

# Respite in the Clinical Workplace



An ARC Fellowship project in collaboration with:

**NBBJ | UW**

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# Project Team



**GABE RIVAS**

ARC Fellow

3-Year M.Arch Candidate  
University of Washington



**ELAINE WALSH**  
**PhD, RN, PMHCNS-BC**

ARC Faculty Advisor

Associate Professor,  
Vice Chair for Education  
University of Washington's  
School of Nursing



**HEATHER BURPEE**  
**M.Arch, EDAC**

ARC Faculty Advisor

Research Associate Professor  
Integrated Design Lab  
University of Washington's  
College of Built Environments



**RYAN MULLENIX**  
**AIA**

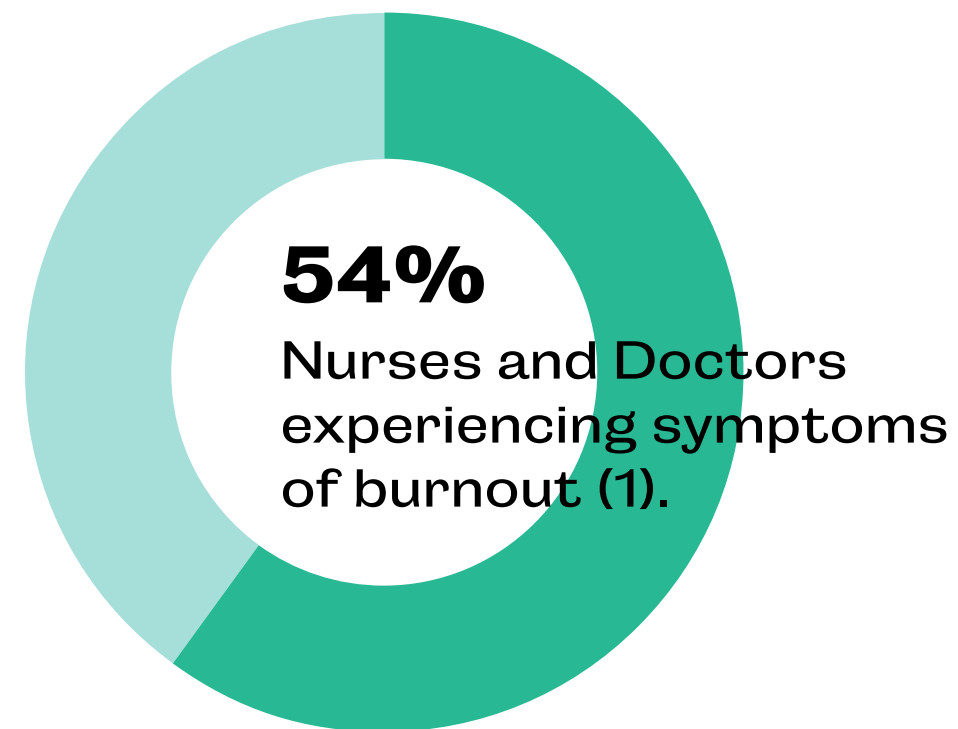
ARC Firm Advisor

Architect, Partner  
NBBJ

# Introduction

## PRE-COVID

October 2019



## COVID-19 ERA HEADLINES

### U.S. NEWS

"U.S. Faces Crisis of Burned-Out Health Care Workers"

### THE GUARDIAN

"'I can't do this any more': US faces nurse shortage from burnout"

### FORBES

"Unless We Future-Proof Healthcare, Study Shows That By 2025, 75% Of Healthcare Workers Will Leave The Profession"

### NPR

"Health workers know what good care is. Pandemic burnout is getting in the way."

# Are healthcare workers getting the **respite they need** in the **spaces they work?**

It appears they aren't. This study  
set out to see why.

## Investigative Aims

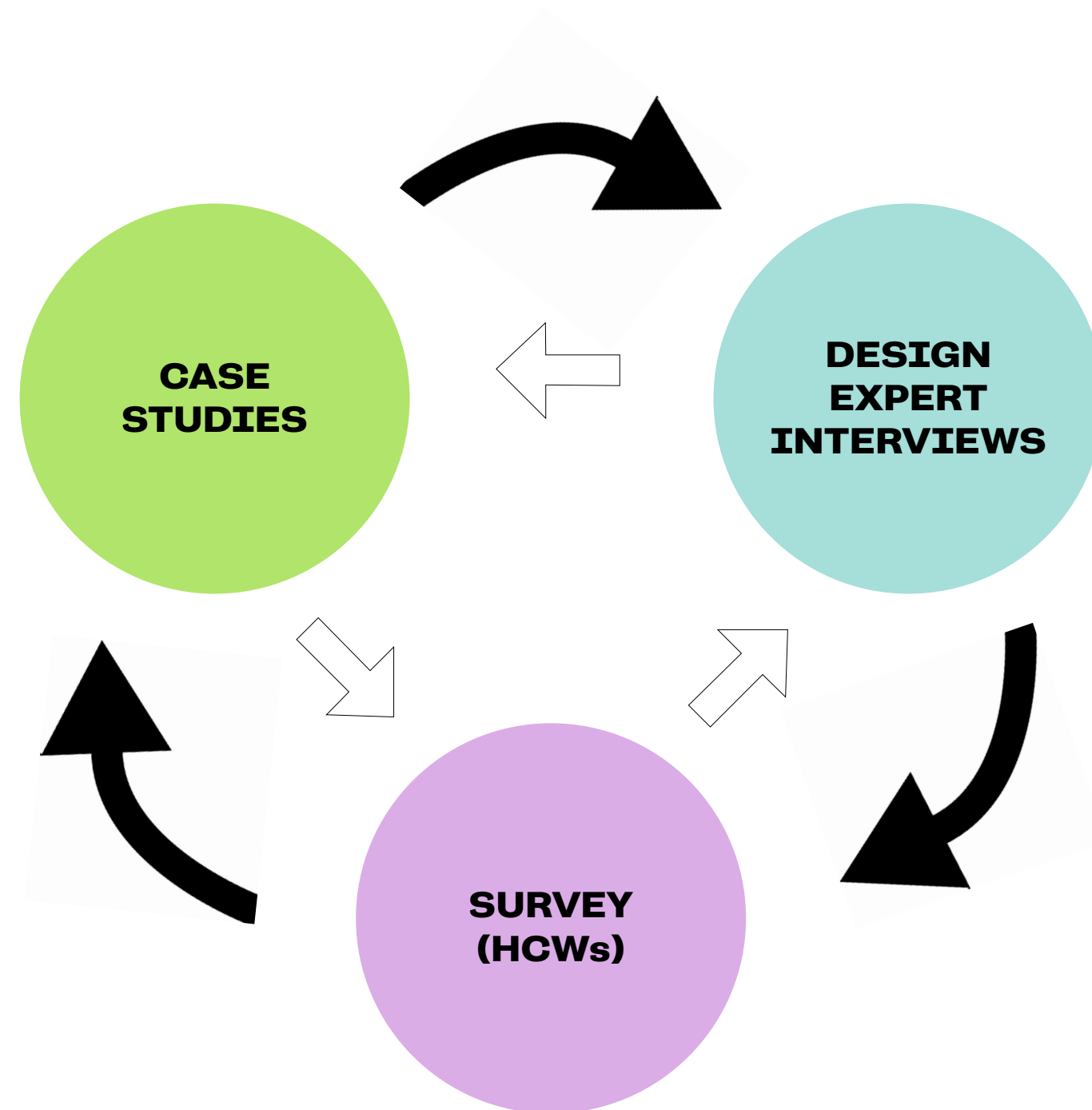
- Dedicated HCW Respite Spaces in The HCBE
- Design Features For Health & Well Being

