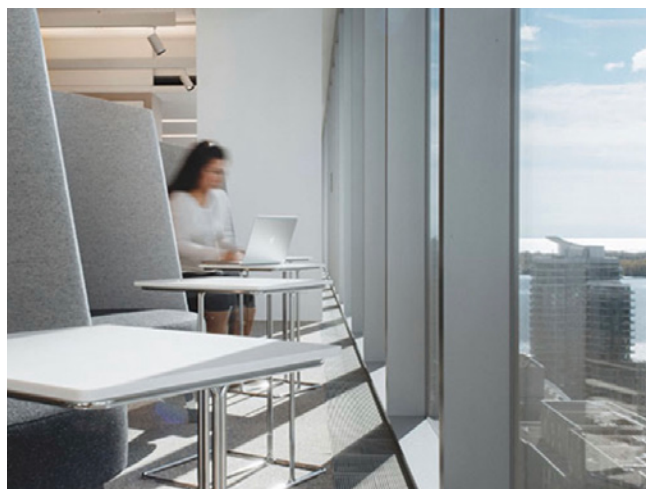
4C SITE VISITS

Members of the Niagara Health Workplace Working Group attended site visits to view a newly completed office space in Toronto, as well as two furniture showroom tours. These tours helped the group improve their understanding of the numerous workplace strategy concepts that were discussed during the User engagements, as well as providing a sense of the direction the furniture industry is heading in addressing the evolving needs of the healthcare and workplace FFE markets. The group was able to see real life examples of numerous workplace typologies that will be part of the Workplace Strategy recommendations, as well as touch, feel and 'kick the tires' well in advance of the new South Niagara Hospital FFE procurement activities.

4C i. FURNITURE SHOWROOM TOUR – TEKNION

Teknion was founded 35 years ago in North York, Toronto and is now an international company with a worldwide network of offices, showrooms and dealers. This showroom was selected for a tour by the NH Workplace Working group because of its focus on human centered design, wellness and a profound respect for the end user of all furniture products. Teknion is also a Canadian company where many of their products are designed and manufactured in the GTA.

The Workplace Workgroup toured the downtown furniture showroom and was able to get advance glimpses of the latest products entering the market in response to evolving workplace needs. Workgroup members remarked that the self-contained freestanding phone booth could be a radical and unique solution to many staff privacy concerns, and the sliding/ pull-out storage feature in the open workstation products would also satisfy privacy concerns of staff that moving into open office environments from enclosed private offices. The Tek-vue demountable wall product was of particular interest, as it could increase workplace flexibility but also pose challenges with regards to relocation costs within a P3 context.



4C

ii. FURNITURE SHOWROOM TOUR – GLOBAL FURNITURE GROUP

Global Furniture Group originated in 1966 and is a Canadian owned furniture company with the vision of manufacturing well-made furniture at affordable prices. The firm offers a comprehensive portfolio of solutions designed and engineered to meet the changing needs of the workplace, education and healthcare markets.

This showroom was selected for a tour by the NH Workplace Working group for because of its comprehensive range of healthcare oriented products, realistic price points, and a prior vendor of record agreement between Global and Niagara Health. Finally, stakeholders appreciate the fact that Global Group is a Canadian company and most of their products and components are manufactured right here in

the GTA.

The Workplace Workgroup viewed and tested out furniture typology groupings enabling an improved understanding of the relationship between furniture layouts and available space. Viewing and interacting with multiple furniture layouts within the same size of footprint was particularly valuable as it demonstrated the importance of strategic thinking that must go above and beyond the actual space allotment listed in the Functional Program.



4C

iii. SITE VISIT - TMX GROUP, 100 ADELAIDE ST.

Owner and operator of the Toronto Stock Exchange (TSX) and the TSX Venture Exchange (TSXV), TMX provides a comprehensive range of financial, information, and technology services to Canadian and international financial communities. Consolidating three locations, the B+H design team worked closely with the client to customize the office to advance a culture of transparency, collaboration, and innovation across all organizational levels. The resulting design successfully supports a new way of thinking and working. By inviting possibilities and exploring how spaces can contribute to a more inviting and transparent culture, the company moved away from their traditional work environment to a new, flexible and dynamic

layout. The TMX project was selected for the Niagara Health site tour because of many commonalities between the two organizations. The workplace culture that existed at TMX prior to moving into their new space was similar to the existing office environment at Niagara Health; where private office culture reigned and multiple departments existed in silos with minimal capacity for interdisciplinary collaboration. Similar to Niagara health, TMX was not willing to create a completely agile/ unassigned work environment, so the final solution consisted primarily of assigned open workstations alongside auxiliary staff support spaces such as collaboration rooms, phone booths, private focus, and break-out style spaces.

5

SYNTHESIS

5A

KIT OF PARTS

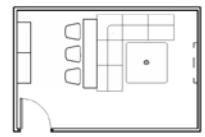
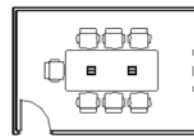
NIAGARA HEALTH'S KIT OF PARTS

The 'Kit-of-Parts' leverages a modular set of spaces to support a variety of choice for individual, group, and team-work settings.

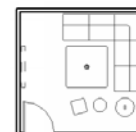
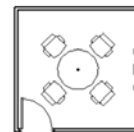
It adopts a layout that maximizes customization of room functions while maintaining uniform infrastructure.

While the kit-of-parts typologies outlined herein account for the majority of work floor needs, they do not account for all spaces, including specialized spaces required for some business units. Those typologies are defined in the functional program.

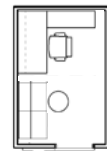
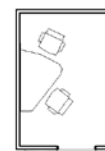
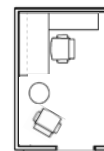
18' x 24'



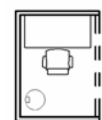
12' x 12'



12' x 8'



6' x 8'



6' x 6'



5B WORKSPACE TYPOLOGIES

Further to the understanding and analysis project stages, customized workspace typologies have been developed for Niagara Health. While the modular nature of a kit of parts is intended to assist with space planning optimization, standardized workspace typologies outline the nature and function of each individual space type. Typologies are not specific to any one department which will ensure consistency across the organization as well as an equitable and democratic approach to thoughtful work spaces for all staff.

Refer to Appendix A for detailed definition of all typologies and nomenclature.

Typologies and have been provided for the following typical rooms:

ASSIGNED INDIVIDUAL WORK SPACES

- Office (private, 100 sf)
- Workstation (Full time staff, 36 sf)
- Drop-in Desk
(students, guests & hotelling, 25 sf)

UNASSIGNED INDIVIDUAL WORK SPACES

- Focus Room (48 sf)
- - Phone Room (36 sf)

COLLABORATION SPACES

- Staff Lounge (+/- 800 sf)
- Huddle Area (96 - 400 sf)
- Break-Out (size varies)
- Team Room (400-500 sf)
- Flexible Collaboration (400-500 sf)
- Small Formal Collaboration
(2-4 seat meeting rm, 144 sf)
- Medium Formal Collaboration
(6-8 seat meeting rm, 216 sf)
- Large Formal Collaboration
(10 seat meeting rm, 430 sf)
- Training room (size varies)
- Gathering area (size varies)

RESPITE SPACES

- Outdoor Space (+/- 800 sf)
- Kitchenette (100-300 sf)
- Wellness room (100-120 sf)

5C TEST FIT

5C I. DEPARTMENTS FOR TEST FIT

Test fits for the following departments were requested as part of this workplace strategy and have been provided in their entirety as follows (**please refer to Appendix B for test fit floorplans**):

TEST FITS PLAN 1

- Clinical Support Services
- Health Records

TEST FITS PLAN 2

- Human Resources (except for Staff gym/ wellness centre)
- Pharmacy support area

TEST FITS PLAN 3

- Meeting Room hub
(Conference Room Floor)
- Administrative Services

TEST FITS PLAN 4

The following departments are majority clinical or industrial occupancies, most of which are collocated with smaller workplace components. Clinical and industrial occupancies

are not included in the test fit. Test Fit Plan 4 outlines a variety of typologies with modular configurations that can be applied equally to these departments:

- Human Resources OCC Health
- Chronic Disease Management & Outpatient
- Seniors Wellness
- Lab support area
- Logistics
- Inter-professional Education & Learning

TEST FITS PLAN 5

Sample layouts of workplace concepts that can be applied to the Nursing Communications Stations in the following departments:

- Complex Care IPU
- Med-Surg IPU

5C

ii. AREA REQUIREMENTS + ASSUMPTIONS

Area requirements were calculated based upon the workplace strategy recommendations contained in this report combined with the functional program provided by NH. The test fit layouts feature an increased number of non-assigned workspaces than were originally listed in the Functional Program, however this additional area will be offset by a decrease in square footage for each assigned space.

The functional program provided by NH lists “circulation space” for some of the workstations that appears to be 125% gross to net ratio, however many other spaces do not include any gross up for internal circulation. The functional program also lists 135% as the overall gross to net ratio for most zones. The industry standard for spaces with workstations and modular collaboration spaces is 167%. Gross up factors lower than this number will cause planning challenges when building code required aisle widths and mandated AODA accessibility requirements are factored in. A gross up factor of 167% has been applied for this test fit.

5C

iii. BUILDING CONFIGURATION + PLANNING CONCEPTS

For the purpose of this test fit, a generic rectangular building configuration with a GSF floorplate area of approximately 16,750 has been used.

Washrooms, housekeeping and utility/service type rooms are planned at the elevator core and shared by all departments on the floor. Staff Lounges (nourishment) areas are also shared amongst departments that occupy the same floor.

Planning principles considered for this test fit ensure maximum daylight penetration for occupied spaces. Built spaces with opaque partitions are located near core and open/translucent workspaces are planned at the perimeter. Modular spaces are oriented to provide buffers to address concerns around noise and privacy.

Analysis of the of research undertaken during the data collection phase of this project has resulted in a series of standardized workplace typologies that are used as a “kit-of-parts” in the planning of the test fit. These typologies are designed to fit together in planning module groupings that optimize space efficiency.

Please note that workspace organization and layout is dependent upon building geometry. Paths of travel and planning modules should support and reinforce the natural flow of foot traffic through the building. The final building footprint and core/ shell configuration of the new NH hospital will affect how the various typologies fit in the space, and planning modules may have to be adapted.



DESIGN GUIDELINES & PERFORMANCE METRICS FOR PSOS

I. CRITICAL MASS OF WORKSPACE - DESIGN AS A WORKSPACE

Designate contiguous area or wing of hospital strictly for non-clinical office functions

- Alleviate erosion of workspace for clinical functions with building critical mass of area
- Gain efficiency for collaborative, alternate focus and support spaces
- Maximize natural light in configuration
- Reduce organizational barriers & silos - workspace no longer not broken into parts

PSOS/ PROJECT DEVELOPMENT RECOMMENDATIONS:

Develop the planning and conceptual design of the workspace of the new hospital to achieve a cohesive and geographically co-located/ linked space (could be in the form of a wing, vertically linked zone or the like). The intent of this space is to draw together both clinical and non-clinical workplace activities.

Create user experience and planning model for new NH workplace concept as part of the clinical ISD development; derive requirements in relation to how this zone is to be designed and inter-relate with the clinical environment;

the NH work environment shall bring together, as much as possible, workspace for clinical and non-clinical departments in a manner that will not unduly impair clinical function or patient/ family experience; prepare guidance to clarify that the traditional practice of using distributed workspace as 'soft space' for clinical expansion is to be avoided. Characteristics and purpose of this strategy will need to be explained carefully; consider the application of design principles geared towards progressive workplace design (e.g. WELL, and LEED BD+C) in addition to LEED Healthcare (V4BD+C Healthcare)

ii. ADD DROP-IN AND ALTERNATE FOCUS AREAS

Add touchdown workspace for staff that work between sites. Disperse hotelling desks across sections of open work area.

Add alternate focus areas to open work environment. Ensure WiFi is reliable in alternate focus areas.

Determine simple etiquette norms outlining acceptable behaviours in open office environments. For example, establish quiet zones in alternate focus work areas.

Add kitchenettes with multi-functional uses – food prep and gathering space; could also function as alternate work area.

Add centralized coat/boot storage near entry.

PSOS/ PROJECT DEVELOPMENT RECOMMENDATIONS:

Examine programming allowances for administrative space and provide definition for the drop-in/ touch-down spaces; coordinate vision for flexibility in relation to a paperless/ low paper documentation strategy;

iii. FLEXIBILITY IN CONFIGURATION

Examine all options to build flexibility into the work environment. Strategies could include:

Sit-to stand desks (height adjustable) for all workstations.

Recommend demountable wall systems in workspace where possible to aid need for reconfiguration of workspace as needs change over time. Applicability will likely depend on mechanical and ceiling systems.

Kit-of-parts space typologies – A menu of room sizes to be interchangeable for multiple uses. For example, a room sized for a small meeting room

could also be utilized as an office, depending on the needs of the occupants of the space.

Convert private offices to phone rooms as new generation enters workforce. This strategy will accommodate multiple generational preferences.

PSOS/ PROJECT DEVELOPMENT RECOMMENDATIONS:

Coordinate FFE lists with innovations in work and workspace typologies; investigate strategic uses of modular spatial components (e.g. booths, low/ partial partitions and the like that meet Codes and IPAC considerations;

iv. NATURAL LIGHT INTERVENTIONS

Design with a principle that light is to be shared as much as it can possibly be shared. Specific strategies include:

- Prioritize workstations on exterior glazing / windows of building over enclosed spaces

- Transparency / partially frosted views into offices
- Prioritize materials and colors that brighten space
- Locate alternate focus work areas on floorplate with positive natural light attributes

- Adhere to WELL specifications for Light concept (more detail in WELL AP section of report)

PSOS/ PROJECT DEVELOPMENT RECOMMENDATIONS:

Provide additional detail on solutions that offer transparency for light and view AND meet NC/STC requirements for sound/ privacy; LEED

for Healthcare does not necessarily demand high performance design for light and view for administrative workspaces within hospitals - consider the application of more stringent standards to NH workspaces; recognize that these requirements will drive building footprint, floor plate depth, glazing quantities and (to a certain degree) energy performance.

v. RIGHT SIZING OFFICES & WORKSTATIONS

Right size workstations and private offices. Current functional program has a wide range.

6x6 workstations, standardize height adjustable desks and ergonomic chairs Hotel desks 5x5 size (benching configuration preferred)

All offices to be 96 SF (8'x12')

Variability and customization per department and user needs can occur with the workstation design: panel heights, accessories, storage options etc.

Desk configuration – minimize approach to desks from back - PSOS to require desk occupant to see approach from facing or periphery view whenever possible.

PSOS/ PROJECT DEVELOPMENT RECOMMENDATIONS:

Revise functional program space allocations to a limited family of standards and bank the area for allocation into collaborative/ alternate work areas; codify best practice workplace design principles into design requirements

vi. ADEQUATE CIRCULATION SPACE / GROSS-UP

NSF gross ups are typically 1.67 or higher for open office/workstation style spaces. The Functional Program lists “circulation space” that appears to be 125% (1.25 factor) gross to net ratio for some workstations while many do not have any gross up accounted for.

Additionally the formal gross to net ratio for departments with administrative space is 1.35 which is also too low. This will cause planning challenges if not adjusted when building code

requirements such as aisle widths and mandated AODA accessibility requirements are factored in.

PSOS/ PROJECT DEVELOPMENT RECOMMENDATIONS:

Low CGSF factors communicate a lean planning message to proponents; revise grossing factors, provide detailed rules regarding circulation paths and workspace configurations.

vii. ROOM SIZING AND DISTRIBUTION TO REFLECT NEED

Maximize meeting space to better reflect small group discussions and individual focus work.

Utilize the kit of parts strategy in sizing of spaces. These spaces should be sized so that they are interchangeable, with their uses supported by furniture and room configuration. For example, phone rooms and focus rooms are to be the same size, but the furniture and configuration would be different.

Add small meeting rooms, phone room and focus rooms. Distribution: target 60% of meeting spaces for small meeting (4 or less);

30% medium meeting (5 to 10 people), and 10% large (10 to 20 people).

The functional program currently plans for a majority of meeting rooms as medium or large in size (non-clinical workspace only).

Space Type	Sq. Ft.	Count
Meeting Rooms	5,210	21
Team Room	2,030	6
Co-creation spaces that are not meeting rooms or team rooms – 20 classifications / naming conventions	12,825	1

PSOS/ PROJECT DEVELOPMENT RECOMMENDATIONS:

Re-allocate GFA to right-size meeting spaces and mandate modular design; typologies must be interchangeable and room proportions and footprints should maintain a consistent set of patterns



Collaboration appears to be limited to occasional interactions. Staff in Corporate or Support roles prefer email communication while Clinical Staff prefer face-to-face.

Source: Staff Survey



Meeting Room utilization (18% on average, 37% peak) was among the least used space types. No rooms was used more than 50% of the time. 59% of time collaborative space used by 3 or fewer people.

Source: Utilization Study



42% of face-to-face interactions occur in private office space and Clinical functions are most often engaged in this activity.

Source: Utilization Study



Existing meeting rooms are predominately large meeting spaces with simple technology solutions. Many private offices utilize space for meetings.

Source: Existing Space Tour

viii. MEETING ROOM BOOKING, ACCESS AND TECH SUPPORT

Build shared conferencing area where large and some medium meeting rooms are located. Conferencing area should be in a centralized location that all have access to and no department “owns.”

Meeting room scheduling on centralized booking system – not owned by department. Set reasonable rules for time limits for reoccurring meetings (i.e. no more than 3 months at a time) and set reminders to owner of reoccurring meeting to free room if not going to use it.

All meeting rooms should have some transparency into the room.

Minimum requirement of technology in meeting rooms:

- Monitor / display
- Telephone conferencing
- Ample electrical outlets / charging areas
- White board

PSOS/ PROJECT DEVELOPMENT RECOMMENDATIONS

Develop collaboration space strategy in the design of the overall workplace strategy; assign technology integration and booking management responsibility for meeting rooms to Pr.Co; consider needs of mobile devices in room designs.

iv. BRANDING AND WAYFINDING

Opportunity to thoughtfully tell the story of the organization, orient staff to their location, and reinforce desired culture. Infuse impactful environmental graphics and interactive moments in high impact locations.

Destinations should be easy to find without excessive use of signage. Memorable experiences, branded moments, and spaces for respite or play all create effective landmarks. More subtly, places should express an individual

sense of identity through implicit references like color, typeface, art or artifacts specific to culture or brand.

PSOS/ PROJECT DEVELOPMENT RECOMMENDATIONS:

Require integrated ID & Wayfinding strategy that blends navigation, memorable spaces and NH branded message; ensure strategy is cross-generational/ cross-cultural and accessible.

x. WI-FI TECHNOLOGY - INTEGRATE MOBILITY WITH DESIGN

Plan for ubiquitous WiFi network – hire technology consultant to work in tandem with architect and interior design team to plan for specifications on network type, volume of routers and other infrastructure required for delivery.

PSOS/ PROJECT DEVELOPMENT RECOMMENDATIONS

100% WiFi coverage is typical, however utilization of this coverage to streamline workflow and eliminate paper is not always considered; coordinate with NH and PDC technology advisor to maximize digital options.

xi. STAFF AREA FOR REPITE

Add place for respite / employee lounge and non-public space. Larger in size than kitchenettes, this is a multi-purpose space to support staff in relaxation, to meet casually, socialize and form connections. It provides a space for large groups, celebrations, food prep, lunch breaks, and alternate workplace in a restorative atmosphere. Aesthetics to emphasize relaxation, wellness & health.

Possible spaces from functional program to be used for this purpose (clinical & non-clinical workspace):

Space Type	Sq. Ft.	Count
Open work area / commons	8,020	7
Co-creation spaces that are not meeting rooms or team rooms – 25 classifications / naming conventions	20,665	57
Kitchenette / Nutrition Areas	600	11

PSOS/ PROJECT DEVELOPMENT RECOMMENDATIONS:

Re-allocate FP space OR provide definition for new space required to support this aim - consider pooling space assigned to staff lounges to allow for a more robust, enriched and diverse space(s)

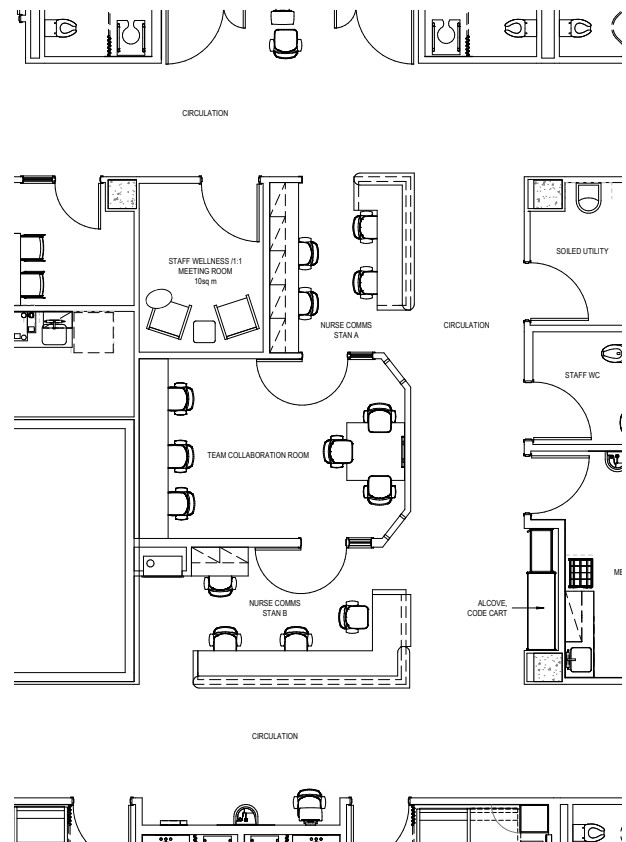
xii. INCREASE CAPACITY AND PRIVACY FOR CLINICAL STATIONS

Clinical stations should have adequate space for the personnel traffic that goes through and equipment required to be nearby.

Add workstation capacity – create dedicated space for visitors (Dr.'s, students, clinical support) in addition to nurses covering the station.

Build in a space for privacy at or near the clinical station with a door to accommodate need that is not accessible to the public. The space is for staff for uses such as

- Patient related discussions with other clinical staff
- Space for clinical staff to collect themselves when they can't leave the unit
- Other short term in nature privacy needs of staff such as a phone call



PSOS/ PROJECT DEVELOPMENT RECOMMENDATIONS:

Clinical stations are the (or one of the) essential 'workspaces' within the clinical environment and are a product of a 'vision' for collaborative work. Consider a multi-stage prototyping of this area; take into consideration the technology and how this influences workflow; consider how differing levels of privacy and different group sizes will be accommodated; this type of space is an ideal candidate for a template; use VR and physical mock-ups to validate requirements; describe the functional/ operational objectives of design characteristics

CLINICAL WORK AREAS



Clinical staff tend to have very different perspectives and needs than Corporate or Support. Clinicians need workstation access, prefer face-to-face communication and have greater respite needs while on breaks.

Source: Staff Survey



Clinical functions, particularly inpatient areas, struggle with having enough workstations to accommodate the people who use it (nurses, doctors, students, other clinical support).

Source: Staff Workshops and Leader Interviews



Medical supplies, equipment, carts and other large bulky items crowd clinical workspace, which accentuates space issues.

Source: Staff Workshops and Leader Interviews

xiii. LAYOUT THAT BUILDS OPTION FOR AGILE TRANSITION

South Niagara Hospital will likely not be paperless by the time the hospital is in operation in 2026. This fact rules out an unassigned desk environment. However, once the organization transitions to a more paperless state, it would open the possibility for a more agile work environment.

Layout considerations should include:

- Unbookable private space within reasonable access of majority of workstations
- Balance of individual space with shared space and circulation
- Adding adequate alternate work areas for people to go to

- Storage for paper artifacts (i.e. filing cabinets) could be replaced with lockers. Size and location of storage to consider the transition
- Include ample volume of power outlets to support use of mobile technology devices

PSOS/ PROJECT DEVELOPMENT RECOMMENDATIONS:

Consider examining test-fit for this evolution and ensuring adequate spatial and infrastructure allowances

xiv. WELL AP CONSULTANT

This report highlights features of WELL AP certification of most benefit to the South Niagara Hospital project, a goal for the project. The certification is based on a combination of mandatory features called Preconditions and an amount of additional features called Optimizations. The metrics can become complex based on the type of project applicable to certification:

- Core & Shell
- New and Existing Exteriors
- New and Existing Buildings

It is recommended that Niagara Health retains a WELL AP consultant in order to determine the appropriate type and level of features used for certification.

xv. FITNESS AND HEALTHY FOOD AMENITIES

Consider providing low or no cost pricing for staff use of the fitness centre currently programmed in the Staff Wellness Centre.

In planning food service amenities, prioritize healthy foods for customer choices.

Further, price healthy foods more affordably than unhealthy foods. Lower profit margins for healthy foods and higher profit margins on unhealthy foods will financially incentivize consumers to make healthy choices.

PSOS/ PROJECT DEVELOPMENT RECOMMENDATIONS:

WELL is a building/ workspace design guidance and rating system that examines a building and its relationship with its occupants holistically with an aim to be both 'healthy' and to promote 'health'. i.e. a salutogenic environment. WELL includes standard and understood methodologies to assess aspects of how a built environment will positively contribute to occupants/ users. Some of the aspects of the WELL pertain to operational characteristics (i.e. that are outside of PrCo's scope), nevertheless, applicable portions of WELL would be beneficial to NH's PSOS.

6B

WELL AP CONCEPTS FOR CONSIDERATION

Niagara Health will be considering WELL building certification for the new Niagara Falls Hospital redevelopment project. Feedback obtained throughout this Workplace Strategy exercise is part of the NH mandate to ensure that the new hospital is designed and built to fully support patient, family and visitor wellness, as equally as the wellness of staff within their workplace. A WELL certified project ensures a healthy built environment for occupants and visitors. In combination with LEED certification, WELL certification provides value in a business sense. A building that has met rigorous green building standards has perceived added value and can be used for marketing and branding opportunities. Improved staff health and wellness increases productivity, improves employee retention and reduces absenteeism. Finally, WELL certification encourages resource preservation, recycling/ reuse and pollution prevention.

The following section details WELL features that align with the workplace strategies described in this report. These features alone will not be enough to certify South Niagara Hospital in WELL. By complying with the recommendations made in this report, the South Niagara Hospital project will be already part way towards achieving the WELL designation.

As described in other sections, it is highly recommended that Niagara Health hire a WELL consultant concurrently with design services to manage the scorecard and remaining features to include.

WELL v2 certification involves the attainment of points towards preconditional (mandatory) and optimization features within a framework of ten (10) concept categories: Air, Water, Nourishment, Light, Movement, Thermal Comfort, Sound,

Materials, Mind, and Community. The following is an introductory overview of highlighted WELL features specifically applicable to the Workplace Strategy and the design of staff workspaces. These features are recommended to form part of the comprehensive project plan for achievement of WELL silver, gold or platinum levels of certification.

W06 - DRINKING WATER PROMOTION

This feature is an optimization ensuring equitable access to drinking water. At least one drinking water dispenser (minimum one per floor) must be located within 30m [100 ft] walking distance of all regularly occupied floor areas, and in all dining areas. During the research and understanding stages of this project, staff were observed obtaining water from washroom lavatories, hand hygiene stations, and sinks in clinical spaces. This practice causes numerous challenges because the faucet is often not oriented to allow a water bottle to fit below. Also, the practice of using hand hygiene stations to fulfill drinking water requirements is highly discouraged. This optimization will help mitigate issues associated with infection control.

This strategy fits comfortably into scope that can be transferred to PrCo through the PSOS.

N08 - MINDFUL EATING

This feature is an optimization that requires designated eating spaces that contain tables and chairs and the provision of daily meal breaks. Studies have found that people who eat alone may be more likely to choose unhealthier foods, eat fewer fruits and vegetables, and eat at irregular times. Eating alone may also be a potential risk factor for metabolic syndrome,

a group of risk factors that increase the risk of heart disease, stroke, and diabetes. Multiple feedback from workshop participants identified the staff lounge/lunch areas play a critical role in team building, collaboration, relationship building, and communication. Combining the space table allotment of several staff lounge areas into one larger and more central lunchroom hub is recommended, to discourage staff from eating alone and encourage interdisciplinary communication. Eating spaces should be free of televisions or configured in on a manner that encourages mindful eating without distractions.

It is likely that this will be most successful if it is undertaken by the PDC in the development of the PSOS. It will be difficult to assign this task to PrCo. given the nature of their access to NH stakeholders.

N10 – FOOD PREPARATION

This feature is an optimization associated with the provision of food storage and preparation spaces to support on-site assembly or reheating of meals brought from home. Analysis of dietary intake data shows that individuals who bring food from home tend to have a better diet quality than individuals who purchase food away from home. In concert with the N08 Mindful eating feature listed above, this feature will further support staff wellness and communal eating opportunities. Requirements dictate at least one Staff lounge/ lunch area must include cold storage, countertop surfaces, sink and amenities for dishwashing, device for reheating food, dedicated cabinet storage space, and reusable eating utensils.

This strategy fits comfortably into scope that can be transferred to PrCo through the PSOS.

L01 – LIGHT EXPOSURE & EDUCATION

This precondition feature considers appropriate indoor environment light exposure via daylighting or electric lighting strategies. Light

is the main driver of the circadian system, which controls body processes such as digestion, body temperature, sleep, and the release of certain hormones. Reduced exposure to light has been linked to onset of depression and impairment of cognitive function in individuals.

This feature includes 2 Parts. Part 1 recommended option requires that Spatial Daylight Autonomy of sDA200.40% is achieved for at least 30% of regularly occupied space, that 30% of workstations are situated within 6m [20ft] of transparent envelope glazing, and that the transparent envelope glazing area is no less than 7% of the floor for each floor level. Part 2 requires provision of educational resources outlining the link between light exposure and wellness. The educational resources can be in the form of educational signage or quarterly newsletters and must be tailored to the health concerns of building occupants.

This strategy fits comfortably into scope that can be transferred to PrCo through the PSOS - HOWEVER, the enforcement of this provision will need to be determined, proactive and timely (historically, this is not the case).

L02 – VISUAL LIGHTING DESIGN

This feature is also a precondition. It requires projects to provide appropriate illuminances on work planes for users of all ages and considering the tasks performed in the space. Compliance with IES, EN and ISO illuminance recommendation guidelines must be reached, and a lighting plan detailing tasks and activities regularly undertaken by occupants must be provided. Consider task lights.

This strategy fits comfortably into scope that can be transferred to PrCo through the PSOS.

L04 – GLARE CONTROL

Glare is defined as excessive brightness, excessive brightness-contrasts and excessive quantity of light. Just as light is crucial to wellness and circadian regularity, it can also

cause visual discomfort. Space planning and lighting design can minimize glare experienced by occupants of the space. Part 1 assesses the use of window shades to mitigate glare, unless the space meets a maximum level of sunlight exposure for no more than 10% of occupied space. Part 2 challenges the lighting design to meet Unified Glare Rating (UGR) values and luminaire shielding angles.

This strategy fits comfortably into scope that can be transferred to PrCo through the PSOS.

V02 – VISUAL AND PHYSICAL ERGONOMICS

This precondition utilizes ergonomic design and education to help reduce physical strain and injury, and to improve ergonomic comfort and workplace safety. The feature takes a close look at musculoskeletal disorders as one of the most commonly reported causes of lost or restricted work time and lost productivity and acknowledges that both prolonged sitting and prolonged standing pose health risks.

There are five (5) parts to this feature. One: all spaces must have height adjustable computer monitors. Two: for a minimum of 25% of workstations, employees must have the ability to alternate between sitting or standing positions. Three: all task seating must meet HFES and BIFMA guidelines for height, depth, backrest angle, seat angle and arm rest adjustment capabilities. Four: at workstations where staff are required to stand more than 50% of their working hours will require 10cm (4in) of recess toe space plus either a footrest or anti-fatigue mats. Five: provision of education on topics such as musculoskeletal disorders, ergonomic risk factors, and process for requesting ergonomic furnishings and assessments.

