Sharing the space - the impact of a 100% single-room, acute-care environment on person-centred practice

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Introduction

Current building guidance for the NHS advocates 100% single-room inpatient environments. The research driving this has focused on patient safety and the reduction in healthcare associate infections ((HCAIs).There is little evidence of the impact of this design in adult acute care settings on the experience and delivery of personcentred care.

The objectives of the study were:

- To explore, from the perspective of patients/families, the experiences of care within a single-room, acute hospital environment.
- 2. To explore, from the perspective of staff, the experiences of working within a single-room, acute hospital environment
- 3. To determine the factors that influence the delivery of personcentred practice in a single-room, acute hospital environment

Methods Patient/carer interviews (n=9) WCCAT: **Pre0observation** Observation Reflective Non-participative **Consciousness raising & Observations of Practice** problematization journal (n=108.45 hrs) **Reflection & Critique Participatory analysis Participaroty Reflective** groups (n=3)

The study took place across 3 wards in a new Inpatient Ward Block in an acute hospital in Northern Ireland.

Results

Limitations of the built environment

- Provision of amenities
- Environmental design solutions
- Safety
- Working environment
- Infection prevention & control

Organising & delivering care

- Task focused care
- Spending time
- Tension between ensuring privacy
 & maintaining safety

Nature of interactions

- Feeling isolated & vulnerable (staff & patients)
- Engaging in meaningful conversations
- Opportunities to socialise
- Managing expectations (staff & patients)

Conclusions

- 1. The findings of the study confirm that changing the physical environment does have an impact on personcentred practice, particularly by influencing psychological safety.
- 2. The study uncovered a sense of unease about who "owns" the space, creating an additional barrier to delivering person-centred care
- 3. Nursing staff especially felt a loss of control over their work environment.
- 4. Staff sometimes felt they were invading the patients' space.

There are implications for Practice; Policy; Research; and Education. Further details on this study are available from the author at r.kelly@ulster.ac.uk

References

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