

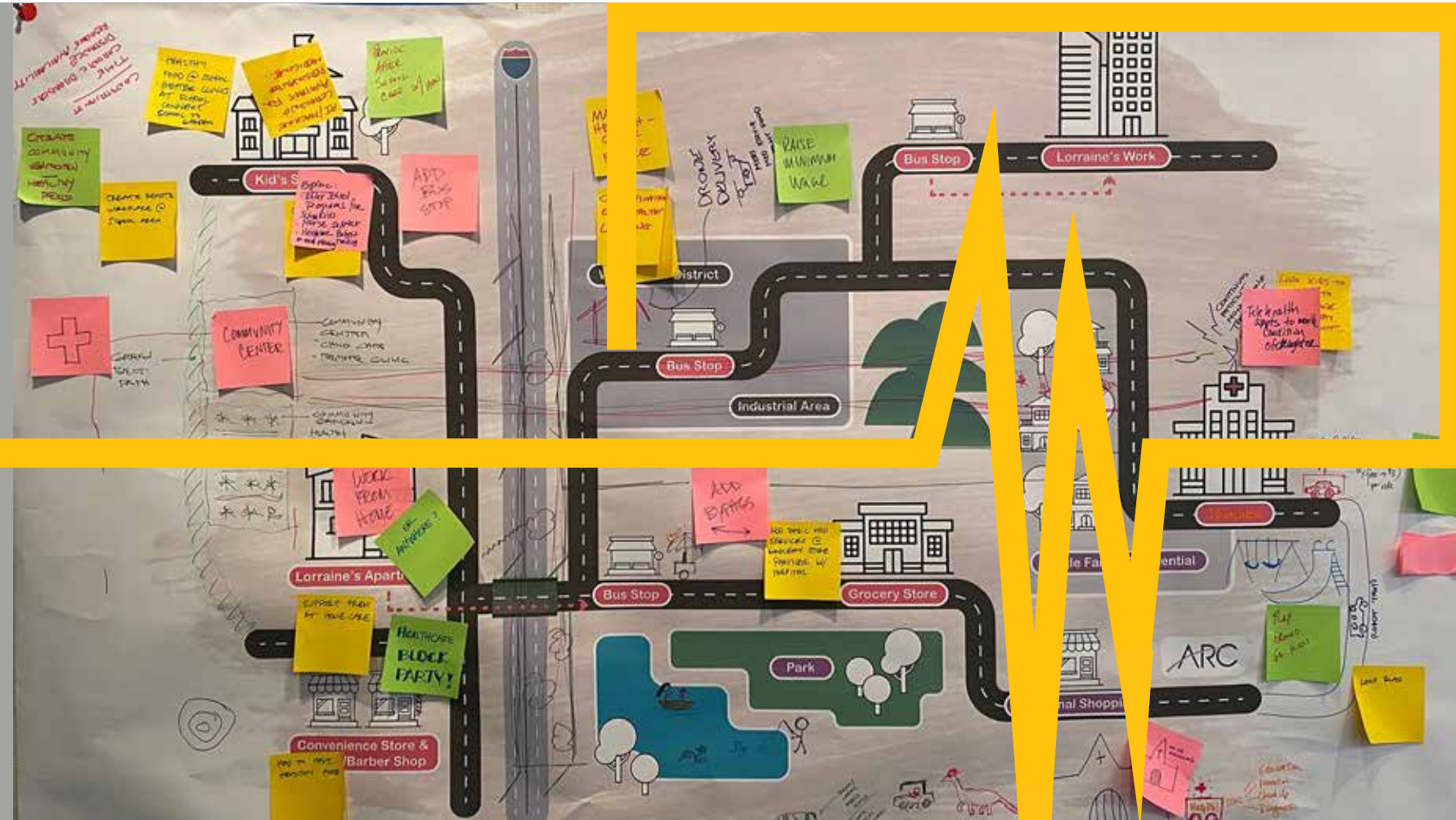
PURPOSEFUL 2022

AN ARCHITECTURE IN HEALTHCARE WORKSHOP

AUGUST 17, 2022

Report: *Exploring the Edges*

Architecture in Healthcare
Committee



Executive Summary: Event Description

The Theme

Exploring the Edges

With the long-term goal of accelerating positive changes and better outcomes in health care environments, our 4th annual interactive workshop sought out more efficient ways of broadening healthcare availability to all segments of the population.

Last year, during Purposeful 2021: REBOOTING HEALTHCARE – we pondered: “If we could click ‘Restart’ what would we stop doing, keep doing, and change to make healthcare delivery faster and more economical, responsive to change, equitable, and accessible to the community?” Our key takeaways were that we need to:

- Learn from our front line staff to make patient care a priority;
- Build adaptability and flexibility into our facilities and our processes; and
- Continue collaborating and collectively pushing each other to innovate and improve healthcare design and delivery.

During Purposeful 2022: EXPLORING THE EDGES – we rolled-up our sleeves and advanced last year’s key takeaways to address specific logistical, scheduling, and economic issues facing an underserved community member “Lorraine”, and ponder the potential solutions outside of the centralized medical center to meet her and her family’s healthcare needs.

With guidance from our esteemed panelists of owner clinical experts, we came up with many bright ideas to help spark some new ways to better serve the disadvantaged and move us forward in more accessible healthcare design and delivery for all.

