

A Staff and Patient Environment Calibration Tool (ASPECT) Questionnaire for Healthcare Buildings

Dear Participant,

The aim of this questionnaire is to evaluate the architectural building and service quality of the hospital by inpatients. The results obtained from the questionnaire will be used in PhD thesis study titled as 'The Role of Healing Environment on Patient's Health and Well-being.'

The answers that will be given will show the perception of the hospital design quality while experiencing to put a better service quality and health outcomes as a feedback.

The answers that will be given by you, will be used only for the academic purpose and will be kept confidentially.

Thank you for your interest, time and patience.

Using the 6 point scoring scale:

The best score is 6 and the poorest score is 1.

The 6 point scale is used to express a level of agreement with statement. In this case the scores should be used as follows;

Virtually complete agreement (6)

Strong agreement (5)

Fair agreement (4)

Little agreement (3)

Hardly any agreement (2)

Virtually no agreement (1)

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For more information you may check the link given: Url:

http://www.wales.nhs.uk/sites3/documents/254/aedet_evolution_documentation_v100605.pdf

PhD Candidate,
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1. Working/ Treatment unit :

2. Type of the hospital:

Mark only one oval.

☐ Public- Dr. Burhan Nalbantoğlu Hastanesi

☐ Private- Near East Universty Hospital

3. Survey participant:

Mark only one oval.

☐ Patient

☐ Relative

☐ Staff

4. Occupation:

5. Education:

Mark only one oval.

☐ Primary

☐ College

☐ University

☐ Masters

☐ PhD

6. If you are a patient; Type of Illness/Cancer

7. If you are a patient, Duration of stay in the hospital

Mark only one oval.

- ☐ 1 night
- ☐ More than 1 night
- ☐ More than 1 week
- ☐ More than 1 month

8. Number of patient inside the room:

Mark only one oval.

- ☐ Single
- ☐ Double
- ☐ 3-5 person

9. Gender:

Mark only one oval.

- ☐ Female
- ☐ Male
- ☐ Prefer not to say
- ☐ Other

10. Age:

Mark only one oval.

- ☐ 18-34
- ☐ 35-54
- ☐ 55-65
- ☐ 65+

Mark only one oval.

☐ TRNC

☐ Turkey

☐ Other:

C1:
Privacy,
company
and
dignity

Section 1 deals with the way people in a healthcare building are able to control their privacy and their interaction with others. It focuses on the way people can best maintain their dignity while under conditions that necessarily may not be found in ordinary life.

Either patients have their own individual room or can be screened off from others they share with or, if mobile, can easily find a private space. Privacy also means that activities can continue uninterrupted. For example the opening of a door should not expose the occupants of the room to passers-by outside. Although curtains can achieve some degree of visual privacy they may not necessarily guarantee dignity and almost certainly will not achieve acoustic privacy. Clearly individual rooms satisfy this feature whereas multiple bed bays do not naturally do so. In the case of for example four bed bays the arrangement of beds in space, distances between beds and the provision of screens can all help to offset to some extent the natural loss of privacy and dignity

Mark only one oval.

	1	2	3	4	5	6	
Virtually no agreement	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Virtually complete agreement

Patients could talk to a relative, doctor, nurse or therapist confident of not being overheard. Speech privacy is important for all and particularly for patients' well-being.

Mark only one oval.

	1	2	3	4	5	6	
Virtually no agreement	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Virtually complete agreement

15. 1.03 Patients can be alone

Either patients are in shared accommodation or, if mobile, can easily find a place in which to socialise. This item may be particularly important for places where patients may be for long periods especially if not in great pain or discomfort.

Mark only one oval.

	1	2	3	4	5	6	
Virtually no agreement	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Virtually complete agreement

16. 1.04 Patients have places where they can be with others

Either patients have their own private room or, if mobile, can easily find a private space very near to their base location.

Mark only one oval.

	1	2	3	4	5	6	
Virtually no agreement	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Virtually complete agreement

17. 1.05 Toilets/bathrooms are located logically, conveniently and discretely

Toilets should be near, and it should be clear where they are but the actual door should not be in full view of many other people. The use of toilets and bathrooms should not be heard or cause smells. Being able to freshen up, be clean, shave and so on can be very important to people.

