A Place to Flourish

St. Joseph Mercy Oakland
Pontiac, Michigan
Project Overview

St. Joseph Mercy Oakland (SJMO) is a 443-bed comprehensive community and teaching medical center located in Pontiac, Michigan and principally serving Oakland County. SJMO has been a community presence for more than 80 years. It is a member of the Saint Joseph Mercy Health System, a subsidiary of CHE Trinity Health, the fourth largest Catholic healthcare system in the United States.

A long-range site and facilities plan for the phased regeneration of the campus was created in 2006, including a new surgical center, enhanced diagnostic imaging services, and the 204-bed, eight-story patient tower that officially opened in April 2014 and which is the principal subject of this application.

At the same time as the project to regenerate the physical campus was begun, SJMO also began an intensive process of organizational and personal renewal, aimed at establishing, sustaining, and continually improving values and practices that would lead to the flourishing of all stakeholders. Just as it was considered
vital that the physical plant be adaptable for many alternative future uses, it was also considered essential that all staff possess the self-confidence, collaborative skills, adaptability, and personal well-being needed to thrive in a change-filled environment.

SJMO describes all stakeholders as being engaged in a “personal, connected journey”—intensely personal, while at the same time connection to others is interwoven as a strong component of the program.

SJMO’s service area is highly diverse. In Pontiac, where SJMO is located, more than 40 percent of the residents live in poverty, and the unemployment rate is above 20 percent. In contrast, Oakland County ranks third highest in wealth among all U.S. counties with populations over one million, and unemployment in the overall county is less than one-third of what it is in Pontiac. 47 percent of Pontiac’s residents are African-American, and another 20 percent are Hispanic or Asian; just 13 percent of Oakland County’s residents are African-American, and the county’s combined Hispanic and Asian populations are below five percent.

Since the South Patient Tower only opened in April of 2014, the most current evaluation information reflects the 7 month pilot period where facility and systems were rolled out in the existing facility. This data reflects:

- a 37% increase in patient satisfaction
- patient infection reduced to 0
- patient falls were reduced to 0
- physician and staff reactions have been overwhelmingly positive

Among the highlights described more fully within this application are the following:

- A deep connection to the community expressed through architecture, art, and amenities;
- Highly advanced, integrated information systems—the first in Michigan and among the first in the world—that unify eight different technologies to improve caregiving, decrease risk, and reduce stress on patients and caregivers;
- An organizational culture, carefully nurtured over the past eight years, that encourages and rewards collaboration and empowerment in the interest of the well-being of all stakeholders;
• Large single-patient rooms with multiple advanced amenities, superb safety and current functionality, and flexibility for future developments;

• Exclusive use of art from Michigan artists, with selection of all art carried out by an in-house team from all SJMO disciplines;

• Careful, systematic measurement of all important performance indicators, including proactive tracking of staff activities that influence infection rates and other risks;

• Multiple design elements supporting the practical and emotional needs of families, companions, and visitors;

• Incorporation of natural light throughout the design: in patient rooms, corridors, staff facilities, the lobby, conference rooms, and other areas;

• A five-star-equivalent hospitality experience throughout a de-institutionalized physical environment;

• Opportunities for prayer, meditation, and restoration throughout the building and grounds; and

• Support for the well-being of physicians and staff through specific design elements such as a “physicians’ sanctuary” and beautiful, restful spaces for staff on each patient floor.
Specific Criteria

At the conclusion of the narrative part of this application we document the progressive improvements for each one of the arrows of the New Paradigm diagram. First, we show how SJMO has met the other eight generative space criteria.

A process of learning from personal experience and self-reflection within the provider organization

The process of strengthening the SJMO culture that was begun in 2006, and which continues to this day, is centered on continual learning from personal experience and self-reflection.

SJMO leadership attended a three-day session facilitated by expert consultants to assess how the concerns of all stakeholders could be reflected in day-to-day operations, as well as in designs for the new facilities. Out of that initial session, it was understood that SJMO is a place where a personal, connected journey must take place, not just for patients but for staff, for the community, and for all stakeholders. A statement of organizational values and commitments, referred to as the “Six I’s,” was developed to guide that personal, connected journey.