When

Wednesday, August 17, 2022

Where

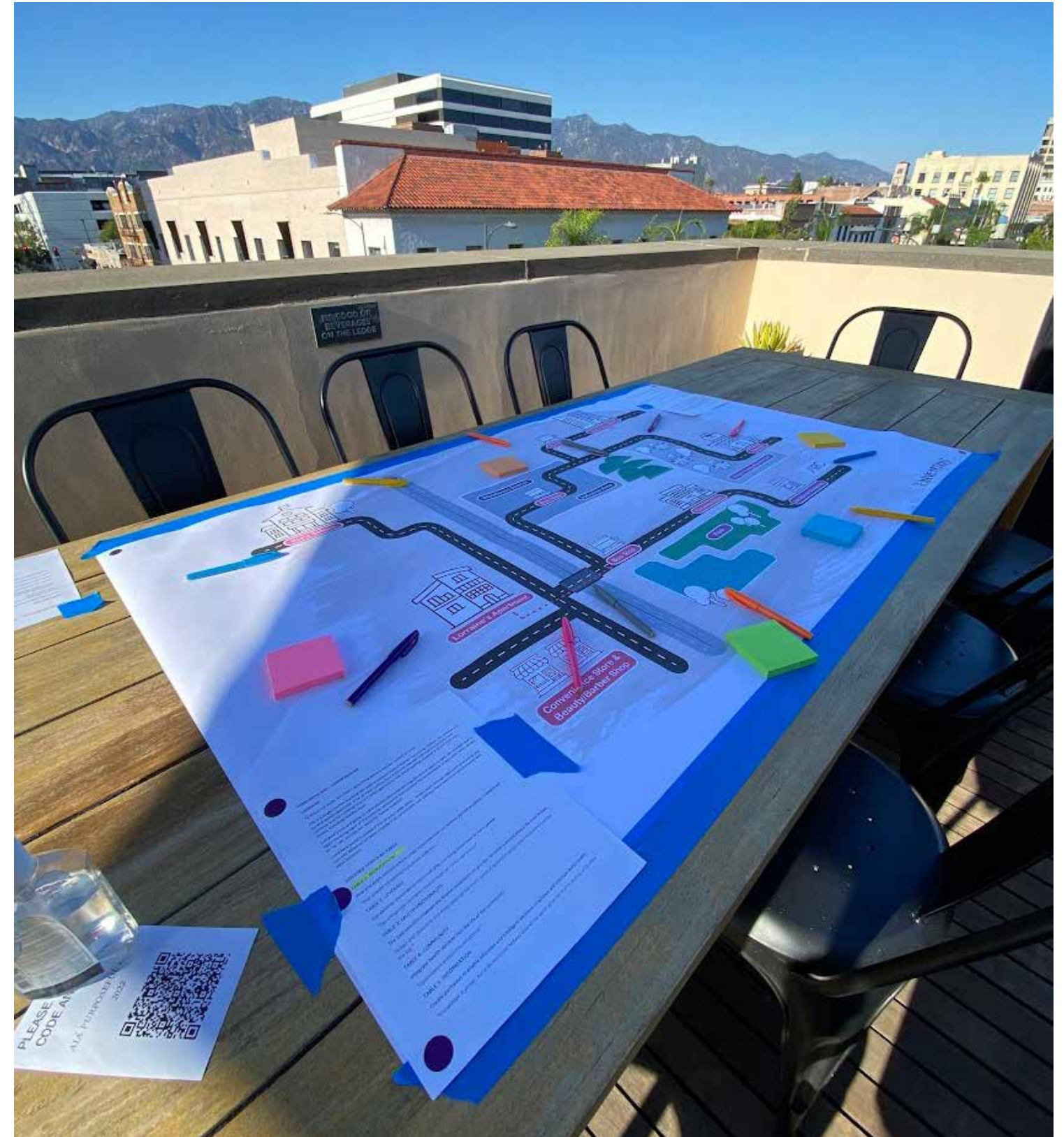
DPR Construction, 88 West Colorado Blvd., Suite 301 Pasadena, CA 91105

Who Attended

80 participants, including healthcare clinicians and facility executives, builders, architects, engineers, and design and construction industry professionals.

Agenda

<u>4:30 – 5:00 pm:</u>	Registration / Networking
<u>5:00 – 5:15 pm:</u>	Welcome and Panel Introductions
<u>5:15 – 5:20 pm:</u>	Opening Presentation
<u>5:20 – 6:50 pm:</u>	Interactive Program: Share Ideas and Panelist Input
<u>6:50 – 7:00 pm:</u>	Takeaways and Closing Comments
<u>7:00 – 7:30 pm:</u>	Networking



Executive Summary: Learning Objectives



Learning Objectives AIA LU/HSW: 2.0

- I. **Collaborate with clinicians** in a group setting to analyze and evaluate project requirements, constraints, and opportunities to re-purpose non-medical buildings to improve the health and welfare of our communities.
- II. **Identify universal design criteria** for sites and buildings, such as space, light, circulation, safety and sustainability, that improve the physical, emotional, and social well-being of under-served patients with flexible and responsive healthcare environments, tailored to multiple modalities.
- III. **Elevate equitable healthcare access** to the underserved by integrating systems, selecting materials, and assembling prefabricated components that save time, assure quality, and reduce the cost of adaptable, multi-functional clinical spaces.
- IV. **Leverage technology** as a shaping force and not additive to the container (e.g. routine telehealth), while envisioning pilot programs for care provision that enhance safety for patients and staff, especially during pandemic situations.



Executive Summary: Our Panelists



Dr. Anita Girard

Chief Nursing Officer & Vice President of Nursing - Cedars-Sinai Medical Center
President - American Nurses Association of California

With a demonstrably successful history of driving quality clinical outcomes in the hospital & healthcare industry, Dr. Anita Girard is an experienced healthcare leader in nursing management, evidence-based practice, patient advocacy, nursing education, and mentoring new leaders. She has significant experience related to LEAN implementation and ANCC Magnet Designation in healthcare systems. Dr. Girard is actively engaged in local, state, national and international communities to promote the nursing profession and improve the quality of healthcare. Dr. Girard earned her Doctor of Nursing Practice focused in Executive Leadership from the University of San Francisco.



Dr. Diane St. Fleur

Chief Medical Officer of Operations and Medical Director of Child Division
Kedren Health

Dr. Diane St. Fleur is a triple board-certified psychiatrist with certification in the following specialties: adult psychiatry, child and adolescent psychiatry and forensic psychiatry by the American Board of Psychiatry and Neurology. She is passionate about serving children and their families including those that suffer from trauma, addiction, and disrupted community cohesiveness. She has been trained in Dialectal Behavioral Therapy (DBT), Deconstructive Dynamic Psychotherapy (DDP) and Motivational Interviewing. A graduate of Cornell University, Dr. St. Fleur obtained her Doctor of Medicine at Upstate Medical University in Syracuse, New York, where she also completed her residency and with a Fellowship in Forensic Psychiatry.



