

BEYOND EVIDENCE -BASED DESIGN

A call to leadership
to create healthcare
environments that
enable flourishing

By Dr. Wayne Ruga and Dr. Susan Kirkcaldy

The history of designing healthcare environments is a story primarily evolutionary. It records the founding of both a discipline in its own right and, over time, a solid base of evidence through research that demonstrates the validity of using design of healthcare environments to improve health outcomes. The industry is challenged to move beyond the foundations of best practice this evidence base has created to pioneer the next evolution in healthcare design practice that better meets the challenges for system-wide change in the industry.

The CARITAS Project is pioneering this new point of evolution from research developed during the last 12 years. The research demonstrates, with a focus on enabling human flourishing, the discipline of designing healthcare environments is making a giant leap forward, requiring an entirely new approach to design practice.





Waterford Health Park is a multi-disciplinary medical facility in Ireland. In 2009, the original historical structure was developed into the health park while conserving existing features. Space was created through the addition of new wings using the latest in sustainable technologies to create a healthy and eco-friendly building taking advantage of solar energy and reusing captured rainwater.

AN EXPANDED UNDERSTANDING OF THE HEALTHCARE ENVIRONMENT

Up until recently, the healthcare environment has been understood to exclusively be constituted by the physical environment, at least as it is understood by most design practitioners, academics and healthcare executives. A natural consequence of this understanding is the physical healthcare environment has become the knowledge domain of architects, interior designers, landscape designers, planners, programmers, facility managers, construction program managers and builders.

The CARITAS Project research calls for a new expanded understanding of the healthcare environment based on the concept of “Generative Space.” This concept integrates both the physical environment with the social environment, or the social experience of a physical environment. Research is demonstrating that through integrating design of healthcare environments it becomes possible for every healthcare environment to create a place to flourish, providing both systemic and sustainable improvements for all.

CALL FOR A NEW GENERATION OF LEADERS

The CARITAS Project research framework involves three core concepts — “cultivating a more generative space;” by “actively exercising health-design leadership;” in order to “create a place to flourish” for all.

The core concept of cultivating a more generative space focuses on an integrated environment that produces life-enhancing experiences, as well as making

improvements both systemic and sustainable in healthcare and in health. In this model, systemic means pattern changing and sustainable means progressively improving over time.

Necessarily, to reframe the current situation and to pioneer a step toward a new approach is the work of leaders, in healthcare design, as in every industry and walk of life. This approach to designing healthcare environments is achieved through a learning process that focuses on increasing mastery in the 22 themes that form the practice of health-design leadership. Practitioners of this new method focus on every single person within any context as a potential leader, recognizing that leadership happens only when it is being actively exercised — acknowledging that when it is not being exercised, nothing happens.

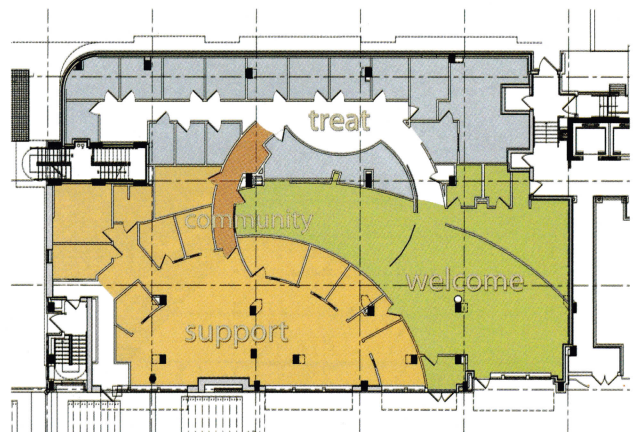
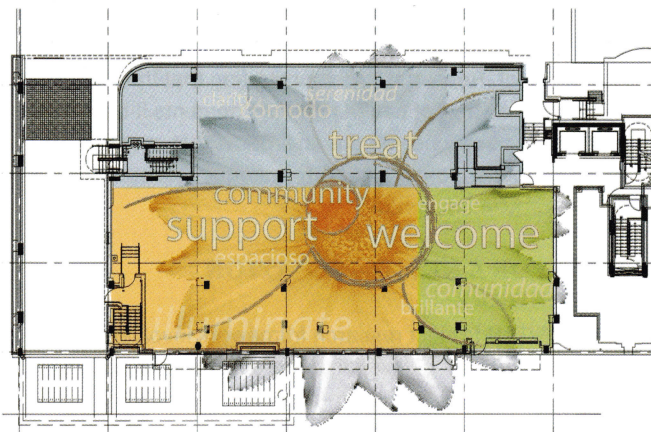
“Creating a place to flourish” is the outcome of practicing this approach. Flourishing is a completely subjective state that requires attention to developing new metrics that identify and capture subjective hopes and experience in tangible outcomes. This is the basis for the continued learning of the Generative Space practitioner, the sustainable improvements that provide the conditions for progressive flourishing, and the accountability that leadership is being effective in delivering its overall organizational vision.

