

Four Insights to Address Patient and User Facility Needs

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◀ An experiential entry provides views into a performance space, outdoor fields and clinic waiting area, visually connecting all the activity in the double-height space.

A great way of gaining perspective is through experience. For me personally, as a healthcare designer, learning how a patient responds to a facility's design requires taking on the patient's perspective; for example, touring healthcare facilities after hours, observing how past design decisions have played out and interpreting solutions for tomorrow.

Walk-throughs of healthcare facilities allow one to experience what patients and providers experience as they navigate the space. The following are four key insights I've gained during these walk-throughs by experiencing healthcare facilities through the lens of an end user.

1 Cost-effective strategies optimize material selection

A conscientious approach to materials selection is one way design is evolving, as there is less need to make everyday spaces lavish to remain competitive. Restrooms, for instance, can include a drywall finish for the top half of the wall, with tile on the wet wall and floors, rather than tile throughout.

Healthcare is becoming more consumer-driven, and part of that includes creating an experience. Leaders are more willing to invest in that experience if there is a return, rather than simply the ungrounded use of opulent materials.

An example includes an ambulatory surgery center in Denver, Colorado that invested in the creation of an experiential entry to the building. Hospital leaders wanted people who entered the double-height space to immediately have views into the physical therapy space, the outdoor fields and the clinic waiting area—visually connecting all the activity in the space. Although the center is visually linked indoors, it is connected on the outside through a glass core that houses the reception and waiting areas with views to the outdoor playing fields, as well as the sports medicine and physical therapy structure.

Beyond the visual connection, the energy of the space is transferred throughout by affording the ability to see other people move throughout the space. Technologically, a large monitor projects images of sports and athletes to give patients and visitors the feeling of immersion in the sports-medicine environment.

2 Non-revenue generating spaces improve functionality

Another insight I have gleaned involves entry lobbies and atrium spaces. Designers and leaders today want to ensure that every design decision has a clear purpose, and find ways to serve that purpose without excess. There must be a reason for design decisions that is justified by the space. This is especially true for nonrevenue-generating spaces.

In keeping with an effort by owners to ensure that non-revenue generating spaces optimize functionality, entry lobbies are right-sized and they include waiting rooms, check-in and registration in a bustling space that embodies the concept of “active waiting.”

With today’s technology, work can be performed from anywhere; consequently, many people are answering emails or performing other tasks while they wait. There may also be educational opportunities presented to teach the public something about their health while they wait, or even a healthy food component.

In addition, the multi-floor atrium, with expensive smoke evacuation systems, has given way to two-floor vertical connecting spaces that are more minimalist and highlight adjacencies rather than serving as a destination. Public corridors, once grand spaces in their own right, are narrower and more focused on function.

Some facilities opt for a concourse that links areas together. Because the concourse sees more traffic than an entryway or waiting room, the activity justifies the use of nicer spatial qualities, indoor/outdoor connections and higher-end finishes. The terminus of each end of the concourse can serve as an entry, such as a parking garage or a second “front door” or a destination point, such as an inpatient facility.

The number of seats per exam room is also being reduced, and designers are learning to navigate the challenges of maintaining a sense of “arrival” with an optimized investment.



^ With today’s technology, people can accomplish many little tasks in the few minutes they have while waiting for other things. Comfortable waiting rooms equipped with Wi-Fi provide the opportunity to answer work emails, catch up on social media and keep ahead of to-do lists.



3 U-Shaped Concourses Support Many Uses

On the lower levels, a terraced outdoor garden can connect semiexposed basement levels with the floor above. Spatial connections occur vertically and add interest both inside and outside the facility. This solution may be ahead of the needs curve, but the spatial connection from outdoors to indoors contributes to a sense of arrival in the absence of a grand atrium and provides a connection to the outdoors to benefit staff and patients.

One approach is to program green space so that when people enter the facility, their first experience connects them to such a space as an interior courtyard that provides views from the front door in and through the space, while daylighting the interior. A green space humanizes adjacent services by borrowing light and natural elements, providing access to walkways outside and promotes patient-centered care through wayfinding elements centered around the courtyard as a point of orientation.



4 Function for all users

The subdued and pragmatic design that has resulted from trends during the past decade is functional for staff, patients and caregivers. As society changes, healthcare facilities adapt to support the way people live. In today's society, the line between work time and nonwork time is blurred, with splinters of work time integrated throughout the day. People work at home, outside office hours, and healthcare buildings must support providers and staff who work this way, including the accessibility of Wi-Fi and comfortable spaces for family members in waiting areas.

All these adaptations contribute to the humanization of the space that has been paramount over the past 20 years. Rather than focusing on through-put and impres-

sive architecture, spaces support the occupants—both patients and providers—while being more deliberate about material choice and layout.

Material selection that is functional and comfortable, and design that focuses on the patient experience by providing views to the outdoors, as well as effortless navigation and convenient access to administrative resources, ultimately render spaces that put patients at ease and optimize satisfaction.

The final outcome equates to spaces that are more functional, see more use and inherently meet the needs for wellbeing—which is good for the bottom line, appeals to providers and more comfortable for the public.



^ Spaces that are functional and comfortable, with natural light, holistic design and convenient access to administrative resources achieve the highest patient satisfaction.



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