Facility Design: Private Physician Offices, or Not?
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Urgent care reflects the seismic shift occurring in health care—with the traditional, provider-centric approaches of doctors’ offices and hospitals giving way to a progressive, patient-driven focus on convenience, affordability, and customer service delivered in a collaborative, team-oriented environment. As a result, urgent care innovators have taken their cues in site selection and facility design from retail and hospitality leaders. But for the urgent care operator, the neatly finished, high-traffic, high-visibility location that’s necessary to drive initial volume, delight patients, and produce quality outcomes typically comes with high rents. To compensate, operators must continually find ways for their centers to “do more with less.”

As you approach the development of your urgent care center, there remains one potentially thorny issue to consider: with space now at a premium, do you part with the formerly standard, private physician’s office in favor of an “open” floor plan with no personal workspaces? Or are you of the opinion that physicians (and particularly the center’s medical director) have earned the privilege and status afforded by, among other things, a private office?

Arguments For Providing A Physician’s Office
As one of the current trends in health care design calls for cutting costs via substantially decreasing facility footprints¹, the areas previously allotted for private offices are increasingly being repurposed into extra floor space for open-plan layouts with physicians working in communal “stations” alongside other providers, nurses, technicians and assistants. However, there are several valid reasons why an urgent care operator might be swayed to buck this trend and indeed include a private physician’s office in the center’s floor plan:

• HIPAA Compliance. The Health Insurance Portability and Accountability Act of 1996 (HIPAA) was created to protect individuals’ private health information, with hefty fines imposed on health care providers for non-compliance.² A personal office allows a physician to converse with a patient—either over the phone or in person—about his or her private health information without fear of other patients inadvertently overhearing some or all of the consultation, which could qualify as a HIPAA violation. Likewise, patient charts and electronic devices used to access electronic health records are more easily safeguarded in an office with a closed, lockable door.

• Privacy. Apart from HIPAA, there are plenty of common occurrences in which urgent care providers would greatly benefit from having their own private offices. One instance is when they need to have a confidential discussion with an employee and another is when they have to complete some heads-down work without distractions. Or, sometimes physicians simply desire a few minutes alone to collect their thoughts, get organized, and recharge before seeing the next patient.

• Status. Having a private office helps reinforce the provider’s importance to the center’s leadership team, particularly when others, such as the administrative manager or marketing representative, have their own offices. An office distinguishes the provider from the rest of the clinical staff who doesn’t have offices, and an office sends a positive message that the center’s ownership places a high value on the provider’s position within the organization.

• Engagement. A private office can help a physician leader “settle in” and solidify his or her attachment to the urgent care center. Most doctors faced with the prospect of working in an open-plan office express worry that they will


have no place for important keepsakes such as family photos, certificates and diplomas, and books.\(^3\) Having a private workspace to personalize and decorate can help the provider establish a strong sense of engagement and ownership at the center, and provide an incentive to work towards building a successful and thriving practice.

- **Awkward Culture Change.** Knoll, the workplace furnishings manufacturer, has conducted studies that effectively demonstrate how removing an employee’s private office while implementing an open-plan layout is perceived as a “take away.”\(^4\) This in part explains why organizations encounter so much difficulty getting their staff to buy in to communal workspaces, and why physicians who count themselves among the center’s most important team members are especially resistant to the idea. When a practice is acquired by a group who wants to convert the facility to an open-plan office, there must be a considerable effort undertaken to get providers to understand and accept the culture change, while keeping them on-board with the center's long-term vision.

- **Recruiting and Retention.** The United States is bracing for an acute shortage of primary care physicians in the next decade and when demand exceeds supply, it stands to reason that the resultant smaller pool of physicians will have more choices of where to practice\(^5\). Even if having an office is not a “deal killer,” when faced with otherwise equal career options, it can serve as a “perk” for recruiting and retention. Given the exorbitant costs of replacing a physician—not only in terms of direct recruiting and onboarding expenses but also bringing in interim locum tenens providers and the potential loss of the departed doctor’s regular patients—absorbing the rental cost of a private office may be a money-saver if the lack/removal of a private office leaves the physician dissatisfied and/or with a wandering eye.