This strategy can be transferred to PrCo through the PSOS provided the FFE scope is suitably coordinated and the PSOS includes enhanced ergonomics requirements and provisions for training on workspace health.

V03 - MOVEMENT NETWORK AND CIRCULATION

This optimization feature promotes daily physical activity and movement through the design of the circulation network. Strategies to encourage short bouts of health enhancing physical activity are described within the three (3) parts of this feature. Part 1: hallways and at least one staircase should be aesthetically designed through the inclusion of music, artwork, light levels of at least 215lux, views of outdoor space or interior atriums, gamification, and natural design elements such as plants or images of nature. Part 2: Point-of-Decision signage encouraging stair use must be integrated at elevator banks, stairwells, and corridor junctions that lead to stairwells. Part 3: Stairs should be located physically and/or visibly before any motorized vertical transportation, and they should be open to all regular building occupants.

This strategy can be transferred to PrCo through the PSOS.

V07 – ACTIVE FURNISHINGS

This feature is an optimization that discourages prolonged sitting by providing active workstations and furnishings to as many people in the building as possible. Sit-stand style furniture should be provided for 50% of the workstations. An additional point can be obtained for providing 75% sit-stand workstations. Dynamic workstations such as treadmill and bicycle desks must be provided in quantities such that at least 3% of employees could use them at any time. This includes portable furnishings such as a stepper machine or balance board.

This strategy can be transferred to PrCo through the PSOS provided FFE is properly coordinated/ selected.

TO1 – THERMAL PERFORMANCE

This feature is a precondition as comfortable thermal conditions is ranked as one of the strongest contributing factors to occupant satisfaction within the work environment. Too cold or too warm spaces came up on all of our user engagement sessions: digital staff survey, stakeholder workshops, and leadership interviews. The first part of this feature utilizes a model to address the six key parameters of thermal comfort: air temperature, humidity, air movement, mean radiant temperature of surrounding surfaces, metabolic rate and clothing insulation. Part 2 requires that ongoing monitoring is performed for all spaces no less than twice a year. Results must be submitted annually through WELL Online.

This strategy can be transferred to PrCo through the PSOS (although Part 2 may pose some risk-transfer challenges).

S01 – SOUND MAPPING

Acoustical disturbance is cited as one of the primary staff concerns when relocating from private offices to a more open style of workspace. Compliance with this feature will go hand in hand with the recommended workplace strategy and the requisite change management exercise. This feature part 1 requires annotated drawings and narratives depicting how strategic interior planning and site zoning creates an acoustical plan that identifies internal and external noise sources that negatively impact the acoustical environment. Thoughtful location of the four different space groups for focus, collaboration, socialization and learning is essential. Part 2 addresses acoustical privacy via architectural drawing or narrative indicating acoustical performance of partition assemblies (STC/Rw, NIC/Dw or equivalent metrics). Part 3 pertains to the identification and labeling of loud, quiet and mixed zones on plan.

This strategy can be transferred to PrCo through the PSOS with support from detail in the Acoustics sections.

S03 – SOUND BARRIERS

This feature helps to bolster the acoustical privacy between rooms and can operate in tandem with Feature S01 Sound Mapping. Part 1 lists minimums for the sum of background noise and sound insulation levels between source rooms and receiving rooms. Doors are typically the weakest point in the sound barrier, thus part 2 of this feature focuses on door specification. Doors connecting spaces to private offices, conference rooms, classrooms or dwelling units must be considered with construction details such as head and jamb gaskets, drop seals/sweep base, minimum STC-30 and solid core assembly.

S04 – SOUND ABSORPTION

The current industry guideline for hospital and healthcare spaces precludes the use of carpet or any kind of soft flooring, even in non-clinical office spaces. Because of this, reverberation factors and speech intelligibility must be carefully considered to support sonic comfort and the ability to focus. Controlling the effects of reverberant and reflected acoustical energy can be achieved via combination of space design and provision of absorptive finishes. Part 1 lists maximum reverberation thresholds all room types, Part 2 indicates NRC thresholds for absorptive ceiling materials, and Part 3 indicates appropriate NRC values for vertical (wall) surfaces.

This strategy can be transferred to PrCo through the PSOS with support from detail in the Acoustics sections.

S05 – SOUND MASKING

Sound masking is an effective mitigation technique that can be utilized to address noise issues in the open office environment. This is a Well optimization feature that helps to increase acoustical privacy by mandating the use of sound masking systems. Sound masking consists of ambient background sound engineered to match the frequency of human speech, which renders the speech unintelligible. When speech is unintelligible is less distracting, if not entirely imperceptible. The sound is similar to the sound of airflow but engineered to the frequency of human speech. Rather than cancel or eliminate speech noise in an environment, sound masking simply reduces how far away conversations can be heard and understood by others. This feature has one part that dictates the provision of sound masking in all of the following spaces: open offices, cafeterias, corridors/hallways, enclosed offices and wellness rooms.

M02 – ACCESS TO NATURE

This Well feature is a precondition and requires the integration of nature into the interior and exterior design elements via plants, water, light and views. Indirect access to nature has been shown to be just as effective as direct access and includes the use of natural or nature-looking finish materials, biophilic patterns, colours and/or images. Access to nature in key spaces can mitigate stressors and positively impact cognitive and emotional health, focus, productivity and well-being. Real or artificial plants should be utilized throughout workspaces and can work in concert with feature S04 sound absorption to create visual barriers and absorptive buffer zone between different work cluster typologies.

Access to Nature is likely to be a central consideration for the design of spaces for both patients and staff in the new NH. Careful definition of the definitions for ‘access’ will need to be set-out with clear performance objectives and stipulated requirements proceeding from the ISD test and aspects of the Vision/ Design Excellence definitions.

7

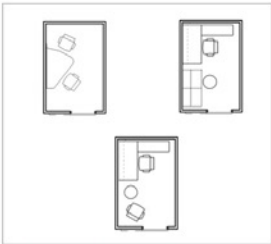
APPENDICES

APPENDIX A

WORKSPACE TYPOLOGIES

The following space typologies and Kit-of-Parts planning strategy are recommended for the Niagara Health workspaces and are based on user feedback and augmented with best practices.

OFFICE



Various furniture layout options. TBD



Image above for inspirational purposes

DESCRIPTION

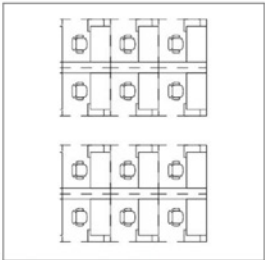
A private space for individual or small group work. May also be considered for use as a shared, assigned space when required depending on the team.

Capacity:	1 - 4
Setting Size:	8' x 12'
Configuration:	Enclosed
Ownership:	Assigned / Unassigned
Booking Status:	Bookable

DESIGN CONSIDERATIONS

Adjacencies:	Work Zone; Quiet Zone
Visual Privacy:	Low ————— High
Acoustic Privacy:	Low ————— High
Furniture Options:	Various options: ergonomic chair with desk (various shapes), standing/sitting, consider personal storage if assigned
Lighting:	Ambient; Supplementary accent (optional)
Power/data:	Yes
Technology/tools:	Technology/tools to support voice/video conference, writable and/or magnetic walls

WORKSTATION



Various furniture layout options. TBD



Image above for inspirational purposes

DESCRIPTION

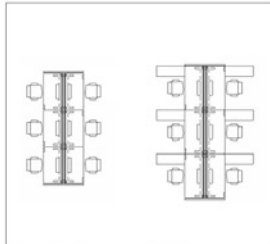
An ergonomic workspace, designed to support individual work or for teams when collocated adjacently.

Capacity:	1 at each desk. (in clusters up to groups of 8)
Setting Size:	6' x 6'
Configuration:	Open
Ownership:	Assigned
Booking Status:	N/A

DESIGN CONSIDERATIONS

Adjacencies:	Natural Light; Collocation of teams; Access to enclosed rooms
Visual Privacy:	Low ————— High
Acoustic Privacy:	Low ————— High
Furniture Options:	Height-adjustable workspace, Ergonomic task seat, Potential for personal storage
Lighting:	Ambient; Task; Supplementary Accent (optional) ; Linear Pendant fixtures above workstation pods
Power/data:	Yes; above and below desks
Technology/tools:	Consider - monitor screens, monitor arms, task lighting

DROP-IN DESKS



Various furniture layout options, TBD



Image above for inspirational purposes

DESCRIPTION

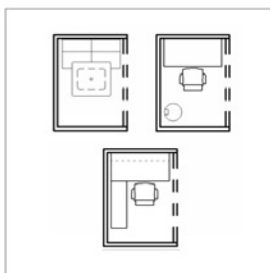
An ergonomic workspace, designed to support individual work of visitors within an open work environment.

Capacity:	1 at each desk, (in clusters up to groups of 8)
Setting Size:	5' x 5'
Configuration:	Open
Ownership:	Unassigned
Booking Status:	Bookable / Non-bookable

DESIGN CONSIDERATIONS

Adjacencies:	Natural Light; Collocation of teams; Access to enclosed rooms
Visual Privacy:	Low ————— High
Acoustic Privacy:	Low ————— High
Furniture Options:	Height-adjustable workspace, Ergonomic task seat, Potential for personal storage
Lighting	Ambient; Task; Supplementary Accent (optional) : Linear Pendant fixtures above workstation pods
Power/data:	Yes; above and below desks
Technology/tools:	Consider - monitor screens, monitor arms, task lighting

FOCUS ROOM



Various furniture layout options, TBD

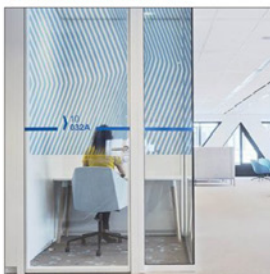


Image above for inspirational purposes

DESCRIPTION

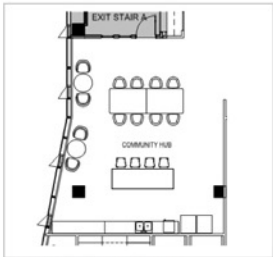
A private space for 1-2 people for focused, confidential work. May also be considered for use as a shared, assigned space when required.

Capacity:	1 - 2
Setting Size:	6' x 8'
Configuration:	Enclosed
Ownership:	Assigned / Unassigned
Booking Status:	Bookable

DESIGN CONSIDERATIONS

Adjacencies:	Work Zone; Quiet Zone
Visual Privacy:	Low ————— High
Acoustic Privacy:	Low ————— High
Furniture Options:	Various options: lounge, ergonomic chair with desk, standing/counter height
Lighting	Ambient; Lay-in Fixtures as per layout, task lighting when required
Power/data:	Yes
Technology/tools:	Consider - technology/tools to support voice/video conference

STAFF LOUNGE



Various furniture layout options, TBD



Image above for inspirational purposes

DESCRIPTION

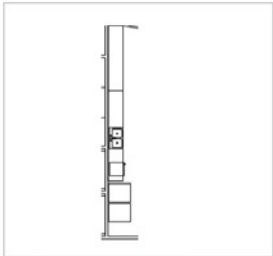
A multi-purpose away from the public to support staff to unwind, meet casually, socialize and form connections. It provides a space for large groups, celebrations, food prep, lunch breaks, and alternate workplace in a restorative atmosphere.

Capacity:	20-40 comfortably (more for 'standing-room') - may vary per floor
Setting Size:	800 SF (approx.) - may vary per floor. Two lounges per floor preferred
Configuration:	Open, with noise mitigation strategies (ie. buffers) between adjacent zones
Ownership:	Unassigned
Booking Status:	Bookable for large events

DESIGN CONSIDERATIONS

Adjacencies:	Daylight; Elevator lobby; Outdoor space (if available)
Visual Privacy:	Low <div><div></div></div> High
Acoustic Privacy:	Low <div><div></div></div> High
Furniture Options:	Various settings to support different postures and functions, including (but not limited to): lounge, booths, communal tables, cafe chairs and tables, stools, tiered seating.
Lighting	Ambient; Decorative (optional); Supplementary Accent (optional);
Power/data:	Power, accessible to users throughout
Technology/tools:	Consider large digital displays for company communications, shared content from mobile devices for events/presentations, cable television
Equipment:	Kitchen facilities for food storage and prep

KITCHENETTE



Various furniture layout options, TBD

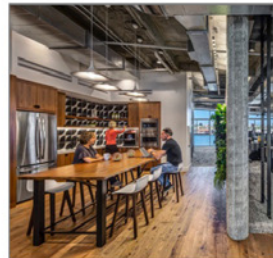


Image above for inspirational purposes

DESCRIPTION

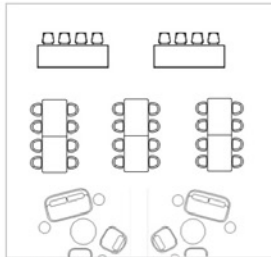
A multi-purpose away from the public to support staff to unwind, meet casually, socialize and form connections. It provides a space for large groups, celebrations, food prep, lunch breaks, and alternate workplace in a restorative atmosphere.

Capacity:	N/A
Setting Size:	100 - 300 SF (approx.) - may vary per floor.
Configuration:	Open, with noise mitigation strategies (ie. buffers) between adjacent zones
Ownership:	Unassigned
Booking Status:	N/A

DESIGN CONSIDERATIONS

Adjacencies:	Daylight; Elevator lobby
Visual Privacy:	Low <div><div></div></div> High
Acoustic Privacy:	Low <div><div></div></div> High
Furniture Options:	Various settings to support different postures and functions, including (but not limited to): lounge, booths, communal tables, cafe chairs and tables, stools, tiered seating.
Lighting	Ambient; Decorative (optional); Supplementary Accent (optional);
Power/data:	Power, accessible to users throughout
Technology/tools:	N/A
Equipment:	Kitchen facilities for food storage and prep

OUTDOOR SPACE



Various furniture layout options, TBD



Image above for inspirational purposes

DESCRIPTION

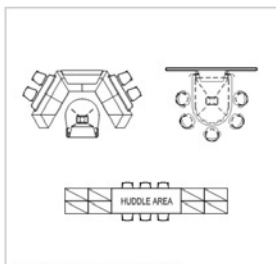
A multi-purpose away from the public to support staff to unwind, meet casually, socialize and form connections. It provides a space for large groups, celebrations, lunch breaks, and alternate workplace in a restorative atmosphere.

Capacity:	20-40 people
Setting Size:	800 SF (approx.) - may vary per location.
Configuration:	Open, with noise mitigation strategies (ie. buffers) between adjacent zones
Ownership:	Unassigned
Booking Status:	N/A

DESIGN CONSIDERATIONS

Adjacencies:	Daylight; Elevator lobby
Visual Privacy:	Low ————— High
Acoustic Privacy:	Low ————— High
Furniture Options:	Various settings to support different postures and functions, including (but not limited to): lounge, booths, communal tables, cafe chairs and tables, stools, tiered seating.
Lighting:	Ambient; Decorative (optional); Supplementary Accent (optional);
Power/data:	Power, accessible to users throughout
Technology/tools:	N/A
Equipment:	N/A

HUDDLE AREA



Various furniture layout options, TBD

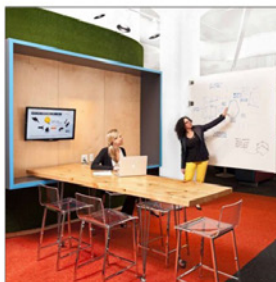


Image above for inspirational purposes

DESCRIPTION

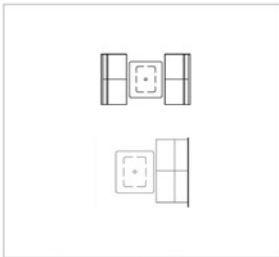
A place for impromptu conversations and casual meetings.

Capacity:	4 - 8
Setting Size:	96-432 SF; can vary per location
Configuration:	Semi-enclosed / Enclosed
Ownership:	Unassigned
Booking Status:	Bookable

DESIGN CONSIDERATIONS

Adjacencies:	Community Zone; Collaboration Zone; Work Zone
Visual Privacy:	Low ————— High
Acoustic Privacy:	Low ————— High
Furniture Options:	Various options: lounge, desk/working height, standing height
Lighting:	Ambient; Allow for Decorative / Accent Feature above each setting
Power/data:	Yes
Technology/tools:	Digital displays for shared content from mobile devices, writable and/or magnetic/ tackable surfaces

BREAK-OUT



Various furniture layout options, TBD



Image above for inspirational purposes

DESCRIPTION

A comfortable setting for small groups to connect, supporting impromptu discussions and non-confidential collaboration that is separate but adjacent to team areas.

Capacity:	2 - 4
Setting Size:	Varies
Configuration:	Semi-enclosed
Ownership:	Unassigned
Booking Status:	Non-bookable

DESIGN CONSIDERATIONS

Adjacencies:	Collaboration Zone: Work Zone
Visual Privacy:	Low ————— High
Acoustic Privacy:	Low ————— High
Furniture Options:	Various options: lounge sofas/chairs, booth.
Lighting	Ambient; Decorative Light / Pendant above Lounge
Power/data:	Power
Technology/tools:	Consider digital displays for shared content from mobile devices, writable and/or magnetic/ tackable surfaces

TEAM ROOM



Various furniture layout options, TBD



Image above for inspirational purposes

DESCRIPTION

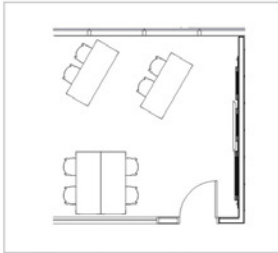
A project-based meeting space with integration of digital and writable displays to encourage a variety of activities. This space may be booked for extended periods of time.

Capacity:	6 - 8 (Up to 12 standing)
Setting Size:	18' x 24'
Configuration:	Enclosed
Ownership:	Unassigned
Booking Status:	Bookable

DESIGN CONSIDERATIONS

Adjacencies:	Community Zone: or Collaboration Zone
Visual Privacy:	Low ————— High
Acoustic Privacy:	Low ————— High
Furniture Options:	Various options to support a dynamic meeting - table oriented around digital display (sitting/standing), casual posture seating with surfaces to support mobile devices, consider some movable elements
Lighting	Ambient - user adjustable; Accent (optional);
Power/data:	Yes
Technology/tools:	Digital displays for shared content, A/V integrated, writable and/or tackable surfaces, consider providing brainstorming tools

FLEXIBLE COLLABORATION



Various furniture layout options, TBD



Image above for inspirational purposes

DESCRIPTION

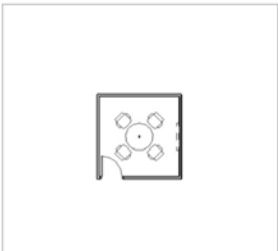
A shared, multi-purpose meeting space for group discussions, presentations, training, and sharing of information in a flexible environment that is user-adjustable for the function.

Capacity:	16 - 24. Consider operable walls to increase capacity
Setting Size:	18' x 24'
Configuration:	Enclosed
Ownership:	Unassigned
Booking Status:	Bookable

DESIGN CONSIDERATIONS

Adjacencies:	Community Zone; Collaboration Zone
Visual Privacy:	Low <input type="checkbox"/> High <input type="checkbox"/>
Acoustic Privacy:	Low <input type="checkbox"/> High <input type="checkbox"/>
Furniture Options:	Flexible, user adjustable meeting tables and chairs (fold-up/stackable/nests).
Lighting:	Ambient - user adjustable; Accent (optional);
Power/data:	Yes - flush at floor level, flexibility to accommodate various layouts
Technology/tools:	Digital displays for shared content, A/V integrated, writable and/or tackable surfaces

SMALL FORMAL COLLABORATION



Various furniture layout options, TBD



Image above for inspirational purposes

DESCRIPTION

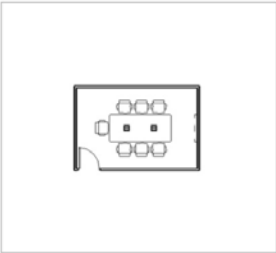
A shared meeting space for team-based or interdepartmental focused group discussions and sharing of information with local and remote teams in a formal, often scheduled meeting.

Capacity:	4 - 6
Setting Size:	12' x 12'
Configuration:	Enclosed
Ownership:	Unassigned
Booking Status:	Bookable

DESIGN CONSIDERATIONS

Adjacencies:	Community Zone;
Visual Privacy:	Low <input type="checkbox"/> High <input type="checkbox"/>
Acoustic Privacy:	Low <input type="checkbox"/> High <input type="checkbox"/>
Furniture Options:	Meeting table oriented around digital display, meeting chairs, with additional overflow seating. Seated/Standing height
Lighting:	Linear pendant over tables in Medium & Large Meeting Rms (optional). Recessed downlights along perimeter
Power/data:	Yes
Technology/tools:	Digital displays for shared content, A/V integrated, writable and/or tackable surfaces

MEDIUM FORMAL COLLABORATION



Various furniture layout options, TBD



image above for inspirational purposes

DESCRIPTION

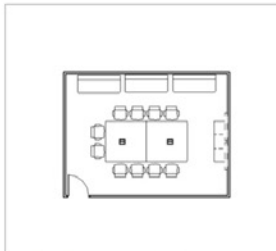
A shared meeting space for team-based or interdepartmental focused group discussions and sharing of information with local and remote teams in a formal, often scheduled meeting.

Capacity:	6 - 8
Setting Size:	12' x 18'
Configuration:	Enclosed
Ownership:	Unassigned
Booking Status:	Bookable

DESIGN CONSIDERATIONS

Adjacencies:	Community Zone:
Visual Privacy:	Low ————— High
Acoustic Privacy:	Low ————— High
Furniture Options:	Meeting table oriented around digital display, meeting chairs, with additional overflow seating. Seated/Standing height
Lighting:	Linear pendant over tables in Medium & Large Meeting Rms (optional). Recessed downlights along perimeter
Power/data:	Yes
Technology/tools:	Digital displays for shared content, A/V integrated, writable and/or touchable surfaces

LARGE FORMAL COLLABORATION



Various furniture layout options, TBD

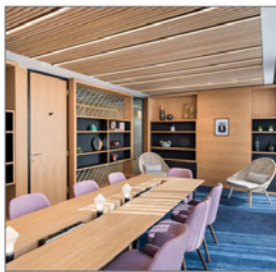


image above for inspirational purposes

DESCRIPTION

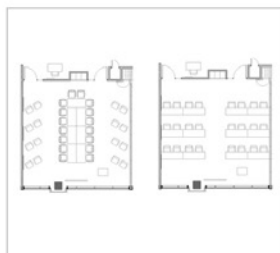
A shared meeting space for team-based or interdepartmental focused group discussions and sharing of information with local and remote teams in a formal, often scheduled meeting.

Capacity:	10 - 12 (Up to 20)
Setting Size:	18' x 24'
Configuration:	Enclosed
Ownership:	Unassigned
Booking Status:	Bookable

DESIGN CONSIDERATIONS

Adjacencies:	Community Zone:
Visual Privacy:	Low ————— High
Acoustic Privacy:	Low ————— High
Furniture Options:	Meeting table oriented around digital display, meeting chairs, with additional overflow seating. Seated/Standing height
Lighting:	Linear pendant over tables in Medium & Large Meeting Rms (optional). Recessed downlights along perimeter
Power/data:	Yes
Technology/tools:	Digital displays for shared content, A/V integrated, writable and/or touchable surfaces

TRAINING ROOM



Various furniture layout options, TBD

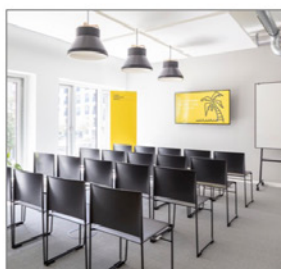


Image above for inspirational purposes

DESCRIPTION

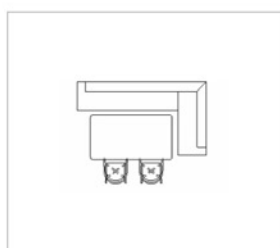
A flexible space for team-based or interdepartmental focused group training and sharing of information with local and remote teams in a formal or collaborative, often scheduled meeting.

Capacity:	24 - 30 (Up to 36) Consider operable walls to increase capacity
Setting Size:	+24' x +30'
Configuration:	Enclosed
Ownership:	Unassigned
Booking Status:	Bookable

DESIGN CONSIDERATIONS

Adjacencies:	Community Zone;
Visual Privacy:	Low <input type="checkbox"/> High <input checked="" type="checkbox"/>
Acoustic Privacy:	Low <input type="checkbox"/> High <input checked="" type="checkbox"/>
Furniture Options:	Meeting table oriented around digital display, meeting chairs, with additional overflow seating. Seated/Standing height
Lighting:	Linear fixtures spanning area. Recessed downlights along perimeter
Power/data:	Yes
Technology/Tools:	Digital displays for shared content, A/V integrated, writable and/or tackable surfaces

GATHERING AREA



Various furniture layout options, TBD



Image above for inspirational purposes

DESCRIPTION

An informal setting for small groups to connect/congregate to support impromptu discussions pre- or post- meetings, separate from the work area.

Capacity:	2 - 6
Setting Size:	200-300 SF
Configuration:	Open
Ownership:	Unassigned
Booking Status:	Non-bookable

DESIGN CONSIDERATIONS

Adjacencies:	Meeting Rooms
Visual Privacy:	Low <input type="checkbox"/> High <input checked="" type="checkbox"/>
Acoustic Privacy:	Low <input type="checkbox"/> High <input checked="" type="checkbox"/>
Furniture Options:	Various options: lounge, sofa/chairs, booth
Lighting:	Ambient; Decorative (optional);
Power/data:	None
Technology/Tools:	None

WELLNESS ROOM



Various furniture layout options. TBD

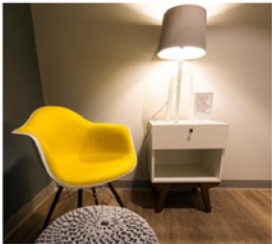


Image above for inspirational purposes

DESCRIPTION

A private space for meditation, prayer, respite or for nursing/lactation personal care needs.

Capacity:	TBD
Setting Size:	TBD
Configuration:	Enclosed
Ownership:	Unassigned
Booking Status:	Bookable

DESIGN CONSIDERATIONS

Design considerations to be reviewed: sink, small fridge, towels, curtains (if shared)
This space type needs to be further discussed and reviewed with Niagara Health

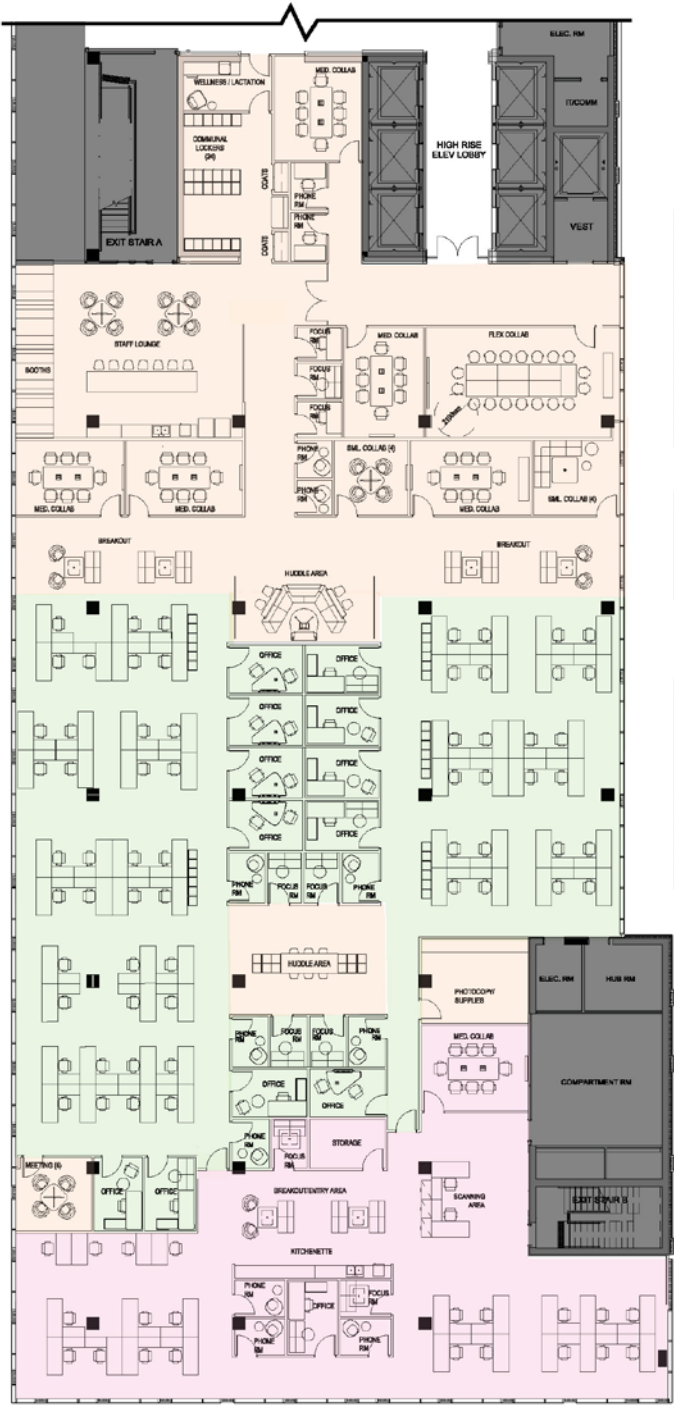
APPENDIX B

TEST FIT FLOORPLANS

For the purpose of this test fit study, a generic rectangular building configuration with a GSF floorplate area of approximately 16,750 has been used. This floor plate provides light and view into the workspace from multiple directions. Within the context of a new healthcare facility plan, this portion of the building could form a wing or a central space bounded by inner courtyards. The ideal disposition of this space would be a key objective of the ISD options studies.

Washrooms, housekeeping and utility/service type rooms are planned at the elevator core and shared by all departments on the floor. Staff Lounges (nourishment) areas are also shared amongst departments that occupy the same floor.

(Connection to ex. building. Includes core areas)



FLOOR PLAN BENEFITS

- Centralized meeting area
- Flexible/reconfigurable collaborative space
- Alternate work zone
- Small breakout/collaborative space
- Ample desk surface area
- Natural light is shared
- Balance of open and enclosed space
- Staff only respite space

SHARED SPACES

Collaboration (Shared)	
Staff Lounge (20-40ppl)	0
Flexible Collaboration	1
Large Meeting (10-20ppl)	0
Medium Meeting (6-10ppl)	5
Small Collaboration (4-6ppl)	3
Huddle Area	2
Staging Area	0
Break Out	4
Focus Room (1-3ppl)	3
Phone Room (1-2ppl)	2
Wellness/Lactation Room	1
Resource area (file/copy)	1

CLINICAL SERVICES

Workspace	
Workstation, large	61
Workstation, small	0
Focus Room (1-3ppl)	4
Office (1-4ppl)	12
Phone Room (1-2ppl)	5

HEALTH RECORDS

Workspace	
Workstation, large	17
Workstation, small	10
Focus Room (1-3ppl)	2
Office (1-4ppl)	1
Phone Room (1-2ppl)	3
Support Spaces	
Entry area 3-seats (no receptionist)	1
Special Purpose (spaces requested by user group)	
Scanning Area - 2 benching style seats	1
Storage Room - adjacent to scanning area	1

LEGEND

- SHARED SPACES
- CLINICAL SERVICES
- HEALTH RECORDS

Sheet number: 0001

THIS SKETCH IS TO BE READ IN CONJUNCTION WITH AND FORMS PART OF DRAWING NO.:



B+H Architects Corp.
481 University Avenue, Suite 300
Toronto, ON M5G 2M4
Tel: 416.596.2299 Fax: 416.596.0590

**Niagara Health
Test Fits - Plan 1**

CLINICAL SERVICES AND HEALTH RECORDS

PROJECT NO.	ISSUED	REVISION
1911091	191111	1
DRAWN	BY	
CY		
SCALE	SHEET NUMBER	
	1	

ALL RIGHTS RESERVED. PROPERTY OF B+H ARCHITECTS, INC. USE OR REPRODUCTION PROHIBITED WITHOUT PRIOR WRITTEN PERMISSION. CONTRACTOR SHALL CHECK ALL DIMENSIONS ON THE WORK AND REPORT ANY DISCREPANCY TO THE CONSULTANT BEFORE PROCEEDING.

