



The American Institute of Architects
Academy of Architecture for Health
Knowledge Community

Component Toolkit

A Model for Sharing Knowledge



The Academy of Architecture for Health (AAH) improves the quality of healthcare through design by developing, documenting, and disseminating knowledge; educating healthcare architects and other related constituencies; advancing the practice of healthcare architecture; improving the design of healthcare environments; affiliating and advocating with others that share our vision and promoting research.

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Introduction

“We are drowning in information but starved for knowledge.”

–John Naisbitt (Megatrends: Ten New Directions Transforming Our Lives)

The speed at which new information and technologies develop often exceeds our ability to absorb and effectively use the information. This poses a particular challenge for the healthcare architect, who is often already overloaded with current technology and multitasking efforts.

The Academy of Architecture for Health (AAH) Knowledge Community aims to develop knowledge and information to benefit architects who are engaged in the design of healthcare facilities. AAH presents information and shares knowledge and expertise to promote members’ professional development via publications, local seminars, and member interaction.

One goal of the AAH Knowledge Community is to provide educational and informative material that is up to date, practical, and relevant to the success of healthcare architectural projects. This information will encourage individual study and group discussions at the local level. AAH also strives to provide convenient educational information that provides continuing education credits without the requirement of convention attendance.

With these goals in mind, this guide was created to help AIA components and individual members create their own sharing network.

Who	AAH healthcare architect members and other interested parties in your geographic area whose practices include healthcare projects.
What	A dynamic, flexible, interactive setting to facilitate the sharing of knowledge relevant to healthcare design.
When	Quarterly gatherings are the recommended minimum, but a component may meet more or less often, depending on the component members’ needs and wishes.
Where	To be determined by the members of the component.
How	Using this guide as a start, a member of the local component plans and conducts sharing sessions relevant to local members.
Why	By sharing with others, we elevate the community expectation for great healthcare architecture.

How to Start and Sustain a Successful AAH Component in 10 Easy Steps

The single most important step to take when forming an AAH component is to just do it! Too often, organizing efforts fail because of the belief that a new initiative must have a large participating membership or a complex and complete organizational structure.

While the ways to begin any endeavor are numerous, experience shows that the two actions producing the best results are to plan regularly scheduled gatherings and to tell all interested parties when the meetings will be.

As in many worthwhile endeavors, a successful component begins with one interested party taking ownership of the idea. This guide was developed to be a road map and a toolkit for beginning a successful component. A step-by-step guide and sample forms are included.

If your component already hosts the AAH, that's great. Think of this toolkit as affirmation of what you're doing already, and if your group has not yet linked with the AAH Knowledge Community, consider doing so today. There are instructions below and in the FAQ section.

Step 1. Commit to hosting a component. Enough said.

Step 2. Find, select, or draft a local advisor. Local advisors are the backbone of the network connecting healthcare architects nationwide. They organize local components and forums to provide collegial support, brown bag lunches, and experience- and knowledge-sharing for healthcare practitioners. Local advisors are also instrumental in soliciting and submitting articles to the *Academy Journal*.

Step 3. Make contact with the local and state component leadership. If the idea of beginning an AAH component did not originate with the leadership of the AIA local component, contact them. The state and local AIA components are vital resources for obtaining a current directory and e-mail list of members and for help in publicizing meetings. The chapter leadership may include others who want to take a role in organizing the component.

Step 4. Gather an interest group. Round up a core team of members who can help give the process a good start. This group should be five or more in number. This team is a source for ideas and resources for the group and helps prevent burnout from members feeling alone in the process.

Step 5. Schedule the inaugural meeting. Using your team as a sounding board, pick a convenient date, time, and place for the first meeting. The two most popular times for components are during an extended lunch and right after work. However, it is important to pick what works best for your group. The same thing goes for the place; if the local component has meeting space, groups may find it convenient to meet there. Meeting at a member architect's office is equally good, as is some neutral spot. Convenient central locations, easy access, and parking are also factors.

The first meeting of any group requires handling some organizational issues, such as choosing the what, when, where, and why of the meetings. The group will also need to discuss who will act as the initial contact/organizer and for how long. A sample agenda for the organizational meeting is included in the Tools section; in step 7, the details of the agenda are discussed.

Step 6. Publicize the inaugural meeting. This is a key step: interested members can't attend what they don't know about. Announce the meeting at the local component meeting; have an announcement run in the local component newsletter; send an e-mail announcement or reminder to

members of the local AIA. Have a member of the initial interest group make phone calls to potential attendees. Notices should be frequent, with the final notice given the day before the event.

