



palliAGED Aged Care Standards Insight

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Can environmental design influence wellbeing at the end of life?

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Healthcare and aged care facilities are increasingly using design principles in creating buildings and spaces that build links between design elements and desired outcomes relating to health and wellbeing. DuBose and her colleagues (2016) suggested that environmental factors such as light, room layout, access to views, and nature could influence psychological, self-efficacy, social, and functional healing. [1] Design is also important for people who work in these settings.

A Victorian study has shown that design features can influence how residential aged care staff feel valued, productive, safe, like they belong and connected. [2] Creating welcome environments for those from other cultures and for Aboriginal and Torres Strait Islander peoples can also impact on their experience of care. [3] A Cochrane review currently underway is looking at the effects of changes to the physical environment or alternative models of residential care on the quality of life of people living in care facilities. [4]

This growing body of evidence will inform the design of new facilities and the review and approaches to the management and refinement of existing aged care spaces.

Design for end of life

Evidence-based architectural and landscape design have also addressed end of life considerations. Stephen Verbeer has published a compendium of architectural and landscape design considerations for residential hospice care. After examining the nature of outcomes

for hospice residents, he has documented the implications for the hospice environment in terms of site and context, arrival spaces, communal and private spaces of the residential milieu, transitional spaces, and nature connectivity. [5]

Diverse elements address many different design aspects from the practicalities of arriving and parking through the function and purpose of spaces as well as design to address the emotional, physical, and spiritual needs of patients and their families. Such a compendium articulates the complexity of design, function, and outcome.

What end of life design matters in aged care?

The importance of considering the service's environment is not new. In 2011, the National Health Services in the UK published guidance for hospitals, hospices, and care homes on key environmental principles to help improve privacy and dignity for patients and relatives and to support the bereaved. [6]

Ensuring that environments are sympathetic to the needs of older people approaching the end of their life and suitable for the people who care for them (whether family or staff) is critical in building a healthy approach to death and dying. Zadeh et al (2018) looked at medical and environmental design evidence on how physical environments and related policies and procedures in institutional settings could help alleviate total suffering (physical, emotional, social, and spiritual) and support caregivers in delivering compassionate care.

A recurring theme of the review was the person's ability to control or personalise their surroundings. [7] Design that supported social interactions, positive distractions, protected the individual's privacy, was homelike, and supported an ambient environment was seen as a promoting good quality through to the end of life.

A study on environmental aspects supporting good quality end of life for people with dementia also highlighted similar themes. Spaces that enabled engagement, familiarity and homeliness, opportunities to be together with family, privacy, as well as safety and security, were all valued. [8] Many of these principles have been included in the Victorian Government's strategies and principles for developing dementia-friendly environments which include suggestions for design for end of life. [9]

Environmental design seems to have a significant value in creating spaces and places that can support individuals, families, and workforce address end-of-life needs and realities. These studies remind us that we remain human until we die and that the space and place we inhabit, including the nature of residential aged care environments, is important to our living and dying.

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