



KEY POINT SUMMARY

OBJECTIVES

The objective of this study was to investigate how the built environment impacts communication, patient care processes, and patient outcomes.

The Role of the Built Environment: How Decentralized Nurse Stations Shape Communication, Patient Care Processes, and Patient Outcomes

Real, K., Bardach, S. H., Bardach, D. R., 2017 | *Health Communication*. Volume 32, Issue 12, Pages 1557-1570

Key Concepts/Context

This study compared nurse communication using a new decentralized nurse station model in a newly built urban, trauma-1 level hospital with the experiences at the “old” hospital where there was a centralized work space where nurses could easily hear one another and worked in close proximity to each other.

Methods

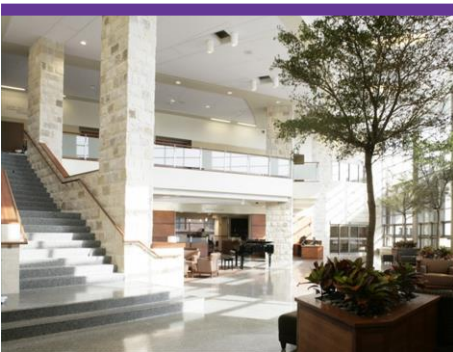
In this mixed-methods study, data collected from nine focus groups was subjected to qualitative analysis guided by a conceptual framework based on systems theory and prior health care design and communication research. Quantitative modeling was employed to assess walking distances on two nursing units.

Findings

Nurses, techs, and nurse managers perceived that the new decentralized format adversely affected teamwork, social support and mentoring. Inefficiencies such as walking distances were improved in some ways but exacerbated in others. When nurses are separated by distance, implications related to communication, social support from peers, and learning cannot be ignored.

Limitations

Two significant limitations are evident. First, this study took place in a single facility; therefore, the generalizability of the results is limited. Secondly, the data analysis sections were limited and did not provide adequate detail regarding the steps in analysis.



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Design Implications

A systems framework such as Donabedian's is useful in understanding how a change in one area will impact others. In this study the decentralized design altered interdependencies for nursing work, restructured physical spaces without adjusting nursing processes, and adversely affected nursing communities of practice. Nurses need support from an organizational or leadership standpoint to adapt workflow when their physical workspaces change significantly.

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