



## OVERVIEW

THE PRIMARY OBJECTIVE WAS TO EXPLORE THE BUILT ENVIRONMENT WITHIN COMMUNITY HEALTHCARE AND, THROUGH THIS, TO GENERATE NOVEL DESIGN CONCEPTS FOR RESEARCH. THE NHS IS INVESTING £1BN IN HEALTHCARE FACILITIES - GIVEN THE SCALE OF THIS INVESTMENT, IT IS VITAL THAT DESIGN OF NEW FACILITIES SHIFTS AWAY FROM "FIT FOR PURPOSE" TOWARD SOMETHING MORE AKIN TO OPTIMAL DESIGN WHICH MAXIMISES THE POTENTIAL OF THE BUILT ENVIRONMENT TO ENHANCE PATIENT CARE. THE EVIDENCE BASE FOR OPTIMAL DESIGN IN COMMUNITY HEALTHCARE FACILITIES IS SPARSE. THIS CLUSTER HOPES TO ADD TO IT.

## Activities

"Thinking through doing" governed design of cluster activities. A Future search forum of healthcare professionals, academics and senior health management moved delegates beyond operational design restraints, resulting in imaginative, workable options for future healthcare facilities.

Community projects engaged users as experts. Teenagers explored their perspectives of the built environment and its impact on sexual health. The findings were startling and highlighted the very real effect of the built environment on health. Another community project addressed process and sustainability of changing spaces in healthcare. Older women were invited to improve a healthcare space. With assistance from an artist a tapestry was woven and placed in a GP's waiting room. The documentation of the process has been most informative – emphasising the potential of community resources as well as the challenges that come with such engagement. The enhanced environment is now being evaluated by staff and patients.

The cluster still has its largest projects in the pipeline – a cross-disciplinary healthcare design symposium (April 2006), a project further exploring process and creation of healing spaces using fine arts photographers, and the perspectives of children on the healing environment to be captured through creative artwork (March 2006).

## Insights

- There is a strong desire for change in healthcare spaces. Users offer a valuable source for new concepts in design. Indeed, they are more than capable of generating realistic and workable design options. These could be explored through action research.
- Developing healing spaces in the community needs to be sustainable and largely independent of NHS funding – the NHS purse remains sceptical of the place of design and the arts in health.
- Changing the nature of spaces in healthcare is extremely complex with multiple mixed agenda in an emotive arena. Whilst there might be a desire for change, managing the process will need research and understanding.

The Space Works will continue to develop the evidence base for the built environment and health. Research alone will not result in the change that is needed - an educational and advocacy role is already being developed.