The Six I’s have subsequently been used as the basis for a three-day training program for all associates, called the “Journey Intensive.” More than 2700 people have attended this training. Each department has “I-Teams” that actively investigate and implement improvements. It can be seen that the Six I’s and the related organizational practices strongly encourage self-reflection and learning from experience, as well as fully supporting every stakeholder’s personal, connected journey.
These are the Six I’s:

1. **Intentional.** Everything we do must fully engage the best in us to help drive the organization to the desired outcome of creating meaning—emotional, physical, intellectual, and spiritual—for all constituencies involved. We will diligently seek and act on opportunities for improvement.

2. **Individuality.** We must understand, anticipate, and respond to the unique needs and preferences of each person we deal with. Within a standardized physical and organizational structure, we will customize experiences so that each person will be touched at a different level of each activity—this is our principle of “mass customization.”

3. **Interactive.** We must be constantly alert that all aspects of what we do affect all others. Trust and effectively sustained change are dependent on working together with sensitivity to our effects on others.

4. **Interpret.** The personal, connected journey must live and breathe in the physical space which is the stage upon which we deliver our activities. Every aspect of our organization and our facilities must reflect the theme of our personal, connected journey so that excellent outcomes are created for all stakeholders.
5. **Inspirational.** We must celebrate each patient or each stakeholder's ascendency into a life-filled milestone in a very personal way. We have the ability to touch the patient, the family, and the other constituents to better their lives, not only to provide care but to create a more robust and comprehensive experience. Our ceremonies, traditions, and story-telling must contain the depth, symbolism, and guidance in the model of what we intend to deliver, and we must establish these elements throughout the care process.

6. **Institute.** If we are not constantly focused on delivering our message, it may soon dissipate in the organization. It has to be instituted: systematized throughout the organization so that we enhance every stakeholder’s experience. To do that, we must empower our associates to implement these I’s in a constant way.

*The Six I’s were developed by the Starizon Group who worked as a consultant in the development of the cultural design.*

This reflection and learning, converted into empowered action, has shaped the creation of the new South Patient Tower and has infused meaning into the activities that take place there. Here are two examples of how empowered I-Teams have embodied generative space principles:

1. A member of the housekeeping department was skilled at creating animal shapes from hand towels. She showed an example—a swan—to the other members of her department’s I-Team. They agreed that such towels would make a nice personalized touch in patient rooms. She taught them how to make swans so that all patient rooms could have them. A personalized card was then placed next to the swan towels as a cordial personal welcome to patients and visitors. This improvement was implemented by the team with only cursory involvement from departmental management.

2. In a new pedestrian bridge used primarily by staff, an I-Team decided that inspirational words should be painted on the pillars. For incoming pillars, the team chose service-related inspiration (“compassion”; “excellence”; etc.); for outgoing pillars, they chose words related to SJMO’s commitment to life balance (“cherish”; “relax”; etc.). The team chose the words, hired a painter, and completed the work. The first time the hospital CEO knew of this project was when the I-Team brought him there to see the finished product.
There are many other ways in which the design of the new South Patient Tower drew on personal experiences and self-reflection. Some are described in subsequent parts of this application; here are three more.

1. Every picture, drawing, or sculpture that adorns the South Patient Tower walls was specifically chosen with great care by the selection committee for its ability to communicate SJMO’s culture of beauty, healing, wellness, comfort, and compassion. The art selection committee had been in place for almost ten years, with a consistent core membership. The committee regularly reflected on the impacts of its selections, so that members increasingly honed their awareness of the quality and appropriateness of the arts’ elements. The art items chosen for this tower manifested the team’s increasing sophistication.
2. Asked for their input into the South Patient Tower design, physicians requested a “sanctuary” where they could unwind from the stresses of their work and strengthen their collegial relationships with each other. The careful design of the sanctuary allows for individual relaxation and reflection, and the collegial aspect of it has led to new hospital programming. For example, physicians have been teaching each other about their diverse cultures, and the physician group has sponsored celebrations of major religious holidays—Christian, Hindu, Jewish, and Muslim—throughout the medical center and into the larger community outside SJMO.

