

Hospitalisation : a study investigating the personalisation of sterile domains

PIGOTT, Joanne, SWANN, David, HARGREAVES, Janet and POWER, Jess

Available from Sheffield Hallam University Research Archive (SHURA) at:

http://shura.shu.ac.uk/12435/

This document is the author deposited version. You are advised to consult the publisher's version if you wish to cite from it.

Published version

PIGOTT, Joanne, SWANN, David, HARGREAVES, Janet and POWER, Jess (2013). Hospitalisation : a study investigating the personalisation of sterile domains. In: 2nd European Design4Health Conference 2015, Sheffield, 13th-16th July 2015. (Unpublished)

Repository use policy

Copyright © and Moral Rights for the papers on this site are retained by the individual authors and/or other copyright owners. Users may download and/or print one copy of any article(s) in SHURA to facilitate their private study or for non-commercial research. You may not engage in further distribution of the material or use it for any profit-making activities or any commercial gain.



Hospitalisation: A Study investigating the Personalisation of Sterile Domains.

Joanne Pigott, Dr David Swann, Dr Janet Hargreaves and Dr Jess Power University of Huddersfield, UK

Joanne.pigott@hud.ac.uk

The humble hospital corridor sees human life at its most fragile. Patients, families and NHS professionals can find themselves spending more time in these liminal corridors and makeshift waiting spaces, than in the hospitals 'front stage spaces' such as the treatment, diagnostic and consulting spaces. Taylor denotes "Liminal entities are neither here nor there; they are betwixt and between".

For many people the primary purpose of a corridor is functionality, however in reality this is a complex multi-purpose space, where the array of visual signage and way finding graphics can create a sense of chaos and in some cases make navigation impenetrable to master. These 'non-spaces', highlighted by Auge, can be an assault upon our human senses, with a constant cleaning and sterilisation regime to manage the demands of infection control, noise levels then add to the confusion and discomfort felt in such spaces. Blesser & Salter states, "We can sometimes identify the aural architecture of a space, but far more frequently, aural architecture is the incidental consequence of unrelated sociocultural forces.'

This research poster discusses the work in progress of a PhD by practice that aims to investigate how liminal space interventions can improve the perceived level of wellbeing of NHS patients, utilising temporal personality traits such as voice, scent and shadow.

Research Type: **Qualitative Research Multiple Methods**

- Stakeholders focus groups (KAP)
- · Participatory Action Research (PAR)
- Observation
- · Qualitative questionnaire with patient groups, NHS professionals and estates

Research Motivation:

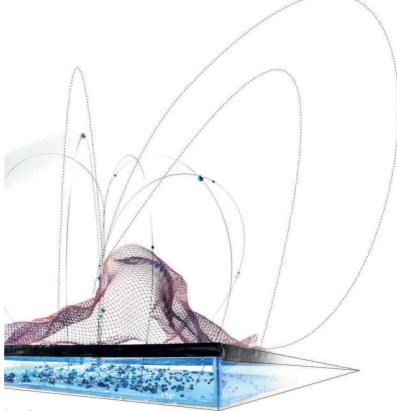
Exploratory

- · To understand what is happening within the hospital corridor environment
- · To seek new and developed insights
- To assess phenomena in a new light • To generate ideas and hypotheses for future research

References Auge, M. (1995) Non_Spaces: An Introduction To Supermodernity, 2nd ed. Lond Verso (2008) Blesser, B., Salter, L-R. (2007) Spaces Speak, are you listening? – experiencing aural architecture, Cambridge: The MIT Press Turner, V. (1967) The Forest of Symbols: Aspects of Ndembu Ritual, Ithaca, New York and London: Cornell University Press (1970)



Difference & Repetition



Spatial Resonance



Fragmented Textures



Sonic Model



Intersected Motion



Sonic Context