## Investigative Aims

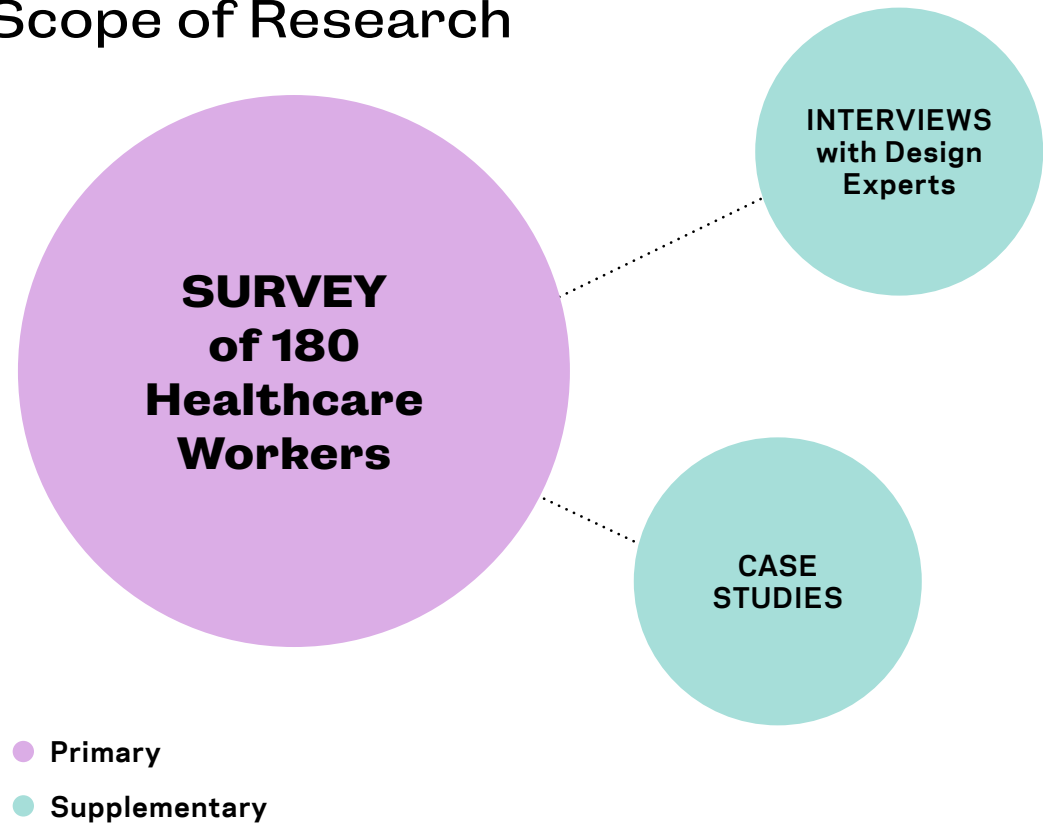
- Experience With Design Of Respite Spaces in the HCBE
- Barriers/Challenges Implementing Dedicated Respite Spaces for HCWS

## Investigative Aims

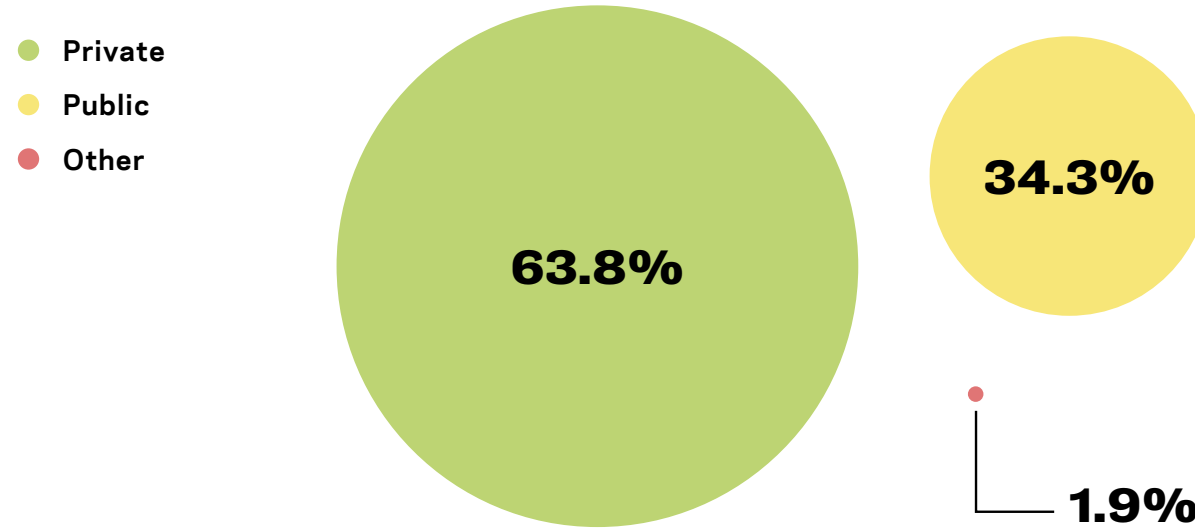
- Break Habits
- Barriers/Challenges to Taking Breaks
- Ideal Respite Space(S)



