







Main Hospital and Pillsbury & Memorial Medical Office Buildings

Planning & Wayfinding Analysis Signage Presentation

Presented by Lori Elwell for Sign System Solutions

How is your signage working now?

- o Room and Wayfinding signage is disjointed with various generations of styles and color combinations.
- Sign design does not incorporate symbols; Text and arrows vary in style and placement.
- O Wayfinding clues are on some signs while not on others. What floor am I on?
- Reference to Suite #s is confusing to visitors trying to locate patient unit rooms.
- o Directory Maps contain ambiguous information and are difficult to read/understand.
- Ceiling / Wall Mounted signage is either overused, duplicated or installed in areas where departments no longer exist.
 Content is no longer relevant or up to date.
- Wall Mounted Directionals are limited to large or very small scale. Larger directional are unnecessary when the content is minimal. A directional that is too small becomes difficult to read from a distance and loses its functionality.
- Entering/Exiting East Wing Patient Units is problematic as visitors need to enter/exit through waiting areas. Current solution over signs waiting areas.
- Wayfinding to public restrooms is minimal or non-existent. This is an issue for visitors within a patient unit where the restrooms are for staff only.
- Visitor and Patient Entrances need more definition as visitors and patients are entering the incorrect entrances. This can be resolved with an exterior update; however, how can we address on the interior during a transition?



How can we help you?

- Refurbish existing signs where possible to keep cost down
 - Retrofit existing directional overheads with phototex overlays.
 - Retrofit large existing directories/directionals with new floor level ID's and consistent color. Update map, directory and directional inserts to a standard for all floor levels
- o Remove references to Suites #. Focus on providing direction to department or patient unit rather than an internal address.
- Design Use consistent copy and arrows. Add symbols.
- Include wayfinding to public restrooms on main directionals within unit space and in common areas. Add projecting mounted signs at restrooms for better visibility.
- o Include Floor Level on all directional headers in both primary corridors and within spaces.
- Develop 3-4 standard directional sizes to accommodate messages more effectively.
- Remove any directionals that are overused or no longer function.
- Relocate and/or add wall mounted or ceiling mounted directionals at major decision points (i.e Elevator areas).
- Expand directional cards to waiting areas and all entrances to help navigate patients/visitors through space. Add wayfinding cues to directionals to get people back to the entrance they arrived in. Rename the entrance?
- Develop a sign system that is uniform, allows for cost affective changeability and better install management and one that works well with the most recent updates.



What specific areas can we change to improve the overall patient / visitor / staff experience?

1. Suite Identification

- Dimensional Letters, Color
- Patient Unit Identification

2. Department Naming

3. Wayfinding

- Map/Directory/Directionals
- Ceiling Mount Directionals
- Wall Mount Directionals
- 4. Entrances
- 5. Symbols
- **6.** Elevator Areas
 - Elevator Directories
 - Elevator IDs & Design of Space
- 7. Room Signs



Does Suite Identification work in a hospital environment?

Wayfinding in a hospital environment can be difficult for a patient or visitor. They face unique challenges with multiple destinations to visit, unfamiliar terminology and the stress caused by illness. When a patient or visitor arrives to the hospital:

- They are looking for simples clue and information to navigate the space;
- They focus their attention on specific departments, patient units and destinations

The addition of suite #s makes it confusing as they:

- Add another layer of information a patient or visitor must remember
- Further complicate the wayfinding when used with patient units that have numbers within their name and patient rooms numbers;
- Take up valuable real estate that could be used for other wayfinding space. For example,

Suite 4000 4E
Patient Care Unit
Rooms 4016-4056

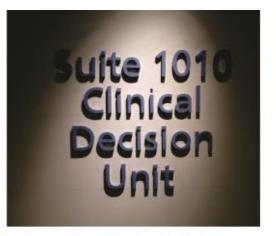
- 1. Are references to suites necessary in the Hospital?
- 2. Are guests being directed to Suites or are they being directed to Department or Both?
- 3. Does the staff or public have a need to reference suite when looking for a department?
- 4. Is referencing Suite #s necessary for public safety?



Dimensional Letters



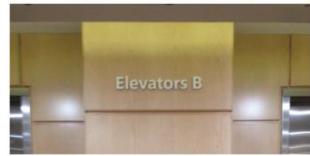




















Observation:

- Suite #s are confusing, lack consistency and installed in areas where departments no longer exist
- Letters vary in color, layout, thickness.
- Some are centered or left justified
- Not enough contrast between wall color and letters

Recommendation:

- Omit Suite #s at all locations to reduce amount of copy
- Utilize one color dimensional letter. On light surfaces use black and on dark surfaces use brushed aluminum
- Center letters in space where appropriate



Patient Unit Identification

Observation:

- Suite #s are confusing, lack consistency and installed in areas where departments no longer exist
- Letters vary in color, layout, thickness.
 Some are centered or left justified
- Placement of patient rooms versus suite is inconsistent. Some letters are on top, some on the bottom
- Not enough contrast between wall color and brushed alum. letters











6 East
Orthopaedics
Patient Rooms
6016-6056

Recommendation:

- Omit Suite #s at all locations
- Utilize one color dimensional letter. On light surfaces use black and on dark surfaces use brushed aluminum. In areas where brushed aluminum letters are preferred, consider painting wall darker color
- Center letters in space where appropriate
- Spell out complete unit name



Unit names need identified for consistency

Observation:

- Some patient units reference N-S-E-W in their names (3E PCU, 3S TCU, 5N, 4S, etc) while others do not (ICU, AMU).
- Some list the type of unit (Progressive Care Unit) while other do not

Recommendation:

- Define the nomenclature keeping the patient and visitor in mind
 - Name of Unit Floor (1-6),
 - Location (North, South, East, West),
 - Unit Name
 - Intensive Care Unit
 - Patient Care Unit
 - Med/Surg Unit
 - Psychiatric Unit
 - Orthopaedics
 - Progressive Care Unit
 - Telemetry Care Unit
 - Patient Rooms

Recommended Examples:

3 East Progressive Care Unit (PCU)
Patient Rooms 3016-3056

3E Progressive Care Unit (PCU)
Patient Rooms 3016-3056

3E PCU
Patient Rooms 3016-3056

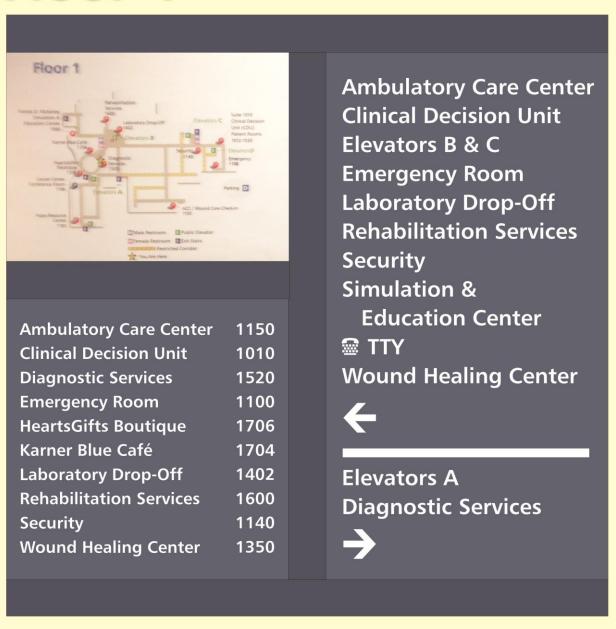
3E PCU Patient Unit Rooms 3016-3056

Progressive Care Unit Rooms 3016-3056



Map / Directory / Directionals

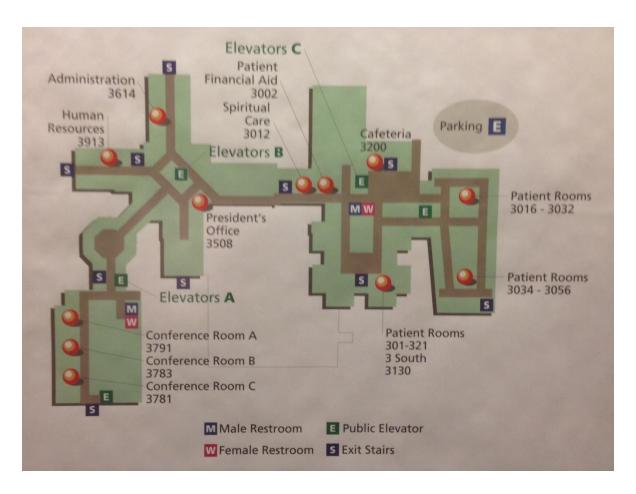
Floor 1



Observation:

- Maps /Keys are difficult to read
- Excessive copy, no symbols
- Paper insert is wrinkled
- Reference to suite numbers and arrows at the bottom of text is confusing

Detail of existing Map Section:



Map / Directory / Directionals continued...

