

EAT-ACUTE CARE

Date: Time: Hospital:

Ward (name and type): No. of patients:

Unusual circumstances at time of visit:

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Observer:

1	UNOBTRUSIVELY REDUCE RISKS	N/A	NO	YES	ADD 1 IF UNOBTRUSIVE	SCORE
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Inside

1.1	Can the entry to the ward be secured?		0	1	1	
1.2	Can all side doors leading out of the ward be secured? (This does not refer to side doors leading to a secure outside area. (N/A = no side doors)	0	0	1	1	
1.3	Can people be prevented from climbing in or out of windows when they are open? (N/A = windows non-openable)	0	0	1	1	
1.4	Is lighting at the patient's bed adjustable (e.g. choice of light source, adjustable direction or dimmable)?		0	1		
1.5	Is there dimmable or night lighting in the patient's ensuite/toilet?		0	1		
1.6	Does the lighting in a typical patient's ensuite provide bright, even lighting when using the toilet, shower and/or basin? (N/A = no ensuite)	0	0	1		
1.7	Does the lighting in the shared bathroom provide bright, even lighting when using the toilet, shower and/or basin? (N/A = no shared bathroom)	0	0	1		
1.8	Are corridors free of trip hazards and obstructions?		0	1		
1.9	Are patient rooms free of clutter, trip hazards and obstructions?		0	1		
1.10	Inside, is contrast between floor surfaces at the thresholds of rooms avoided?		0	1		
1.11	Inside, is contrast within floor surfaces (eg patterns and/or features) avoided?		0	1		
1.12	Inside, is glare from artificial lighting minimised?		0	1		

1	UNOBTRUSIVELY REDUCE RISKS	N/A	NO	YES	ADD 1 IF UNOBTRUSIVE	SCORE
Outside (Answer with reference to the most used outside area)						
1.13	Is glare from natural and artificial lighting minimised? (N/A = no outside area)	0	0	1		
1.14	Is there step free access to all areas? (N/A = no outside area)	0	0	1		
1.15	Is contrast between path surfaces avoided? (N/A = no outside area)	0	0	1		
1.16	Are path surfaces even? (N/A = no outside area)	0	0	1		
1.17	Are paths clear of obstacles (e.g. trees, thorny plants) along and over the path? (N/A = no outside area)	0	0	1		
1.18	Can patients be prevented from leaving the outside area by getting over/under the perimeter? (N/A = no outside area)	0	0	1	1	
1.19	Can patients be prevented from leaving the outside area through a gate (e.g. could the gate be locked if required)? (N/A = no outside area)	0	0	1	1	
1.20	On the whole, how well do you think this ward responds to the principle of 'Unobtrusively reduce risks'? 1 = not at all well, 5 = extremely well	Circle one option 1 2 3 4 5				
SCORE						

2	PROVIDE A HUMAN SCALE	N/A	NO	YES	SCORE
Scale of the ward					
2.1	Does the length of the corridor(s) allow a person to feel comfortable (and not uneasy because it is/they are too long)? (Answer with reference to typical ward corridor)		0	1	
2.2	Is furniture in place to sit arranged so people can sit on their own or in small groups? (Answer with reference to place to sit most used by patients) (N/A = no place to sit)	0	0	1	
2.3	Are a variety of colours, finishes and materials used in the ward?		0	1	
2.4	On the whole, how well do you think this ward responds to the principle of 'Provide a human scale'? 1 = not at all well 5 = extremely well	Circle one option 1 2 3 4 5			
SCORE					

3	ALLOW PEOPLE TO SEE AND BE SEEN	0-25%	26-50%	51-75%	76-100%	SCORE
3.1	What proportion of patients can see the toilet pan, toilet door, or a commode from their bed?	0	1	2	3	
3.2	What proportion of patients can see a staff base as soon as they leave their room?	0	1	2	3	
3.3	What proportion of patients can see the entry to their room from the corridor? <i>(Entry includes door, architrave or other feature specific to a particular patient's room)</i>	0	1	2	3	
3.4	What proportion of patients can see their bed from the entry to their room? <i>(Assume curtains at bed bays are open)</i>	0	1	2	3	
3.5	What proportion of patients can see a place to sit as soon as they leave their room? <i>(A place to sit may not be a separate room)</i>	0	1	2	3	
		N/A	NO	YES		SCORE
3.6	Can a toilet door be clearly seen from the most used place to sit? <i>(N/A = no place to sit)</i>	0	0	1		
3.7	Can the exit to an outside area be clearly seen from the most used place to sit? <i>(Answer with reference to the most used outside area)</i> <i>(N/A = no place to sit or no outside area)</i>	0	0	1		
3.8	Can the place to sit be clearly seen from where staff spend most of their time (such as the staff base)? <i>(Answer with reference to the most used place to sit)</i> <i>(N/A = no place to sit)</i>	0	0	1		
3.9	Can an outside area be clearly seen from where staff spend most of their time? <i>(Answer with reference to the most used outside area)</i> <i>(N/A = no outside area)</i>	0	0	1		
3.10	Can the door back into the ward be clearly seen from an outside area? <i>(Answer with reference to the most used outside area)</i> <i>(N/A= no outside area)</i>	0	0	1		
3.11	Can the exit to an outside area be clearly seen from a corridor? <i>(Answer with reference to the most used outside area)</i> <i>(N/A= no outside area)</i>	0	0	1		
3.12	Can a kitchenette be clearly seen from a corridor? <i>(N/A= no kitchenette)</i>	0	0	1		
3.13	Can a toilet be clearly seen from a corridor?		0	1		
3.14	On the whole, how well do you think this ward responds to the principle of 'Allow people to see and be seen'? <i>1 = not at all well, 5 = extremely well</i>	Circle one option 1 2 3 4 5				
						SCORE