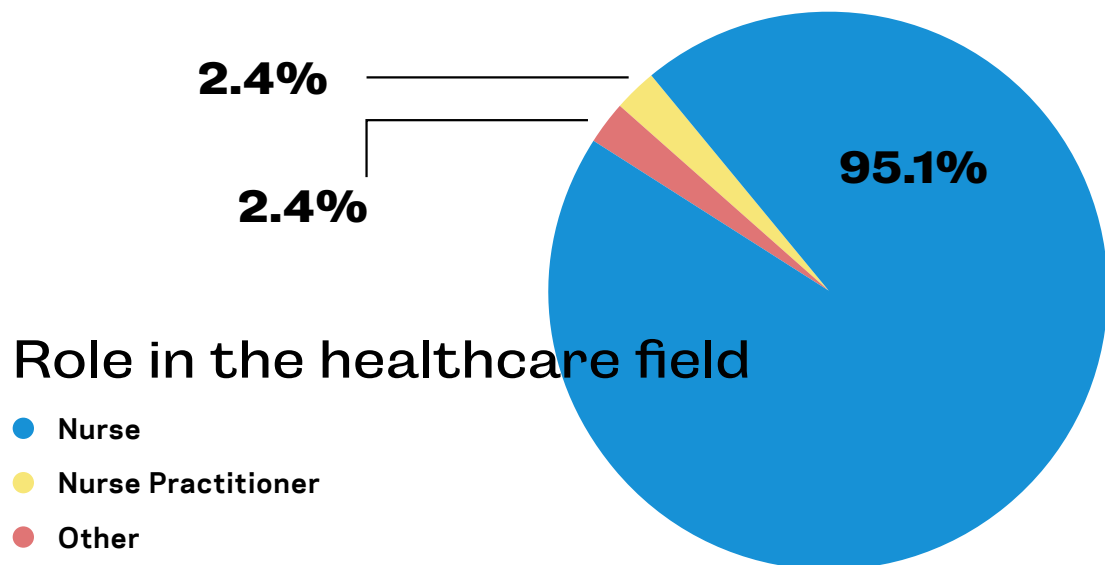
## Scope of Research



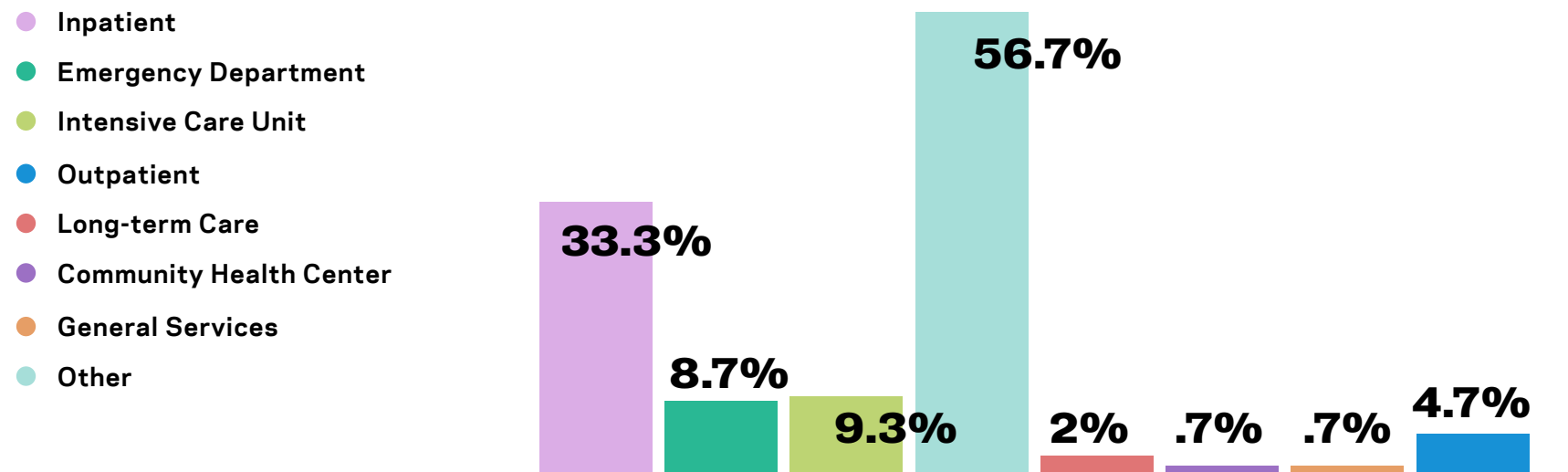
## Type of healthcare facility



## Role in the healthcare field



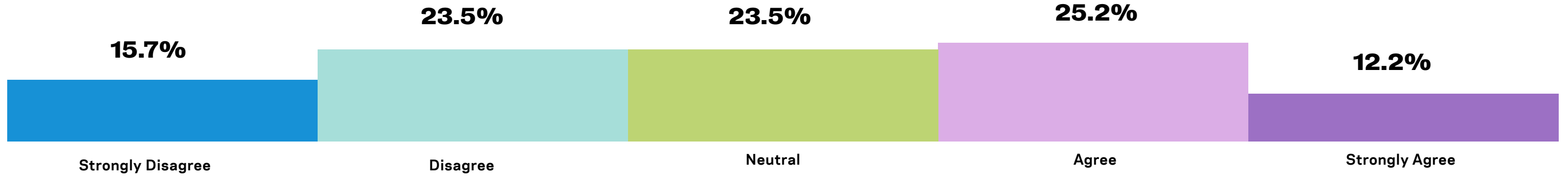
## Department typically worked in



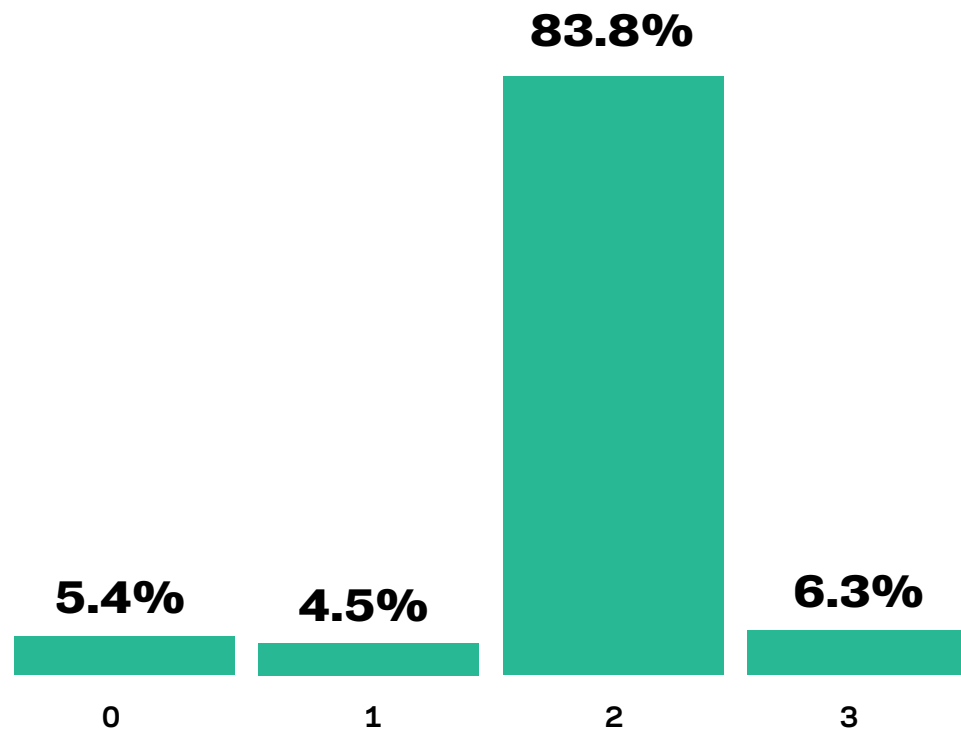
# Current Conditions

Breaks Alloted vs. Taken

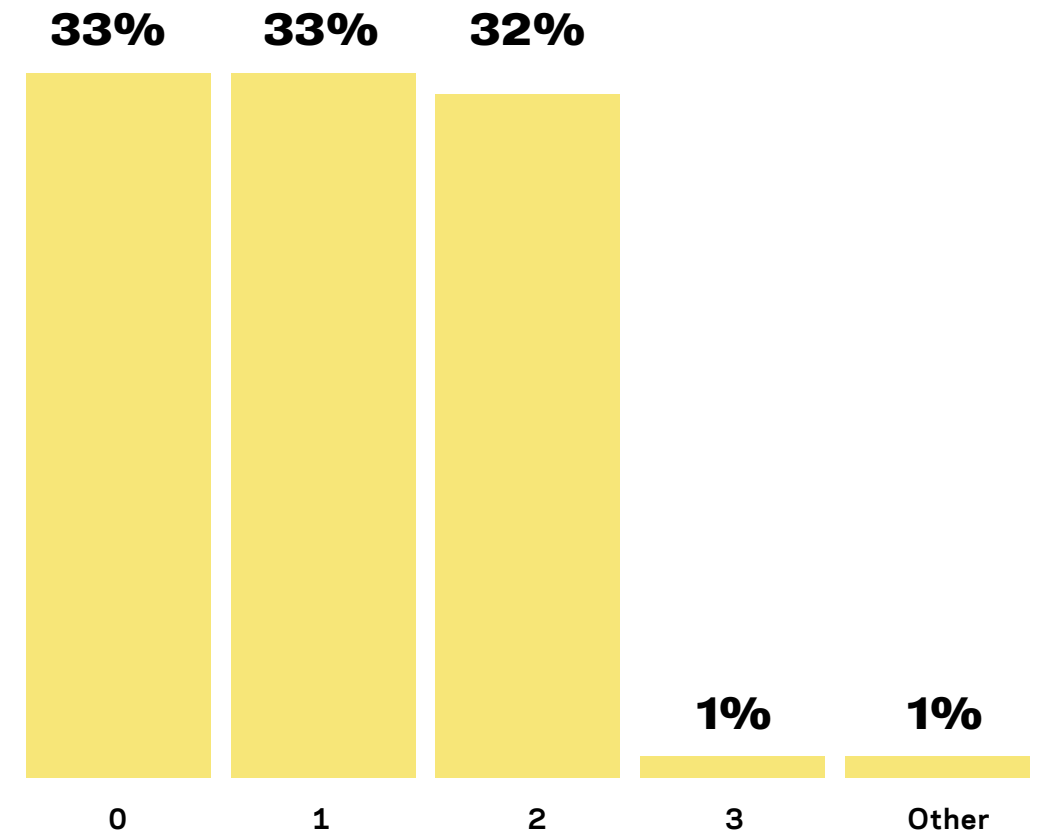