Mark only one oval.

	1	2	3	4	5	6	
Virtually no agreement	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Virtually complete agreement

C2:
Views

Section 2 deals with the extent to which both staff and patients can see out of and around the building. It asks what they can see and relates this to their current activity and condition.

18. 2.01 Spaces where staff and patients spend time have windows

While it is pretty obvious that patients’ spaces should have windows and natural light, this is not always observed so well for staff. This factor therefore may be of particular importance for spaces where staff work for long periods. This would thus apply even more strongly to staff who have a job that does not normally require them to move around a great deal. Working for any length of time or staying in rooms without windows can have significant adverse effects on people.

Mark only one oval.

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Virtually no agreement	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Virtually complete agreement

19. 2.02 Patients and staff can easily see the sky

Being able to see the sky is reported as important. A view only of the ground or even worse only of walls especially for any length of time can have a depressing effect. The height of the head of the window may be very important here especially if patients or staff are normally some distance back from the window. If looking at drawings it is probably necessary to see sections or perspectives.

Mark only one oval.

	1	2	3	4	5	6	
Virtually no agreement	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Virtually complete agreement

20. 2.03 Patients and staff can easily see the ground

Many people report considerable unease if they have to spend lengthy periods unable to see the ground. The height of the sill of the window may be very important here especially if patients or staff are normally some distance back from the window. If looking at drawings it is probably necessary to see sections or perspectives.

Mark only one oval.

	1	2	3	4	5	6	
Virtually no agreement	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Virtually complete agreement

21. 2.04 The view outside is calming

This item is particularly important for places where patients may be for short periods especially when waiting for consultation or treatment. Natural scenes are known to be very calming. Examples include trees, flowers, green areas, water, fields open landscape, or quiet well designed courtyards. However a mixture of hard and soft landscape or carefully chosen sculptures can also be calming.

Mark only one oval.

	1	2	3	4	5	6	
Virtually no agreement	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Virtually complete agreement

22. 2.05 The view outside is interesting

This item is particularly important for places where patients may be for long periods especially if not in great pain or discomfort, and especially for patients who are not mobile. This item may also be particularly important for mental health buildings. In general interesting views have some degree of change and unpredictability. Interesting views include those where there is movement either of natural or man-made features, and art such as painting or sculpture. It is unlikely that this can be achieved in courtyards although moving sculptures could help to make a courtyard more interesting. Scenes of everyday life going on which may provoke conversations between patients about that life and reconnect them with it are particularly desirable, especially in mental health buildings. It is also desirable that patients can observe life going on within the hospital enabling them to take an interest in others and not feel isolated. In particular this feature may enable patients to feel more secure in the knowledge that other people are around should they need them, as well as providing some interest and distraction.

Mark only one oval.

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Virtually no agreement	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Virtually complete agreement

C3:
Nature
and
outdoors

Section 3 deals with the extent to which patients in particular have contact with the natural world.It asks whether they can see and access nature both around and inside the building.

23. 3.01 Patients can go outside

This item is particularly important for places where patients may be for long periods especially if not in great pain or discomfort, and for mental health buildings. Much research shows the importance of contact with the outdoors and nature to most people. The ability to breath fresh air is thought be many people to be therapeutic in itself. Part of the feeling of fresh air seems to be a degree of movement and breeze. This may be very important not only in itself but in giving patients a feeling of being in contact with a normal outside world. This is obviously most satisfactorily achieved by having direct access to outdoors. This could be in the open landscape, in a courtyard or even on a balcony.

Mark only one oval.

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Virtually no agreement	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Virtually complete agreement

24. 3.02 Patients and staff have access to usable landscaped areas

As for 3.01 but including areas where some activity is possible and including places to sit comfortably in quiet but with the possibility of watching life going on or looking at nature. To facilitate this you would expect to find well designed external furniture suitably located.

Mark only one oval.