3. Mock-ups during the construction process became a source of learning. For example, the angle of nurses’ viewing stations was changed to improve line of sight to patients; the caregiver zone in the patient room was altered to improve efficiencies; and the patient toilet was relocated to maximize daylight and family space.

Since it began its Six I program, SJMO has received extensive recognition for excellent, innovative care (it had not earned such substantial recognition before its new commitment to a more effective culture). That recognition includes being named among the top five percent of U.S. hospitals in women’s health excellence; being cited as a top fifty cardiac care facility nationwide; acknowledgement as a Leapfrog Top Hospital for patient safety and quality; and becoming the first hospital in Michigan to be certified as a pain management and palliative care center.
Rigorous measurements and documentation of goals, methodology and results/outcomes of improved health, healthcare, and/or well-being

A distinctive aspect of the overall SJMO measurement methodology is that it applies technology to track and reinforce activities related to outcomes, in addition to measuring the outcomes themselves. This is evident in the Real Time Location System, which interacts with the automated hand-washing stations to log when caregivers are either washing their hands or using the dispenser, thus promoting habits that reduce infection rates and improve patient safety. This system notes each time a physician or caregiver arrives or leaves the room, the duration of their stay, and correlates to established time frameworks for rounding.
In addition, the in-room Get Well patient education system allows patients and families to comment on quality of care and ask questions of staff and physicians. The system also records patient education utilization, downloaded medication information, and patient satisfaction with individual services and overall perception of care.

Staff satisfaction is comprehensively evaluated annually, as is the overall organizational culture of safety. All collected evaluation information is transparent to caregivers, unit managers, and senior management, and suggestions are conveyed to the patient representative and the I-Teams for action by those teams as part of their continuous improvement initiatives.
The IntelligentCare System at SJMO

Integrating 11 technological solutions to the most crucial issues in patient care and hospital management, SJMO’s IntelligentCare System is the first in Michigan and among the first anywhere.

The system improves patient outcomes, increases patient and family satisfaction, and elevates caregiving efficiency. It substantially reduces stress on the patient, family, and caregivers, and it provides information for immediate and future quality improvement. It serves as a very forceful statement of SJMO’s commitment to world-class patient care and safety. The many noteworthy features of the IntelligentCare System include the following:

1. Wrist-worn sensors continuously and non-invasively acquire and report each patient’s vital signs. A wellness score derived from this monitoring also provides early alerts that anticipate the potential need for an advanced response.

2. Advanced patient safety systems help prevent infections and medication errors, reduce falls, and eliminate patient skin ulcers.

3. Staff collaboration is strengthened for such tasks as care team escalation and patient transfer.

4. A compliance system tracks staff hand-hygiene and infection-prevention activity in real time, and tracks individuals’ locations to provide data for management reports on a variety of staff activities.

5. Overhead paging is eliminated.

6. The telecommunication platform facilitates direct interaction between team members and clinical supports. It links the physician to the care staff and facilitates immediate availability when needed.

7. Collected data support clinical quality initiatives, such as predictive analytics, to reduce morbidity and mortality.

8. When care delivery staff enter the room, the patient is informed of who they are on a TV screen.

9. Patients (and families, where appropriate) have direct access to the patient’s personal care plan information (including medications and scheduled procedures) and to a broadcast wellness network for condition-specific information and general wellness guidance.

10. Patients are able to provide instant feedback on hospital services.

11. A patient can easily direct a request for assistance to the most appropriate caregiver.

12. The discharge process is streamlined and expedited.
• The new patient tower accommodates the different cultural expectations of Pontiac and the overall county. For example, there is potential seating for six visitors in each patient room, to graciously accommodate the large families that might congregate around a patient from some ethnic groups, while at the same time allowing for the quiet and privacy desired by other families. The lobby, and waiting areas throughout the facility, also are designed in seating clusters that will accommodate large groups or smaller groups.

