BEYOND GREEN: DESIGN OF THE BUILT ENVIRONMENT AND ITS IMPACT ON HEALTHY COMMUNITIES

POPULATION HEALTH COLLOQUIUM

BALLINGER

SPEAKERS



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WHO WE ARE

225 ARCHITECTS, INTERIORS + ENGINEERS

FOUNDED 1878



AWARD WINNING

DESIGN

INTEGRATED ARCHITECTURE + ENGINEERING





THOUGHT LEADERSHIP

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RECENT PROJECTS



New York-Presbyterian



Johns Hopkins University



George Washington University



Children's Hospital of Philadelphia



Adelphi University



Weill Cornell Medical Center



University of Maryland Medical Center



University of Wisconsin



NYU Langone Medical Center



Wistar Institute



Rutgers University



University of Rochester Medical Center

COMMUNITY ENGAGEMENT

SUPPORTING OUR COMMUNITY, ENVIRONMENT + PROFESSION



FUTURE CITY







AMERICAN HEART ASSOCIATION



SPARK



COMMUNITY DESIGN COLLABORATIVE



PUENTES DE SALUD

LEARNING OBJECTIVES

HOW DOES ARCHITECTURE IMPACT POPULATION HEALTH?

- DESCRIBE THE RELATIONSHIP BETWEEN POPULATION HEALTH AND THE IMPORTANCE OF PLACE

- EXPLAIN THE HEALTH DETERMINANTS OF POPULATION HEALTH AND HOW OUTCOMES ARE MEASURED AND AFFECTED BY THE DESIGN PROCESS

- SHOW HOW HUMANISTIC DESIGN CONTRIBUTES TO THE INSTITUTION'S IMAGE WITHIN THE COMMUNITY

- PROVIDE EXAMPLES OF A VARIETY OF SCALED PROJECTS TO CONTRIBUTE TO A HEALTHIER COMMUNITY

RESEARCH/EVIDENCE-BASED DESIGN



"Evidence-based design (EBD) is the process of basing decisions about the built environment on credible research to achieve the best possible outcomes."

- The Center for Health Design, "Evidence-based Design Accreditation and Certification (EDAC)," accessed 02/16/2012, http://www.healthdesign.org/edac/about.

HISTORY OF EVIDENCE-BASED DESIGN



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2010 PDC SUMMIT TASK FORCE

- American Society for Healthcare Engineering (ASHE)

- American Hospital Association (AHA)
- American Institute of Architects Academy of Architecture for Health (AIA/AAH)

By working as one, with a common goal, health facilities professionals and architects can provide all those who walk through the doors of the nation's health care facilities with the perfect health care physical environment, updating the oath that Hippocrates set forth—"First, do no harm"—by adding "by providing patients with quality care as seamlessly and as quickly as possible in pleasant surroundings".

⁻ Healthcare Facilities Management, "2010 International Summit & Exhibition on Health Facility Planning, Design and Construction," 02/01/2010, https://www.hfmmagazine.com/articles/957-2010-international-summit-amp-exhibition-on-health-facility-planning-design-and-construction.

TOP 10 EVIDENCE-BASED DESIGN AND THEIR POSITIVE **HEALTHCARE OUTCOMES**

	TOP 10 EVIDENCE-BASED DESIGN FEATURES	POSITIVE HEALTHCARE OUTCOMES
	SINGLE BED PATIENT ROOMS	IMPROVED INFECTION CONTROL
	ACCESS TO NATURE	IMPROVED ACOUSTIC CONTROL
	ACCESS TO DAYLIGHT + SUNLIGHT	IMPROVED PATIENT SAFETY
	HEPA FILTERS	IMPROVED PATIENT SLEEP
	SOUND-ABSORBING CEILING TILES	REDUCED PAIN
		REDUCED PATIENT STRESS
	CEILING LIFTS	REDUCED SPACIAL DISORIENTATON
	VISIBLE + ACCESSIBLE SINKS + SOAP	IMPROVED PATIENT PRIVACY + COMMUNICATION
	DECENTRALIZED CAREGIVER STATIONS	REDUCED MEDICAL ERRORS
	FAMILY AREAS WITHIN PATIENT CARE SPACES	INCREASED STAFF EFFECTIVENESS
	STAFF RESPITE SPACE	INCREASED PATIENT SATISFACTION