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Virtually no agreement	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Virtually complete agreement

25. 3.03 Patients and staff can easily see plants, vegetation and nature

This item is particularly important for patients experiencing stress or anxiety and to counterbalance the effects of high technology areas. This may be in the form of open landscape, courtyards or even internal planting. Well maintained landscape incorporating some built features may be more reassuring to many people than wild or densely wooded areas.

Mark only one oval.

	1	2	3	4	5	6	
Virtually no agreement	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Virtually complete agreement

C4:
Comfort
and
control

Section 4 deals with the comfort levels of the staff and patients in healthcare buildings and the extent to which they can control those levels. Research shows that not only comfortable conditions but the ability to control levels of comfort for yourself may be very important in reducing stress. Allowing patients control over their environment is thus important and may also reduce demands on staff, particularly nurses.

26. 4.01 There is a variety of artificial lighting patterns appropriate for day and night and for summer and winter

Patients and staff should be able to arrange for a range of lighting effects to avoid glare, offer bright light for reading, dim lights for night time rest and so on. Consider indirect lighting and non-institutional lighting which might be recessed or gentle and localised rather than high even levels of fluorescent lighting. Studies show that when daylight is available, many building occupants like to reduce artificial lighting to allow the daylight to take effect. During the day and the seasons natural light levels vary enormously and people generally like to be aware of this.

Mark only one oval.

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Virtually no agreement	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Virtually complete agreement

27. 4.02 Patients and staff can easily control the artificial lighting

Changes in lighting patterns may be a relatively good and cheap way of providing variety for people who are immobile. It is very important that lighting patterns can be controlled on a room by room basis and not just for a complete building/ward/department. It is highly desirable that bedridden patients can switch/dim lights from their beds.

Mark only one oval.

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Virtually no agreement	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Virtually complete agreement

28. 4.03 Patients and staff can easily exclude sun light and day light

Blinds may be useful to avoid direct sunlight particularly on the faces of immobile patients. Considerations include daylight exclusion to allow for uninterrupted early morning sleep in summer. Large clear areas of glazing allow adequate light in winter months, but may also give rise to excessive solar gain and to dazzling direct sun light. It is desirable that bedridden patients can control blinds, shades and curtains from their beds. Changes in external lighting can be sudden and frequent. Rapid and easy response mechanisms are highly desirable.

Mark only one oval.

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Virtually no agreement	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Virtually complete agreement

29. 4.04 Patients and staff can easily control the temperature

It is desirable that local temperature control is available and effective with a reasonably short time. It may well be that individual control of temperature is desirable not only for direct comfort but also for the feeling of being in control.

Mark only one oval.

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Virtually no agreement	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Virtually complete agreement

30. 4.05 Patients and staff can easily open windows/doors

Window catches and controls should be easily reachable. It is desirable that patients should be able to do this for themselves. This may also relate to 3.01 and be especially important if patients are unable to go outside.

Mark only one oval.

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Virtually no agreement	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Virtually complete agreement

31. 4.06 The design layout minimises unwanted noise in staff and patient areas

This item is particularly important where patients are sleeping overnight. Research has shown that stress and heart rate are linked to the levels of ambient noise in healthcare environments. These effects are seen in both staff and patients. Considerations include the minimising of noise sources within the building such as equipment and the insulation of internal patient staff working areas from any noise, the insulation of the building cladding from any noise sources outside the building, and the organisation of the building to keep areas where patients might sleep or staff might need to concentrate or relax away from noise sources. At night lower levels of sounds may be disturbing than during the day. For example patients have complained about overhearing nurses chatting at night time shift hand over times.

Mark only one oval.

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Virtually no agreement	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Virtually complete agreement

C5:
Legibility
of place

Section 5 deals with how understandable healthcare buildings are to the staff, patients and visitors who use them. Towns, areas, buildings, departments and rooms should have clear identities and be differentiated and have a hierarchy of structure. People generally like places that are not uniform and homogenous but have variety and variation of scale. Generally layouts should be clear and understandable so that way finding is easy and have to depend only minimally on signage or maps.