Steps to a Successful AAH Component

1. Commit to hosting a component.
2. Find, select, or draft a local advisor.
3. Make contact with the local and state component leadership.
4. Gather an interest group.
5. Schedule the inaugural meeting.
6. Publicize the inaugural meeting.
7. Host the inaugural meeting.
8. Present the results of the organizational meeting.
9. Affiliate your component with the AAH Knowledge Community.
10. Keep it going!

Step 7. Host the inaugural meeting. An organizational meeting is held at an announced location and all area members are invited and encouraged to participate.

Nametags are often a good way to foster communication. A sign-in sheet is a great way to get member information; a sample sign-in sheet is included in the Tools section.

Just as every building needs a plan, every meeting needs an agenda. Regardless of how simple it may be, an agenda lets attendees know that the group is organized and has a purpose and objective, and it keeps everyone focused. A sample agenda for the first meeting is in the Tools section; feel free to change the agenda, but have one!

The first item on the agenda is for the coordinator to call the meeting to order. The meeting coordinator may be the local advisor or a member of the posse drafted to serve this function. The coordinator should welcome the attendees and thank them for coming.

The next item on the agenda is to have introductions and check in. This simple process allows everyone in the group to get to know one another, fostering collegiality. The check-in and warm-up time also allows group members to successfully transition from their activities leading up to the meeting to focusing on the meeting.

At the first meeting, you may want to share why you initiated this meeting and what you would like to see happen and ask the attendees why they came. This will get the group primed for the brainstorming session later in the meeting.

Following the check-in is the knowledge community commercial. This is the point in the agenda when you state the gathering's purpose and remind the group of any upcoming opportunities or dates, such as a convention date or the topic and submission deadline for the next *Academy Journal*. The purpose of the gathering can often be summed up in one sentence; this is the sentence existing groups post on their component Web sites. It may read like this: "This AAH component addresses the unique issues related to healthcare architecture. As a forum, it provides for the exchange of ideas, concerns, successes, failures, resources, and more that affect the design of healthcare facilities." It's a good idea to incorporate this statement into the written agenda.

The next part of the meeting is setting the meeting norms, which help groups work together in an agreed-upon manner. The norms that need to be discussed at the first meeting include the frequency, format, date, time, and location of future meetings. Additional norms may relate to participation (e.g., AIA members are free, but others must pay a small fee to attend), sharing (e.g., everyone attending must offer something, no sponging and leaving), and confidentiality. Still others may address creature comforts, like snack and drink provisions.

Along with the meeting norms, it is critical at this first meeting to have a brainstorming session on the topics, issues, and concerns component members want discussed. The list may be extensive enough to require that some time be spent prioritizing it. This may be when the group decides if the topic is for component discussion only, pulling expertise from the members, or if they want to solicit an outside expert to come discuss the issue with the group.

Of course, depending on the topic, the meeting format may change from inner-circle discussion to presentation and facilitated discussion. What's most important is to do what works, to do what benefits the members of the component. Included in the Tools section is a list of common issues facing healthcare architects. This list may serve as a catalyst for discussion.

A sample agenda for regular meetings is also included in the Tools section. It was designed to accommodate planned discussions, leaving time at the end of the meeting for members to bring up issues and concerns that are important to them at that moment.

Before the meeting ends, it is important to recap the norms and to set the schedule and topics for the next few meetings. This will help members save the dates, and the published schedule is a great public relations tool. It is a good idea to ask for volunteers to arrange for future speakers, hand-out materials, contacts, and food and beverages.

Step 8. Present the results of the inaugural meeting. As soon as the organizational meeting is finished and the dates, topics, and individual assignments for the next series of meetings are set, send this information to your local component and ask that the information be included in the component's newsletter and meeting announcements and on its Web site. Include the component purpose statement so component members understand the component's objectives. If you really want to kick it up a notch, give them a testimonial about how great it is to participate.

Step 9. Affiliate your component with the AAH Knowledge Community. After your first meeting, affiliate your component with the AAH Knowledge Community by calling AIA Member Services, 800-242-3837. Individual members may designate AAH as one of their knowledge communities by calling the same number. By affiliating your members and component with the AAH Knowledge Community, your group gains resources and receives e-mails about new journals, learning opportunities, and opportunities to participate in the larger AAH forum nationally.

Step 10. Keep it going. Once you get the ball rolling, the amount of energy needed to keep it rolling is greatly reduced, but focus and energy are still needed. Delegating duties and sharing responsibilities not only prevent burnout, but also increase leadership capacity, organizational learning, camaraderie, and the chances for success. Before, or at least by, the final scheduled meeting, set aside time on the agenda to set dates for the next round of meetings. This is also a good time to reflect on how the format has or has not worked for the group and to make adjustments. Keep it fun, flexible, dynamic, and relevant.