**Arguments Against Providing A Physician’s Office**

Healthcare architects and designers—in anticipation of 2014, when 35-40 million more Americans will have health insurance coverage due to the Affordable Care Act—have been very vocal in stating the need for strategic thinking when it comes to designing healthcare facilities.\(^6\) Further, they’ve anticipated the enormous strain the coming influx of new patients will have on medical facilities and building infrastructure nationwide, and they are rightly espousing reducing costs, more efficient use of space resources, and flexibility, innovation, and collaboration in care models. To this end, here is a breakdown of the reasons why an urgent care operator may decide to forgo allotting space for a physician’s office:

- **Private Offices Can Disrupt Clinic Flow.** Because the collaborative care model—which to be successful demands near-constant communication and a rapid exchange of information—has gained so much popularity, health care designers are now eliminating private offices in favor of shared workspaces.\(^7\) This arrangement is meant to promote and enhance collaboration between physician and staff, along with keeping the physician zeroed-in on clinic activities in real time. The absence of a private office also eliminates the potentially distracting temptations of idle web-surfing, e-mail checking, and television watching behind closed doors, and helps the physician stay focused on the center’s patient flow.

- **Clinics Often Have More Providers Than Space.** Many providers enjoy working in urgent care due to its flexibility—they understand that working three days a week or “floating” locations render an office unpractical and they’d rather be compensated through more tangible benefits. Staff Care, a physician staffing company, reported that a

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2011 survey showed that 75% of health care administrators used locum tenens physicians at their locations in the last 12 months. The use of flexible staffing arrangements is on the rise, and considering how many different physicians may rotate through a given urgent care center, it may seem impractical to assign a private office to any one individual when they'll actually occupy it only part of the time.

- **High Retail Rents Means All Space Must Be Used Judiciously.** Urgent care centers are increasingly locating in shopping centers to capitalize on their increased visibility and traffic to drive visits. However, due to retail’s high rental rates per square foot, all available space must be optimized towards making the center’s operations as efficient and streamlined as possible. This means that the additional square footage required for a separate private physician’s office might instead have to be used for “revenue-producing” patient care and experience.

- **Open Workspaces Can Curb Potential Sexual Harassment Claims.** When it comes to dealing with sexual harassment claims in a medical practice, most experts agree that prevention is the best approach. The same goes for workplace bullying and toxic gossip. If there are no private offices, then there are fewer closed-off, private places an incident can occur either between either a physician/patient or a physician/co-worker. Keeping all interactions in the view of others helps prevent “he-said; she-said”-type conflicts.

- **Privacy Needs Can Be Accommodated.** Just because a physician doesn’t have a private office at the urgent care center doesn’t necessarily mean that he/she will never have a private moment. Newer centers without private offices are instead being designed with quiet rooms, consultation rooms, conference rooms, phone rooms, or provider lounges to accommodate physicians need for occasional privacy while practicing in an open-plan office layout. In centers in which a provider is assigned a block of exam rooms, one room can be used to store personal belongings, for documentation, and staff instruction while the others are used for patients.

- **Changing Provider Expectations.** The lack of a private office is generally not a deal-breaker for today’s physicians, especially younger physicians who are willingly embracing collaboration and technology. Most likely a provider’s friends who work in other fields—including law, engineering and business—work in open-space arrangements. In many “corporate” cultures there is no concept of “personal space”—everything belongs to the company. Also the prevalence of tablet PC’s, iPads and other handheld devices with their abundance of powerful medical apps, tend to engender and support a more mobile medical workforce. Doctors now laud the ability to quickly store and retrieve medical information, take notes and dictation, log in remotely to their PC, and monitor patient vital signs all from a handheld device. For providers who have never owned their own practice, they likely have not expected an office and may actually prefer the flexibility of working wherever, whenever.

**Conclusion**
The decision whether to include a private physician’s office in an urgent care center ultimately has to align with the core values and the culture of the organization—not to mention the bottom line. Is a physician’s office an indispensable tool for running a medical practice smoothly, or is it a waste of money and precious real estate? Are collaborative, streamlined care models and lean principles just the latest trend, or do they reside at the forefront of the most transformative era that the healthcare industry has ever undergone? The answer remains to be seen, but whatever model a center adopts, the end result should always be the same: excellent care delivered and an outstanding patient experience.

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