• Not only is the art program centered on diverse local artists, the content of the artwork positively reflects the area’s ethnic diversity.

• Although SJMO is a Catholic-owned facility and includes a Catholic chapel, there are ample appropriate spaces for reflection, meditation, and prayer for adherents of other faith traditions. Each floor offers an attractive mediation space, and an outdoor Reflection Garden contains two water features: one mimics a still pool, perfect for quiet meditation; the second includes moving water and floating sculpture pieces representing religious iconography for a more engaged focus.

• The population of Oakland County is aging—officials predict that by 2020, almost half of Oakland County’s 61 communities will have more residents over age 65 than school-age children. SJMO has created an emergency room dedicated to treating seniors, with such senior-focused design elements as an overall setting designed to reduce anxiety and minimize risk of falls, softer lighting, extra-thick pressure-reducing mattresses, clocks with large numbers, hearing-assistive devices, and reclining chairs for friends and family.

Culturally-sensitive environmental design

As described above, SJMO’s service area is dramatically diverse. Sensitivity to the diverse communities in the SJMO service area led to several principles that are infused throughout the facility, as follows:

• The investment in regeneration of the SJMO campus conveys an unmistakable message to the people of Pontiac and Oakland County that SJMO is dedicated to a long-term, ongoing role in the revitalization of their community. The elegantly curved vertical form of the new patient tower rises above the campus, announcing SJMO as a prominent presence in the community. Illuminated at night, the tower is a welcoming and comforting beacon shining through the darkness.
Reciprocal and mutual collaboration across provider organization disciplines

The Six I’s statement, the training that supports it, and the actual practices of the organization all call for reciprocal and mutual collaboration across SJMO’s organizational units. This expectation is emphatically enforced by SJMO’s leadership.

In addition, there are many examples of commitment to cross-discipline collaboration, including the following:

- SJMO’s advanced high-technology IntelligentCare System strongly supports cross-discipline collaboration. For example, the iPhone-based Voalte communication component of the system not only strengthens communication between nurses and patients, it also enables nurses to interact with physicians and improves the hand-off when patients are transferred to other departments. Each physician has the ability to locate her/his patient’s nurse through a signaling feature in the nurse call system. The physician may use the “Doctor in Room” feature from the patient’s room to send a message to the patient’s nurse that the physician wishes to meet.
• The SJMO Nursing Magnet Program makes this statement to all nursing staff: “Truly excellent care is patient focused with multidisciplinary collaboration.” Within that program, nurses are empowered to work collaboratively with other disciplines to address such areas of concern as patient falls, skin and wound care, and general issues of quality, safety, and ethics. Application for Magnet status was made to the American Nurses Credentialing Center in June, 2014.

• In SJMO’s emergency room dedicated to treating seniors, a collaborative team of board-certified emergency physicians, nurses certified in Geriatric Emergency Nursing Education, pharmacists, case managers, and other clinical staff work together to assess and treat patients.

• Mercy Supportive Care, a pain-and-palliative-care service, won the American Hospital Association’s “Circle of Life” Award. The program is highly collaborative—the interdisciplinary team that meets weekly includes these disciplines: social work, chaplain, nursing, wound care specialist, psychiatric NP, case manager, utilization review, oncology RN, CPE students, Masters in Counseling Intern, dietitian, medical students, medical residents, bereavement and pastoral care manager, harpist, massage/healing touch/aroma therapist practitioner, pharmacy, physicians, rehabilitation, hospice, and homecare.

