



KEY POINT SUMMARY

OBJECTIVES

This literature review examines how health facility design effects the well-being and performance of healthcare workers.

DESIGN IMPLICATIONS

This paper argues that better designed health facilities can improve working conditions and staff safety, and enable staff to do their job more effectively. Designers can use this information throughout the design process as a way to engage staff in all phases of design, but perhaps, most importantly as a way to bring them to the table.

The Impact of Health Facilities on Healthcare Workers' Well-Being and Performance

Rechel, B., Buchan, J., McKee, M.
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Key Concepts/Context

There is extensive research on the effect of healthcare environments on patients. But much less is known about health facilities' impact the staff, even while there is growing recognition of the need for healthy working environments. Poor healthcare working environments can relate to the nature of the work—long and antisocial hours, little administrative support, physical labor, and, sometimes, violence. Or they can related to the lack of proper equipment, such as patient lifts and appropriate and safe disposal of medical waste. However, the built environment itself has so far been largely overlooked.

Methods

The authors of this article conducted a review of published literature, culled from PubMed and Google, as well as via searches of websites of relevant organizations. They used a range of terms to search PubMed and reached consensus on the 11 articles to include.

Findings

The research articles the authors found were grouped into three categories: those concerned with the impact of design on staff well-being, the impact of design on staff performance, or the involvement of healthcare workers in the design of new facilities.

From this literature, six design factors surfaced that impacted staff well-being: (1) location, (2) the hospital experience, (3) access to personal space, (4) the choice of materials, (5) a safe environment, and (6) recognizing staff's family commitments



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and including residential accommodation and daycare facilities into the hospital design—not added later.

The literature also revealed areas that can improve staff performance. First, layout, as it determines walking distances. Second, that design innovations can reduce nosocomial infections, medical errors, patient falls, and medication use by in-patients; increase caregiver productivity; reduce horizontal and vertical travel time and patient transfers; reduce energy consumption; and reduce costs of future layout modifications. Further, the authors state, “The ability of nurses to care for patients is influenced, inter alia, by the geographic dispersion of patients, the size and layout of individual patient’s rooms, and technology (such as pagers or computers). Also, increased use of information and communication technologies will continue to have increasingly important implications for healthcare workers.”

The literature reviewed also noted that there seems to be a strong case for involving healthcare workers in the design of new facilities. The benefits extend beyond improving the physical layouts, the literature points to evidence that nurses are more likely to be attracted to, and perform better in, hospitals where they can advance professionally, gain autonomy, and participate.

Limitations

The authors note that they only used one database (PubMed) and relied on a small number of search terms. In addition, the studies in the literature review were often single case studies; small, nonrepresentative surveys of healthcare workers; or before–after comparisons.