FLOOR PLAN BENEFITS

- Centralized meeting area
- Flexible/reconfigurable collaborative space
- Alternate work zone
- Small breakout/collaborative space
- Ample desk surface area
- Natural light is shared
- Balance of open and enclosed space
- Staff only respite space

SHARED SPACES

Collaboration (Shared)	
Staff Lounge (20-40 ppl)	1
Flexible Collaboration	2
Large Meeting (10-20 ppl)	2
Small Collaboration (4-6 ppl)	2
Huddle Area	1
Break Out	5
Regenerative/Wellness (Shared)	
Lactation/Wellness Room	1
Support Spaces	
Resource area (file/copier)	1
Coat/Boots Alcove and Lockers Area	1

PHARMACY

Workspace	
Workstation, large	31
Focus Room (1-3 ppl)	6
Office (1-4 ppl)	8
Phone Room (1-2 ppl)	5
Support Spaces	
Entry area 2-seats + Receptionist	1
Special Purpose (spaces requested by user group)	
Storage Room	1

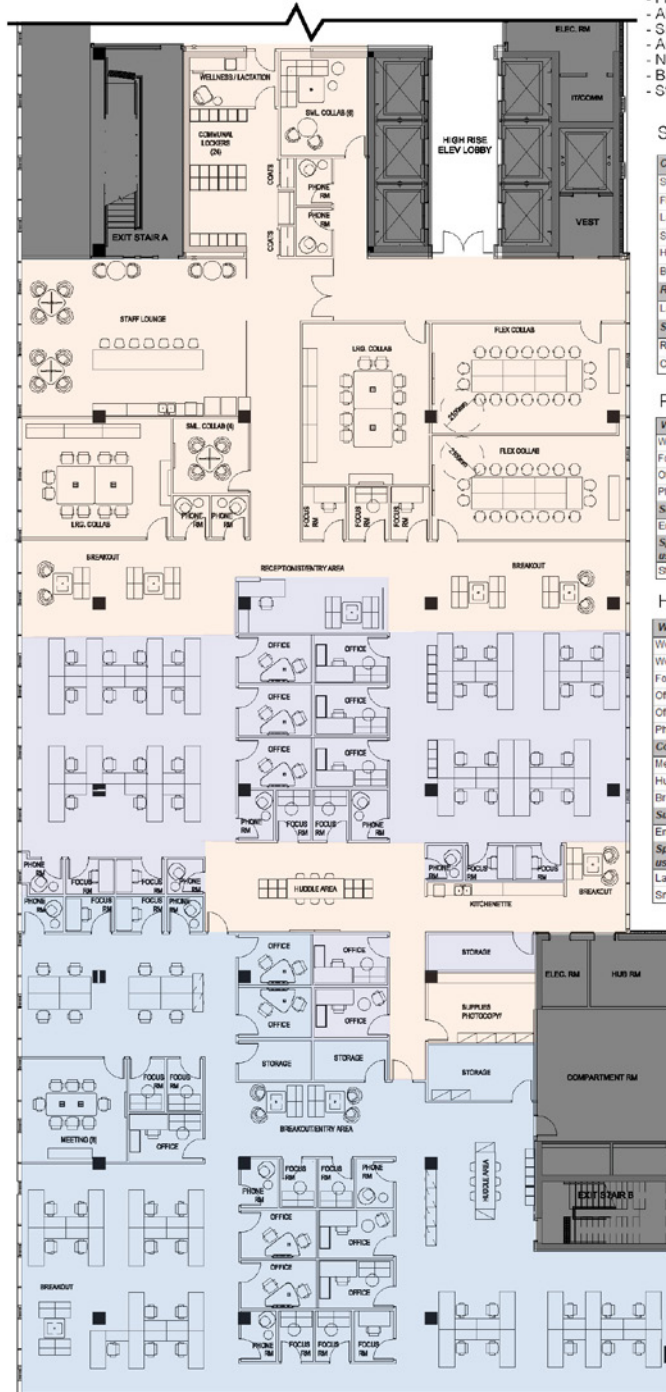
HR

Workspace	
Workstation, large	23
Workstation, small	8
Focus Room (1-3 ppl)	9
Office, Directors & VP	2
Office (1-4 ppl)	6
Phone Room (1-2 ppl)	5
Collaboration	
Medium Meeting (6-10 ppl)	1
Huddle Area	1
Break Out	1
Support Spaces	
Entry area 4-seats (no receptionist)	1
Special Purpose (spaces requested by user group)	
Large Storage Room	1
Small Storage Room	2

LEGEND

- SHARED SPACES
- PHARMACY
- HR

(Connection to ex. building. Includes core areas.)



Sheet Name: 0000

Sheet Number: 0000

THIS SKETCH IS TO BE READ IN CONJUNCTION WITH AND FORMS PART OF DRAWING NO.:



B+H Architects Corp.
481 University Avenue, Suite 300
Toronto, ON M5G 2B4
T416.596.2299 F416.596.0599

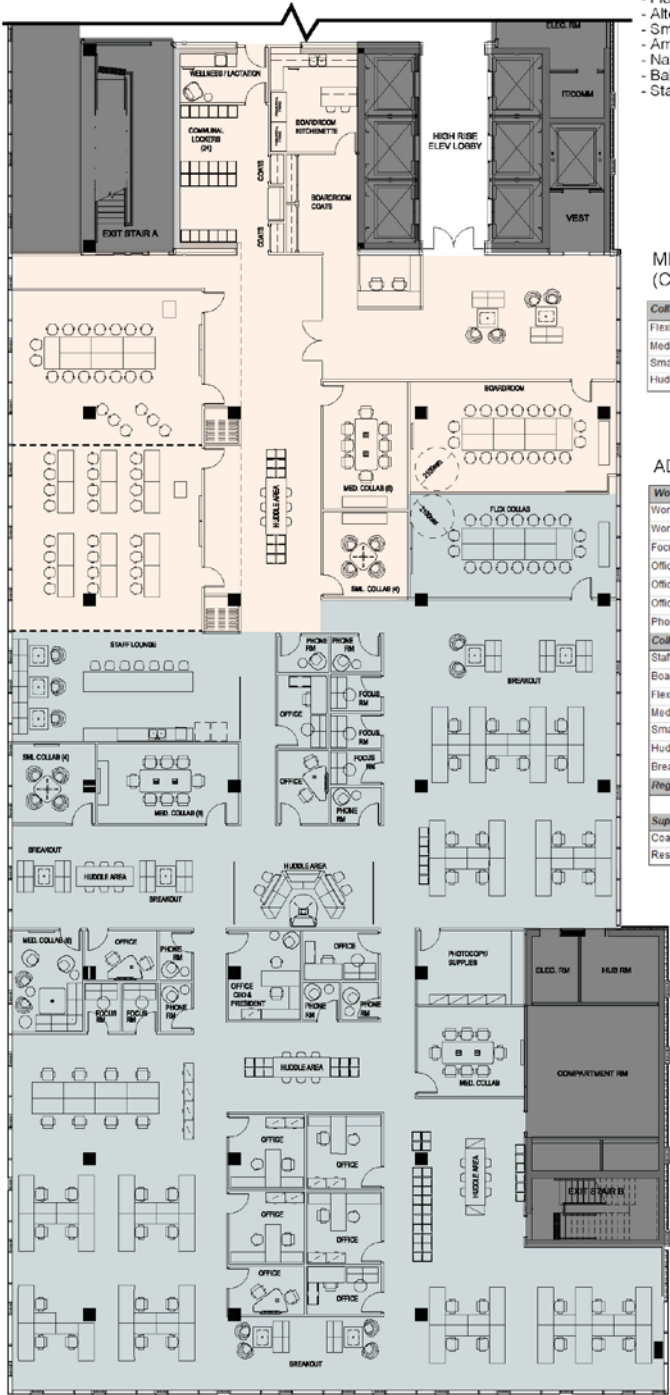
Niagara Health Test Fits - Plan 2

HR AND PHARMACY DEPARTMENTS

PROJECT NO.	ISSUED	REVISION
1911091	191111	1
DRAWN	CY	
SCALE	SHEET NUMBER	
	2	

ALL RIGHTS RESERVED. PROPERTY OF B+H ARCHITECTS, INC. USE OR REPRODUCTION PROHIBITED WITHOUT PRIOR WRITTEN PERMISSION. CONTRACTOR SHALL CHECK ALL DIMENSIONS ON THE WORK AND REPORT ANY DISCREPANCY TO THE CONSULTANT BEFORE PROCEEDING.

(Connection to ex. building. Includes core areas.)



FLOOR PLAN BENEFITS

- Centralized meeting area
- Flexible/reconfigurable collaborative space
- Alternate work zone
- Small breakout/collaborative space
- Ample desk surface area
- Natural light is shared
- Balance of open and enclosed space
- Staff only respite space

MEETING ROOM HUB
(CONFERENCE FLOOR)

Collaboration (Shared)	
Flexible Conference	2
Medium Collaboration (6-10 ppl)	1
Small Collaboration (4-6 ppl)	1
Huddle Area	1

ADMIN

Workspace	
Workstation, large	38
Workstation, small	8
Focus Room (1-3 ppl)	5
Office CEO & President	1
Office Directors	4
Office (1-4 ppl)	6
Phone Room (1-2 ppl)	7
Collaboration (Shared)	
Staff Lounge (20-40 ppl)	1
Boardroom	1
Flexible Collaboration	1
Medium Meeting (6-10 ppl)	3
Small Collaboration (4-6 ppl)	1
Huddle Area	3
Break Out	6
Regenerative/Wellness (Shared)	
	1
Support Spaces	
Coat/Boots Alcove and Lockers Area	1
Resource area (file/copier)	1

LEGEND

- SHARED MEETING SPACES
- ADMIN

Sheet number: 0000

THIS SKETCH IS TO BE READ IN CONJUNCTION WITH AND FORMS PART OF DRAWING NO.:



B+H Architects Corp.
481 University Avenue, Suite 300
Toronto, ON M5G 2M4
T416.598.2299 F416.595.0599

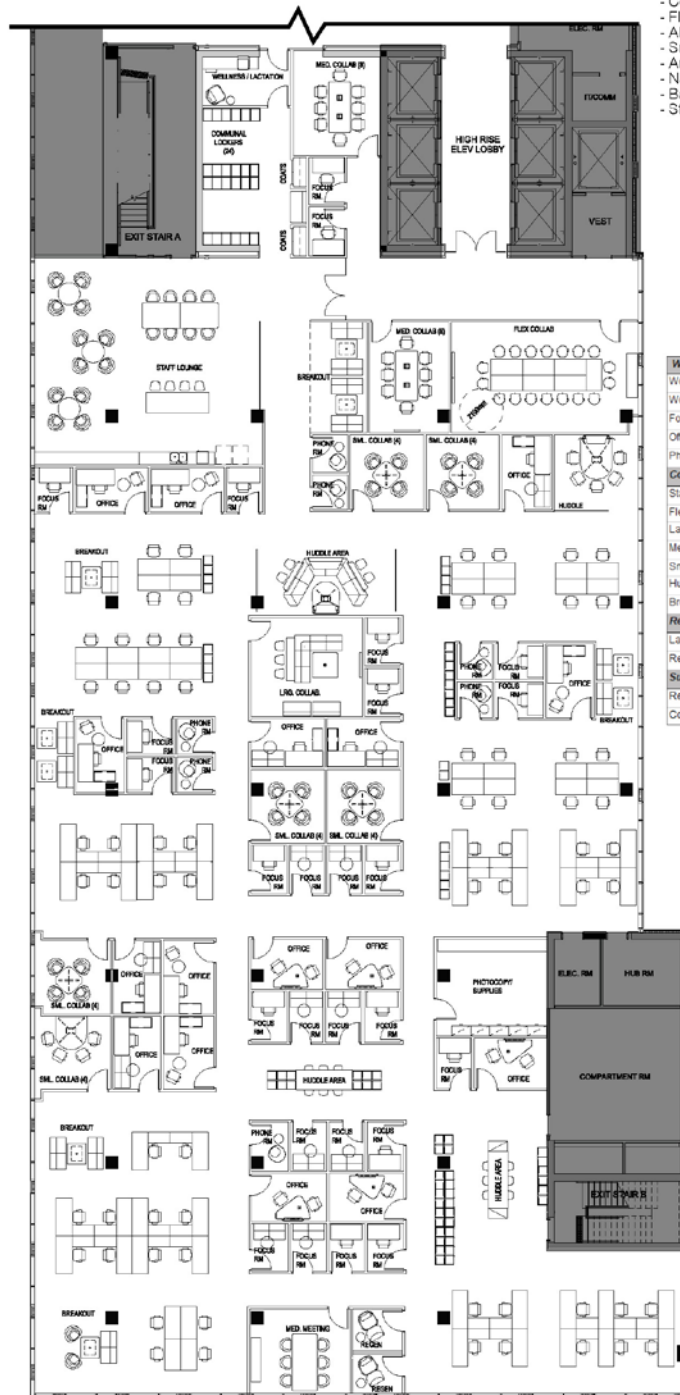
Niagara Health
Test Fits - Plan 3

ADMIN AND SHARED CONFERENCE

PROJECT NO.	ISSUED	REVISION
1911091	191111	
SCALE	DRAWN CY	1
	SHEET NUMBER	

ALL RIGHTS RESERVED, PROPERTY OF B+H ARCHITECTS, INC. USE OR REPRODUCTION PROHIBITED WITHOUT PRIOR WRITTEN PERMISSION. CONTRACTOR SHALL CHECK ALL DIMENSIONS ON THE WORK AND REPORT ANY DISCREPANCY TO THE CONSULTANT BEFORE PROCEEDING.

(Connection to ex. building. Includes core areas.)



FLOOR PLAN BENEFITS

- Centralized meeting area
- Flexible/reconfigurable collaborative space
- Alternate work zone
- Small breakout/collaborative space
- Ample desk surface area
- Natural light is shared
- Balance of open and enclosed space
- Staff only respite space

Workspace	112
Workstation, large	36
Workstation, small	32
Focus Room (1-2ppl)	21
Office (1-4ppl)	16
Phone Room (1-2ppl)	7
Collaboration (Shared)	
Staff Lounge (20-40ppl)	1
Flexible Collaboration	2
Large Meeting (10-20ppl)	1
Medium Meeting (6-10ppl)	3
Small Collaboration (4-5ppl)	6
Huddle Area	4
Break Out	7
Regenerative/Wellness (Shared)	
Lactation/Wellness Room	1
Regenerative Room	2
Support Spaces	
Resource area (file/copy)	1
Cost/Built Alcove and Lockers Area	1

Sheet number: 0000

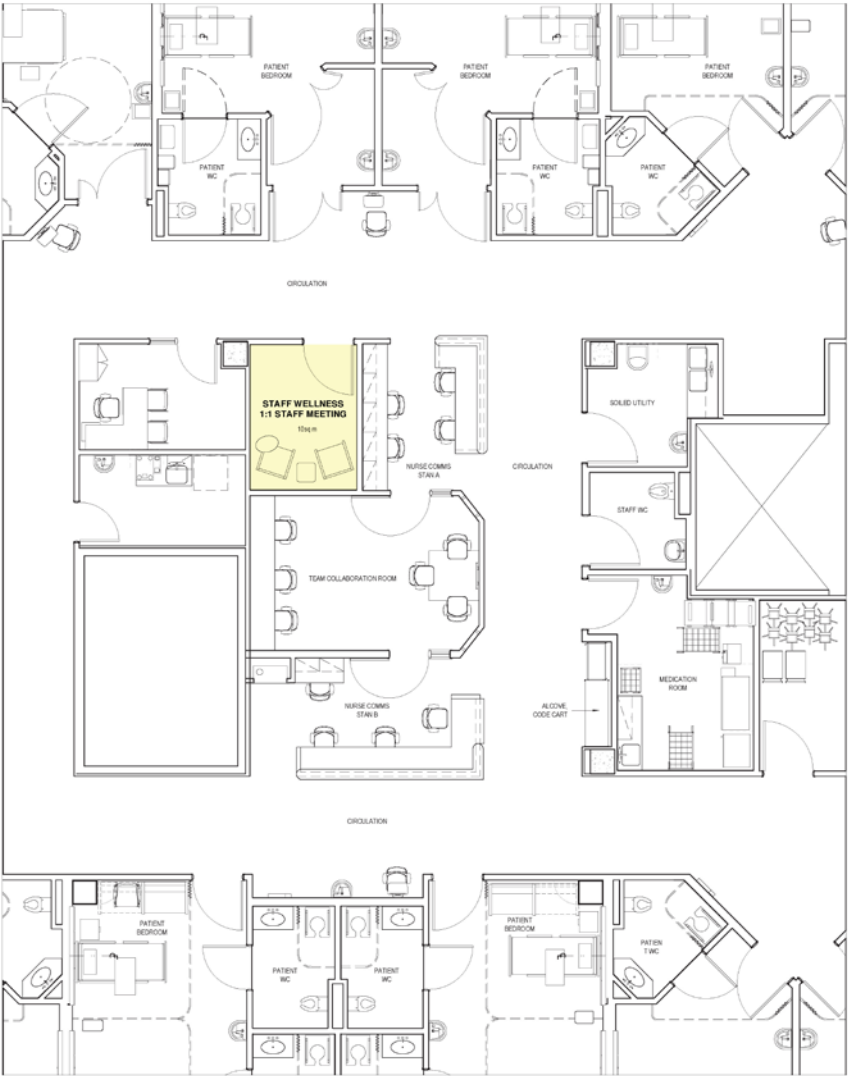
THIS SKETCH IS TO BE READ IN CONJUNCTION WITH AND FORMS PART OF DRAWING NO.:



Niagara Health
Test Fits - Plan 4
 B+H Architects Corp.
 481 University Avenue, Suite 300
 Toronto, ON M5G 2M4
 T416.595.2299 F416.595.0599

PROJECT NO.	ISSUED	REVISION
1911091	191111	
SCALE	DRAWN	
	CY	
	SHEET NUMBER	

ALL RIGHTS RESERVED, PROPERTY OF B+H ARCHITECTS, INC. USE OR REPRODUCTION PROHIBITED WITHOUT PRIOR WRITTEN PERMISSION
 CONTRACTOR SHALL CHECK ALL DIMENSIONS ON THE WORK AND REPORT ANY DISCREPANCY TO THE CONSULTANT BEFORE PROCEEDING.



- FLOOR PLAN BENEFITS
- Privacy for staff
 - Staff-only meeting area
 - Staff-only respite/wellness space
 - Alcove storage for medical equipment
 - Maximized visual access to patient areas from clinical station
 - centralized staff area to enhance team connection/collaboration
 - Capacity for non-nursing staff/charting needs

Sheet number: 00000

THIS SKETCH IS TO BE READ IN CONJUNCTION WITH AND FORMS PART OF DRAWING NO.:



B+H Architects Corp.
481 University Avenue, Suite 300
Toronto, On M5G 2H4
T416.596.2299 F416.568.0599

Niagara Health
Test Fits - Plan 5

NURSE COMMS STATION

PROJECT NO. 1911091	ISSUED 191111	REVISION
	DRAWN CY	
SCALE	SHEET NUMBER	
	1	

ALL RIGHTS RESERVED, PROPERTY OF B+H ARCHITECTS, INC. USE OR REPRODUCTION PROHIBITED WITHOUT PRIOR WRITTEN PERMISSION
CONTRACTOR SHALL CHECK ALL DIMENSIONS ON THE WORK AND REPORT ANY DISCREPENCY TO THE CONSULTANT BEFORE PROCEEDING.

APPENDIX C

CLIENT ENGAGEMENT PROCESS AND DETAILED FINDINGS

EMPLOYEE SURVEY

589 RESPONSES RECEIVED

87% completed full survey

The survey asked a series of questions about employee experiences at work; where it is accomplished, what is important to staff and to what degree needs are being met.

The survey was open for two and a half weeks (Monday, August 19th – Wednesday, September 4th).

All staff, across all levels of the organization who has a workspace in the hospital, should have the opportunity to submit their feedback.

Web-based survey

Recommended time for survey to be open: 2 weeks; with reminder emails to be sent after 1-week and with 24 hours of survey closing

Time Commitment: ~15 minutes

Schedule: August 19th – 30th

surveymonkey.com/r/niagarahealth_workspace

Thank you,

FOCUS GROUP WORKSHOPS

The intent is to capture staff perceptions (i.e. not managers) of the current work environments and their aspirations for the future. The qualitative data these sessions will yield a level of detail to the Workplace Experience Survey and Utilization Study.

Ideally, sessions will be organized in groups with staff who have more clinical roles and staff in non-clinical roles.

- Interactive group discussion and activity
- Recommended Number of Focus Groups: 4; 2 with a cross section of clinical staff; 2 with a cross section of non-clinical staff.
- Number of participants: target 20 participants per session
- Time Commitment: 2-hours
- Schedule: week of September 9th

The sessions will be broken into four parts.

Part 1: Introduction 15 minutes Background on project and workplace initiative; share preliminary findings from employee survey and utilization study

Part 2: Current & Future State 30 minutes In groups, participants will select 3 image that describe the current environment, culture and workplace experience, and 3 images that the describe the desired future state.

Part 3: Rapid Prototyping 40 minutes This design thinking exercise will ask participants to design a workspace by using materials provided (Legos and craft materials). It gives clarity to what problems need solving and what is important while avoiding setting expectations of what users will receive in the future state. **Part 4:** Space Type Voting 35 minutes In small groups, participants will critique and discuss a series of images of space types based on qualities of look/feel and function. Following the small group activity, individuals will vote on functional and stylistic preferences and discuss why they made their selections. The facilitators will frame the conversation around what workplace elements enable or inhibit their work style, patterns & process

Part 4: Space Type Voting 35 minutes In small groups, participants will critique and discuss a series of images of space types based on qualities of look/feel and function. Following the small group activity, individuals will vote on functional and stylistic preferences and discuss why they made their selections. The facilitators will frame the conversation around what workplace elements enable or inhibit their work style, patterns, and processes.

EXERCISE: CURRENT & FUTURE STATE

Participants selected image cards to identify qualities that define the existing and preferred future workplace experience.

EXERCISE: IDENTITY ARCHTYPES

If Niagara Health was a friend and you described them based on personality, what would you say?

As a general rule, all organizations fall within one of 12 personality types.

12 PERSONALITY TYPES

Purist	Straight Shooter
Pioneer	Seducer
Source	Entertainer
Conqueror	Protector
Rebel	Imagineer
Wizard	Emperor

**Niagara Health
Current Dominant
Personality Archetype**

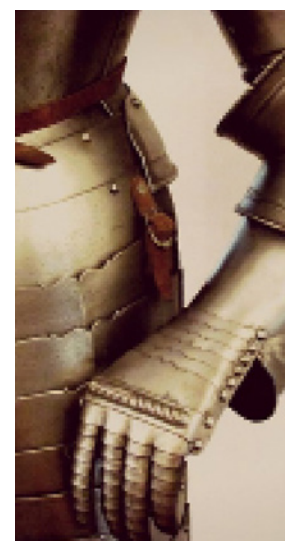
100% of participants agreed “Protector” was the dominant archetype

COMPASSION • CARE • SUPPORT •
KINDNESS • “EXTRAORDINARY CARE”

Protectors champion values including compassion, care, support, kindness, and love.

As a Protector, the guest relies on you to keep them safe from harm. Your customer service is key as your guest will demand that you are available and can help them in times of need. A maternal instinct and comfort is traditionally expected from a protector brand.

Examples: Campbell's Soup, St. Jude Children's Hospital, and Johnson & Johnson



- One big family, each site has its own “family”
- Still siloed (have come a long way from where it was)
- Openness to Change:
 - St Catharines (more open, progressive)
 - GNG (middle ground)
 - Welland (most resistant)
- Came from having offices in old patient rooms (very distracting)
 - A lot can be learned from the latest build
- Reactive culture
- Everyone is friendly, kind
- Everyone has the same goal
- Atmosphere of an inclusive workplace
- Friendly, Empathetic, Mission Driven

RAPID PROTOTYPING

PARTICIPANTS DESCRIBE THEIR MOST PRODUCTIVE DAY.

Then, in small groups, they used materials provided to build the space out.

Groups were asked to either build:

- an idealized space to support productivity
- a problematic space to prevent productivity

Teams finished by presenting their thought process.

EXERCISE: SPACE TYPE VOTING

PART 1: CRITIQUE SPACE TYPE CARDS

Based On Function
and Look & Feel



PART 2: VOTE BY CATEGORY

Desking, Alternate Focus,
Social & Community, Co-Creation



● FUNCTION

● LOOK + FEEL

WILDCARD

Workshop participants completed the session with writing their thought to the statement:

I am most inspired when...

Many took the opportunity to summarize their thoughts from the activities.



LEADERSHIP INTERVIEWS

The ideal participant are individuals who are senior enough in the organization to have familiarity with the strategic objectives of Executive Management but are also close enough to individual contributors that they have familiarity with the daily habits of ground level employees. Often, Directors and Senior Managers fall into this category.

One-on-one discussion

- Recommended Number of Interviews: 6 to 9
- Time Commitment: 45 minutes to 1 hour
- Schedule: Recommend majority during the week of September 9th; back-up date: September 24th

Strategy + Goals

- Briefly describe your role and your division's structure.
- What is your vision and strategy for your division? How does this align with hospital-wide initiatives?
- How do you measure success at the individual level, divisional and organizational levels?

Workplace Vision

- What are the most important aspects of a workplace from your perspective?
- What do you see as the biggest challenge in creating a successful new workplace?
- If your workplace could accomplish one thing, what would it be and why?

Work Behavior + Processes

- What are the critical work behaviors / patterns of your division?
- How does the current workplace support your work processes? How does it inhibit your work processes?
- If you had no constraints, how would you organize your teams in a work environment to facilitate the most effective way of working together?

Culture

- How would you describe the culture at Niagara Health?
- What makes Niagara Health unique?
- What are some cultural attributes or values that make your division unique?

Employee & Visitor

Experience + Talent Attraction

- How would you describe the visitor experience and interface today? How do you foresee this changing in the future?
- What is your strategy to attract the next generation workforce?
- In your opinion, what experiences within the workplace would help attract and retain talent?

UTILIZATION STUDY

On-site observational study to quantify current utilization and collect qualitative data about how employees use the workplace on a typical work week.

- Observation and data collection of use of existing workspace
- Recommended Number of Data Collection Rounds: 4 rounds per day (2 in the morning, 2 in the afternoon) for 5 consecutive workdays
- Area of Study: to be determined
- Time Commitment: no time required during the study from any Niagara Health staff. Prior to the engagement B+H will need administrative assistance for security access via card/identification, access to wireless (if possible), and to provide a landing space for data collection team.
- Schedule: September 23rd -27th

Data collectors will walk through the workspace four times a day to record use of space, activities people are engaged in, and number of occupants. Depending on the size of the study area, it might require the assistance of temporary workers to conduct the data collection. Because of the nature of the data collection, it is important to communicate with staff in advance of the study about what is happening and why.

A draft email is below.

As part of our commitment to providing extraordinary care, we are exploring ways to better align our workplace with our culture and values. To support this effort, we are working with B+H Architects as our workplace strategy consultant.

In addition to the Workplace Experience Survey, a key step in this effort is to understand how we are using our space today. Data and analysis from this study will help us make informed decisions about how the future workplace can best support our work.

Over a period of one week (September 9th through 13th), Workplace Strategists from B+H will be on-site to record observations, focused on individual and collaborative workspaces. This data collection is about how space is used and not about your individual behaviors.

During the observation process, you may notice the following:

- Observers walking through the office space throughout the day
- Observers taking notes and recording information about workstations, surrounding areas and conference rooms to record activity

EXISTING WORKPLACE OBSERVATIONS

The utilization study took place at two Niagara Health hospital sites: greater Niagara general, and Welland hospital site.

In addition to the data obtained using from the utilization database application, the workplace designers made objective observations of the existing workspaces and engaged informal discussions with staff using the spaces about elements that function well as well as elements that hinder productivity. Refer to Appendix C for detailed observation findings. A summary of observations from the GNG site are as follows:

- Greater Niagara General:**

- Natural light lacks
 - Disparity of space; desks approached from back
 - Reconfigurations over time
 - Lack of gathering space
 - Visual and physical barriers
 - Large meeting spaces with simple technology

CULTURE CARD THEMES

CURRENT STATE



OLD, MAKING THE MOST OF INFRASTRUCTURE, CURRENT WORKSPACE IS STERILE





HEALTHCARE IS A MAZE, WAYFINDING IS DIFFICULT, LONG WAITS





BALANCE COLLABORATION & EFFICIENCY





CROSSROADS, CAN ONLY SEE IMMEDIATE ISSUES, HARD TO PREDICT THE FUTURE





RIGIDLY ORGANIZED, TEAMS WORKING IN ISOLATION



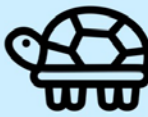




SUPPORTIVE TEAM

CULTURE CARD THEMES

CURRENT STATE QUOTES



As a culture, we are **SLOW TO CHANGE AND ADAPT.**

It's not that change is not good. **CHANGING A BIT TOO LATE.**
We must be proactive, but we're **LIMITED IN RESOURCES.**



Trying to make the most and be the most productive with what we are given.

PATIENT VOLUME IS HUGE – we're a small team.

We can only do 1 outpatient clinic at a time (due to space)

FUNDING WAS CUT FOR PAPERLESS



CULTURE CARD THEMES

CURRENT STATE QUOTES



Meeting rooms
are **not equipped**
with robust technology



...AND DIFFICULT TO BOOK



Sitting
BACK TO BACK

is challenging while
being on the phone

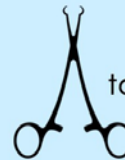


GERIATRIC POPULATION

– we need to facilitate

WAYFINDING

because people get lost
coming from main hospital



too **STERILE**,
too broken up

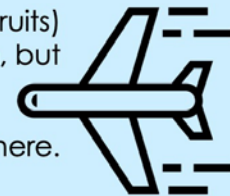


CULTURE CARD THEMES

CURRENT STATE QUOTES



Some people (recruits)
coming from out of town, but
not a lot are attracted to
the physical facilities or see a future here.



PRIVATE OFFICES are a **SENSITIVE** topic.



We have to be aware
of what is coming.

BABY BOOMERS ARE RETIRING.



CULTURE CARD THEMES

CURRENT STATE QUOTES



KINDNESS,
no matter the
hierarchy

You have to pass a
nice test to work here.

IT'S ALMOST CONFUSING FOR AN OUTSIDER.



COMMUNITY - people *work*
here and also *seek care*
here + *family* members
seek care here



CULTURE CARD THEMES

FUTURE STATE



**A MORE
COLLABORATIVE
& INTEGRATED
ENVIRONMENT**



**PAPERLESS,
FLEXIBLE, MOVE
BETWEEN SITES
WITH EASE**



**TECHNOLOGY ON
THE FOREFRONT**



**SUNLIGHT,
HEALTH,**



**MORE TECH
INTEGRATION INTO
HEALTH**



**MULTIPLE MODES OF
ANALOG AND DIGITAL
COMMUNICATION AS
BACKUP**



**ENVIRONMENTAL
SUSTAINABILITY,
SPACE FOR EATING
LESS RIGID**



CULTURE CARD THEMES

FUTURE STATE QUOTES



Understand that workspaces are

NOT A 'ONE SIZE FITS ALL.'

We need **ADAPTABILITY** to people of different learning / focus styles



...need more collaborative workspaces, **different ways of working together.**



Would love regional **drop-in** health centers dispersed across community buildings



CULTURE CARD THEMES

FUTURE STATE QUOTES



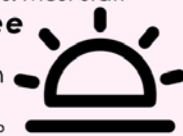
A "healthy" workspace - places to



Want to be conscious of how we're **IMPACTING** the ENVIRONMENT

DAYLIGHT!!

