



## KEY POINT SUMMARY

### OBJECTIVES

This study sought to explore the number of, size of, and access to mirrors that are available to residents in LTC homes.

## Assessing the mirrors in long-term care homes: a preliminary survey

Freysteinson, W. M., 2010 | *Journal of Gerontological Nursing*. Volume 361, Issue 1, Pages 34-40

### Key Concepts/Context

According to geriatric environmental design literature, bringing the home to the long-term care (LTC) environment is key to residents' comfort. However, the mirror is one environmental element that has received little attention in LTC environments, and yet appears to meet this conceptualization. Mirrors may fit with Lawton's theory in that it functions to maintain, support, and stimulate the residents, perhaps even more so for those who have limited mobility.

### Methods

The study used a convenience sample of 10 dually licensed skilled nursing facilities/LTC homes. The administrator of each LTC home granted permission to view the empty rooms.

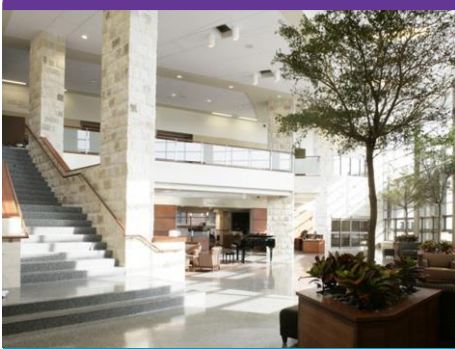
The researcher counted and measured the total number of mirrors available to a resident on a daily basis.

### Findings

The results were discouraging. Some facilities had no mirrors available for bedbound residents or wheelchair users. In most facilities, residents could not view their lower bodies in a mirror.

In this pilot study, the total number of mirrors a resident in a LTC home encountered on a daily basis ranged from 1 to 4, with 8 facilities having just one mirror. Total mirror coverage varied from as little as 0.2 m<sup>2</sup> [2.15 sf] to 1.1 m<sup>2</sup> [11.84 sf], with an outlier at 13.6 m<sup>2</sup> [146.39 sf].

Only one facility had mirrors appropriate for bedbound residents. Seven facilities had mirrors allowing wheelchair users to see their faces and shoulders. One LTC



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home had one full-length mirror (which allows the viewer to see his or her reflection from head to toe) located in the front foyer. Obstructions included sinks, countertops, soap dispensers, and a sharps box. Only one LTC home offered an unobstructed view.

The author felt that, considering the assumption underlying this survey—that each person has the right to choose to view his or her own body—the results of this preliminary study were discouraging.

### Limitations

This study used a small convenience sample, and thus, the findings may not be generalized beyond the sample. The study did not collect data about the residents' income levels, which may have had a bearing on the number and type of mirrors available. This survey is considered a preliminary or pilot study, which identifies potential areas for research in a larger study.

### Design Implications

Safety is an issue to consider related to mirror material. The author discusses the alternatives in this article. Nurses can encourage tabletop mirrors for bedbound residents, full-length mirrors for wheelchair users, and mirrors without obstructions, as well as advocate for residents to bring handheld mirrors with them to the LTC home. Designers need to be aware of this issue, particularly as it relates to any long-term setting.

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