



KEY POINT SUMMARY

OBJECTIVES

The focus of the current study was to examine the effect of making positive changes to the indoor environment of aged-care facilities – specifically nature-based and reminiscence-based environmental enhancements – on the wellbeing of residents and staff. Multisensory Installations in Residential Aged-Care Facilities: Increasing Novelty and Encouraging Social Engagement Through Modest Environmental Changes

Scott, T. L., Masser, B. M., & Pachana, N. A. 2014 *Journal of Gerontological Nursing Volume 40, Issue 9, Pages 20-31*

Key Concepts/Context

When the environment of aged-care facilities is perceived as more aesthetically pleasing, it is positively related to improved mood and well-being for residents and staff. Unfortunately, most residential care environments for the elderly are planned around their physical needs. This article discusses how to design a 'homelike' environment that considers the physical and social environmental needs of the elderly.

Methods

This research was a quasi-experimental study. Two different installations were created indoors in separate aged-care facilities, one with a nature focus and a contrasting non-nature focus (referred to as a reminiscence installation). The reminiscence installation included several manmade elements intended to evoke memories of the past for residents. As well, a third 'no installation' control condition was included. A number of measures (see EBD Glossary Table) were taken before, during, and after the interventions to examine the following hypotheses.

Findings

Social engagement and well-being were significantly greater in the biophilia and reminiscence groups compared with the control group. The effect was also found within the groups, such that social engagement was significantly increased while the installations were in place compared to baseline, and two weeks after removal (post-test) compared to baseline for the biophilia and reminiscence groups.



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

However, biophilia and reminiscence groups did not differ significantly from one another in terms of social engagement while the installations were in place. Residents and staff reported that the changes engendered a more 'homelike' environment. Although the installations led to increased social engagement, the intervention did not have a significant effect on the measures of depression and anxiety symptoms: GDS and GAI. On average, the participants' scores on the GDS and GAI were elevated compared to normative data, indicating the presence of 'possible' depression and anxiety (Hoyl et al., 1999; Byrne & Pachana, 2011).

Design Implications

The significance of this study is that it demonstrates that relatively low-cost, simple environmental changes to the indoor environment can have a positive impact for minimum effort. Improving environmental quality through the introduction of reminiscence displays of period elements – which can be sourced secondhand or by appealing for donations from families – may serve to create an indoor environment that is more reminiscent of 'home' for residents. Plants and natural elements may be more readily sourced. Bringing them indoors provides residents with important contact with nature and a stimulus for social exchange.

Limitations

The main limitations of the study were the short intervention time and sample size, which was further affected by attrition throughout the study protocol as participants became unwell, were confined to their bed, were hospitalized, or passed away. Staff attrition was roughly equivalent across the facilities.