I would like daylight incorporated into meeting / break spaces. Most staff **aren't able to see daylight** for an entire day.



We have to be conscientious of the

HEALTH OF WORKERS.

At St. Catharines they **used flooring** that **caused plantar fasciitis** (in staff)



CULTURE CARD THEMES

FUTURE STATE QUOTES



Technology
ENABLES.
Work from home.
Home, work, between sites.
Access info.
Dock quickly.
Must be effective
EVERYWHERE.

Proactive anticipation of how
TECHNOLOGY
will change workflow, and integrating solutions
WITH FORESIGHT

Make tech
EASY
to use

Desire to see tablets



IDEALIZED ENVIRONMENT

SESSION 1



FEATURES INCLUDE:

- many windows
- high partitions, but not to ceiling
- light penetrates
- visibility to meeting rooms (frosted glass)
- people can be greeted when they arrive
- some elements in current workspace
- can close partitions to create more privacy
- clinic rooms can be outside/adjacent to this immediate workspace

IDEALIZED ENVIRONMENT

SESSION 2, GROUP 1



FEATURES INCLUDE:

- open concept with quiet zones
- outdoor workspace
- teleconference meeting room
- portable whiteboard, smart boards
- kitchen
- bookable private room
- acoustic blocking
- agreed upon behaviors
- designated quiet space
- daylight

IDEALIZED ENVIRONMENT

SESSION 2, GROUP 2



FEATURES INCLUDE:

- adjustable workstations for sitting or standing
- partition walls that are moveable and collapsible
- daylight
- lockers, storage for wet outerwear dispersed throughout the office
- collaborative
- flexible meeting space
- be able to hang out by windows
- lunchroom, mingle all departments
- gym

PROBLEMATIC ENVIRONMENT

SESSION 1



FEATURES INCLUDE:

- Spaces that are overcrowded with workers
- Loud spots in open concept space from lack of doors/walls
- Uncomfortable waiting areas
- Individual offices, two people sharing an office
- Backs to the door, or where people are approaching from
- Windows being places in areas where people can't take advantage of them
- No places to collaborate
- No place nearby to get a drink, washroom, store food
- Line-ups

PROBLEMATIC ENVIRONMENT

SESSION 2, GROUP 3



FEATURES INCLUDE:

- Elbow to elbow desks, people approaching from behind
- Distractions nearby, workplace chatter (conversations causing distractions)
- desks that are too small
- technology is inconsistent
- Only light that comes through directly shines on screen
- No hoteling for people - have to find places to work

PROBLEMATIC ENVIRONMENT

SESSION 2, GROUP 4

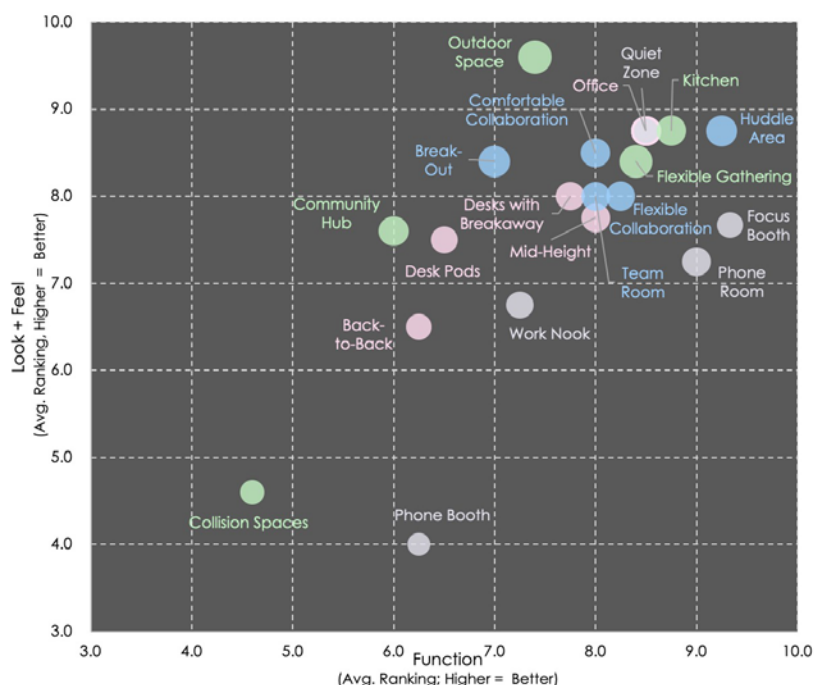


FEATURES INCLUDE:

- high density desking, people literally on top of one another (stacked)
- Bat cave darkness (hanging upside down) - no windows
- Tiny waiting area
- large, loud printer in center
- Extension cord running through the office
- lopsided chair
- distractions, coffee area nearby, washroom too close
- can't drink liquids in pharmacy department
- Disparity between departments in terms of what they are getting in a workspace

Page 122 | Workplace Strategy South Niagara Hospital Project

B+H | Advance Strategy™



SPACE TYPE RANKING

Priorities balance privacy with collaboration, greenspace /plants preferred aesthetically

Each participant critiqued a set of space types from four categories.

The focus booth and huddle area space types topped the ranking for functionality while outdoor space, quiet zone, office and huddle area topped out the Look + Feel ranking. Two prominently featured plants in the imagery.

While privacy appeared important, spaces with characteristics that were perceived as isolating and small – collision spaces and phone booth – were significantly less preferred.

SPACE TYPE CATEGORIES

- Co-Creation
- Social & Community
- Desking
- Alternate Focus

Page 123 | Workplace Strategy South Niagara Hospital Project

B+H | Advance Strategy™

WORD CLOUD

NEGATIVE ATTRIBUTES



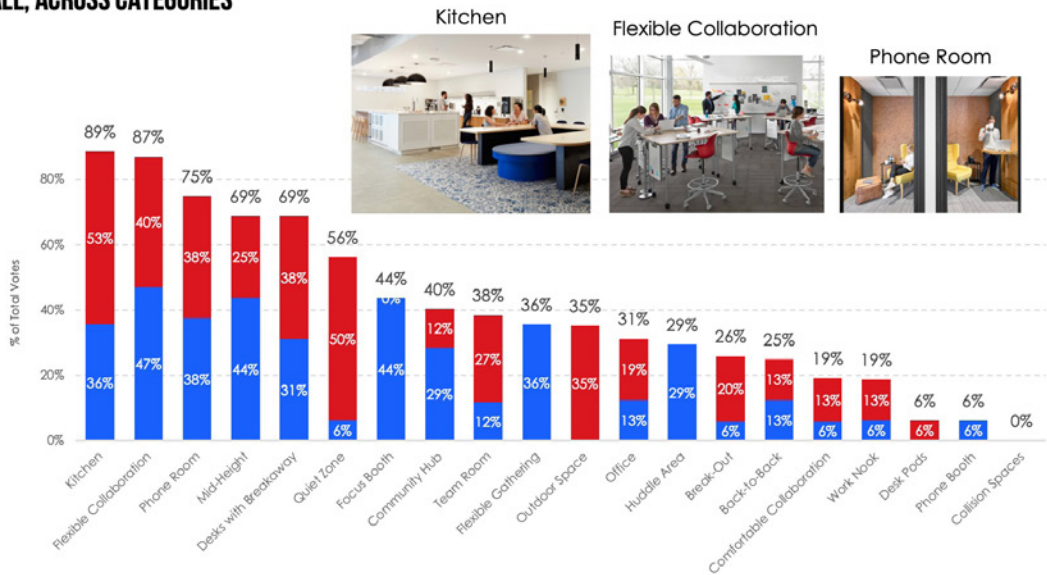
Page 124 | Workplace Strategy South Niagara Hospital Project

Note: the words "work" and "space" were removed from word cloud calculations

B+H | **Advance Strategy**

OVERALL, ACROSS CATEGORIES

TOP 3 SPACE TYPES

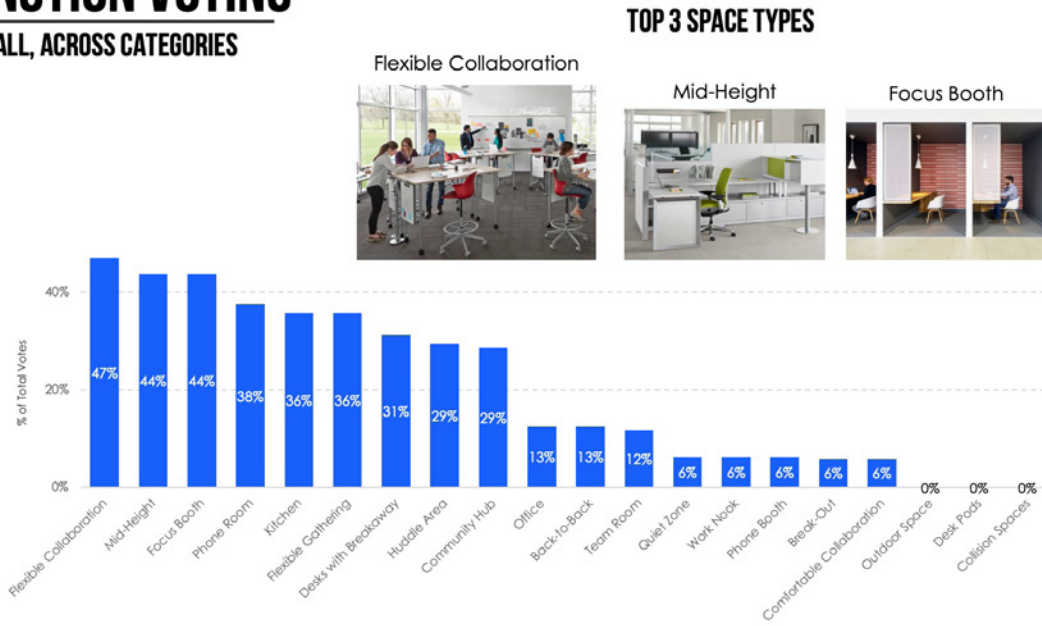


Page 125 | Workplace Strategy South Niagara Hospital Project

B+H |  **Advance Strategy**

FUNCTION VOTING

OVERALL, ACROSS CATEGORIES

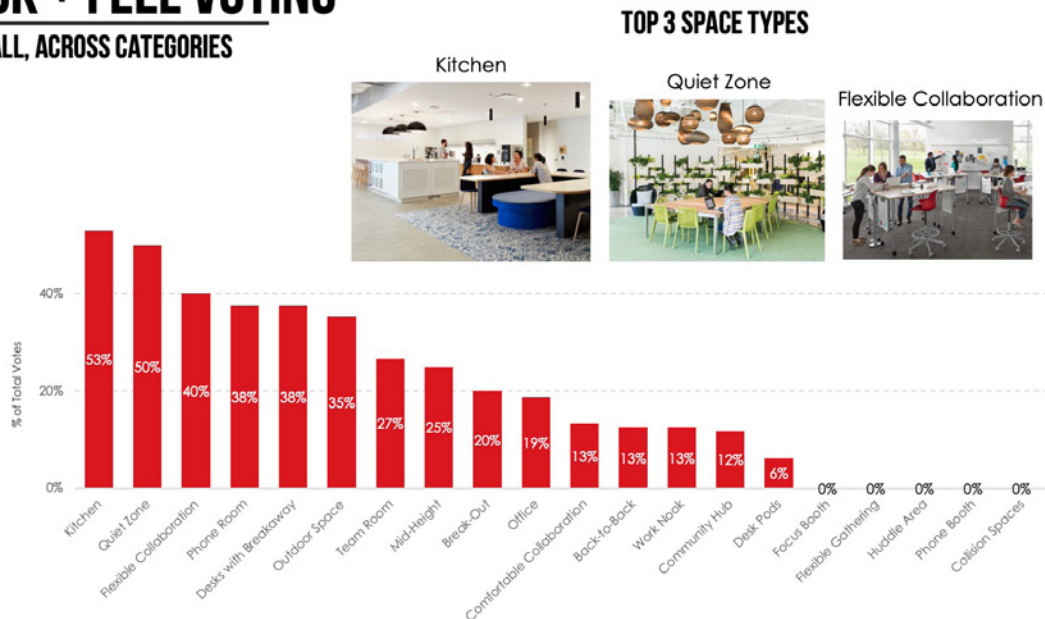


Page 126 | Workplace Strategy South Niagara Hospital Project

B+H | Advance Strategy

LOOK + FEEL VOTING

OVERALL, ACROSS CATEGORIES



Page 127 | Workplace Strategy South Niagara Hospital Project

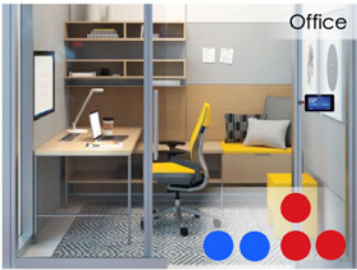
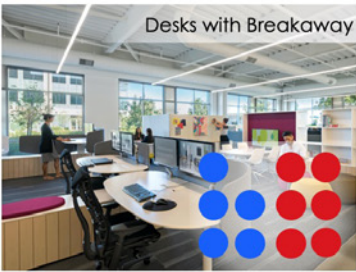
B+H | Advance Strategy

DESKING VOTES

FUNCTION AND LOOK + FEEL

● FUNCTION

● LOOK + FEEL

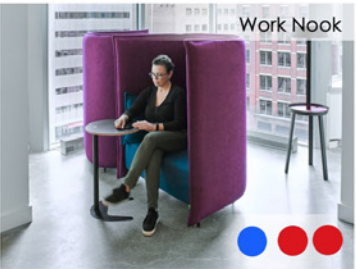
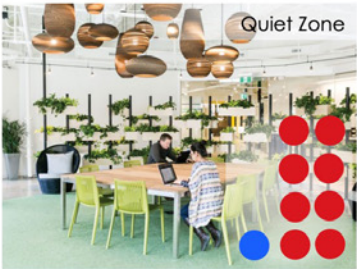
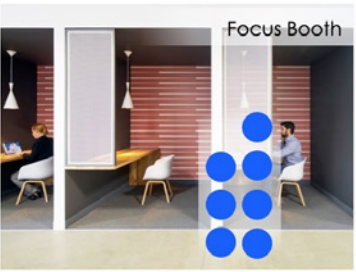


ALTERNATE FOCUS VOTES

FUNCTION AND LOOK + FEEL

● FUNCTION

● LOOK + FEEL

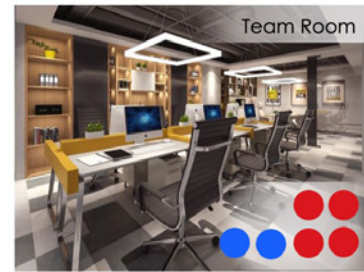


CO-CREATION VOTES

FUNCTION AND LOOK + FEEL

● FUNCTION

● LOOK + FEEL



Page 130 | Workplace Strategy South Niagara Hospital Project

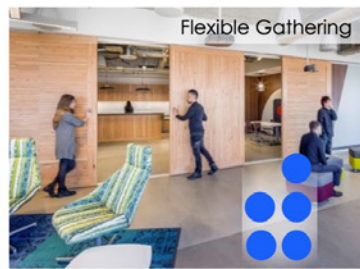
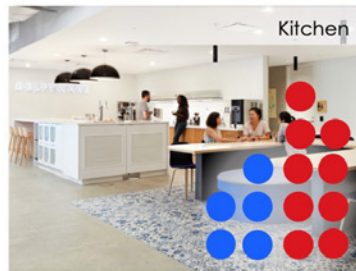
B+H | Advance Strategy

SOCIAL & COMMUNITY VOTES

FUNCTION AND LOOK + FEEL

● FUNCTION

● LOOK + FEEL

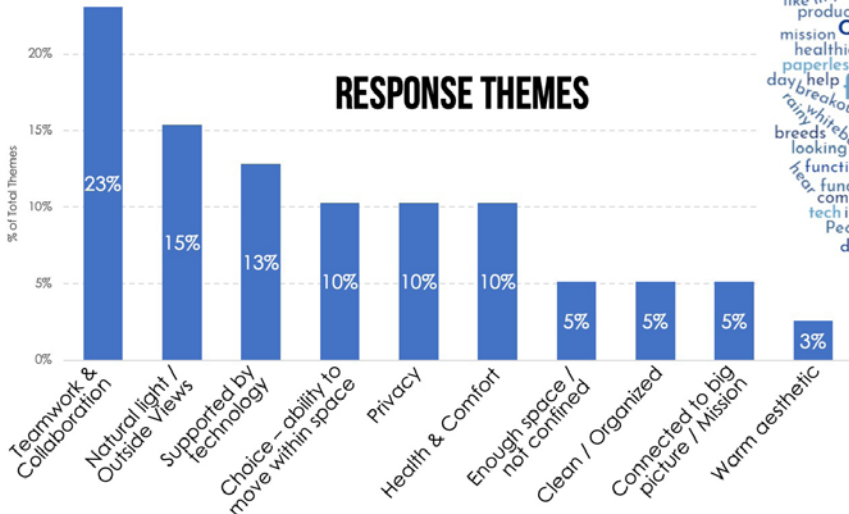


Page 131 | Workplace Strategy South Niagara Hospital Project

B+H | Advance Strategy

WILDCARD SUMMARY

Connection to each other, nature & health are important



EXISTING WORKPLACE OBSERVATIONS

Greater Niagara General

- Natural light lacks
- Disparity of space; desks approached from back
- Reconfigurations over time
- Lack of gathering space
- Visual and physical barriers
- Large meeting spaces with simple technology

NATURAL LIGHT

BLOCKED TO WORKSPACE; OFTEN TOO MUCH

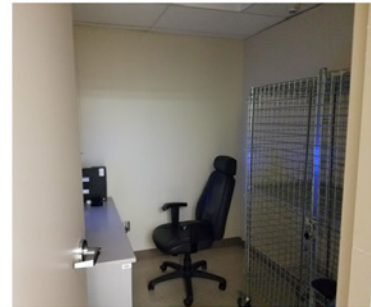
Natural light blocked to workspace



Those with access to windows, have too much light



No natural light in many work areas



CLINICAL RECONFIGURATION

SPACES REUSED OVER TIME

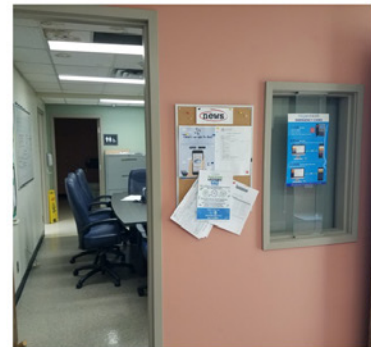
Exam rooms reconfigured as workspace; Size of space larger than required



Desks crammed in spaces intended for other uses and approached from back



Workspace flexibility limited in former clinical areas



DISPARITY OF WORKSPACE

INEFFICIENT AND OVERLY EFFICIENT SPACE

Disparity between workspace conditions



Long, cavernous work areas;
inefficient use of space



FOOD PREPARATION

OFTEN AN AFTERTHOUGHT OF WORKSPACE FUNCTION

Food preparation abutting
workspace; Desks
approached from back



Little room for food
preparation; Inadequate
place to gather



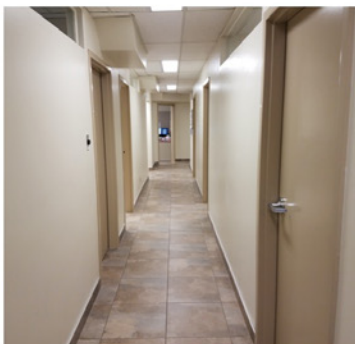
Worn & mismatched
materials



BARRIERS

VISUAL AND PHYSICAL

Visual barriers to colleagues; rigid aesthetic



Physical barrier to visitors; Institutional aesthetic



Paper & printed materials abound



MEETING AREAS

LARGE AND LACK TECH SUPPORT

Meeting spaces in private offices



Predominate large meeting spaces with simple technology solutions



BACKGROUND

Staff Workplace Experience Survey

The survey asked a series of questions about employee experiences at work; where it is accomplished, what is important to staff and to what degree needs are being met.

The survey was open for two and a half weeks (Monday, August 19th – Wednesday, September 4th).

This report summarizes employee views reflected in the responses.

589 RESPONSES RECEIVED
87% completed full survey

SUMMARY FINDINGS



Overall, staff feel productive, but also recognize that a future workspace could be a benefit.



Private office space dominates culture, expectations and patterns of work, including collaboration.



Collaboration appears to be limited to occasional interactions. It is undetermined whether this is nature of work or adaptation to the environment.



Workspaces that prioritize natural light, physical comfort and provide opportunities for privacy will likely enhance the overall experience.

SUMMARY FINDINGS



Clinical staff tend to have very different perspectives and needs than Corporate or Support. Clinicians need workstation access, prefer face-to-face communication and have greater respite needs while on breaks.



Access to health & wellness amenities and features onsite are important to staff (fitness center & healthy foods).



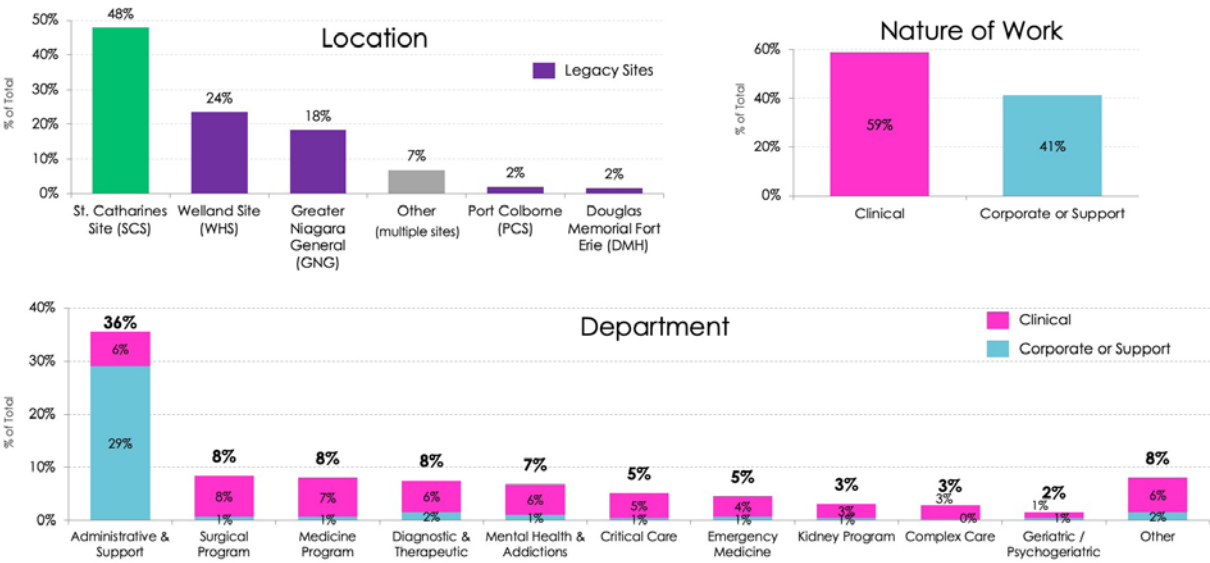
Current paper-based systems limit flexibility. Basic technology infrastructure lacks. Reliable and free Wi-Fi, more computer stations and mobile devices would aid flow of work.

RESPONDENT CHARACTERISTICS

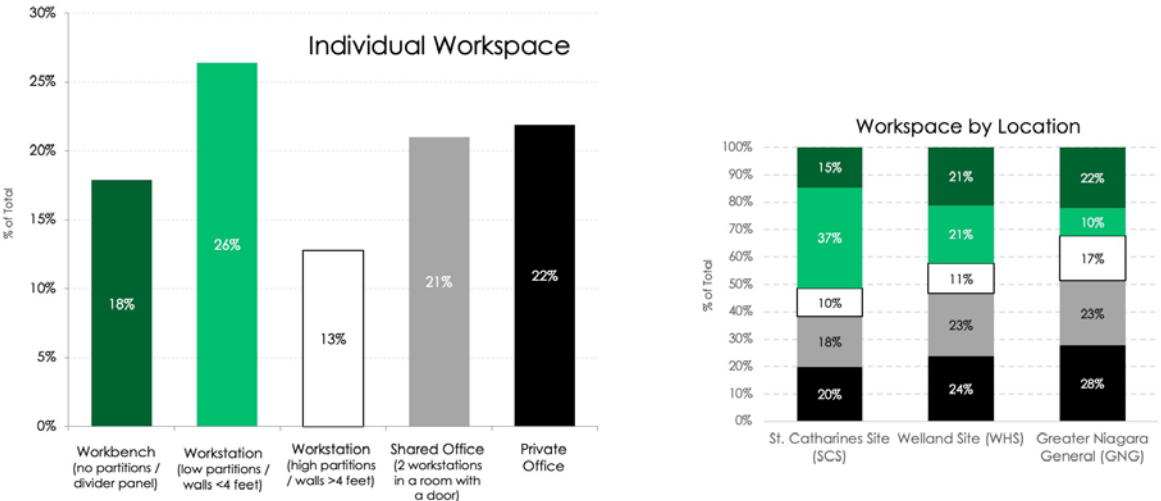
The following section provides a summary of characteristics of the respondents in terms of location, department, workspace type, tenure, function, generation and work patterns.

~60% OF STAFF CONDUCTS CLINICAL WORK

Most of Administrative & Support departments are non-clinical in nature

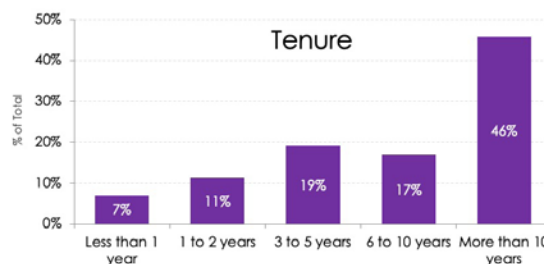
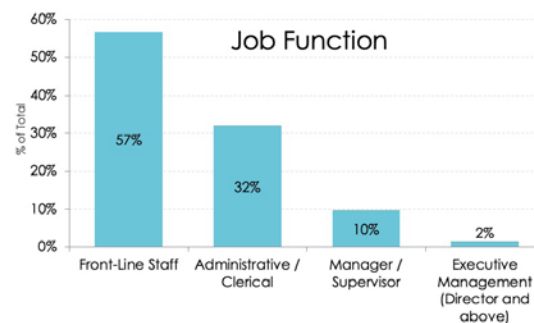
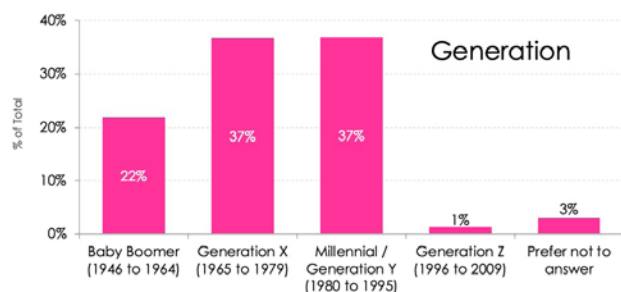


43% OF STAFF WORK IN AN ENCLOSED ENVIRONMENT.
62% of staff at St. Catharines Site are in a more open workspace.



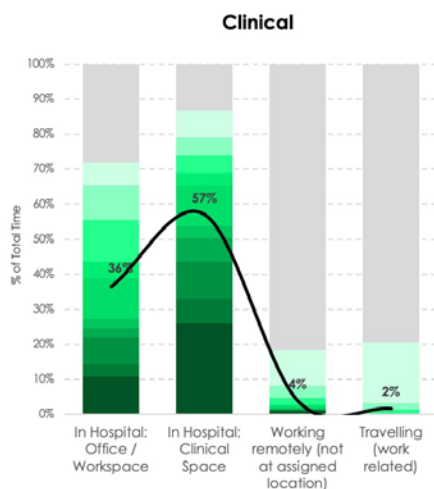
TENURE TENDS TO BE LONG LASTING.

Balance between Gen X and Millennial workers, which account for the majority of staff.
Large share of front line & administrative staff.

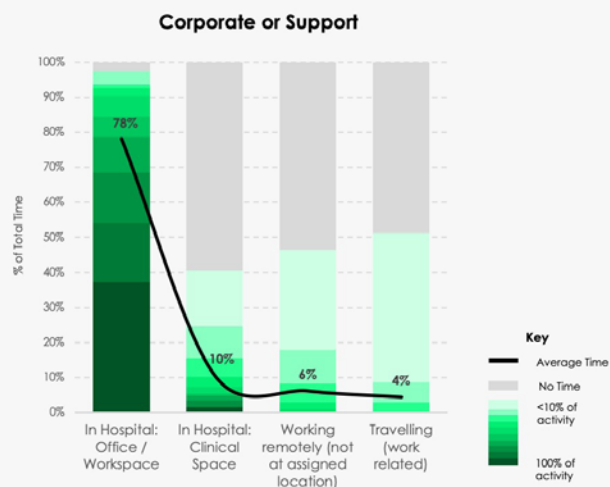


Geographic Location of Work

CLINICAL STAFF IN WORKSPACE APPROXIMATELY 1/3RD OF TIME



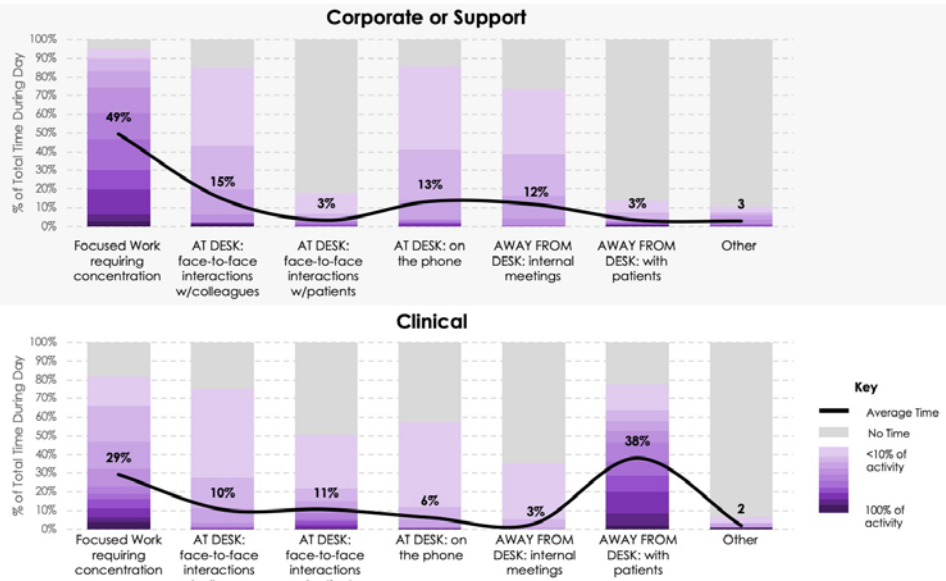
CORPORATE OR SUPPORT STAFF PREDOMINATELY IN ASSIGNED OFFICE / WORKSPACE



APPROXIMATELY HALF OF A
TYPICAL WORKDAY IS SPENT:

Activity in Building on a Typical Day

On **focused work** for
Corporate or Support
workers



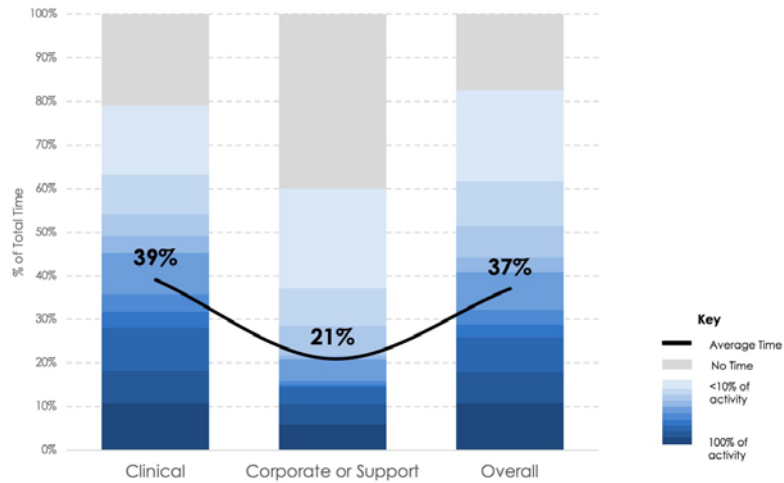
Heaviest departmental
users of products /
equipment:

- Emergency Medicine (50%)
- Kidney Program (48%)
- Diagnostic & Therapeutic (48%)
- Surgical Program (47%)
- Critical Care (44%)

Within Administrative & Support:

- Biomedical Engineering (65%)
- Medical Staff Facilities (50%)
- Clinical Support (35%)
- Health Records (31%)

Time Spent Working with Products or Equipment



KEY FINDING



Overall, staff feel productive, but also recognize that a future workspace could be a benefit.