Keep a log of your component activities. Record the who, what, when, where, why, and how of your group, so as new leaders take the helm, a history is in place of where the group has been, how it got there, and where it is headed. This is also a great tool to share with other components in your state or region to assist them as they develop their own component program.

Frequently Asked Questions

Communities, Groups, Advisors

Q. What is a knowledge community?

A. Knowledge communities are groups of people who share common challenges, opportunities, or a passion for a given topic and who collaborate to deepen their understanding of that topic through ongoing learning and knowledge sharing.

Q. What is the Academy of Architecture for Health Knowledge Community and what does it do?

A. The AAH Knowledge Community aims to develop knowledge and information to benefit architects who are engaged in the design of, or who are interested in, healthcare architecture. AAH presents information and exchanges knowledge and expertise to promote the professional development of its members via publications, local seminars, and member interaction.

Q. What is the AAH Advisory Group (AG)?

A. The AAH Advisory Group is a nine-member board consisting of seven at-large members, the AAH current president, and the AAH past president. The AG works to provide strategic planning, knowledge generation, member services, and networking activities to serve the healthcare architecture community. Each AG member also chairs a subcommittee that supports a specific area of AAH work. The position on the AG is typically a two-year commitment. Each year requires a few separate meetings, and although some expenses are covered, out-of-pocket expenses should be expected.

Q. What are local advisors?

A. Local advisors are the backbone of the network connecting healthcare design practitioners nationwide. They organize local events and forums to provide collegial support, brown bag lunches, and experience- and knowledge-sharing for healthcare architects. Local advisors are also instrumental in soliciting and submitting articles to the *Academy Journal*.

Q. How can I become a local advisor?

A. The call for becoming a local advisor can be found at www.aia.org/aah. The application process involves submitting a letter of interest and a professional resume.

Q. Can I be an individual member?

A. Yes, you can be an individual member. Before you forget, send an e-mail to Membership Services, memberservices@aia.org, stating you would like your AIA membership to include membership in the AAH Knowledge Community. By the way, as a member of the AIA, you are entitled to become a member of any knowledge community at no charge; learn of other knowledge communities online at www.aia.org and join those that interest you. It's a great way to increase your knowledge and better your practice, which in turns betters our organization and our communities.

Q. Why should I join the AAH Knowledge Community?

A. Registering with the AIA as a member of the AAH Knowledge Community ensures you receive all the mailings and notices sent only to members, including announcements and invitations for AAH events. Also, since the AAH Knowledge Community aims to serve you, you can use AAH to amplify your voice to the larger architecture community.

Q. What is an AAH event?

A. An AAH component is a dynamic, flexible, interactive gathering designed to facilitate knowledge sharing relevant to healthcare architecture. AAH aims to expand and formalize component networks so that it includes all AIA local components.

Q. Why host an AAH event?

A. Because the world needs more healthcare architects that are steeped in excellence.

Starting an AAH Component

Q. How do I start an AAH component?

A. Read this guide and “just do it.”

Q. How do we get the word out about events?

A. Several options exist to spread the word. Make announcements at component meetings, post the schedule on the component Web site, and send e-mail meeting notices and reminders. Have core members call others who may be interested to personally invite them, and ask all who attended the first meeting to bring someone to the next meeting.

Q. How often should the local component meet?

A. Quarterly gatherings are the recommended minimum, but a local component may meet more or less often, depending on the needs and wishes of the members.

Q. How will expenses be managed and paid?

A. Unless your expenses are funded by the local or state component or paid for by the individual component, there is no central funding source for component business. Some components have secured underwriting by vendors for the component's activities.

Linking to the AAH Knowledge Community

Q. Why affiliate our local gathering with the AAH Knowledge Community?

A. By affiliating and communicating with AAH, you have a direct line to the AIA, helping it work toward better serving its members' needs.

Q. Our local component has a committee that functions with a similar purpose and format, but under a different name. Can our group affiliate?

A. Absolutely. The overarching goal is to create a knowledge network for AIA members with healthcare architecture practices.

Q. What is the possible downside of linking with the AAH Advisory Group?

A. None. The AAH Advisory Group does not dictate content to local components. Think of the AG as a peer-to-peer network. Each component maintains its own integrity and the much-needed freedom to respond to the ideas and issues of its constituency. By linking to the advisory group, you take lone voices and combine them into a symphony.

Q. What resources are available to the local component?

A. Available resources include the AIA AAH Web site (www.aia.org/aah), the AAH Knowledge Community online journals, other knowledge communities' online journals, and other local advisors.

