



NYU Langone Kimmel Pavilion: Integration of Infection Prevention & Design

Bryan Langlands NBBJ & Chris Prochner JB&B

October 7, 2019
11:00am-12:00pm



Disclaimer

Credit(s) earned on completion of this course will be reported to **AIA CES** for AIA members. Certificates of Completion for both AIA members and non-AIA members are available upon request.

This course is registered with **AIA CES** for continuing professional education. As such, it does not include content that may be deemed or construed to be an approval or endorsement by the AIA of any material of construction or any method or manner of handling, using, distributing, or dealing in any material or product.

The views and interpretations expressed in this presentation are the opinions of the speaker and may not be the official position of **AIA, NYU, JB&B, LERA, or NBBJ**.

Questions related to specific materials, methods, and services will be addressed at the conclusion of this presentation.

Course Description

A general overview of integration of infection prevention as a primary driver in the design process which guided decision making, and shaped the planning, programming and design of the recently opened 830,000 GSF NYU Langone Health Kimmel Pavilion. A general overview of the integrated design and infection prevention approach taken. Technical engineering overview of the project.

Learning Objectives

1. Understand how NYU Langone Health established infection prevention as a priority in the design of its new building
2. Broad understanding of a systems approach taken in the design of a new inpatient and surgical tower with infection prevention being a primary focus.
3. Overview of the planning, adjacencies, circulation and flows within the building.
4. Overview of the technical MEP systems deployed to establish a new base minimum for infection prevention within the new facility



Chris Prochner, PE, LEED

Jaros Baum & Bolles
Partner



Bryan Langlands, AIA, FACHA, EDAC, LEED GA

NBBJ
Principal



Michael Phillips, MD

NYU Langone Health
Chief Epidemiologist, Assoc Prof, Dept of Med

Helen L. and Martin S. Kimmel Pavilion

830,000-sf clinical facility on 34th Street and First Avenue

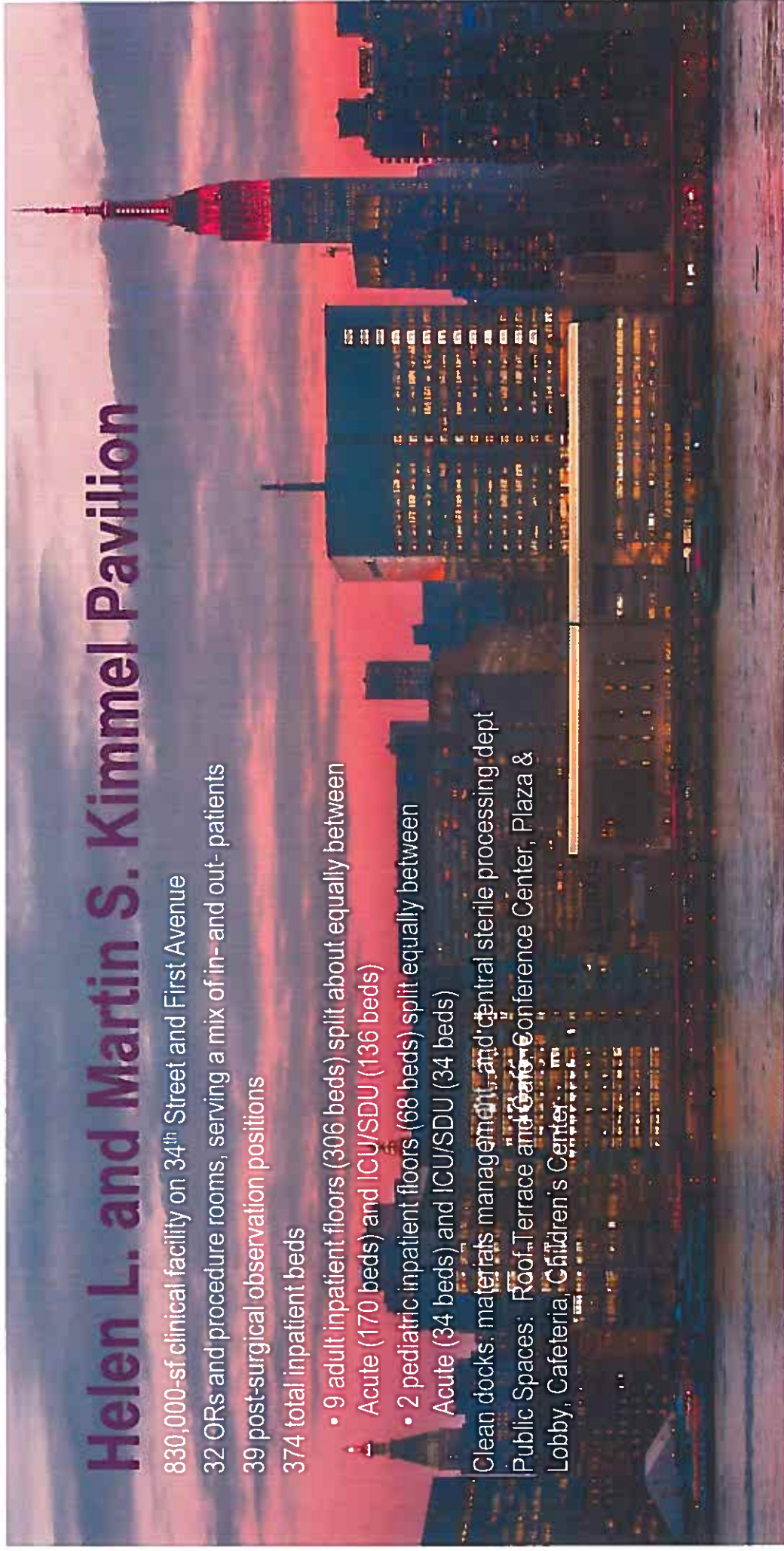
32 ORs and procedure rooms, serving a mix of in- and out- patients

39 post-surgical observation positions

374 total inpatient beds

- 9 adult inpatient floors (306 beds) split about equally between Acute (170 beds) and ICU/SDU (136 beds)
- 2 pediatric inpatient floors (68 beds) split equally between Acute (34 beds) and ICU/SDU (34 beds)

Clean docks, materials management, and central sterile processing dept
Public Spaces: Roof Terrace and Conference Center, Plaza & Lobby, Cafeteria, Children's Center



NYU Langone Health

Recognition & Honors



#3

Best
Medical School
for Research



#15

Best Hospital and
Nationally Ranked
in 12 Adult Specialties

5

Investigators for the
Howard Hughes Medical
Institute (HHMI)

10

Members of the
National Academy
of Sciences

11

Members of the Health and Medicine
Division of the National Academies
of Sciences, Engineering, and Medicine

18

Fellows of the American
Association for the
Advancement of Science

11

Members of the
American Academy
of Arts & Sciences

Represents September 2017–August 2018

Mission 2008: A World-Class Patient-Centered Integrated AMC

World-Class:

- Excellence across all missions (patient care, education, research)
- Destination medical center
- Ranked top 10 in strategic areas



Integrated:

- Promoting synergies between the three missions
- Fostering translational research (bench to bedside)
- Embedding students within the clinical and research environments

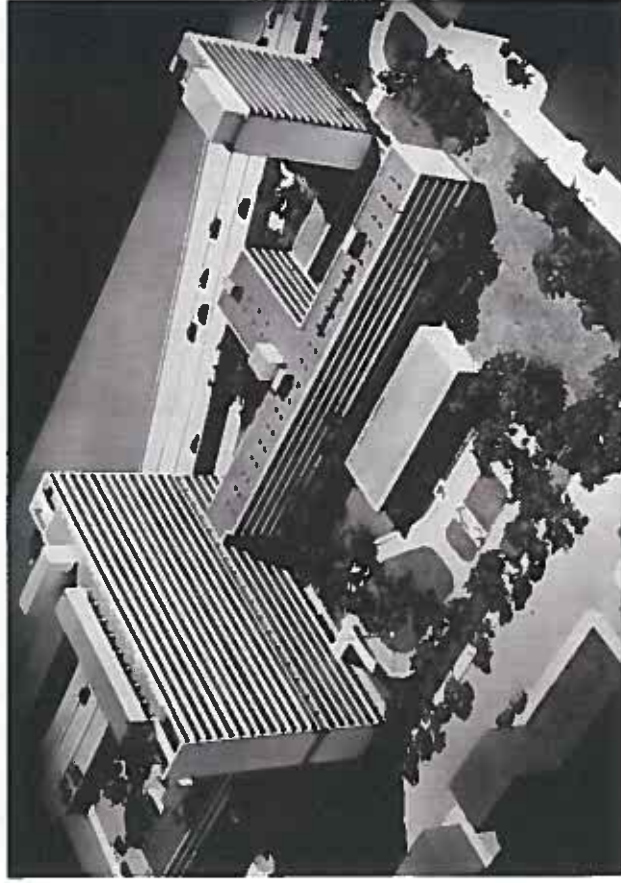


Patient-Centered:

- Prioritizing the patient and family experience
- Focus on constantly improved patient outcomes**

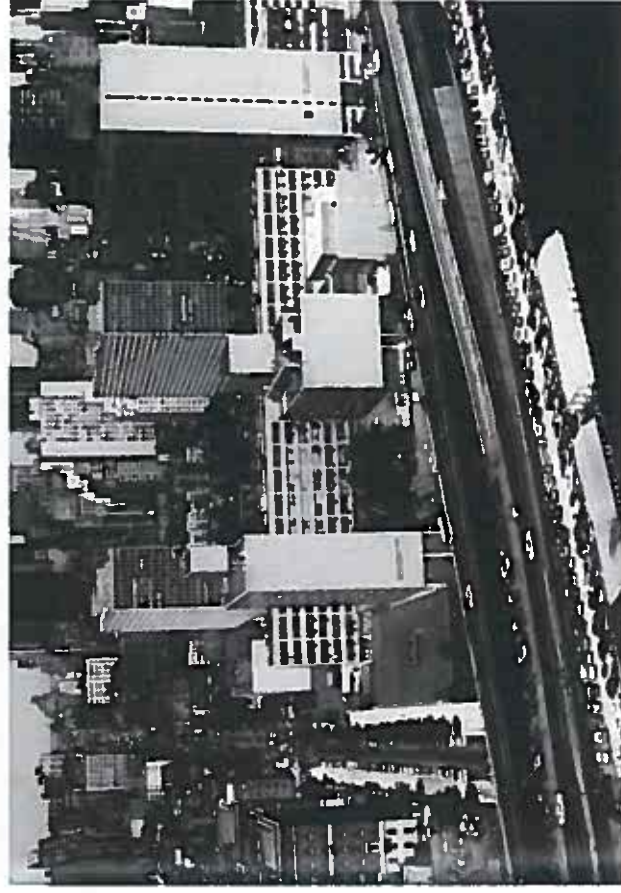


Campus Growth: Original Vision 1949 to 1977



1949 SOM Masterplan

940,000 gsf



1977

1,260,000 gsf



Campus Growth: 2010 to 2019



2010

2,460,000 gsf



2019

3,840,000 gsf