Younger generations, clinicians and those not in private office space are the most optimistic about the future environment.

Page 150 | Workplace Strategy South Niagara Hospital Project

EXISTING PRODUCTIVITY VS. FUTURE EFFECTIVENESS

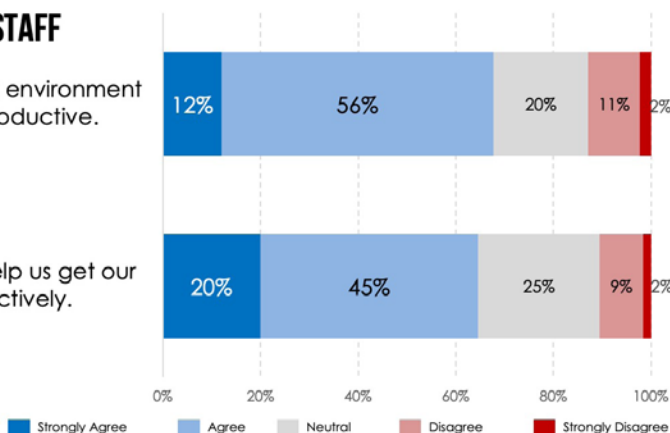
The top two responses in agreement appear contradictory; staff feel the existing environment supports productivity, yet they also believe a new workspace could help them do their work more effectively. More ergonomic furniture, better visibility to patient areas, and more workstations in nursing stations were frequent topics in comments.

The statement with the third most agreement (62%) was "I understand the overall business reasons for change to the workspace." Private Office space is on the mind of many respondents, as it is seen as currently the best available way to avoid distractions.

MOST AGREEMENT: ALL STAFF

My current physical work environment enables me to be productive.

A new workspace could help us get our work done more effectively.

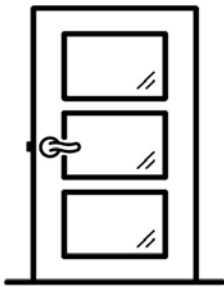


INSIGHT

- People in **private offices** are **40% more likely** to agree
- Staff in **private offices** are **36% less likely** to agree than all others
- **Millennials** are **21% more likely** to agree than Baby Boomers
- **Clinical staff** are **64% more likely** to agree

Page 151 | Workplace Strategy South Niagara Hospital Project

KEY FINDING



Private office space dominates culture, expectations and patterns of work, including collaboration.

Any successful changes will likely have to be adopted and advocated by the highest levels of leadership in the organization.

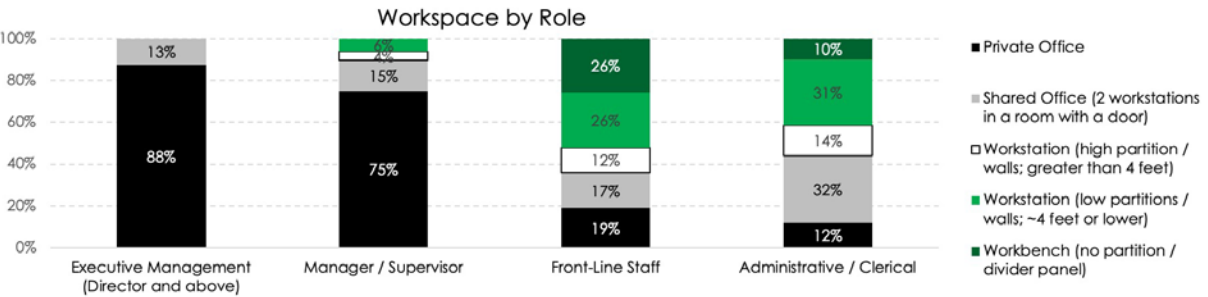
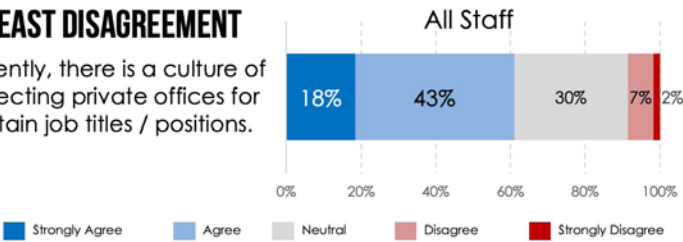
CULTURE OF PRIVATE OFFICES

There is a strong culture of expecting private office space within Niagara Health. 75% of Managers / Supervisors and 88% of Executive Management (Directors and above) have Private office assignments.

Likely, this culture has been established with organizational leadership. If this culture were to change, it would likely not be successful without Executive Management adjusting its own workspace.

LEAST DISAGREEMENT

Currently, there is a culture of expecting private offices for certain job titles / positions.

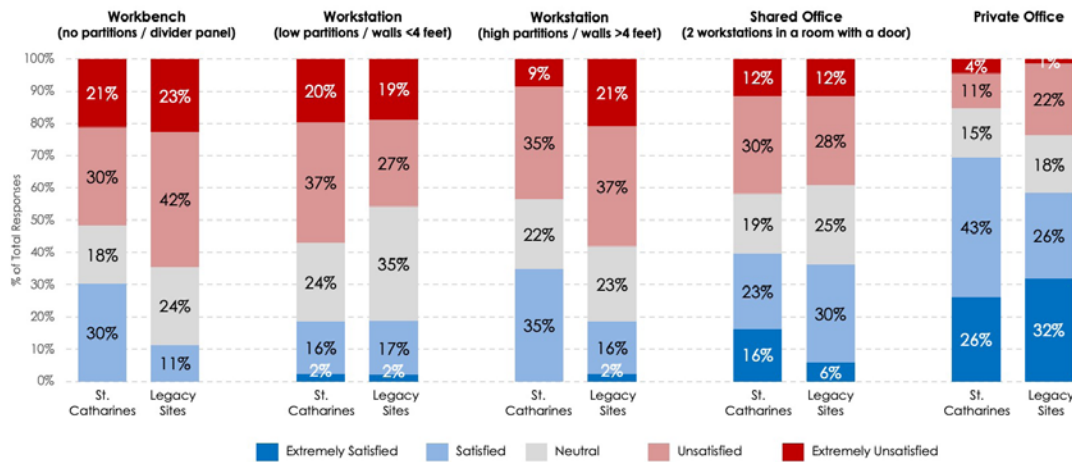




PRIVACY / NOISE

Satisfaction with privacy is, unsurprisingly, **higher in private office**. Most space types at **St. Catharines** are **more dissatisfied** than satisfied. Additionally, people in private offices were 2.5 to 1.7 times more likely to agree that they could concentrate than those in a more open environment.

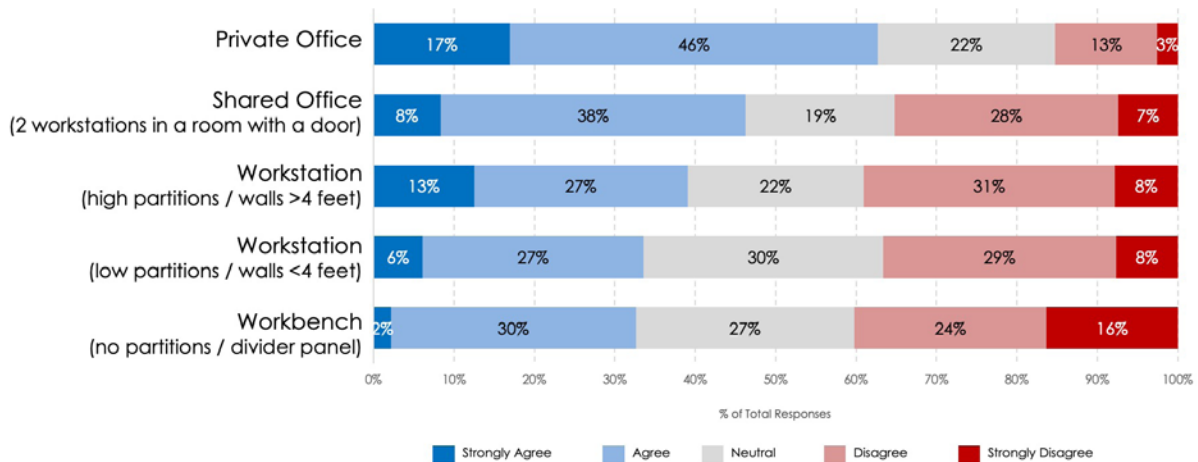
Privacy / Noise Satisfaction by Site and Space Type



AUTONOMY: PRIVATE OFFICES VS. EVERYONE ELSE

Staff without a private office feel they have less control of how work gets done.

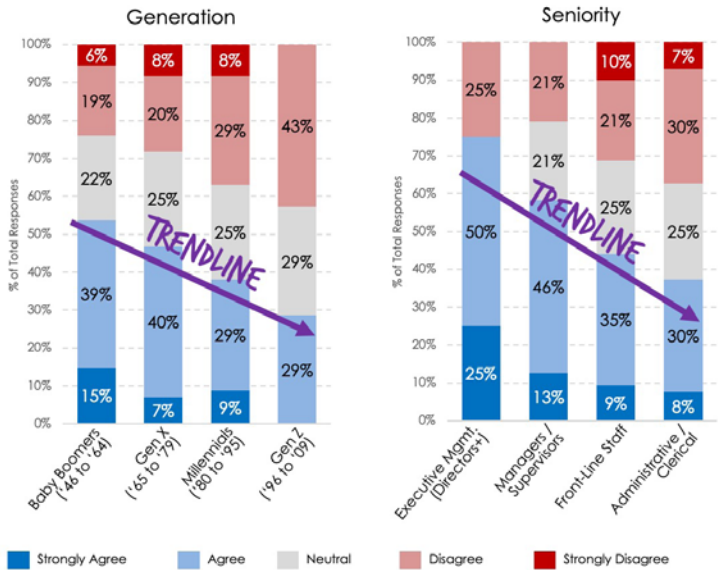
The overall workplace experience enables choice in how, where, and when I get my work done.



CHOICE

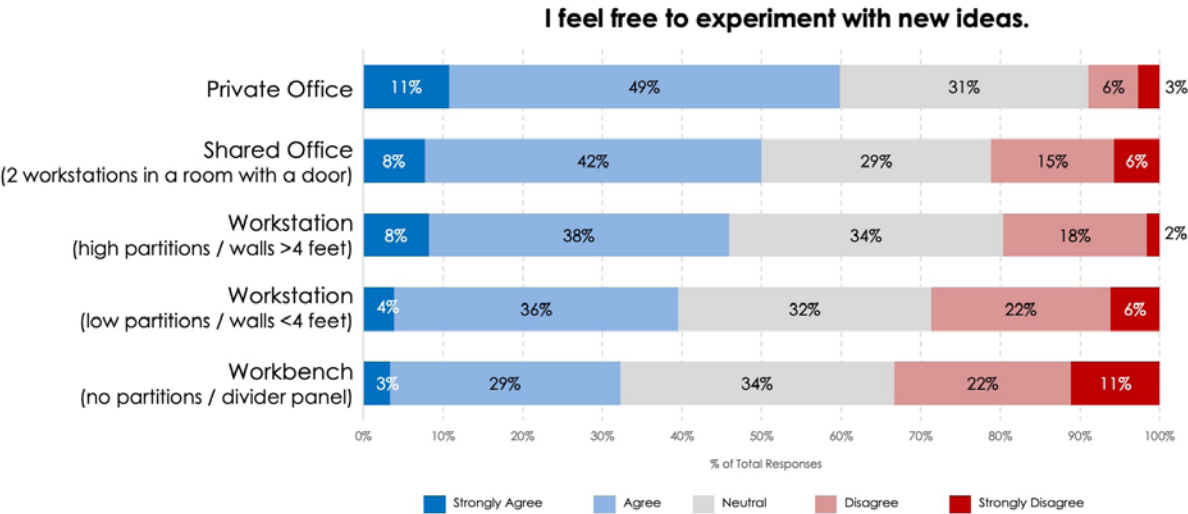
Younger generations and less senior roles feel less empowered with choice

The overall workplace experience enables choice in how, where, and when I get my work done.



AUTONOMY: PRIVATE OFFICES VS. EVERYONE ELSE

Staff in private offices were more likely to feel freedom to try new ideas.



KEY FINDING

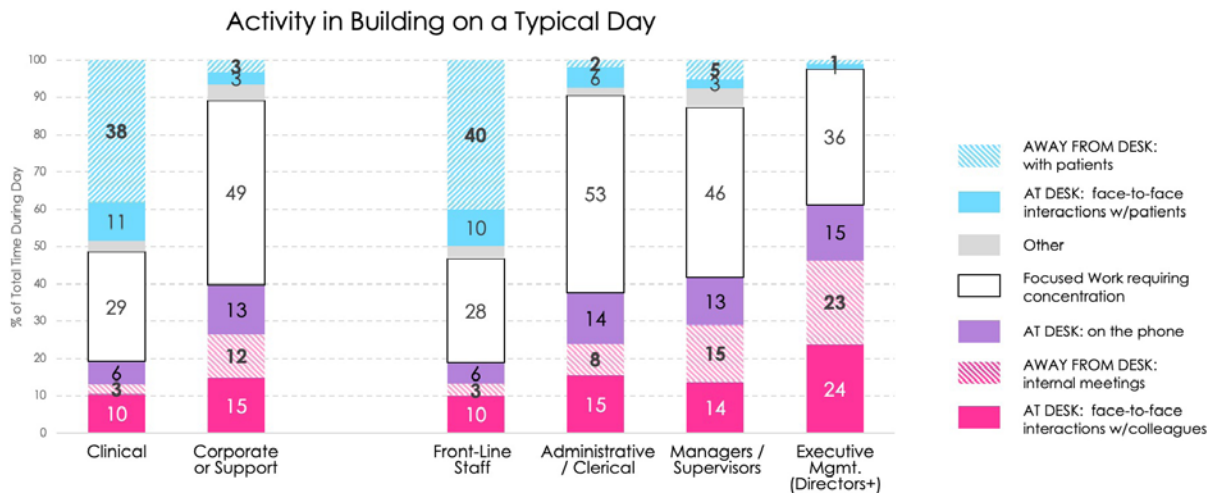


Collaboration appears to be limited to occasional interactions.

It is undetermined whether this is preferred due to the nature of work, not preferred but a response to the physical environment, or from other influences.

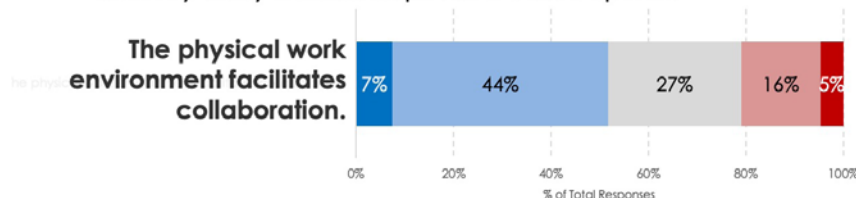
COLLABORATIVE ACTIVITY

Face to face interactions at desks outweigh internal meetings for all staff except Managers / Supervisors; in-person collaboration occurs less than 25% of time for most

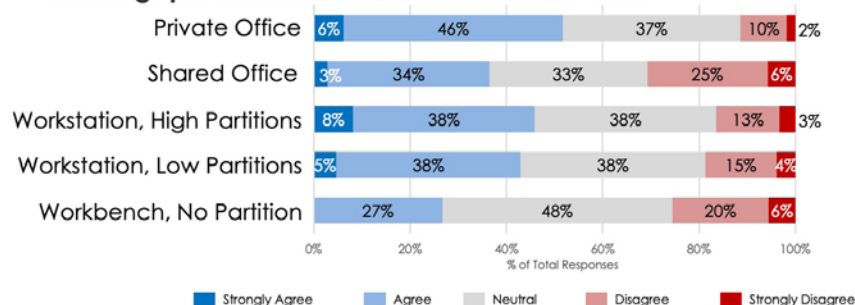


COLLABORATION

Overall agreement that it is currently supported, activity likely occurs in private office space



Meeting spaces are available when I need them.



Page 160 | Workplace Strategy South Niagara Hospital Project

INSIGHT

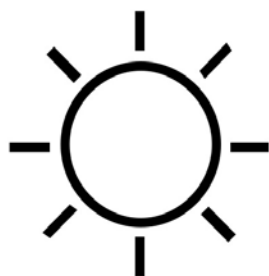
With the prevalence and culture of private office space, it is likely that much of the collaborative activities occur in offices. One respondent commented:

"I work in a converted patient room with a window air conditioner and natural light. The bathroom is in the office and very private. I have a table with chairs and often have two or more staff, physicians and or patients to talk with in order to manage my department."

While more respondents were satisfied, staff assigned to **shared office** space and **workbenches** are **98%** and **65%** more likely to be **dissatisfied** with meeting space availability.

B+H | Advance Strategy™

KEY FINDING



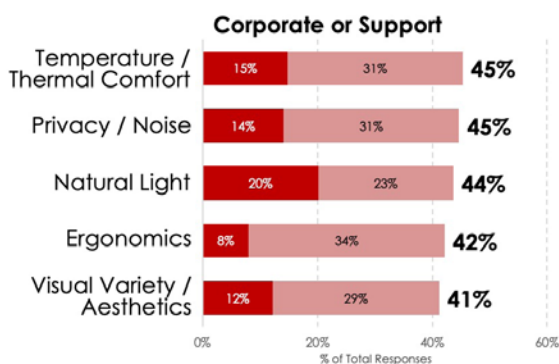
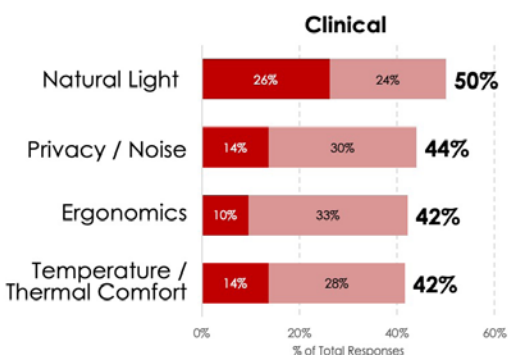
Workspaces that prioritize natural light, physical comfort and provide opportunities for privacy enhance overall experience.

Enclosed spaces have not necessarily improved experience, as staff in shared offices are the least satisfied at St. Catharines.

Page 161 | Workplace Strategy South Niagara Hospital Project



LEAST SATISFYING ASPECTS OF WORKPLACE



Extremely Unsatisfied Unsatisfied



LEAST SATISFYING ASPECTS OF WORKPLACE

NATURAL LIGHT + CLEANLINESS

"Our office doesn't have any windows, and is never fully cleaned unless we specifically ask. Our vents, computers, filing cabinets, panels on wall, etc. are always covered in thick dust."

ARTIFICIAL LIGHT + POOR AIR QUALITY EFFECTS

"Way too much artificial light - have to wear special glasses now to prevent headaches"

PRIVACY + RESOURCES

Work in a room that is very small with 3 to 4 other colleagues, no privacy, no cubicle walls, little storage, have to phone units and other partners... 1 phone line, many interruptions.

ERGONOMICS

"...training room and boardroom chairs are extremely uncomfortable, and those of us with any back issues find it very difficult to sit for more than an hour."

TEMPERATURE

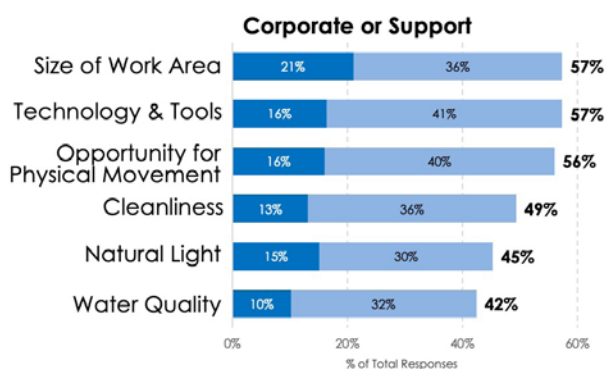
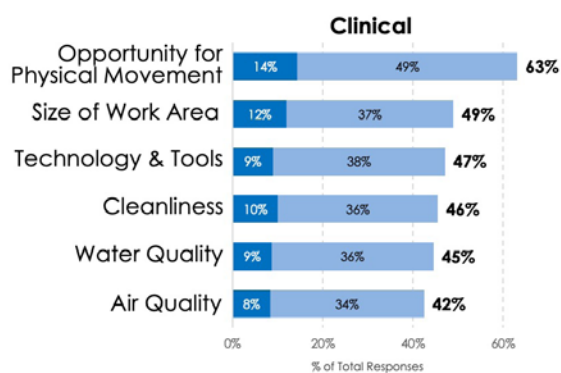
Have filed work orders relating to temperature in our workrooms, thermostat doesn't appear to be functioning properly.

CLINICAL WORKSPACE

Nursing Station: "Having only 2 computers is not even close to enough. Also it is 2019, computerized charting should be a priority."



MOST SATISFYING ASPECTS OF WORKPLACE



Extremely Satisfied Satisfied



POSITIVE COMMENTS ABOUT THE WORKPLACE

NATURAL LIGHT + GREEN SPACE

My present work space provides me with a large window which backs onto a green space providing much needed natural light.

TEAMWORK + CAMARADERIE

My co-workers are great and lots of fun. We make a great team to get things done.

SERVICES + TOOLS

*housekeeping crew do a great job!
tools are great if they work.*

WORK AREA SIZE + COMFORT + PRIVACY

"The size of the workspace, temperature and privacy are great."

PRIVATE OFFICE SPACE

"A private office is the most important tool for me as a manager! My sanity depends on it."

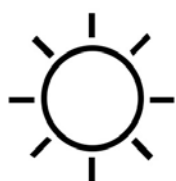
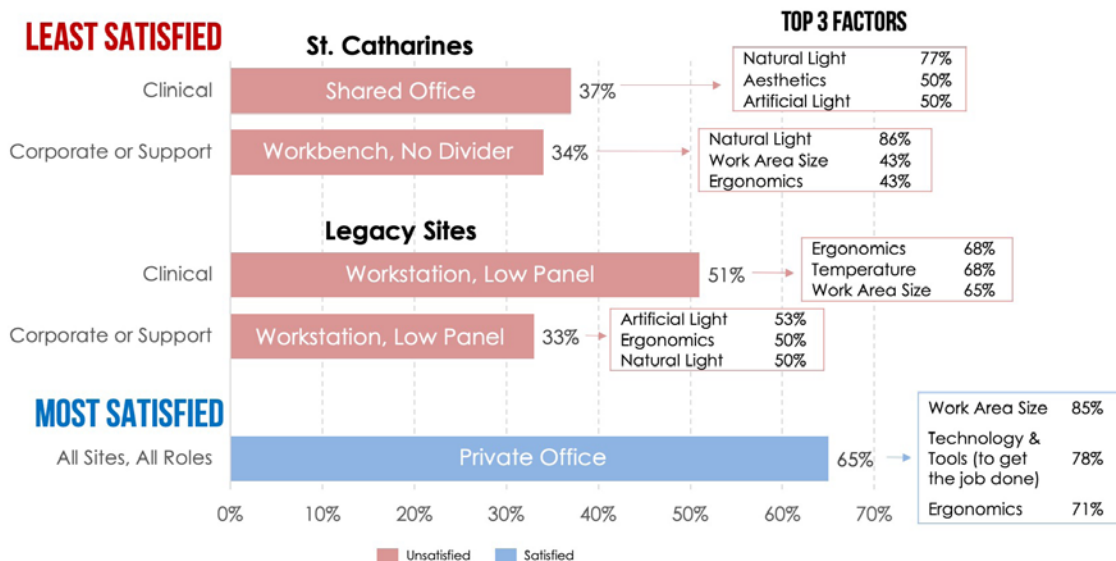
PRIVACY + OFFICE SPACE

*"If we all end up in the same workspace then I definitely agree"
(response to 'a new workspace could help us be more effective')*

OVERALL SPACE TYPE SATISFACTION

Higher levels of satisfaction were reported, even regarding components such as water quality and technology & tools among those with high levels of privacy.

LEAST SATISFIED

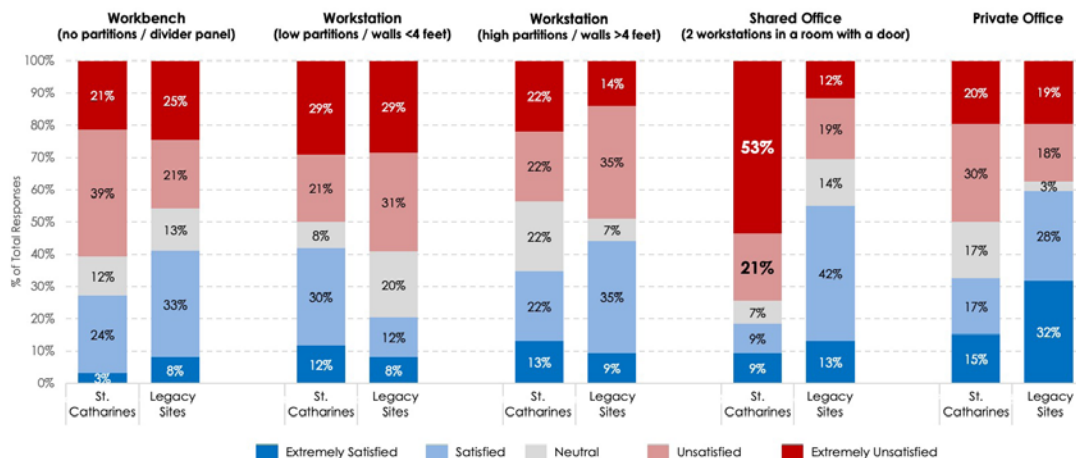


NATURAL LIGHT

contentious across sites and space types

Satisfaction with natural light is **lower at St. Catharines Site** compared to legacy sites, most significantly among workers in a shared office assignment.

Natural Light Satisfaction by Site and Space Type



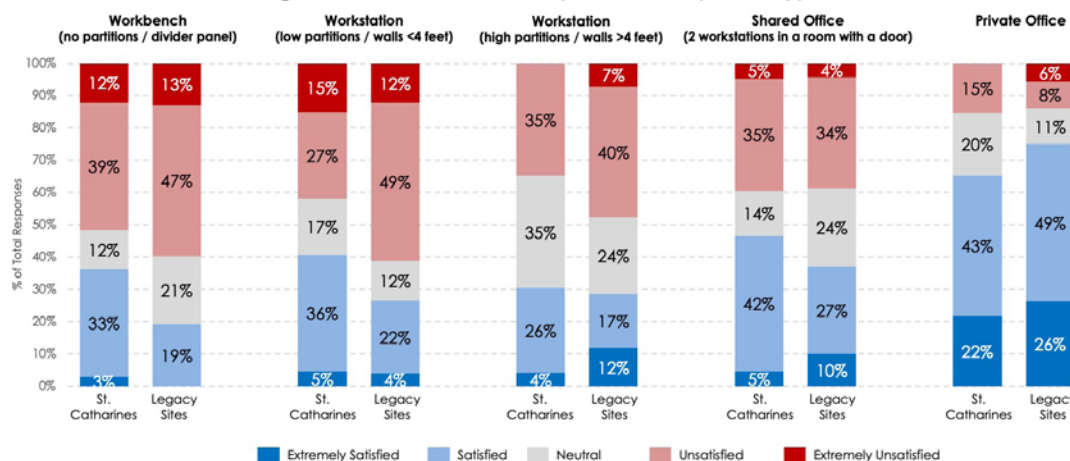


ERGONOMICS

Greater desks & chair comfort desired

Satisfaction with **ergonomics** appears to be an **ongoing challenge**. The St. Catharines site has made some improvements, but dissatisfaction remains prevalent as compared to legacy sites.

Ergonomic Satisfaction by Site and Space Type



KEY FINDING



Clinical staff tend to have very different perspectives and needs than Corporate or Support.

Clinical staff often experience bottlenecks for workstation computer use, rely more heavily on face-to-face communication, and have a greater need for respite / recovery time during breaks.

HOW WORK GETS DONE

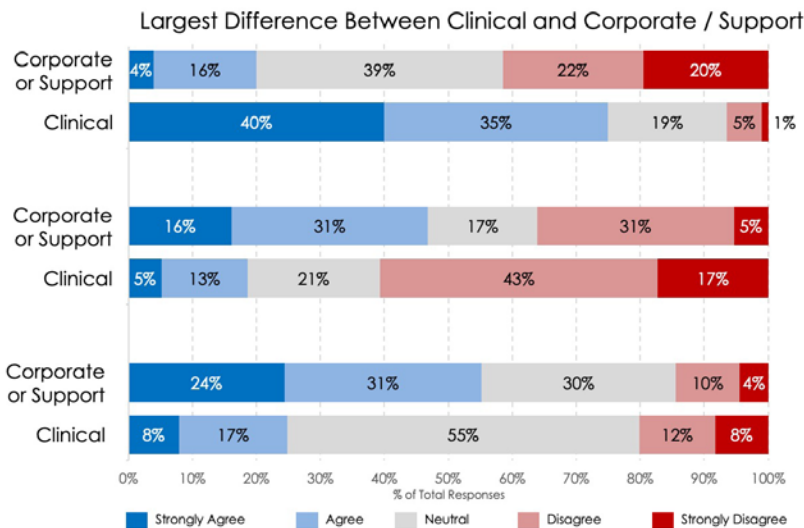
Differences between Clinical vs. Corporate or Support

The **proximity** of my workspace to the **clinical** space is critical to the well-being of patients.

I feel like I'm **expected** to be **at my desk** to be considered working.

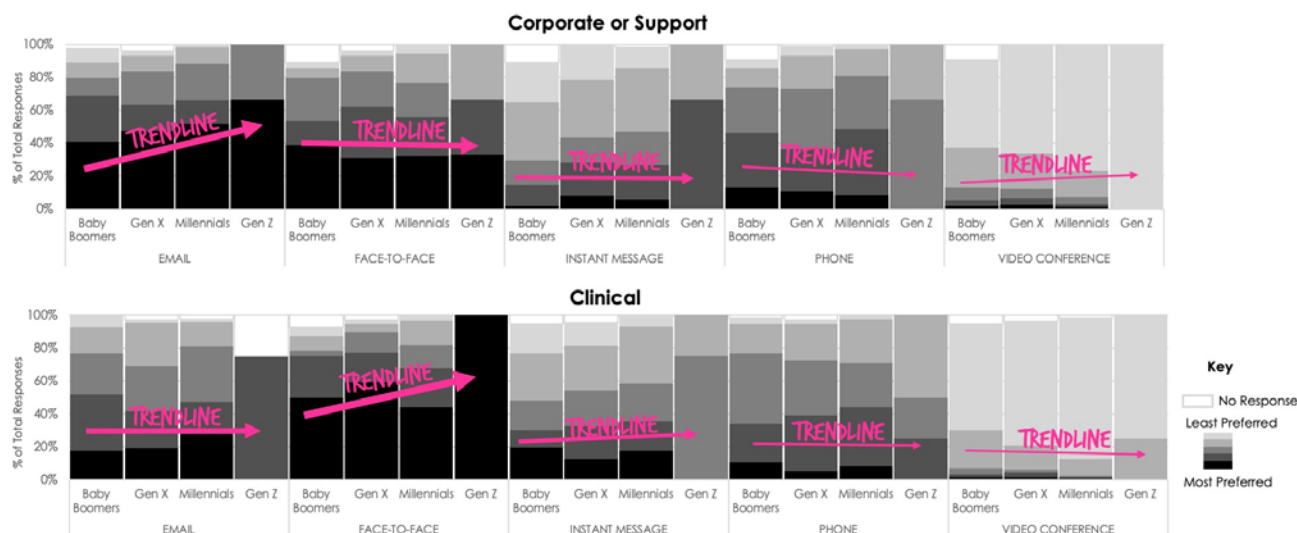
When **working remotely**, I am able to be as or **more productive** than as I am in the office (ability to stay on task)

Note: Remote work is not typically applicable to clinical workers. 51% of Corporate or Support staff stated they have the ability to work remotely, while 26% of clinical workers did.



