

ARENA TO HEALTHCARE CONCEPT (A2HC) ALTERNATE HEALTHCARE FACILITY



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US Army Corps
of Engineers®



A2HC – CONCEPT OF THE OPERATION



PHASES

1. PLAN – STATE Responsibility

- Identify existing, available facility
- Assess for suitability
- Technical advice/assistance from USACE under FEMA MA – Critical Public Facilities PRT
- Existing utilities and infrastructure (electric, power, water, HVAC, IT,...)
- Lease facility
- Transfer authority to USACE to convert and retrofit facility

2. BUILD – USACE Mission (MA from FEMA)

- Convert/Retro-fit existing structure
- Arena or convention center
- Enable conversion of facility to support an ICU-like capability
- Main Functions - supply power (+ auxiliary), cover flooring, modify HVAC for negative pressure, install nurse's station, enable/configure IT infrastructure, temp utilities, etc...
- Stafford Act – emergency contracting authorities, utilizing local, capable business(es); Construction Contract; beds. (minimum, not including restoration or lease) (Rough Order)

3. SUPPLY – FEMA Mission

- Procure, Install, and Configure medically unique equipment
- Meets end-state requirements
- FEMA would task to either HHS or DLA to procure and install

4. STAFF – STATE Responsibility

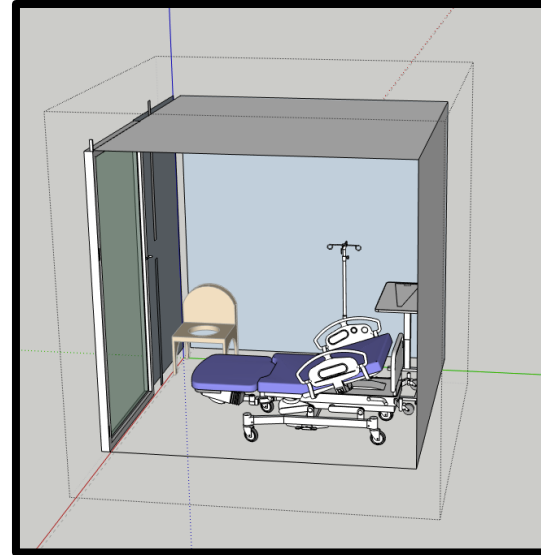
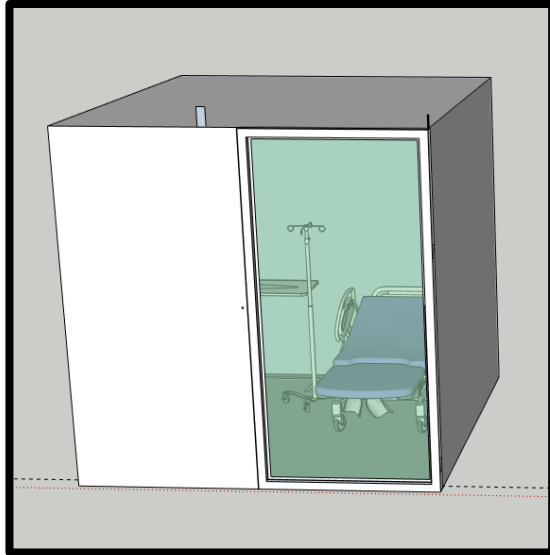
- Clearly a state function with available staff
- Expect to be critical path

BUSINESS RULES

- Proximity to existing, permanent medical hospital (10 mile/30 min)
- Readily available (10 mile/30 min) HazWaste disposal, linen/laundry, pharmacy
- Will not be fully ADA compliant; only to extent of existing facility
- Facility templates and standards are adapted from DoD UFC criteria.
- Local municipality/county/state standards should be discussed and agreed upon by municipality and the Construction Agent.
- State or City Owned Property Preferred...eases leasing and permitting.
- Already has redundant power or emergency power
- Building is provided with Sprinkler and Fire Alarm.
- Temp Facilities will be staged on perimeter, includes med waste, sanitary, soiled linen, hand washing, med supply/pharmacy
- Meet Modern Power 3-Phase, 3-Wire – Temp Power supplemented to patient care areas on floor.

