



Renovations and Renewals at UPMC Western Psychiatric Hospital

A part of UPMC Presbyterian Shadyside



Psychiatric care at UPMC Presbyterian Shadyside has been the province of UPMC Western Psychiatric Hospital, formerly known as Western Psychiatric Institute and Clinic, since it first opened its doors in 1942.

In the more than 70 years since its founding, UPMC Western Psychiatric Hospital has become a leading center for the care and research of the entire spectrum of behavioral health disorders as a part of UPMC Presbyterian Shadyside, which is consistently named to the *U.S. News & World Report* Honor Roll of America's Best Hospitals.



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The facilities at UPMC Western Psychiatric Hospital, long a part of UPMC Presbyterian Shadyside and its ongoing legacy of exceptional patient care, technological innovation, and research excellence, have seen some dramatic changes and renovations over the last several years, all of which have been designed to improve the patient care experience, either by enhancing and upgrading existing units, or by designing and building new facilities and programs to meet the ongoing needs of an ever-evolving patient population. The needs of staff and visitors also have been addressed with new accommodations designed to enhance the workplace and to provide more opportunities for visitors and families to interact with their family members receiving treatment at the hospital.

The investments being made into the facility have and will continue to help ensure that UPMC Western Psychiatric continues its decades-long commitment to patient care and research that dates back to its founding in the early part of the 20th century.

“Countless patients, staff, trainees, and faculty have come through our facility and department since UPMC Western Psychiatric opened its doors in 1942. I’m confident that if these individuals were to experience the changes now occurring, and those that have already been completed, they would agree that we are traveling the correct path to continually improve the quality of patient care,” says David Lewis, MD, chairman of the Department of Psychiatry, and medical director and director of research at UPMC Western Psychiatric.



MERCK Specialty Unit Changes

The MERCK inpatient unit provides specialized care for adults and children who have developmental disorders and intellectual disabilities coupled with comorbid psychiatric disorders. The children's component is one of only a few in the country specifically designed for this patient population.

Recent changes have seen a division of the unit into three separate pods: for children 12 and under, adolescents 13 to 19 years of age, and adults. In aggregate, the facility is able to treat 28 patients at any given time across all three pods.

"We renovated the entire unit several years ago to upgrade the infrastructure and to make the unit more aesthetically pleasing for the patients. This renovation also allowed us to separate the unit into three age-specific pods, which allowed for enhanced milieu programming for each population," says Camellia Herisko, DNP, MSN, RN, PMHCNS-BC, CRNP, chief nursing officer and vice president of Operations and Patient Care Services, who is overseeing the renovation projects.



Diagnostic Evaluation Center (DEC) — Major Renovations In Progress

The Diagnostic Evaluation Center functions as the emergency department for UPMC Western Psychiatric. This large-scale renovation and expansion project is set to be completed sometime in the spring of 2019. Increasing in size by three-fold, the updated DEC will now be divided into specific areas for children, adult patients, and acute adult patients, each with its own waiting area.

In addition, within the child and adolescent area accommodations are being made to separate the younger children from the adolescent population. The waiting area for acute adult patients is for those individuals who may be presenting with severe symptoms. The third waiting area will be dedicated to the adult patients.

"Separating our patient groups by age is something we've wanted for a while now but have not been able to do because of the existing space. It just makes sense given how broad an age range our patient population covers. We've also placed the staff station in the middle of the waiting areas to

increase staff visibility and to provide more staff availability to those who are waiting to be evaluated. This feature also enhances safety for both staff and our visitors while in the DEC," says Ms. Herisko.

There are other enhancements being made to the waiting areas. The child and adolescent area will be outfitted with appropriate finishes for the age group and will include a colorful environment, computer kiosks, and activities. The adult area will have a significantly increased amount of natural light and a calming atmosphere.

"We also are installing kiosks for parents and visitors who may need to use a computer while they are waiting with their child or loved one," says Ms. Herisko.

Improving patient flow also was a priority taken into consideration with the redesign. The new workflow was designed so that patients who are just being admitted to the DEC for their initial assessment do not cross paths for any extended time (if at all) with patients who have been evaluated and are being admitted or discharged.

"Included in the new plans is a treatment room for each waiting area where patients can receive a physical examination if needed. These additional treatment rooms will allow patients to move through the evaluation process in less time. We believe that these changes to patient flow will assist in decreasing the length of stay in the emergency department," says Ms. Herisko.

