



Elke Miedema PhD - Leader of TF on Health Promoting Built Environment (since 2022) with support from: Mike Appel, Peyton Fort, Maja Kevdzija and Laura Cambra Rubino and the members.

Date: February 17 from 9:30-11am CET





Research & Inspiration

- **Design of healthcare buildings** & health-related outcomes
- Designing **Health-Promoting Healthcare Buildings** (HPBE)
- Pediatric Healthcare & Child-friendly Design



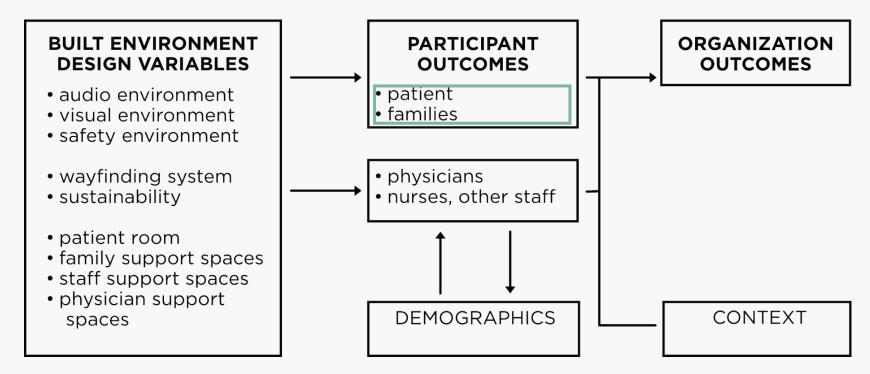


Design of Healthcare Buildings

& Health-related outcomes

We know that ...

... that the design of healthcare buildings can influence health of building users (e.g. patient, staff, relatives), the local community and the planet.





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BUILT ENVIRONMENT DESIGN VARIABLES

- audio environment
- visual environment
- safety environment
- wayfinding system
- sustainability
- patient room
- family support spaces
- staff support spaces
- physician support spaces

- Sound, noise, music
- Nature, art,
- Falling, errors
- Signage, maps
- Planetary health
- Comfort; temperature, (day)light,
- Autonomy & control





We know that ...

... that the design of healthcare buildings is different for **children and adolescents**

(ULLÁN AND BELVER, 2021; VERSCHOREN ET AL., 2015)

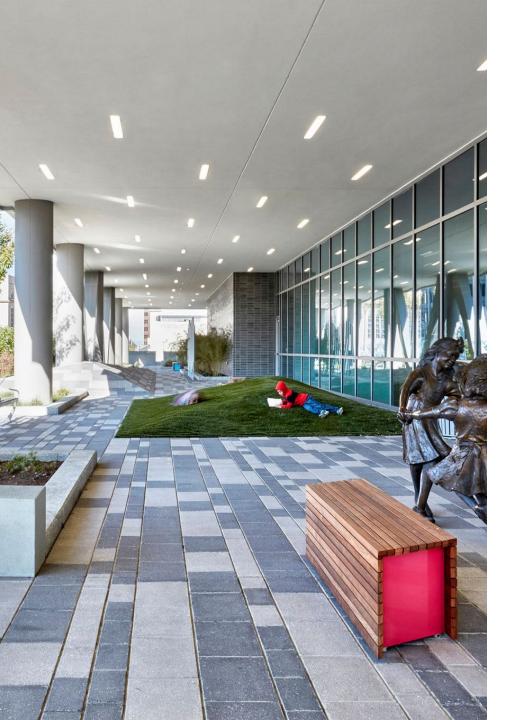




Literature 2010-2020

- → 73 about NICU/PICU and pediatric healthcare
- ambient features (light, air, temperature, sound, scent)
- architectural features (layout, openings, views)
- interior features (furniture, finishing,)
- social features (privacy, control)
- nature features (views and access)

(Elf et. al., 2023)





Literature 2010-2020

- → 73 about NICU/PICU and pediatric healthcare
- ambient features
- architectural features
- **interior** features
- social features
- nature features
- (Elf et. al., 2023)

- Activity and behavior
- Clinical outcomes
- Emotional wellbeing
- Patient centered care
- Safe care



Design of Healthcare Buildings & Health-related outcomes

We know (about healthcare architecture) that ...

 ... new healthcare approaches change the demands for the healthcare building.

(CARTHEY, CHOW, JUNG, & MILLS, 2011, MIEDEMA, 2020)

... many buildings are outdated and need renovation or redesign

(LÖVTRUP, 2011, CARTHEY, CHOW, JUNG, & MILLS, 2011)

 quality of healthcare buildings has been related to healthcare quality

(ANÅKER, HEYLIGHEN, ET AL., 2017),





Design of Healthcare Buildings& Health-related outcomes

We know (about healthcare) that ...