32. 5.01 When you arrive at the building, the entrance is obvious

The site as a whole should not introduce further stress by being ambiguous about where the entrance is. Preferably multiple entrances should be avoided but where this is either necessary or deemed desirable they should be clearly located, made architecturally apparent and signposted. The whole shape and form of the building should indicate where entrances are and they should be logically positioned in relation to the points of arrival onto the site.

Mark only one oval.

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Virtually no agreement	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Virtually complete agreement

33. 5.02 It easy to understand the way the building is laid out

In essence it should be possible to easily establish a 'mental map' of the building. Lengthy internal circulation should be avoided as should multiple and potentially similar courtyards. Views out to external 'visual anchors' are helpful as are 'landmark' internal features such as sculptures, paintings and so on.

Mark only one oval.

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Virtually no agreement	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Virtually complete agreement

34. 5.03 There is a logical hierarchy of places in the building

The scale of space should reduce in a logic which reflects the organisation of the building. It is easier to understand buildings that have major spaces that are reflected by a change in the section such as having higher ceilings. Those places that for example are not for use by the general public, or patients should be entered in such a way as to make this clear. The distinction between public and private can be indicated through changes in ceiling heights and also by using different materials. Generally public spaces might have a larger scale than private spaces.

Mark only one oval.

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Virtually no agreement	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Virtually complete agreement

35. 5.04 When you leave the building, the way out is obvious

The route back to the entrance may not be the same (in reverse) as the route taken in so it should be obvious where exits are. A good test is to be able to tell when leaving a particular room if it is obvious for some reason whether the exit is to the left or the right.

Mark only one oval.

	1	2	3	4	5	6	
Virtually no agreement	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Virtually complete agreement

36. 5.05 It is obvious where to go to find a member of staff

Nursing stations on wards should be located at a point of maximum visibility not only for nurses to have the optimal view of the ward but also so that patients can easily see where a nurse might be. Similarly reception points should be obvious and visible at entrances or waiting areas. Routes from waiting areas to consulting rooms should be obvious and unambiguous.

Mark only one oval.

	1	2	3	4	5	6	
Virtually no agreement	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Virtually complete agreement

37. 5.06 Different parts of the building have different characters

An excellent way of helping to increase the legibility of places is to give different kinds of places different characters reflecting their functions. However where there are also significant numbers of similar places (such as wards) then less significant changes of character perhaps through colour, texture or material should enable people to feel located meaningfully.

Mark only one oval.

	1	2	3	4	5	6	
Virtually no agreement	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Virtually complete agreement

C6: Interior appearance

Section 6 deals specifically with the interior of healthcare buildings and in particular what they look like. Although this section is probably one of the most subjective of all the sections in ASPECT never the less the statements included here relate to research evidence.

38. 6.01 Patients’ spaces feel homely

This is of particular importance in places where patients may stay for a long time. Patients express many opinions about the character of their preferred interior design and clearly this is very personal and variable. However there is general consensus that they would like to see hospitals as being homely. This is probably about scale and about textures and materials as much as anything else.

Mark only one oval.

	1	2	3	4	5	6	
Virtually no agreement	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Virtually complete agreement

39. 6.02 The interior feels light and airy

Again patients show general consensus, as do staff, about wanting light and airy hospitals. This can be achieved both by the use of materials and colour and by natural light and artificial light. The feeling can also be enhanced by the use, at least in part, of higher than normal ceilings especially when in combination with high level glazing.

Mark only one oval.

	1	2	3	4	5	6	
Virtually no agreement	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Virtually complete agreement

40. 6.03 The interior has a variety of colours, textures and views

Variety is important but a predominance of red based colours tends to create active and high anxiety feelings whereas the cooler colours such as green have the opposite effect. Dark colours however should be generally avoided except in small quantities (see 6.02). Clearly different kinds of colour schemes will be appropriate in different types of buildings. In particular it may generally be the case that basic and colourful schemes might be used in children's accommodation and calmer cooler colours in mental health buildings and so on. Colour may also be used to create the differentiation dealt with in 5.06.

Mark only one oval.

