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### Patient-Centered Design Online™

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# **Current Projects**

For more information, please visit

www.patientcentereddesign.org

#### **Patient Toolkits**

As a courtesy to patients who participate in research studies and surveys, we offer complimentary tools. Kits may include promotional items, such as pens, notebooks or journals for recording patient history, bags for packing personal items for a hospital stay, water bottles, etc. If your organization is interested in providing helpful items that may be offered to patients, or a monetary donation to purchase such items, please visit

patientcentereddesign.org/sponsorship

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## Lean Design is Patient Centric!

Written by Tammy S. Thompson

In my role as the co-chair of the American Institute of Architects (AIA) Academy of Architecture for Health (AAH) of Georgia, I serve as one of the organizers of this group's quarterly events. During the planning stages of the most recent event, we administered a survey to the AAH of GA mailing list of healthcare designers and allied professionals to allow them to select the topics that they consider important in the profession. I was not surprised to discover that the majority of our group's participants were most interested in learning about lean healthcare. As an architect, I find that more and more designers are seeking information on this subject to respond to the needs of their clients and to become well versed on an emerging design consideration in healthcare projects.

Last month, Herman Miller Healthcare presented an AIA registered Continuing Education lecture during AAH of Georgia's quarterly meeting in Atlanta. The lecture was delivered by Roger Call, AIA, ACHA, LEED AP; Director of Healthcare Architecture and Design for Herman Miller Healthcare and presented by Herman Miller Healthcare in Atlanta.

Call explained to the group that Herman Miller has entered into a mentorship relationship with Toyota in order to learn about its lean processes (although Toyota doesn't call it lean) with the intent of implementing a similar system for its operations. He went on to explain the core concepts of lean, what lean *is not*, and how it relates to healthcare clients.

According to Call, lean design is a system that focuses on understanding and meeting customers' needs through engaging and investing in the development of employees. He explained that its goal is not to eliminate jobs, but rather to identify

waste and inefficiencies in an assembly line process model and to empower every member of the team to contribute to successful outcomes, getting what they need, when they need it, in the correct amount, thereby eliminating waste.

Roger Call highlighted seven forms of waste, giving healthcare examples for each. Many of his examples are summarized below.

- 1. Over production: Scheduling all patients to arrive at one time
- 2. Waiting: Caregivers required to wait for the necessary tools to provide patient care
- 3. Conveyance: Transporting patients, equipment and supplies
- 4. Process: Numerous schedules in systems that are not in sync
- 5. Inventory: Wrong supplies in the wrong locations
- 6. Motion: Inefficient travel distances or unsafe movement for caregivers
- 7. Correction: Unnecessary time and expense to resolve a problem created by a flawed process, such as medical errors

As I listened to these examples, there seemed to be an apparent relationship between the forms of waste and the common obstacles that lead to patient frustration and dissatisfaction. As an advocate for thoughtful patient-centric design, I found it quite refreshing that such a thoroughly tested, well-defined process is currently being implemented in health facilities. This not only positively transforms the operations of health systems, but it also supports improved patient outcomes and patient satisfaction.

Herman Miller Healthcare identifies lean as "a system that focuses on understanding and meeting our *customer's* needs exactly through the

#### **Lactation Design**

Institute for Patient-Centered Design has embarked upon an exciting new program entitled "Lactation Design." This program consists of research and outreach projects that will enable the Institute to contribute design resources to facilitate improved accommodations for breastfeeding.

#### **Outreach:**

The Institute is hosting breastfeeding peer support events in the metropolitan Atlanta area to provide resources for stay-at-home and working breastfeeding mothers, as well as pregnant mothers interested in breastfeeding. Funding is pending. Please visit <a href="https://www.miningMoms.com">www.miningMoms.com</a> for more information.

#### Workplace Initiative:

We are working with organizations within the lactation support and design communities to develop resources for companies that wish to provide lactation accommodations for their employees. For more information, please visit <a href="https://www.MomFriendly.org">www.MomFriendly.org</a> and join The MomFriendly.org

#### Research:

We are currently fundraising for a research project that will enable us to examine the impact of the physical environment on a mother's decision to breastfeed in the hospital. The initial research paper examining this topic was published in the Spring 2011 Issue of the Health Environments Research & Design Journal

To learn about sponsorship opportunities, click <u>here</u>.

engagement and development of our employees" and a "system that seeks and enables higher and higher levels of performance through thinking and learning (Call, 2012)." This strategy can be embraced by healthcare designers, developing solutions that allow each member of the healthcare team to perform to the standards that today's patients expect. In essence, lean healthcare design is also patient-centric, offering a structured approach for positioning patients' needs in a healthcare project and maintaining momentum with continuous evaluation of its success. This is a promising step forward that will surely benefit our patient-end users and the entire care team!

Institute for Patient-Centered Design offers 10 Principles of Patient-Centered Design developed as guidelines for the design process. To view these principles, please visit

www.patientcentereddesign.org/fordesignprofessionals.

For more information on Herman Miller's work in lean healthcare, please visit

www.hermanmiller.com/research/solution-essays/lean-healthcare.html.

#### References:

Call, R. (2012) "Lean Design in Healthcare Facilities." AIA AAH of GA Quarterly Networking, Continuing Education Event.