I am able to take all of my allotted breaks



How many non-meal breaks are you allotted on a typical day?



On a typical day, how many non-meal breaks do you actually get to take?



**“Chronically understaffed.”**

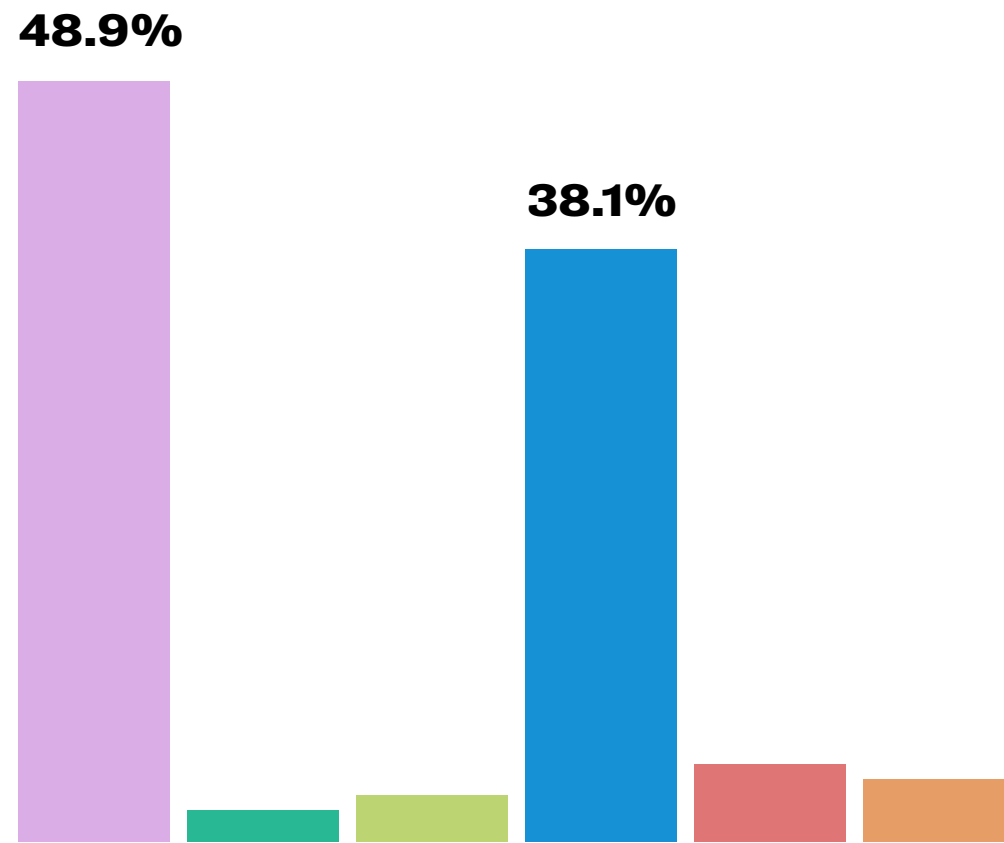


**“Not enough staffing to provide coverage for a break. I’m supposed to get a full lunch break but often don’t. I rarely get both mini-breaks.”**

