NHS Grampian Visual Environmental Strategy
The Healing Environment 2012/2017 (THE)

Monday 8th Oct 2012

Illustrations feature:
Dental Hospital (Top L)
Woodend Radiology (Top R&LR)
RACH (Low L) & vinyl/glass by Paula Thompson (Commissioned artist)

THE 2012/2017

NHSG management group view The Healing Environment Foresterhill from the Emergency Care Centre during its construction 2011

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T H E

"Now the whole environment is not so clinical looking. It is warm and welcoming for children who have to have procedures and treatments carried out in these rooms."

Maureen MacDonald
Play Specialist

2012/2017

1 Foreword

The concept of the Foresterhill Health Campus (FHC) represents a radical shift in NHS Grampian's healthcare delivery, in which patterns and methods of care appropriate for the 21st century are centred on custom-built accommodation. The clinical environment has always been the focus of planning at Foresterhill and across NHS Grampian. Until recently, however, it has been approached on a project-by-project basis in individual wards or departments, partly because of historical processes whereby individual clinical departments necessarily competed for scarce resources without reference to a larger perspective.

Overall, the vision for Foresterhill is the creation of an integrated, user-friendly health and educational campus set in an attractive landscape and easily accessible to patients, visitors and staff. (Foresterhill Development Framework 2008). State-of-the-art clinical facilities for unplanned, outpatient and ambulatory care will be provided along with inpatient care as Stage 1 of the redevelopment of the Foresterhill site. An essential feature of the future brief for design teams and planners will be to create welcoming facilities that provide easy access and way-finding for the public, delivered in attractive and flexibly 'fit for purpose' buildings set in a landscaped environment with views across the city. The delivery of modern healthcare will take place in settings expressly designed to afford privacy and dignity to patients. At the same time, opportunities and venues will be provided for staff to meet, learn from each other and share experience and expertise in both formal and social settings.

In parallel with the redesign of care, the FHC represents a departure from traditional piecemeal planning, focussing instead on a large-scale vision in which each part of the site functions and interacts efficiently with the whole. In all things form follows function and at the centre of this physical reconfiguration is the crystal-clear intention to redesign healthcare service provision to reflect the highest possible standards of modern medicine through the application of science and technology. These aims are laudable enough, but even the best of intentions and the highest of tech cannot succeed in a complex environment without very well thought-out organisation, management, communications and IT. Accordingly, over the last several years, planning the FHC has involved a detailed reconsideration of all relevant support structures and processes. All of these ideas are implicit in and resonate with NHS Grampian's **Health Plan** and the **Healthfit** vision.

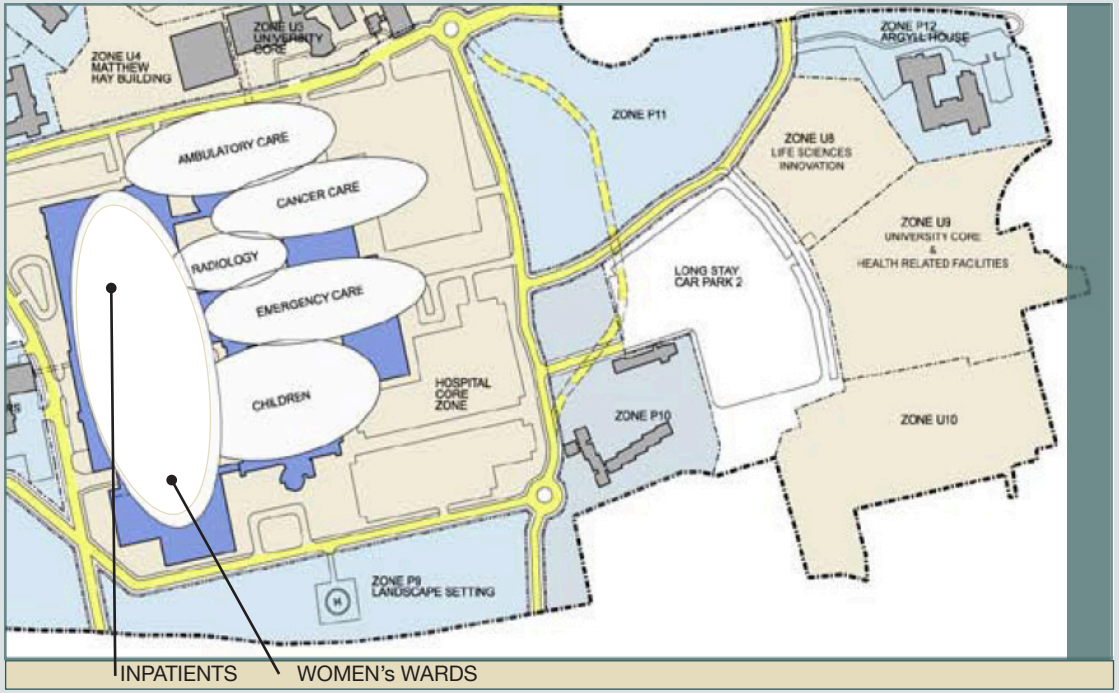
Dr. Donnie Ross - Chairman, Grampian Hospitals Arts Trust

