KEY POINT SUMMARY

OBJECTIVES

This paper explores the purpose of the adult inpatient mental health ward and how design aligns (or does not) with the intent.

Fit for what purpose? Exploring bicultural frameworks for the architectural design of acute mental health facilities

Key Concepts/Context

There is a great need for mental health services around the world. Recent approaches to mental and behavioral health focus on "personal recovery." The built environment can be an integral component in this approach. However, in New Zealand (and countries around the world), there is no standard for evaluating completed facilities to see if they are "fit for the purpose." Further, the question of "fit" is even more complicated in areas with multicultural patient populations.

Methods

To understand the purpose of adult inpatient mental health wards, researchers conducted interviews with staff and patients and referenced NZ Ministry of Health policy documents, as well as organizational philosophies and models of care. Researchers focused on the CHIME model of care (an acronym for "connectedness," "hope and optimism," "identity," "meaning and purpose," and "empowerment"). The organizations in the study operate from a mission-based model of care that includes certain key performance indicators (KPIs). Measures of performance also include service users' perspectives, as captured in patient satisfaction surveys.

Findings

The quality of the "fit for purpose" of a facility depends on the perspective, and is different for the provider vs. the user. The researchers found that the definition of purpose differs among staff, and from organization to organization. In the area where this study took place, a large portion of the patient population is Maori, who bring many specific cultural norms and beliefs that influence perceptions of care.

The authors grouped findings from interviews with staff into four themes: keeping people safe; containment; treatment and care; and empowering the service user
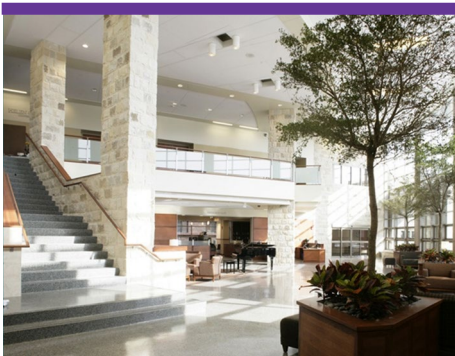
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and offering therapies and encouraging reflection on life. Staff discussed the lack of fit between what the environment should do, vs. actual performance (e.g., the importance of a quiet environment that would support relaxation and sleep vs. the reality of a chaotic, noisy ward). Staff emphasized the importance of spaces that facilitated the involvement of family, especially for Maori service users. Staff felt that the environment should empower service users. The authors describe the potential for the CHIME model of care to serve as a framework for design strategies, as outlined in the design implications.

Limitations

The study's intent included an exploration of the purpose of adult inpatient mental care wards and how the facilities support this purpose. This concept is complex and even more so in the context of bicultural issues. The research was limited by the lack of agreement around what the care model should look like, which would need to be well-defined before determining how design can support it. There is a major difference between design that supports a recovery model in the facility vs. recovery back in the community. Further, while policy documents included tiered objectives set by the Ministry of Health regarding service specifications related to design, researchers found a lack of evidence supporting the design principles.

Design Implications

The authors suggest how six CHIME goals may be achieved with design strategies:

1. In order to support "connectedness," the authors suggest the facility needs to provide space for visitors and the wider community, such as common rooms and space for various life skill activities;
2. "Hope and optimism" can be supported by access to nature and appropriate references to culture;
3. "Identity" may be facilitated by storage for possessions and space for culturally appropriate food preparation;
4. Rooms for meditation and privacy may support "meaning and purpose;"
5. Spaces that support various hobbies may support "empowerment;"
6. "Safety and security" may be supported by direct sight lines, and reduction in the appearance of or actual locked doors.