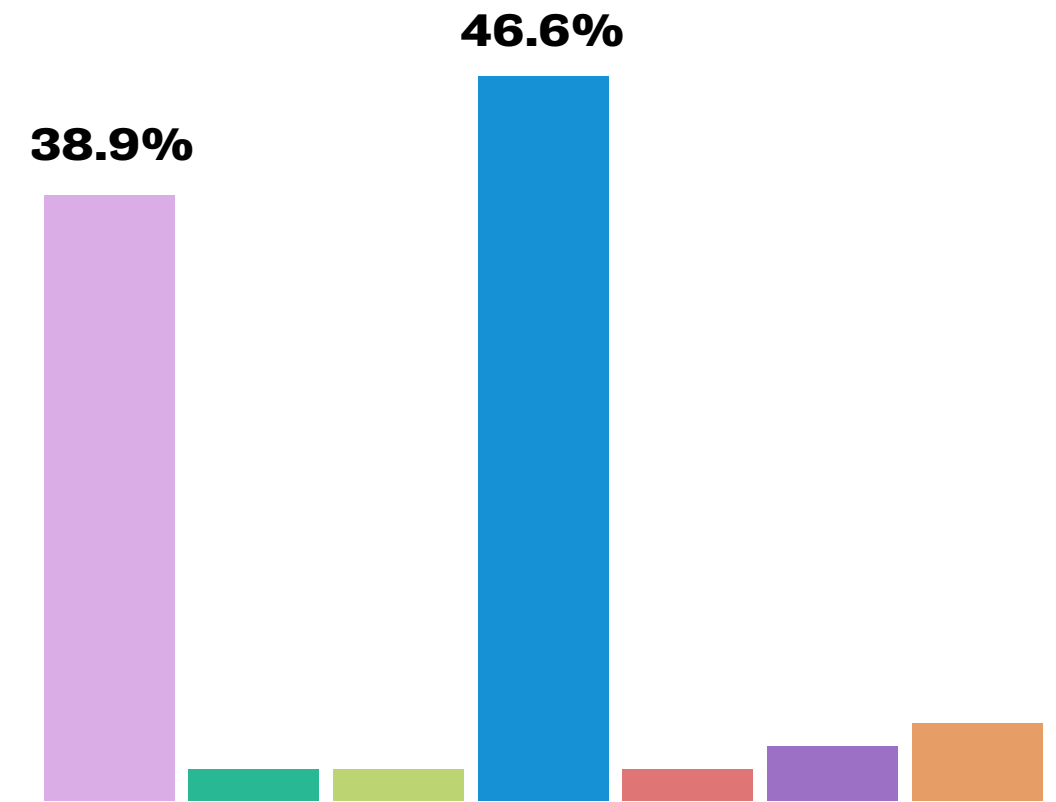
**"Lack of designated space  
away from the desk."**

# Designing an Outcome

- In-Unit Break Room
- In-Unit Break Alcove
- Facility Cafeteria
- Workstation/Office
- In-Unit Public Lounge
- Facility Outdoor Space
- Other



Where do you typically spend your **meal** breaks?



Where do you typically spend your **non-meal** breaks?

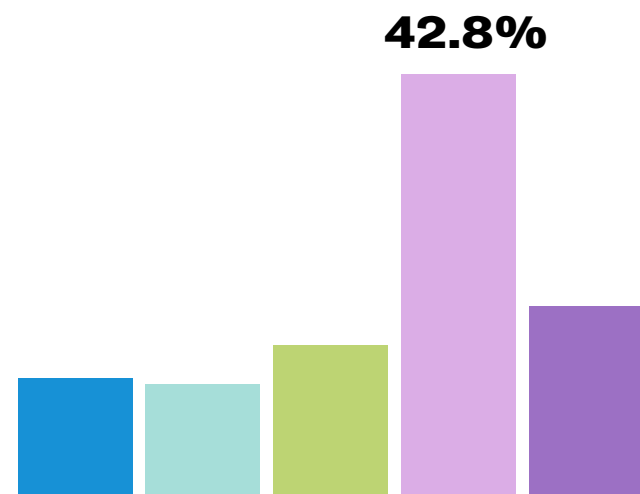
## "Other" Text Entries:

- Pumping Room
- Patient Room
- Car
- Back Office
- Conference Room
- Hallway
- Locker Room
- Training Room

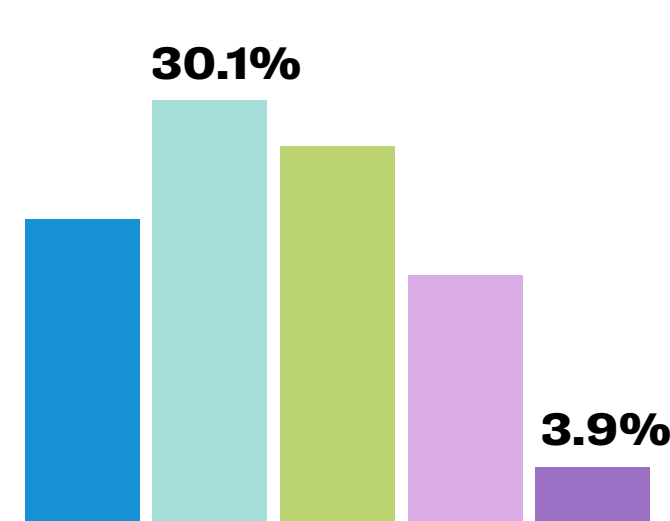
# Designing an Outcome

- Very Unsatisfied
- Unsatisfied
- Neutral
- Satisfied
- Very Satisfied

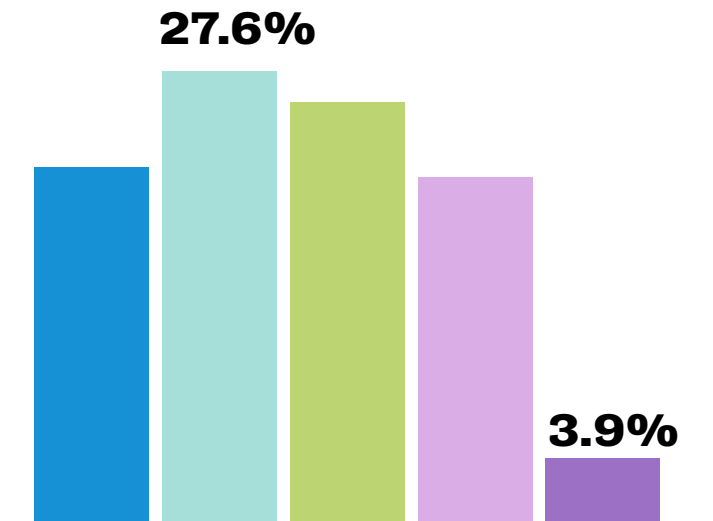
Do you have **easy access** to break spaces in your workplace?



Select your **level of satisfaction** with your current break spaces.



The break and respite areas available to me **fulfill my needs**.



When asked to elaborate on the answers above, here's what some of them wrote...

"They have dark or have harsh lighting and are miserable to be in."

The room is too small and crowded. It gets overused and dirty easily. There are no windows in the lounge/break room."