2 Overview of NHSG facilities and the Foresterhill Health Campus

NHS Grampian facilities

The facilities of NHSG cover Aberdeen, Aberdeenshire and part of Moray. Aberdeen Royal Infirmary is NHS Grampian's largest hospital, situated at Foresterhill, Aberdeen. Foresterhill also houses Royal Aberdeen Children's Hospital, Aberdeen Maternity Hospital and other units such as the eye out-patient clinic and the breast clinic. Woodend Hospital caters for many other patients, including the elderly, while Royal Cornhill Hospital provides inpatient and community support for mental health services. Roxburghe House is a new purpose-built unit providing palliative care for terminally ill patients.

A large number of outpatients are seen at the Woolmanhill Hospital in the city centre, where a new Health Care Village is under construction to service these patients.



Dr Gray's Hospital

Dr. Gray's is the district general hospital based in Elgin, Moray with a full range of services provided including anaesthetics, dietetics, laboratories, occupational therapy, pharmacy, physiotherapy and x-ray. Dr Gray's is undergoing internal refurbishment.

Community Hospitals

Community hospitals are units where most patients are admitted and cared for by their own GPs. They normally deal with acute medical care where patients cannot manage at home, but where the expertise and/or specialist diagnostic facilities of a major specialist hospital are not required.

The Foresterhill Development Framework 2008

The framework sets out NHS Grampian's plans for the future delivery of healthcare services on the Foresterhill Site. The new Royal Aberdeen Children's Hospital was completed in 2004, while the Aberdeen Dental School and the Suttie Centre for Teaching and Learning opened in 2009. Future elements will include the new Cancer Centre and the Ambulatory Care Centre.

Emergency Care Centre ECC

One of the largest developments on the site is the new Emergency Care Centre (ECC) due to open in November 2012. This project is a major part of the staged redevelopment of the Foresterhill Health Campus. The Emergency Care Centre will bring together emergency and urgent care services into one building, so that Accident and Emergency (A&E), Gmed (out-of-hours medical service), NHS24 and services for people who require urgent assessment and treatment can provide seamless state-of-the-art patient care.

3 The Healing Environment

From September 2012 a high proportion of the services across Foresterhill Campus and Woodend Hospital will be permanently or temporarily re-located. Large-scale change produces stress in the work-force, while at the same time a highly-concentrated and efficient health-care organisation can easily give the impression of being centred more on impersonal productivity and statistical outcomes than on the experience of living through the process as an individual. Understanding this, it can more readily be appreciated that the visual environment, far from being an expensive luxury, is actually a prime factor in determining how people respond to and ultimately view their experience as patients, visitors or members of staff. **[Ref 1]** It is clear that we should not make patients feel in any way personally diminished or psychologically traumatised. Buildings should be welcoming and their interiors pleasantly designed, conducive to calm and elevating to the spirits.