Individuals presenting to the DEC will continue to enter the hospital through the existing DeSoto Street entrance on the first floor of the building, and they will go through security in that area as is currently the case. After passing through the security area and obtaining a visitor pass, the individual will be guided to the DEC by security officers via elevator. Those individuals arriving at the hospital via ambulance or other emergency vehicle will be able to go directly to the fifth level of the hospital parking garage for direct entrance into the DEC at what will be its new location.

Redesigning the Child and Adolescent Floor

Approximately three years ago, the third floor of the hospital, which houses the child and adolescent unit, was completely renovated. Divided into two pods, the 15-bed adolescent pod and 11-bed children's pod were redesigned into a much more child-friendly environment. The unit was painted with colorful and entertaining themes. Classrooms were redesigned to resemble school classrooms so that children would be familiar and comfortable engaging and learning while receiving care in the hospital. Sensory rooms were included on each pod to assist individuals having difficulty by providing a space they can go to separate from the active milieu for short periods of time. In a sensory room, the individual can engage with a staff member in a calming environment with music and other activities. Finally, rounding rooms were added to each pod so physicians have private areas to meet and talk to patients and their families.



New Unit: Behavioral Health ICU

The new Behavioral Health ICU was completed in the early part of 2018. The new seven-bed unit — all of which are private rooms — was designed as a space to treat those highly acute patients who present with acute psychotic symptoms and who may be exhibiting aggressive or disruptive behaviors.

There is high visibility from the staff station and the unit milieu to each patient bedroom. Each patient bedroom can also function as a seclusion room. “Individuals needing the care of this unit are managed so that staff are able to use the least restrictive treatment and seclusion methodologies possible tailored to the individual needs of each patient,” says Dr. Lewis.

“One of our goals was to reduce the number of restrictive procedures that are used, such as locked seclusions or restraint, while still providing a safe environment for patients and staff. If a patient is acting aggressively or exhibiting other unsafe behaviors, the staff first attempt to have the patient go to their own bedroom before resorting to locking the door and then observing them through a window. In most other places, the seclusion room would be a separate room all together,” says Ms. Herisko.

Patients only remain on the Behavioral Health ICU until they can be stabilized enough to allow them to reenter the general population on another floor of the hospital. Typical stays on the unit are approximately seven to 10 days while staff and physicians treat and stabilize the patient as they work on their recovery.

Directly adjacent to the Behavioral Health ICU, and newly renovated as well, is the equivalent of a “step-down unit” of the General Adult Inpatient Unit. Once patients have stabilized on the ICU, they then are transferred to this unit, from which they are ultimately discharged.

In the Planning Phases: New Patient Area

Ms. Herisko indicates that there is potentially another current office space in the building that could serve specifically as a secure area for patients. This new patient area is in the very early stages of planning and would function as a safe environment where staff can take patients to engage in programming and activities that may be difficult or impractical to do on all of the inpatient units.

There is a small group of staff and physicians working to brainstorm ideas and options for how best to utilize such a space and what would be needed to really make it useful for everyone. “Unlike most hospitals, we expect our patients to leave their bedrooms and participate in therapeutic groups and activities,” says Ms. Herisko.

The new locked area would allow much more flexibility to offer other kinds of therapeutic interactions and would encourage patients to socialize. Plans are being discussed to include a theater, chapel/library, music room, art room, and recording studio.

Other ideas for expansion and renovation include potentially renovating the current staff cafeteria to be a patient-specific cafeteria where individuals could have some of their meals off the inpatient unit. An environmentally safe cafeteria would allow many patients to leave the units, broadening their daily activities all while assisting them in successfully accomplishing normal activities as they prepare for discharge.

“We hope to include a full-service cafeteria and market where staff can eat and find healthful food options 24/7.

In addition to this patient area, there is currently a patient gym on the eighth floor that will be renovated in the immediate future. The goal is to expand the space and add a room with exercise equipment. There will be specific times for staff to utilize the area, as well as patients, as a way to promote wellness.