	1	2	3	4	5	6	
Virtually no agreement	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Virtually complete agreement

41. 6.04 The interior looks clean, tidy and cared for

Cleanliness has a symbolic value as opposed to the more obvious concern for hygiene. Patients and particularly visiting friends and relatives are upset by places that appear dirty whether or not they actually are. Having surfaces that look as if they are clean is important as well as the actual ease of cleaning them. Places that appear uncared for communicate a possible lack of care for the occupants. Ensuring that there is adequate storage may help significantly to avoid clutter and untidiness. Having clearly designed places for notices to avoid them spreading over surfaces untidily is a further consideration. Designing to avoid the degradation of the building with time and use is also important. For example where trolleys and wheelchairs may be used then consideration should be given to providing buffers and guards to avoid damage to walls and doors.

Mark only one oval.

	1	2	3	4	5	6	
Virtually no agreement	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Virtually complete agreement

42. 6.05. The interior has provision for art, plants and flowers

There is much evidence to suggest the art can be of great value in healthcare environments. Provision in the design for art to be incorporated is highly desirable. In addition to simply hanging paintings on walls, art should be integrated into the design where possible. This may include sculpture placed externally as well as internally. The choice of art is also extremely important. Research suggests that fairly conventional representational art of subjects that are reassuring is most helpful.

Mark only one oval.

	1	2	3	4	5	6	
Virtually no agreement	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Virtually complete agreement

43. 6.06 Ceilings are designed to look interesting

This may be of particular importance where patients are likely to spend lengthy periods in bed or be on trolleys or using medical equipment. Obviously the ceiling is very apparent and visible in such situations. Considerations include the minimising of services such as wiring, ducting and so on. In particularly stressful circumstances patterns or pictures may be used. Busy staff and visitors may not notice the ceiling surfaces but patients may spend more time looking up at ceilings. Views of nature on ceilings where patients are undergoing some treatment have been found to be reassuring and reduce stress. In considering new designs, It may be important to se drawings that show ceiling surfaces.

Mark only one oval.

	1	2	3	4	5	6	
Virtually no agreement	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Virtually complete agreement

44. 6.07 Patients can have and display personal items in their own space

This is of particular importance in places where patients might stay for a long time, and in children's care. The ability to have your own belongings close at hand making a link with normal everyday life should be considered as should the display of pictures. Sufficient storage to enable patients to be able to have their belongings around them but not clutter up space is important.

Mark only one oval.

	1	2	3	4	5	6	
Virtually no agreement	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Virtually complete agreement

45. 6.08 Floors are covered with suitable material

This may be of particular importance to older people. Considerations include the visual appearance of being both homely and yet clean. However floor finishes should not give rise to visual uncertainty and changes in floor level and material can confuse those with sight impairment and those who are infirm or unstable in walking.

Mark only one oval.

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Virtually no agreement	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Virtually complete agreement

C7:
Facilities

Section 7 deals with a number of facilities that have been found to be important for the users of healthcare buildings particularly patients.

46. 7.01 Bathrooms have seats, handrails, non-slip flooring, a shelf for toiletries and somewhere to hang clothes within easy reach

The bathroom and toilet area is one of the most commented on by patients in general research. The frustration caused by effectively being disabled through bad design clearly contributes a significant amount of bad feeling. On the other hand being able to care for yourself and perform normal cleaning and grooming can be very helpful and reassuring.

Mark only one oval.

	1	2	3	4	5	6	
Virtually no agreement	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Virtually complete agreement

47. 7.02 Patients can have a choice of bath/shower and assisted/unassisted bathrooms

As with 7.01 enabling patients to have a choice either through personal preference or because of circumstances may enable them to feel better about themselves without loss of dignity. However it is recognised that there may be many circumstances where, for reasons to do with the patients' condition, choice is not appropriate.

Mark only one oval.

	1	2	3	4	5	6	
Virtually no agreement	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Virtually complete agreement

48. 7.03 There is a space where religious observances can take place

This is of variable importance to people, but for some can be extremely important. This may also be important to visitors as well as patients especially when those they care for may be in hospital for lengthy periods or are very ill.

Mark only one oval.

