

We provide patients a voice in the design of healthcare spaces. The environmental needs of patients are communicated to the healthcare design community through the following resources:

- ▶ "Patient-Centered Design Alliance" Membership Program
- ▶ The "Patient Experience Simulation Lab" Interactive Events
- ▶ *Patient-Centered Design Online™* Publication
- ▶ Continuing Education Courses Online
 - Self-Guided Courses
 - Live and Pre-recorded Webinars
 - Research Papers and Reports
- ▶ Design Competitions and Honors
- ▶ Patient-Centered Design Project Database
- ▶ Links to Resources and Tools for Patients, Providers, and Designers

Please bookmark
www.PatientCenteredDesign.org
and visit frequently for the latest information on
improving the healthcare environment for
patients!

COMMITMENT TO PATIENT-CENTERED DESIGN

Find a list of providers and designers who support our mission at **www.PatientCenteredDesign.org**!

Learn more about our continuing education series
Understanding the *Patient* in Patient-Centered Design™

Designing for Patient Empowerment



Visit **www.ifpcd.org/members**
to join!



GUIDE TO ENGAGING PATIENTS IN DESIGN MEETINGS



Institute for
Patient-Centered
Design, Inc.

As a nonprofit organization, our mission is to
contribute to the quality of healthcare
delivery through patient-centered design
advocacy, education and research.

For more information, please contact:
Institute for Patient-Centered Design, Inc.

Engaging Patients in the Design Process

Many patients and their families are honored to donate their time to attend hospital design meetings, with hopes of improving the environment of care. The following tips may assist healthcare design teams to engage patients in design meetings:

1. Allow patients to walk through the existing space at least once during the design process, enabling them to recall the effects of this space on their healthcare experience.
2. Arrange meetings as round-table discussions in lieu of lecture style presentations.
3. Ask patients questions about how they feel in various environments. This allows designers to learn the physical and emotional impact of their decisions on the end users.
4. Ask family members what facility amenities might encourage them to remain with the patient throughout his/her stay.
5. Capture the suggestions of the patients on a white board during the meeting and in subsequent meeting minutes to keep them in the forefront of the design.
6. During the presentation, point out advantages for patients in the design scheme.
7. Avoid overuse of technical or medical terms.
8. When presenting research-based design ideas, provide supporting information.
9. Bring photos, 3D images and/or full scale models of design elements that may be difficult to visualize.
10. Inquire about common concerns, such as way finding, privacy, perception and patient empowerment.
11. Provide clear graphics and a key of symbols to assist patients and staff in reading the drawings (a sample is provided on the next page).
12. When a mock-up space is available, conduct the patient user meeting inside or in close proximity to the space.
13. If time is short, encourage patients to make notes of anything that was not covered; and be diligent to follow up on their written suggestions.

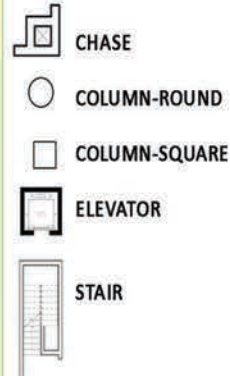


Architectural Graphics Key

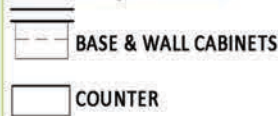
Healthcare providers and patients may use this key as a guide to unfamiliar symbols in architectural drawings.



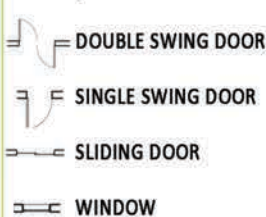
BUILDING COMPONENTS



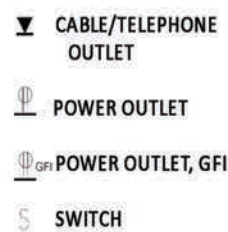
CASEWORK/CABINERY



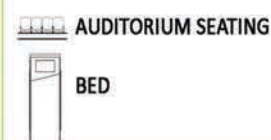
DOORS/WINDOWS



ELECTRICAL COMPONENTS



FURNITURE



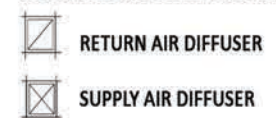
FURNITURE CONTINUED



ADA GRAPHIC SYMBOLS



MECHANICAL COMPONENTS



PLUMBING FIXTURES



Please visit www.ifpcd.org/fordesigners for extra copies and updates.