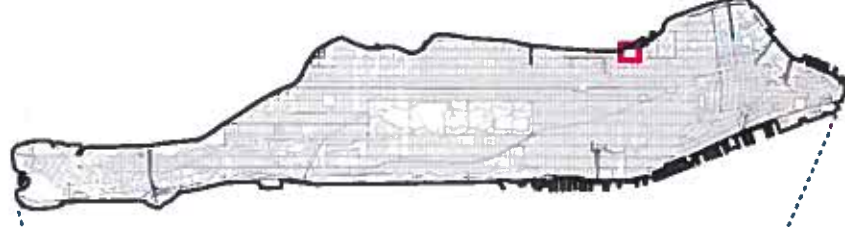




Kimmel Pavilion: Site Context

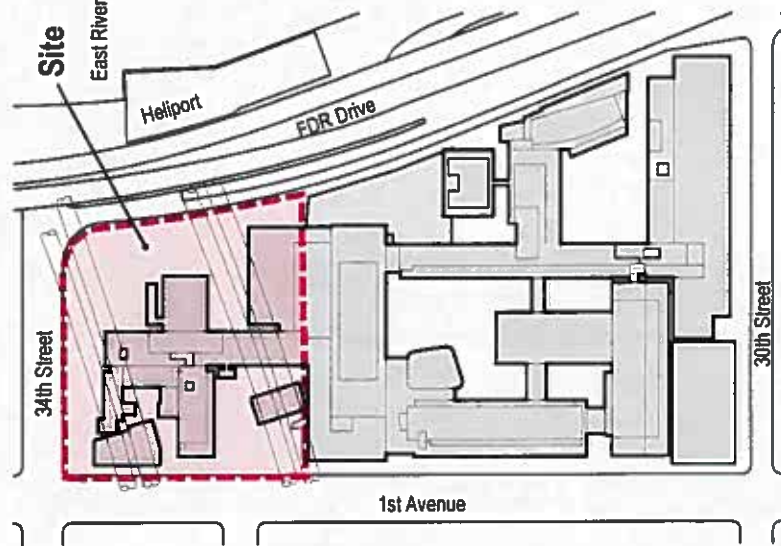


New York City Area



Manhattan

Kimmel Pavilion: Site Challenges

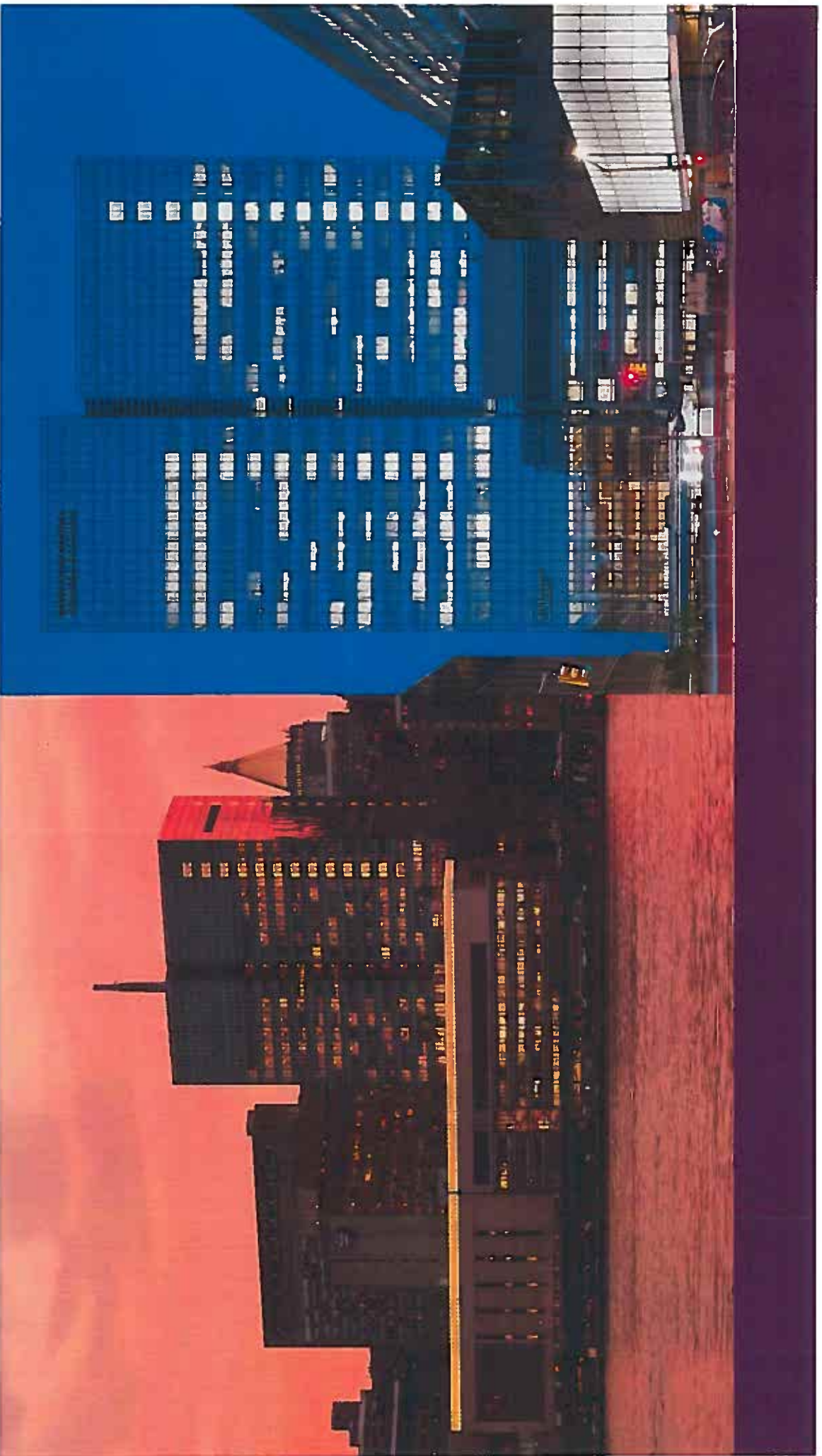


Superblock



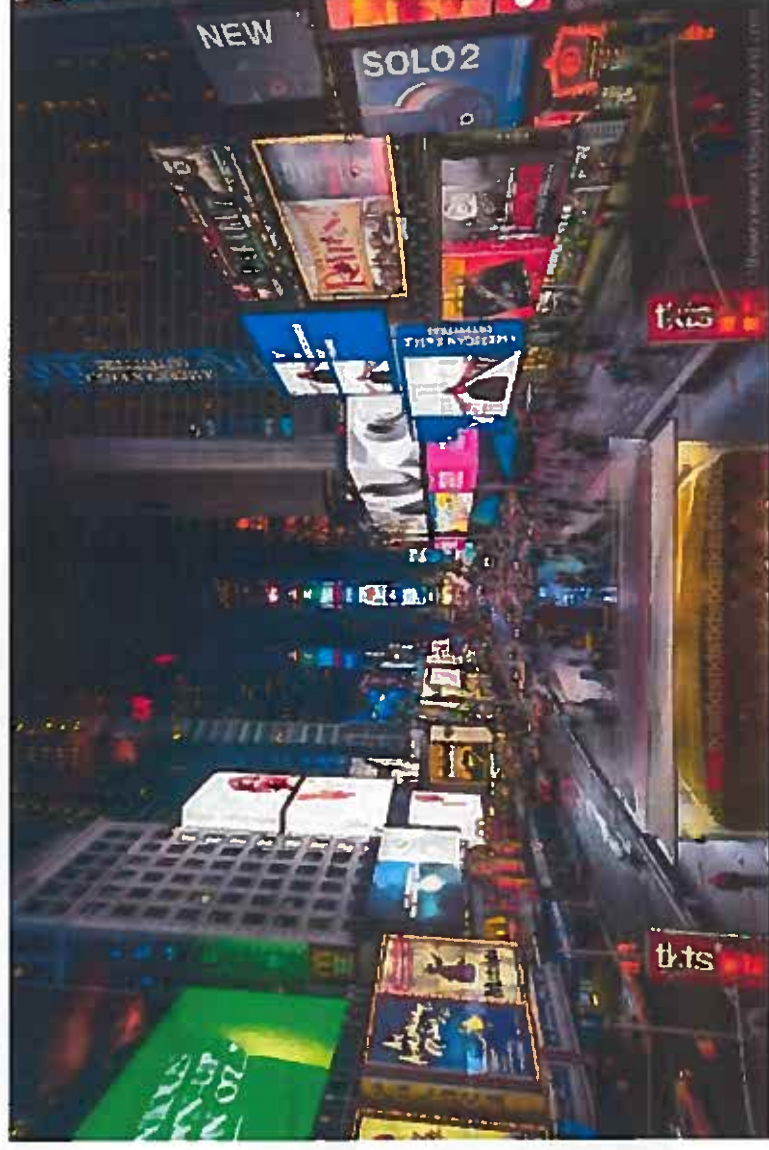
Site



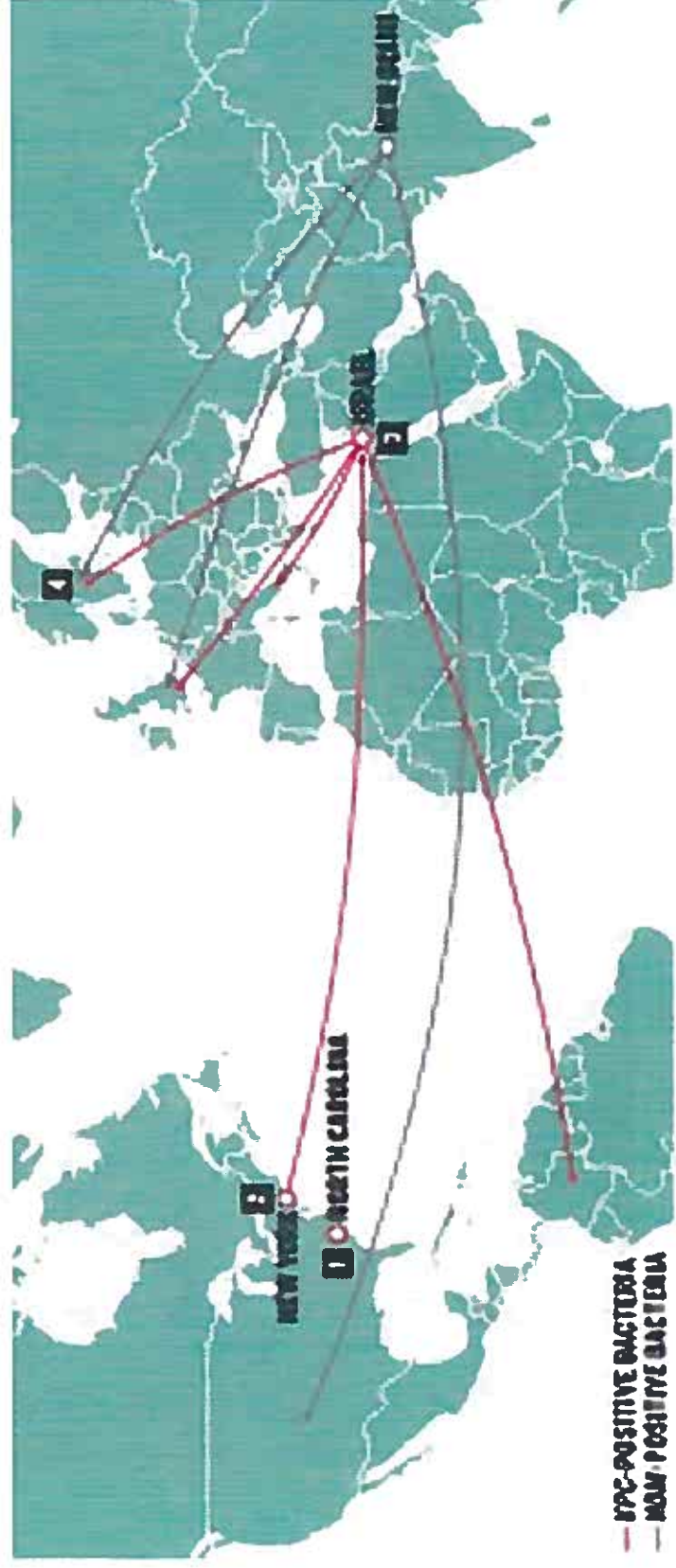


