



REGIONAL GERIATRIC ASSESSMENT PROGRAM
Le programme régional d'évaluation gériatrique

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ADMINISTRATION, PRÉG

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December 23, 2004

Wendy Fortier
Clinical Director
Critical Care/ER/Trauma
The Ottawa Hospital General Campus

Dear Wendy:

I am pleased to send you a copy of the summary of the recent senior friendly physical environment audit of the Emergency Department at the Ottawa Hospital Civic Campus.

The review indicates that the Ottawa Hospital has very successfully integrated senior friendly design guidelines into the initial phase of the ER renovation. The joint commitment of the Department of Facilities and Planning (who arranged the initial meeting with project architects), and the leadership and support demonstrated by you and Chris Ferguson are reflected in the results of this review. The Regional Geriatric Assessment Program team, supporting the Senior Friendly Hospital Strategy, have also provided consultation and advice.

There is little doubt that these senior friendly design features will have a positive effect on the clinical efficiency and patient outcomes within the Civic ER.

This collaborative effort provides an excellent foundation for a poster presentation at the upcoming Interdisciplinary Conference on Emergencies, to be held June 26-30, 2005 in Montreal. We will follow up with you to explore the possibility of a joint submission.

Also attached is a copy of the recently published article "*Creating a senior-friendly physical environment in our hospitals*" published in *Geriatrics Today*, the national journal of the Canadian Geriatrics Society by our staff. The guidelines highlighted in the article formed the basis for the development of the audit tool, and are an integral component of the Senior Friendly Hospital Strategy that is currently under development.

Yours truly,

Cal Martell
Director, Regional Geriatric Assessment Program of Ottawa
Clinical Director, Geriatrics, Family Medicine and Endoscopy
The Ottawa Hospital

cc. Paula Doering - VP, Clinical Programs Surgery/Medicine/Critical Care, TOH
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Elan Graves - Program Manager, Regional Geriatric Assessment Program
Patricia Barr - Occupational Therapist, Regional Geriatric Assessment Program
Chris Ferguson, Clinical Manager, ER, The Ottawa Hospital Civic Campus
Nancy Kelly, Chairperson, Senior Friendly Hospital Steering Committee



**Creating Senior Friendly Physical Environment:
Summary of the ER – Civic Campus Audit**

Participants:

Betty Methot, Emergency Care Facilitator

Chris Ferguson, Clinical Manager

Patricia Barr, Occupational Therapist, Geriatric Assessment Unit

The Regional Geriatric Assessment Program has recently developed and published senior friendly design guidelines for acute hospitals, as a component of the Senior Friendly Hospital Strategy. The Ottawa Hospital had previously invited the RGAP consultant to participate in the development of the renovation and design plans for the new emergency department at the Civic Campus. Following completion of the Phase 1 renovations, the Emergency Department requested a preliminary audit of the new environment to assist in future planning. On November 2, 2004, an audit of Phase 1 of the emergency unit took place using the Audit tool attached as a guide.

The results of the audit confirm that the ER capital project has been quite successful in creating a senior friendly environment. In fact, the results of the audit demonstrated that there was general compliance with the design criteria across all ten of the dimensions that were reviewed. These included:

- Lighting
- Noise/Sound
- Décor
- Orientation /Way finding
- Signage
- Flooring
- Doorways
- Functional Areas
- Washrooms, and
- Furniture

The Emergency department is to be commended for the creation of a patient alcove adjacent to the triage desk, in order to reduce ambient noise and confusion for older adults. Additionally, the relocation of accessible washrooms to the waiting area will be most beneficial.

The audit did reveal however, several deficiencies in relation to the design criteria, which should be addressed and considered in subsequent phases of the construction project. The following recommendations should allow the design team to correct any significant variations:

1. The placement of grab bars in the washrooms should be modified. A grab bar installed at a 45 degree angle allows for a wide range of grip patterns, varied patron heights and facilitates independent sit to stand transfers. Additionally, flush levers that extend beyond the toilet covers prevent patrons from bending over and helps prevent falls.
2. Consideration should be given to ordering or reassigning appropriately designed seating. Chairs that were ordered do not have arms that extend to the front, and create a large degree of posterior tilt. These features make independent sit to stand transfers more difficult. When ordering chairs in the future, colours at the warm end of the spectrum and plain upholstery fabrics with mild patterns should be considered. Blue tones are difficult to see. Several chairs could be assigned to the alcove and adjacent to the front entrance as an interim solution.
3. Signage near key locations should be perpendicular to the wall for easy identification (i.e. washrooms and triage.) Ideally, signs should be white on dark brown/black or black on a yellow background.

In summary, the audit tool was effective in identifying dimensions in which the ER was successful in the creation of a senior friendly environment, as well as several design variations. Both Betty Methot and Chris Ferguson were receptive to the suggestions made and should be commended for their involvement in the process. They have invited feedback on the next phase in the ER renovation, which shows their commitment to this important project. Chris Ferguson has also suggested that information regarding furniture be shared with Purchasing to aid in future orders both for the ER and the hospital.

The commitment of the Ottawa Hospital to integrate senior friendly design features into the new Emergency Department at the Civic Campus will undoubtedly have a positive effect on both clinical efficiency and patient satisfaction. Ultimately, a majority of patients benefit from senior friendly design features, which is but one component of the corporate accessibility plan for the Ottawa Hospital.