Floor 1



Recommendation:

- Retrofit with new Floor ID and overlay
- Omit Suite #s
- Utilize right side for Key and /or Marketing opportunity
- Simplify design with consistent color scheme
- Move arrows to top, add symbols
- Utilize high quality photo paper for printed inserts

Detail of Map/Directory Section:





Ceiling Mount Directionals



Observation:

- Directionals lack proper wayfinding to key areas
- Some signs are improperly placed after the destination
- Important areas with multiple decision points and unique wayfinding constraints, do not have ceiling mounted signs where needed (i.e. Elevator B areas on 1st and 2nd floors)
- No use of symbols or color code to help separate destinations



Recommendation:

- Create visual interest by adding symbols/shapes. Utilize color palette that works with interior elements.
- Include directions to key areas and omit those not relevant.
- Add ceiling mounts in areas as a supplement to wall directionals where there are multiple decision points



Wayfinding

Ceiling Mount Directionals continued





Example
Elevator B Lobby 2nd floor





Wall Mount Directionals













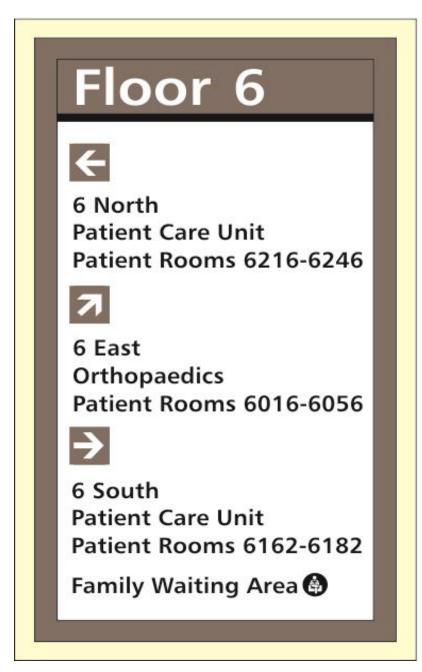


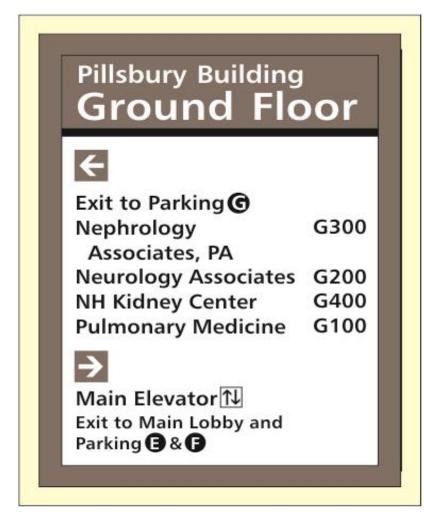
Observation:

- Various generations of design; No uniformity.
- Directionals lack proper wayfinding to key areas
- Floor level identity is inconsistent. Identified on some while not on others;
 Words are not the same (Floor 3 vs. 3rd Floor)
- Arrow placement varies and is confusing on the bottom
- No use of symbols
- o Paper signs are added when there is plenty of real estate on sign
- Larger directionals do not have enough copy to fill space and look empty.
- Smaller directionals cannot be seen at a distance. Copy/Arrows are too small



Wall Mount Directionals continued







Recommendation:

- Develop various sizes to fit content and space best
- Create contrast between content area and sign frame
- Add floor identifier, Elevator ID color box and symbols
- Include directions to key areas
- Move arrows at top of corresponding copy
- Keep overall design the same between facilities;
 Adjust insert design to fit specific location



Navigating your patients and visitors to the correct entrance from the onset helps to establish a foundation for a positive wayfinding experience.

Proper Entrance Identification will:

- Promote staff efficiency by minimizing the distance necessary to travel;
- o Ease the anxiety felt by the patient or visitor who may not know where to go or what to do when they arrive;
- Allow easy visual supervision of patients by limited staff

Observation:

- Wayfinding on the exterior signage is confusing. The nomenclature between "Visitor Entrance" and "Main Entrance" is not clearly understood by first time patients or visitors.
- o Once inside, the existing directionals do not provide floor level clues or directions back to primary entrances.
 - If a person came in the Visitor Entrance how do they know they are on Floor 3 or if they came into the Main Entrance, they are on Ground Floor?
 - How does the person navigate a the space between floor levels to arrive at the right entrance?



Recommendation:

- Name/Rename the Entrances as to their functions:
 - Visitor Entrance andPatient Entrance (Main Entrance)
 - Visitor Entrance and Main Entrance
 - Visitor Entrance and Patient Entrance
 - Visitor Entrance and Outpatient Entrance
- Translate these changes to both interior/exterior wayfinding;
- On interior, provide directions back to these entrances on directories and directionals where needed;
- Make sure all staff are using the same terminology when directing patients and visitors to entrances;
- Provide Wayfinding Card handouts at entrances.

Wayfinding Card Handout Example:

You are on the Ground Floor at the Patient Entrance (Main Entrance)

Access to
Cafeteria , Gift Shop

& Patient Rooms
via Elevator

Follow cooridor straight ahead, then take the Elevator B to Floor 3.

Cafeteria, Gift Shop and Elevator C are to your right, follow signs.

For Patient Rooms, take Elevator C to appropriate floor. If you do not know the patient room number, volunteer can assist at information desk in front of the Cafeteria.

Directional Example





Clinical Decision Unit (CDU)



Ambulatory Care Center
Cafeteria

Take Elevator to Floor 3

Diagnostic Services
Elevators ABCN

Karner Blue Café

MRI
Patient Entrance

Take Elevator

To Ground
Rehabilitation Services
Security
Rehabilitation Services

Wound Healing Center





"Making our signage easy to understand and eliminating language barriers is one simple way we can improve the health care experience for everyone. Universal symbols also offer an alternative to bilingual or trilingual signage that can quickly become useless with unreadable font sizes. " (Yolanda Partida, Director of Hablamos Juntos 1)

Benefit of Symbols:

- Express a message in a compact form;
- More noticeable in a complex environment;
- Have more impact than words;
- Easily understood versus written messages. 2

The degree to which they are utilized depends on your population.

- What percentage of your public speak another language?
- What is the level of literacy of your patients and visitors?
- Are these (2) factors affecting your wayfinding?

































































































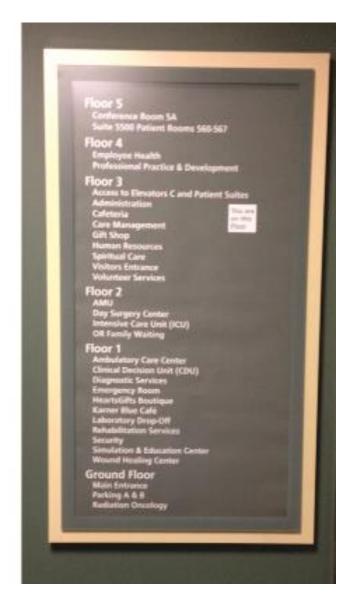


- Hablamos Juntos. Quote obtained from http://www.dexigner.com/news/21460
- 2. ISO Bulletin December 2001. Quote from http://www.hablamosjuntos.org/signage/symbols/

Elevator Directories







Observation:

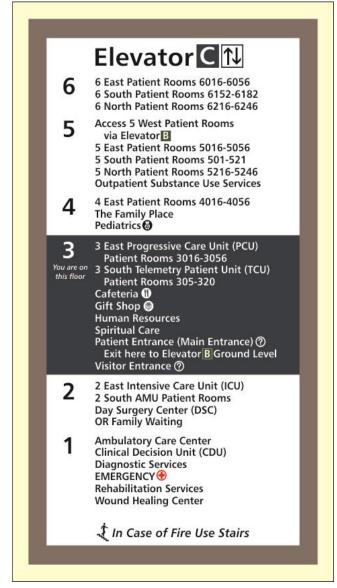
- Current directories have no contrast
- Floor level and department copy
- Is the same size; There is no visual hierarchy
- "You Are on This Floor" square's placement is confusing and does not help to tie to floor level.
- Colors vary too and are not consistent from floor to floor;
 Printing is faded



Elevator Directories continued...





