

Design and Healthcare

Too often, the NHS has overlooked the need to build in high quality design to its business cases. We look to the functional and assume that quality costs. Yet the benefits of pursuing high quality design are significant – to patients, staff and the wider community. The proposed capital programmes in south Essex give us an opportunity to raise aspirations for high quality design.

Amongst all the demands of a busy NHS diary, we also ask each NHS organisation to nominate a Design Champion. This paper seeks to support the work of Design Champions, where appointed, by highlighting a number of issues around the design agenda for all to consider.



Jane Darbyshire & David Kendall Ltd

1 Healing and the environment

Evidence indicates that the quality of the environment in which a patient is treated can contribute to the healing process. Natural lighting, noise reduction, wayfinding and views from windows amongst other things can all reduce blood pressure, stress and the need for analgesia and even shorten lengths of stay. The impact on healthcare acquired infections goes without saying. All these considerations need to be proactively considered when planning any refurbishment or new building in primary or secondary care.

1.1 Enhancing the Healing Environment

The King's Fund has been leading a project¹, initially within London but now covering all England to support nurse-led teams to work with patients on physical improvements to their environment. The most significant theme of the project has been to humanise the hospital environment evidenced both by making places that are uplifting and also the need to provide greater privacy and dignity for patients.

2 Recruitment and retention

The quality of the environment is critical to our ability to recruit and retain staff. We need to ensure that our facilities welcome our most important resource but also make them feel secure. We need to build in their requirements for their working routines as well as suitable space for their learning and breaks. As clinical practice changes, we need to ensure that we can offer facilities which allow staff to take on new roles and maintain their interest and enthusiasm. Last year 79% of directors of nursing in a CBE survey said that design and layout was a major disincentive to recruitment².

¹ <http://www.enhancingthehealingenvironment.org.uk/>

² http://www.healthyhospitals.org.uk/news/PR_NursesRRP2.pdf

3 Sustainable development

3.1 Corporate citizenship

By using sound design techniques, we can create buildings which are energy-efficient, use local resources and complement the local environment. Through public and patient involvement fora, we can also engage with local people in setting criteria for what will make a vibrant and effective building. In so doing, we discharge our responsibilities as corporate citizens, recognising that as major public sector organisations, we are not exempt from supporting the wider community.

3.2 Sense of place



Wembley Centre for Health and Care

We need to recognise that the NHS can contribute to a community's pride in itself. We could offer traditional looking health buildings or we could engage with exciting architects and designers to create something new which a community can be proud to have in its midst.

By creating iconic buildings, we can contribute to the renaissance of often neglected areas, encouraging others – public and private sector – to come forward and invest.

4 Supporting new models of care

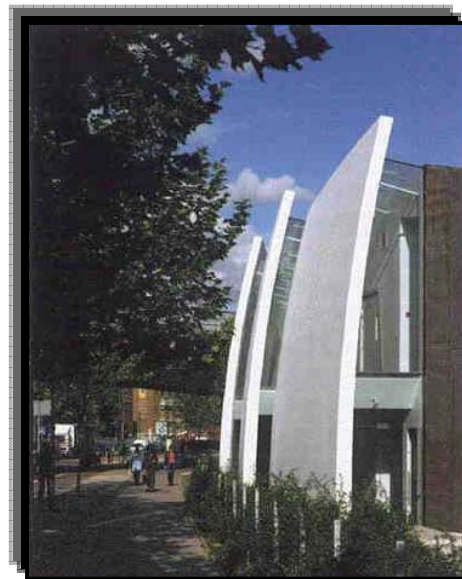
Moves to redesign the shape of healthcare delivery over the coming years signal the need to provide buildings with the right capacity and facilities in our communities. Initiatives such as LIFT and treatment centres need to ensure that they can respond to changing patterns of care, but that they also support a broader regeneration agenda.

Developing new buildings to accommodate new services in local settings also contributes to our work on sustainability. Really sustainable communities have a range of accessible services within them. Viewing new NHS buildings as community facilities also opens them up to be used fully by all parts of our community. Rather than using the building only when we need to see a clinician, we need to create buildings which welcome all sectors who can drop in to access a range of health improvement, healthcare and other services. Such multi-function developments can only benefit from innovative design. By bringing services out of hospital settings, we can also reduce reliance on the car.

5 What is important to staff and users of buildings?

CABE organized a poll of the factors people felt to be important in the design of hospitals³. The results are shown below – however, they are equally applicable to community facilities.

32% prioritised space
22% talked about light
16% talked about the need for fresh air
16% of people picked cleanliness as an important factor
12% talked about a warm, friendly atmosphere
11% wanted to see colour
10% wanted more gardens
9% wanted more privacy
5% wanted more use of technology
5% were concerned about noise levels



Hammersmith Bridge Road Surgery

These give clear pointers as to where sensitive design and partnership with users can lead to better buildings. Where there may be a cost – for example, more spacious reception, circulation or waiting areas – decision-makers need to weigh up relative costs, for the benefit of patients and staff.

³ <http://www.healthyhospitals.org.uk/results/results.html>

6 Conclusion

Procuring high quality design during capital planning addresses a number of policy initiatives, from providing a safe, healing environment to supporting regeneration. We need to support all NHS organisations in giving it the high profile it deserves.



Meadowfield Hospital W Sussex