

## **Redesign Your Organization Before Designing That New Building!**

By D. Kirk Hamilton, FAIA, FACHA

Published in Modern Healthcare 11/2004

Is your hospital ready for a major construction project? Will the millions you spend simply expand the organization of the past, or create the desired organization of the future? Is your organization properly aligned with your strategy? If not, there may be work to do.

The challenges of evolving technology, eroding finances, increasing competition, and regulatory uncertainty suggest most healthcare organizations could benefit from planned changes to improve performance and effectiveness. Most successful healthcare organizations indeed have a strategy that is responsive to the changing market. Some develop major building programs to implement new strategies. While this often makes sense, some institutions have not yet aligned their organization with their strategy, and risk enormous capital expenditures on facilities that simply continue to perform in the old ways. Putting the old organization into a new building is not likely to produce fresh results.

Too often, construction projects are the glorious swan song of a leader concluding a distinguished career. A better legacy might be a high performance organization in a new building that better enables efficiency, offers the leverage of advanced technologies, contributes to improved outcomes, and enhances satisfaction of patients, physicians, and staff alike.

Architects affect significant change in the organizations with which they work, often altering the organization's structure, systems, performance, culture, and behavior. Architecture is a costly and semi-permanent intervention of the last resort for creating organizational change. Organizational performance and effectiveness should begin improvement efforts before expensive construction projects. Redesign the organization first, then design the building.

## **Redesign Your Organization Before Designing That New Building!**

By D. Kirk Hamilton, FAIA, FACHA

Published in Modern Healthcare 11/2004

An assessment examines the fit between the external environment and strategy, as well as the fit between strategy and organization. If there are misalignments with the environment, the strategy should be revised. If there are misalignments between the strategy and the organization, redesign is appropriate.

Not all healthcare systems operate effectively. Some have no clear system goals or roles; some compete with their own affiliates. Structure can be misaligned, as with a service line model that cannot track imaging, lab tests, or supply resources. Informal systems “wire around” official organization charts to get things done. New initiatives need new structures to be successful. Design of the work itself should be reviewed, along with the flow of patients, information, staff, and supplies. Process improvement should ensure that the new building supports an efficient model.

The physical environment of a hospital, usually designed by an architect, has an impact on all who occupy and use it. Research shows the environment has a physiological effect on patients in healthcare settings. The environment has a role in enhancing or hindering performance. Environmental psychologists tell us the space around us profoundly impacts individuals and groups. The environment can be a barrier to effective work performance and social interaction. It can increase stress for both patients and staff.

The Center for Health Design, a proponent of evidence-based design, is conducting a series of important and rigorous research studies called the “Pebble Project” to establish the relationship between facility design and measurable outcomes, including clinical, economic, satisfaction, and philanthropic criteria. Based on preliminary data, facility changes can dramatically improve performance effectiveness and employee satisfaction. Nosocomial infection rates are down at Bronson Methodist Hospital’s new facility in Kalamazoo, MI. After two units at the Karmanos Cancer Institute in Detroit, MI, were renovated, with better access to records, clutter-free hallways, and rooming-in for family members, the nurse attrition rate fell 19 percent and patient satisfaction rose 18 percent.

## **Redesign Your Organization Before Designing That New Building!**

By D. Kirk Hamilton, FAIA, FACHA

Published in Modern Healthcare 11/2004

Planetree, the pioneer of patient-centered care, incorporates organizational change in its work. Training for its care delivery model includes “un-learning” previous organizational assumptions, norms, and culture. Returning to fundamental philosophical principles of family-centered care resonates with patients, their families, and a committed staff. An Illinois Planetree affiliate profoundly changed the way care was administered by pairing a non-institutional renovation with a culture change. The philosophical commitment to involve patients in their care had an intangible cultural aspect in patient access to the medical record, and a tangible architectural aspect in the resource library located on the nursing unit.

In Baltimore, MD, Harbor Hospital’s philosophy-oriented “creed” project to restate its vision of service and caring was accompanied by a construction project. The staff contracted with each other for specific behavior changes. Renovations dramatically altered the facility appearance, decentralized nursing activities, supported interdisciplinary teams, and enhanced consultant-led cultural interventions. Results included a financial turnaround and significantly improved patient satisfaction.

Valley View Medical Center, a rural replacement hospital in Cedar City, UT, was designed with a new departmental structure. The multi-modality Diagnostic Center and Procedure Center consolidated management, staff, and space. Thirty-five departments became 12 new centers and service groups. Organizational changes of this magnitude are only possible when coordinated with a new facility design.

Joint optimization of organization design and facility design is a powerful model. The result is a simultaneous set of coordinated interventions to improve the technical and physical environment, along with positive change in the social and cultural aspects of the healthcare experience. Hospital design is better correlated with the redesigned organization, and can result in clinical and performance improvements.

## **Redesign Your Organization Before Designing That New Building!**

By D. Kirk Hamilton, FAIA, FACHA

Published in Modern Healthcare 11/2004

If you are anticipating major construction and spending big dollars, be sure to model your evidence-based design on the desired organization of the future. Expensive and permanent construction should come after implementation of less costly and more flexible measures. Effective redesign of the organization could eliminate a construction project, or at least reduce its scope and cost. A research-informed design for an organization properly aligned with its strategy will produce a building that offers measurable improvement in organizational performance.



*D. Kirk Hamilton, FAIA, FACHA, a founding principal of Watkins Hamilton Ross Architects in Houston, TX, is a past president of the American College of Healthcare Architects. He recently completed a Master of Science in Organization Development at Pepperdine University.*