Enhancing a Primary Care Environment: A Case Study of Effects on Patients and Staff in a Single General Practice

Rice, G., Ingram, J., Mizan, J.
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Key Concepts/Context

The stress and satisfaction of patients and staff are important healthcare outcomes. Patient satisfaction and stress strongly impacts patient health, the images of healthcare organizations, patient loyalty, patient retention and attraction, operating revenue, and profit margin. Staff stress and job satisfaction directly impacts the quality of patient care, work efficiency, and staff turnover intent.

The appearance of physical environment impacts patients’ and staff’s stress level, their perception of healthcare settings, and their satisfaction with healthcare experiences. Research in inpatient settings has found that more attractive and comfortable environment might lead to lower stress and higher satisfaction level. However, very little research has been conducted in primary care settings on this topic.

Methods

This study was conducted in two phases—before and after a primary care clinic moved from a converted house to a new purpose-built primary care building in November 2005. The old building was cramped, noisy, lacking privacy with minimal level of comfort and decoration. The new building was more spacious, brighter, and more comfortable with modern appearance and novel artworks. In both phases, patient questionnaires were distributed to patients to measure patient anxiety before and after consultation with doctor, patient satisfaction with the built environment, and patient perception of doctor-patient communication. Selected patients also participated in semi-structured interviews for their views about the building. Staff questionnaires were distributed (once before the move, twice—4 months and 11 months—after the move) to all staff to measure their satisfaction.
with the built environment, job satisfaction, and psychological symptoms. Focus groups were conducted with staff to explore their views in greater depth. Statistical tests (t-test, ANOVA) were used to analyze quantitative data. Qualitative transcripts from interviews and focus groups were analyzed using thematic technique.

**Findings**

A total of 1118 patients completed questionnaires in phase 1 and 954 patients completed questionnaires in phase 2. Compared with patients in the old building, patients in the new building reported lower anxiety level, higher satisfaction with the environment, and higher satisfaction with doctor-patient communication. Staff satisfaction increased significantly 4 months after move and slightly decreased 7 months later. No difference was found in staff psychological health. Patients’ and staff’s comments about the old building were mostly negative while the comments about the new building were much more positive.

**Limitations**

There were several limitations of this study:

- The article provided very limited description about the difference in design features between the two buildings. For example, it was not clear which specific design features contributed to the lower noise and higher level of comfort.
- Differences between the old and new buildings could be found in many aspects of the built environment. A simple comparison between the two buildings could not clarify the effects of individual design features. Further research is needed to examine roles of different design features.
- Staff questionnaire results indicated a “honeymoon period” (favorable perception because of the newness not the merit of design) immediately after the move. The increase in staff satisfaction could further vanish over time (after 11 months post-move)