

Vanderbilt's 100 Oaks clinics touted for convenience, comfort

Medical offices eyed as solution for aging malls

BY JENNY BURNS / STAFF WRITER

Rachael Jones used to spend 30 minutes to park, walk and find the clinic at Vanderbilt University Medical Center where she gets an infusion of iron twice a year after her kidney transplant.

Now she breezes in to a new location in about five minutes, where she's greeted by a private room, a comfy recliner and a flat panel television to spend the two hours it takes to get her infusion.

The health clinic at the 100 Oaks mall is a marked change from the 21st Avenue location, a cramped space where Jones sat with about 10 other patients in one room.

"It's a big difference," she said.

Vanderbilt's grand experiment to take medical care to its patients in a convenient location that combines accessible parking, shopping and technology is being eyed by other cities.

About 20 clinics have moved into Vanderbilt Health One Hundred Oaks, filling almost half of the 850,000 square feet of what was a dying mall.



Pinson

"Redeveloping [old malls] with some combination of retail and medical has really caught on with city governments. A lot of conversation is going on," said Tony Ruggeri, the mall's Dallas developer.

Now, the mall's remaining retailers are thriving after a \$99 million renovation by Vanderbilt that allowed the hospital to offer a new campus and a new concept in health care to its clients.

Developers, architects and hospitals from New Jersey, North Carolina and Texas have been asking for tours and peppering Vanderbilt staff with questions on how the university transformed the mall into a health care facility, said Janice Smith, chief administrative officer for Vanderbilt Health.



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Patients at Vanderbilt Health at 100 Oaks can browse shops or surf the Web while they wait.

"Many people are getting in touch with us because they are thinking of doing it," said Dr. Wright Pinson, the deputy vice-chancellor for health affairs and chief executive officer of hospitals and clinics at Vanderbilt University Medical Center.

Ruggeri is hearing the same buzz.

He bought the mall in December 2006 when it was just 50 percent occupied. Now, with the Vanderbilt clinics and the remaining retail space almost full, he's fielding questions from commercial developers and cities looking to revive their suburban malls.

Commercial real estate has been hard hit in the recession, and one of the few ways developers can get funding for projects is by adding medical offices to the mix, he said.

Moving a chunk of Vanderbilt's medical services to 100 Oaks was the brainchild of Pinson, who said interstate access and ample parking were key to finding the right property.

Vanderbilt executives looked at 15 similar projects across the country when gathering ideas for a new campus, but the 100 Oaks project would become the largest in the nation — four times larger than what already existed.

"The setting in a multiple-use facility does make it more attractive for our patients and also makes it more cost effective. It's very expensive to do nothing but a clinic," Pinson said.

Vanderbilt needed more space, and building on its West End campus is expensive and difficult. The university wanted to bring its clinics to prospective patients, and the site at 100 Oaks received rave reviews from focus groups before Vanderbilt invested the money. The university also looked at Bellevue Mall, which focus groups said was too far out, and property on Charlotte Avenue that was deemed inconvenient, Pinson said.

Vanderbilt signed a lease for 100 Oaks in July 2007 with Ruggeri and his partner Frank Mihalopoulos to take the mall's

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entire second floor and all levels of its 5-story tower. Nashville-based Gresham Smith and Partners led the redesign, and Vanderbilt started moving in this year as it completed renovations.

The thrust of 100 Oaks is offering prevention services, such as mammograms. This type of care must be convenient and accessible to patients, or they won't go until they are actually sick, Smith said.

Vanderbilt chose ambulatory services that do not have to be connected to the hospital to move to the suburban location. This includes women's health, the breast center, dermatology, adolescent medicine, medical infusion, multiple sclerosis and pediatric allergy clinics.

Three more clinics and a lab still are underway, and Vanderbilt also moved in its 430-person central billing division and some administrative offices.

The mall clinics are a vast departure from the typical sterile walls and windowless spaces of hospitals. Soothing earth-tone walls, comfy benches and chairs and high-ceiling skylights look more like a casual cafe than a doctor's office. Wireless Internet is available for patients to use their laptops while waiting.

"People are surprised by what the mall looks like, and how quiet and calming it feels," Smith said.

Technology also has sped up the process of care, Smith said. The 100 Oaks center has monitors inside the clinics for nurses to know where patients are located once checked in and at what stage of care they are at.

Check-in is quicker with touch-screen kiosks that work similar to those at airports, and restaurant-style beepers let patients travel around the mall while waiting for their appointments. Patients can eat at an Einstein Bros. Bagels at the center's main entrance or shop at Michael's, TJ Maxx or other retailers in 100 Oaks.



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Vanderbilt's new health center fills about half of the space at the 100 Oaks mall.

Smith said clinic staff discourages shopping while waiting to see a doctor so they don't get caught up in stores and have to run back for their appointments. But clinics do encourage patients to walk the mall with their beepers, perhaps taking in the art gallery and piano music at the mall's north end.

A giant electric toy train is next to the pediatric clinics. The mall used to house a train museum, and the tiny locomotive was left as a reminder to entertain children.

Technology isn't the only thing saving time for patients. Staff at the infusion clinic can pass information through a window to the pharmacy to get prescriptions filled for patients, cutting wait times by about 30 minutes from the old facility, Smith said.

The smaller spaces that used to house these clinics on Vanderbilt's 21st Avenue campus quickly are being gobbled up by other divisions that needed room to grow. When pediatric rehabilitation services was

the first to move to 100 Oaks more than a year ago, its space on the main campus was gutted and made into a cancer center expansion.

"Space doesn't sit empty long," Smith said.

A 60,000-square-foot fitness center with a swimming pool is planned for the final stage of the 100 Oaks center, but the project is on hold because of the rocky economy. Once built, it will offer cardiac rehabilitation, and Vanderbilt would like to open it to the public to promote prevention.

The only thing Pinson said he might change about the new location is making the walls of some of the waiting areas taller for more patient privacy, but he's happy with its casual and calming environment.

"It did not end up looking like a refurbished shopping mall ... [and] it didn't end up looking like a doctor's office," he said. "It looks like something new and different."