• Through the Michigan Stroke Network founded by SJMO, stroke victims receive care from a collaborative team. The Center links 30 Michigan hospitals so that through telemedicine, physicians in the network can receive consultation over the Internet. Using bedside videoconferencing, telemedicine medical teams in hospital emergency centers can consult with neurology specialists in distant cities. This consultative approach improves access to specialty care and reduces the need for exhausting travel and unnecessary patient transports.
Systemic improvement in health, vitality and well-being of individuals, organizations, and the community

Much of what has previously been discussed in this application creates systemic improvement in the health, vitality, and well-being of everyone affected by the personal connected journey. The following are some additional examples.

- The South Patient Tower’s main-floor concourse includes an integrative medicine center offering eight varieties of therapeutic massage and bodywork. The concourse also features shops selling healthy foods, medical supplies, and other beneficial items.

- Patient and cafeteria menus are being revamped under the guidance of SJMO’s lead physician, who is the president of the National Academy of Nutritional Physicians.

- The 11,000-square-foot onsite wellness center is an integral part of a comprehensive “Live Your Whole Life” initiative focused on fostering a healthier work environment. The wellness center is available to staff, volunteers, and community members at a rate that is substantially below market pricing.
• Non-denominational contemplation spaces are available in quiet interior retreats located on each patient unit floor, on the main floor, and in the healing gardens. Care is expressed in details such as seating alcoves throughout the tower to provide points of pause for rest or reflection throughout the entire journey.

• The tower is shaped to allow for optimal exposure to natural light and noise reduction—this has been proven to reduce anxiety and promote a generalized feeling of well-being. Soothing colors, warm wood-tone finishes, water features, a lobby fireplace, and fragrant and beautiful grounds also help reduce stress for patients, visitors, families, and staff.

• A customized music program designed to reduce stress reinforces the comforting ambiance throughout the public spaces of the building.
Projects that encourage, support, and reinforce the flourishing of stakeholders

We already have mentioned many projects that accomplish this purpose. Here are some other examples.

- SJMO’s “No One Dies Alone” program recruits, trains, and provides ongoing supervision for a special group of volunteer “comfort companions” who are on-call 24/7 to keep vigil with the dying when the patient has no family or if family cannot be with the patient. This program has been named the best volunteer program in the US; staff have mentored more than 85 similar programs (free of charge) across the country and around the world.

- SJMO has initiated or collaborated with the community on a wide range of specialized programs or projects that are responsive to particular community needs. These include a dental center for the indigent and the developmentally disabled, a Hispanic health center, and a free medical clinic for the uninsured working population.
• Safety features include mechanical lifts, carefully-designed bathrooms, and a wide range of automatic alerts incorporated into the advanced information technology used with each patient. These features not only affect patient safety, they reduce physical strain and psychological stress for caregivers and reassure families and visitors.

• An on-site simulation lab supports training for staff in activities such as CPR, and offers classes to community provider groups such as training for EMTs in emergency obstetrical situations.

• The staff lounge is one of the largest and most beautiful rooms on each floor. Huge windows spanning two walls join together at one corner to bring a lot of light into the room and provide a beautiful view of the hospital grounds. Separate locker facilities maintain the integrity of the staff lounge. Nursing stations are ergonomically designed, and there are two fully-equipped nourishment areas (also available to patients) on each floor.

• The in-room Get Well Network, broadcast on 42-inch flat-screen televisions, provides health information for patients, families, and visitors. It also allows for customer feedback regarding everything from pain management to filling medication prescriptions at the time of discharge. Further, kiosks equipped with computer touchscreens are located in the lobby; these kiosks offer important medical information, information about SJMO in general, and services which can be secured through SJMO.
Physical and social environments that are designed to be integrated and self-reinforcing

From the beginning of this project, it has been understood that the social environment—support for all aspects of the personal connected journey—must be manifested in the physical environment, at the same time as the physical environment facilitates, inspires, and elevates that journey. Each large, light-filled, patient room not only includes full state-of-the-art functionality for the immediate medical journey, but also includes thoughtful beauty throughout for the spiritual journey; provides full opportunities for support from family, companions, and visitors for the interpersonal journey; and furnishes wellness information and encouragement for the longer-term journey to full health and flourishing.

