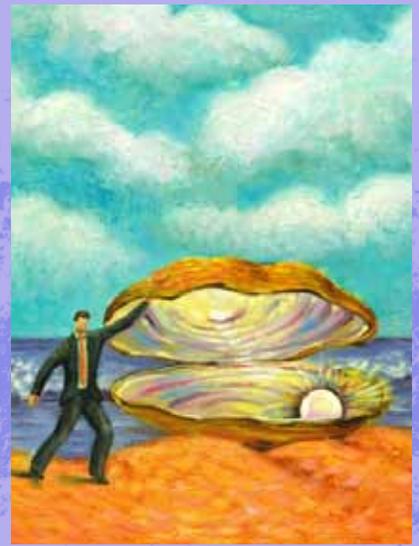


THEATER OF GENEROSITY **TOOL #3** PROTOTYPE UNIT CHECKLIST

This tool provides a list of things to think about when beginning a **PROTOTYPE UNIT** for generosity innovations.



Most organizations have never seen generosity creatively integrated into the core of each patient and family experience. It might not occur to clinical teams that generosity is a path to enhance patient satisfaction, or that it is a healing modality to alter clinical outcomes. Many leaders have never experienced a mythic space where every corridor tells a story and people interactively engage with gratitude walls and transformative art. And the concept of integrating generosity volunteers as core members of the caregiving team is still new.

In a prototyping unit, everyone learns together how to approach generosity differently. Clinical and foundation leaders engage as co-designers. They implement, measure, and then refine ideas before introducing them to the broader organization. Prototyping units act as living laboratories with a dual purpose of providing patient care and incubating the next generation of breakthroughs.

The following list provides an initial guide for leaders developing a generosity prototyping unit. It describes considerations and possibilities around which a team can begin conversation and design.

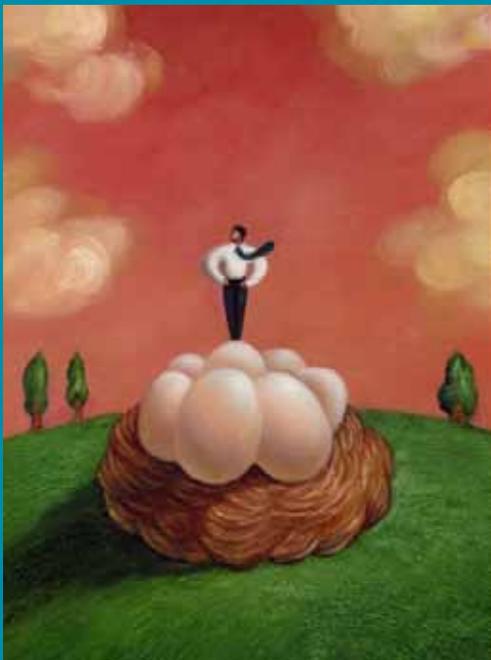
LEADERSHIP

- Ensure there is enthusiastic support from the CEO, Chief Patient Care Officer, Chief Development Officer, Director of Volunteer Services, and other core leaders.
- Decide how much the potential impacts are worth and allocate adequate resources for the innovations. Because the returns are broad, consider investing money from places that both include and go beyond the foundation.
- Ask the CEO to signal the strategic importance of the generosity innovations so internal leaders see it as a high priority and invest in its success.
- Decide on the leader or team to guide the generosity innovations through initial development.
- If a prototyping unit already exists in the organization, determine whether to use this or select a different unit. Criteria for selection of a new unit include things such as leadership strength, opportunities for leaps in patient satisfaction, clinical appropriateness, and strategic importance of the service line.
- Ensure the leaders on the unit understand why the organization wants to approach generosity differently and the potential benefits—especially those that directly impact them. Link into existing strategies and programs where possible.
- Decide which innovations to prioritize and develop a phased plan for implementation.
- Look for partnership opportunities with corporations, technology companies, individual philanthropists, churches, local service organizations, and national funders.
- Know the desired impacts and take initial measures before beginning.