"There is no natural light, they are messy, small claustrophobic and overall dismal."

"It needs a window — being in a building for 12 hours I often don't have connection to the outside world. In the winter I arrive in the dark and leave in the dark...I don't see the light of day."

"Not enough chairs and refrigerators. Smell is also an issue."

**“They are dark, have harsh lighting, and are miserable to be in.”**

**“I hate the break room  
in our unit.**

**The sink drains slowly,  
the fridge stinks and  
the dishes are not clean  
or stored properly.”**

**"It needs a window — being in a building for 12 hours, I often don't have a connection to the outside world.**

**In the winter, I arrive in the dark and also leave in the dark — I don't see the light of day."**

**“[The break room] lacks privacy.**

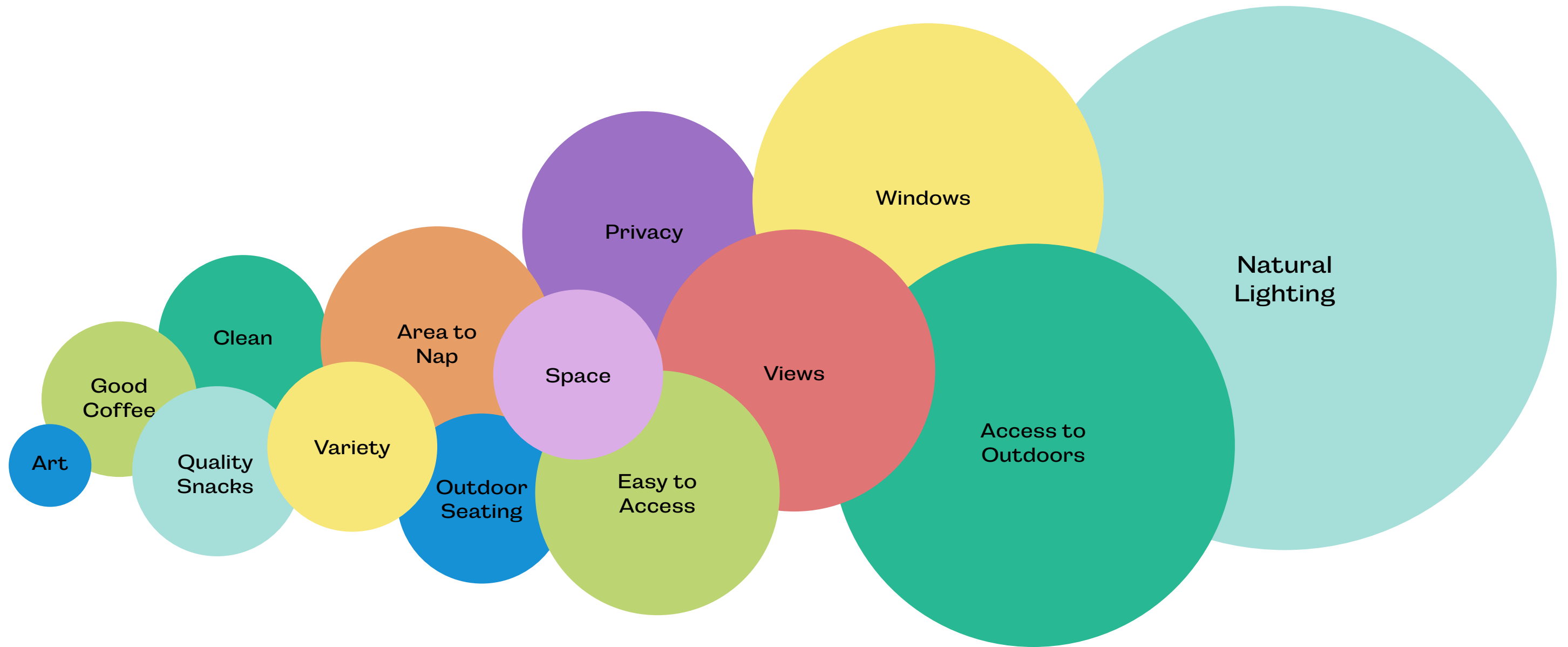
**I’m spending a 12 hour shift with  
no respite from other people/  
noise/stimuli and someone always  
wanting something from me.**

**I just want some quiet and to be  
left alone.”**



# Respite Matrix

Envisioning the Ideal Break Space



Least Requested

Most Requested

**"Clean, stocked, lots of light, outside space, close to work unit, soft music, smells nice."**

**“Natural lighting, access to outdoors (green space, water), art, access to food / snacks, comfortable furniture (to take a nap in!), options to rest in private or in public.”**