• ... we need to **re-orient towards health-promoting healthcare**

(GOEL & MCISAAC, 1999; JOHNSON, 1999; PELIKAN ET AL., 2001; WHITEHEAD, 2004A; WHO, 2004)

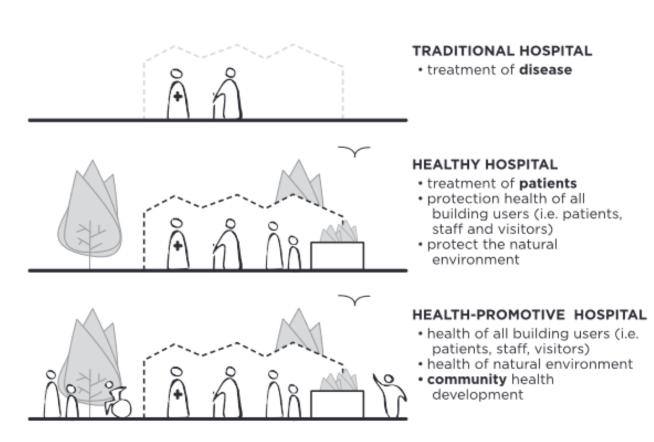


Figure 6. Illustration visualising the distinction among traditional (curative), healthy and health-promotive hospitals (based on Hancock (1999))



Designing Health-Promoting Healthcare Buildings (HPBE)

Design to

- Facilitate health-promoting program
- Stimulate health-promoting processes
- **Symbolize** health-promoting **visions**





Designing Health-Promoting Healthcare Buildings

Designing with attention for:

- Healthy behaviors (Active design)
 - Nutrition
 - Sleep
 - Physical activity
 - Social Interaction
- Reducing inequities (Inclusive design)
 - Different abilities, needs and behaviors
- Attention to holistic health (Restorative design)
 - Socio-cultural-mental-spiritual
- Attention to quality of life (Salutogenic Design)









- Universal design
- Inclusive design
- Child-friendly design

Inclusive Design (general)

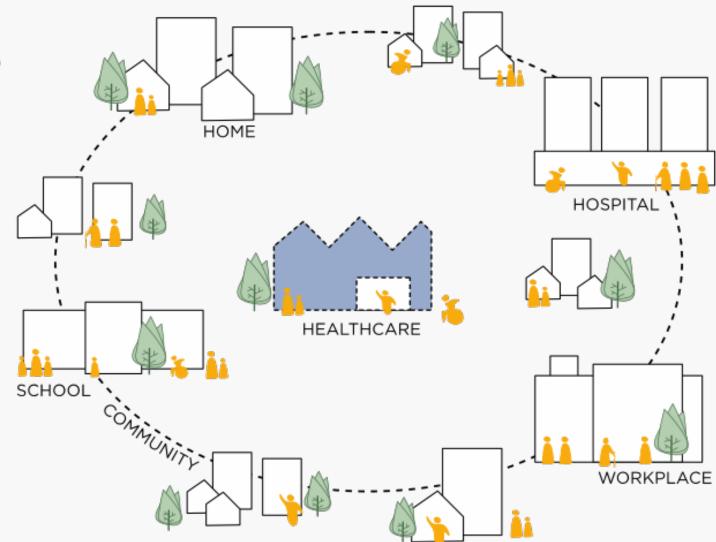
Design for a population with specific needs, wants and behaviours.

| | Permanent | Temporary | Situational |
|-------|------------|---------------|-------------------------------|
| Touch | One arm | Arm injury | Now parent |
| See | Blind | Cataract | New parent Distracted driver |
| Hear | Deaf | Ear infection | Bartender |
| Speak | Non-verbal | Laryngitis | Heavy accent |





Child-Friendly Design (general)







When children need health/care

(VERSCHOREN ET AL., 2015, P. 6)

- Homelike
- Personalisastion
- A view on life outside the hospital

They want an environment in which they can **continue daily life** in order to break the isolation of 'being ill', and that this continuation should be supported not socially but **also spatially.**





"In our new isolation rooms we now also have a strip painted in magnetic paint, and there they can [hang up things] with magnets, that's fun".

(VERSCHOREN ET AL., 2015, P. 6)



