The concept of the ambulatory network of the future encapsulates our understanding of how healthcare systems can thrive in the coming healthcare environment. It is a strategic planning model that accounts for the deep trends now reshaping the healthcare industry.

What is the ambulatory network of the future? The disruptive trends described in this white paper are creating an environment where the acute care hospital is no longer the hub of the healthcare delivery system. In the years to come, the true center of healthcare delivery will be a coordinated network of ambulatory care points:

- Primary care and specialty clinics
- Surgery centers
- Imaging centers and labs
- Sports medicine and wellness facilities
- Medical office buildings
- Retail clinics
- Urgent care centers and freestanding EDs
- Rehabilitation centers
- Nursing homes and skilled nursing facilities
- In-home health agencies
- Telehealth facilities
- Other tech-enabled access points

Taken as a whole, the ambulatory network of the future will be designed to address the emerging needs of both patients and providers. It will reinvent the way healthcare is delivered, with the goal of achieving better outcomes and using resources more efficiently.

**HOW TO APPLY THIS MODEL TO FACILITY DEVELOPMENT PLANNING**

As healthcare leaders plan for the ambulatory network of the future, they will need to rethink the built environment. What is the optimal footprint for a population-focused care network? How will new technologies impact the form and function of the healthcare facility? How will the pace of change affect our current and future plans?

The answers to these questions call for unprecedented flexibility. Following are five ways healthcare leaders can use ambulatory network of the future principles to create an effective and adaptable development strategy.

**PLANNING PRINCIPLE 1: THINK BEYOND YOUR PRIMARY SERVICE AREA**

Hospital-centered health systems think of strategy in terms of their primary service area. Medical staff planning and service line strategy focus on funneling local volume into inpatient beds. With the rise of the ambulatory network of the future as the hub of a care delivery system, healthcare leaders need to broaden their geographic focus.

Begin thinking in terms of population health. What are the total health and wellness needs of the people in this region? Given those needs, what types of care delivery solutions should the network include?
For example, the key to serving younger populations within a region will likely involve urgent care centers, retail clinics and sports medicine networks. Older populations within the geography will drive the need for facilities such as dialysis centers. Depending on the profile of local employers, work-based clinics could be an effective way to target local health issues. The key is to look at health needs across the region, regardless of whether services will drive inpatient volume.

**SYSTEM LEADERS SHOULD TAKE TWO THINGS INTO ACCOUNT WHEN DEVELOPING A GEOGRAPHIC NETWORK**

1. Health systems can assemble many elements of an effective ambulatory network through strategic partnerships and affiliations. For example, partnering with an existing rehabilitation provider could give a system instant access to expertise and market penetration.

2. Integration is an important dimension of planning. As health systems assemble the pieces of an ambulatory network, they will need to think about coordinating services between facilities and connecting sites through a shared EMR.

**PLANNING PRINCIPLE 2: ADOPT A “DESIGN-NEUTRAL” APPROACH**

Healthcare facilities being constructed within the next three to five years will need to meet the needs of today. How should leaders approach facility development as healthcare moves toward the ambulatory network of the future? The key is to plan for change by designing for adaptability.

We call this a design-neutral approach. Design-neutral facilities are built upon flexible, operationally neutral templates that can adapt to new technologies, scientific advances and novel delivery processes as they arrive on the scene.

For example, Hammes has worked with Elmhurst Memorial Hospital to create a design-neutral facility. Hammes provided project management services and led and directed the development process for their replacement hospital and new integrated campus. Elmhurst utilizes the Planetree philosophy, which promotes facility design that supports the development of healing partnership between caregivers and patients. The facility includes many sustainable design elements with a focus on energy efficiency. As part of Hammes’ role, an integrated, four-story MOB, connected to the hospital on all floors, was also constructed on the campus. The design flows seamlessly from the MOB to the hospital.

It is also important to plan for demographic changes. As the patient population ages, the most efficient facilities will be able to transition seamlessly to support chronic care and geriatric care services.