The integration and reciprocal interaction of the physical and social environments is evident from any vantage point. The lobby is filled with the warmth of a lighted fireplace, the sound of healing music, visually delightful art, relaxing water features, colorful and fragrant landscaping, plentiful natural light, and seating that respectfully accommodates large or small groups.
Amenities such as the stores and the Center for Integrative Medicine reinforce healthy choices. Patient floors are quiet and fully responsive to the requirements of staff efficiency and effectiveness, with features that offer practical comfort as well as spiritual solace to family and other visitors. Staff, including physicians, are honored throughout the building with features that reduce their work burdens (such as patient lifts and ergonomic work stations), improve their ability to provide fully responsive care (such as the IntelligentCare System), and offer physical and psychological restoration (such as the staff lounges and physicians' sanctuary).

There is no place in the SJMO Tower where the physical and social environments do not harmoniously interact to support the personal connected journey.

Evidence that a Generative Space is actively being cultivated

As the new tower was opening, SJMO’s chief nursing officer wrote this to all nurses: “This tower was not only a collaboration to build, but it will be collaboration in use. No one discipline in this organization can stand alone. We will all rise to the occasion and work as a team to make this tower work to our advantage and, most importantly, to our patients' advantages.”

Because of the groundwork created by the Six I’s program, SJMO possesses a culture committed to all the principles of generative space: collaboration, empowerment, measurement, holism, continuous learning and improvement, connection to community, and systemic improvement in the health, vitality, and well-being of patients and all other stakeholders. Viewing present accomplishments as baselines for an even better future is ingrained throughout SJMO’s approach to its mission.
Progressive improvements, ideally documented for each one of the 15+ arrows contained in the New Paradigm diagram

The following pages recapitulate highlights from the preceding discussions, with some additional items also included.
1 Patient

**Hospital → Patient**

1) Each patient room fully supports the patient’s physical, spiritual, social, and psychological needs.

2) The Intelligent Care System supports all dimensions of patient care: efficiency, effectiveness, staff attentiveness, safety, and comfort.

3) Numerous noise reduction strategies quiet the environment.

4) The multifaceted patient education system enhances immediate and long-term well-being.

5) Control of virtually all aspects of their comfort (access to staff, temperature, lighting, media, etc.) sustains patients’ sense of personal efficacy. Multiple barrier-free rooms on each unit allow for greater independent mobility for patients.

**Patient → Hospital**

1) Patients provide instant feedback on hospital services using an interactive system. This feedback is routed for appropriate short-term response and provided as appropriate to I-Teams for lasting solutions.

2) Patients’ responses to interactive questions regarding the patient-specific educational programming allow staff to verify patient understanding and address specific and general areas of concern.

3) A formalized patient satisfaction survey is on the hospital interactive T.V. System.

4) Various multicultural focus groups met over the design period making changes and recommendations on the design of the new South Patient Tower.
2 Family Member/Companion

Hospital → Family Member/Companion

1) Families are welcomed and encouraged to stay with patients in their room. The in-room “family zone” includes many amenities. A “room service” program allows family members to order meals and eat in the room with the patient.

2) Room configuration comfortably accommodates large groups or smaller numbers.

3) Families have the ability to control the in-room environment with separate light and speaker control systems.

4) Waiting rooms are configured in small pods that support groups or individuals.

5) Electronic kiosks with information of importance for family members are located in the lobby and in the various entries which include information on wayfinding, local hotels, restaurants and traffic.

6) There are many facilities throughout the tower and outdoors for meditation, prayer, and stress reduction.

7) Wayfinding throughout the campus is clear and straightforward.

8) A two-way communication system allows family to post questions and receive information about how they can support the patient and how they can participate in aftercare.

Family Member/Companion → Hospital

1) Extensive feedback tools are deployed to elicit family input on how they perceive the organization and how services can be improved.