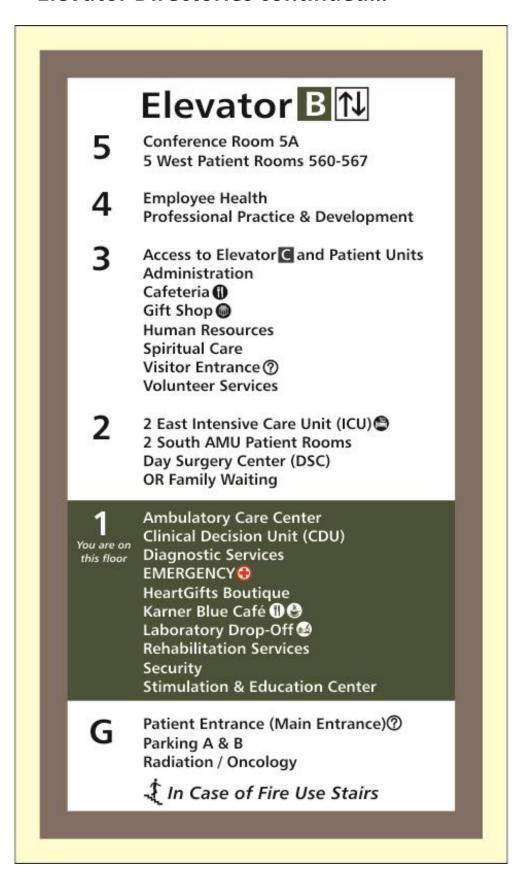


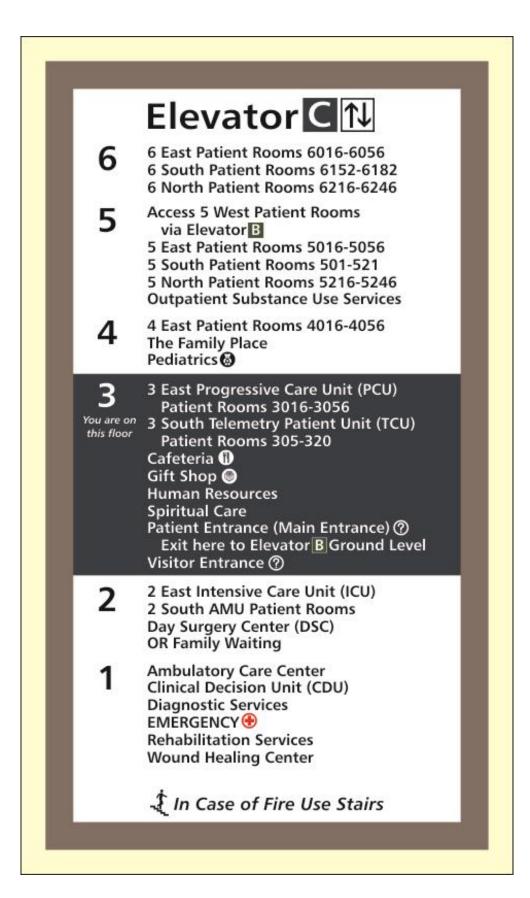
Recommendation

- Develop design that is consistent regardless of floor level or elevator
- Add Elevator ID with Color Code (A, B, C and CC); Incorporate symbols
- Simplify floor level with use of large numbers
- Omit Suite #s to make room for full patient unit name
- Color code the floor level the person is on
- Provide directions to key destinations (Visitor Entrance, Patient Entrance)
- Include "In Case of Fire Use Stairs" as part of the design. This will eliminate the need for another sign



Elevator Directories continued...







Elevator IDs and Design of Space

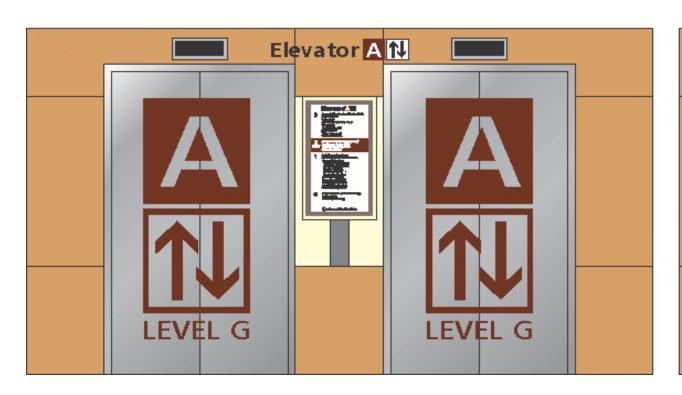


Observation:

- Elevator areas vary in design & color with no unifying theme
- No contrast between Elevator ID and wall
- No Symbols

Recommendation:

- Create visual interest by adding elevator symbol and color code for Elevator ID
- Incorporate color code used in Elevator ID on door with Elevator
 / Floor ID vinyl graphic <u>OR</u>
- Paint doors in same color code and add watermark Elevator
 / Floor ID to doors.

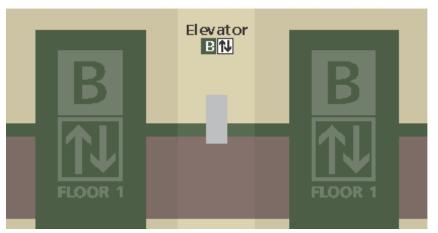


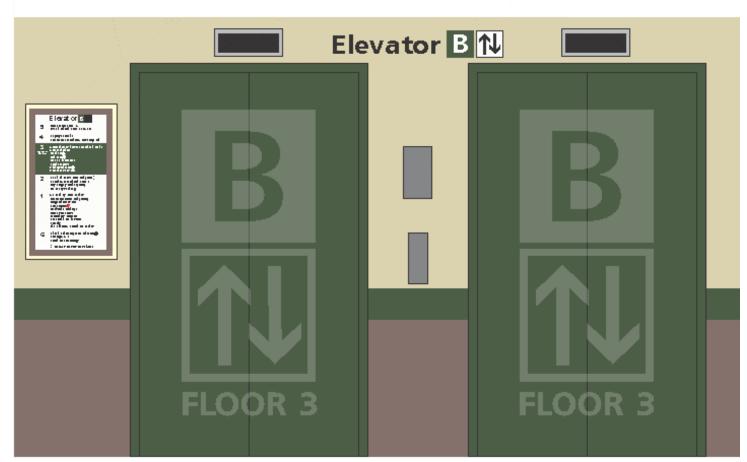














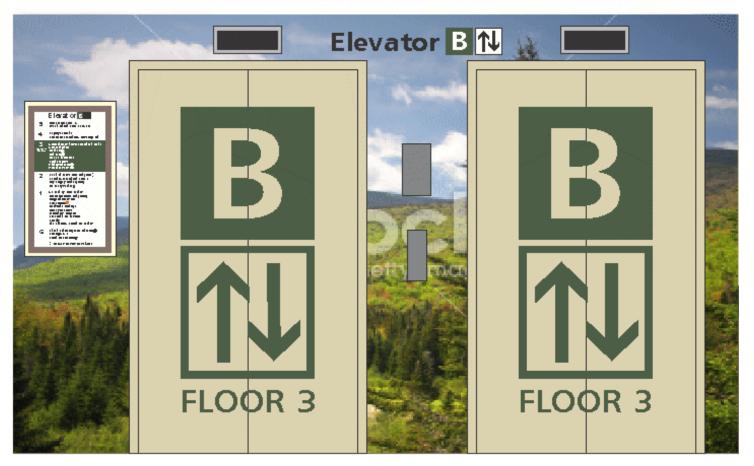


Additional Recommendation:

 Develop elevator/floor theme by adding graphic to wall. Suggest local landscape themes (i.e., White Mountains, Ocean, etc.)



















Additional Recommendation:

 Develop elevator/floor theme by adding graphic to wall. Suggest local landscape themes (i.e., White Mountains, Ocean, etc.)













Observation:

- Rooms signs vary in color, design and layout
- Postings are added to signs
- Velco add on room# plaques do not stay securely on sign
- Sign family is not uniform
- o ADA is used for some rooms that do not require



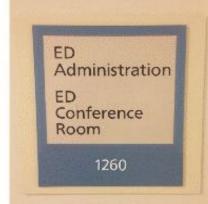
















Recommendation:

- Develop uniform sign design
- Combine messages into (1) sign to eliminate multiple signs
- Define how employee names/titles are represented.
- Provide ADA signage only where necessary



Effective wayfinding signage should aim to create a solution for users that will ensure they can explore a complex built environment with ease. It will employ simplicity while leading the user through a "breadcrumb" approach via consistent terminology, font and type size. An effective sign system will focus on location, size, uniformity and color.

Establishing all of these principles will help to lay the proper foundation for creating a positive overall user experience.

