

KEY POINT SUMMARY

OBJECTIVES

To examine how patients' perceptions about privacy are affected by the spatial characteristics of patient beds, which are in turn influenced by the designs of patient rooms and nursing units.

Key spatial factors influencing the perceived privacy in nursing units: An exploration study with eight nursing units in Hong Kong

Lu, Y., Cai, H., & Bosch, S. J. 2016 | *Health Environments Research & Design Journal.* Pages 1-12

Key Concepts/Context

Healthcare designers are faced with a challenging task when trying to balance patient privacy with safety and well-being. While patients typically expect some degree of privacy during their treatment processes, it is also commonly understood that caregivers need appropriate access to them so that proper treatment can be administered. The authors note that few previous studies have investigated how architectural designs affect patients' perceptions of privacy specifically in nursing units with single-bed or multiple-bed rooms. In this study, the authors employ space syntax theories and methods to measure and describe the physical makeup of both patient rooms and nursing units.

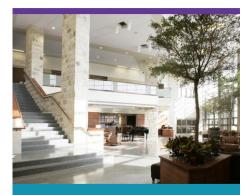
Methods

Eight nursing units from different Hong Kong hospitals (all built after the year 2000) were involved in this study. Each of these units consisted of two double-corridor units, five single-corridor units, and one radial unit. 159 participants filled out surveys that gauged their perceptions of privacy based on images of eight different hospital floor plans. The unit of analysis was the individual patient bed, and the outcome studied was the total number of times a given bed was selected as being the most private. Data were analyzed in two groups: participants who had previous hospitalization experience and participants who did not.

Findings

Results indicated that participants with previous hospitalization experience mostly indicated that the most private beds were those surrounded by fewer beds, had a larger area per bed, and had a longer walking distance to a healthcare worker's station. This group also chose beds that had higher visibility from a healthcare





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worker station, implying that they might better understand the importance of patient-to-staff visibility. Participants with no prior hospitalization experience mostly chose the same beds in terms of spatial privacy, but did not seem to consider the factor of patient-to-staff visibility.

Limitations

The convenience sampling method used involved only two specific cohorts of participants; the authors note that patients who have been recently hospitalized should be included in similar studies in the future. The use of a paper survey might not reflect the patients' actual bed preferences when other criteria are considered. The authors note that field studies could further enhance understanding of the relationship between spatial variables and bed preferences.

Design Implications

Participants surveyed in this study indicated that the beds they perceive as being the most private are those that are surrounded by fewer beds, have a larger area per bed, and have a longer walking distance to a healthcare worker's station. However, privacy must be balanced with safety, and patient-to-staff visibility is crucial in providing adequate care. Designs should strive to provide patients with a sense of privacy while also allowing healthcare staff to monitor patients and administer care optimally.

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