The very fact that great care has evidently been taken to make healthcare spaces pleasant will provide that basic, but vital and very strong message about the intentions and attitudes of those who have planned and provided the buildings, campus and services. This should be a thread & manifest principle which runs all the way through to the point of delivery by NHS staff. The message must be: “We care about you”. The semiotics of design and environment, properly deployed, address the human psyche much more effectively than explicit superficialities of verbal slogans or laboured advertising copy.

The way in which attitudes, emotions, moods and behaviours can be influenced for the better through environmental design constitutes an enormous area of study and interest which we cannot hope to examine in this document, but we are in no doubt that the focus of our interest as expressed in this strategy document lies precisely there.

It is well recognised that the sensory environment in which people live and work has major effects on the way in which individuals view their experience and these effects have a range of consequences for good or ill. There is good evidence that a well-designed visual environment improves patient experience, accelerates healing, shortens hospital stay and diminishes the need for analgesia. **[Ref 2]** These improved outcomes are not limited to good interior design, but include beneficial effects from the inclusion of artwork within the healing environment. Participation in arts-based programmes of creativity has also been introduced with considerable success to caring environments in NHS Grampian, often involving situations where physical cure may not be achievable. **[Ref 3]**

4 Policy and Research

The Healing Environment strategy is designed to deliver the following policies and framework from the Scottish Government, NHS Grampian and others.

POLICY

NHS Scotland Design Policy 2010

NHSG Foresterhill Development Framework 2008

BRE Environmental Assessment Method - BREEAM 2012 -section HA19

RESEARCH DOCUMENTS

Reducing Violence and Aggression in A&E: Design Council 2011

Enhancing the Healing Environment – The Kings Fund 2000

5 The Healing Environment strategy for NHS Grampian

This strategy will be in place for five years. To be successful it needs to address the whole environment. Visual art should not be seen as a sticking plaster for overdue maintenance or a means of cheering up badly designed spaces; accordingly this strategy proposes the collaboration of good quality artwork within well designed and maintained environments.

AIM

To improve the health experience through quality design of the visual environment

CURATORIAL VISION

“Integrated, but Individual” for each department

The Healing Environment Strategy delivery framework/structure

The Healing Environment Group (THE)

The Healing Environment Group (THE) has been set up to develop and promote the strategy described in this document. The group will report to the Foresterhill Campus Programme Board or any successor. These policies and strategies will be applicable throughout NHS Grampian, with some buildings such as Dr Grays, RACH and Cornhill taking on the Integrated, but Individual vision to ensure their local needs are addressed appropriately.

GHAT and THE (Fig 1)

The group will be facilitated by Grampian Hospitals Art Trust, which brings relevant past experience along with continuing availability of professional expertise in the visual arts. The group will call on membership from NHSG departments & facilities involving modernisation, planning, public health, estates and facilities, medical/clinical and the Universities.

Grampian Hospitals Art Trust

The trust will continue to maintain and deliver the GHAT framed collection, a changing exhibition programme and the various arts programmes aimed at patient participation in arts-based creativity. GHAT is well placed to assist and advise with the development of good arts and environment practice within NHSG capital projects, working with NHSG to engage project managers as appropriate to ensure efficient and timely delivery.

OBJECTIVES: Service

1	Ensure all NHSG project managers are aware of this strategy and how to implement it
2	Create an NHSG acknowledgement policy to assist departments with donations of equipment and artwork
3	Appoint a lead visual environment contact for each service
4	Maintain the visual environment throughout with reference to the following: • Reduce the need for notices to be pinned to walls and maintain an uncluttered feel • Keep corridors as clear as possible • Keep artwork clear and free from equipment

OBJECTIVES: NHSG Capital and refurbishment

1	Integrate interior design, architecture and arts to ensure a cost effective approach
2	Assess the financial implications of arts and environment for each project at the earliest opportunity
3	Create a clear and achievable connection between GHAT and NHSG to assist and advise with NHSG arts and environment projects
4	Create an arts and environment vision at the earliest point of proposed new project, whether refurbishment, new build or external landscaping to include the following: • Creating a sense of place • Connection between buildings and open spaces • The use of colour across the project inside and out • The use of light and lighting • The use of art either framed or permanent • Way finding and orientation • The placement of notice boards and information • Furniture and soft furnishings
5	Submit project arts and environment vision to THE prior to the start of the project

