



KEY POINT SUMMARY

OBJECTIVES

To explore the way both physical and aesthetic hospital birth room designs have an effect on midwives.

DESIGN IMPLICATIONS

Designers should consider more uncluttered designs that offer personal space and comfortable levels of mobility for midwives. The aesthetics and overall atmosphere of birth rooms also have a significant impact on the experiences of the midwives working within them. These factors should be carefully considered and viewed as a tool to enhance the overall well-being of staff and possibly patients.

The hardware and software implications of hospital birth room design: A midwifery perspective

Hammond, A., Foureur, M., & Homer, C. S. 2014 | *Midwifery* Volume 30, Issue 7, Pages 825-830

Key Concepts/Context

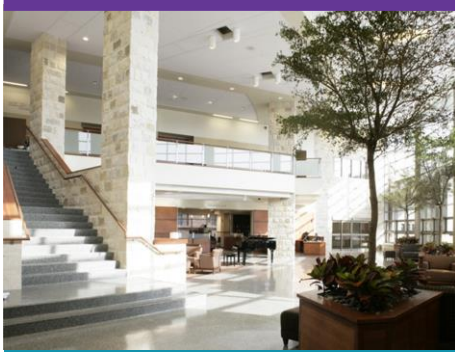
Every aspect of design within a given workplace – from the overall architecture to the furnishings, aesthetics, and available equipment – can affect the performance and overall experience of staff members. While many previous studies have explored the influence of workplace design in various different health care environments, little research has examined the impact of hospital birth room designs on the experience and performance of midwives.

Methods

Eight midwives from two different Australian hospitals volunteered to participate in videotaped interviews. During the interviews, the participants watched footage of themselves working, and were asked to comment on specific events through such questions as: “What’s happening for you here?” “How does that work for you?” and “What would make that easier for you?” The researchers then reviewed all of the recorded interviews and converted recurring statements and themes into data points that could be statistically analyzed. The authors organized the data into four major themes.

Findings

The four recurring themes extracted from analysis of the interviews were: Finding a space amongst congestion and clutter, trying to work underwater, creating ambience in a clinical space, and being equipped for flexible practice. The midwives also noted a distinction between “hardware” and “software” issues, in which hardware was associated with architecture and equipment design, and software referred to social aspects of design, such as aesthetics and personal space. One recurring hardware issue was a problem with water temperature (having to risk carrying around boiling water to fill baths). Software issues included lack of



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personal space and privacy, leaving workers feeling uncomfortable and often stepping out of the unit for alone time. Generally, the aesthetic appeal of the workplace seemed equally important as the functionality of equipment.

Limitations

This study uses qualitative data from a relatively small group of participants from a specific region. The length of time the midwives were employed at their respective institutions was not taken into account; this factor could have influenced workplace perceptions. The authors note that since midwives were the only participants, the conclusions provided by the study may have arrived through a “midwife-specific lens.”

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