



KEY POINT SUMMARY

OBJECTIVES

To provide a strategy for determining the optimal size and number of beds for an acute care unit.

Establishing an acute care nursing bed unit size: Employing a decision matrix framework

Ritchey, T., Pati, D., 2008 | *HERD: Health Environments Research & Design Journal*. Volume 1, Issue 4, Page 122-132

Key Concepts/Context

Deciding on the optimal number of beds for an acute care unit requires the consideration of elements including how the unit fits with existing and adjacent structures; how clinical information systems will be used in unit operations; nursing workforce characteristics; patient safety; and advocacy. A balanced scorecard approach is outlined.

Methods

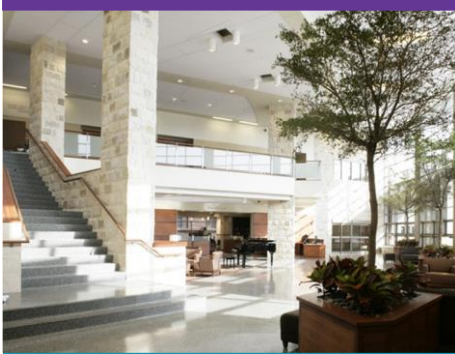
There were no methods outlined in this opinion piece. Relevant literature was used to support considerations important to unit design and a framework to facilitate decision-making was proposed.

Findings

This was not a research paper. Recommendations included suggestions for consideration when designing acute care units that include the role of clinical information systems, nursing workforce implications, patient safety, and consumer considerations. Furthermore, a balanced scorecard approach was put forward to include quality elements, financial elements, patient outcomes and provider outcomes. This decision-making tool may help designers approach unit design from a holistic perspective.

Limitations

While evidence was used to support most of the recommendations in this article, further research is needed to inform optimal unit size and number of acute care unit beds on a unit.



The Center for Health Design: Moving Healthcare Forward

The Center for Health Design advances best practices and empowers healthcare leaders with quality research that demonstrates the value of design to improve health outcomes, patient experience of care, and provider/staff satisfaction and performance.

Learn more at
www.healthdesign.org

Design Implications

Unit size decisions should be informed by technology use, patient-centered care models, workforce issues, the need for flexibility and acuity-adaptable rooms, and patient safety issues including enhanced line of sight. The framework recommended addresses these issues holistically and might be used to ensure unit designs meet the needs of all stakeholders.

The Knowledge Repository is a collaborative effort with our partners

Academy of
Architecture for Health
an AIA Knowledge Community

AAHF
ACADEMY ARCHITECTURE HEALTH
FOUNDATION

ASHE
Optimizing health care facilities

FGI



The American
Institute
of Architects

Additional key point summaries provided by:

NIHD | Nursing Institute for
Healthcare Design
LEADERSHIP • EDUCATION • ADVOCACY

RESEARCH DESIGN
CONNECTIONS