

Stephen Parker, Architect+Mental Health Planner

Stantec

Arlington, VA

stephen.parker2@stantec.com

Jon Sell, Principal+Mental Health Planner

Stantec

Philadelphia, PA

Jon.Sell@stantec.com

AI IMPACT 2024

40<sup>th</sup> Annual FPC Seminar + Expo

Sept 29 - Oct 1, 2024

AI+Analogue: Prototyping Mental Health Environments with Generative AI

Course Number: AHCA 2024.10

Credit Designation: 1 LU/HSW

AIA CES Provider Number: E240

October 1, 2024

CONTINUING EDUCATION

AIA

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The seminar has teamed with a registered provider of AIA - approved continuing education under Provider Number E240. All registered AIA CES Providers must comply with the AIA Standards for Continuing Education Programs.

Any questions or concerns about this provider or this learning program may be sent to [cessupport@aia.org](mailto:cessupport@aia.org) or 800-242-3837 Option 3.

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Stantec Mental + Behavioral Health

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CONSTRUCTIVE

Learn about and evaluate multiple AI design tools that enhance the design process.

2

CONSTRUCTIVE

Discuss and review trends in mental health design using AI generative tools.

3

CONSTRUCTIVE

Analyze what is required to plan for and implement a full-scale mockup with AI.

4

CONSTRUCTIVE

Synthesize the pros and cons of each AI mock-up iteration and its implication for design.

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**Jon Sell**  
Principal, Behavioral Health  
Subject Matter Expert

**Stephanie Parker** JIA, NMA,  
MHA, LEED AP  
Manager & Behavioral Health Planner

**Team Introductions**

Great design for behavioral and mental health comes from harmonizing the needs of many—from patient dignity and care team retention to visitor experience and community support. Whether it's an inpatient hospital, addiction treatment facility, outpatient center, or a clinic for developmental disorders—our boundaryless behavioral health practice is continually advancing integrated design that is trauma-informed, dignity-driven, experiential, and empathetic.

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**Learning Objectives**

- Learn about and evaluate multiple design tools that enhance the design process.
- Analyze what is required to plan for and implement a full-scale mockup.
- Synthesize each mock-up iteration and its implication on design values.
- Do's and Don'ts: Lessons learned

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Stanford Medicine + Behavioral Health



How do we know we are saying the same thing?

Design tools that enhance the design process.

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Stanford Medicine + Behavioral Health

### Real Time Visualization



Efficient  
explore numerous ideas quickly



Clear  
easily understood by all, unlike floor plans



Versatile  
communicates significant design concepts





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Stanford Medicine + Behavioral Health


### Cardboard Mock-up





Scalable  
single rooms to portions of a department





Flexible  
updates colour in real time



Immersive  
allows for collaboration amongst caregivers





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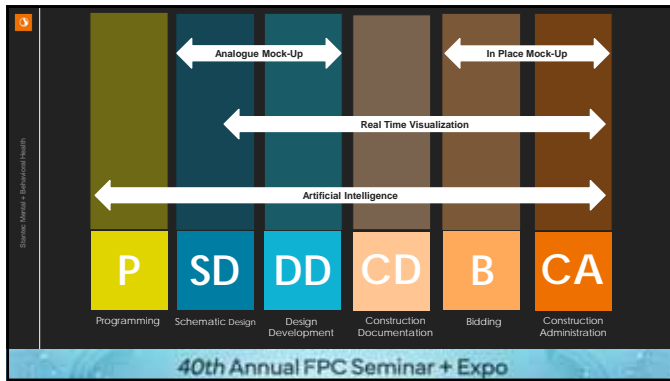
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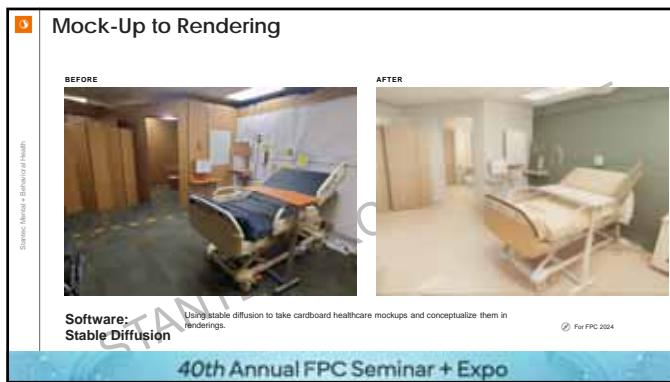
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STANTEC ARCHITECTURE



**Dignity-Driven Design**  
Design for humanity at its most vulnerable.

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STANTEC ARCHITECTURE



**Trauma-Informed Design**  
Collaborate with communities in crisis.

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STANTEC ARCHITECTURE



**Integrated Design**  
Harmonize the evidentiary with the emotive.

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Experiential Design

Neurodiverse approaches across the spectrum of sensory experiences

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Empathetic Design

Champion co-production with peer support & those with lived/living experience.

