



KEY POINT SUMMARY

OBJECTIVES

The objective of this paper was to investigate the physical environment of a geriatric psychiatry unit to understand how it meets the needs of patients with mental health conditions.

The Impact of an Acute Psychiatry Environment on Older Patients and Their Families

Hung, L., Loewen, E., Bindley, B., McLaren, D., Feist, T., & Phinney, A. 2014 | *Journal of Gerontological Nursing Volume 20, Pages 1-7*

Key Concepts/Context

There is a lack of research that examines impact of the designed environment on the experience of older adults and their families in healthcare settings.

Methods

Ethnographic methods (observations and interviews) were utilized with a sample population of seven elder patients who were diagnosed with depression, dementia, or both, along with four family members. Researchers conducted a total of 20 hours of observation over a three-month period. A systematic thematic analysis was conducted on the data.

Findings

Four interrelated themes of environmental qualities emerged as central in promoting healing: therapeutic, supportive of functional independence, facilitative of social connections, and personal safety and security.

Design Implications

One of the most consistent recommendations in the literature in regard to the general adult psychiatric hospital environment is to reduce the “institutional feel” and create a familiar and homelike atmosphere. The authors suggested environmental strategies to support their themes uncovered during this study.



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Therapeutic	Supportive of functional independence	Facilitative of social connections	Personal safety and security
Plants; accent colors; quality lighting; artwork; natural sunlight; access to outdoor patio & gardens; reduce noise; minimize glare; pockets of homelike environment	Handrails; walking loops; appropriate signage; landmarks to help with wayfinding; raised toilet seat with contrast color; personal storage; uncluttered spaces; spacious bathrooms; contrasting colors; appropriate furniture	Music; pet therapy; meaningful activities; memory boxes; access to favorite foods; recreation & common room; personal photos and items; furniture to accommodate visitors; quiet areas for family visit; multi-language libraries; eating meals in the dining room	Private rooms; one-way door locks on patient rooms; silent staff personal safety alarm; quiet space/sensory room to help patients manage stress; call bells in all common areas; visible staff in all areas

Limitations

The small sample and exploratory nature of the study limit the generalizability of the results.