Laura Grant

Executive Director of Strategic Implementation and PMO
City of Hope Orange County

Laura Grant, an operational and strategic healthcare leader with a clinical background, currently serves as the Executive Director of Strategic Implementation and PMO for City of Hope Orange County. Laura has a diverse background with leadership roles in clinical operations, performance improvement, IT, business development and hospital administration. Laura earned her MA in Organizational Leadership and Development from Chapman University.



Kimberlee Roberts

Senior Director, Clinical Services
Scripps Health

As the Senior Director Clinical Services at Scripps Health, Kimberlee is an accomplished healthcare professional with more than 30 years of progressive experience in strategic planning, program development, project management, clinical operations as well as facilities design. As part of the executive team, she has operational responsibility for oversight of more than 20 departments at Scripps Memorial Hospital La Jolla.



Executive Summary: The Format



The Format

Introducing “Lorraine”

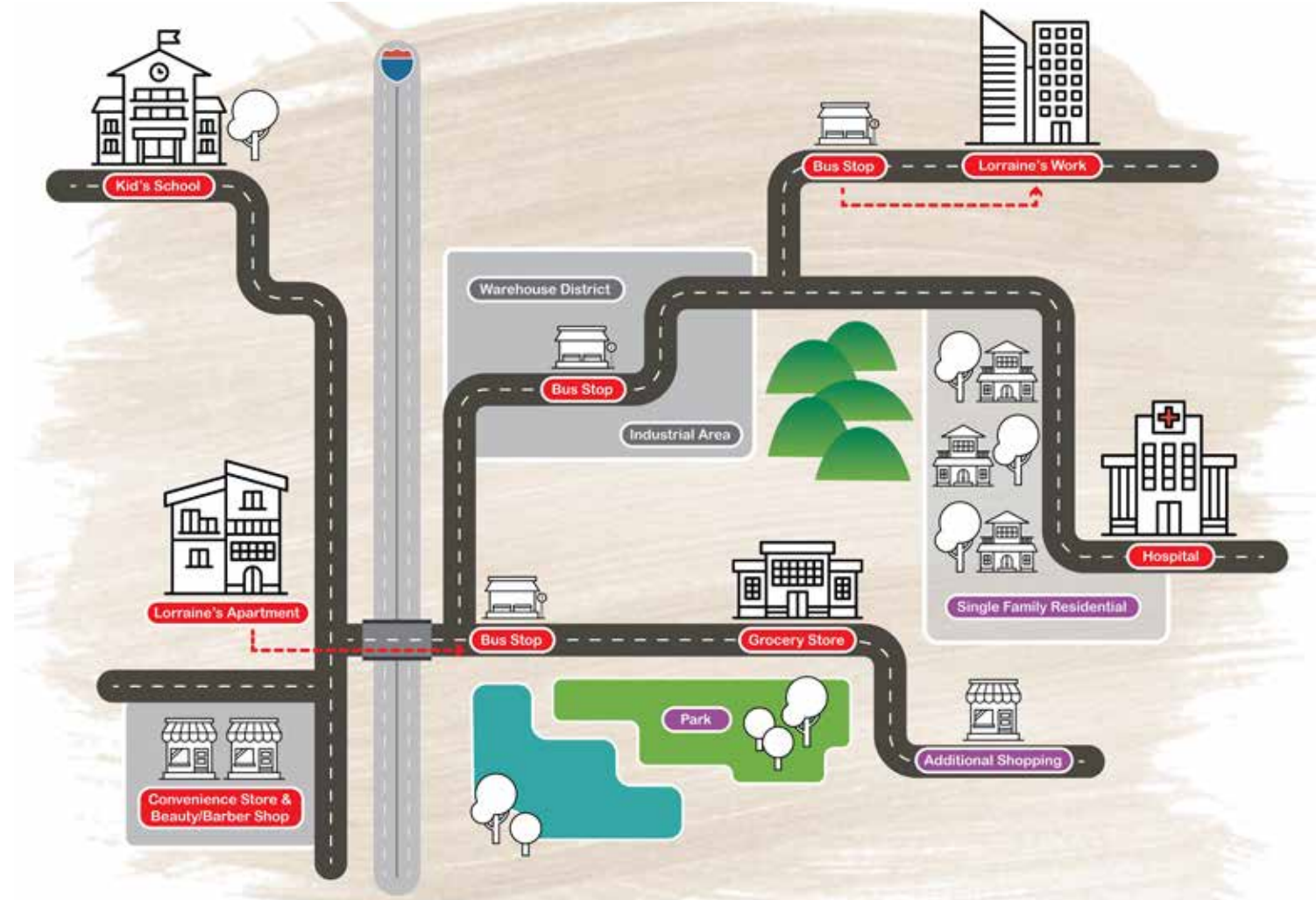
To center our Interactive Program, we introduced Lorraine - a single mother working two jobs to support herself and her two young children - six and eleven years old. They live in a small apartment, not within walking distance of any of their daily needs, including access to fresh healthy food. Her younger child suffers from a chronic disorder and needs periodic urgent care, which requires her to miss work and forgo pay. How can we help to keep Lorraine and her family healthy?

Charette Process

Lorraine’s day-to-day world was diagrammatically mapped out, showing the following buildings, public spaces, districts, and infrastructure:

- Lorraine’s Apartment
- Kids’ School
- Convenience Store, Beauty/Barber Shop
- Warehouse District/Industrial Area
- Lorraine’s Work
- Single Family Residential
- Hospital
- Grocery Store
- Additional Shopping
- Park
- Interstate
- Roads
- Bus Stops

As participants considered Lorraine’s family’s circumstances, they worked through ideas with our table facilitators and panelists and wrote them down on the table maps. Every 20 minutes, our four panelists rotated each table, providing their thoughtful insights and meaningful feedback.



Executive Summary: Table Topics

Table Topics

Each Table focused on the following five topics:

Table 1) Reinvention:

Apply solutions from other industries that can address parallel problems in healthcare.

Table 2) Leverage:

Use existing resources to maximum effect to bring better care to more people.