PHYSICAL SPACE

- Make a strong visual impression when people first walk onto the unit. Create intrigue around the fact they are entering a space where generosity enhances care in an extraordinary way—that it is a special innovation space. Think of the entrance like theater and communicate what is unusual.
- Look for opportunities to use existing spaces on the unit in new ways. The entrance or an unused sitting area might become an energetic hub and healing sanctuary for the new generosity experiences. An empty alcove could become a space for symbols of gratitude.
- Take empty or static walls and explore possibilities for how they convey abundance, gratitude, and generosity. Imagine them as interactive spaces that draw people to spontaneously engage and create community. People might write or draw on a gratitude wall or leave a small symbol.
- Invite local artists to participate. For inspiration, see the Murocity Project at Parkview Hospital (www.murocity.com) that honors 160 generous people. Think also of the way those of other creative abilities may shape the space. For example, gardeners may supply trees, plants, and flowers. Poets might write something to honor a particular nurse or patient. Storytellers, musicians, readers, cosmetologists, massage therapists, chefs, baristas, and many others can be invited to contribute.



- Incorporate the generosity stories of caregivers into the artistic displays. If an environmental service worker adopted a special needs child or a physician volunteers with the homeless, celebrate it through an art piece. Design for patients to understand the purpose that motivates the people caring for them.
- Communicate what generosity has already done on the unit—the technologies, services, and innovations that exist because of a generous community. And create intrigue about what could happen next—the innovations waiting to be birthed with new generosity gifts. Invite patients and families to help dream the future into existence.

VOLUNTEERS

- Create a dream list of new roles for volunteers and how they can enhance the patient and family experience more creatively.
- Build awareness, understanding, and engagement among existing volunteers while developing a more expanded base eager to give in new ways.
- Ensure the volunteers understand the highest-level purpose of what they are doing and desired impacts. Invest whatever is necessary in selection and training to ensure they are able to provide the optimal experience for patients and families.
- Consider a super-volunteer able to oversee integration and ensure the volunteers have a superior experience themselves. This person may have a clinical background as well as outstanding organizational and relational skills. He or she may be physically present much of the time on the prototype unit to nurture and coordinate.
- Determine the logistics of how each patient and family knows what amenities are available on any particular day, how the services are requested and ultimately delivered. Consider a person (either nurse or volunteer) who explains the philosophy and innovations as well as IPTV, paper menus that can be physically marked, or spontaneous rounding with no prior coordination.
- Invite patients and families to write messages of appreciation back to the volunteers (who often feel invisible and under-appreciated) so the experience becomes healing and rewarding for them.

ABOUT THIS TOOL

This tool is part of a series designed to help change the way people experience generosity.

Often when patients enter a hospital or clinic, they don't consciously think about generosity. They know little about the people who have given to make a particular service possible. They rarely learn about the remarkable ways the people caring for them—from physicians to housekeepers—live generously. And there is nothing that creatively describes the generosity of the organization itself. No wonder so many people perceive hospitals and clinics as profit-centered institutions.

Generosity heals. We are only just beginning to discover its power to transform our culture and relationships, enhance the patient experience, connect the community, and even alter clinical outcomes. It's not just about fundraising. As we think differently, we discover greater potentials.

COMMUNICATION

- Creatively present the generosity innovations to patients and families. This includes the way nurses explain it and how it is presented in print and electronic media. Each instance is an opportunity to create a generosity impression—whether or not the patient or family receives any particular amenity.
- Ensure every piece ties to a clear theme such as generosity heals and a context for why the innovations are happening.
- If physical objects are provided (eye pillows, blankets, books, flowers, baby hats, etc.) make sure each one has a physical tag that connects it to the branding theme and explains the generosity story behind it.
- Bring philanthropic partners into the energy whether or not they are investors in the prototyping unit. Enable them to share in the excitement of how generosity is coming to life for patients and families. Make the innovations part of donor communications, events, and conversations.
- Ask patients and families to help the organization learn and evolve the generosity innovations. Invite them to share what they loved (or didn't) and how to make it better.
- As changes occur in patient satisfaction and other areas, communicate these across the organization so people understand the broader power of generosity. Message to internal audiences with as much intentionality as external donor-investors and partners. Think about the prototype unit as the first step in a larger cultural shift and the learning for those not directly involved in this first implementation.

About the AUTHOR:

Leanne Kaiser Carlson is a healthcare futurist and thought leader for innovators engaging philanthropists in new ways. She helps organizations discover the healing power of generosity and advises CEOs, foundations, and philanthropists. Leanne is one of three founders of the Kaiser Institute and directs the Program in Philanthropy. She can be reached at 303.659.8815 or info@kaiser.net.