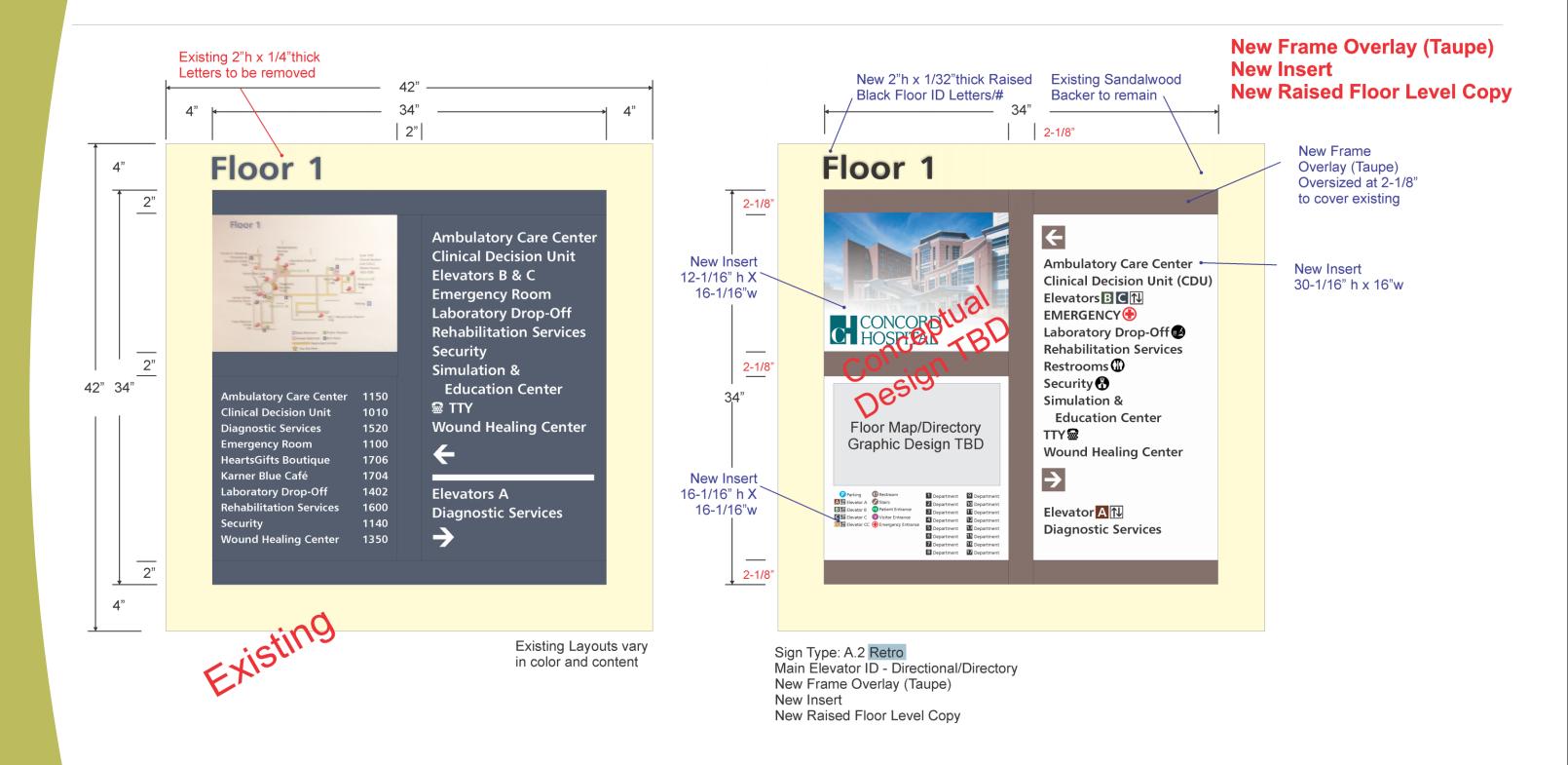


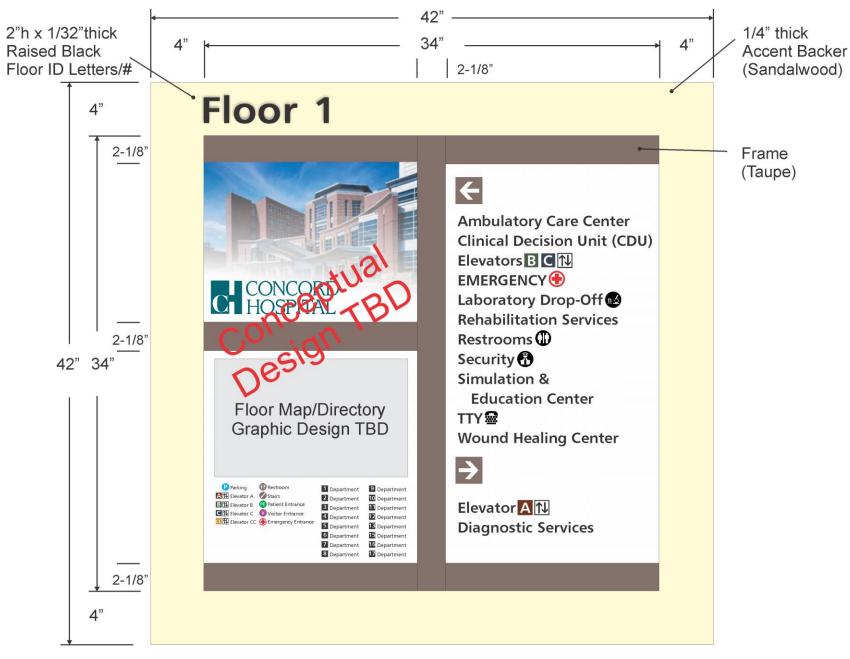


New Digitally Printed Insert 37" h x 37"w +/-

Size to be confirmed

Sign Type: A.1 Main Directory Insert ONLY





Sign Type: A.2 New Main Elevator ID - Directional/Directory

Top Left Insert CH Logo/Photo: Size: 12-1/16" h x 16-1/16"w
Bottomr Right Map/Directory Key Insert Size: 16-1/16" h x 16-1/16"w

Right Directional Insert Size: 30-1/16" h x 16-1/16"w



Memorial Building **Existing Floor Directory**



Pillsbury Building **Existing Floor Directory**

Memorial Building Directory



2nd Floor

Graphic

Design TBD

Doctor's Name, Title

Layout/Header Varies for Pillsbury and Memorial Buildings

Pillsbury Building Directory

Ground Floor Graphic Design TBD

Doctor's Name, Title Doctor's Name, Title Doctor's Name, Title Doctor's Name, Title

MOB Main Directory **Face & Insert ONLY**

1st Floor Graphic Design TBD

Doctor's Name, Title Doctor's Name, Title Doctor's Name, Title Doctor's Name, Title

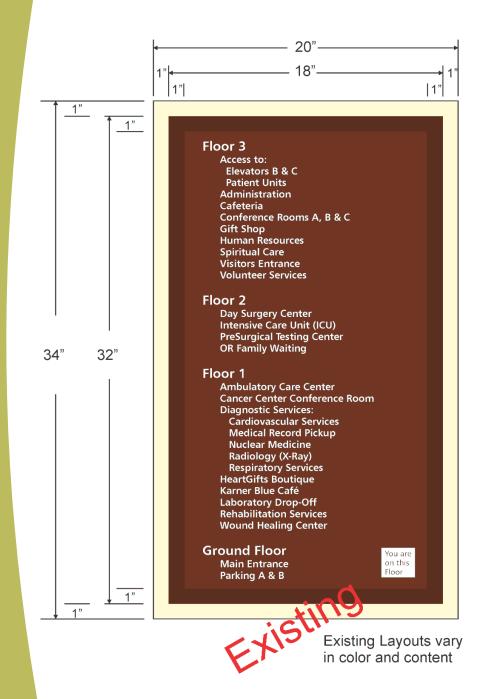
Doctor's Name, Title Doctor's Name, Title Doctor's Name, Title Sign Type: A.3

Note: Include photo credit on each layout ©Rixon Photography

New Digitally printed insert applied to 1/8" thick substrate (TBD)

Substrate/Insert: 36-1/2" x 48"w





Sandalwood Overlay (Taupe) Oversized at 1-1/8" **Backer** 1 1/8 1 1/8" to cover existing to remain 1/8 **Elevator A N** Access to Elevator Cand Patient Units Administration Cafeteria 🕕 Care Management Conference Rooms A, B & C Gift Shop Human Resources Spiritual Care / Chapel Visitor Entrance **Volunteer Services** 2 East Intensive Care Unit (ICU) 😑 2 South AMU Patient Rooms You are on this floor Day Surgery Center (DSC) Pre-Surgical Testing Center OR Family Waiting 32" **Ambulatory Care Center Cancer Center Conference Room** New Insert **Diagnostic Services:** Cardiovascular Services Medical Records Pickup **Nuclear Medicine** Radiology (X-Ray) Respiratory Services HeartGifts Boutique Karner Blue Café 🕕 🖰 Laboratory Drop-Off

Existing

New Frame

Sign Type: B.1 Retro
Large Outside Elevator Directory
New Frame Overlay (Taupe)
New Insert

Parking A & B

1 1/8"

Rehabilitation Services Wound Healing Center

Radiation / Oncology

Patient Entrance (Main Entrance)

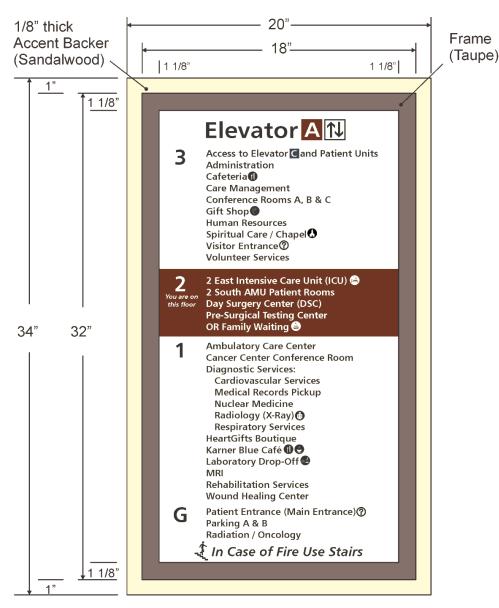
In Case of Fire Use Stairs

New Frame Overlay (Taupe) New Insert

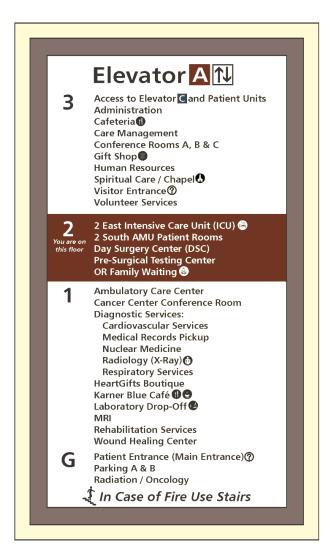


New Insert 30-1/8"h x 16-15/16"w





Sign Type: B.1 New Large Outside Elevator Directory



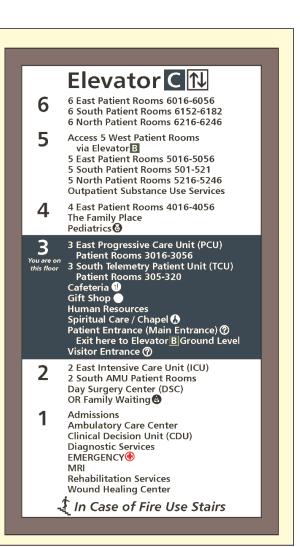
Example Elevator A Layout Level 2 Shown

Horizontal color bar highlights specific floor level you are on and varies per floor.



