



KEY POINT SUMMARY

OBJECTIVES

The purpose of this study was to investigate the impact of design trends within Malaysian pediatric hospitals from the last three decades on patient and staff satisfaction, and to identify design factors that help in the creation of an optimal healing environment.

DESIGN IMPLICATIONS

These findings indicate that the users' needs are not being adequately met in the design of Malaysian pediatric hospitals. Based upon these findings, a more thorough understanding of user needs should be taken into account when designing physical environments that create an optimal healing environment for children.

Quality Physical Environment in Paediatric Wards: Designer's Creation Versus Users' Satisfaction

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Key Concepts/Context

Prior research has revealed that an optimal healing environment can enhance a child's quality of life by supporting the healing process. However, little has been done to identify specific design features within an optimal healing environment that either impede or aid the healing process.

Methods

A post-occupancy evaluation was conducted within eight Malaysian pediatric hospitals that had been built over the last three decades, located in urban and non-urban settings. To protect confidentiality, the hospitals were labeled using "U" indicating "urban", or "NU" indicating "non-urban," followed by the year built. Data collection consisted of documentation using inpatient data, photographic evidence, and floor plans collected by the investigators through personal site visits of approximately four hours each. Investigators also utilized the UK's NHS AEDET (Achieving Excellence Design Evaluation Toolkit) and ASPECT (A Staff and patient Environment Calibration Toolkit) to evaluate the perceived quality of the built environment and assess patient and staff satisfaction with the built environment. Finally, a total of 217 patients and 215 nurses participated in self-report questionnaires.

Findings

The AEDET revealed an overall positive design trend for pediatric hospitals designed after 1991. Of the eight components measured, only Use did not show a positive trend. However, Use still evaluated above average in each of the hospitals. The ASPECT reported an overall dissatisfaction with the oldest and newest



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hospitals evaluated. Staff reported the highest satisfaction with KJ (U)-99, followed by the newer AG (NU)-06. Similar to staff, patients reported highest satisfaction with PA (U)-99 versus the newer hospitals. This research suggests that while design trends in pediatric hospitals in Malaysia have been positive over the last three decades, this positive trend in the design of this physical environment specific to children has not increased in tandem with staff and patient satisfaction.

Limitations

While inconsistencies were found within satisfactory levels of staff and patients, specific physical qualities pertaining to satisfaction levels were not mentioned. Evaluation of the AEDET and ASPECT were evaluated by different entities, creating possible inconsistencies between the two scores.