

CHILDREN FIRST

MEETING NEEDS OF CHILDREN, FAMILIES AND
HEALTHCARE WORKERS THROUGH DESIGN

A young boy and a young girl are sitting at a light-colored table in a child-friendly room. The boy is on the left, wearing a blue shirt and dark shorts, and is smiling. The girl is on the right, wearing an orange shirt and blue shorts, and is also smiling. They are playing with colorful toys, including a tall tower of blocks and some small containers. The room has a blue wall, a green armchair, and a wooden wall panel. The floor is carpeted. The BSA logo is visible in the bottom left corner.

BSA



Inclusive approaches to art and play help children and families from all backgrounds to feel this is truly their hospital.

It's widely accepted that when designing pediatric facilities, the goal is to understand and meet the needs of the most vulnerable patients — children. However, equally as important is incorporating design features that serve not only children, but family members, physicians, nurses and other users of the facility. The following guidelines can serve as best practices for designing pediatric healthcare facilities.

Putting children and families first with amenities

Any parent who brings children to the hospital appreciates convenience during a time that is often stressful. Successful design should seek to understand a family's visit to the facility and how the built environment can ease their stress. And the experience begins before the family enters the facility.

In the visitor parking garage, the design team can strategically locate spaces for pullwagons to be stored, allowing families to easily transport children and belongings during their visit. Once in the hospital, the focus

turns more toward amenities — creating family areas that respond to both long- and short-term visits. Great satisfiers include not just sleeper sofas in the children's rooms, but desk space, access to Wi-Fi and laundry facilities and more adult-centered spaces like a resource library and quiet retreat spaces. The adjacencies and design of more adult-focused services are important topics of discussion with staff and users.

Understanding the facility's vision

Understanding and fulfilling the facility's mission, while involving patient/family advisers, is the next step to a successful outcome. Begin by hosting in-depth conversations with the organization's leaders to explore its vision for pediatrics. How will the facility support this vision, and does it have a mission statement that charts a course for the vision? How will the general operational needs of a hospital be aligned with those of children and families? The conversations should continue with contributions from facility managers and the leaders and staff of the specific care units. Finally, broaden the conversation to include patients in an advisory capacity.

Does the hospital have a parent or a patient advisory board? If not, consider creating one. Leaders can rely on this board to gather information about overall design and fundamental patient care issues, as well as the development of amenities, including art and play spaces. Alternatively, the design team may suggest a brief patient/family survey addressing key design issues that will affect how they will live comfortably in the space.

Creating a safe, positive experience for all ages

The overall experience of care must appeal to a wide age range and avoid the intimidation factor of intrusive technology. It must be easy to navigate from the campus entrance, to parking, to the hospital entrance and to various destinations in the hospital — no matter the age, abilities, language or culture of the family. The overall feel must be the same at each and every visit. Consistency is a key component in reducing stress.

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Providing a safe, protected environment for children and families is critical to fulfilling the pediatric mission and vision. Successful pediatric design reflects a graceful and unobtrusive compliance with healthcare regulations and local codes. It means integrating required security and safety standards into the design so that there is no perceivable seam between safety and experience.

At a pediatric hospital for which BSA LifeStructures has served as the design team, there is a clear sense of pro-

tection. Both the environment and the behavior of the staff convey a relaxed but strong feeling of security to children and families. The staff supports this concept as they greet patients, families and visitors when they enter, and clear signage and interior architecture welcomes and directs them to the security sign-in desk. The design team concealed security equipment by means of accent ceiling tiles, ceiling soffits and lighting fixtures, all in an effort to reinforce a positive and welcoming environment.



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Creating an all-inclusive environment

Develop an environment that welcomes people from all backgrounds while celebrating art and play. Today families come from all over the country — and increasingly from all over the world — to seek care at well-known pediatric institutions. This population will include various disabilities, cultures, ethnic and racial groups, languages, religions and social customs.

Design components and themes must be sensitive to cultural differences. Practical components, like wayfinding, should be universally intuitive. To achieve this goal, identify representatives of the patient/family backgrounds that will be represented in a new pediatric care unit and then integrate them into the early stages of the planning process. The goal is always inclusivity no matter where children and families come from.



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Providing opportunities for children to express themselves is as important as displaying professional artwork in public areas for adult patients. When one thinks of children, crayons and construction paper come to mind. However, no style of artwork is universally appealing; therein lies a challenge. Design elements and artwork should reflect the specialties and age groups they serve. For example, hospital staff can help to select a unified design theme in these spaces or include changeable frames in patient rooms to encourage children and families to hang their own artwork. Having an art and play space of their own may also improve children's responses to treatment.

Inclusive approaches to art and play help children and families from all backgrounds to feel this is truly their hospital. This leads, finally, to the goal of full accessibility. Play spaces should be accessible for all children with a broad range of physical and cognitive abilities. As a result, children who might not otherwise interact outside of the hospital will be encouraged to play together and experience the things they have in common.

The bottom line is to encourage children to be children, while meeting their needs. Simultaneously and equally as critical is meeting the needs of parents, physicians and other healthcare workers. The built environment offers a world of possibilities to arrive at these goals.

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