**PLANNING PRINCIPLE 3: MAKE ROOM FOR VIRTUAL CARE**

One of the clearest trends in the healthcare industry is the coming expansion of virtual care. As this trend develops, healthcare leaders will need to find a balance between traditional site based care and new virtual care requirements.

This transition will be complex. On one hand, there will be a reduced demand for many clinical spaces. For example, increasing use of primary care e-visits will reduce the need for exam room space. This will eventually extend to specialty care, as telemedicine consults expand beyond dermatology and psychiatry to other specialties. On the other hand, the telehealth infrastructure will increase the need for specialized spaces to support IT systems, telehealth equipment and support staff.

At the same time, other technologies will drive novel facility needs. For example, as 3D printing applications for healthcare become widely adopted, health systems will need to plan for new supply chain needs and clinical workflows. In addition, remote monitoring systems that support home health will require workspace for specialized caregivers.
On the outpatient side, virtual care technology could drive the development of new “lean” diagnostic facilities. These facilities would be staffed largely by techs, with specialists providing remote consultation.

**PLANNING PRINCIPLE 4: USE PREDICTIVE ANALYTICS TO DRIVE SITE SELECTION**

Traditional hospital-centered planning is based on relatively sparse information. System leaders construct service line plans using basic demographic and payer mix data at the ZIP code level. In contrast, planning for an ambulatory network of the future will require strategists to understand complex behaviors within a regional healthcare market. As a result, planners will need access to much more granular data.

Leading healthcare systems are now applying predictive analytics to strategic network planning. Predictive analytics uses rich data sets to model consumer demand and individual behavior. Retail businesses have used predictive analytics for years to select store sites. As consumerism increasingly drives the healthcare industry, health systems are using these tools to understand regional patient populations and plan access points within an optimal ambulatory network.

Here is one use case scenario: Patients are willing to drive the shortest distance for primary care and the longest distance for complex specialist consults. Other providers and care sites fall between these two poles. Predictive analytics can combine this information with patient address data to identify the market opportunity for potential facility locations.

Predictive analytics can also help healthcare strategists model different market scenarios. For example, models can be constructed to differentiate market opportunity by patient demand from market opportunity by competitive landscape. Other algorithms can help forecast the impact of new technology. For instance, what will happen in a market when various telehealth solutions become available? Strategists can use predictive analytics to model the resulting shifts in service demand.

**PLANNING PRINCIPLE 5: BUILD FOR ACCESS AND EFFICIENCY**

Patient consumerism and new technologies are creating a new definition of healthcare access. Today’s patients want the ability to schedule a same-day appointment. Once on site, they want to see their provider within 15 minutes of scheduled time. Going forward, these requirements will expand to the expectation of 24/7 access.

Schedule efficiency depends on good workflows, but good workflows require good facility design. In the most effective healthcare facilities, design and process work together to enable short wait times and quick throughput.

Facility design must also consider all the ways patients interact electronically with the ambulatory network of the future. Electronic check-in and registration will reduce the need for facility spaces to support these functions. At the same time, facilities will need to accommodate new workflows that support online patient access.

One key to success will be working closely with physicians. Too often, new technology interrupts physician work processes. The efficient healthcare space of the future will be built around physician workflows and facilitate their needs. This could include new wireless technology options that enable physicians to work with patients in multiple settings. In addition, while telehealth capabilities are designed with patient access in mind, they must fit seamlessly into physician workflows.

Facility planning should also take advantage of new opportunities to leverage healthcare innovation. In some cases, creating a hybrid medical office/clinical research building will allow physicians to add the most value to the ambulatory network.

**A NEW MODEL FOR STRATEGIC PLANNING AND DEVELOPMENT**

Healthcare organizations will need to pivot dramatically to prepare for the future of healthcare. Healthcare’s “center of gravity” will shift away from hospitals and toward ambulatory care, and, ultimately, the home setting. This shift will disrupt the industry’s traditional planning methods. Going forward, healthcare leaders need to adopt a new model for strategic planning and development. These five planning principles will provide a framework for healthcare leaders as they steer their organizations forward.
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ABOUT HAMMES

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