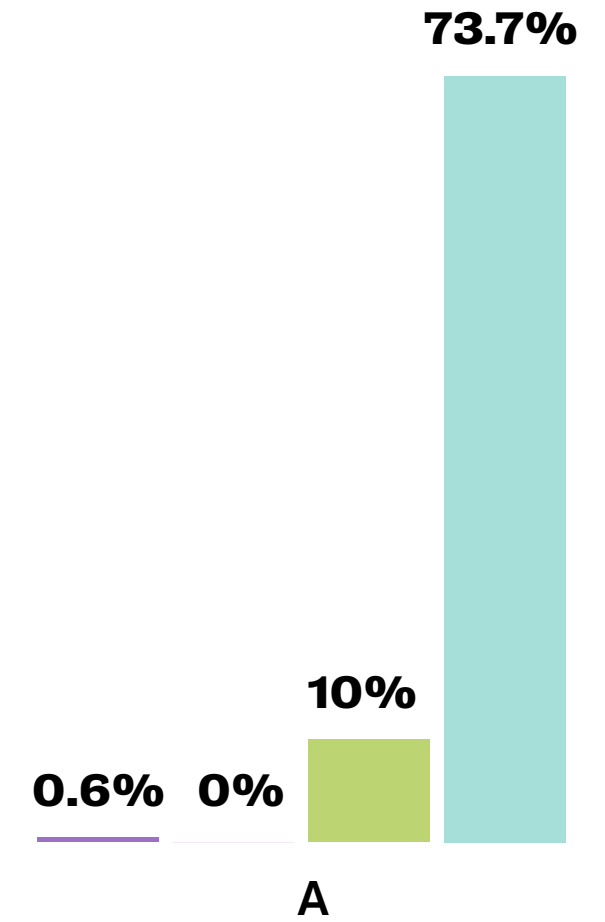
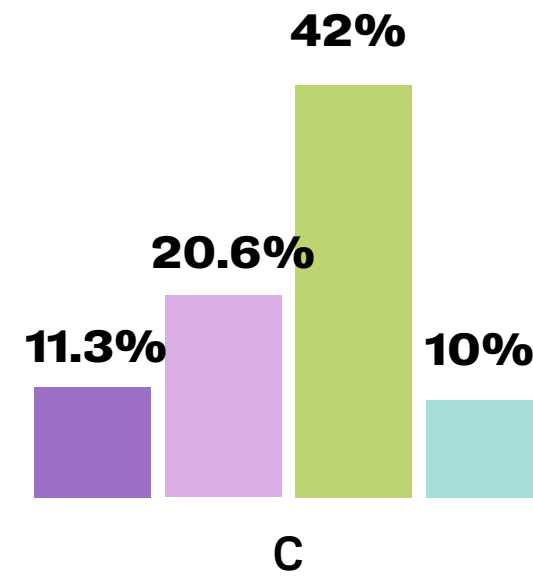
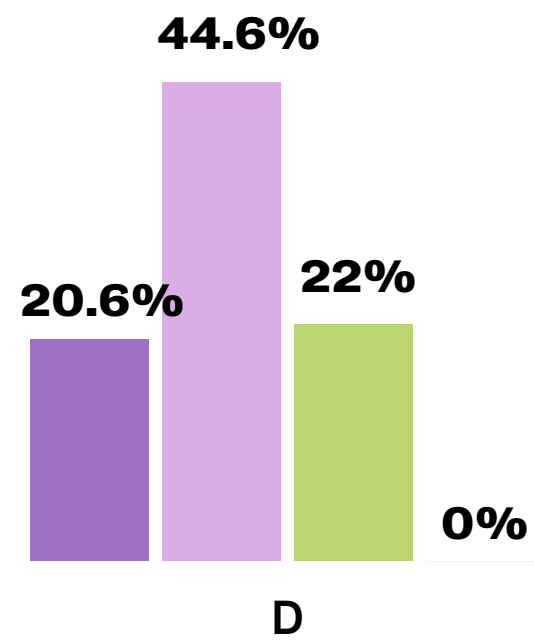
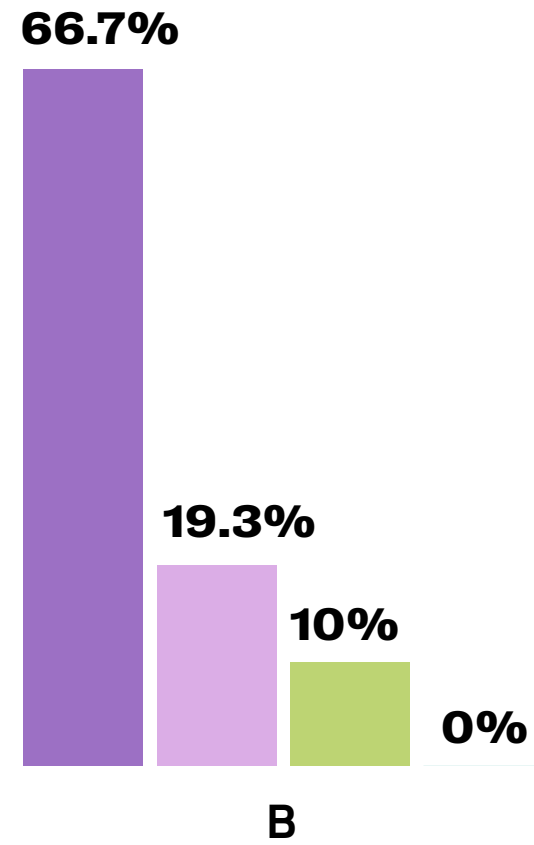
**"Access to public and private areas (being in a quiet space during breaks is sometimes essential), different locations to relax (at a table, in a lounge chair, outside, inside), natural lighting — if possible large windows with nice views & access to outdoors."**

**“Close to work area but separate, large enough to have quiet and privacy when several others are in there, large windows and/or outdoor space, variety of furniture, not shared by other departments.”**

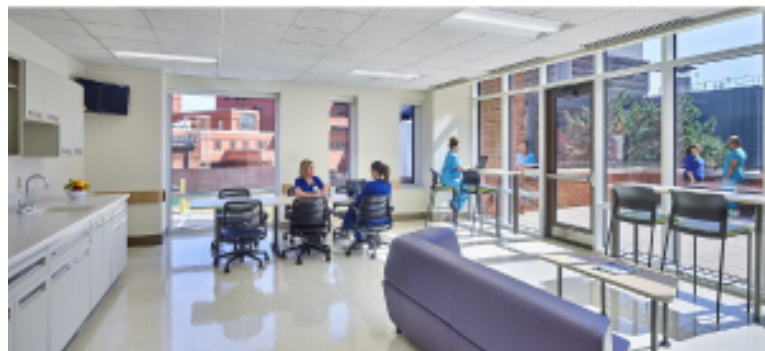
# Visual Ranking

## Envisioning the Ideal Break Space

● 1st Choice   
 ● 2nd Choice   
 ● 3rd Choice   
 ● 4th Choice



(B) Staff break lounge w/ large floor to ceiling windows & roof terrace access



(D) Staff break lounge w/ large windows & views of natural elements



(C) Immersive multi-sensory recovery space



(A) Staff break room w/ no windows



**What justifies the  
significant investment in  
these dedicated spaces?**

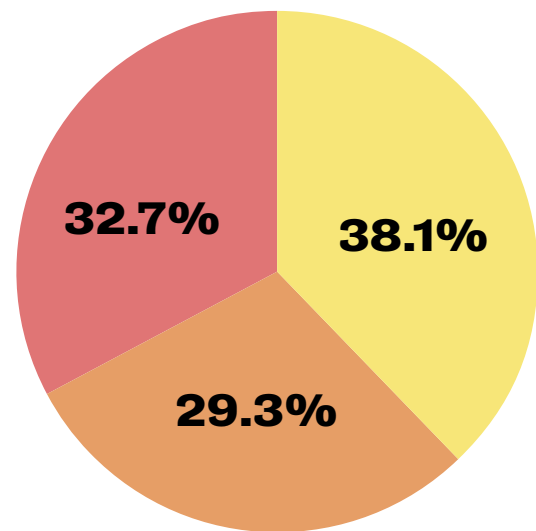
**“The loss of a nurse leaving their position is also associated with significant financial costs, estimated from \$11,000 to \$90,000 with up to \$8.5 million in associated wider costs”**