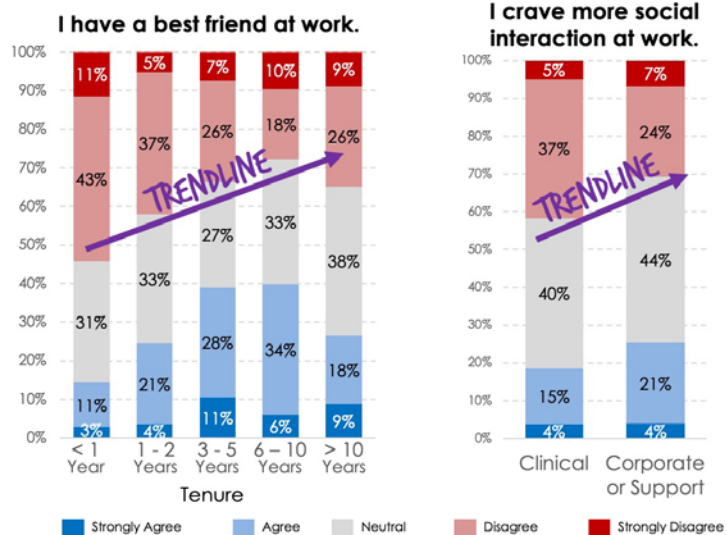
COMMUNICATION PREFERENCE BY NATURE OF WORK & GENERATION

Staff in Corporate or Support prefer email communication while clinical staff prefer face-to-face. Generational views escalates those preferences.



SOCIABILITY

Staff with longer tenure tend to establish stronger social connections.
Clinical staff likely have greater need for downtime.



Page 172 | Workplace Strategy South Niagara Hospital Project

COMMENTS

“ We are a team and for the most part- we are all friends.
... we're like a big family.

'Tis lonely working alone.

I am here to do a job, not be part of a social network.

Would be helpful to have space for lunch, also space to have work related discussions (idea generating) without disturbing other people. ”

B+H | Advance Strategy

KEY FINDING

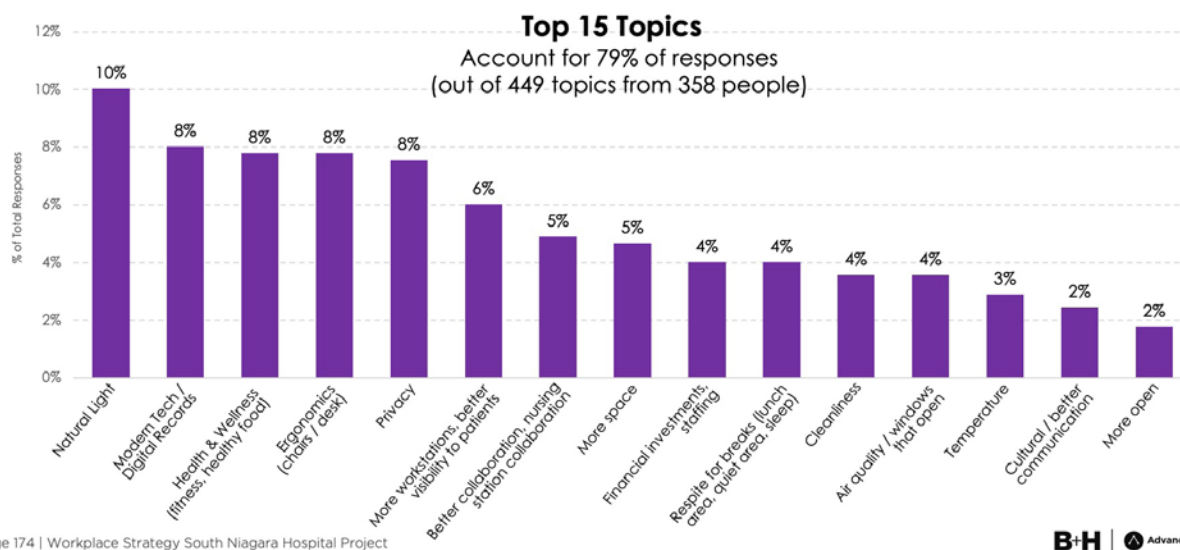


Access to health & wellness amenities & features onsite are important to staff.

A staff fitness center and healthy food options are priorities in addition to natural light and better ergonomics. Mother's rooms higher priority for ages that would likely use it.

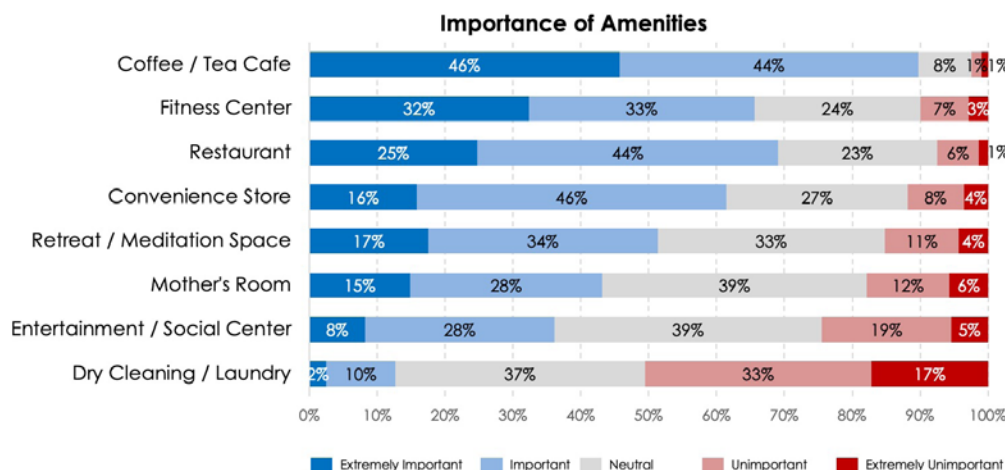
Page 173 | Workplace Strategy South Niagara Hospital Project

IF I COULD CHANGE ONE THING ABOUT THE WORKPLACE, IT WOULD BE...



AMENITY PREFERENCES

Daily essentials such as places for coffee, food and fitness are priorities

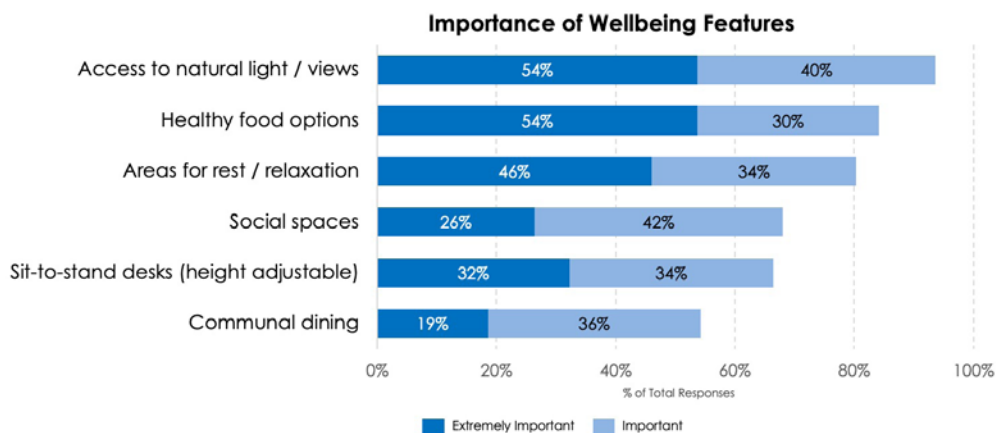


INSIGHT

- Millennials are 28% more likely to rate a Mother's Room and Fitness Center as important

WELLBEING FEATURES

Natural light, healthy food, and areas for respite are priorities



KEY FINDING

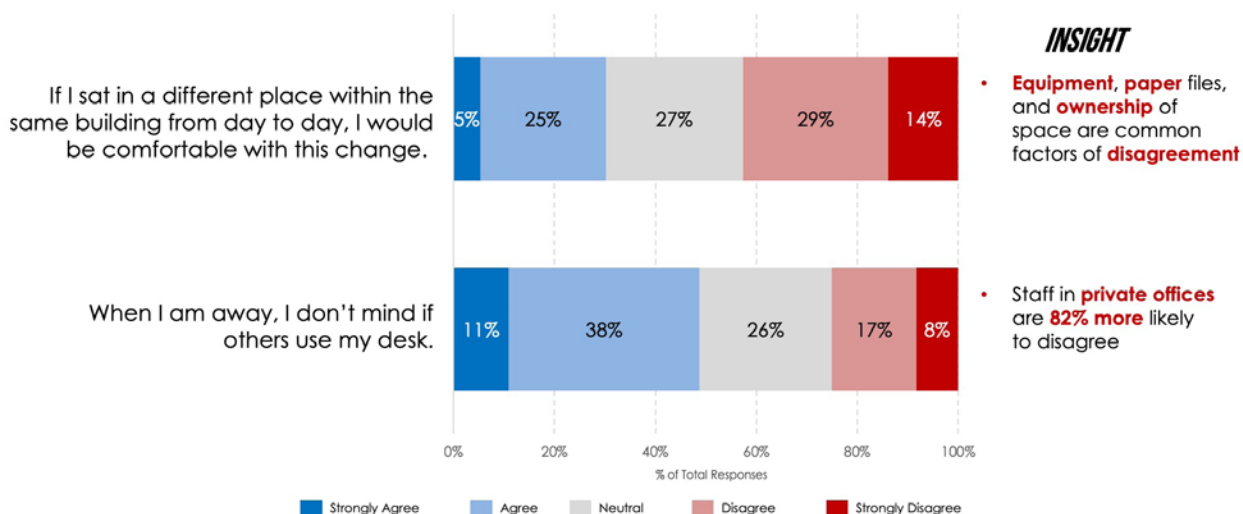


Current paper based systems limit flexibility. Basic technology infrastructure lacks.

Reliable and free Wi-Fi, more computer stations and mobile devices would aid flow of work.

FLEXIBILITY AND SHARING

Strong ownership of space, willingness to temporarily share, but stuff (paper + equipment) gets in the way

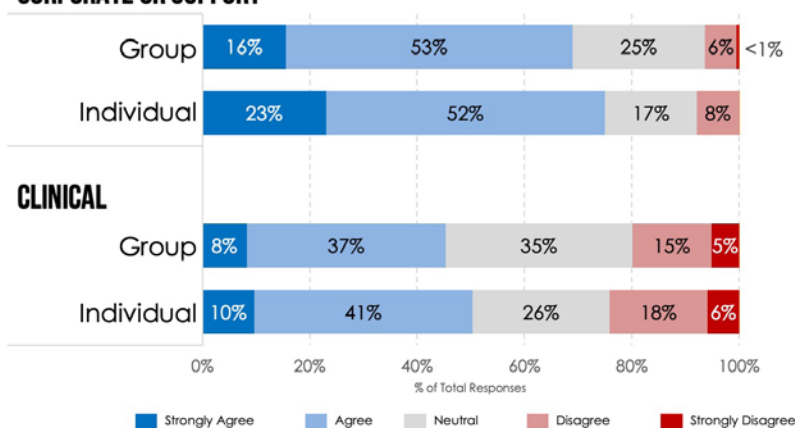


TECHNOLOGY

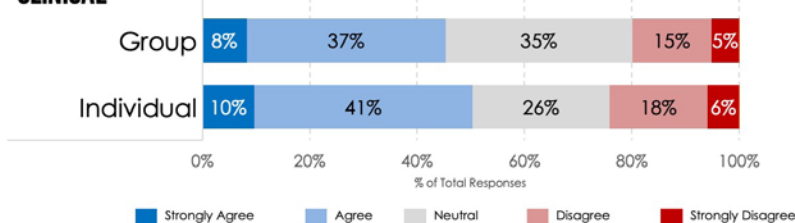
Appears more supportive for existing corporate or support related work. Wi-Fi, digital medical records and other tools for mobility within the hospital site are desired.

Tech tools provided support my __ work needs effectively.

CORPORATE OR SUPPORT



CLINICAL



COMMENTS

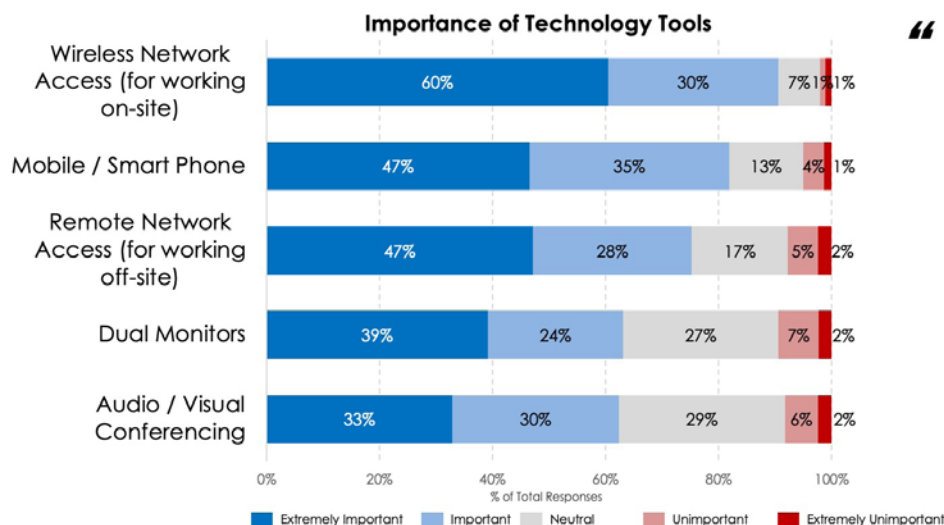
“ Yes, the work cell has definitely helped to keep connected; however, with the lack of a consistent work computer makes my individual work needs a challenge.

many work methods are paper based/manual and have a redundant electronic component (repetitive to add information into system if we do it also manually) ”

TECHNOLOGY

Wi-Fi, digital medical records and other tools for mobility within the hospital site are desired.

COMMENTS



“

I usually use my own phone and data for work use and wireless network would be nice.

We need Wi-Fi in hospital to provide better and more efficient care. A lot of medical apps are on mobile now.

”

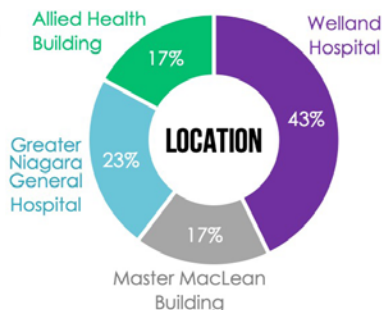
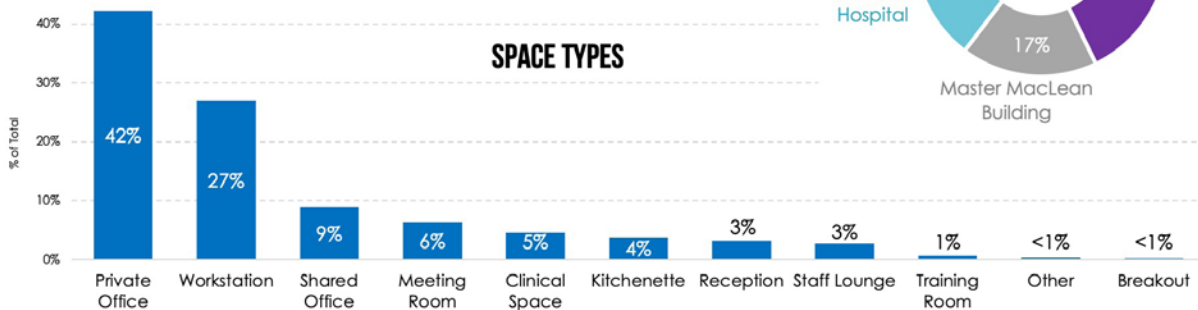
NIAGARA HEALTH UTILIZATION STUDY

BACKGROUND

Utilization Study

The space utilization and observation study assessed employees' meeting patterns in the work environment across four locations. Data was collected four times a day over 4.5 days (Sept 23-27) and measured occupancy (whether a person was in the space, had just stepped away, was not in for the day or the space was not assigned to anyone), the type of activity (either focused work, on the phone, meeting with others), and the number of occupants.

5,361 RECORDS COLLECTED
across 298 spaces
in 4 locations over 4.5 days



Page 182 | Workplace Strategy South Niagara Hospital Project
Note: Percent of total space is based on a count of the number of records by spaces and not square footage.

B+H | Advance Strategy

SUMMARY FINDINGS



At most, 2/3rd of private offices and workstations were occupied at some point during a day. Private offices averaged at 35% and peaked at 46%. Workstations averaged 40% and peaked at 58%.



Shared offices, which are assigned to multiple people, exhibited higher utilization as a space type (64%), but had 1 person in them half of the time they were occupied.



Meeting Room utilization (18% on average, 37% peak) was among the least used space types. No rooms was used more than 50% of the time. 59% of time collaborative space used by 3 or fewer people.



Kitchenettes (9%), Break Out (0%) and Staff Lounge (26%) spaces are lightly used spaces.



Utilization is relatively consistent throughout week by space type with a drop off in the late afternoon.

Page 183 | Workplace Strategy South Niagara Hospital Project

B+H | Advance Strategy

SUMMARY FINDINGS



By department, Records (Health & Medical) (55% avg.) and ICT (45% avg.) are the heaviest users of workspace while Human Resources (25% avg.) and Admin & Corporate Support (28% avg.) are the lightest users.



Focused Work is the dominant activity in the workspace (74% of total). Records (Health & Medical) and ICT are more heavily engaged in this activity.



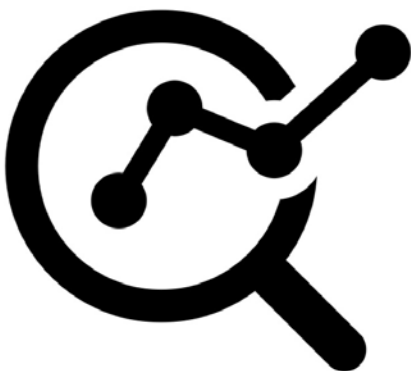
42% of face-to-face interactions occur in private office space and Clinical functions are most often engaged in this activity.



Phone conversations were observed 14% across all activities and Building Service functions were most often engaged in this activity.



Other activities were seldom observed (1% of all activity). Examples of these activities include eating, printing and working with patients.



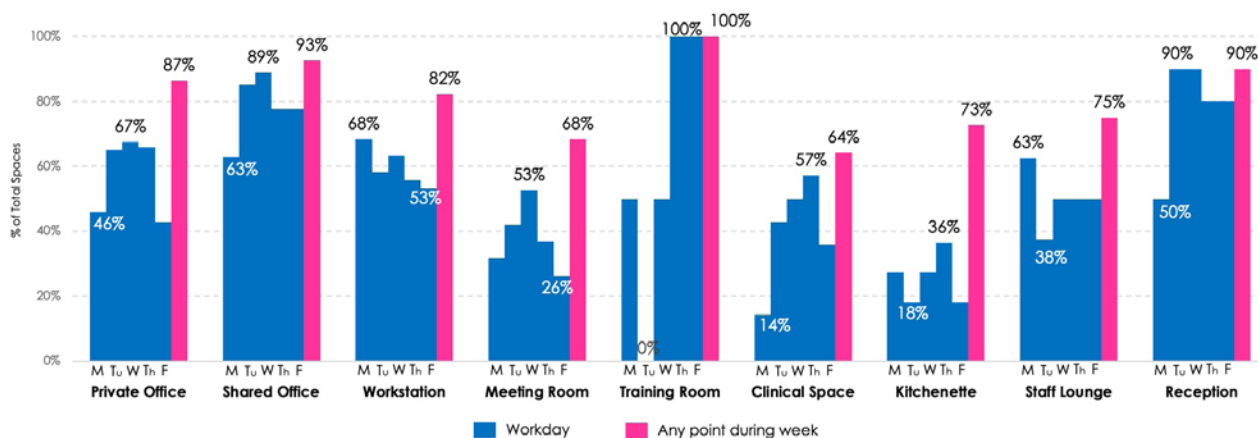
ANALYSIS DETAIL

The following section documents utilization study analysis findings.

% OF SPACES OBSERVED “IN” AT LEAST ONCE

By Space Type

At most, ~2/3^{ds} of private office space and workstations are occupied at some point in the day. 89% of shared offices, which are assigned to anywhere between 2 to 6 people, have at most at least one person in them during the day.



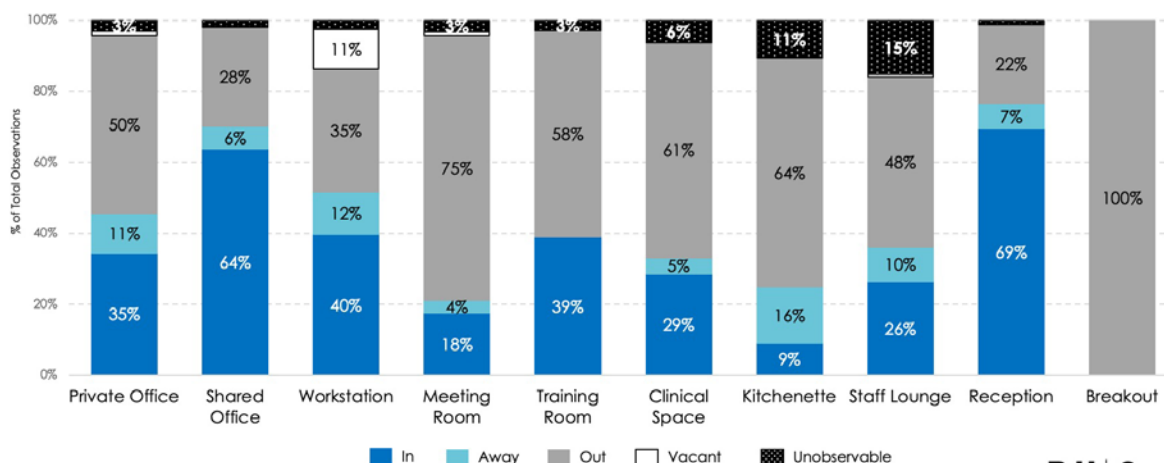
Note: Data was collected for half a day on Friday and a higher number of spaces were inaccessible on Monday that were later made available during the course of the study.

B+H | Advance Strategy

UTILIZATION AS % OF OBSERVATIONS

By Space Type

On average, private offices are in use 35% of the time while workstations are in use 40% of the time. Shared offices, assigned to multiple people have a higher average rate of utilization (64%). Meeting Rooms are not used 75% of time.



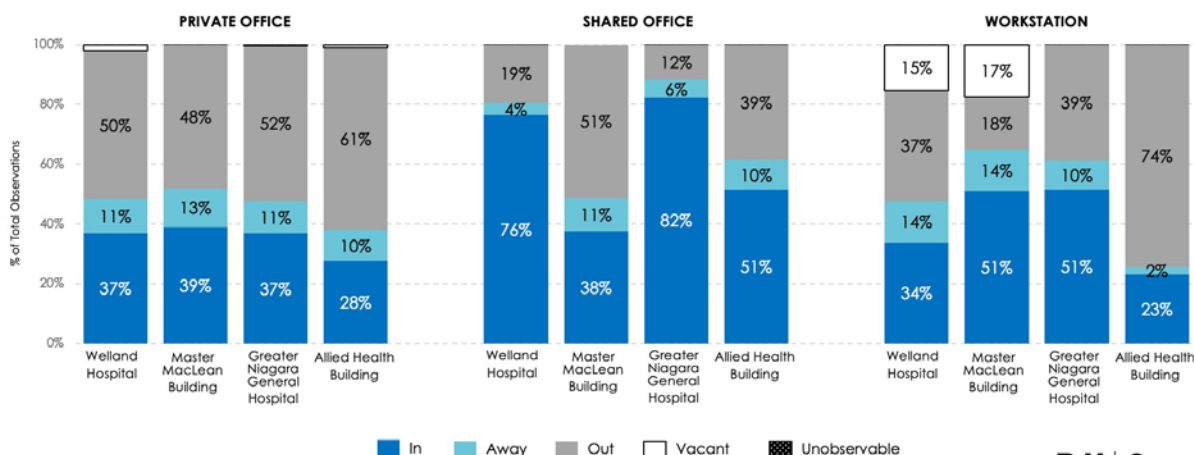
Page 187 | Workplace Strategy South Niagara Hospital Project

B+H | Advance Strategy

INDIVIDUAL WORKSPACES BY BUILDING

By Space Type and Building

Across sites, offices are used with similar frequency. Shared office space was used more frequently at Welland and Niagara General, and workstations were used most often at Master MacLean and Niagara General.



Page 188 | Workplace Strategy South Niagara Hospital Project

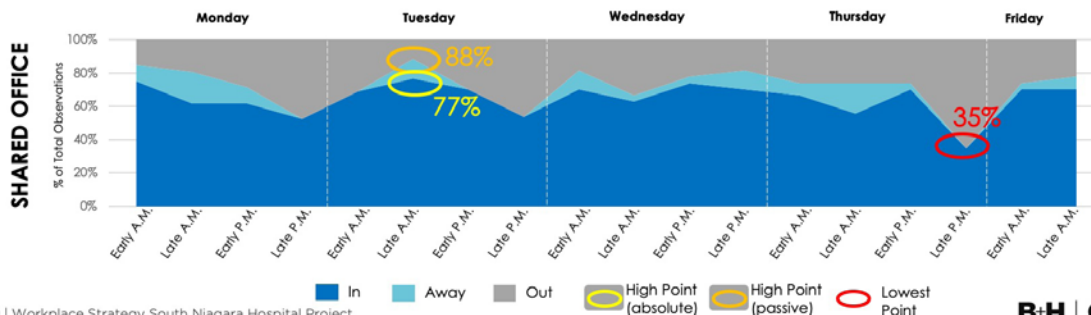
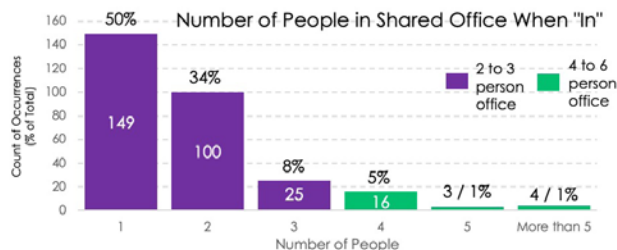
B+H | Advance Strategy

SHARED OFFICE USE THROUGHOUT DAY

+ Count of People in Room

Use of shared office space is relatively consistent throughout the day, with a slight drop off toward the end of the day.

While utilization is high, half the time there is one person using the space type, which is assigned to up to 6 people.



Page 189 | Workplace Strategy South Niagara Hospital Project

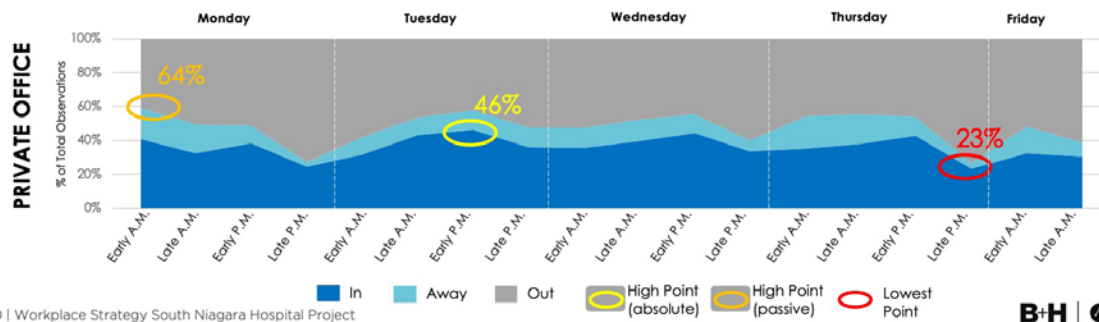
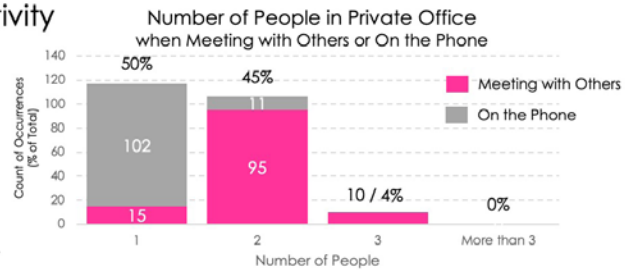
B+H | Advance Strategy

PRIVATE OFFICE USE THROUGHOUT DAY

+ Count of People in Room by Noisy Activity

Use of private office space is relatively steady, and peaks at 46%.

When occupants are engaged in potentially distracting activity (meeting with others or using the phone), about half the time 2 or 3 other people are also in the room. A single individual "meeting with others" is likely chatting with a colleague at their door.



Page 190 | Workplace Strategy South Niagara Hospital Project

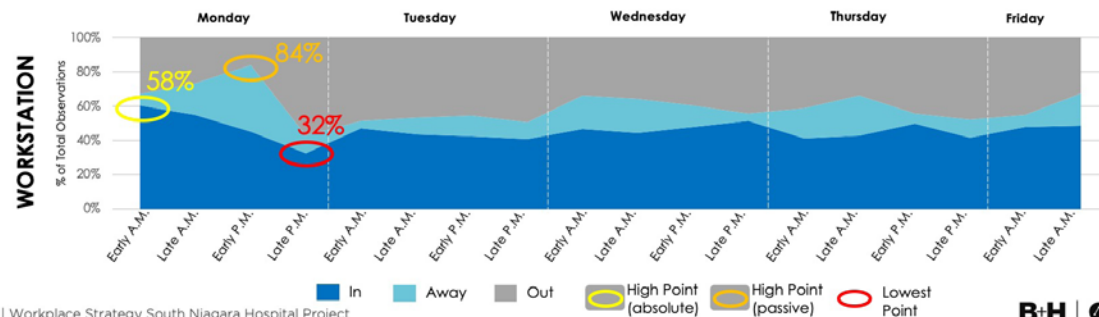
B+H | Advance Strategy

WORKSTATION USE THROUGHOUT DAY

+ Count of People in Room by Activity

Use of workstations is relatively steady, and peaks at 58%.

78% of the time there is one person in the work area when the occupant is engaged in potentially distracting activity (meeting with others or using the phone). A single individual "meeting with others" is likely engaged in chatting over a cubicle wall.



