



Media Release

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Patient-centred design delivers real hospital benefits

Involving family and youth representatives during the early stages of hospital planning and design is a key to achieving patient-centred design, according to Melbourne-based architectural practice Lyons.

Lyons Principal, Stefano Scalzo, told the inaugural Patient-Centred Design Forum in Sydney this week that the new focus on patient-centred design was a vital step in achieving the key objective for hospitals: people caring for people.

Delivering a Keynote Address at the conference, Mr Scalzo referred extensively to the patient-centred design process Lyons adopted for the recent design of the new Queensland Childrens' Hospital (QCH).

“Patient-centred, or family-centred design as it’s called in paediatric settings, is a key part of any new project and should shape the early planning dialogue around hospitals. At QCH patient-centred design was a strong voice, amongst many, and was represented on the hospital’s Strategic Advisory Council (SAC) formed by the then Director General for Health to assist the client in planning the new facility.

“Representatives from the team’s hospital’s Family Advisory Groups and the then newly formed Youth Advisory Forum participated. The experiences brought to bear by these people were often poignant and served to remind other stakeholders that people rather than systems were the key objective of any new facility.

“This focus was reinforced by some of our own early work on QCH: both through the research we were undertaking in the office and through the masterplan workshops we ran. These experiences led the client to embed at least one family representative within each of the key clinical user groups for PICU, ED, IPUs and day medical areas.

“The work of these groups and their representatives during the briefing phase and schematic design was tireless, balancing the key clinical objectives of any space with the experiential quality of that same space from a patient and family’s perspective.

“In the IPU user group for example, the question was asked, should a bedroom be a sanctuary? Should it look like a hospital room or be a room with a hospital function? In the outpatient areas we looked at the child’s and family’s journeys and wondered how children with co-morbidities had different needs to those in post op clinics. Lyons challenged the users to think through the eyes of these children and their families and it was through this process that the Long Day Lounge (LDL) was conceived.

“The LDL has become a place for families to crash during long days in hospital. It is located within close proximity to all the main clinics servicing these children yet away from the hustle and bustle of normal outpatient areas. Care coordinators are also located nearby.

“Interestingly we found that the spatial briefing process was enabling new care models to be conceptualised and developed.

“A typical outcome of a properly considered patient-centred design process can be described as follows:

Dad would no longer need to hang his work coat on the IV pole because hospital executives and their architect’s had listened and seen that a hospital bereft of spaces for family’s to keep life going were not only undignified but also inhumane,” Mr Scalzo said.

The Patient-Centred Design Forum highlighted how healthcare facilities should be designed accordingly to patient’s various needs. The forum established key design techniques that currently exist in the healthcare sector to put the patient first, featuring domestic and international case studies.

An increasingly-used term in medical literature, patient-centred design is an active process similar to, however also different from patient-centred care. New hospitals and medical practices are increasingly using patient-centred design as opposed to the more traditional technology-based or disease-based design.

ENDS

Please Note:

Joint venture architects for Queensland Childrens’ Hospital (QCH) are Lyons Architects, Melbourne and Conrad Gargett, Brisbane.

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