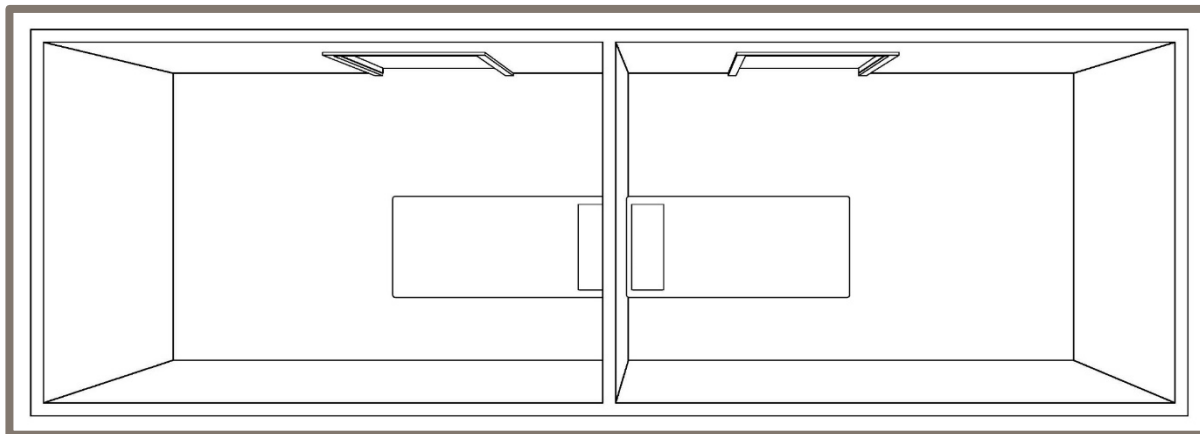


A2HC PATIENT CONTAINMENT OPTIONS



**Multiple Options Exist.
PWS for A2HC is
written in an effort to
be adaptable to a
variety of options.**

Stick built – Metal studs



Containers





A2HC TYPICAL POP-UP CARE SPACES



ENGINEERING CHANGES

1. ADD HVAC DUCTING AND HEPA FILTERING
2. ADD EMERGENCY BACK-UP POWER
3. ADD ELECTRICAL OUTLETS
4. ADD DATA OUTLETS
5. ADD PLUMBING

NEW EQUIPMENT

- E1. VENTILATOR CAPABLE; STORAGE CABINET
- E2. TELEMTRY/PUMP ON IV STAND
- E3. STOOL
- E4. OVER BED TABLE
- E5. MOBILE WORK STATION
- E6. LINEN HAMPER
- E7. SHARPS/GLOVES
- E8. HAND SANITIZER STATION
- E9. INFECTIOUS WASTE
- E10. PATIENT BED

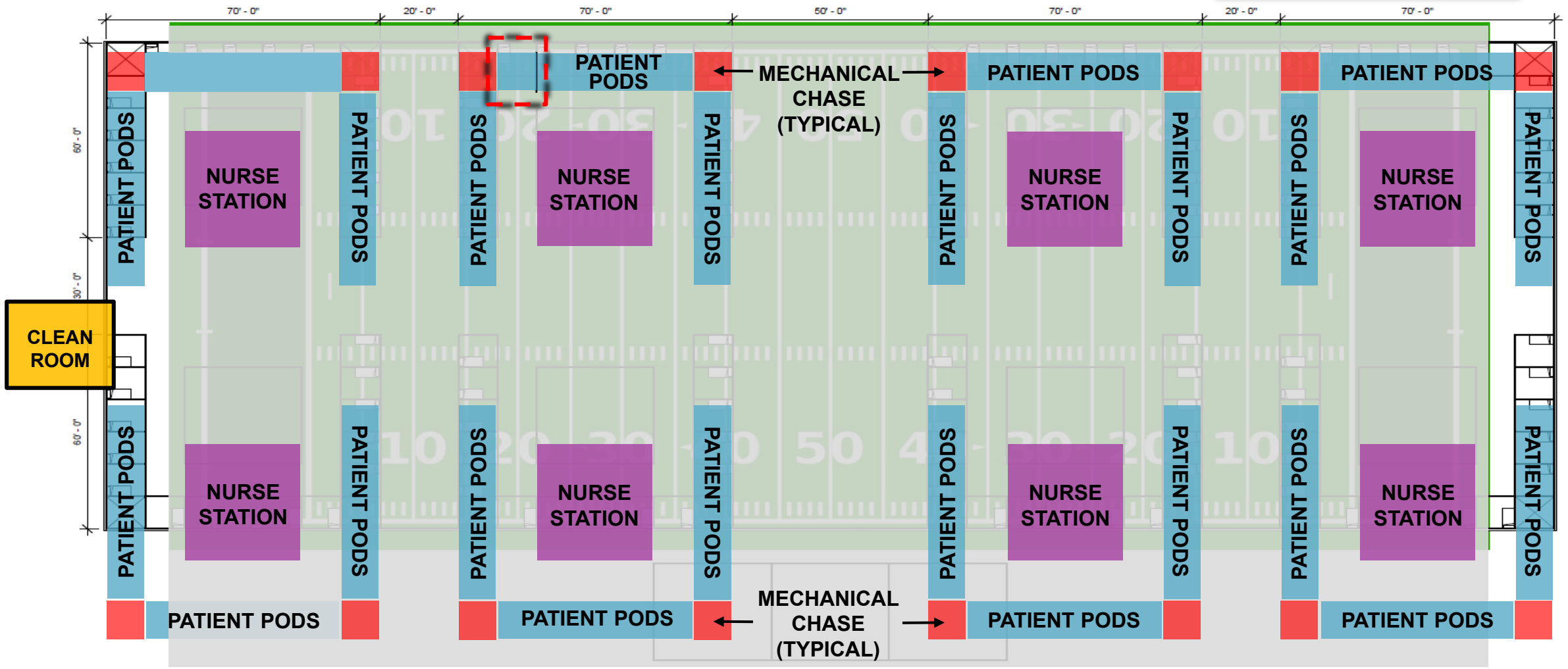


Bedside Toilet



A2HC TYPICAL LAYOUT

- 1 NURSE STATION FOR EACH 15 PATIENTS
- TOTAL OF 120 PODS



FACILITY PROVIDED

- FIELD HOUSE ICE MACHINE

ENGINEERING CHANGES

- ALL TYPICAL FLOOR PLAN ADDITIONS
- ADD GENERATOR

MEDICAL EQUIPMENT

- ALL TYPICAL FLOOR PLAN ADDITIONS
- NURSE CALL

- STORAGE
- WORKSTATIONS
- MED DISPENSING UNITS