Infection Prevention & Design

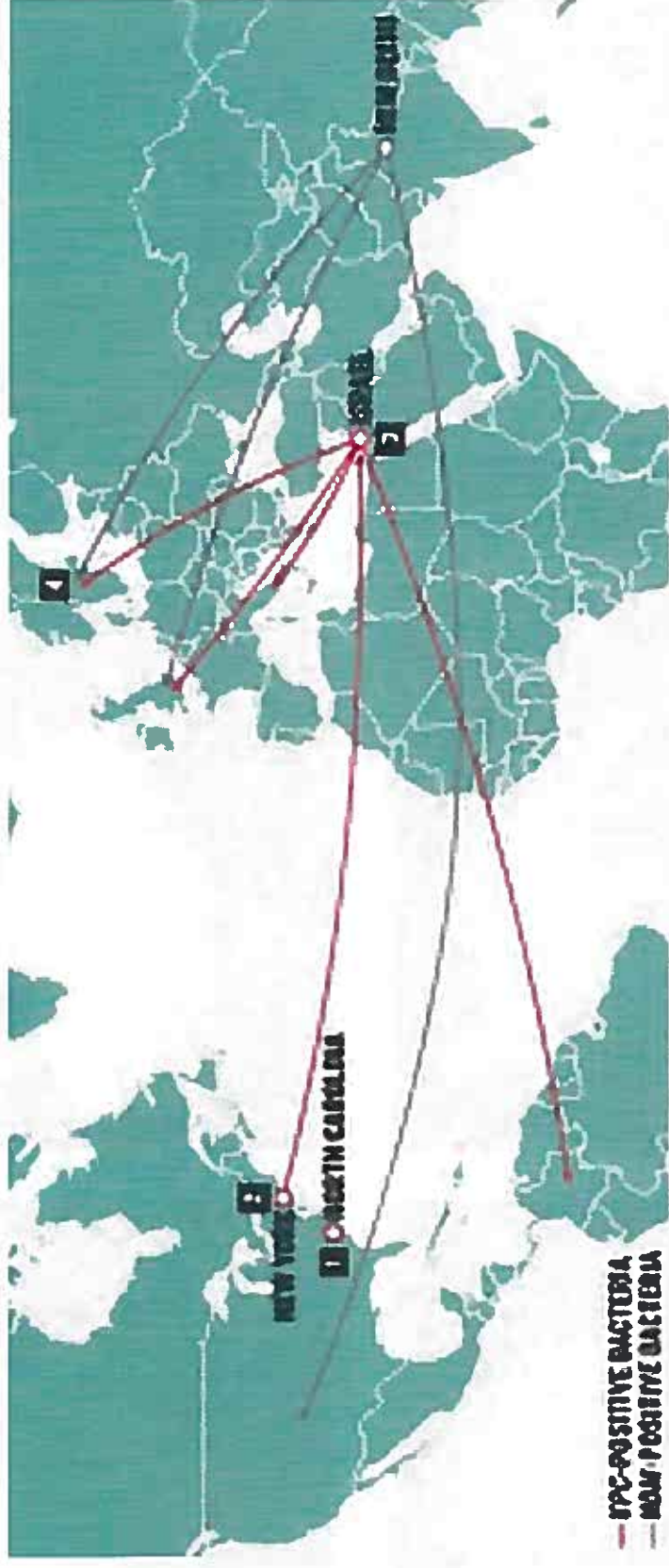
Welcome to New York City! *Take 1*



Welcome to New York City! Take 2



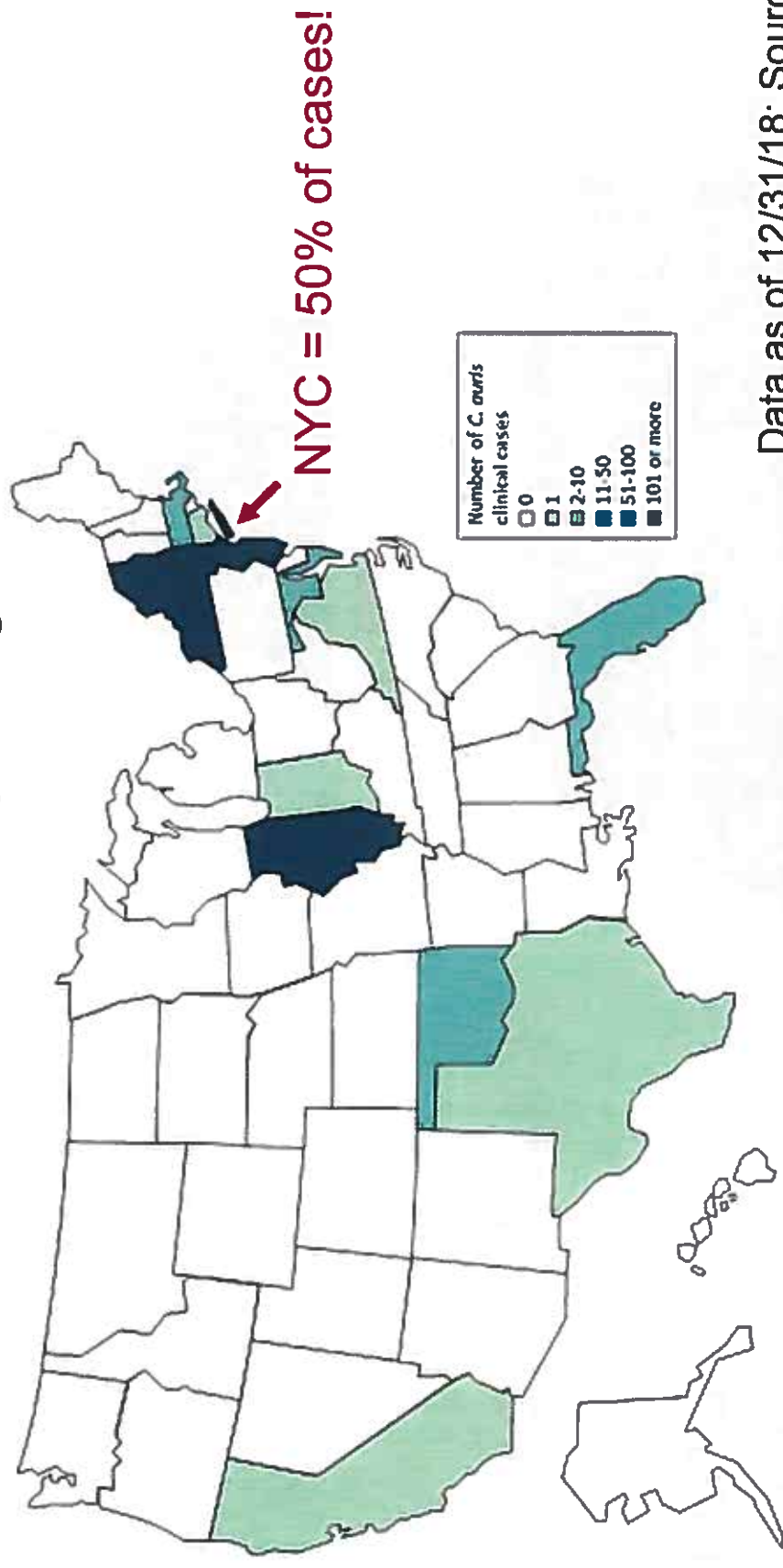
Movement of Carbapenem-resistant *Enterobacteriaceae*



Nature, July 2013



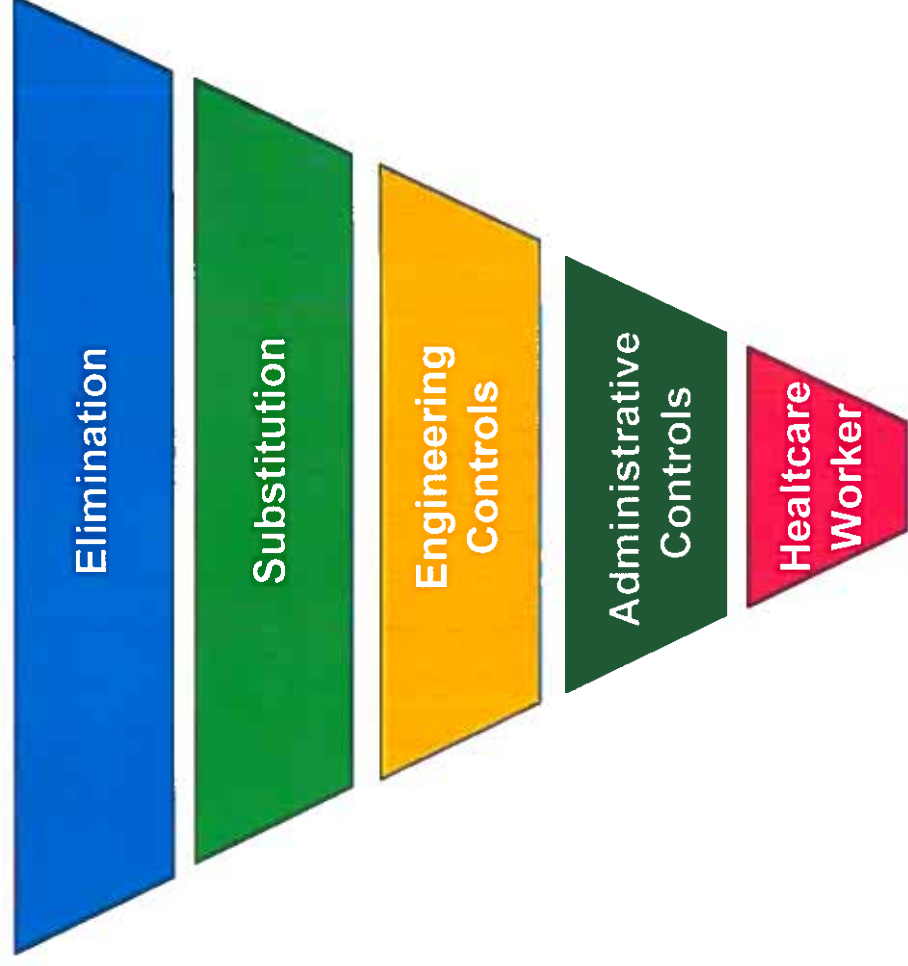
Candida auris – the next “superbug”