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*Based on literature reviews at the Center for Health Design

Anjali Joseph, PhD, EDAC; Xiaobo Quan, PhD, EDAC; Amy Keller, March EDAC

http://www.hospitalinfrabiz.com/top-10-evidence-based-design-features-that-improve-healthcare-outcomes.html

HEALTH DETERMINANTS VERSUS OUTCOMES

SOURCE: COUNTY HEALTH RANKINGS + ROADMAPS, a collaboration between the Robert Wood Johnson Foundation and the University of Wisconsin Population Health Institute COUNTY HEALTH RANKINGS 2018 <u>http://www.countyhealthrankings.org/explore-health-rankings/what-and-why-we-rank/health-factors</u> http://www.countyhealthrankings.org/sites/default/files/2018CountyHealthRankingsData-v1.xls

WHAT DETERMINES HEALTH

40% SOCIAL FACTORS

30% HEALTHY BEHAVIOR

20% CLINICAL CARE

10% ENVIRONMENT

WHAT WE SPEND ON HEALTHCARE

88% MEDICAL SERVICES

4% HEALTHY BEHAVIORS

8% OTHER

Source: Bipartisan Policy Center, "F" as in Fat: How Obesity Threatens America's Future (TFAH/RWJF, Aug. 2013)

A .1% change in behavior due to environment = \$2.5B Savings

Nicholas Webb, Futurist "Disruptions in Healthcare Design- The Good News," 2017 Health Care Design Conference and Expo

KEY FACTORS CONTRIBUTING TO THE BUILT ENVIRONMENT

SOCIAL ROI BALLINGER

FEATURED PROJECTS

PENN MEDICINE LANCASTER GENERAL HEALTH ANN B. BARSHINGER CANCER INSTITUTE

READING HEALTH SYSTEM READING HEALTHPLEX FOR ADVANCED SURGICAL + PATIENT CARE

RUTGERS UNIVERSITY NEW JERSEY INSTITUTE FOR FOOD, NUTRITION + HEALTH

PENN MEDICINE LANCASTER GENERAL HEALTH ANN B. BARSHINGER CANCER INSTITUTE

ANN B. BARSHINGER CANCER INSTITUTE

97% 75%

APPRECIATE THE ABILITY FOR PATIENTS TO CONTROL THEIR IMMEDIATE ENVIRONMENT

> ONE DISSATISFIED ---- PATIENT WAS IN INFUSION

MULTIDISCIPLINARY CLINIC 5 NEIGHBORHOODS 38 EXAM 1 PROCEDURE 9 CONSULT **5 TEAM ROOMS** 6 PHLEBOTOMY

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INFUSION THERAPY 4 NEIGHBORHOODS

24 BAYS

- 7 PRIVATE ROOMS
- 2 FAMILY LOUNGES

RADIATION ONCOLOGY

- 4 EXAM + 1 HOLDING AREA
- 6 RADIATION TREATMENT MODALITIES INCLUDING CYBERKNIFE
- 2 TEAM ROOMS

STAFF PATIENTS

"It's nice to have a beautiful place to go when you are not feeling your best"

"The interior garden, the landscaping and siting of the building to allow just the right light, create the connection between the indoors and outdoors and the desired appreciation of nature"

- Dr. Randall Oyer

ACCESS TO HEALTHCARE

CHALLENGE:

 Desire to increase access to quality healthcare

SOLUTION:

 Provide convenient location to community

CHALLENGE:

 Provide moments of respite and stress reduction

SOLUTION:

- Access to Nature for patients and staff

SOCIAL CONNECTEDNESS

CHALLENGE:

 Provide community-oriented treatment spaces that respect patient privacy and dignity

SOLUTION:

- Radial infusion treatment layout

Tower Health READING HEALTHPLEX FOR ADVANCED SURGICAL + PATIENT CARE

→ Entrance → Patient Drop Off & Pick-Up Only ← Parking

NATURAL VIEWS AND PATIENT OUTCOMES

"Views to the outside may be especially important to individuals who have unvarying schedules and spend a great deal of time in the same room, such as surgical patients. It is possible that a hospital window view could influence a patient's emotional state and might accordingly affect recovery."