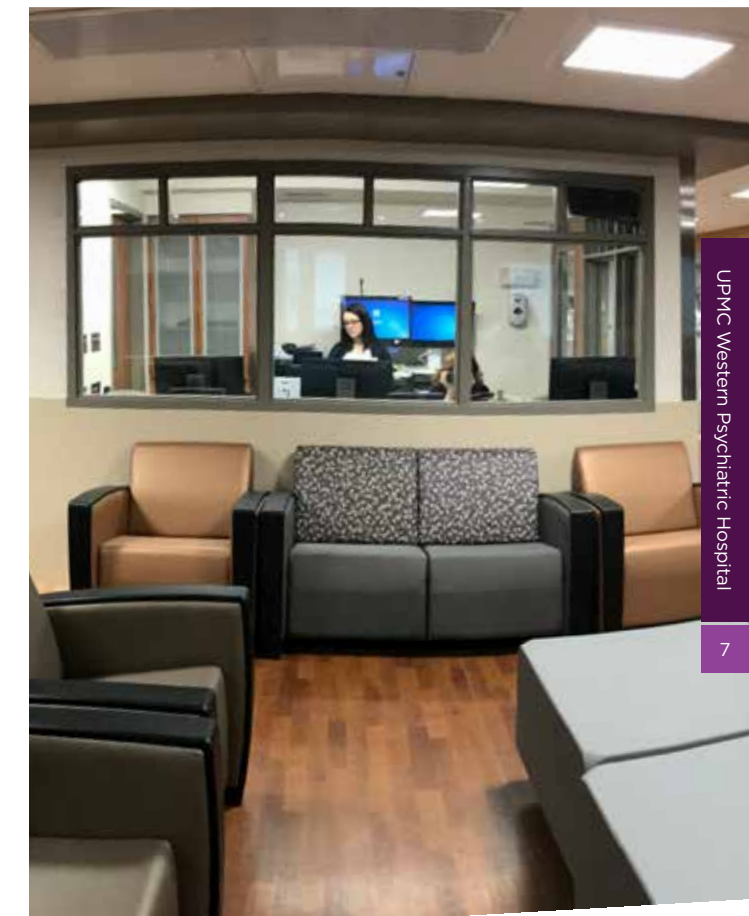
Administrative Offices — Changes and Improvements

The second floor of UPMC Western Psychiatric houses much of the administrative staff and the office of the chairman. Extensive infrastructure improvements were made to the electrical, computer, HVAC, and other utilities to provide for new functional areas and modern technologies. The auditorium was given a complete facelift, with new seating, lighting, and AV systems to improve its functionality. A pre-function room was built directly adjacent to the auditorium to serve multiple purposes — a networking and group conversation area, meeting room, and other uses.

Classrooms on the second floor were overhauled to be more aesthetically pleasing, with comfortable

seating and modern AV technologies that make for a more functional environment for residents and fellows. The old computer lab was moved and expanded to better support the with adoption of the new electronic medical record now in place. “It was important to have a place where we could do adequate training with staff and physicians as they learn new computer systems,” says Ms. Herisko.

The fourth floor patio area was redesigned with a garden area and waterfall feature. This area, which is used by both patients and staff, is the only outdoor space currently available to patients during their stay at the hospital.



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About UPMC Western Psychiatric Hospital

Integrating Clinical and Technological Innovation, Research, and Education

UPMC and its academic partner, the Department of Psychiatry of the University of Pittsburgh School of Medicine, constitute one of the leading centers for research and treatment of individuals who have challenging or particularly difficult mental health conditions and/or addictive disorders.

For more than 60 years, the integration of research, academia, and clinical services has infused best-practice research into clinical settings for the individuals who need it most.

We serve individuals across the lifespan, from young children to aging adults. Through our inpatient and outpatient continuum of care, we provide services for more than 400,000 patient contacts each year.

The Department of Psychiatry is a leading recipient of research funding from the National Institutes of Health (NIH), including research grants from multiple NIH institutes such as the National Institute of Mental Health, the National Institute on Aging, and the National Institute on Drug Abuse.

Address correspondence to:
UPMC Western Psychiatric Hospital
3811 O'Hara St.
Pittsburgh, PA 15213
1-877-624-4100

David A. Lewis, MD
Medical Director and Director of Research, UPMC Western Psychiatric Hospital
Distinguished Professor of Psychiatry and Neuroscience, and Thomas Detre Professor of Academic Psychiatry
Chairman, Department of Psychiatry, University of Pittsburgh School of Medicine



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UPMC | **WESTERN PSYCHIATRIC HOSPITAL**

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