	1	2	3	4	5	6	
Virtually no agreement	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Virtually complete agreement

49. 7.04 There is a place where live performances can take place

This may be of particular importance where patients are likely to spend lengthy periods in hospital. The value of live performances seems to have several benefits. There is the obvious distraction from pain, discomfort and worry. There is the possible social value of meeting and mixing with others attending and there is the sense of normal life carrying on. Consideration should be given where possible to make space available for such events.

Mark only one oval.

	1	2	3	4	5	6	
Virtually no agreement	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Virtually complete agreement

50. 7.05 There are easy chairs, tables and desks in the patients’ spaces

Again enabling as far as possible ordinary life to go on and a variety of activities to take place as very desirable. Where possible seating should be capable of being arranged to enable family and friends to be comfortable and sociable.

Mark only one oval.

	1	2	3	4	5	6	
Virtually no agreement	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Virtually complete agreement

51. 7.06. Patients have facilities to make drinks

People do not always want to go to public places for refreshment. Provision similar to that found in good hotels is desirable.

Mark only one oval.

	1	2	3	4	5	6	
Virtually no agreement	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Virtually complete agreement

52. 7.07. There are easily accessible vending machines for snacks

This is an important consideration for staff, patients and visitors.

Mark only one oval.

	1	2	3	4	5	6	
Virtually no agreement	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Virtually complete agreement

53. 7.08 There are facilities for patients’ relatives/friends to stay overnight

This may be of particular importance where patients are likely to spend lengthy periods in hospital and where children are involved. There should be adequate provision. There should be enough space including storage for relatives’ belongings especially if they may be staying for lengthy periods. This provision should be as close to the patient as possible. Ideally it should be in the same room unless inappropriate for medical reasons. Evidence suggests that where this is provided there are many benefits including reductions in nurse call button activity, reductions in patient falls and so on.

Mark only one oval.

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C8:
Staff

Section 8 is concerned with those aspects of healthcare building provision that relate specifically to staff. To score highly under this section a healthcare building would make good provision for staff to lead their personal lives as well as perform their professional duties.

54. 8.01. Staff have a convenient place to change and securely store belongings and clothes

Many staff have to wear uniforms or special work clothes and find it difficult to travel to work, especially using public transport, wearing these clothes. Staff are often concerned about the security of their belongings especially if their work means they move around a great deal and leave valued belongings behind. This of course includes cars or other transport.

Mark only one oval.

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55. 8.02 Staff have convenient places to concentrate on work without being on demand

As with many building types, staff often need a 'back of house' area where they can get on with some work that requires concentration without being on display and in demand. This might apply for example to nurses on wards or therapists making some case notes. It should also be possible to have confidential staff conversations.

Mark only one oval.

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56. 8.03 There are convenient places where staff can speedily get snacks and meals

Staff may have short break periods during their working day. Being able to get to a place where they can get refreshment or meals quickly and easily is very important. Equally such places need to be able to serve staff without extensive queuing.

Mark only one oval.

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57. 8.04 Staff can rest and relax in places segregated from patient and visitor areas

Being able to meet and chat with colleagues during breaks and meal times is reported as being very important. Knowing that you can chat with colleagues about cases and problems without risk of being overheard by patients or visitors is rated as highly desirable by staff. Having places that increase the likelihood that you will meet busy colleagues performing similar duties is also thought to be highly desirable.

Mark only one oval.

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58. 8.05 All staff have easy and convenient access to IT

This consideration may be particularly important for staff who do not work mainly at a base point but move around a great deal. Increasingly organisations rely on IT for communication and such staff can be seriously disconnected from others unless they have ready access to IT.

Mark only one oval.

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59. 8.06 Staff have convenient access to basic banking facilities and can shop for essentials

There are many facilities that might be included for staff at their places of work ranging right up to gymnasiums and swimming pools. There are varying opinions about how desirable such facilities are. However there is general consensus amongst healthcare workers who often lead very busy lives that it is essential to be able to obtain cash, pay bills and get daily essentials without having to travel.

Mark only one oval.

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Virtually no agreement	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	Virtually complete agreement

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