In this new model, each leader at every level is involved in design of the fully integrated environment to create a complete experience that represents the opportunity to flourish for all consistent stakeholders. The range of stakeholders is wholly inclusive: from the patients and their families, loved ones and visitors; to all staff, employees, consultants, vendors and tradespeople; to the entire local community. As each leader “actively exercises health design leadership to cultivate



a more generative space,” they are designing both physical environments and social experiences that correspond with each and every stakeholder’s expectation of how “a place to flourish” should feel.

This new generation of leadership is termed “health design leadership” because it uses the practice of design to create states of improved personal health.



The research and generative space process led to a solution inspired by a simple flower. The core symbolizes the Arlington Free Clinic’s life-enhancing and systemic mission. The conceptualized petals illustrate the components of Arlington Free Clinic: welcome (reception and waiting), treat (medical and behavioral healthcare), support (staff and fundraising services) and community (educating and engaging patient and volunteer communities).



By focusing on improving health, rather than health-care, improvements to healthcare, as well as additional elements in the whole system also benefit from this systemic improvement. Elements include organizational performance, public health indices, individual vitality and overall community well-being.

LEADING PRACTITIONERS

In one application of this method, James Lesslie in Georgia, developed a walking program that so many company employees participated in, the improved composite employee wellness profile enabled the company to reduce its annual health insurance premiums. Simon Henderson in the UK has applied this method to developing the Macmillan Environmental Quality Mark — a rating and benchmarking process raising the bar for improving the quality of the caring experience within the UK's cancer care provider organizations.

Bruce Raber in Canada, of Stantec, has designed a hospital unit to respond to the client request that it be a place that staff would want to come to on their day off. Although the project is being built, the staff appears to be enthusiastic while seeing the design concepts takes built form. Dr. Mark Rowe in Ireland has developed the Waterford Health Park and determined that patient medical compliance has improved because of

the environment enabling patient anxiety to be reduced. Tama Duffy Day, of Perkins + Will, in Washington, D.C. has designed the Arlington Free Clinic that has seen its number of healthcare provider volunteer hours increase as a result of the new facility design.

As the scope of the global healthcare industry has evolved over the decades, the pressure of financial viability has strained both the quality of service and the consistency of providing authentic expressions of caring. Now, through the breakthrough this new evolution of designing healthcare environments is creating, it is within our grasp to expect large-scale improvements across every aspect of healthcare delivery.

Editor's Note: The annual Generative Space Award is presented at the Healthcare Facilities Symposium and Expo. For details, visit www.aplacetoflourish.net.

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From left: Waterford Health Park's atrium area and coffee shop.

Built entirely from donations, Arlington Free Clinic was created to reflect the client's goals of respect, dignity and inspiration.

Waterford Health Park's healing garden is open to the public.