6 Project Delivery and Practical Methodology

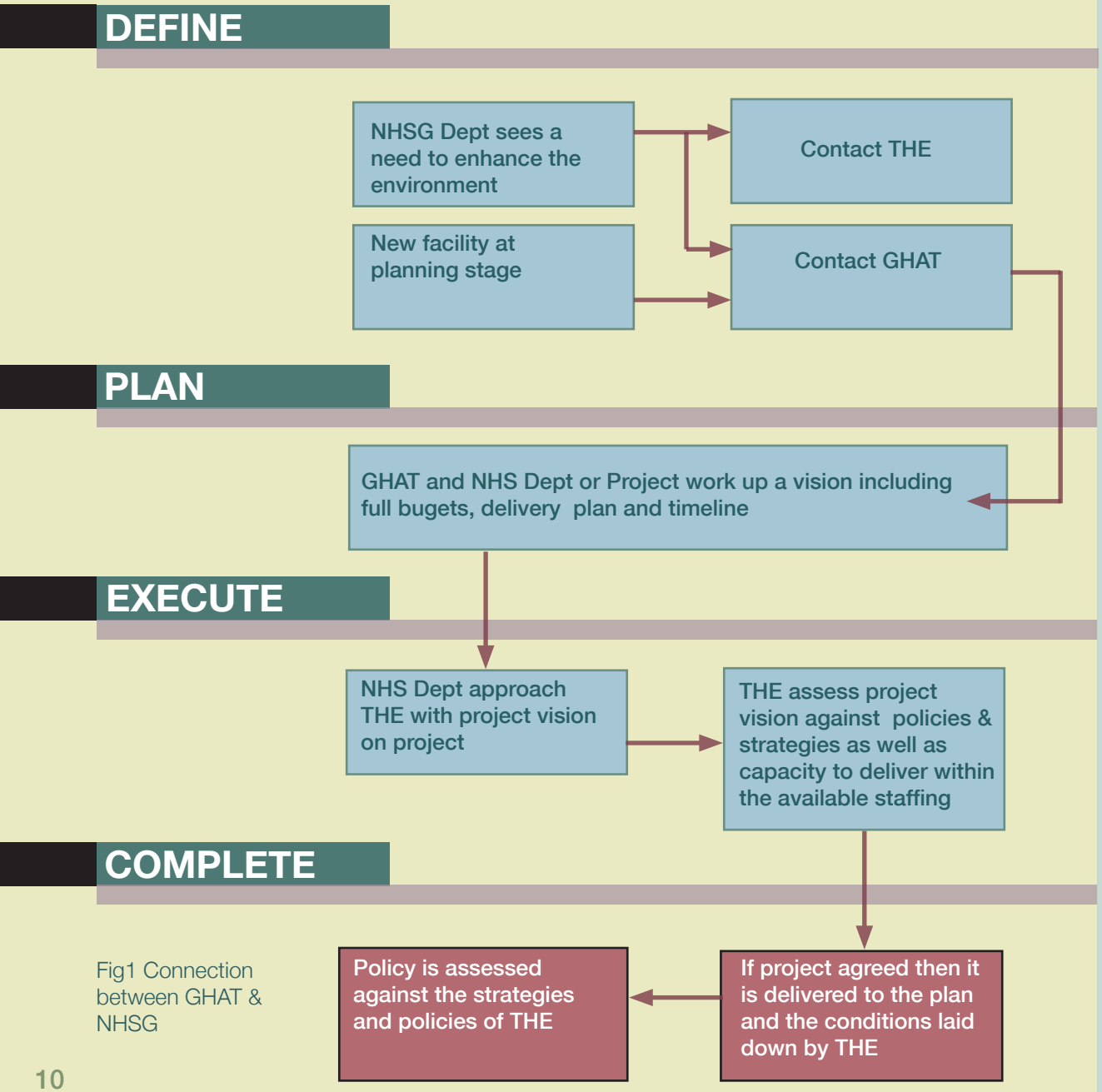


Fig1 Connection between GHAT & NHSG

PROJECT DELIVERY

NHSG has developed good practice in partnership with GHAT over the last 30 years for the inclusion of artworks within the healthcare environment. This strategy recognises this experience. The Healing Environment will be part of projects from the beginning to allow design aspects to be incorporated as early as possible and to allow decisions to be taken without adding to the logistical or financial burden.