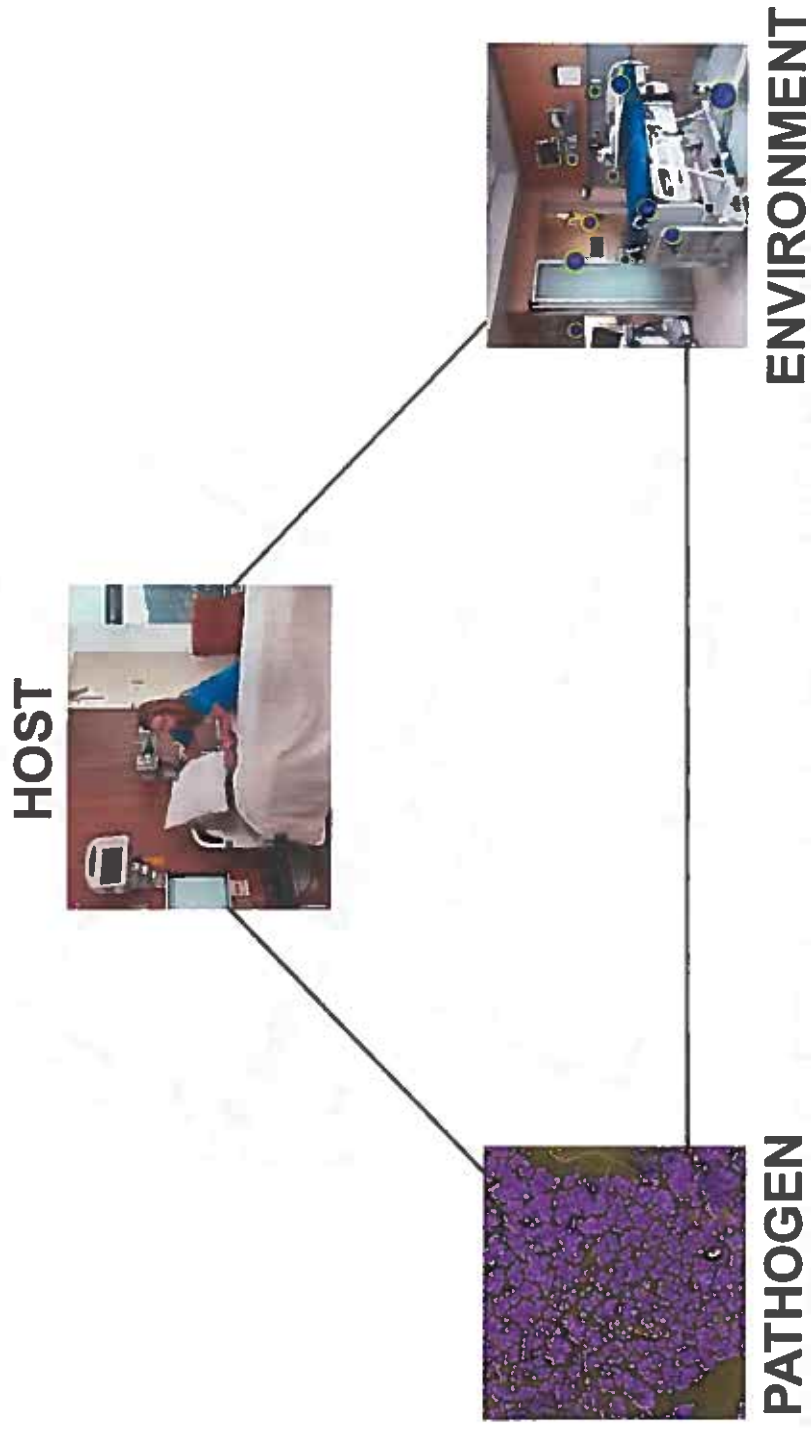
Data as of 12/31/18; Source: CDC

Prevent Pathogen Transmission:

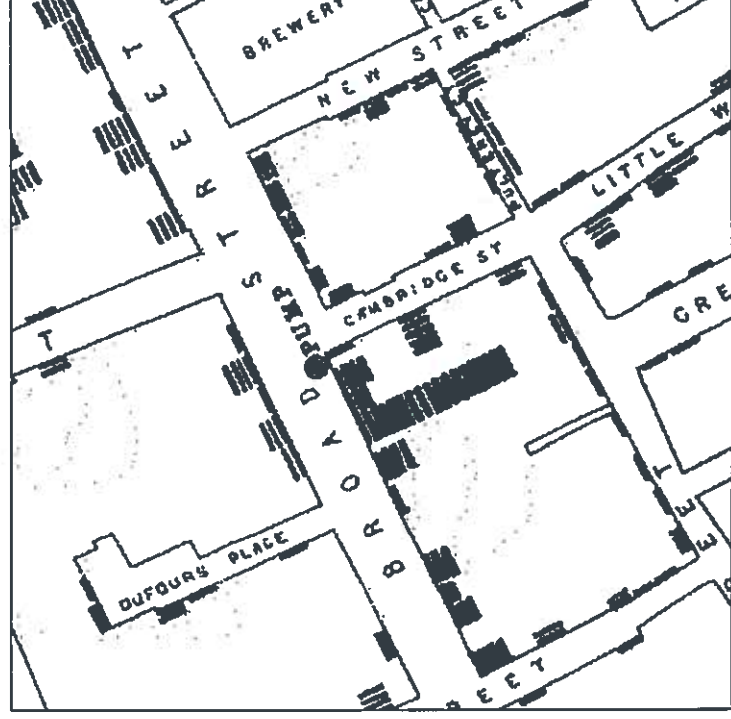
Hierarchy of Controls



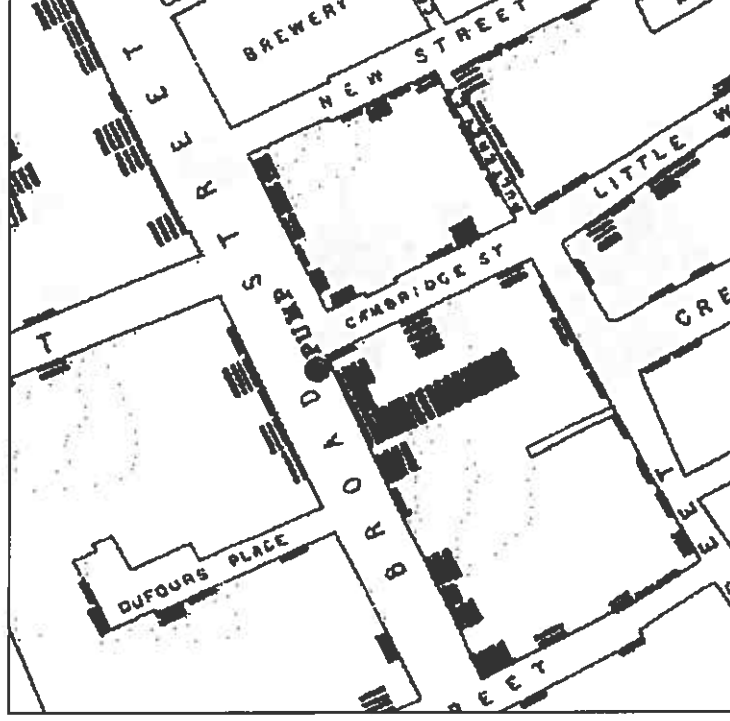
Epidemiologic triangle



John Snow and the London 1854 Cholera Outbreak



John Snow and the London 1854 Cholera Outbreak



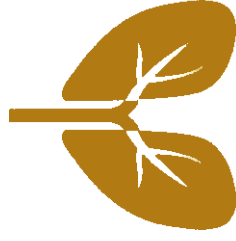
Pathogen transmission



Contact



Water



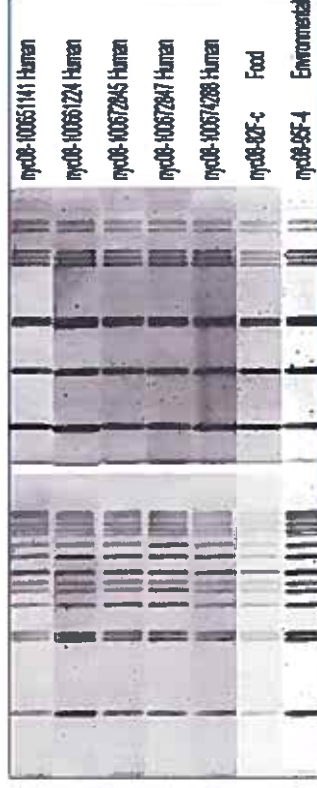
Air



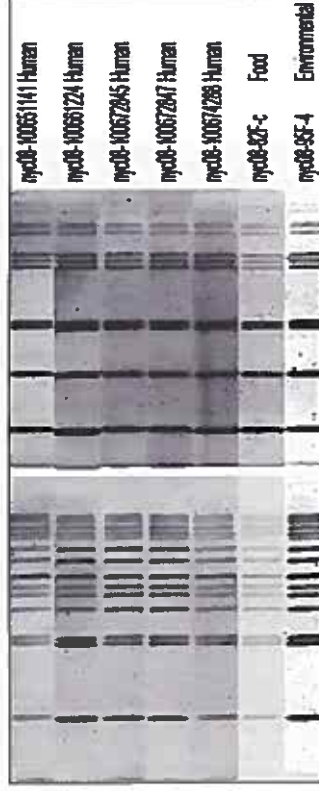
	Contact	Water	Air
Methicillin-resistant Staph aureus "MRSA"			
Enterococcus			
Klebsiella, Enterobacter, E. coli			
Serratia			
Acinetobacter			
Pseudomonas			
Listeria			
Clostridium difficile			
Legionella			
Aspergillus			
Respiratory virus			
Mycobacteria, including M. tuberculosis			
Measles			



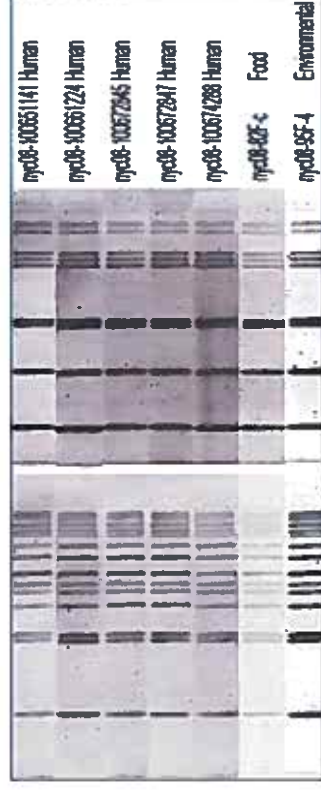
History repeats itself....



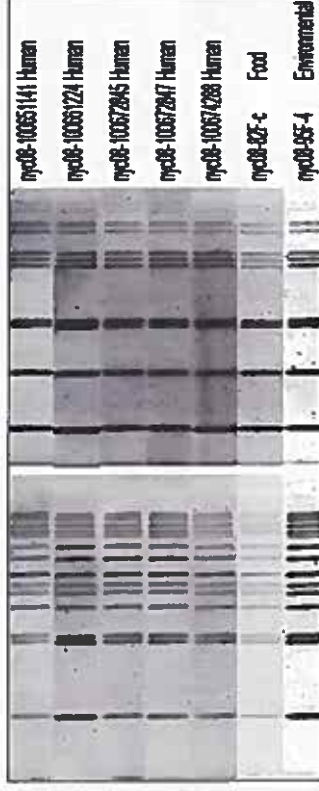
History repeats itself....



History repeats itself....



History repeats itself....



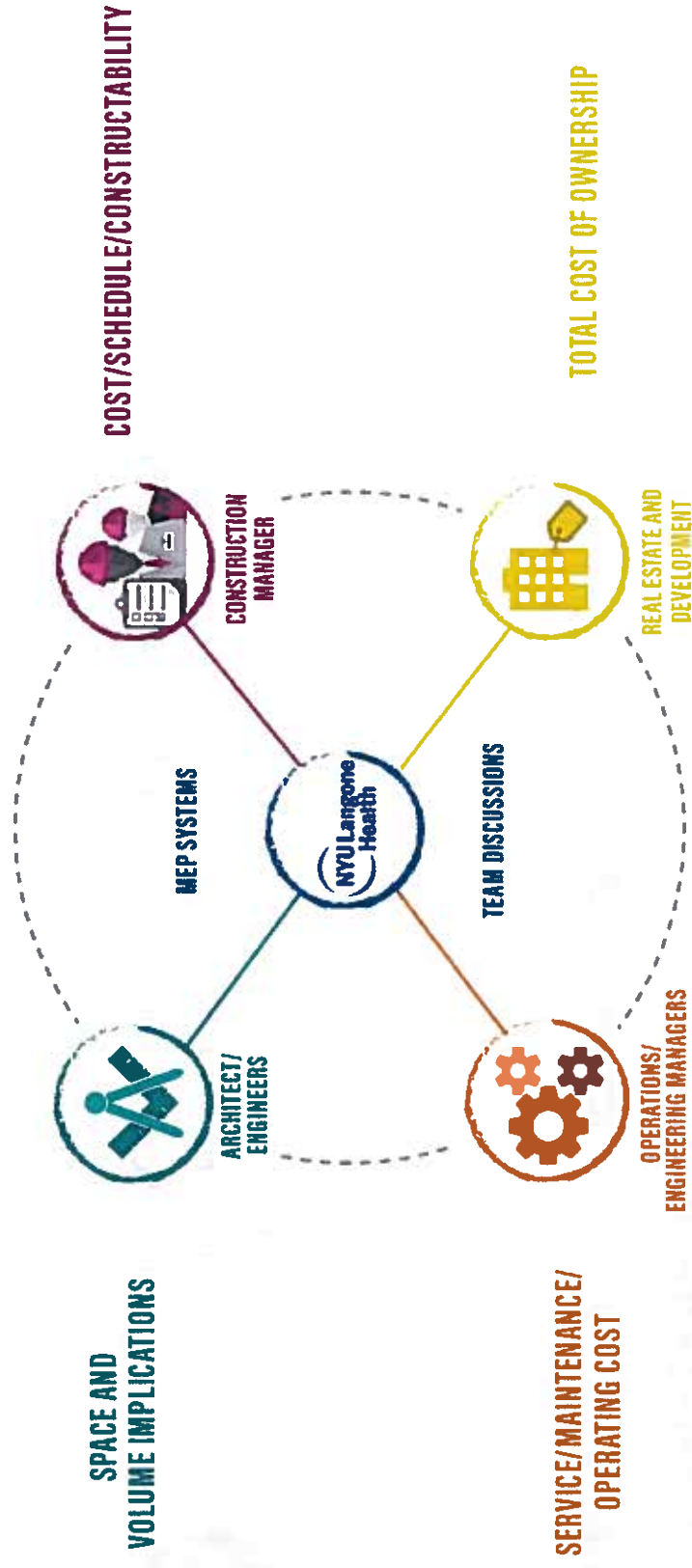
Infection Prevention & Design

Infrastructure

Mechanical, Electrical & Plumbing

Team Collaboration

Campus Transformation Infrastructure (CTI)



Team Collaboration

Owner/Real Estate and Development Team

REAL ESTATE AND DEVELOPMENT

- Understand intended use of facility in normal and emergency conditions
- Understand MEP systems first cost and total cost of ownership
- Emergency preparedness/redundancy and resiliency

CLINICAL USER GROUPS

- Define clinical MEP needs
- Understand future flexibility needs
- Communication of special requirements with MEP design consultants

ENGINEERING MANAGERS

- Mechanical/electrical systems selections
- Scalable/flexible/maintainable
- Energy efficiency

Team Collaboration

Design Team



- Program adjacencies, circulation and flow
- Early identification of fire-rated partitions/life safety plan, MEP systems massing and coordination
- Early device coordination and diffuser/grille coordination in clinical spaces



- IT program requirements and intended functionality
- Right-sizing IDF closets for present applications and future needs
- Early coordination of device locations and quantity of cables per room



- Medical equipment program requirements
- Early identification of mechanical and electrical utility requirements
- Placeholders for equipment not selected



Team Collaboration

Construction and Operations Team



- Early involvement in Design Phase
- MEP equipment is serviceable and maintainable
- Minimize downtime



- Early involvement in Design Phase for constructability and logistics input
- Design team involvement in equipment and contractor bid leveling
- Heightened communication with design team during CA Phase



- Design team participation in developing Cx plan and schedule
- Progress milestones during construction
- Burn-in period prior to move-in



How Do Infections Occur?