#### Other Resources:

To view the report that sparked the movement to reduce medical errors, see Institute of Medicine, To Err is Human, <a href="http://www.iom.edu/Reports/1999/To-Err-is-Human-Building-A-Safer-Health-System.aspx">http://www.iom.edu/Reports/1999/To-Err-is-Human-Building-A-Safer-Health-System.aspx</a> For more information on patient dissatisfaction, please view

http://intqhc.oxfordjournals.org/content/20/6/412.full.pdf+html

For more information on healthcare quality standards, see

The Joint Commission,

http://www.jointcommission.org/

Agency for Healthcare Research and Quality (ARHQ), <a href="https://www.arhq.gov">www.arhq.gov</a>

Tammy S. Thompson, NCARB, CLC is the president and founder of Institute for Patient-Centered Design, Inc. As a registered architect specializing in health facility design, a published author and speaker, Thompson serves as a patient advocate at the design table. She may be reached at thompson@patientcentereddesign.org.

#### Guest Link\*:

Submitted by Katie Matlack

How to Succeed with Electronic Medical Records: 8 Tips from Real Users

Katie Matlack is the Medical Software Analyst at Software Advice, a software company based in Austin, Texas that helps people make choices about medical and home health software. For more information, please see her <u>article</u>.

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**HEALTHCARE** DESIGN is "the Premier Conference that Informs, Engages and Shapes the Future of Healthcare Facility Design!"

Save the Date for the 2012 HEALTHCARE DESIGN Conference November 3 - 6, 2012 | Phoenix, AZ http://www.hcd12.com

Institute for Patient-Centered Design is proud to continue our association with the HEALTHCARE DESIGN Conference! This annual event engages the leaders in healthcare facility design on the most current, innovative, and evidence-based advances in the field. This year, we will hold a special workshop entitled "Patient Experience Simulation Lab" as well as the Second Annual Patient-Centered Design Reception. Please save the date! We look forward to meeting you there!

#### The Patient Empowered Room:

Institute for Patient-Centered Design is hosting a national design competition to develop "The Patient Empowered Room." For email notification on the call for submissions, please join our mailing list.

# Understanding the Patient in Patient-Centered Design™

The Institute provides educational information for healthcare design professionals on the unique needs that should be addressed in the design of health and wellness facilities. For free and discounted downloads of our white papers, please visit

http://www.patientcentereddesign.org/education series/all courses.



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and find our blog at PatientCenteredDesign.blogspot.com

Please feel free to contact the editor with your questions, comments, or concems at

editor@patientcentereddesign.org

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## **Calendar of Events**

March 19 - 22, 2012

Hospitals and Communities Moving Forward with Patient-and Family-Centered Care: An Intensive Training Seminar Atlanta, GA www.ipfcc.org

April 17, 2012

AIA AAH of GA Networking Event, Sponsored by Getinge USA Atlanta, GA

http://www.aiaatlanta.org/displaycommon.cfm?an=1&subarticlenbr=91

April 29 - May 1, 2012

2012 Environments for Aging Conference Orlando. FL

http://www.environmentsforaging.com/ME2/Sites/Default.asp?SiteID=4F2E80FF1A3D4635890466464EA028A5

June 4-6, 2012

The 5<sup>th</sup> International Conference on Patient-and Family-Centered Care Washington, DC www.ipfcc.org

As a courtesy to site users, we have listed information about upcoming events and links to related websites for more details. This does not necessarily constitute a relationship between Institute for Patient-Centered Design and any of the websites, events or organizations listed. Nor does this represent an endorsement or guarantee of any kind. While we strive to keep such information updated, we make no legal or otherwise binding commitment to do so. We do not guarantee any of the information on the websites listed. Nor do we guarantee the events themselves.

The views and opinions expressed in this newsletter do not necessarily reflect the views of the Institute for Patient-Centered Design, Inc. We respect the rights of patients, family members and professionals to express their opinions and welcome comments on the topics published in this newsletter. We reserve the right to edit and publish comments and letters at our discretion.

\*Guest Links are brief descriptions of existing articles or white papers submitted by third parties. Institute for Patient-Centered Design, Inc. reserves the right to accept Guest Link submissions, which may be edited and published at our discretion. Individuals submitting Guest Links agree that they are the author(s) of the work submitted, and grant Institute for Patient-Centered Design, Inc. permission to publish submissions. Authors agree that submissions do not violate or infringe upon the property rights οf others. Please www.patientcentereddesign.org/perspectives to submit a Guest Link for consideration.



<u>Letter from a Patient</u>

Each month, we feature a letter from a patient or family member addressing a specific need or inquiry identified during a medical visit or stay. To submit a letter, please <u>click here</u>.

Hi my name is Myron and I'm a sickle cell anemia patient. I saw your <u>post</u> online responding to a little girl in Atlanta with Sickle Cell Disease going through AVN [Avascular Necrosis]. I'm also going through the same thing, along with my younger sister and my niece. We just agree with you that we really need more <u>23 hour day clinics</u> for sickle cell. Most ER's are just either too crowded or aren't prepared to deal with us, as if we asked to be this way. We really need more help.

Myron H.

Dear Myron,

Thank you for your letter. You have highlighted a patient concern that we would like to address. I have heard this concern echoed in the sickle cell community, and I have experienced it first hand as a sickle cell patient. When patients get the impression that a healthcare provider would rather not - or is not prepared to care for them, something has failed in the care delivery process. Patients suffering with chronic pain should be welcomed to seek treatment to relieve their symptoms, and offered options for management of their condition after the pain has subsided. In an emergency department, some facilities have included private and semi-private spaces in which patients can wait, receiving treatment prior to admission (see the letter from a patient in issue 13). For patients with specific, chronic concerns, we do believe in specialty care that is available around the clock, such as the 23-hour clinic model described in issue 5; however, it is not feasible for some facilities. Across the board. preparation to treat diverse patient mixes can come in the form of sensitivity training that encourages caregivers to treat each patient like an individual, regardless of the frequency of ED visits or the demands of treating certain conditions. This is what every patient deserves, and should expect. In our new blog, "Patient-Centered Design Alliance," we discuss planning strategies to improve the delivery of such care.