Example Elevator B Layout Level 1 Shown

Horizontal color bar highlights specific floor level you are on and varies per floor.

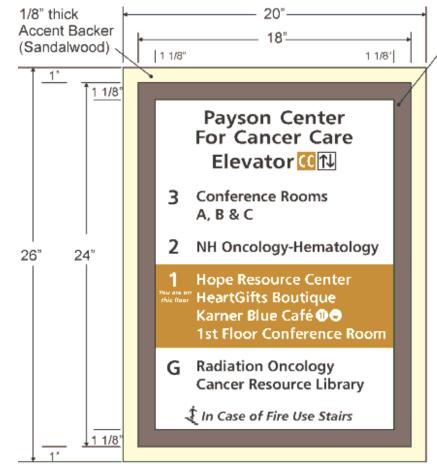


Example Elevator C Layout Level 3 Shown

Horizontal color bar highlights specific floor level you are on and varies per floor.

Note: Access to Ground Level not included on insert as elevators open to restricted Pharmacy area.





Sign Type: B.2 Medium Outside Elevator Directory Typically used at Cancer Center Same frame as Sign Type D.2 Medium Directional

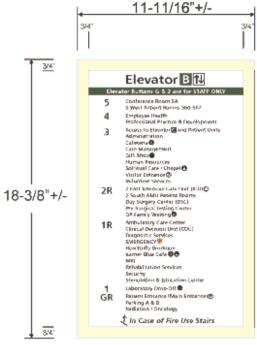


Frame

(Taupe)

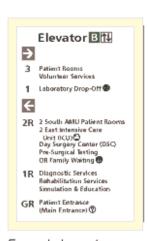
Lin Case of Fire Use Stairs

Example Layout for Other MOB Elevator



Example Layout Elevator B.1 Qty: 2 per Elevator Bank

Sign Type: B.3 Inside Elevator Directory Fits 17"h x 11"w insert Same frame as Sign Type C.1



Example Layout Elevator B.2 (Directory/Directional) Qty: 1 per Elevator Bank Used in conjunction B.1



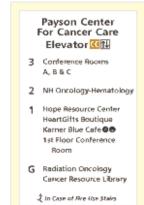
Example Layout Elevator A Qty: 2 per Elevator Bank



Example Layout If used as smaller Outside Elevator Directory *Used when space is limited (back of house or staff side)



Example Layout Elevator C Qty: 1 per Elevator Bank



Example Layout Elevator CC Qty: 1 per Elevator Bank

Main Hospital Elevators Elevator A: Front: Public Access

Rear: Staff Access Only Access

Elevator B

Front/Rear: Public Access

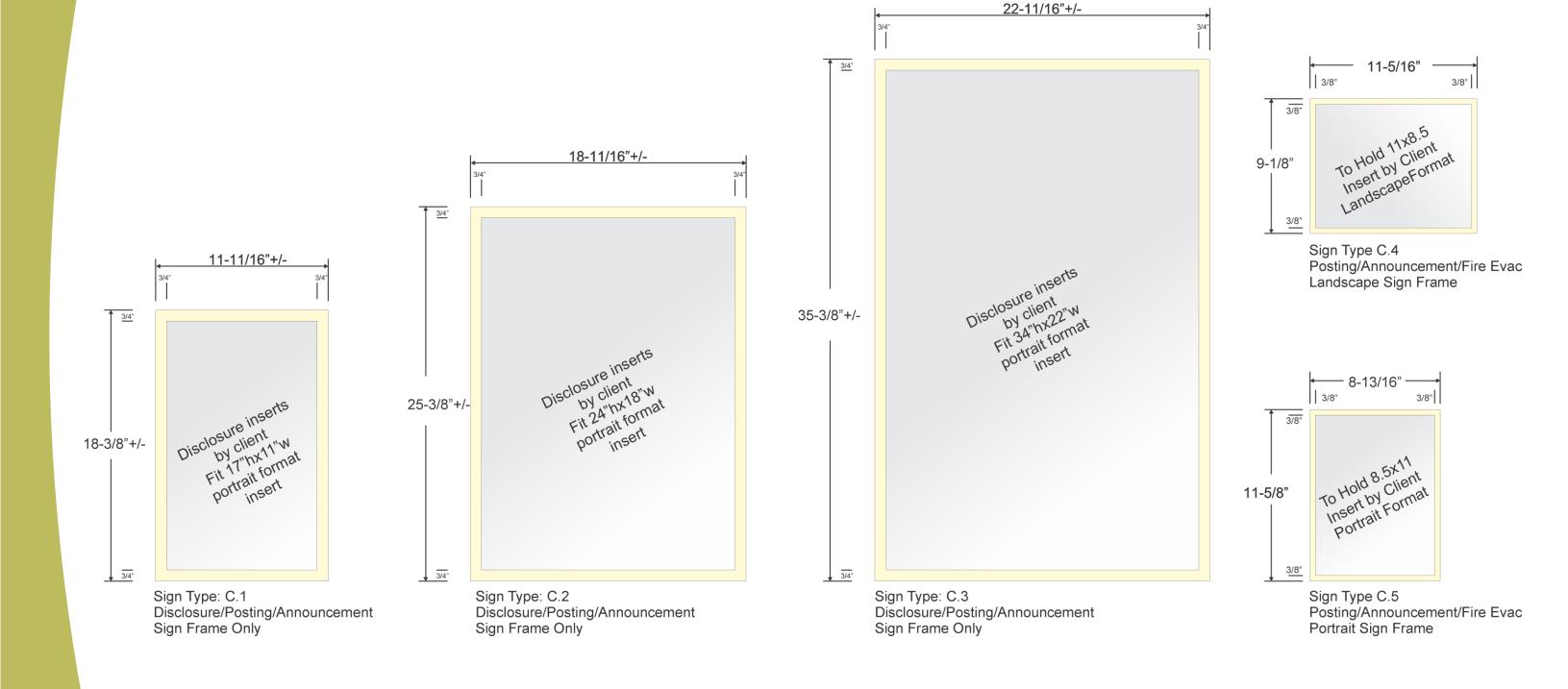
Elevator C:

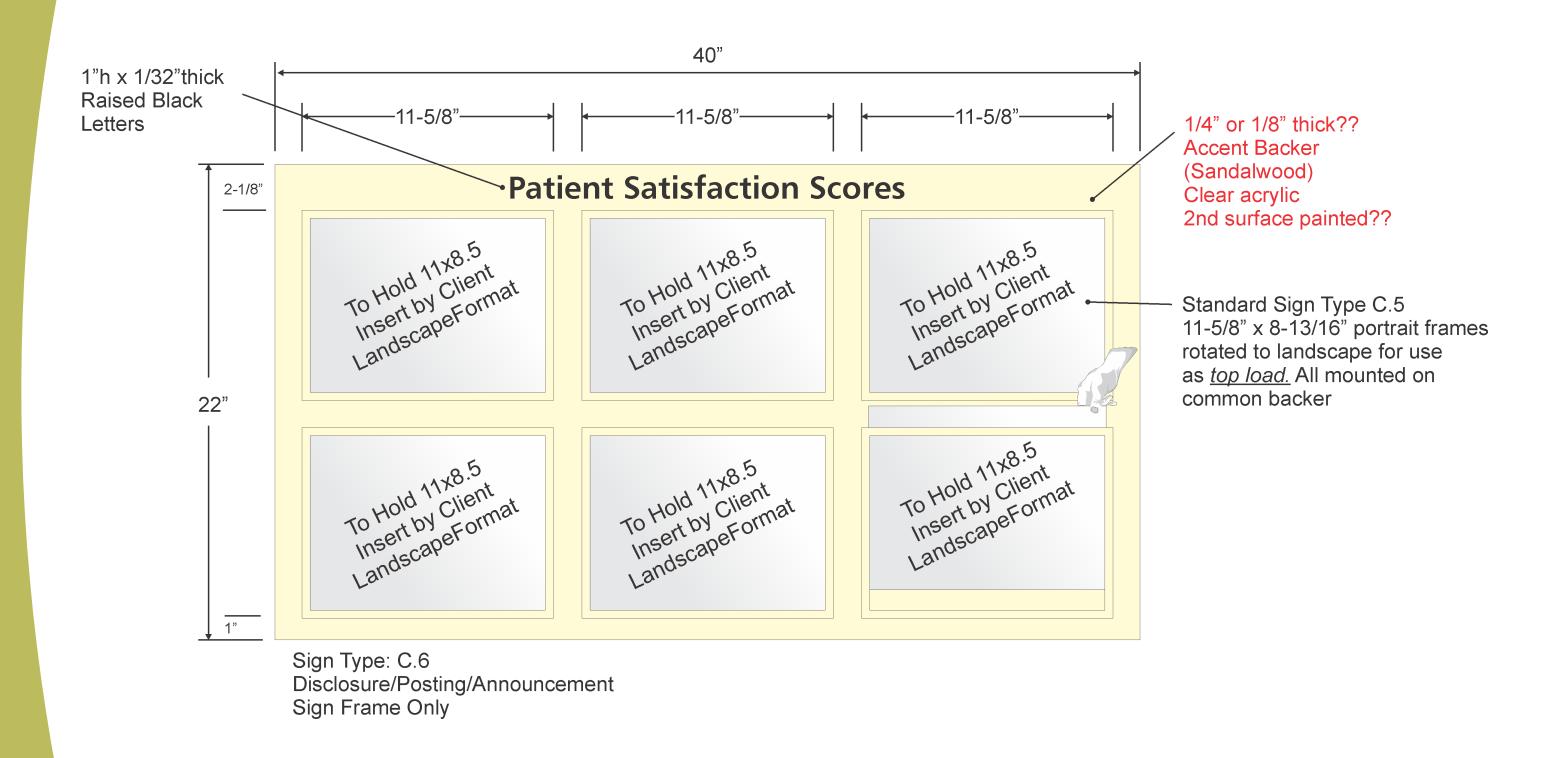
Front Only: Public Access

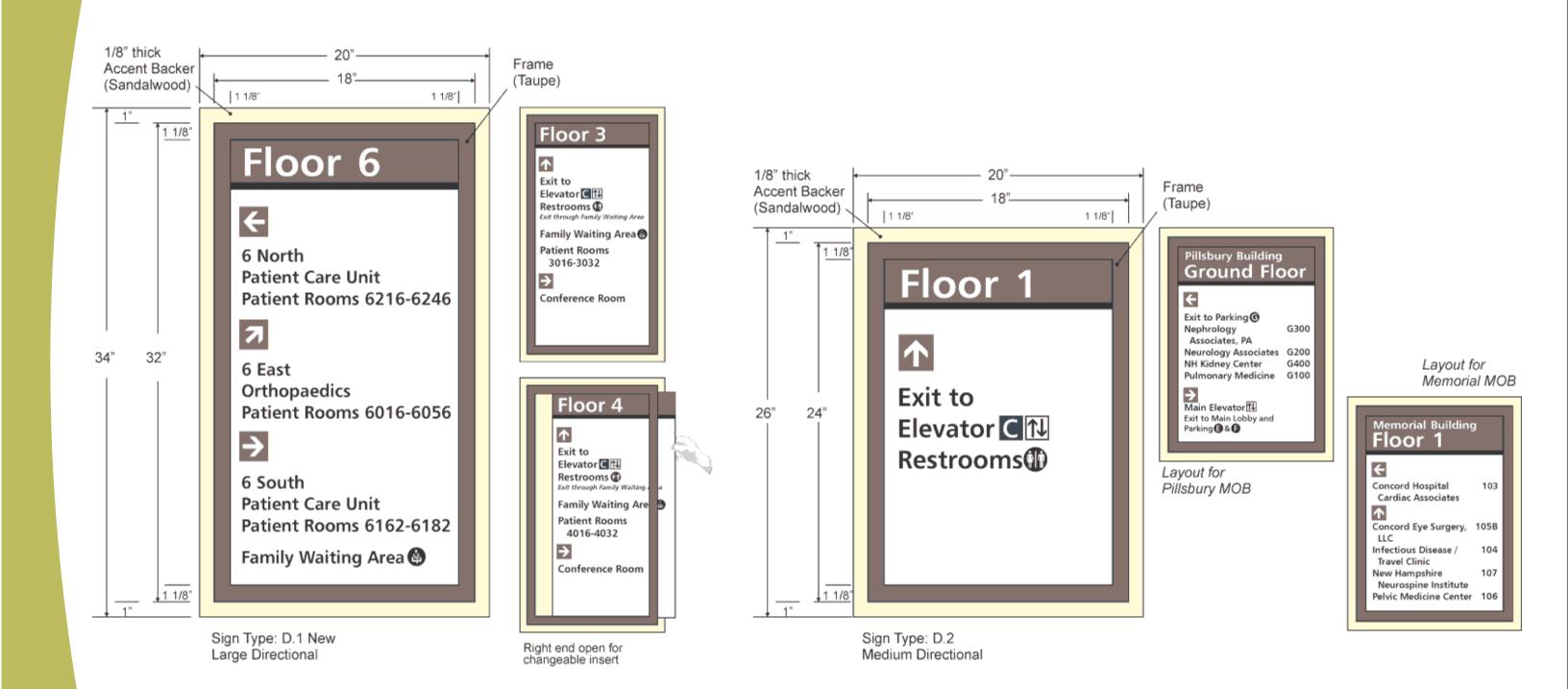
Elevator CC:

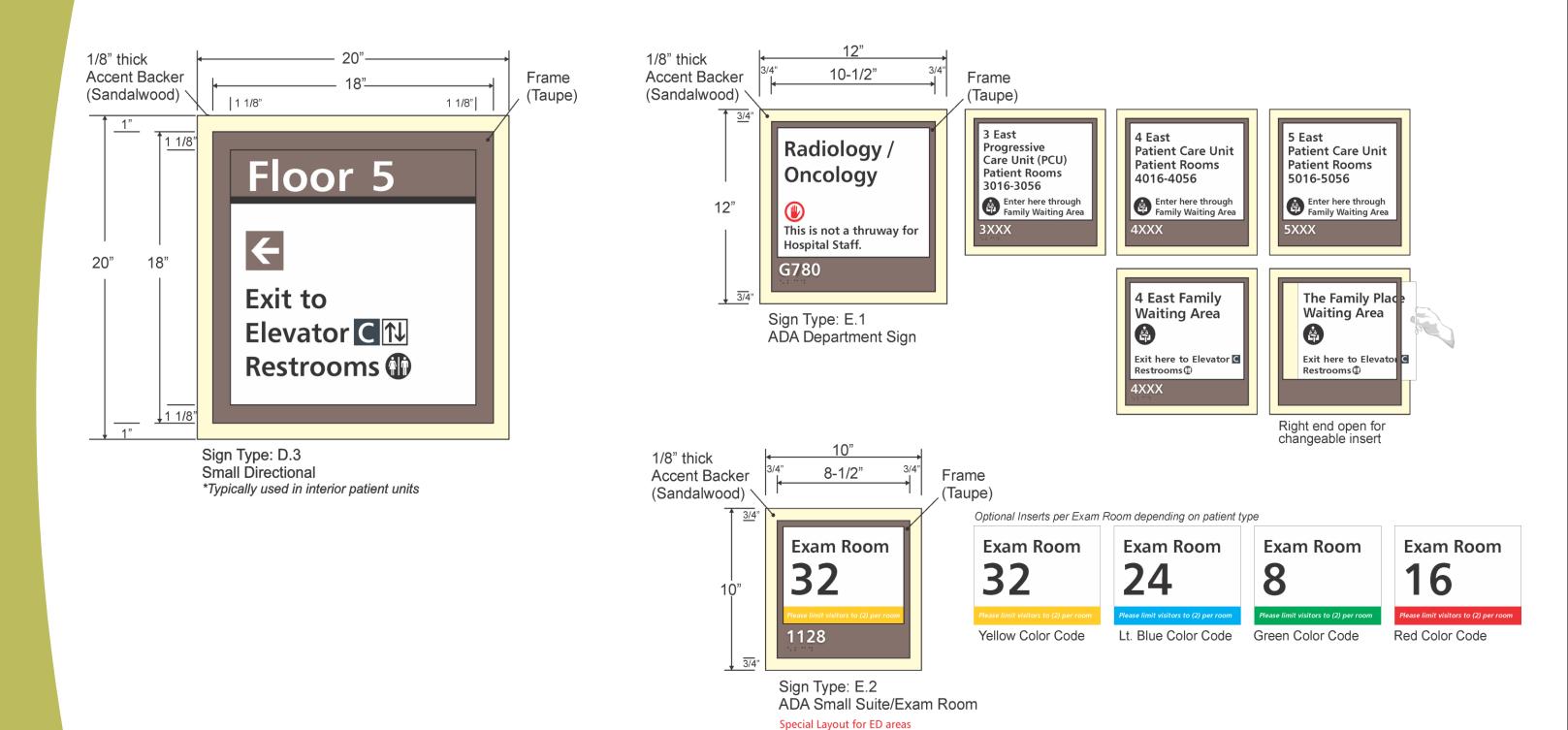
Front Only: Public Access



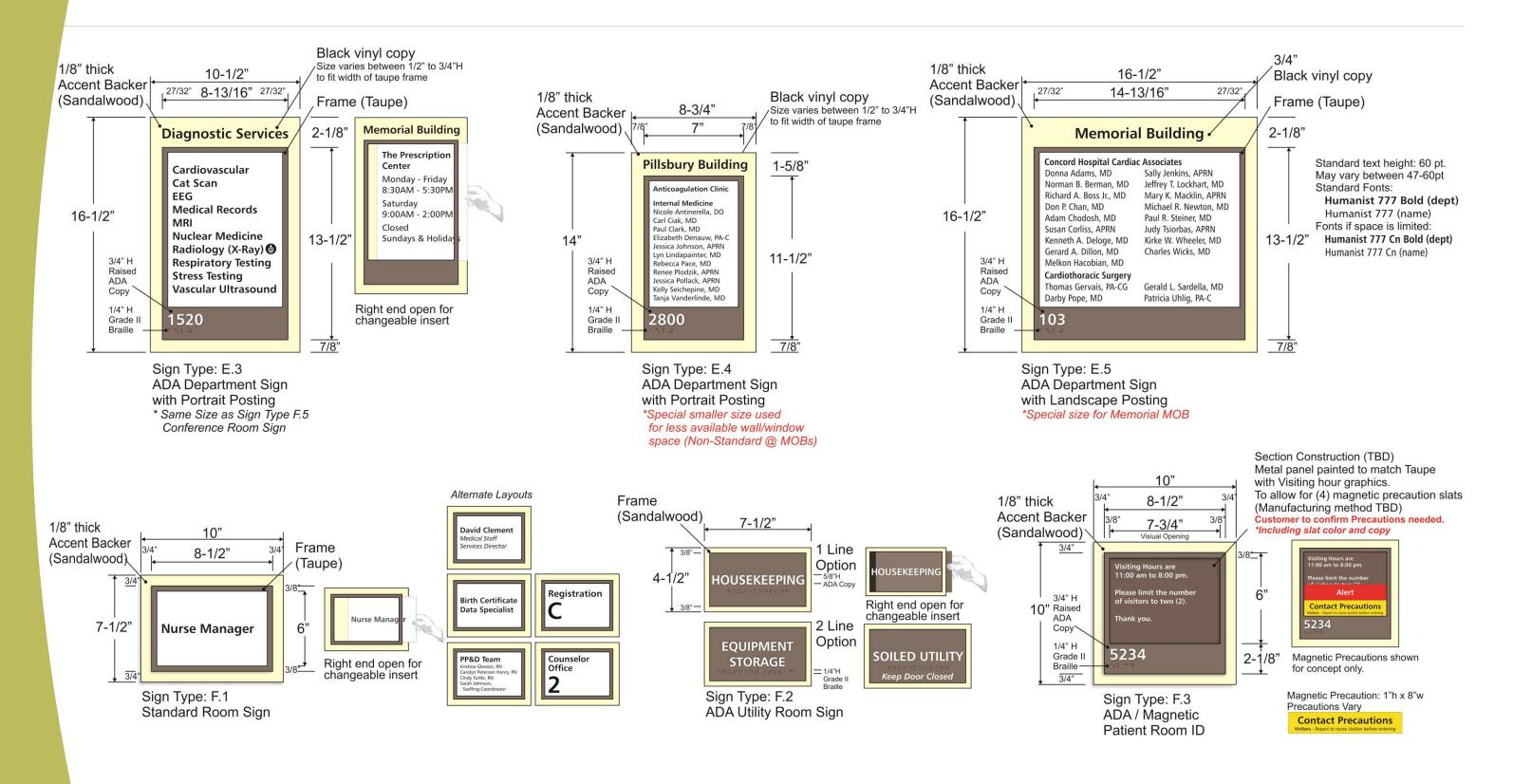


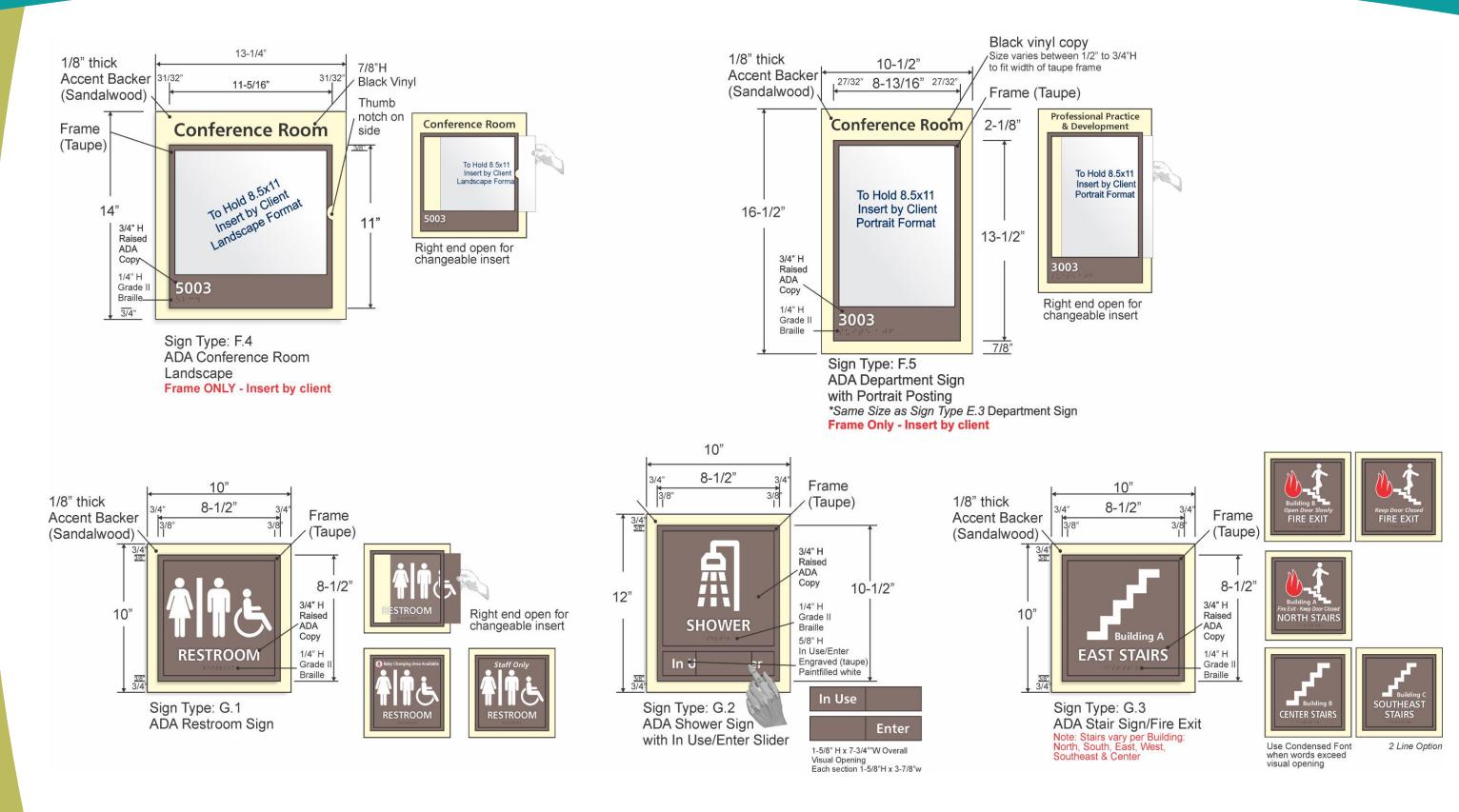


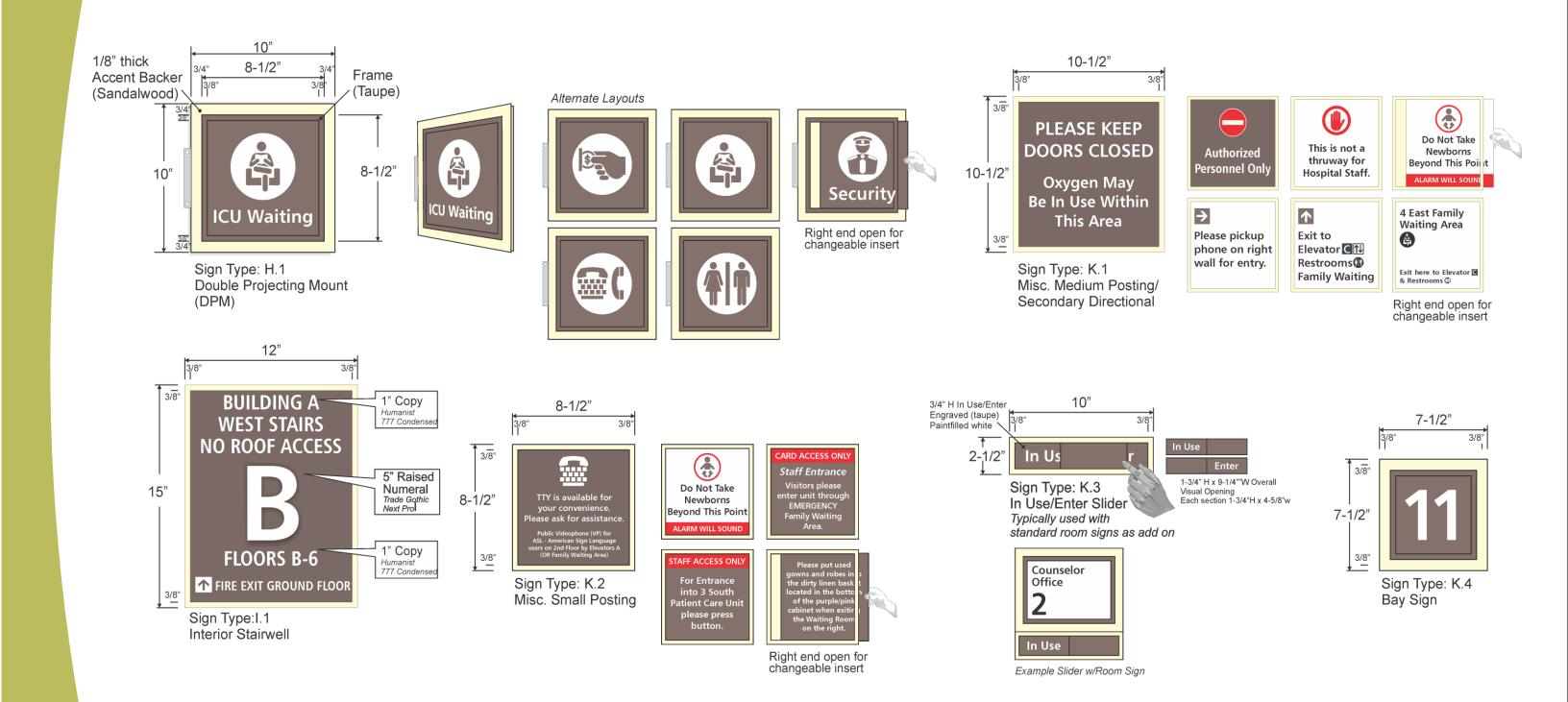




Color coded by area







← TCU Patient Rooms ↑ Elevators A B ↑ **∠** Restrooms

⚠ Gift Shop®

Side B

← Elevator **C 1 1 1 2 1 C U** Patient Rooms

Example Shown: 3rd Floor Directional by TCU. Typical Size: 10"h x 72"w (Varies). Scale: 1:1.5

↑ Elevators ABN

4034-4056

Care Management → Spiritual Care/Chapel **(**

Care Management

↑ Elevator C ↑

↑ Patient Rooms

4016-4032

← Elevator C N ← Restrooms ① Exit through Family Waiting Area

↑ Patient Rooms → Elevator C N **→** Restrooms ① Exit through Family Waiting Area

Example Shown: Standard East Wing Directional by Reception inside space Typical Size: 6"h x 72"w (Varies). Scale: 1:1.5

↑ Elevator C↑

→ Elevator A N

Side A

↑ PCU & TCU Patient Rooms ↑ Visitor Entrance ?

Example Shown: 3rd Floor Directional by Elevator B Typical Size: 9"h x 72"w (Varies). Scale: 1:1.5

Side A

Side B

Side A

Side B

Example Shown: 3rd Floor Directional by Chapel. Size: 10"h x 72"w (Varies). Scale: 1:1.5

36" **Information ②**

Sign Type: CM Small Ceiling Mount Scale: 1:1.5

Sign Type: CM (Ceiling Mount) *Sizes Vary

Background: 5/8" thick PVC

Overlay: Interior opaque phototex with digitally printed graphics

Background: to match Rowmark ® Sandalwood

Copy: Black Symbols: Black/White Elevator Box: See sign specs for colors

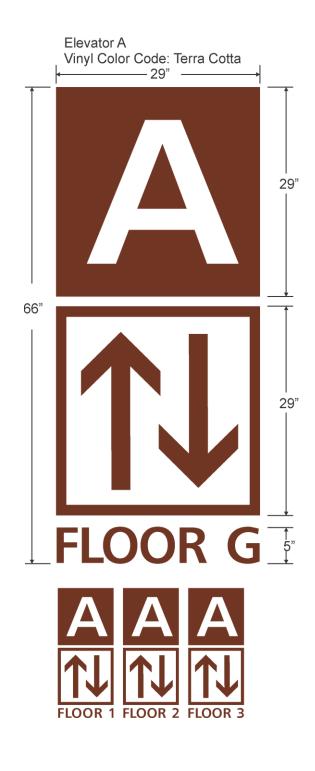
Arrow Box: to match Rowmark ® Taupe w/white arrow

Edgeband: To match Rowmark ® Sandalwood

Mount: Flush to ceiling. If ceiling height is greater than 8', use all-thread covered with aluminum rods

Sign Type: CM Retro (Ceiling Mount Retrofit)*Sizes Vary

Overlay: See above for phototex overlay specifications. Note: Existing vinyl graphics to be removed prior









Elevator CC (Cancer Center)
Vinyl Color Code: Imitation Gold



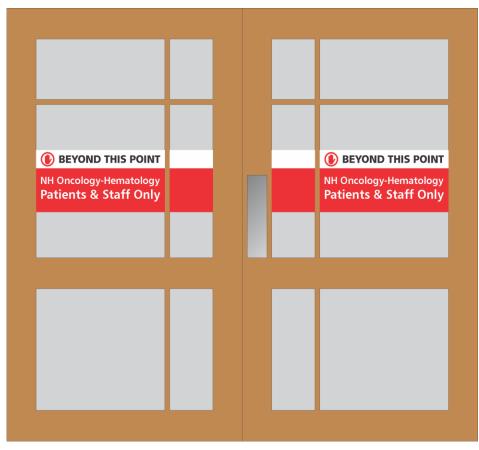


Sign Type: VINYL-ELEV
Elevator Door Vinyl ID's
Graphic: First surface h.p. vinyl
graphics applied to elevator doors.
See materials/specifications page
for coloor details.
Font: Humanst 777 Bold