Table 3) Multifunctionality:

Best solutions impose fewest constraints on process; simpler is almost always more flexible.

Table 4) Community:

Integrate health services into the life of the community.

Table 5) Information:

Create pathways to enable informed, intelligent decisions; achieve and maintain better health.



Moderator and Table Facilitators

Sarah Winters

Moderator
ZGF

Tina Giorgadze, Assoc. AIA

Table Facilitator
Perkins&Will

Kevin Kim, AIA

Table Facilitator
Leo A Daly

Ashley Mangus, Assoc. AIA

Table Facilitator
HGA

Parini Mehta, AIA

Table Facilitator
CO Architects

Meredith Meyers

Table Facilitator
Cunningham

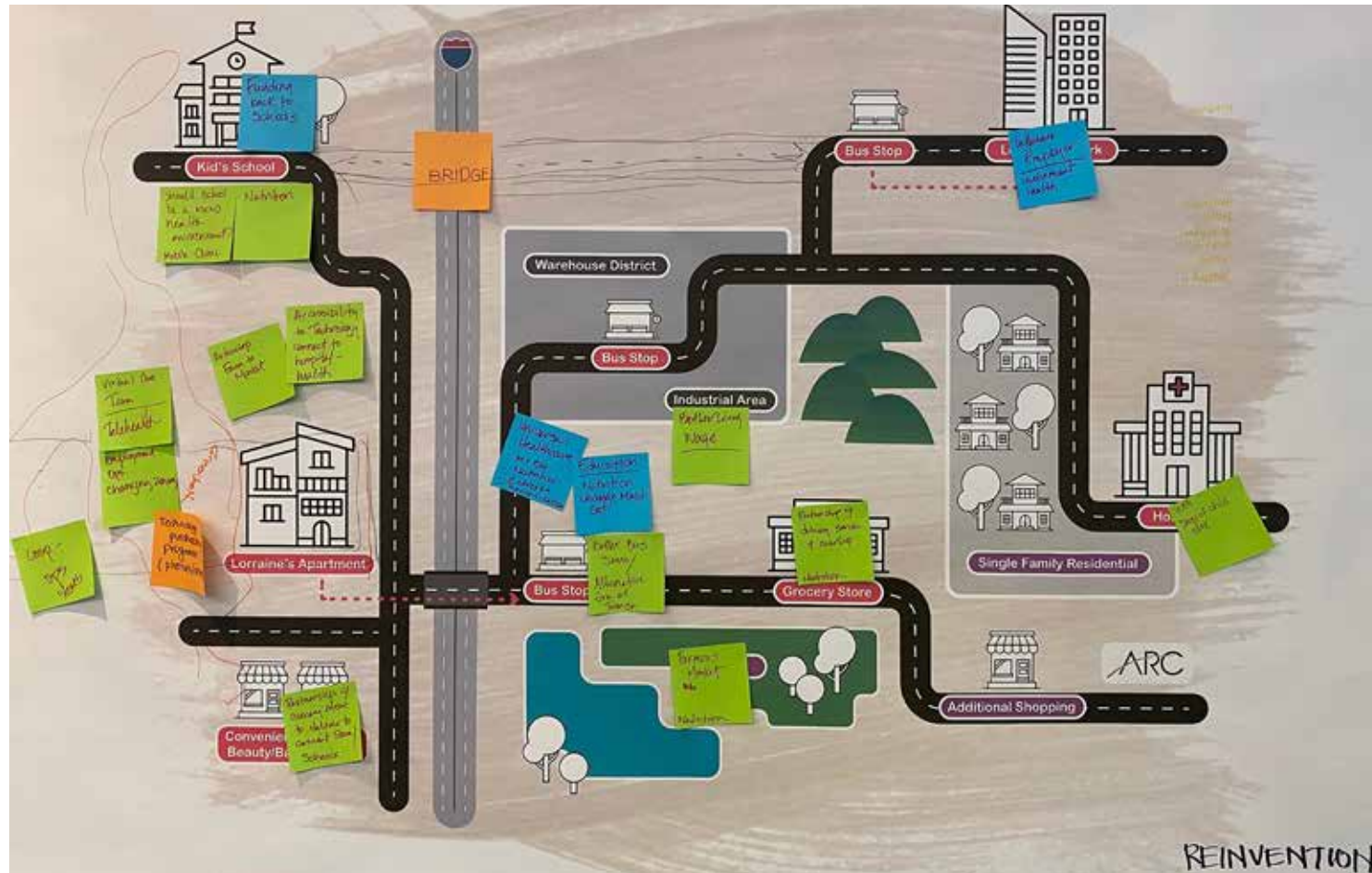


Table Discussions

Table 1: REINVENTION

EXPLORE: Finding and applying solutions from other industries that can address parallel problems in healthcare

CONSIDER: "And now for something completely different..."



STRATEGIES:

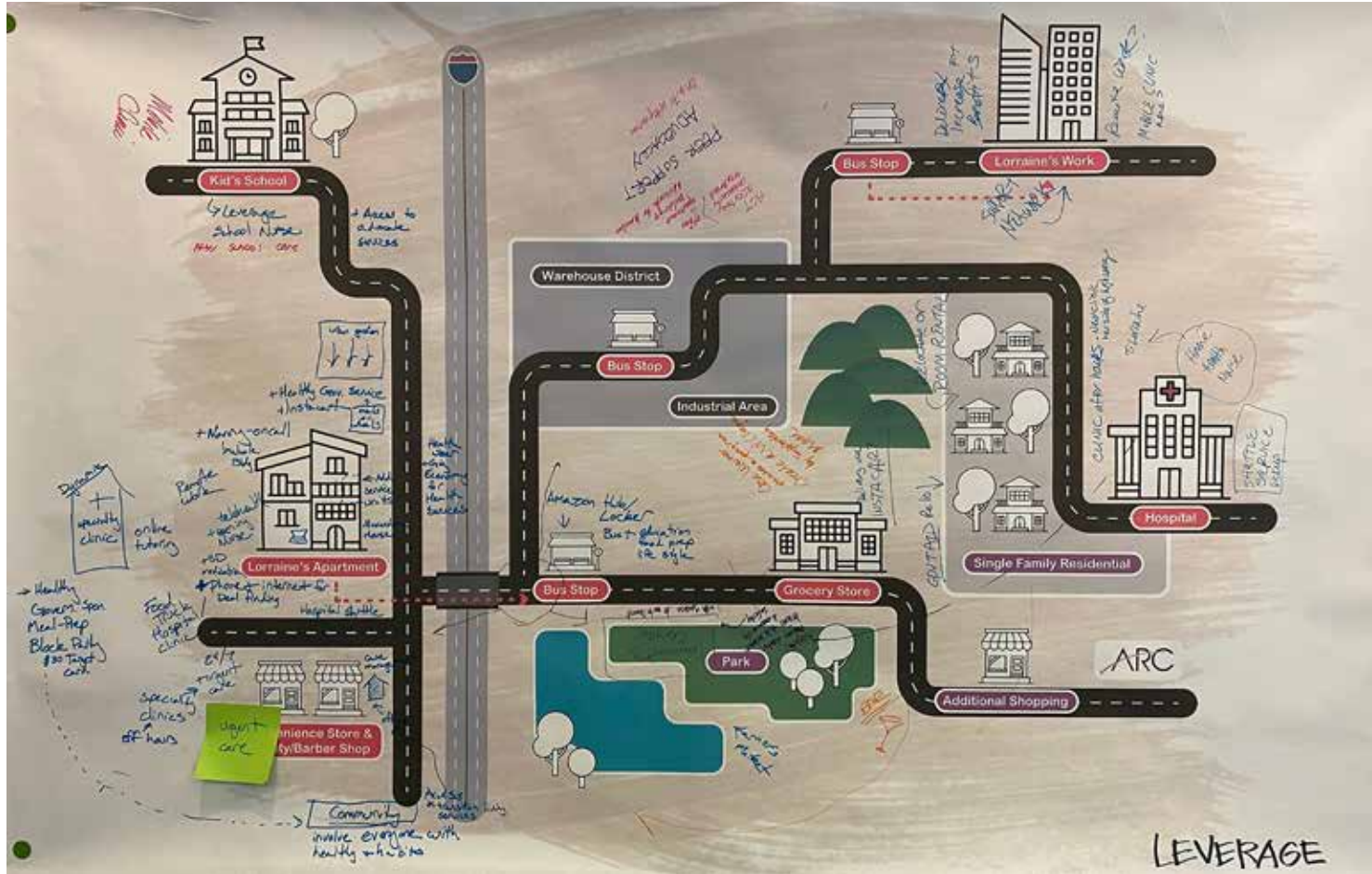
Health is: access, exercise, socializing, food, healthcare

Lorraine's Apartment	<ul style="list-style-type: none"> Virtual Care team/tele-health Change zoning/employment opportunities Co-ops/stores Greenbelt Technology Purchasing Programs - phone, computers
Kids' School	<ul style="list-style-type: none"> Funding back-to-schools Micro-health, mobile clinic, accessibility/connect to hospital-health Redevelop farm-to-market, nutrition Bridge over freeway to Lorraine's work
Convenience Store, Beauty/Barber Shop	<ul style="list-style-type: none"> Partnership with grocery store to deliver to convenience store/schools
Warehouse District/Industrial Area	<ul style="list-style-type: none"> Better living wage Education, nutrition - change mindset Universal healthcare - mental, behavioral health, nutrition, exercise, socialization Better business services, alternative forms of transportation
Lorraine's Work	<ul style="list-style-type: none"> Influence employer - health involvement
Hospital	<ul style="list-style-type: none"> On-campus - recreation, housing, school, grocery, transportation, co-working Drop-off childcare More outreach - preventative, interact with social Ikea
Grocery Store	<ul style="list-style-type: none"> Partnership with delivery service with overlap/nutrition
Park	<ul style="list-style-type: none"> Farmers' market/nutrition

Table 2: LEVERAGE

EXPLORE: Using existing resources to maximum effect to bring better care to more people

CONSIDER: "Two things you can never have enough of – time and money"



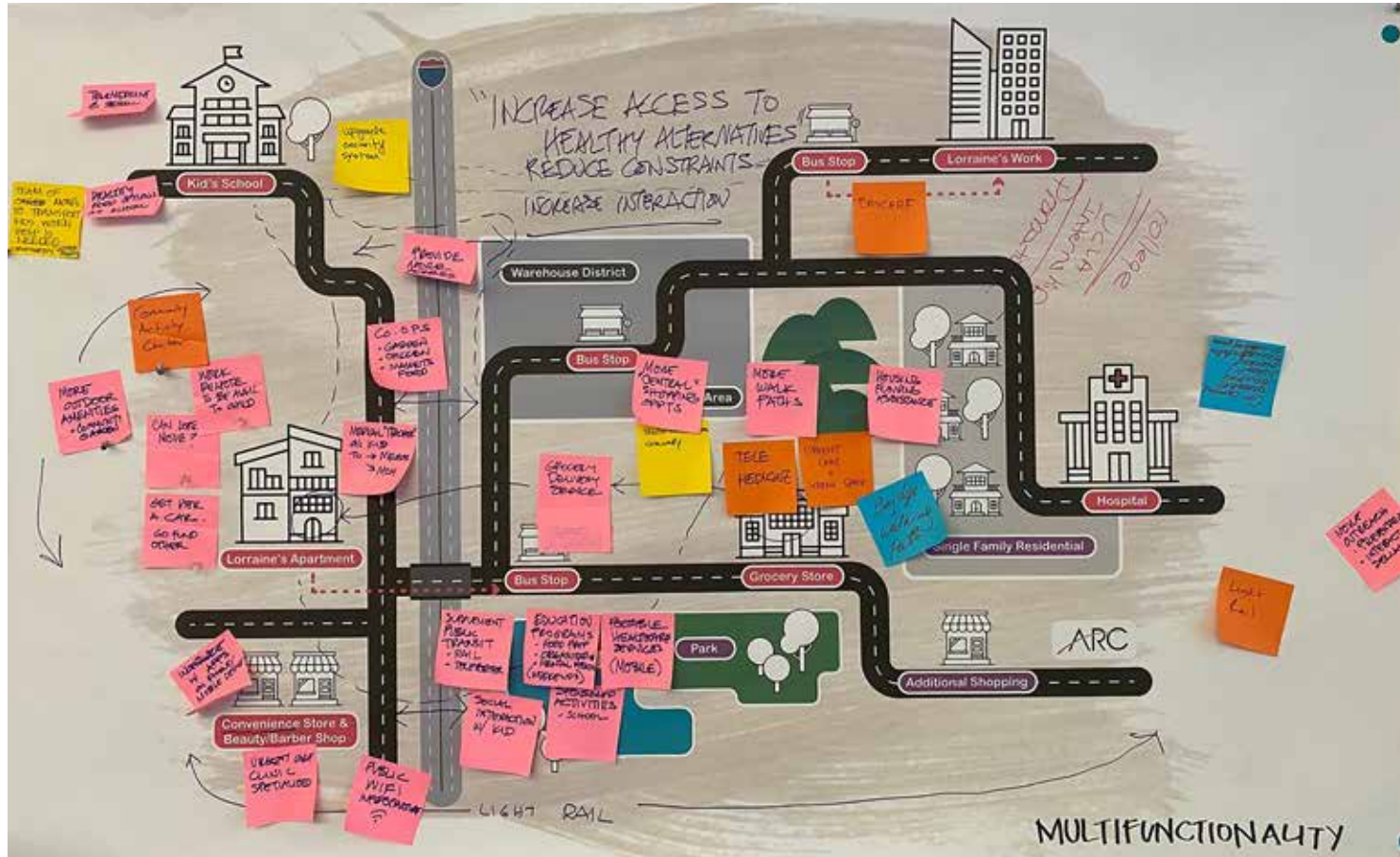
STRATEGIES:

It takes a village: Create a village by supporting mom

Lorraine's Apartment	<ul style="list-style-type: none"> • Urban garden, food truck • Government healthcare service (Instacart, Meals-on-Wheels), dynamic specialty clinic, telehealth, roaming nurse, mobile clinic • 3-D medication, deal-finding via phone/Internet • On-call nanny for whole building • Remote work, online tutoring
Kids' School	<ul style="list-style-type: none"> • Leverage school nurse/after school care • Mobile clinic • Access to advocate services
Convenience Store, Beauty/Barber Shop	<ul style="list-style-type: none"> • 24/7 urgent care, off-hours specialty clinics • Case management/Healthy Habits • Transitional Living Access
Warehouse District/Industrial Area	<ul style="list-style-type: none"> • ACT - Assertive Community Treatment • Offices/Apartment Advocate for families, peer support advocacy, onsite integration • Amazon Hub/locker • Business/food-prep education/lifestyle
Lorraine's Work	<ul style="list-style-type: none"> • Increase full-time benefits, support network, remote work • Mobile clinic
Hospital	<ul style="list-style-type: none"> • After-hours clinic/new clinic on other side of Interstate • Home Health Nurse for Lorraine • Shuttle service/pick-up
Single Family Residential	<ul style="list-style-type: none"> • Government Aid Relocation • Room rental
Grocery Store	<ul style="list-style-type: none"> • Instacart delivery
Park	<ul style="list-style-type: none"> • Community Center with garden and nutritionist/Farmers' Market • Hospital Trauma Center • Bike Helmet/Community Safety

Table 3: MULTIFUNCTIONALITY

EXPLORE: Best solutions impose the fewest constraints on process; simpler is almost always more flexible
CONSIDER: "Tools that do only one thing take up too much space; spaces that serve only one purpose are too big"



STRATEGIES:

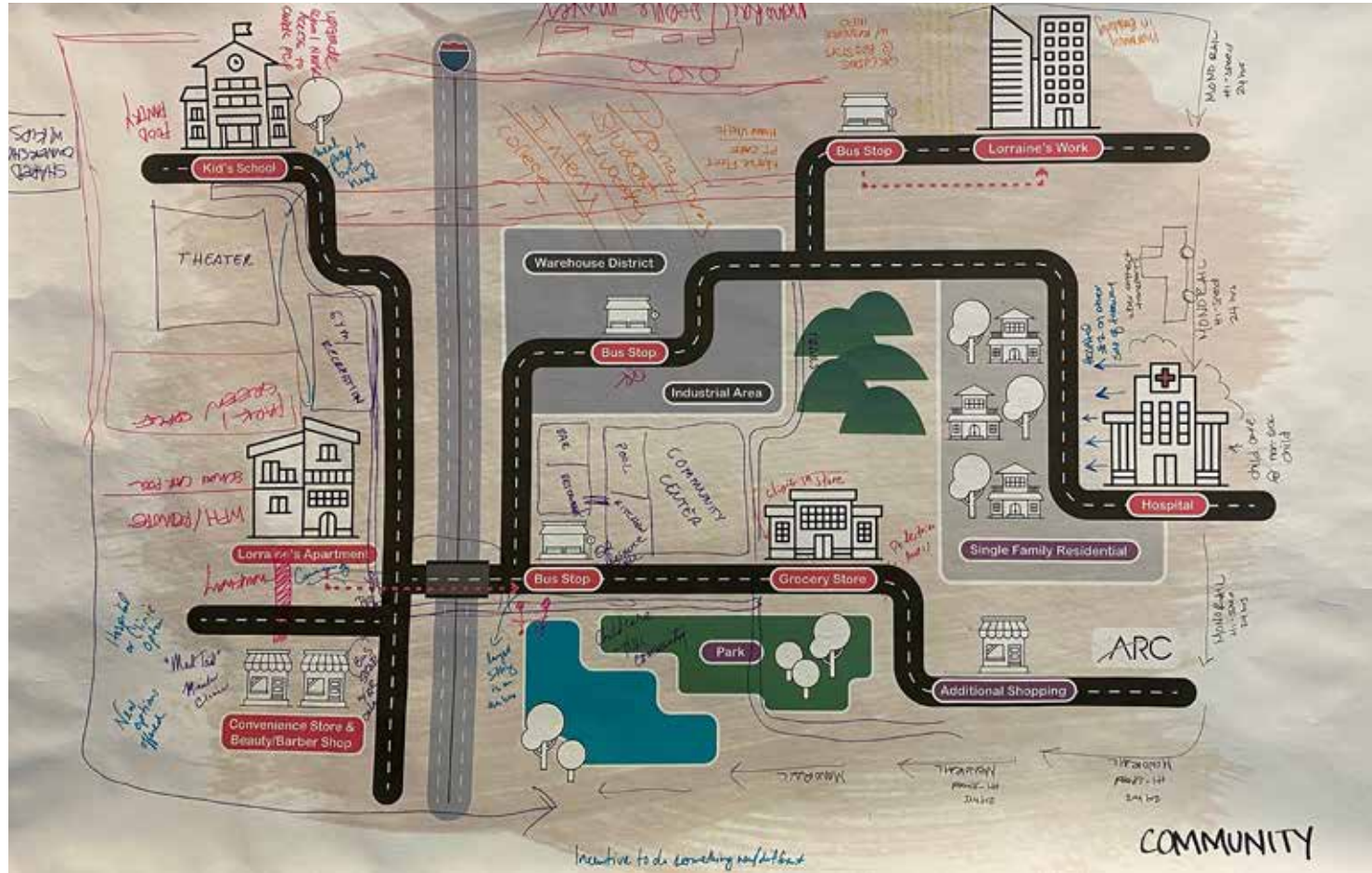
Increase access to healthy alternatives; reduce constraints, increase interaction