Source: Places where germs live

- Sinks, surfaces, human skin

Susceptible person

- With a way to enter the body

Transmission: A way germs are moved to the susceptible person

- Contact, water, air



**U.S. Department of
Health and Human Services
Centers for Disease
Control and Prevention**



Infection Control: Design Criteria

Air Quality (filtration, air change rates)

- Focus on Central Air Handling Systems

Containment (pressurization, isolating “dirty” item)

- Focus on Distribution Systems

Water Quality (filtration, disinfection, distribution)

- Focus on Legionella control

Resiliency (maintenance, emergency power)

- Redundancy, Serviceability, Maintainability

External Factors

- Pollutants, particles and fumes



Urban Campus: Design Considerations

Vehicular traffic

- Buses, cars, trucks

Heliport/Ferry

- Exhaust fumes

Vibration

- Amtrak train tunnels

Ambient Acoustics

- Buses, cars, trucks, helicopters

Flood Zone

- Elevate Infrastructure

Adjacencies

- Residential, research

Vertical Considerations

- Elevators, stack effect



MEP System Design for Infection Control

Air Filtration

MERV 8

- 30 - 35% efficiency for particles 3.0 - 10 microns range
- Mold, spores, cement dust

MERV 15

- 90 - 95% efficiency for particles 0.3 - 1.0 microns range
- Bacteria, most tobacco smoke, droplet nuclei, most smoke, paint pigments

HEPA

- MERV 17 99.97% efficiency for particles 0.3 microns and larger
- Virus, carbon dust, sea salt, combustion smoke

Gas-Phase Filtration

- Chemisorption process to render pollutants harmless by converting them to safe compounds
- Dry chemical adsorbents (activated carbon, sodium and potassium permanganate)
- Effective on helpad odors, automobile odors, VOC's

Ultraviolet Germicidal Irradiation (UVGI)

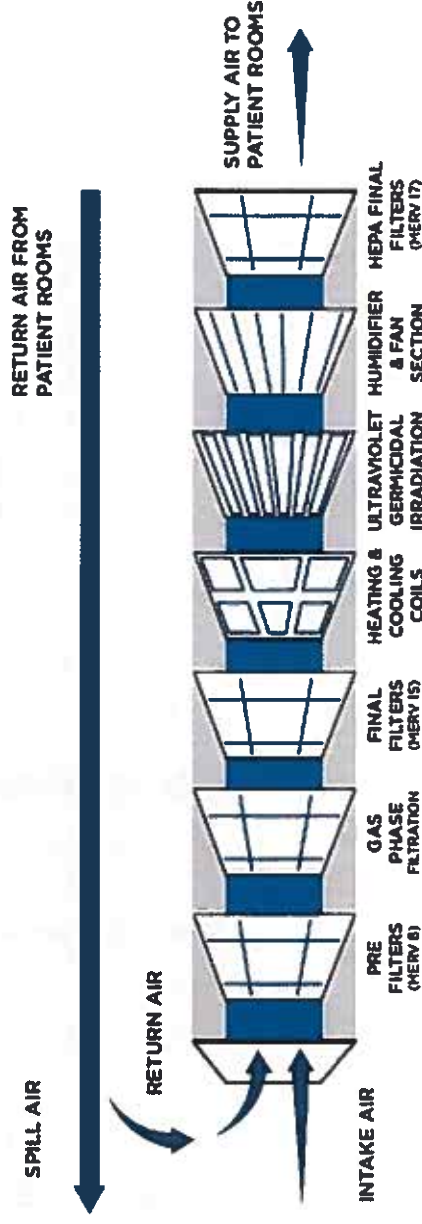
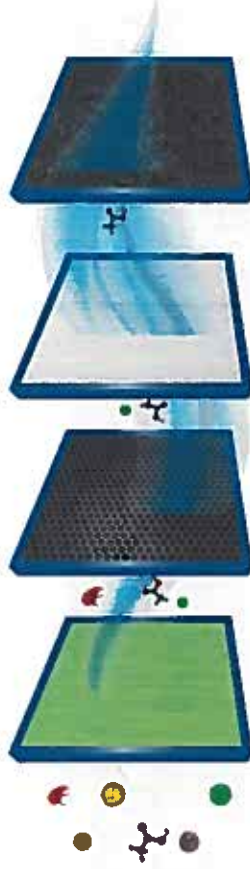
- Low-pressure mercury vapor lamps to generate UV-C wavelengths
- Effective in killing tuberculosis and influenza

MEP System Design for Infection Control

Air Quality

Air Handling System Attributes

- Mixed-Air System (capable of 100% outside air)
- Enhanced air filtration



	FGI	Design
Pre-Filters	MERV 7	MERV 8
Gas Phase	NR	Carbon
Final Filters	NR	MERV 15
UVGI	NR	Yes
Stage 2 Filters	MERV 14	HEPA