2) The Voalte phone system allows family members direct access to the nurse and other caregivers.
3 Staff

Hospital → Staff

1) The technologically advanced, decentralized environment supports more efficient, relationship-based care and minimizes work-flow disruption to the care team.

2) Large, windowed staff lounges provide space for decompression and relaxation during a work shift.

3) Nursing stations are ergonomically designed.

4) The bridge to the employee parking area is inscribed with motivational expressions to support a positive work attitude on the way in and relaxation and work/life balance on the way home.

5) Hospital-provided amenities include a wellness center, convenience store, integrative medicine program, fully-equipped nourishment areas, and retail establishments to support the needs of a working population.

6) Physician support services are centralized into a physician sanctuary that provides the physicians with an environment that facilitates their work and enhances the organization-physician relationship.

7) Communication systems enhance the physician's ability to contact the direct caregiver and avoid the traditional problems of call-backs and unavailable staff.

8) Physicians are provided with predictive analytics to assist with managing their patients’ course of treatment. This has reduced acute critical response situations and reduces patient mortality.

Staff → Hospital

1) Teams from all areas of the organization contributed to all aspects of the design of the physical environment, from the perspective of the relationship of the physical environment to the social environment.

2) Hospital staff volunteer to work on each of the I-Teams to support the organizational culture and create a dynamic care environment.

3) Nursing teams, in support of magnet hospital program standards, are consistently improving care delivery and advancing empowerment and collaboration.

4) Physicians have led the development of multiple culturally specific celebrations that have unified a diverse medical staff and fostered greater understanding among diverse groups.
4 Community Resident

Hospital → Community

1) Many features, from the design of patient rooms to family areas to facilities for prayer and solace, accommodate the very diverse communities that the hospital serves.

2) The size, scope, and design of the new tower reflect a revitalization of this community and demonstrate a continuing commitment to the community.

3) The comprehensive art project supported the Michigan art community. The selected art is reflective of the local area and the state as a whole.

4) Staff members consistently volunteer to support community-wide initiatives such as health screenings or disease-specific community education programs.

5) Physicians work collaboratively with other staff to develop and implement programs that specifically address at-risk community populations, such as a free clinic for the working uninsured; dental clinics for indigent people and for the developmentally disabled; the telemedic program that provides specialty services to 32 hospitals via telecommunication robots; and targeted programs for specific population with unique needs, including the Senior Emergency Room; Hispanic Health Center; and the nationally recognized palliative care program.

6) The hospital has been invited to serve on the board of two groups promoting economic development: “Automation Alley” and “Medical Main Street.”

7) The hospital has worked with the art community to create a 150 foot changeable art gallery in the entrance that is open to the community, highlighting community artists.

Community → Hospital

1) Community members sit on various board committees and review bodies, providing valuable feedback and guidance to the organization.

2) A wide range of community groups supported this project and helped promote this new level of care in the community. More than five thousand people attended the various opening events.

3) The business community and governmental agencies have worked closely with SJMO to develop interactive programs in healthcare delivery, education, workforce development, and job creation.

4) The arts program is financially supported in part by a broad range of community individuals and organizations.
Visitor

Hospital → Visitor
1) A customized music program designed to reduce stress reinforces the comforting ambiance throughout the public spaces of the building.
2) The building enhances the healing experience through the use of lights, color, shape, and material. The music and art elements create a sense of community support and tranquility.
3) The chapel, the reflection garden, and carefully-designed areas on patient floors provide places for rest, quiet contemplation, and spiritual restoration.
4) The chapel is located at a visual focal point of the institution to highlight the spirituality of the organization. Spaces for programs or reflection are also provided to other faith groups.
5) A series of retail environments support visitors by addressing their specific needs. A coffee shop, convenience store, salad station, and integrated medicine center all provide a way for visitors to relax and feel supported in their needs.
6) A guest services agent greets each visitor and provides information. Lobby kiosks also provide important information.
7) Our lobby and lounge spaces are designed to allow visitors to relax before the fireplace or review the wide array of artwork specifically selected to provide a sense of comfort and support.