Sincerely



Patricia Barr B.Sc.O.T. Reg.(Ont)
Senior Friendly Hospital Consultant
Regional Geriatric Assessment Program

Enc. Senior Friendly Environment Checklist.



The Regional Geriatric Assessment Program of Ottawa

Senior Friendly Environment Checklist

The Ottawa Hospital ER Civic Campus

LIGHTING	YES	NO	COMMENTS
30-70 foot candles indoor illumination	X		
Natural fluorescents, full spectrum lights	X		
Direct illumination of vertical surfaces	X		
Light focused on signs and wayfinding cues	X		
Glare eliminated (cove lighting, no highly polished surfaces)			
Pooled lighting and shadows avoided	X		
Gradual changes of light coming from outdoors (e.g. awnings, brighter interior lights in entrance ways)	X		
NOISE/SOUND			
Hearing amplifiers available			To be made available as needed
Acoustical ceiling and wall products			Enclosed area to allow for hearing
Reduced number of hard surfaces and "echoes"		X	See above
Minimal ambient noise (radios etc)	X		
DÉCOR			
Colors at warm end of spectrum		X	Colours are in the cool end (blue and pastels)
Colours used to define functional areas (e.g. yellow hallways, green room etc)	X		For the majority of doorways
Color contrast to highlight areas such as doors to assist wayfinding	X		
Same colours on "out of bounds" doorways to reduce unwanted use.	X		
Plain upholstery fabrics with mild patterns (no strong flecks, "vibrational patterns", very dark colours and soft pastels)		X	The upholstery on the chairs were ordered.
Use of mirrors avoided	X		
Pictures on walls are clear and have realistic definition			N/A
ORIENTATION/WAYFINDING			
Large clocks and calendars			
Clear demarcation of different functional areas		X	See notes under signage
Uncluttered hallways to ensure that patients can clearly see their "destination"	X		

SIGNAGE		
Uncluttered with simple message (too much information on one sign avoided)	X	
Strong contrast of print on sign background and sign on wall background		X Signage required near washrooms/intake areas
White on dark brown or black or black on yellow in a busy environment		X The signage suggested to have this colour scheme
Black on white or dark green on white for general use	X	
Matte, non-glare finishes	X	
Simple explanatory graphics	X	
Key locations (e.g. bathroom) with signs perpendicular to the wall for easy identification		X Addressed above
FLOORING		
Quiet cushion flooring with matte, non-slip finish or wax		X Min pattern on floor. Need to minimize wax
If carpet, low pile		
Even colors (no bold patterns that can create visual perception challenges)	X	
Contrast between baseboards and floor border to define floor edge	X	
DOORS		
All wide enough for clearance of wheelchair	X	
Door threshold no more than 1/4" beveled edge	X	
Lever handles	X	
Maximum 8 lbs pull, 14 lbs push force	X	
Automatic door opening mechanisms for main entrances and hall doorways	X	
Seating just inside entrance to allow vision time to adjust	X	to be made available
Wheelchairs available at entrance	X	
Accessible parking	X	Limited spaces
Covered outside entranceway	X	

FUNCTIONAL AREAS		
Visually distinctive doorways	X	
Where applicable - direct sightline from washroom to bed (ex obs unit?)	X	In observation and clinic
Call bells easily activated		
Telephone with volume control and suitable for use with hearing aids		Not addressed
Clear , unimpeded hallways large enough for wheelchair/walker and caregiver in each direction	X	
Seating areas at regular intervals on long hallways	X	
Handrails in hallways - 1.5" diameter with 2" hand clearance - easy grip rounded style	X	
Small quiet waiting area to allow confidential conversation	X	
Full turning radius for wheelchairs and walkers in seating areas	X	
WASHROOMS		
Washroom large enough for wheelchair/walker, caregiver and client	X	
Toilets with minimum of one non-slip grab bar 45 degree at side of toilet		X Grab bars in all washrooms need to be adjusted
Accessible toilet paper dispenser (19" high at side and slightly in front of toilet)	X	Accessible but difficult for elder adult to manage
High toilets available in some areas		Suggest raised toilet seat be available for use
Autoflush or flush lever extending beyond toilet cover		X Not located in all washrooms
Auto on/off sink faucets or lever faucet handles - controlled water temperature	X	Lever
Sinks with open area underneath and pipes insulated	X	
Towel dispense not above sink or counter - minimum 20" forward reach - max 47" from floor	X	located too far from sink. Spills may cause falls.
Easy access to towels or hand dryers	X	Not behind doors. See above

FURNITURE		
Tables sturdy, round corners, matte tops and edges defined with contrasting borders	X	
Available electric adjustable beds - to 18" low available	X	Adjustable to 12"
Overbed tables on glides instead of wheels		X Not applicable
Chairs with seats 18- 19" high, 18-20" deep with firm cushion.	X	However, post tilt prevents getting up easily
Chair arms extend to front chair edge		X
Non-slip, easy clean fabric	X	
Stable, tip free with minimal back recline and backwards seat tilt (lumbar support)		X Posterior tilt prevents ease of transfers
Chair legs able to be fit with blocks to further raise seat height		X
OTHER FACTORS		
Large print for all written materials provided (minimum 14 font) with simple nonserif characters		To be reviewed
Hearing amplifiers available for use by all staff		To be reviewed
Vounteer guides to accompany seniors to their destination instead of relying on verbal directions		To be reviewed