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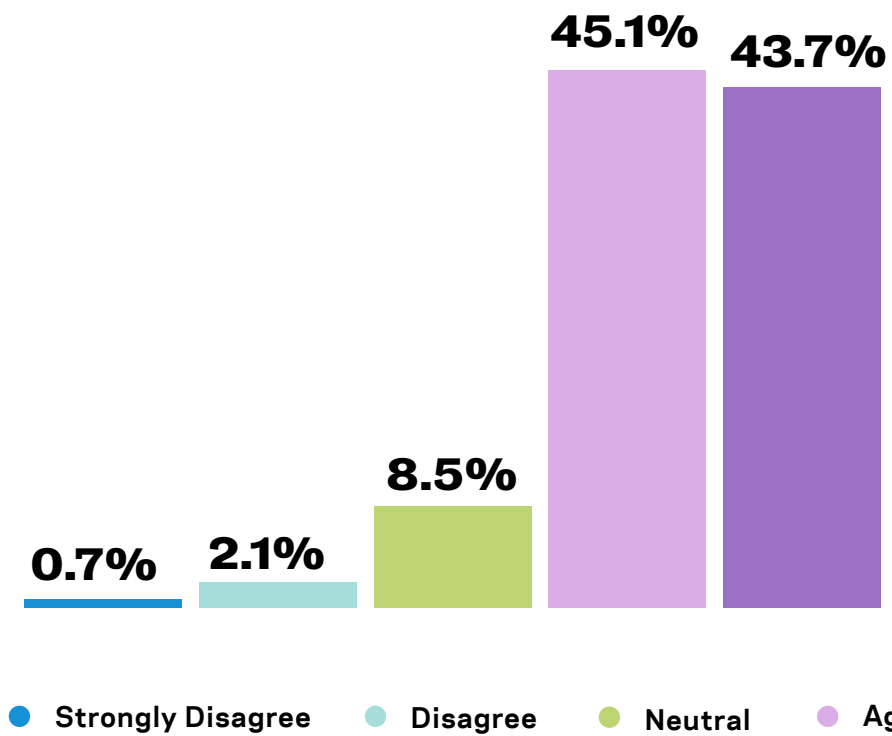
# Break Spaces and Work Performance

Would more effective respite spaces at a different facility influence your decisions to **work someplace else?**

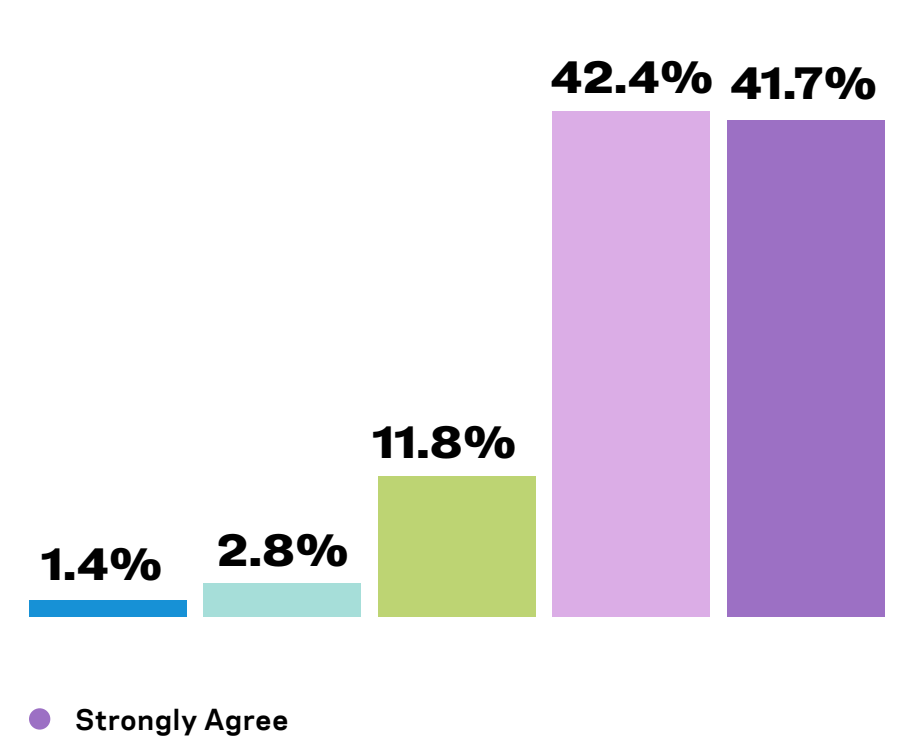


Yes No I don't know

An effective and easily accessible break space would improve my **mental health and well being.**



An effective and easily accessible break space would improve my work **satisfaction and/or performance.**



**What are the  
implications of this  
research in the  
healthcare design  
community?**

# Design Guidelines

Five Recommendations



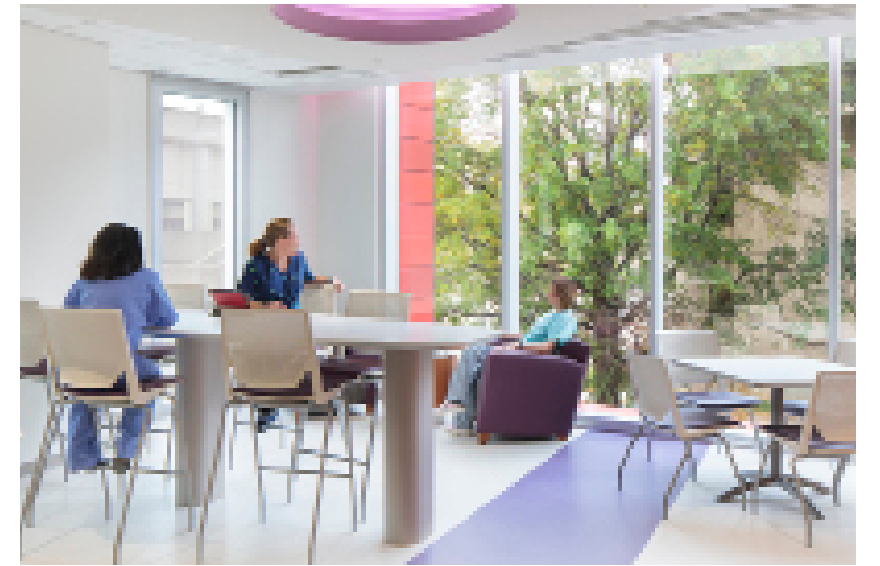
*RESPITE PODS  
(RUMC WELLNESS CENTER)*



*LOCKER ROOM AS RESPITE SPACE  
(GBBN)*



*IMMERSIVE MULTI-SENSORY "RECHARGE ROOM"  
(STUDIO ELSEWHERE)*



*ICU BREAK LOUNGE WITH DAYLIGHTING AND BIOPHILIC VIEWS  
(NORTON HEALTHCARE, KY, GBBN)*

# 1

**LEVELS OF  
SCALE**

(Small - Large)

# 2

**VARIETY OF  
SPACES**

Providing Choice

# 3

**EXPERIENTIAL  
DESIGN**

Restorative Yet  
Quick Activities

# 4

**WELLNESS  
DESIGN ELEMENTS**

Daylight,  
Biophilia, Etc.

# 5

**ACCESSIBILITY/  
PROXIMITY**

Easy To Get To?

**What are the implications  
of this research in  
the healthcare design  
community?**