Visitor → Hospital
1) Visitors are active participants in our safety programs. They wash in/wash out in our hand hygiene program and help prevent falls via our interactive communication programs.
2) Visitors help us maintain a quiet, healing environment by controlling noise and respectful behavior.
Connections Among Patient, Family, Staff, Physician, and Visitor

1) Patients, and all those who support the patient, are active participants in the care design and in creating a healing outcome. We believe this is a unique activity and it is in fact the hospital of the future.

2) By combining space design, technology, and aesthetic considerations, the institution has created an overall environment that is truly a healing environment. The spaces support the unique needs of the patient, the family, and the caregivers.

3) The deployment of technologies and new systems provides a level of safety and communication that has never been experienced in a community hospital before.

4) The very appearance of the hospital invokes a feeling of competency and technologic capability that provides a level of comfort and confidence to all those who enter into the institution.

5) Technology is providing us the ability for the space to have a direct impact on the care that is being delivered by reworking care processes, workflows, and interactive expectations.
Interaction Between the Patient Continuum and the Community

1) Every medical institution serves a unique role in the community. The interaction between the institution and the community and how the institution serves the needs of the community defines its value and appropriate place in that continuum.

2) SJMO has developed a strong outreach activity into the community, interacting with a wide variety of community organizations, governmental entities, and care delivery providers that have placed the hospital in a unique position.

3) Serving a multicultural community, SJMO’s outreach into the Hispanic, African-American, Indian, Chaldean, and Jewish communities, in addition to its other service activities, provides unique insight into the needs of those diverse populations and how SJMO must address those needs.

4) While SJMO is founded in the teachings of the Catholic community, its faith-based nursing programs serve multiple congregations in an outreach mode. AME, Presbyterian, and Jewish synagogue participants have become part of our baseline community faith-based support system.

5) With an extensive outreach program to the Emergency Medical Services community—including providing remote-presence robotics directly from the ambulance in order to begin our relationship with the patient at the earliest possible stage—SJMO is ensuring that even in the field, appropriate medical supervision is being provided to the patient.

6) Programs are developed in conjunction with other organizations; they do not just emanate from the hospital. SJMO extensively meets with the community, understands its needs, and responds accordingly.
Conclusion

The leadership of St. Joseph Mercy Oakland need not look far to be reminded of the critical importance of generative space. SJMO's home city, Pontiac, was once a proud, prosperous, growing community. Then change came to General Motors and, unable to adapt, the city was devastated. Change is an everyday reality at SJMO as it is throughout the healthcare sector, and the pace of that change is accelerating. Without continuous learning, without a dense and expansive web of mutually-supportive relationships, and without a systematic methodology to recognize and respond to challenges, SJMO could suffer the same fate as Pontiac.

In its totality and in all of its particulars, the physical design of SJMO's new facilities is beautiful, functional, warm, and inspiring. But without the social systems that support every stakeholder's personal, connected journey, SJMO's physical beauty would be disappointingly unsatisfying. That beauty would not do what it does, which is to express and magnify the soul of the institution.
Patients know when caregivers truly care. Family members and companions know when an institution respects what they are going through. Staff know when they are trusted, honored, supported, and authentically empowered. Communities know when an organization is a partner, a leader, a beacon. Everyone can tell when an institution or individual has committed to joining with them on their journey.

For almost a decade, SJMO has been building a generative-space culture, even before we knew that generative space was the thing that we were doing. We did that in part because it is the only proper way to support the flourishing of all of our stakeholders, in part because it is the best way to acquire the ongoing support and intelligence that our stakeholders can offer to help SJMO continually improve, and in part because we concluded that without such a culture this treasured and necessary institution could be undone by change.

Judging from the samples of previous successful applications provided at the Generative Space Awards website, it seems that our submittal might be somewhat longer than previous ones. We hope that the full story of what has been accomplished at SJMO, and the appreciation of how we are positioned to continue improving over time, will be persuasive to the judges. We would be deeply honored to receive this award.

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