At the initiation of a facilities project an arts and environment representative will be a member of the briefing team to assist in the writing and development of the brief for the business case or project plan.

Any new interior design and/or artwork selected must be appropriate and relevant for its context with the following factors taken into consideration:

- The function of the building as a whole and of individual departments
- The architectural concept; layout of departments, articulation of space, circulation routes, lighting, palette of materials and colours
- The full range of users of the building; patients, visitors and staff
- Maintenance work; any artwork work should be low maintenance, durable and vandal-proof and compliant with H&S and HAI regulations.

Once the business case or project plan has been agreed the representative will join the project team as the conduit from THE to the project.

Art and Environment Projects

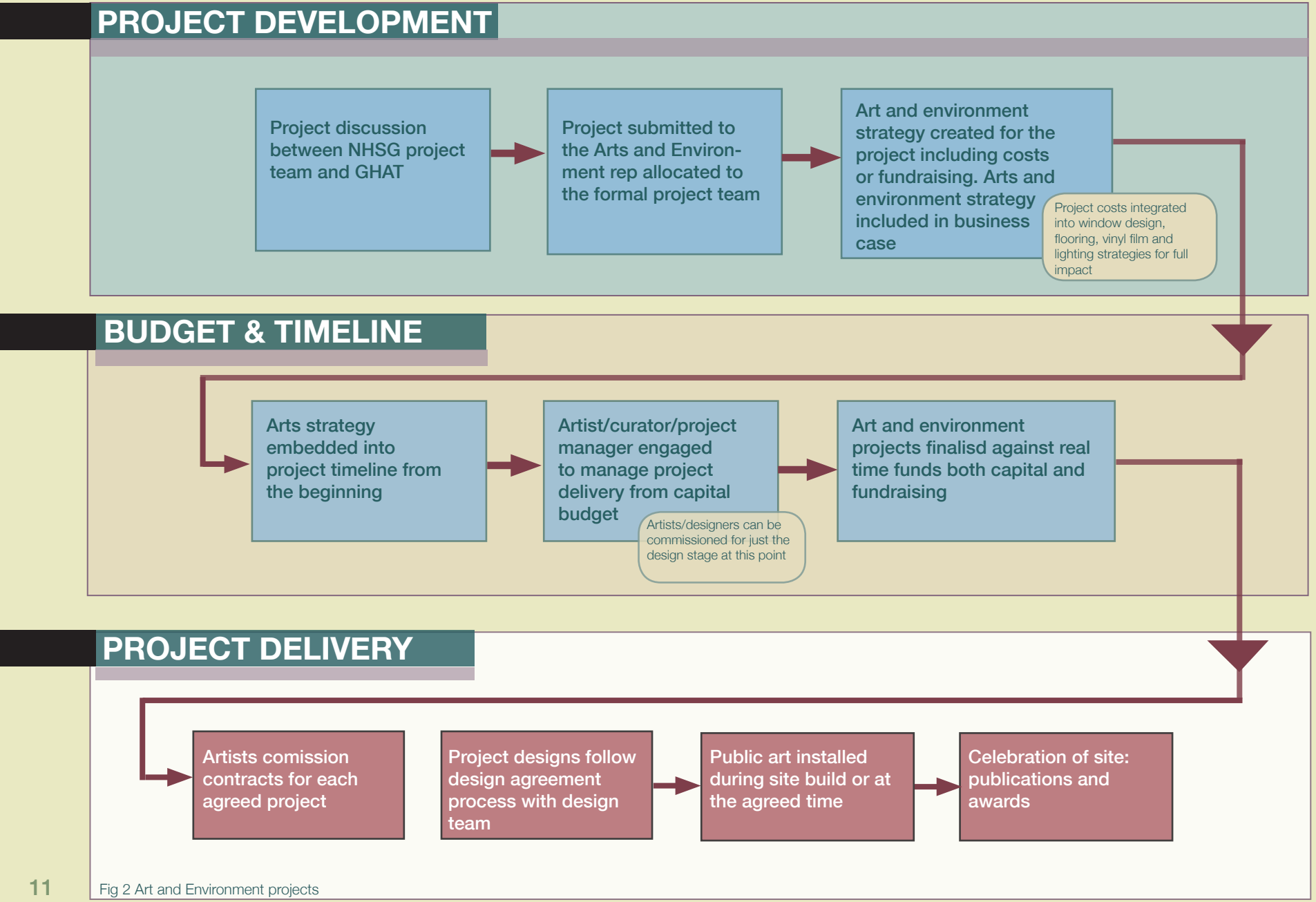
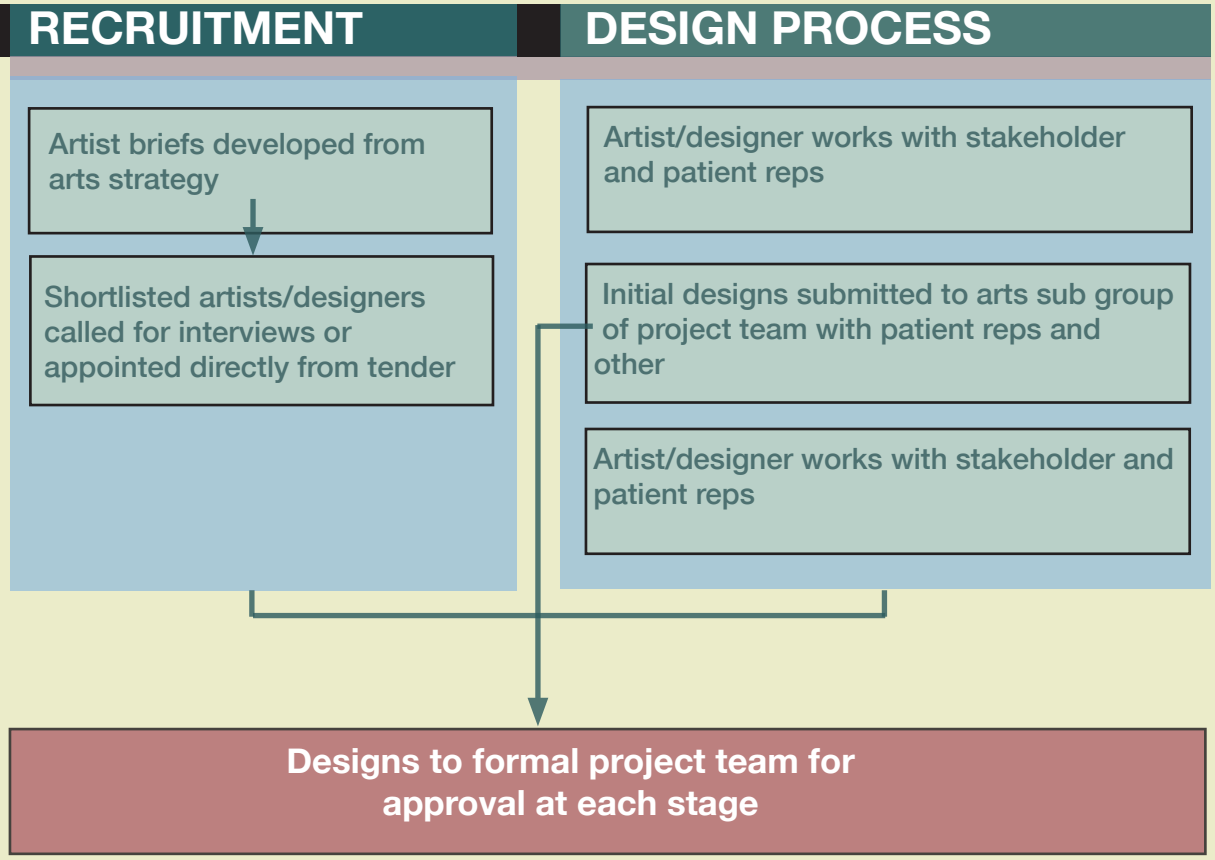


Fig 2 Art and Environment projects

Design sign off for arts interventions

For any arts and environment project to be successful and delivered within the agreed parameters there needs to be a clear line of arts design approval. Fig 3 below shows the process for working with artists or designers and having designs agreed prior to their fabrication and installation within the building.