Page 191 | Workplace Strategy South Niagara Hospital Project

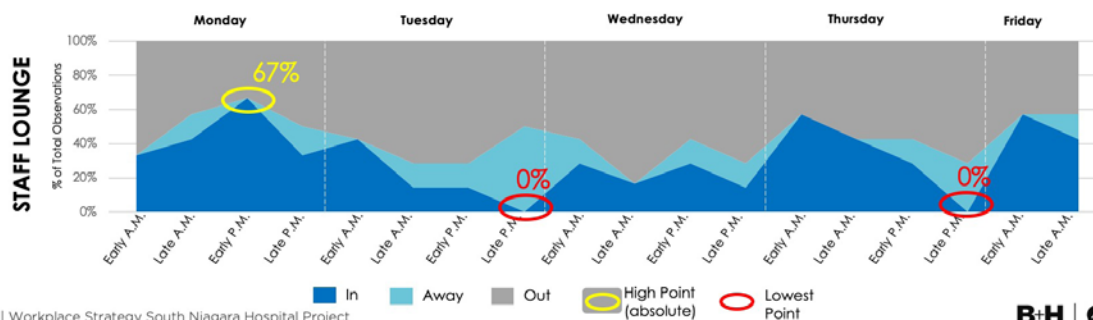
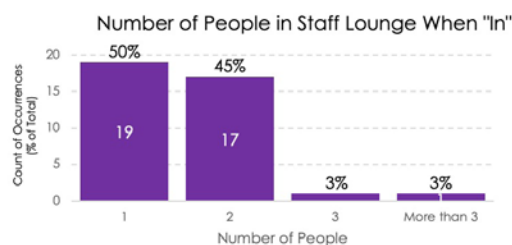
B+H | Advance Strategy

STAFF LOUNGE USE THROUGHOUT DAY

+ Count of People in Room

Use of Staff Lounge space tends to occur after lunch and early in the morning throughout the week.

95% of the time there was 1 or 2 people in the space when occupied.



Page 192 | Workplace Strategy South Niagara Hospital Project

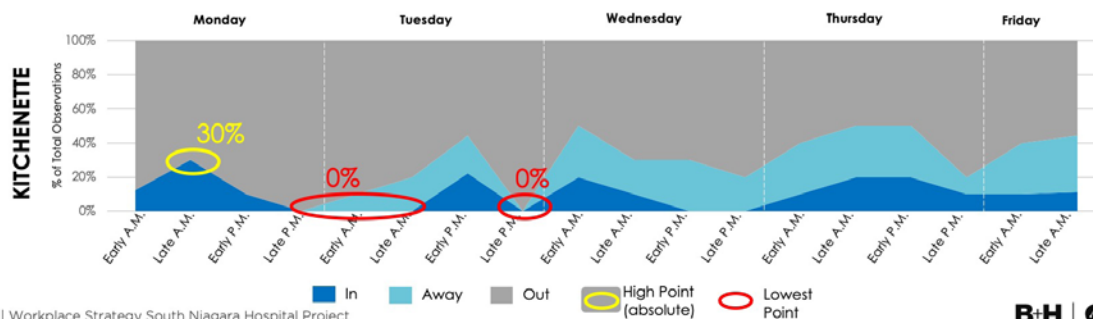
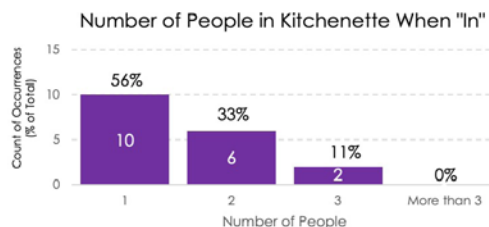
B+H | Advance Strategy

KITCHENETTE USE THROUGHOUT DAY

+ Count of People in Room

Kitchenettes were not often observed to be in use during the course of the study.

89% of the time they were in use, there were 1 or 2 people in them.



Page 193 | Workplace Strategy South Niagara Hospital Project

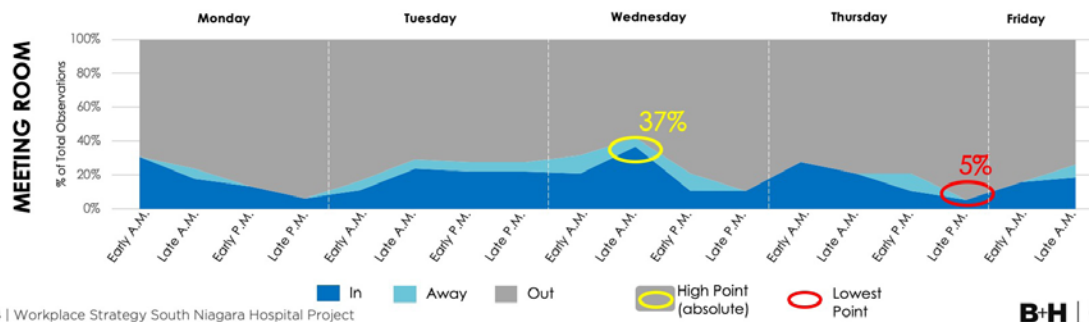
B+H | Advance Strategy

MEETING ROOMS THROUGHOUT DAY

Most Meeting Rooms not used majority of time; 2 rooms used 50% of time

5 MOST FREQUENTLY USED MEETING ROOMS

UTILIZATION "IN"	DEPARTMENT	BUILDING / FLOOR	CAPACITY
50%	Health Records	GNG - L1	10
50%	Medical Records	WHS - L1	20
44%	IPAC	WHS - L2	8
33%	Administration	GNG - L2	8
33%	Mental Health	MMB - L2	20



Page 194 | Workplace Strategy South Niagara Hospital Project

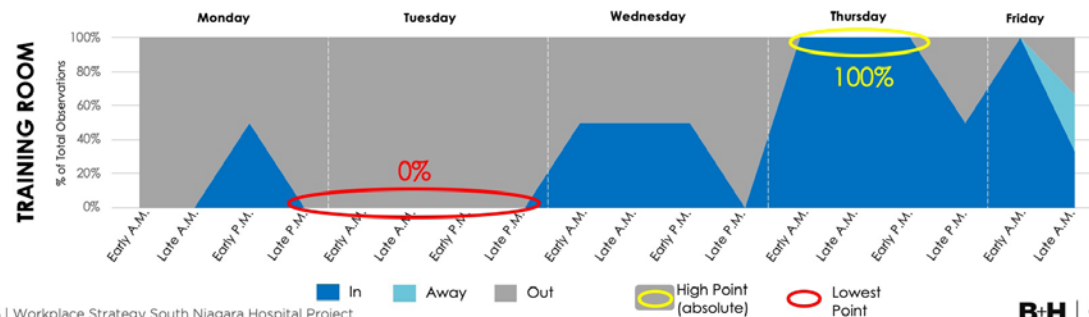
B+H Advance Strategy

TRAINING ROOMS THROUGHOUT DAY

Both training rooms used occasionally, Diabetic Clinic training room used more often

TRAINING ROOM UTILIZATION

UTILIZATION "IN"	DEPARTMENT	BUILDING / FLOOR	CAPACITY
50%	Diabetic Clinic	WHS - L1	14
28%	BioMed	GNG - L1	8

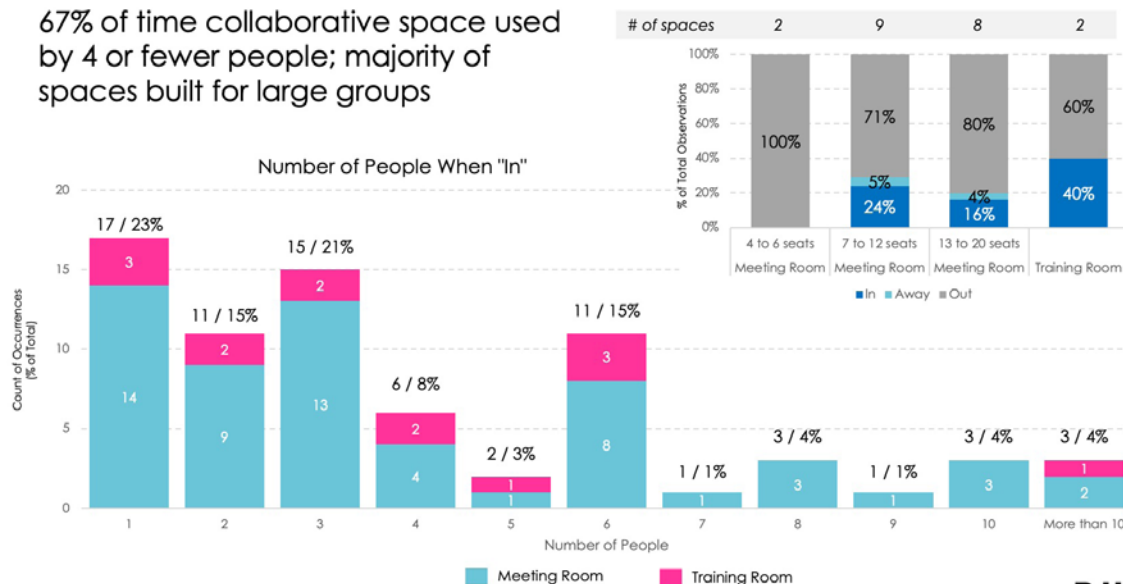


Page 195 | Workplace Strategy South Niagara Hospital Project

B+H Advance Strategy

PEOPLE IN COLLABORATIVE WORKSPACES

67% of time collaborative space used by 4 or fewer people; majority of spaces built for large groups



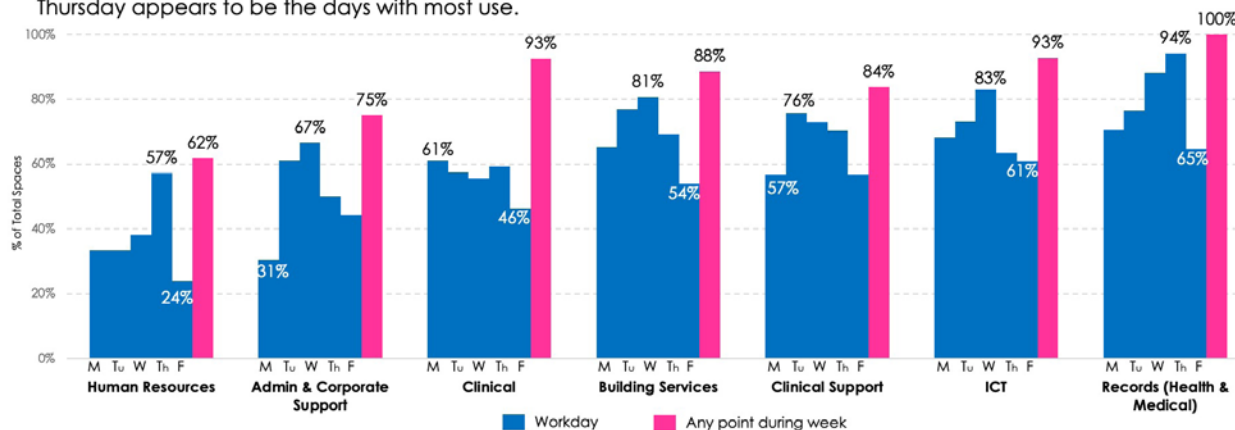
Page 196 | Workplace Strategy South Niagara Hospital Project

B+H | Advance Strategy

% OF SPACES OBSERVED "IN" AT LEAST ONCE

Individual Workspace by Department

ICT tends to use its workspace most often while Human Resources uses its space least often day to day. Additionally, 38% of Human Resources space was not observed to be used at any point during the study. Wednesday and Thursday appears to be the days with most use.

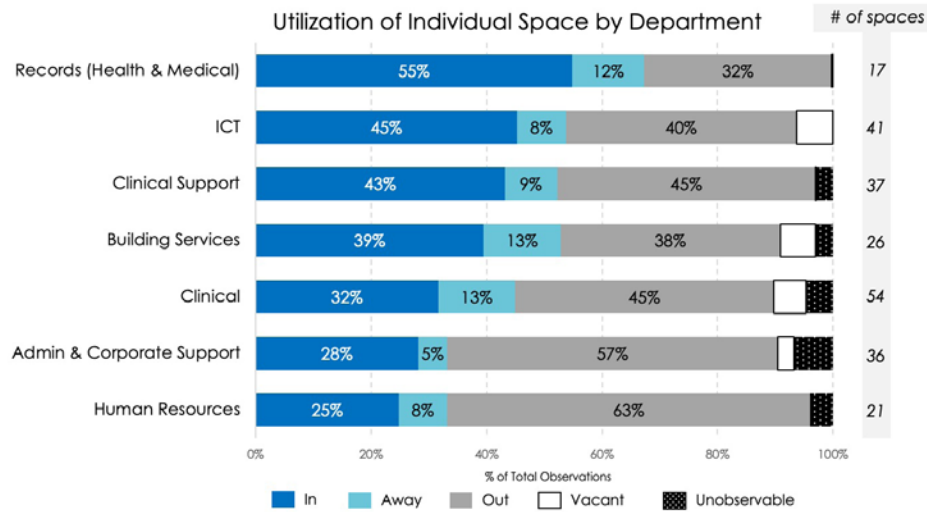


Note: Data was collected for half a day on Friday and a higher number of spaces were inaccessible on Monday that were later made available during the course of the study.

B+H | Advance Strategy

UTILIZATION BY DEPARTMENT

Average of Individual Workspace (Private & Shared Offices + Workstations)



On average, Records uses its space the most across departments (55% of time) while Human Resources uses its space an average of 25% of time. Admin & Corporate Support is slightly higher on average at 28%.

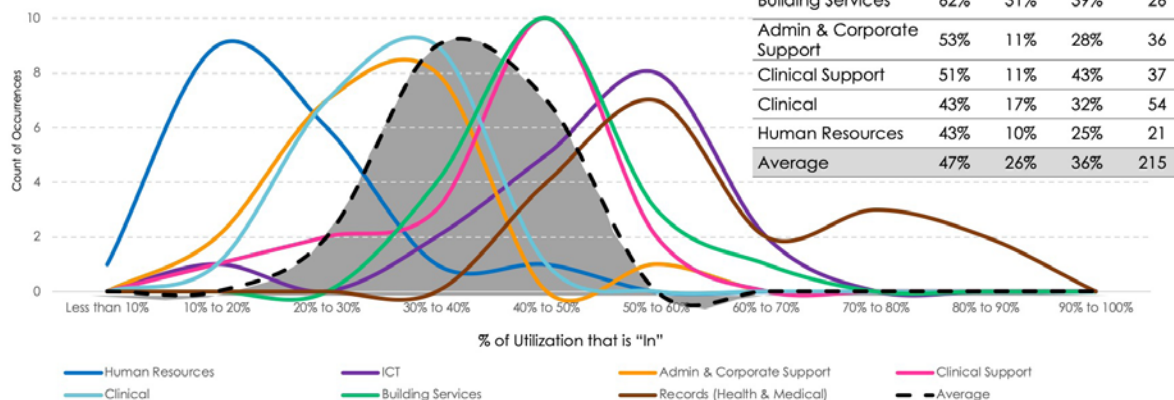
Page 198 | Workplace Strategy South Niagara Hospital Project

B+H | Advance Strategy

PEAKS & VALLEYS BY DEPARTMENT

Of Individual Workspaces
(Private & Shared Offices + Workstations)

Records, ICT, Clinical, Building Services and Clinical Support use their space more often than the organization on average. ICT's peak use is highest at 68% while Human Resources' is lowest; a valley of 10%.

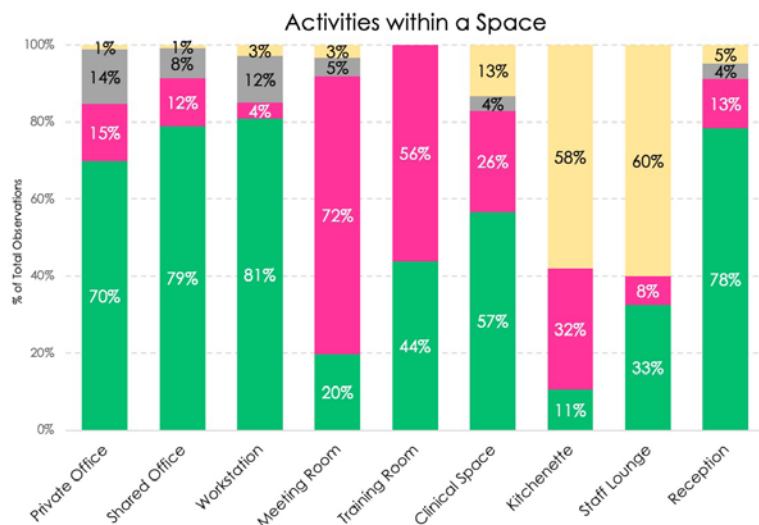


Page 199 | Workplace Strategy South Niagara Hospital Project

B+H | Advance Strategy

ACTIVITIES BY SPACE

Within a Space and by Location of Activity



Page 200 | Workplace Strategy South Niagara Hospital Project

Focused work is the dominant activity overall in individual workspaces.

However, face-to-face interactions most often occurred in office space (42% of time).

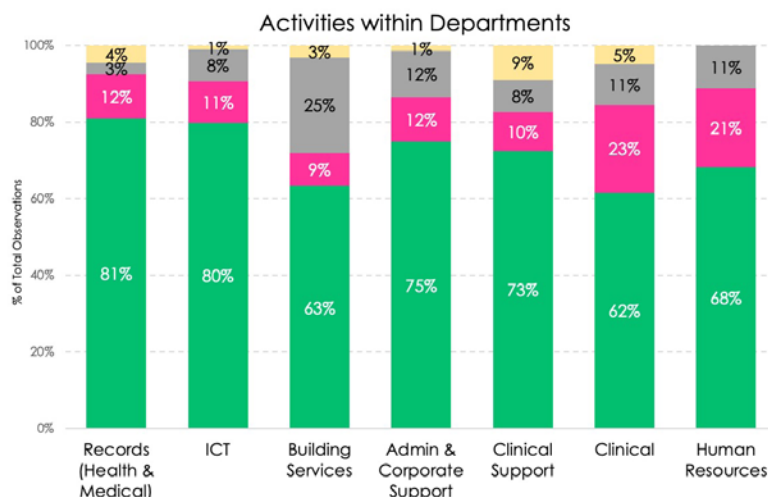
LOCATION OF ACTIVITY				
Space Type	Focused Work	Meeting with Others	On the Phone	Other
Private Office	38%	42%	51%	12%
Shared Office	18%	15%	12%	4%
Workstation	32%	9%	32%	20%
Meeting Room	1%	15%	1%	2%
Training Room	0%	3%	0%	0%
Clinical Space	3%	7%	1%	12%
Kitchenette	0%	2%	0%	13%
Staff Lounge	1%	1%	0%	29%
Reception	7%	6%	2%	7%
TOTAL	100%	100%	100%	100%

Meeting with Others
Focused Work
Other
On the Phone

B+H | Advance Strategy

ACTIVITIES BY DEPARTMENT

Within a Department and Location by Department



Page 201 | Workplace Strategy South Niagara Hospital Project

Focused work is the dominant activity across all departments. Clinical groups met face-to-face most frequently.

36% of all face-to-face interactions occurred in the Clinical department while 26% of phone calls occurred in Building Services.

DEPARTMENT LOCATION OF ACTIVITY				
Space Type	Focused Work	Meeting with Others	On the Phone	Other
Records	12%	9%	3%	12%
ICT	22%	15%	15%	5%
Building Svcs.	10%	7%	26%	9%
Admin & Corp. Support	12%	9%	13%	4%
Clinical Support	20%	14%	15%	44%
Clinical	19%	36%	22%	27%
HR	5%	8%	6%	0%
TOTAL	100%	100%	100%	100%

Meeting with Others
Focused Work
Other
On the Phone

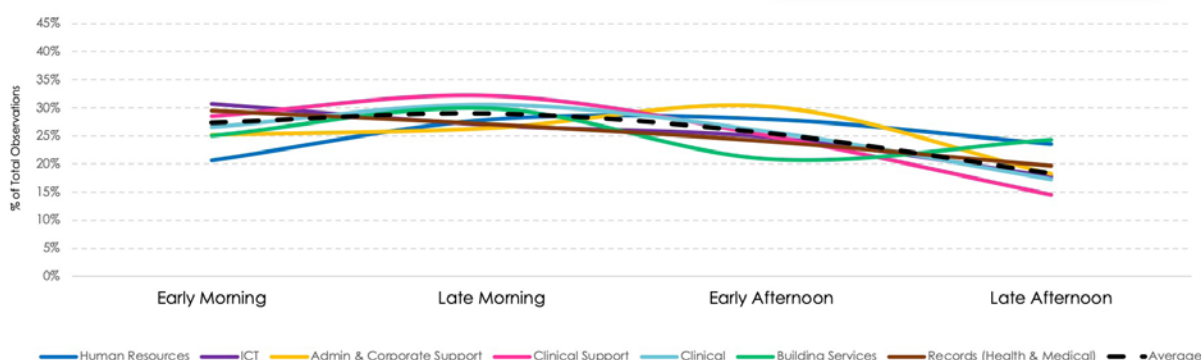
B+H | Advance Strategy

FOCUSED WORK

Throughout Day by Department

Focused work, the dominant activity, is relatively consistent throughout the day across departments. Building Services exhibited a slight dip in the early afternoon.

Focused Work was observed 1,073 times and account for 74% of all activity



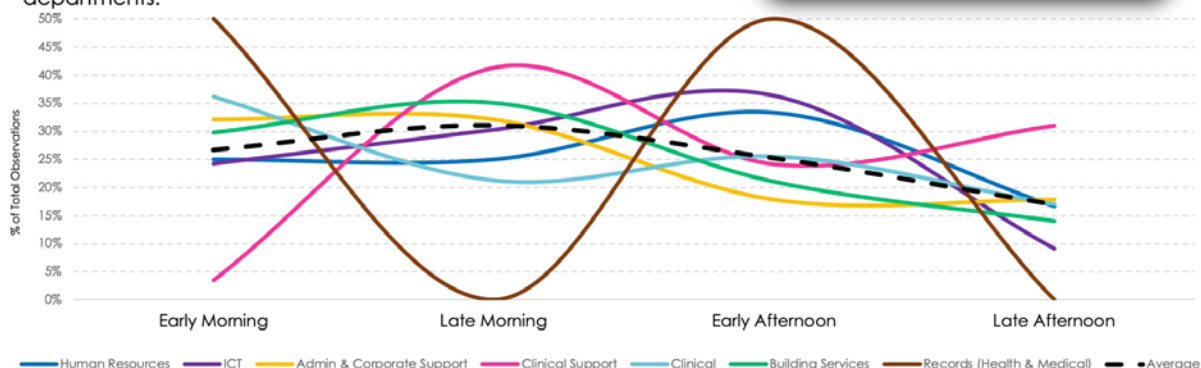
Note: Activities for individual workspaces only are shown (Private Office, Shared Office and Workstation)

ON THE PHONE

Throughout Day by Department

Phone conversations appears to peak in the late morning, particularly among people in Clinical Support roles. This activity peaked in the early afternoon among ICT and Human Resource departments.

Phone conversations were observed 200 times and account for 14% of all activity



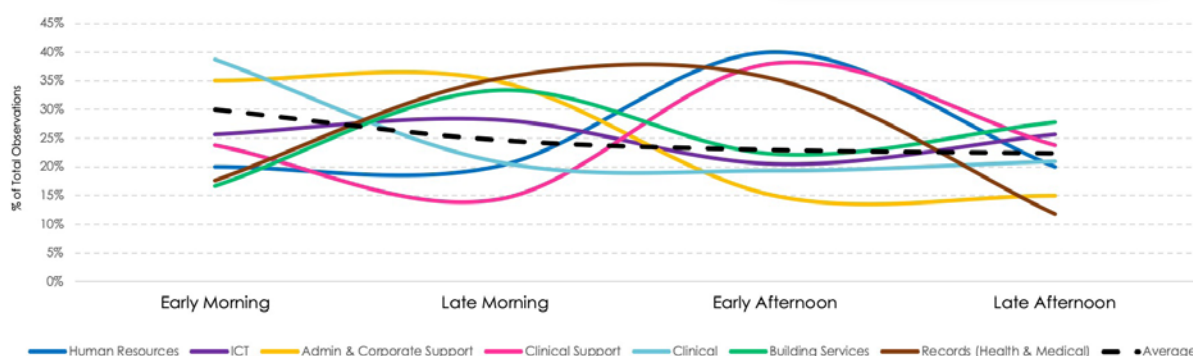
Note: Activities for individual workspaces only are shown (Private Office, Shared Office and Workstation)

MEETING WITH OTHERS

Throughout Day by Department

On average, face-to-face interactions are relatively steady. However, ICT and Human Resources appear to have a similar pattern that peaks in the early afternoon while Admin & Corporate Support appears to conduct this activity in the morning.

Face-to-face interactions were observed 165 times and account for 11% of all activity



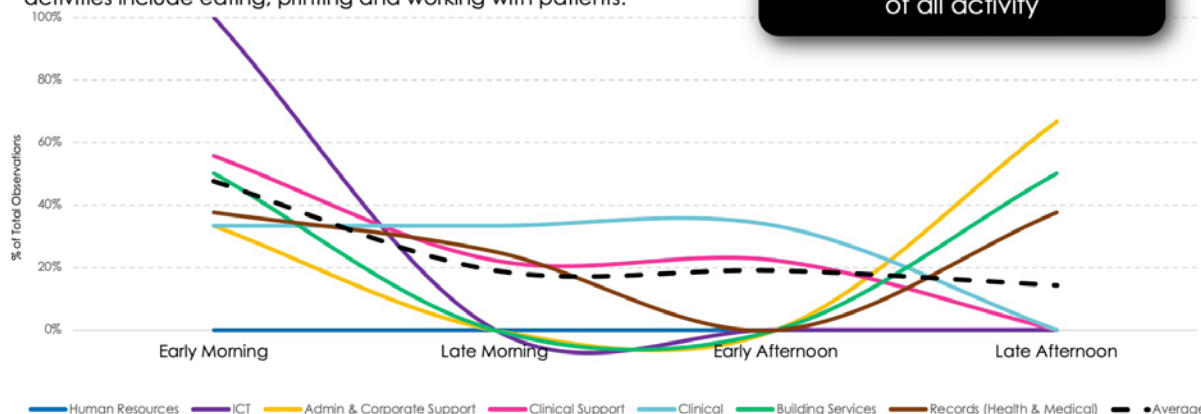
Note: Activities for individual workspaces only are shown (Private Office, Shared Office and Workstation)

OTHER ACTIVITY

Throughout Day by Department

Other activity beyond focused work, meeting with others, and phone conversations was seldomly observed. Examples of these activities include eating, printing and working with patients.

Other activity was observed 21 times and account for 1% of all activity



Note: Activities for individual workspaces only are shown (Private Office, Shared Office and Workstation)

DEPARTMENT GROUPINGS

Definitions for Utilization Study

DEPT CATEGORY	DEPARTMENT	# OF INDIVIDUAL SPACES
Admin & Corporate Support		36
	Corporate Procurement	13
	Administration	11
	Planning & Redevelopment	5
	Organizational Development	4
	One Foundation	3
Building Services		26
	Resource Centre	14
	Engineering	5
	Volunteer	3
	EVS (Environmental Services)	2
	Palladin Security	1
	Purchasing and Receiving	1
Clinical		54
	Diabetic Clinic	19
	Occupational Health	12
	Perioperative Services	8
	Mental Health Outpatient	5
	Geriatric Assessment	4
	Stroke, Diabetes, Social Work,	
	Cardiac Rehab	4
	Mental Health	2

DEPT CATEGORY	DEPARTMENT	# OF INDIVIDUAL SPACES
Clinical Support		37
	Pharmacy	9
	IPAC	7
	Lab	7
	Clinical Support	5
	Lab/Biomed	5
	HealthLinks Offices	3
	BioMed	1
Human Resources		21
ICT		41
Records (Health & Medical)		17
	Health Records	12
	Medical Records	5



HEAT MAPS

The following section
illustrates utilization by
location

HEAT MAPS

Greater Niagara General
Ground Floor

DEPARTMENTS ON FLOOR

- BioMed
- Clinical Support
- Engineering
- EVS
- Health Records
- Human Resources
- Mental Health Outpatient (reception)
- Pharmacy
- Volunteer

Utilization by Location During Study Period



HEAT MAPS

Greater Niagara General
Level 1

DEPARTMENTS ON FLOOR

- Administration
- Lab

Utilization by Location During Study Period



HEAT MAPS

Allied Health Building, Level 1



Utilization by Location During Study Period



DEPARTMENTS ON FLOOR

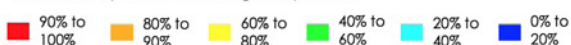
- Geriatric Assessment

HEAT MAPS

Allied Health Building, Level 2



Utilization by Location During Study Period



DEPARTMENTS ON FLOOR

- Corporate Procurement
- HealthLinks Offices
- Planning & Redevelopment

HEAT MAPS

Allied Health Building, Level 3



Utilization by Location During Study Period



DEPARTMENTS ON FLOOR

- One Foundation
- Palladin Security
- Stroke, Diabetes, Social Work, Cardiac Rehab

Page 212 | Workplace Strategy South Niagara Hospital Project

B+H | Advance Strategy

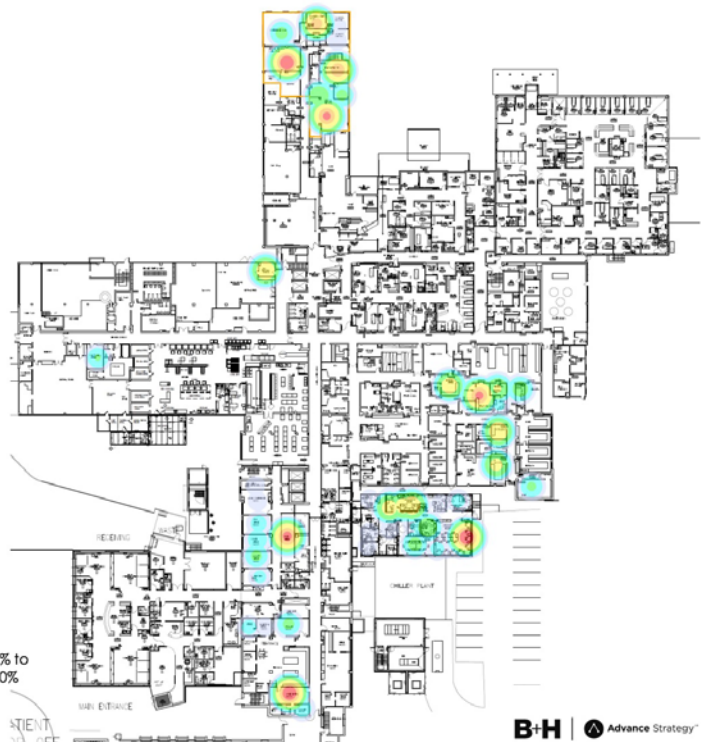
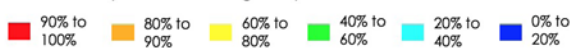
HEAT MAPS

Welland Hospital, Level 1

DEPARTMENTS ON FLOOR

- Administration
- Diabetic Clinic
- Engineering
- Lab/Biomed
- Pharmacy
- Purchasing & Receiving