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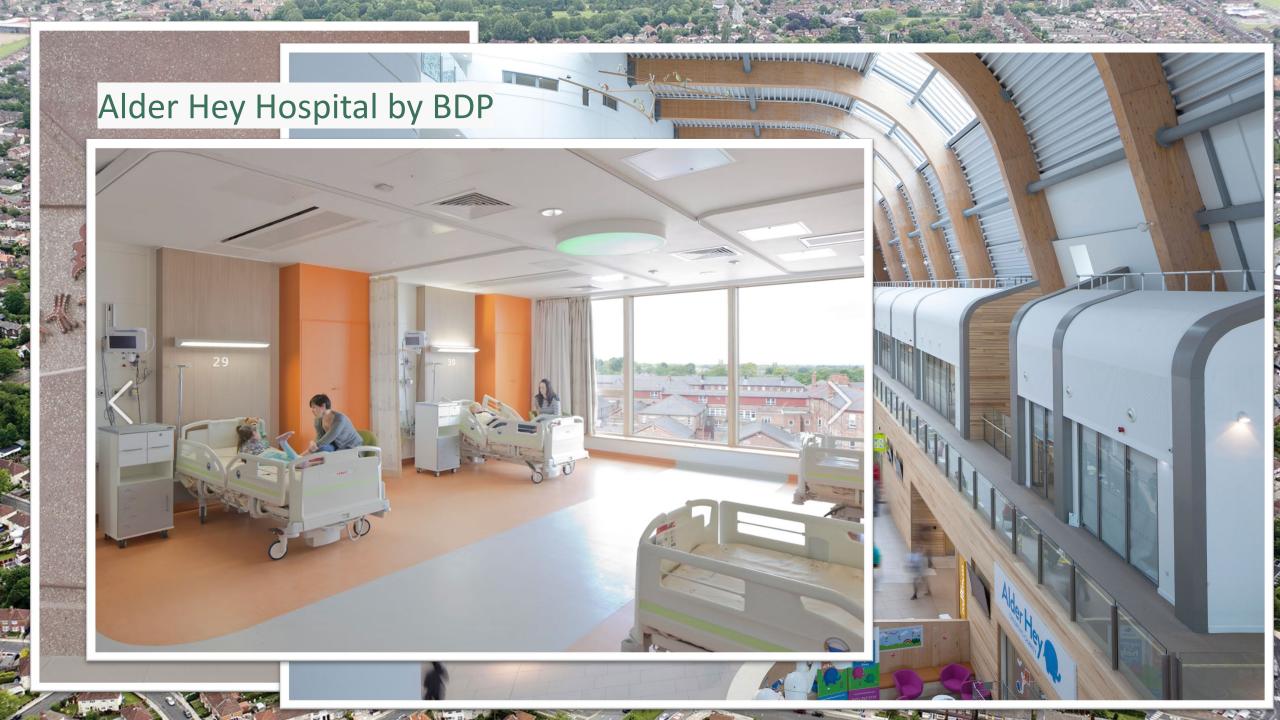
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Current reserach by: Dr.-Ing. Maja Kevdzija, EDAC Assistant Professor in Healthcare Design TU Wien



investigate the **role of the built environment** in the everyday life of children and families affected by this rare disease:

informal (i.e. home, neighbourhood, school) **formal** (i.e. hospital, rehabilitation clinic, outpatient clinic) **care environments.**



When their parents need health/care?





Design process as a moment for change

When planning / re-designing it creates a moment to critically reflect on the general organisastional objectives and processes.

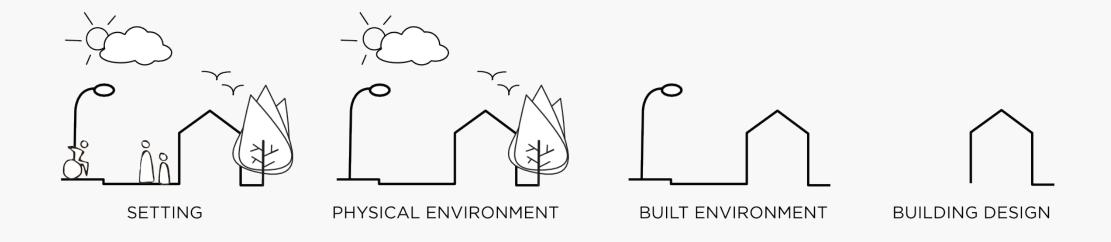


What can you do? (healthcare organisastions)

We know (about organisational strategies) that ...

 incorporation of design strategies in the strategic documentation of a healthcare organisation can result in improved quality of care

(ELF & MALMQVIST, 2009; ELF ET AL., 2012).





What can you do? (planners & architects)

We know (about healthcare architecture) that

- It can hinder or stimulate health promotion outcomes
- The design process can be a resources for health promotion

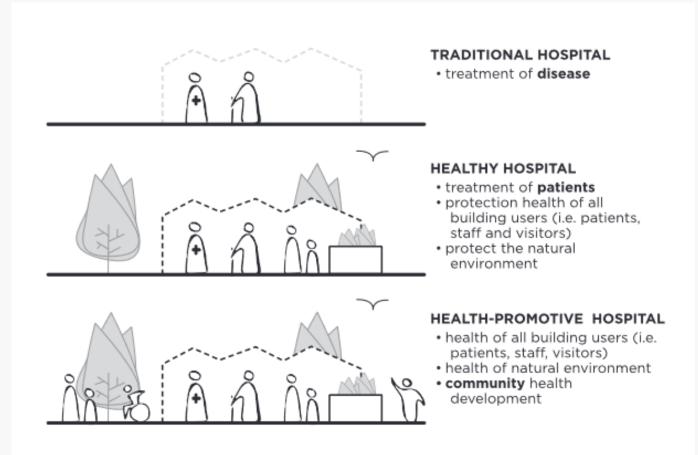


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Elke Miedema PhD

TF leader Health-Promoting Building Design (HPBD)

Proof of the sum – architectural researcher TU Delft – Thesis supervisor Architecture for Health & Care