COMMISSIONING PROCESS

Artists will be selected through different routes:

1 Open tenders
The artist brief is sent out for any interested artist. A shortlist of artists is interviewed and an artist appointed to work up the brief.

2 Direct Invitation
The group invite an artist whose work is seen as the most appropriate, to create a design against a written brief.

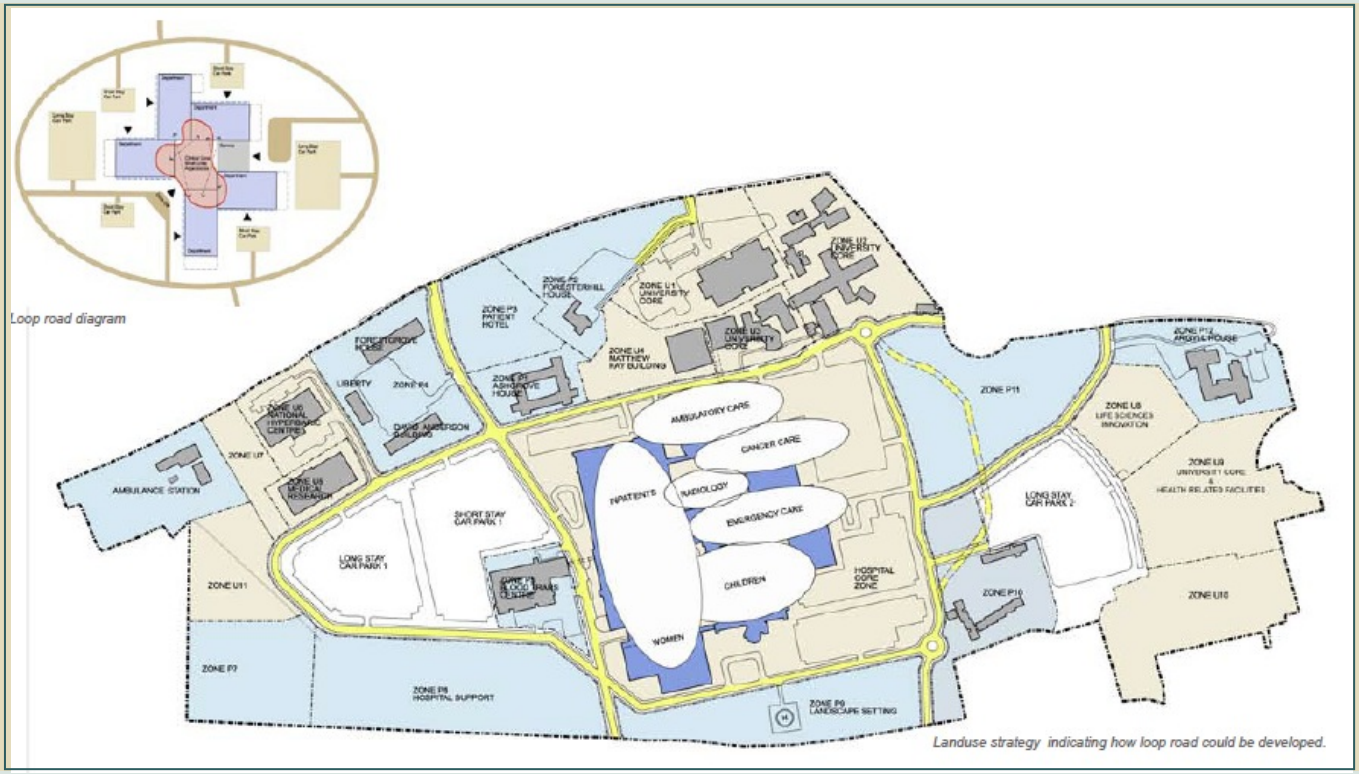
3 Design Competition
Targeted artists are asked to design work against a written brief and the most appropriate chosen to be fabricated.

