

Evidence Based Design Primer

KLMK Group, LLC
By Curtis Skolnick, MHA
Principal Consultant

The Roots of Evidence Based Design: In 1984 a study was conducted by Dr. Roger Ulrich (an environmental psychologist who conducts research on the effects of people's experiences with environments on psychological well-being, physiological systems, and health outcomes). The study stimulated the development of Evidence Based Design (EBD). Dr. Ulrich evaluated surgical patients who were randomly assigned to rooms on the same corridor that were identical except for the window view: half the patients overlooked trees and the other half viewed a brick wall. Patients with views of nature went home three-quarters of a day sooner, had \$500 lower cost per case, used fewer heavy medications, had fewer minor complications, and exhibited better emotional well being (Ulrich 1984).

Reduced Stress and Improved Outcomes KLMK Group, LLC

- Noise
 - o **Background noise levels** in hospitals typically range from 45-68dB with peaks exceeding 85-90dB
 - o World Health Organization guidelines values for **background noise** in patient rooms are 35dB not to exceed night-time peaks of 40dB.
 - o **Noise sources** are numerous (personnel, overhead paging, clinical equipment, support equipment such as vacuum cleaners, etc., telephones, pagers, etc.)
 - o Environmental surfaces (floors, walls, ceilings) are usually hard and sound reflecting creating poor acoustic conditions.

For a complete Pebble Project prospectus and application, e-mail Debra J. Levin (dlevin@healthdesign.org) or call at tel. [925.521.9404](tel:925.521.9404).

For additional Pebble Project Information visit:
<http://www.healthdesign.org/research/pebble/> .

EBD is not about hospitals simply being “nicer” or “fancier”, rather the focus is to create hospitals that actually help patients recover, be safer, and help staff perform better.

The Center for Health Design – For more information visit www.healthdesign.org