Q. In what ways can local members participate with the AAH Knowledge Community?

A. Individuals can author articles and practice tips for the *Academy Journal* or suggest topics. They can also submit ideas to AAH Advisory Group members, attend AAH activities at the AIA National Convention, and volunteer to serve the AAH as a local advisor or a member of the advisory group.

If you have any questions about the Academy of Architecture for Health Knowledge Community or about starting a component, contact:

Bruce Bland at BBland@aia.org

AAH Component Tools

Sample Inaugural Meeting Agenda
Academy of Architecture for Health Component
Organizational Meeting
[Date, Time, Place]

Call to order and welcome

- Sign-in sheet, with phone numbers and e-mail addresses
- Nametags (optional)

Introductions/ice breaker

Knowledge community commercial

Meeting norms and brainstorming future topics

- Frequency
- Format
- Confidentiality
- Date
- Time
- Place
- Host/coordinator
- Snacks
- Cost
- Participation
- Brainstorm future topics, i.e. what excites you most?
- Volunteers

Schedule recap, volunteers for the next meetings

Adjournment

The Academy of Architecture for Health component addresses the unique issues related to improving the quality of healthcare through design. As a forum, it provides the exchange of ideas, concerns, successes, failures, and resources to advance the practice of healthcare architecture.

Sample Regular Meeting Agenda
Academy of Architecture for Health Component
[Date, Time, Place]

Call to order/welcome [3 minutes]

- Sign-in sheet, with phone numbers and e-mail addresses
- Sign-in on AIA Continuing Education Form B (if applicable)

Note: If the program is qualified for continuing education credits, AIA Form A should be completed before the program and submitted to the local or state component at least two weeks before the event.

- Nametags (optional)

Introductions/ice breaker [5–10 minutes]

Knowledge community commercial [3 minutes]

Component on selected topic [30 minutes or more]

Open Discussion, Suggestions, Ideas [10 minutes]

Announcements and reminder of next meeting and topic [2 minutes]

Adjournment

The Academy of Architecture for Health component addresses the unique issues related to improving the quality of healthcare through design. As a forum, it provides the exchange of ideas, concerns, successes, failures, and resources to advance the practice of healthcare architecture.

Yearly "We're Alive" Form

Academy of Architecture for Health Component Annual Report

August 1, _____, to July 31, _____

DUE: August 15 **E-mail or fax copy to AAH**
E-mail: BBland@aia.org;
Fax: 202-626-7399

Component Name: _____

City or Region, State:

Local Advisor Name:

AIA Member: Yes / No AIA Member # Address: Phone number: ()	Term dates:
Additional Local Advisor Name (if applicable): AIA Member: Yes / No AIA Member # Address: Phone number: ()	Term dates:
Additional Local Advisor Name (if applicable): AIA Member: Yes / No AIA Member # Address: Phone number: ()	Term dates:

Academy of Architecture for Health Annual Report (cont.)

1. List (or attach) the calendar of activities for the upcoming year:

Date Activity Planned

2. What were the best component programs/discussions held in the past?
3. What are the top issues, topics, and concerns for your component?
4. What areas would your component like to see addressed during an AIA convention, AAH Breakfast, Grassroots, or other workshop?
5. What articles or practice tips were submitted to AAH by your members during the past year(s)?

Top Issues Affecting AAH Practitioners

The members of the AAH Advisory Group are architects just like you. And just like many healthcare architects, we struggle to keep abreast of new technologies and trends, all while working to earn a living in the profession we love so much.

The AAH Knowledge Community is working hard to develop knowledge and information to benefit architects who are engaged in the practice of, or who are interested in, healthcare architecture. AAH presents information and exchanges knowledge and expertise to promote the professional development of its members via publications, local seminars, and member interaction.

AAH invites you to join us as we share information and knowledge on the issues affecting you and your practice. A large percentage of architects work in a practice that includes healthcare projects; if you haven't joined our knowledge community, do so today. Knowledge is power and there is power in numbers!

Top Issues Affecting Academy of Architecture for Health Practitioners

- New and evolving models of patient care
- Rapid advancement of medical technologies
- Improving the quality of patient care environments
- The aging and obsolescence of existing healthcare facilities
- Shifting demographics - A significant wave of boomers turning grey
- Improving patient safety and reducing medical errors
- Huge financial challenges – Buildings, Staff, Operating Costs, Technology
- The impact of increasing uncompensated care
- Market demands on healthcare providers - consumerism and competition
- Hospital and Physician relationships – collaboration vs. competition

