Searching for a sign: Navigating the Buffalo Niagara Medical Campus
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For nine years, Kerri Lucas has made the trip downtown from her Town of Tonawanda home to bring her son William for treatment at Women & Children’s Hospital of Buffalo.

Born prematurely at 24 weeks with hydrocephalus, William has had 16 brain surgeries. His appointments range from the neurology department for a seizure disorder and audiology for a hearing impairment and urology for malfunctioning kidneys and endocrinology for hormonal growth issues.

With the hospital set to move to the Buffalo Niagara Medical Campus this year, and lots of other new buildings opening, she fears she’ll end up wandering the campus, frantically trying to find the right clinic.

“I don’t go to the city very often. The hospital is pretty much the only reason I’m down that far,” Lucas said. “I’m very naive when it comes to going outside my little comfort zone, so I’m trying to prepare myself. I’m a creature of habit and I don’t like change.”

She isn’t the only one who has to learn to adapt, because big changes are coming to the 120-acre medical campus. Later this year will see the opening of the John R. Oishei Children’s Hospital and the University at Buffalo’s Jacobs School of Medicine & Biomedical Sciences, as well as a rebuilt parking garage. They follow the opening last year of Roswell Park Cancer Institute’s Scott Bieler Clinical Sciences Center and 18 hospital outpatient clinics at Conventus opening this spring and summer.

The result: an influx of thousands of patients, families and visitors, many of whom have never or seldom come to the campus. Helping them get where they need to go is a monumental task that involves static signage, electronic tools and live humans. Wayfinding, as the process is termed, involves more than just pointing down the street.

For some seeking medical care, getting lost can come down to a life-or-death situation, though more often, it results in frustration when they can’t tell which shiny, new building is the one they’re trying to find.

For health care providers, lost patients can mean lost revenue and inefficiencies when appointments are late or canceled. Getting lost often leads to frustration, which can also affect consumer satisfaction reporting, a factor that has an impact on both referrals and reimbursements.

(Don’t) get lost
How big of a problem is it? A national report by Deloitte Digital found 30 percent of first-time
visitors to a hospital can’t find their way and 25 percent of the workforce can even get lost. The
cOMPany also found that hospitals with better patient-experience statistics performed better
financially.

That’s why hospitals on the medical campus have invested in technology and signage through a
planned wayfinding effort to get it right, said Mark McGovern, senior project manager for
Buffalo Niagara Medical Campus Corp. He helps various entities on the campus coordinate their
efforts.

McGovern said it’s important to remember that the various demographics of campus visitors
demand multiple approaches.

“Especially with older baby boomers coming of age, they’re not as likely to pull out their cell
phone to deal with an app. But the millennials can find their way anywhere,” he said. “My
father-in-law was at Buffalo General and Roswell for surgery and his sister came down from
Amherst. She might as well have been going to Hong Kong.”

Ultimately, visitors will be able to walk through a series of tunnels and bridges from the Allen-
Medical Campus Metro Rail station through all the major buildings on the medical campus,
making it likely they might not even realize which building they’re in.

Andrew Koenig, UB’s assistant dean for projects and planning, is in charge of the system for the
new medical school. He’s implementing a digital wayfinding system that will enable users to
search for individuals, events or departments, then display an outline of exactly where to walk
through the building to find your way. The directions can also be sent as a text to a mobile
phone.

Though traditional signage will still be found inside the main doors and outside the elevators,
digital wayfinding provides a lot more flexibility and accuracy.

“Wayfinding has the capacity of providing as much information as we want, so we can provide
the person’s phone number after hours or whatever the faculty administration wants to display,”
Koenig said. “So it has a lot of capabilities of providing a lot of information you would not get
with static signs.”

A similar system will be in use at the Oishei Children’s Hospital, where parent Kaleida Health
introduced a mapping function in its MyKaleida digital app that automatically switches from car
directions when visitors arrive at the parking ramp to walking directions. Key areas will be pre-
loaded such as clinics, cafes and bathrooms.

“A moving dot will allow you to find your clinic or key areas,” said Jessica Mabie, director of
strategic planning and implementation. “You can use it from home and it flips to internal
wayfinding.”
But the hospital is also using a color- and symbol-themed coding system designed to help parents and children find their way around. The system also addresses language barriers, Mabie said.

**Connecting the dots**

One of the biggest challenges is making sure all the different players’ directions and signage are consistent and work together, said Brian Eraun, executive director of clinical facilities at Roswell Park Cancer Institute. That goes way beyond simply putting an arrow on a street sign, he said.

“We want to make sure we’re all talking to each other about our planning so when folks come to the campus, they do get that consistent message,” Eraun said. “There’s a lot of research behind our signage and maps, too; the use of colors and fonts to keep it simple and informative. We don’t want the signs to be too complex but you want it to tell a story.”

Patients say they’re stressed enough dealing with their illnesses and don’t have time to worry about getting lost. Maryann Salvadore has been coming to Roswell since 2009 for treatment of an advanced blood cancer called multiple myeloma, which affects her bones and organs. Last year she started receiving treatment at the Bieler Center. She spends time at other Roswell buildings doing volunteer work.

Destinations were not as well marked in those early years, Salvadore said. She has helped make change by serving on a patient advisory council.

“It’s a totally different landscape at this point,” she said. “We’re not at our sharpest when you’re in the middle of treatment or whatever, or your labs came back and you’re distracted, making some pretty important decisions. The signage needs to be clear and obvious to someone who is in the throes of being distracted.”

Lucas and her son are preparing for the change, too.

They already toured Conventus, which will house clinics for the hospital’s new outpatient center. And although she said her car is almost on autopilot to drive downtown, she has done a few practice runs to avoid ending up in a dark corner of the wrong parking ramp.

“I felt like everything else was pretty smooth sailing, because everything’s connected indoors,” Lucas said. “I worry about parking somewhere further than I need to be or getting confused within the actual outside of the building, so I really feel comfortable with the idea that everything connects right to the parking garage.”