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Participatory Design of Hospitals - Abstract

The research problem presented in this paper refers to conditions of initiating participation with medical staff within architectural design of hospitals in Poland. This subject is brought up in response to excessive length of investment proceedings in the field of hospital design and lack of synergy between the newest medical technologies and healthcare buildings infrastructure.

Main goal of the research is to define the link between traits of hospital spaces, their users and capability of activating medical staff role within pro-quality changes of built environment (work environment).

To achieve the assumed objective, surveys were conducted within medical staff group (n=154) at six hospitals located in Poznań (Poland). Survey based on the Likert scale was used to extract sociodemographic determinants of the staff and traits of built environment which may influence conditions on which medics may participate in hospital design.

Used research method takes into account the specifics of polish medical staff. Quantitative data acquired with the closed questions section of the survey are supplemented by quality data coming from open questions.

This research was based on well-established theory of participatory design, including above all "Participation Ladder" by Sherry Phyllis Arnstein. The dissertation also links with the latest scientific work in the field of hospital design and authors own experience gathered during architectural practice (including healthcare architecture design in Poland).

Additional aim of this paper is to verify whether used research method (survey) may have a practical use during programming and designing hospital buildings in Poland.

According to the Evidence-based Design, data acquired within the individual buildings may be used to improve the quality of already existing spaces (planned to be retrofitted) whereas analyzing data from wider research including multiple buildings may become a guideline list for designing new hospitals.

Keywords:

participatory design, hospital, healthcare design, medical architecture