Roger S. Ulrich

1 Arrival/Entry

2 Surgical Waiting and Garden

3 Prep/Recovery + PACU

4 Surgery Suite

5 OR Staff Support

- 6 Psychiatric Treatment Unit
- 7 ED Expansion

9

- 8 Trauma Expansion
 - OR/Anesthesia Administration

-

2

ND LEVEL GR

11 III

10

1 N -

10

- Prep/Recovery 1 Short Procedure Suite 2
- 3 ED Administration
- OR Staff Support 4
- 5 On Call

- Protocol Offices 6
- **Pre-Admissions Testing** 7
- 8 Public Conference Room
- Trauma Administration 9
- 10 Healing Garden/Public Park











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TYPICAL INPATIENT UNIT



FAMILY WAITING

- Located OUTSIDE of the unit for privacy
- Access to public toilets and small nourishment area
- Expansive view of gardens below

SERVICE ELEVATORS

 Open into off stage corridor to maximize patient privacy and noise for patient on the unit

PUBLIC ELEVATORS

 Centralized to reduce travel distances and minimize patient/public conflicts

FAMILY LOUNGE / CONSULT

• Small gathering space terminus for public spine INSIDE the unit with natural light



































SOCIAL ROI

CHALLENGE:

 Desire to increase access to Nature per Evidence Based Design

SOLUTION:

 Covering Operating Room Platform with a green park



CHALLENGE:

- Encourage physical activity within the building

SOLUTION:

- Public stairs along East/West Corridor with public amenities

SOCIAL CONNECTEDNESS

CHALLENGE:

 Provide moments of respite and stress reduction

SOLUTION:

 Access to Nature for patients and staff

RUTGERS UNIVERSITY NEW JERSEY INSTITUTE FOR FOOD, NUTRITION + HEALTH



CHRONIC DISEASES



SPENT ON HEALTHCARE



OF ALL DEATHS ARE CAUSED BY ONE OR MORE OF **5 CHRONIC DISEASES** **HEART DISEASE** CANCER STROKE CHRONIC OBSTRUCTIVE PULMINARY DISEASE DIABETES



ANTHROPOLOGIST

PHILOSOPHER

TEACHER

POLICY EXPERT

URBAN PLANNER

EVOLUTION OF SCIENCE: TEAM + FACILITIES



HUMAN PERFORMANCE LAB

MULTIDISCIPLINARY WORK ENVIRONMENT NUTRITIONISTS SOCIOLOGISTS GENETICISTS PUBLIC POLICY EXPERTS URBAN PLANNERS

EXERCISE PHYSIOLOGISTS

WET RESEARCH LAB

NUTRITIONAL RESEARCH PRESCHOOL

1-

RESEARCH CORE LAB HEALTHY EATING VENUE



IFNH: MAIN FLOOR

220' Stair/ Green Wall BR Resource Student Health Clinic & Conference Center Clinical Nutrition Research Center Center Salar B 000000 35ງ Elland Kitchen / Human EPM \bigcirc Amphitheater Performance Servery Lab 0 Healthy-Eating Courtyard HINN 0 0 0 1. . . Terrace

IFNH: LOWER LEVEL



IFNH: UPPER FLOOR FLOOR



220'





3 A L L I N G E R










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CHALLENGE:

 Increase awareness of good nutrition

SOLUTION:

- Provide educational programs to public
- Provide healthy eating alternatives



PHYSICAL ACTIVITY

CHALLENGE:

Promote physical activity

SOLUTION:

- Encourage use of Feature stairs
- Provide active play space
- Provide Human Performance Gym





SOCIAL CONNECTEDNESS

CHALLENGE:

- Encourage inter-disciplinary approach to health & wellbeing

SOLUTION:

 Co-locate research labs and provide areas for spontaneous collaboration









CHALLENGE:

- Desire to increase access to Healthcare within University

SOLUTION:

- Provide a welcoming environment for student health services



CHALLENGE:

- Allow access to nature within the building

SOLUTION:

- Provide green wall at feature stair
- Vista design with views to the exterior throughout

CHALLENGE:

 Integrate health & wellbeing into the community and train the next generation

SOCIAL ROI

SOLUTION:

- Use daycare as testing ground for other community programs
- Embed student researchers within lab areas

ELEMENTS OF A COMMUNITY



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