4	REDUCE UNHELPFUL STIMULATION	N/A	NO	YES	SCORE
4.1	Is there a public address, staff paging or call system with bells, audible medical equipment, loud speakers or flashing lights in use?		1	0	
4.2	Does the noise from closing doors disturb patients (e.g. flapping doors, noisy automatic doors)?		1	0	
4.3	Is the impact of noise limited in patient areas (e.g. deliveries, lifts, plant, door entry systems are not heard)?		0	1	
4.4	Are unnecessary sources of noise such as TV's radios, audible medical equipment turned off or minimised?		0	1	
4.5	Are there designated quiet times (which staff as well as visitors must observe?)		0	1	
4.6	Can the transfer of sound from one room to another be managed (eg by closing doors)?		0	1	
4.7	Are single rooms available that have little exposure to staff operational noise?		0	1	
4.8	Is there a lot of visual clutter in the ward (ie staff notices, signage, objects, furniture that are either irrelevant to patients &/or make it hard for them to interpret their environment)?		1	0	
4.9	Is the entry to the ward easily visible to patients?		1	0	
4.10	Are doors to staff only areas easily seen (e.g. storerooms, clean and soiled utility rooms)?		1	0	
4.11	Inside, can glare from natural light be managed by using curtains and blinds?		0	1	
4.12	Are light fittings positioned so that they shine directly into a patient's eyes when they are lying on the bed?		1	0	
4.13	At night, is task lighting provided which enables staff to see to perform tasks without a) increasing overall lighting level in patient room & b) light shining directly into patient's eyes?		0	1	
4.14	At night, can light from the corridor be prevented from entering a patient's room?		0	1	
4.15	On the whole, how well do you think this ward responds to the principle of 'Managing levels of stimulation - reduce unhelpful stimulation? 1 = not at all well 5 = extremely well	Circle one option 1 2 3 4 5			
					SCORE

5	OPTIMISE HELPFUL STIMULATION	N/A	NO	YES	SCORE
Inside					
5.1	Are signs easy to see, read and understand?		No 0	Yes 1	
5.2	What percentage of patients have a clearly defined path from their room to a place to sit (e.g. by using colour, objects and/or signage)? (N/A= no place to sit)	0	0-25% 0 26-50% 1	51-75% 2 76-100% 3	
5.3	Is a place to sit clearly recognisable from the corridor? (N/A = no place to sit)	0	No 0	Yes 1	
5.4	Are different corridors clearly recognisable so patients can identify where they are (eg variety of materials, appropriate signage, colour)? (NA - only one corridor)	0	No 0	Yes 1	
5.5	Is colour, artwork or appropriate signage used to differentiate patient rooms?		No 0	Yes 1	
5.6	Is colour, artworks or appropriate signage used to differentiate patient bed bays?		No 0	Yes 1	
5.7	Can patients see their personal items (eg photos, pictures, objects) when in bed? (N/A = no personal items)	0	No 0	Yes 1	
5.8	Can most patients see out of a window from their bed? (Assume curtains at bed bays are open)		No 0	Yes 1	
5.9	Are ensuite/shared bathroom/toilet doors clearly marked with an appropriate sign and contrast? (N/A = no ensuite, shared bathroom or toilet)	0	No 0	Yes 1	
5.10	In a typical patient room can most patients see the toilet pan, toilet door, or a commode from their bed when lying down?		No 0	Yes 1	
5.11	Is contrast used to help people see key features in shared bathrooms (including taps, basin, rails and toilet)? (N/A = no shared bathroom)	0	No 0	Yes 1	
5.12	Is contrast used to help people see key features in the ensuite (including taps, basin, rails and toilet)? (N/A = no ensuite)	0	No 0	Yes 1	
5.13	Do the toilet seats (commode/over toilet seats) contrast with the floor and/or wall?		No 0	Yes 1	
5.14	Are olfactory cues (such as food smells and familiar toiletry products) used to provide a variety of experiences for a patient?		No 0	Yes 1	
5.15	Are there auditory cues to provide a variety of experiences for a patient?		No 0	Yes 1	
5.16	Is there an attractive view to outside from the place to sit for a person when seated or lying down? (does not include patient's room) (N/A = no place to sit)	0	No 0	Yes 1	