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### Mental Health Mock-Up Workshop



INTRODUCTION: TWO GROUPS LED BY JON SELL + STEPHEN PARKER  
-VIDEOGRAPHY TEAM: PRESENTATION FILMED + INTERVIEWS + B-ROLL  
-8 DIFFERENT STAKEHOLDER PERSONAS

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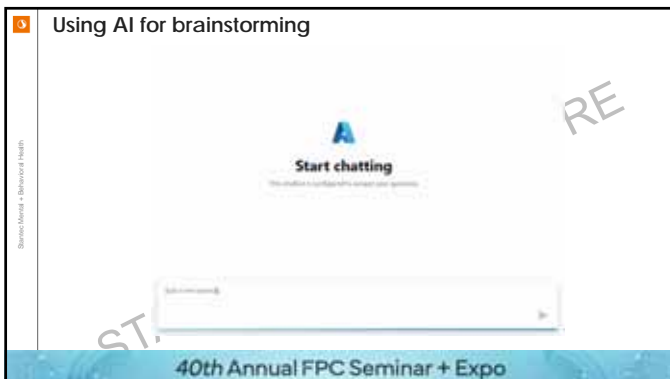
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STANTEC ARCHITECTURE

Using AI for brainstorming

I am an architect. What are some key considerations when designing in-patient rooms at a behavioral health facility?

1.Safety: Use anti-ligature fixtures and tamper-proof features to minimize self-harm risks.

2.Privacy: Ensure patient privacy while allowing for necessary staff observation.

3.Durability: Select materials and finishes that are robust and easy to clean.

4.Healing Environment: Incorporate natural light, calming colors, and views of nature.

5.Accessibility: Design rooms to be ADA compliant and accessible for all patients.

6.Acoustics: Manage noise levels to create a calming environment and ensure privacy.

7.Furniture: Choose safe, heavy, and comfortable furniture without sharp edges.

8.Technology: Integrate technology for patient care and communication.

9.Flexibility: Make rooms adaptable for various patient needs.

10.Regulatory Compliance: Adhere to relevant healthcare regulations and guidelines.

11.Patient Comfort: Provide control over lighting, temperature, and personal storage.

12.Therapeutic Design: Consider how room design supports therapeutic goals.

13.Staff Workflow: Design for efficient staff workflows and quick access to emergency equipment.

14.Cultural Sensitivity: Include culturally relevant design elements.

15.Sustainability: Incorporate environmentally sustainable design principles.

Collaborative design with healthcare professionals and patient input is essential for success

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STANTEC ARCHITECTURE

Using AI for brainstorming

I am an architect. What are some key considerations when designing in-patient rooms at a behavioral health facility?

1.Safety and Security: The primary consideration is to minimize risks of self-harm and ensure the safety of both patients and staff. Remove potential ligature points, use tamper-proof fixtures, and ensure that furniture is either too heavy to move or is securely fastened to the floor.

2.Privacy: Patients should feel that they have a private and personal space. This can be achieved through the layout of the room, the use of screens, or the provision of private areas within shared rooms.

3.Observation: Staff should be able to easily observe patients to provide immediate assistance if necessary. This can be facilitated through the use of windows in doors, strategic mirror placement, and the use of electronic monitoring where appropriate.

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STANTEC ARCHITECTURE

Mental Health Mock-Up Workshop



AI IMAGE GENERATION + FOUR MOCK-UPS:  
-EATING DISORDER PATIENT ROOM + CARE DESK  
-PEDIATRIC PSYCHIATRIC PATIENT ROOM + CARE DESK

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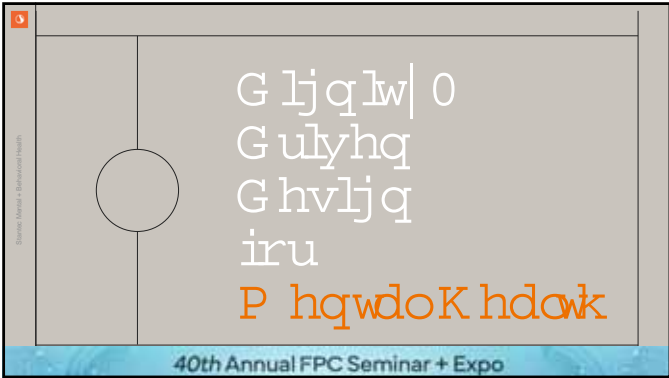
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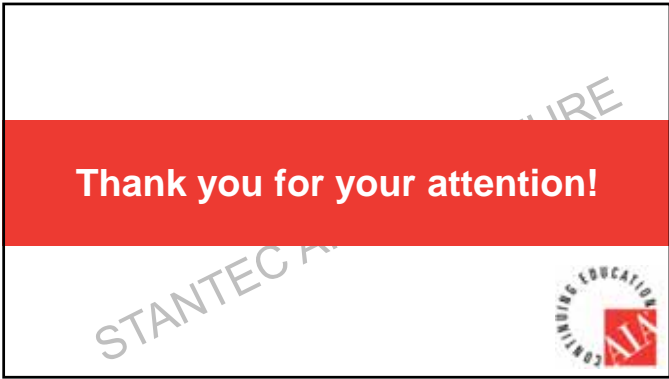
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