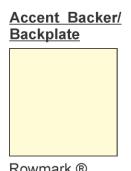


Main Hospital Main Hospital Payson Center For Cancer Care

Sign Type: DOOR BAND
Scale: 1:3
Typical Size: 12"h x 32"w *
*Sizes Vary. Size to be confirmed in field prior to fabrication
Digitally printed and laminated vinyl graphic

Font: Humanst 777 Bold



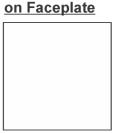


Rowmark ® Rowmark ® Sandalwood 3X1-218 Taupe 3X1-802 1/32" 1/8"

Typical Frame Sign Type F.2 **Frame**

Rowmark ® Sandalwood 3X1-218 1/32"

ADA Copy on Faceplate



Rowmark ® Bright White 311-204 Black Vinyl 1/32"

Vinyl Copy Sign Type F.4



Avery ®

Insert Font Insert **Background** Color



White

To Match Rowmark ® Taupe 3X1-802

Color

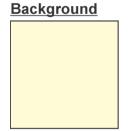
Insert Font

Black

Overlayed on 1/16" thick Non-glare clear acrylic

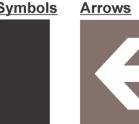
Ceiling Mount (Opaque Phototex Overlay)

Black



To Match Rowmark ® Sandalwood

Letters/Symbols



To Match Rowmark ® Taupe

Elevator ID



See colors below

Dimensional



1/4" thick clear acrylic with Rowmark ® **Brushed Stainless** Metalgraph Plus overlay; Edges painted silver.

Dimensional



1/4" thick clear acrylic with faces/edges painted matte black

Elevator Desginations

Vinyl Color Box



To Match Avery ® Terra Cotta SC-900-9600



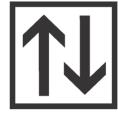
To Match Avery ® Deep Green SC-900-7900



To Match Avery ® Majestic Blue SC-900-6250



To Match Avery ® **Imitation Gold** SC-900-2530



Avery ® Black or White



Design Series: Frame Series with Accent Backer

Fonts:

ADA Font: Humanist 777 Bold Insert Font: Humanist 777 Bold

Ceiling Mount Font: Humanist 777 Condensed Bold



ABCDEFGHIJKLMNOPQRSTUVWXYZ abcdefghijklmnopqrstuvwxyz 1234567890

Humanist 777 BT Bold

ABCDEFGHIJKLMNOPQRSTUVWXYZ abcdefghijklmnopqrstuvwxyz 1234567890

Humanist 777 BT

ABCDEFGHIJKLMNOPQRSTUVWXYZ abcdefghijklmnopqrstuvwxyz 1234567890

Humanist 777 BT Italic

ABCDEFGHIJKLMNOPQRSTUVWXYZ abcdefghijklmnopqrstuvwxyz 1234567890

Humanist 777 BT Condensed





































































































Wayfinding Symbols to include Circle. If no room sign, symbol w/o circle maybe used to maximize space