Utilization by Location During Study Period



Page 213 | Workplace Strategy South Niagara Hospital Project

B+H | Advance Strategy

HEAT MAPS

Welland Hospital, Level 2

DEPARTMENTS ON FLOOR

- ICT

Utilization by Location During Study Period



HEAT MAPS

Welland Hospital, Level 5



Utilization by Location During Study Period

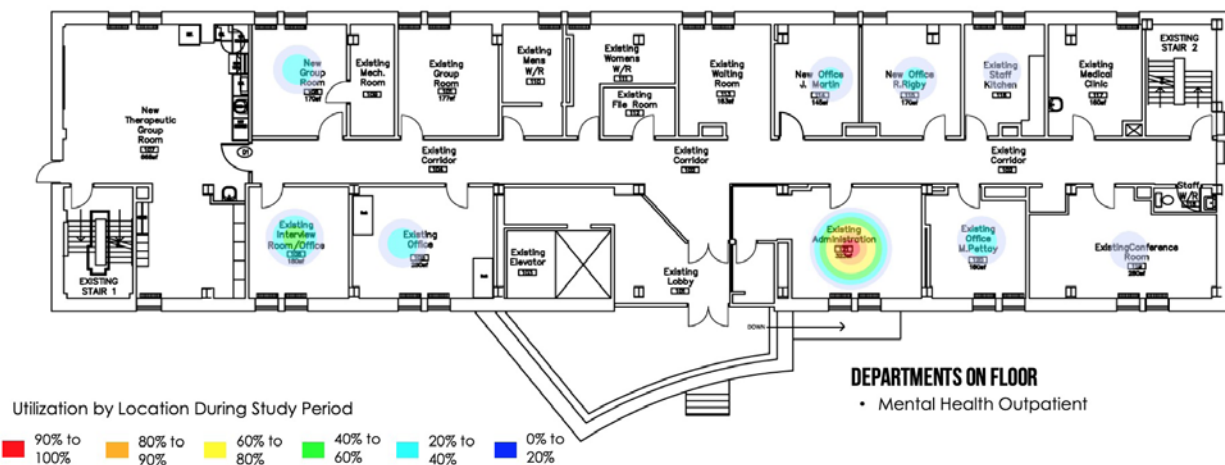


DEPARTMENTS ON FLOOR

- Human Resources

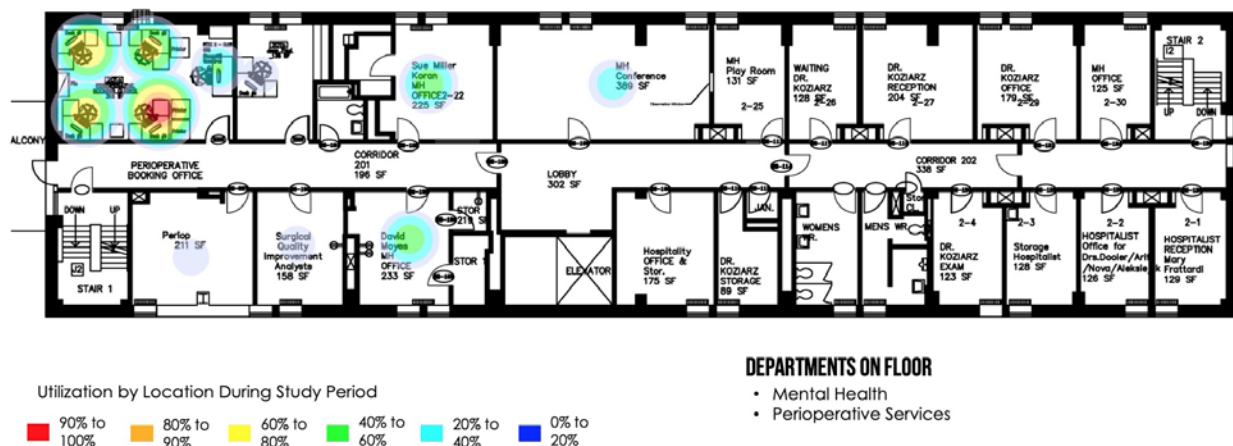
HEAT MAPS

Master Maclean Building, Level 1



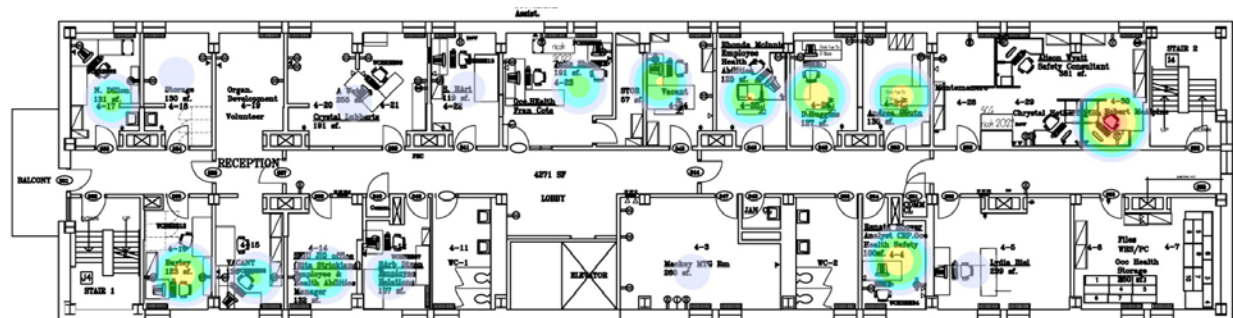
HEAT MAPS

Master Maclean Building, Level 2



HEAT MAPS

Master Maclean Building, Level 4



Utilization by Location During Study Period



DEPARTMENTS ON FLOOR

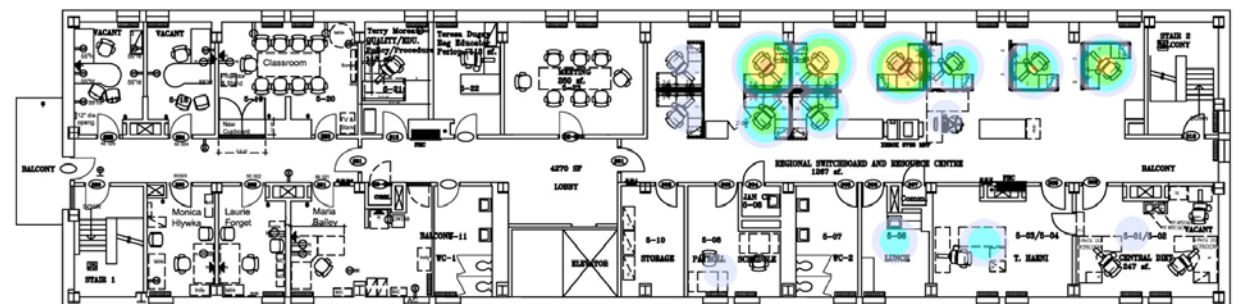
- Occupational Health
- Organizational Development

Page 218 | Workplace Strategy South Niagara Hospital Project

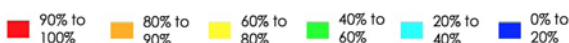
B+H | Advance Strategy

HEAT MAPS

Master Maclean Building, Level 5



Utilization by Location During Study Period



DEPARTMENTS ON FLOOR

- Resource Centre

Page 219 | Workplace Strategy South Niagara Hospital Project

B+H | Advance Strategy

APPENDIX D

BROCK UNIVERSITY WORKSHOP

The following section provides a summary of findings from an on site workshop with students of Dr. Madelyn Law at the Health Sciences program at Brock University. This engagement was added to the initial project scope and occurred after the first draft of recommendations was submitted.



TABLE OF CONTENTS

SUMMARY FINDINGS	3 to 8
WORKSHOP ACTIVITIES	9 to 31

SUMMARY FINDINGS

The following section provides a summary of findings from an on-site workshop with students of Dr. Madelyn Law at the Health Sciences program at Brock University.

This engagement was added to the initial project scope and occurred after the first draft of recommendations was submitted.

WORKSHOP AGENDA

- Presentation
- Activity / Dialogue

Approximately 17 people (16 students + 1 professor) were in attendance for a 3-hour workshop. Below is the agenda of information that was presented and activities that solicited participant feedback.

AGENDA ITEM	TIME ALLOTMENT	DESCRIPTION
INTRODUCTION + FUTURE OF WORKSPACE	20 MINS	Each participant shared their impression of Niagara Health as an organization and discussed reaction to video about workspace
CURRENT & FUTURE STATE	45 MINS	In small groups, participants selected image cards to identify qualities that define the existing and preferred future workplace experience
RAPID PROTOTYPING	50 MINS	Participants discussed their most productive day and then build prototypes of either an idealized or problematic workspace using materials provided
SPACE TYPE VOTING	45 MINS	Individuals critiqued specific space types in terms of their function and look & feel. Then participants voted on favorites for each category.
WILDCARD	5 MINS	Individuals wrote their thoughts in response to the statement: I am most inspired when...
CLOSE	5 MINS	Participants were thanked and provided follow-up contact details, if additional comments were applicable.

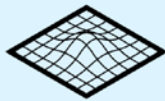
KEY THEMES



Focused collaboration, communal concentration.

Participants expressed preferences toward seeing others concentrating as a motivating factor in their own focus work. When collaborating, they want spaces that limit distractions from technology and enhance face-to-face connections.

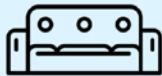
Activities theme generated from: Introduction, Current & Future State, Rapid Prototyping, Space Type Voting, Wild Card



Surface Area Matters.

Gen-Z is accustomed to having all types of tech gadgets and paper. As such, they have a strong preference for spaces that allow them to spread their belongings out, such as tech devices, paper, food and coffee. 69% of space type critiques judged spaces on the amount of surface area.

Activities theme generated from: Rapid Prototyping, Space Type Voting, Wild Card



Casual is King.

The words "cozy" and "comfy" were repeatedly used as characteristics and aesthetics that were appealing to participants. 41% of space type critiques judged spaces on their level of comfort.

Activities theme generated from: Introduction, Rapid Prototyping, Space Type Voting, Wild Card

KEY THEMES



Private Offices are preferred, but viewed as shared resource.

Participants view offices as highly functional space, but not a space they want to be 100% of their time or a space reserved or assigned for only one person's use.

Activities theme generated from: Space Type Voting



Inclusive space only.

Diversity and inclusion are very important to this generation. Concerns about how spaces would make people feel in terms of being "left out" were raised throughout. Participants were uncomfortable with social spaces in the open that felt like only small groups (2 to 3 people) could use at a time.

Activities theme generated from: Current & Future State, Rapid Prototyping, Space Type Voting, Wild Card



Natural light, green space and openness valued. Private nooks to support.

There was an overwhelming preference for natural elements (plants, water features, etc.) and light, bright spaces. Open environments were also preferred as long as individuals have access to private spaces when needed.

Activities theme generated from: Introduction, Current & Future State, Rapid Prototyping, Space Type Voting, Wild Card

KEY THEMES



BYOD (Bring Your Own Devices). Outlets & wireless are critical.
Space types were judged on infrastructure support for personal electronics that would be brought to the space by the user.

Activities theme generated from: Rapid Prototyping, Space Type Voting, Wild Card



Mobility within space supported by purposeful variety is preferred.
Participants repeatedly stated that the ideal space would allow them to leave their belongings at one space for the day, but be able to move within an environment based on an activity's purpose.

Activities theme generated from: Introduction, Current & Future State, Rapid Prototyping, Space Type Voting, Wild Card



Accessible amenities and convenience for basic needs
The most favorable spaces underscored easy access to washrooms, natural light, food preparation, outdoor space and exercise facilities.

Activities theme generated from: Introduction, Current & Future State, Rapid Prototyping, Space Type Voting, Wild Card

DESIGN IMPLICATIONS

- 1 **Private offices** are an **important program element**, but **utilizing** the spaces as shared resources for **all to access** when they need it is how they should be assigned in the future. The future state could phase out assignments, but not the spaces themselves.
- 2 In furniture selection, designers should **prioritize surface area** in desks and tables that can **comfortably fit a laptop, mobile phone and coffee** as a general guideline.
- 3 Creating an alternate work area with **generous surface area and ample outlets** will be an attractive space moving forward. It underscores the importance of the **staff-only area being large enough to accommodate a greater volume of people**.
- 4 **Benching desk** configuration should be **minimized**, even when Niagara Health goes paperless.
- 5 These findings underscore the recommendation that the design should prioritize physical senses – **natural light, comfort, and green space**. **Comfortable seating in furniture selection** is particularly important.
- 6 Underscores the technology recommendations (**wireless and basic meeting room tech**). Extra care toward **power outlets** should be made.
- 7 In design and furniture selection, designers should **avoid elements that could appear exclusionary**, particularly in social and collaborative spaces.

WORKSHOP ACTIVITIES

Page 9 | Niagara Health Brock University Workshop

Activities / findings from:

- Introduction - Student Impressions of Niagara Health
- Current & Future State - Culture Cards
- Rapid Prototyping
- Space Type Voting
- Wildcard

B+H | Advance Strategy™

WHAT STUDENTS THINK OF NIAGARA HEALTH

The workshop began with introductions. Each participant was asked to state their name, area of focus in the program and impression of Niagara Health as an organization. The majority of students had some work, internship or project related experience with Niagara Health. Those that had no experience, expressed gratitude for the organization's interest in their views.

FAVORABLE IMPRESSIONS

Strong connections with community – engagement with external stakeholders in the region are noticeable and appreciated by the students.

Positive care provider and patient relationships – the general consensus was that **staff provided more personal care to patients** unlike larger metropolitan areas where patients often feel "like a number."

Flow of **care is more immediate** at Niagara Health vs. healthcare in Toronto. Participants felt that this provided not only a **better patient experience**, but also benefited care provider's ability to feel like they are making a difference in the community.

The design of **St. Catharines feels modern** and the efforts to improve layout is noticeable. The **lobby**, in particular, has great access to natural light.

LESS FAVORABLE IMPRESSIONS

Paper-based systems – students felt that the **lack of digital records** is preventing optimal care to patients.

Organization appears **set in its ways** – students expressed frustration with bureaucratic systems and stated that a common response to suggested improvements is, **"this is the way we've always done it."**

There are many **"dark alleys"** in the existing environment, particularly at legacy sites. Students felt that the **design is not approachable for patients**, which can be very intimidating. The natural light improvements in the lobby at St. Catharines does not translate to patient rooms.

There are **no rest facilities for staff**, which is a significant detractor to the work experience. Students commented on how that **would ultimately erode patient care**.

Page 10 | Niagara Health Brock University Workshop

<https://www.youtube.com/watch?v=JSzko-K7dzo>

THE EDGE BUILDING, AMSTERDAM

A Bloomberg news report on "The Edge" (link above), Deloitte's headquarters building in Amsterdam, was shown to participants. The building is dubbed as the "Smartest" and "Greenest" office building in the world. It utilized activity-based working, which does not assign desks to any individual who works there. Rather, employees book work spaces for the day based on their schedule.

STUDENT REACTION TO EDGE BUILDING

CONCERNS:

- Privacy concern about workspace booking technology and feelings of being monitored for disciplinary purposes
- Many felt that the workspaces were not very advanced, but rather standard spaces without seat assignments
- Raised concerns about how a flexible environment would function with paper-based systems
- Concerns raised about the lack of personalization of space and potential erosion of routine
- Questions about when glitches occur in booking, how it would impact productivity. Examples provided were meeting room booking, as the current experience at Niagara Health was difficult.

PERCEIVED BENEFITS

- Technology that could know where people are located would help account for staff locations in an emergency
- Variety of workspace – better balance of quiet vs. collaborative and private vs. open space
- Unassigned spaces could break down hierarchies

EXERCISE: CURRENT & FUTURE STATE

In small groups, participants selected image cards to identify qualities that define the existing and preferred future workplace experience.

CULTURE CARD THEMES

CURRENT STATE



CULTURE CARD THEMES

FUTURE STATE



EXERCISE: RAPID PROTOTYPING

Participants describe their most productive day.

Then, in small groups, they used materials provided to build the space out.

Groups were asked to either build:

- an **idealized space** to support productivity
- a **problematic space** to prevent productivity

Teams finished by presenting their thought process.



IDEALIZED ENVIRONMENT

BROCK UNIVERSITY, GROUP 1



FEATURES INCLUDE:

- Plants, water features
- Fitness facilities - gym / pool
- Healthy food
- Comfortable furniture
- Large windows, ample natural light
- Therapy / counselling room with dogs
- Garden fresh produce

IDEALIZED ENVIRONMENT

BROCK UNIVERSITY, GROUP 2



FEATURES INCLUDE:

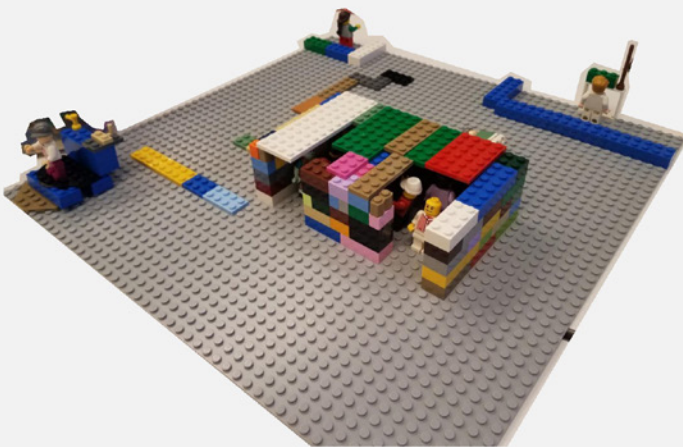
- Transparency between walls
- Sunlight
- Large surface area
- Comfortable seating
- Washrooms accessible
- Face-to-face collaboration
- designated quiet space
- Seating by windows
- Variety of workspace
- Relaxation room

Page 17 | Niagara Health Brock University Workshop

B+H | Advance Strategy™

PROBLEMATIC ENVIRONMENT

BROCK UNIVERSITY, GROUP 3



FEATURES INCLUDE:

- Spaces that are overcrowded with workers
- Confined enclosures
- Dark workspace
- Multiple people sharing an office
- Low ceilings
- Washrooms far apart, disparity of quality
- Long, dark corridors
- Windows accessible to select few

Page 18 | Niagara Health Brock University Workshop

B+H | Advance Strategy™

PROBLEMATIC ENVIRONMENT

BROCK UNIVERSITY, GROUP 4



FEATURES INCLUDE:

- Compartmentalized / siloed workspace
- Long, maze-like corridors
- Dirty / messy spaces
- Overcrowding in workspace
- Visual obstructions in workspace that distract (excessively large water fountain in center)
- Noisy neighbors in workspace
- Inaccessible bathrooms directly adjacent to small kitchen
- Lack of parking space (one space for all)
- Wasted space – storage with one item
- Bottlenecks - single receptionist for many patients

Page 19 | Niagara Health Brock University Workshop

B+H | Advance Strategy™

EXERCISE: SPACE TYPE VOTING

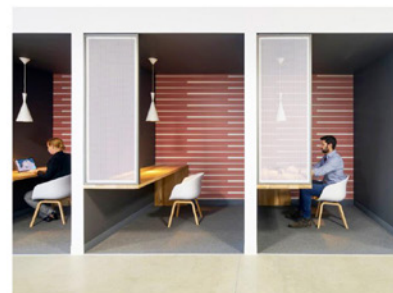
PART 1: CRITIQUE SPACE TYPE CARDS

Based on Function and Look & Feel



PART 2: VOTE BY CATEGORY

Desking, Alternate Focus,
Social & Community, Co-Creation

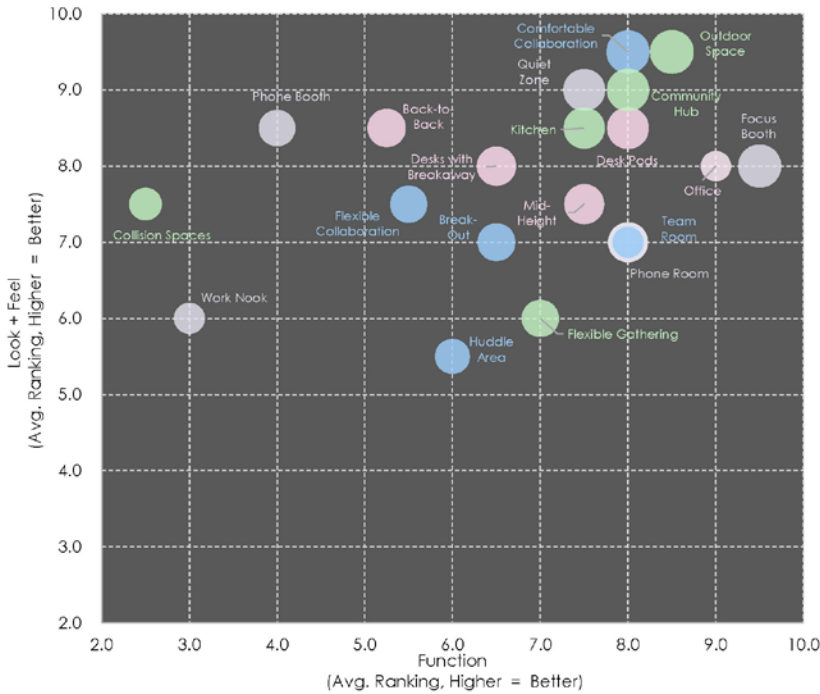


● FUNCTION

● LOOK + FEEL

Page 20 | Niagara Health Brock University Workshop

B+H | Advance Strategy™



SPACE TYPE RANKING

Priorities include comfort, large surface area, power outlets, balance of privacy and collaboration, and greenspace /plants preferred aesthetically

Each participant critiqued a set of space types from four categories.

Gen-Z differed in their critiques from Niagara Health staff in that Comfortable Collaboration, the Community Hub and Offices were more favored with this group.

Space for face-to-face interactions that felt like others could feel excluded were disliked.

SPACE TYPE CRITIQUE

THEMES

% of Critiques	Theme (either positive or negative)
77%	Open / Light
69%	Large Surface Area
41%	Comfort
28%	Power Outlet / Device

POSITIVE ATTRIBUTES

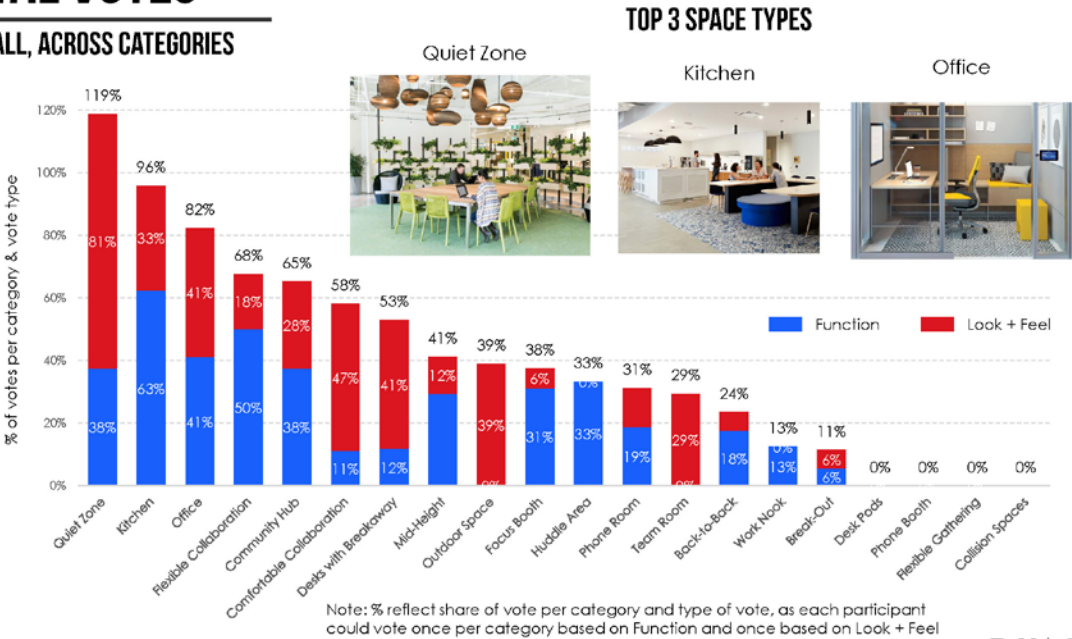
- Open
- Natural Light
- Bright Aesthetic
- Comfort - "Cozy" and "Comfy"
- Surface Area
- Power Outlets
- Clean / Organized
- Ability to Collaborate – space with room for small groups
- Face-to-face; like collaborative spaces where people are looking directly at each other

NEGATIVE ATTRIBUTES

- Small / confined
- Hard seating / chairs
- Visual distraction
- Desks configuration with people looking directly at each other
- Little to no surface Area
- Illusion of privacy – spaces that are meant for privacy, but are open
- Spaces that could appear exclusionary to others
- Carpeting
- Industrial aesthetic

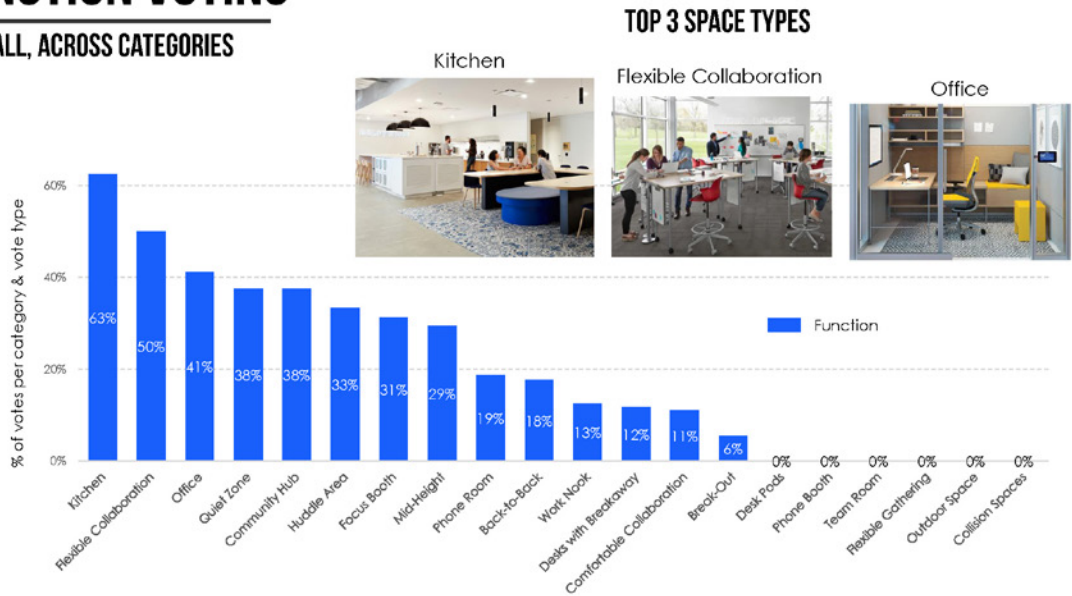
TOTAL VOTES

OVERALL, ACROSS CATEGORIES



FUNCTION VOTING

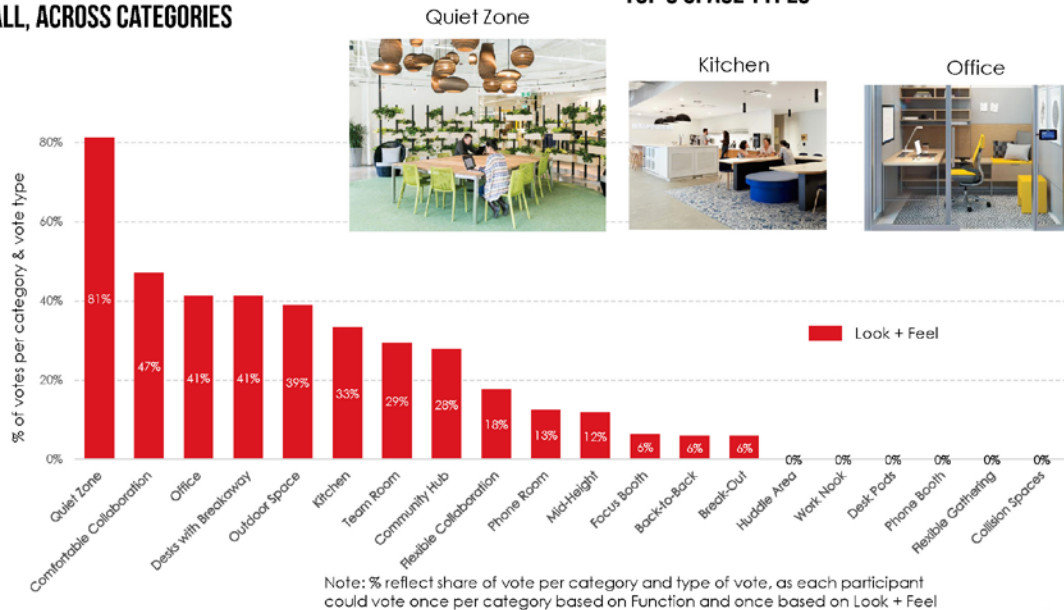
OVERALL, ACROSS CATEGORIES



LOOK + FEEL VOTING

OVERALL, ACROSS CATEGORIES

TOP 3 SPACE TYPES



Page 25 | Niagara Health Brock University Workshop

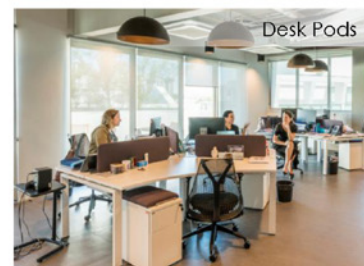
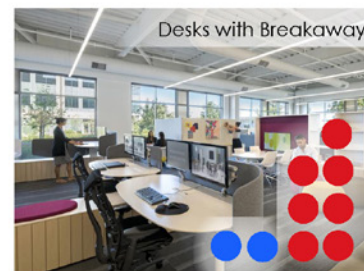
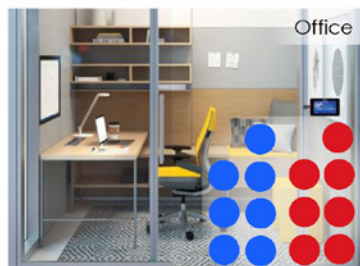
B+H | Advance Strategy

DESKING VOTES

FUNCTION AND LOOK + FEEL

● FUNCTION

● LOOK + FEEL



Page 26 | Niagara Health Brock University Workshop

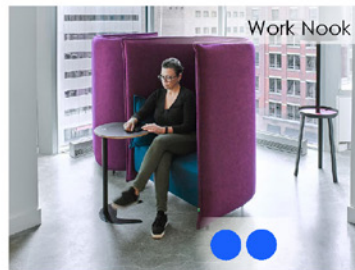
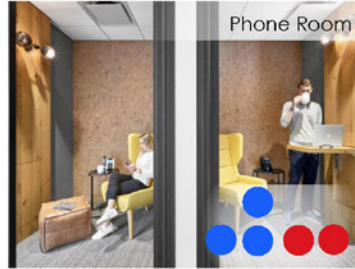
B+H | Advance Strategy

ALTERNATE FOCUS VOTES

FUNCTION AND LOOK + FEEL

● FUNCTION

● LOOK + FEEL



Page 27 | Niagara Health Brock University Workshop

B+H | Advance Strategy

CO-CREATION VOTES

FUNCTION AND LOOK + FEEL

● FUNCTION

● LOOK + FEEL



Page 28 | Niagara Health Brock University Workshop

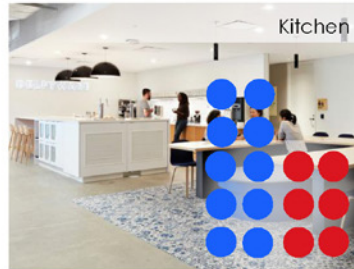
B+H | Advance Strategy

SOCIAL & COMMUNITY VOTES

FUNCTION AND LOOK + FEEL

● FUNCTION

● LOOK + FEEL



Page 29 | Niagara Health Brock University Workshop

B+H | Advance Strategy™

WILDCARD

Workshop participants completed the session with writing their thought to the statement:

I am most inspired when...

Many took the opportunity to summarize their thoughts from the activities.



Page 30 | Niagara Health Brock University Workshop

B+H | Advance Strategy™

Connection to each other, nature & health are important

Connection to each other, nature & health are important

RESPONSE THEMES

Theme Category	% of Total Themes
Natural light / Green Space	18%
Social Connections / Teamwork	16%
Comfort	9%
Convenient Access to Basic Needs	9%
Sense of Purpose	9%
Vibrant / Bright Aesthetic	9%
Time to Focus / Privacy	7%
Clean / Organized	7%
Autonomy / Flexible Environment	4%
Receive Feedback	4%
Home-like / Familiar Environment	4%
Open Environment	4%
Tools to Support	4%
Compensation	2%

Page 31 | Niagara Health Brock University Workshop

B+H | **Advance Strategy**[™]



PRODUCED BY:



SARA BENSON

Senior Strategist

sara.benson@bhadvancestrategy.com

SUSAN ROMAN

Project Manager

susan.roman@bharchitects.com

EMMA CHRISTENSEN

Workplace Designer

enna.christensen@bharchitects.com

STEVIE HOLYOKE

Workplace Designer

stevie.holyoke@bharchitects.com

CASEY YUEN

Workplace Designer

casey.yuen@bharchitects.com

CHRIS MCQUILLAN

Principal-in-Charge

chris.mcquillan@bharchitects.com

B+H | BOLD + human