

# EFFECTIVE SPACES FOR RESPITE IN THE CLINICAL WORKPLACE

## Project Team:

**ARC Fellow:** Gabe Rivas - 3-Year M.Arch Candidate

**Faculty Advisors:** Heather Burpee - University of Washington (College of Built Environments, Architecture), Elaine Walsh - University of Washington (UW School of Nursing)

**Research Firm:** NBBJ (Seattle Office)

**Firm Advisor:** Ryan Mullenix, Partner

## Content:

- **Project Abstract**
- **Statement of Interest**
- **Research Proposal**
- **Research Questions**
- **Research Methods**
- **Project Breakdown (Dates and Deliverables)**

## Project Abstract:

The application of Evidence-Based Design in the healthcare built environment (HCBE) has typically focused on utilizing design to increase successful patient outcomes and patient well-being. For example, particular variations in floor layout, lighting, and sound have been found to reduce patient stress and positively impact the quality of care. However, there appears to be a lack of research on the stress and burnout impact of the healthcare built environment on healthcare providers in particular. The need to address and mitigate caregiver well-being was notable in the past, yet within the new reality of COVID-19, the immense strain placed on healthcare workers has become readily apparent. Healthcare professionals are facing incredible amounts of stress, burnout and turnover - which, in turn, ultimately affects the quality of care afforded to patients.

In light of these factors, this project seeks to investigate spaces of respite afforded to healthcare workers in healthcare facilities in an effort to examine how these types of spaces are providing the resources necessary to manage one's well being while on the job. Additionally, this project will explore what kinds of spaces for respite and recovery are available to healthcare workers in the current healthcare facility landscape, their perceptions of these types of spaces, as well as what types of spaces for respite shall be considered during the design process of new healthcare facilities.

This study will work with a number of methodologies, including a literature review, case studies of areas and spaces for respite in and out of healthcare settings, and stakeholder interviews. The results of the literature review, case studies, and interviews will be compiled, interpreted, and analyzed to create a comprehensive report of HCBE design recommendations, considerations, and guidelines for all members of the Applied Research Consortium and the broader community of all stakeholders involved in the design, implementation, and administration of facilities in the healthcare built environment.

**Keywords:** Stress, burnout, well being, mental health, healthcare worker, nurse, doctor, caregiver, Evidence-Based Design, COVID-19 pandemic, staff performance, healthcare facility design, staff support spaces, break rooms, respite areas

**Statement of Interest:**

With the onslaught of the COVID-19 pandemic, it has been hard to miss the immense effect it has had on the healthcare system currently in place here in the U.S. - even more so with healthcare provider burnout and turnover. I have seen and heard countless news stories and articles about the overwhelmed physicians and a crippling nurse shortage that has made it extremely difficult to provide sustainable methods of care. With this project, I hope to dig a bit deeper into the experiences of some of these healthcare professionals and investigate if there is anything they would like to see differently in the spaces in which they work. I have a feeling that a lot of these issues may be inherently based on the established work culture within healthcare and medicine, but I also think that the built environment has a large role to play in potentially facilitating some positive and sustainable changes to the professions within healthcare.

**Research Proposal:**

The literature review will seek to understand the history of investigating ways to highlight and investigate mental health and well-being in the HCBE, as well as to understand the different types of methodologies applied to study these phenomena. This will also provide a background on the particular stakeholders usually targeted and studied, highlighting any gaps in stakeholder demographics. After this comprehensive literature review is completed, a number of case studies of respite areas in and out of the HCBE will be highlighted and examined at length. Afterwards, stakeholder interviews will be conducted with healthcare workers at selected healthcare facilities in order to get their experience of their workplace and ways that they utilize any respite spaces available to them, whether or not they have adequate access to such spaces, and what they would like to see in those kinds of spaces. Additionally, design experts and healthcare facility administrators will also be interviewed to understand their perspective and other factors relative to the design and implementation of respite areas in healthcare facilities. The results of the literature review, case studies, and interviews will be compiled, interpreted, and analyzed to create a comprehensive report of HCBE design recommendations, considerations, and guidelines for all members of the Applied Research Consortium and the broader community of all stakeholders involved in the design, implementation, and administration of facilities in the healthcare built environment.

**Research Questions:**

- 1.) What kinds of spaces are allocated to the self-care and resilience of doctors, nurses, and staff?
  - a.) What is the typical amount of time allocated for these activities while on the job?
- 2.) How much consideration is being given to the support spaces for healthcare providers and families of patients during the design and development of healthcare settings?
  - a.) What does this look like? What factors influence the design and resources provided in these spaces?
- 3.) How can we design healthcare facilities that provide ample spaces and resources for healthcare workers to find moments of respite while on the job?
- 4.) Is it possible to incorporate specifically designated areas and spaces of respite for healthcare workers in existing healthcare facilities?

- 5.) What kind of impact do healthcare workers believe effectively designed spaces of respite can have on their work experience and performance?

#### **Research Methods:**

- Literature Review:
  - The literature review will provide a glimpse into how factors in the healthcare built environment may increase or decrease well-being. This will help identify gaps in the research that will provide a benchmark to build upon for the project.
- Case Studies:
  - A number of case studies that begin to explore the more specific themes of the project will be examined at length - focusing primarily on the design, implementation, and use of areas and spaces of respite available to healthcare staff within and outside of the healthcare built environment. This will hopefully also involve firsthand field observations of the use of these kinds of spaces in real healthcare settings.
- Stakeholder Interviews:
  - Interviews with healthcare workers from the selected healthcare facilities will seek to examine and highlight ways in which they use spaces like break rooms and other respite spaces during their allotted break times, whether or not they are providing adequate resources for respite and decompression, and if that is not the case, what types of elements they would like to have in the spaces available to them.
  - Interviews with design experts and healthcare facility administrators will seek to understand their perspective and other factors relative to the design and implementation of respite areas in healthcare facilities, as well as what type of feedback they are hearing from their employees

#### **Project Breakdown:**

**Dates: Winter 2021 - Fall 2022**

##### **Winter 2022:**

- Creation of Project Abstract, Establishing Faculty Advisors, Formation of Literature Review and Project Methodologies

##### **Spring 2022:**

- Establishment of a Comprehensive Literature Review, Case Study Development, Research Design

##### **Summer 2022:**

- IRB Proposal and Submittal, Case Study Development, Start of Methodological Investigations and Observations, Stakeholder Interviews, Data Collection & Transcription

##### **Autumn 2022**

- Data Analyzation, Comprehensive Report on all study findings, ARC Final Presentation, and Final Report for ARC, and design guidelines and recommendations ARC member firms and HCBE stakeholders

#### **Deliverables:**

- **Final Report:**

- Project Synthesis
  - Analysis of literature review, case studies, and stakeholder interviews & survey
  - Report detailing HCBE design recommendations, considerations, and guidelines for all members of the Applied Research Consortium and the broader community of all stakeholders involved in the design, implementation, and administration of facilities in the healthcare built environment.
- **ARC Wide Final Presentation**
  - A presentation of study process, results and analysis to all members of the Applied Research Consortium