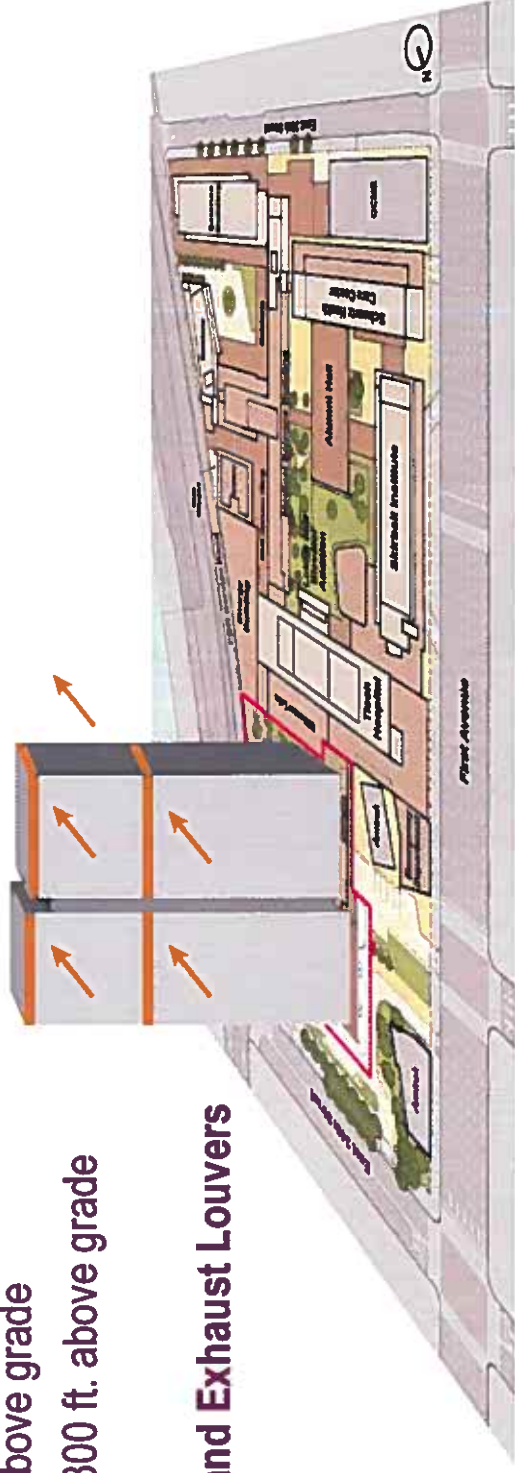
MEP System Design for Infection Control

Air Handling Systems

Location of AHU's

- 6th Floor – 90 ft. above grade
- 19th/20th Floor – 300 ft. above grade

Separation of Intake and Exhaust Louvers

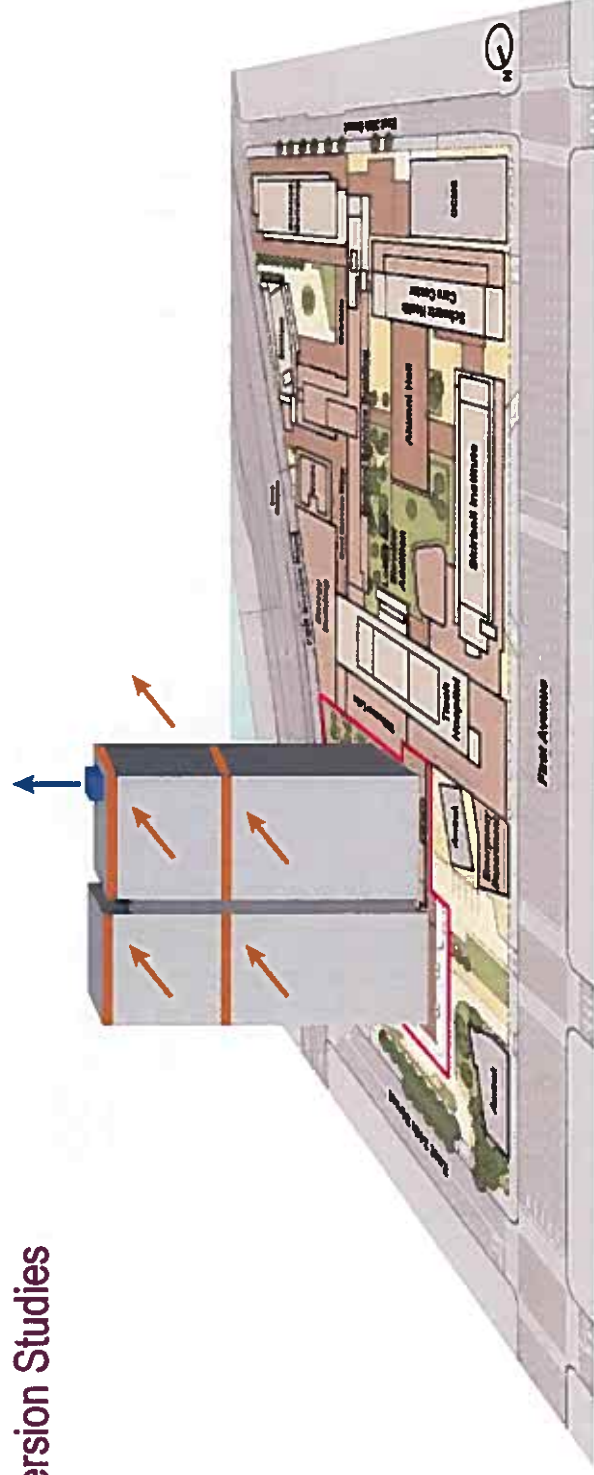


MEP System Design for Infection Control

Air Entrainment

CFD Modeling/Air Dispersion Studies

Generator Exhaust

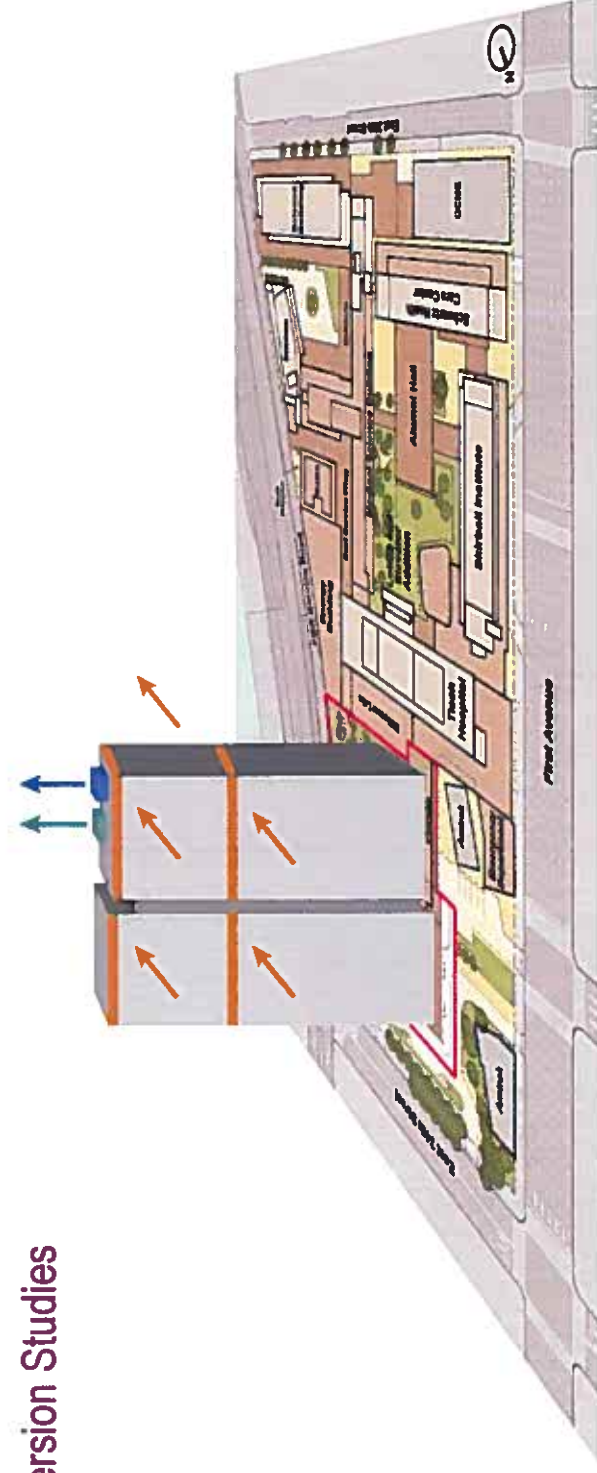


Air Entrainment

CFD Modeling/Air Dispersion Studies

Generator Exhaust

Cooling Towers



MEP System Design for Infection Control

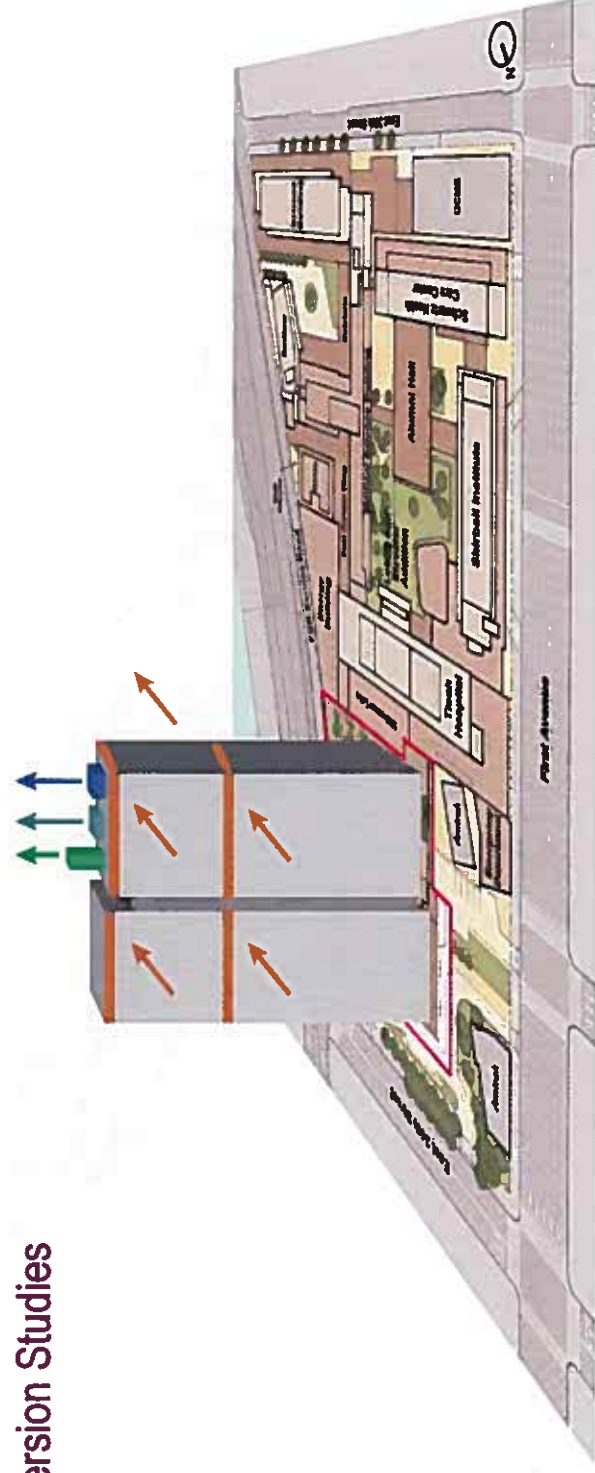
Air Entrainment

CFD Modeling/Air Dispersion Studies

Generator Exhaust

Cooling Towers

Cogen Stack



MEP System Design for Infection Control

Air Entrainment

CFD Modeling/Air Dispersion Studies

Generator Exhaust

Cooling Towers

Cogen Stack

All Exhaust Fans