Contract
Once the artist is chosen a contract is written and signed by both parties to ensure all insurance and copyright issues are addressed.

Once the artwork is in place the artist creates a maintenance and review structure for any permanent work.

7 Priorities

A: A landscape and pathways strategy



Landuse strategy indicating how loop road could be developed.

"The redevelopment of the hospital offers an excellent opportunity to enhance routes and facilities for walking and cycling on the site to ensure that a coherent network of walking and cycling is created to link up with the existing external network and to allow free movement between the various elements of the hospital and University on the campus. Some of the measures which would be provided in this context include a network of footpaths, shared pedestrian/cycle routes, covered cycle parking close to main pedestrian entrances, better facilities for cyclists (changing facilities, showers etc..) and a safer pedestrian environment, bearing in mind that traffic would primarily be focused on the loop."
(Foresterhill Development Framework 2008)

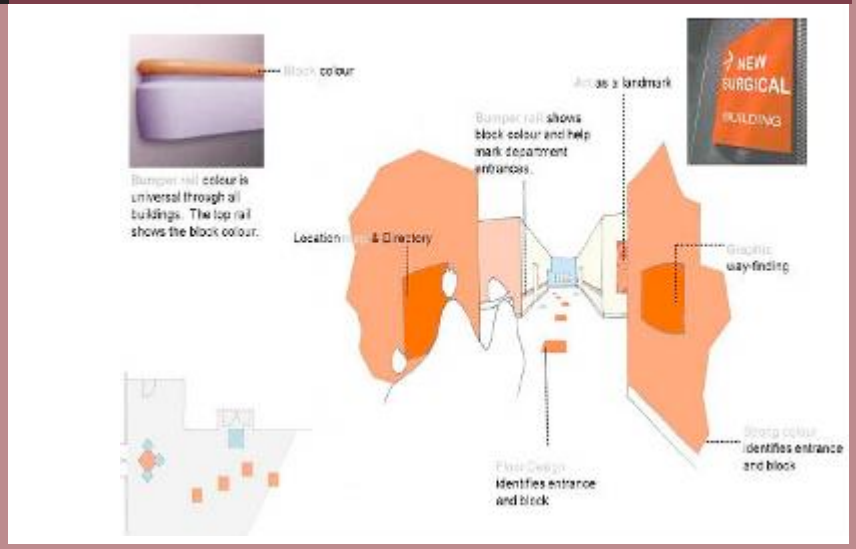
The healthcare institution concentrates on the inside and creates functional accommodation for the patients, staff and visitors. As part of 'The Healing Environment' we also need to look outside. Patients need to see the world beyond. This has been recognised in the new Emergency Care Centre with huge windows and as many vistas as possible. Spaces outside need to be accessible and safe. Sitting areas would be advantageous close to the entrances. Well marked recreational walking routes will be developed. External recreational areas need to be preserved from future building or designed into any new build. Smoking needs to be considered and well sign posted spaces developed.

B: An interior design strategy/toolkit

To assist in creating a consistently high quality environment an interior design strategy should be developed, agreed and implemented. This will ensure that there is a basic attention to the colour and base layer within each department.

The main action point will be to create an interior design tool kit which has generic elements but choices of colour which are sustainable from a maintenance point of view.

IDENTITY: BUILDING ENTRANCE



IDENTITY: PATHOLOGY, GUM GENETICS

Taunton and Somerset Hospital

8 References

1. The Healing Environment (GHAT, 2010)
2. Chelsea & Westminster… Rosalia Lelchuk Starikoff
3. Linklater, Dijkhuizen et al (ibid)

Please note: the reference section will be finalised and included in the completed version of this draft NHSG Strategy document.