Lorraine's Apartment	<ul style="list-style-type: none"> • Can Lorraine move? • Remote work • Fund car transportation
Kids' School	<ul style="list-style-type: none"> • Telemedicine • Team of moms to transport kids; remote trackers for kids • Community activities, community garden/outdoor amenities • Healthy food options, food co-ops, garden, markets
Convenience Store, Beauty/Barber Shop	<ul style="list-style-type: none"> • Public Wi-Fi infrastructure • Mobile device/apps incentives • Specialized urgent care clinic
Warehouse District/ Industrial Area	<ul style="list-style-type: none"> • Multi-cultural Community Center • Grocery delivery service, replace junk food with healthy food
Lorraine's Work	<ul style="list-style-type: none"> • Daycare • College internship • Promotion?
Hospital	<ul style="list-style-type: none"> • On-campus: recreation, housing, school, grocery, transportation, co-working • More outreach - preventative, interact with social
Single Family Residential	<ul style="list-style-type: none"> • Housing funding assistance/government-aided relocation • Room rental
Grocery Store	<ul style="list-style-type: none"> • More walking paths, bridge, green space • Telemedicine, urgent care
Additional Shopping	<ul style="list-style-type: none"> • Lightrail
Park	<ul style="list-style-type: none"> • Social interaction for kids • Supplement public transit - rail, teleporter • School-sponsored/weekend programs: food prep, organization, mental health • Mobile healthcare services

Table 4: COMMUNITY

EXPLORE: Integrating health services into the life of the community

CONSIDER: "Convenience overcomes reluctance"



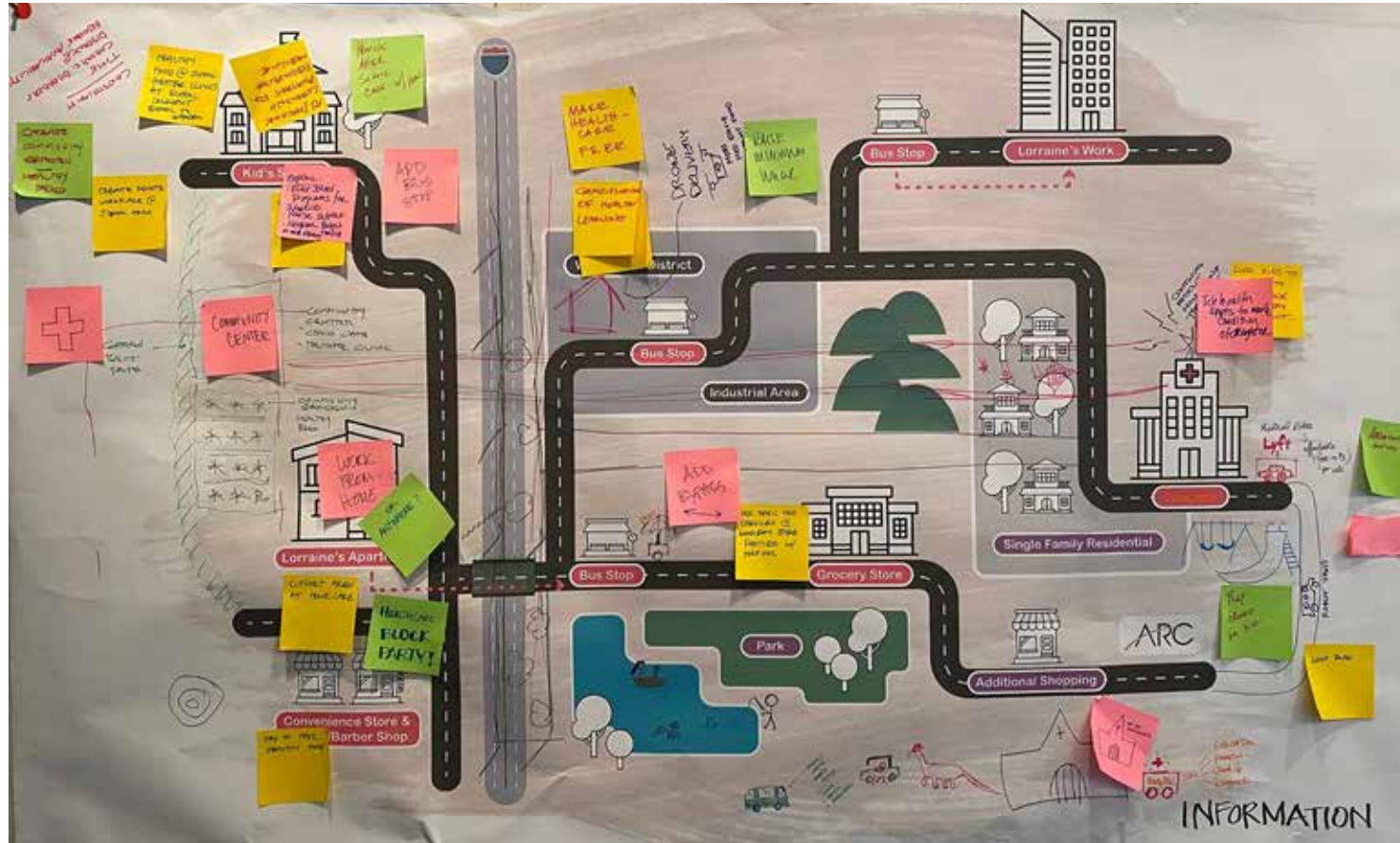
STRATEGIES:

Create incentives to do something new/different

Lorraine's Apartment	<ul style="list-style-type: none"> • Community within Apartment Complex • Walkway connected to Convenience Store • Pedestrian access over Interstate • Remote work
Kids' School	<ul style="list-style-type: none"> • Shared ownership with kids • Upgrade child nurse to Primary Care Physician • Food pantry, meal-prep to bring home • Theater/gym, recreation park/greenspace • Carpool
Convenience Store, Beauty/Barber Shop	<ul style="list-style-type: none"> • New food options • Minute Clinic
Warehouse District/Industrial Area	<ul style="list-style-type: none"> • Nurse fleet, PT care, home visits • Student advocacy, interns, college • Monorail/people mover • Community Center, pool, kitchen, restaurant, bar
Lorraine's Work	<ul style="list-style-type: none"> • Longest time Lorraine sits is on the way to work - education app • Pharmacy in the building
Hospital	<ul style="list-style-type: none"> • Build another branch on other side of Interstate • Monorail • Childcare • Uber
Grocery Store	<ul style="list-style-type: none"> • Clinic • Pedestrian access to the Park
Park	<ul style="list-style-type: none"> • Community Childcare
Bus Stops	<ul style="list-style-type: none"> • QR Codes

Table 5: INFORMATION

EXPLORE: Creating pathways to enable informed and intelligent decisions achieve and maintain better health
CONSIDER: “Knowledge is power; a lie can travel halfway around the world while the truth is still putting on its shoes”



STRATEGIES:

Reduce constraints: time, chronic disorders, resource availability

Lorraine's Apartment	<ul style="list-style-type: none"> • Work from home, or anywhere • Support from at-home care • Healthcare block party
Convenience Store, Beauty/Barber Shop	<ul style="list-style-type: none"> • Healthy food
Warehouse District/Industrial Area	<ul style="list-style-type: none"> • Free healthcare • “Game-ification” of healthy learning • Use warehouse for drone delivery, meds, equipment, healthy food storage • Raise minimum wage
Hospital	<ul style="list-style-type: none"> • Telehealth appointments to maintain condition of kid • Link kids to moms with smart phone app to stay in contact • Continuous patient monitoring throughout community • Medical rides - affordable/free • Affordable housing • Add bus stops • Robot taxi
Single Family Residential	<ul style="list-style-type: none"> • Playground • Loop road
Grocery Store	<ul style="list-style-type: none"> • Add bypass = connect to Lorraine's apt • Add basic med services, partner with hospital • Fruit stand
Additional Shopping	<ul style="list-style-type: none"> • Church for all religions • Mobile clinic: education, check-up, prevention, diagnostic
Park	<ul style="list-style-type: none"> • Friendly looking mobile dental, medical, behavioral clinics

What We Learned: Some Panelist Takeaways

“ . . . we need to bring all the services to Lorraine . . . I’ve been telling the groups: hospitals in the future are going to be for heart transplantation only; if you’re not dying . . . you’re not coming to the hospital! You’re going to have . . . a SWAT team of nurses that come to your house . . . to start your IV while the tele-health doctor’s in the background giving some of the orders and instructions”

- Dr. Anita Girard



“ . . . one of the things that I heard people say, and I also was emphasizing it, is educating the children will motivate the family. So you really put that into the kiddos . . . incentivize them: ‘Hey mom, if we go for a walk, I get so many points, and that gets me new tennis shoes.’ And you know what? . . . Mom wants new shoes! . . .”

- Laura Grant



“The story of Lorraine reminds me of a lot of the children and family that I’ve worked with . . . One of the questions I asked that each table was: ‘Is the chronic illness medical or behavioral?’ And I believe most tables, if I’m not mistaken, assumed that it was a medical illness. But in fact, behavioral illnesses are more prevalent in youngsters . . .”

- Dr. Diane St. Fleur



“ . . . The idea of providers coming to a location seeing a multitude in their own community . . . somebody had the grocery store next to a community garden . . . why don’t you throw in nutrition education and a teaching kitchen? . . . And a lot of groups did that . . . it also addressed some of mom’s . . . resources and support structure, and her mental health . . .”

- Kimberlee Roberts

What We Learned

In Summary

During our dynamic and interactive event, attendees offered and absorbed great ideas and revelations, as well as simple tweaks that can make a big difference. Based on the invaluable input from our panelists, we came away with the following key takeaways:

- Bring care to the community with SWAT teams of nurses and providers
- Bring the gig economy to healthcare
- Incentivize adults and children to adopt healthy habits
- Educate youth about health to advance the whole family's well-being
- Hospital of the future: critical procedures and intensive care only
- Hospital campuses should emphasize: outdoor spaces, dog parks, amenities, and become an extension of the neighborhood
- Address greater prevalence of behavioral disorders in youth

Conclusion

For some of us, preserving health has to become a “Grab ‘n’ Go” activity, integrated into our busy lives. During Purposeful 2022, we discovered that for many community members, the demands of daily life make it difficult to pay attention and take the time to maintain health for themselves and those who depend on them. We realized that to segregate and centralize routine care is to deprive healthcare access to many. Therefore, we, as providers and creators of health delivery systems, must learn to fashion care resources that address this reality, and that can preserve and improve health by integrating more care into our underserved neighbors' daily living.

This was the work of “Exploring the Edges.”



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