5	OPTIMISE HELPFUL STIMULATION	N/A	NO	YES	SCORE
5.17	Is the ward reception/staff base easily identifiable?		No 0	Yes 1	
5.18	In a typical patient room, can you (the observer) read this easily without the use of artificial light from each bed location?		No 0	Yes 1	
5.19	In a typical corridor, can you (the observer) read this easily without the use of artificial light?		No 0	Yes 1	
5.20	In the most used place to sit, can you (the observer) read this easily without the use of artificial light? (N/A = no place to sit)	0	No 0	Yes 1	
5.21	Are a variety of materials and finishes used to create an interesting and varied environment for a patient?		No 0	Yes 1	
Outside (Answer with reference to the most used outside area)					
5.22	Are contrasting materials used so that the edges of surfaces and objects can be easily seen (e.g clear distinction of path edge, between seats and paving)? (N/A = no outside area)	0	No 0	Yes 1	
5.23	Are olfactory cues (such as perfumed plants) used to provide a variety of experiences for a patient? (N/A = no outside area)	0	No 0	Yes 1	
5.24	Are there auditory cues to provide a variety of experiences for a patient? (N/A = no outside area)	0	No 0	Yes 1	
5.25	Are a variety of materials and finishes used to create an interesting and varied external environment for a patient? (N/A = no outside area)	0	No 0	Yes 1	
5.26	On the whole, how well do you think this ward responds to the principle of 'Managing levels of stimulation – optimise helpful stimulation? 1 = not at all well, 5 = extremely well	Circle one option 1 2 3 4 5			
					SCORE

6	SUPPORT MOVEMENT AND ENGAGEMENT	N/A	NO	YES	SCORE
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Inside

6.1	Is there a clearly defined and easily accessible path that guides the patient back to their starting point without taking them into a blind alley or to a locked door?		0	1	
6.2	Can patients clearly see opportunities for meaningful engagement (either actively or passively)?		0	1	

Outside *(Answer with reference to the most used outside area)*

6.3	Is there a clearly defined and easily accessible path that guides the patient back to their starting point without taking them into a blind alley or to a locked door? <i>(N/A = no outside area)</i>	0	0	1	
6.4	Can patients clearly see opportunities for meaningful engagement (either actively or passively)? <i>(N/A = no outside area)</i>	0	0	1	
6.5	Are there chairs or benches at frequent intervals so people can sit and enjoy the fresh air? <i>(N/A = no outside area)</i>	0	0	1	
6.6	Are there both sunny and shady areas along the path? <i>(N/A = no outside area)</i>	0	0	1	
6.7	Are there verandahs or shaded seating areas in close proximity to the building? <i>(N/A = no outside area)</i>	0	0	1	
6.8	On the whole, how well do you think this ward responds to the principle of 'Support movement and engagement'? <i>1 = not at all well, 5 = extremely well</i>	Circle one option 1 2 3 4 5			
					SCORE

SCORE

8.1	Are there places where a person can sit on their own or in private conversation away from their bed?	NO Score 0	1 Score 1	2 or more Score 2	
8.2	Are there places (not in a patient's room) where a small group of people can gather?	NO Score 0	1 Score 1	2 Score 2	3 or more Score 3
8.3	Can a family member/support person sit with the patient at their bedside?		NO Score 0	YES Score 1	

8.4	Are there places where a person can be on their own and/or in private conversation? <i>(N/A = no outside area)</i>	0	NO Score 0	1 Score 1	2 or more Score 2	
8.5	Are there places where a small group of people can gather? <i>(N/A = no outside area)</i>	0	NO Score 0	1 Score 1	2 or more Score 2	
8.6	On the whole, how well do you think this ward responds to the principle of 'Provide a variety of places to be alone or with others - in the ward'? <i>1 = not at all well</i> <i>5 = extremely well</i>	Circle one option 1 2 3 4 5				
						SCORE

9 LINK TO THE COMMUNITY			SCORE
9.1	Is it possible for a family member/support person to stay with a patient during the night? (Answer with reference to typical patient room)	NO Score 0	YES Score 1
9.2	Is there a place where families and friends can share meals and/or celebrations with their relatives/friends who are patients (e.g. café, garden)?	NO Score 0	YES Score 1
9.3	On the whole, how well do you think this ward responds to the principle of 'Provide a variety of places to be alone or with others - in the hospital'? 1 = not at all well 5 = extremely well	Circle one option 1 2 3 4 5	
			SCORE

10 DESIGN IN RESPONSE TO VISION FOR WAY OF LIFE			
10.1	What is the vision of the ward? To provide: a. a homelike environment b. a hotel like environment with hotel like services c. a medical care facility d. a salutogenic environment e. other (Ask the manager or their representative for their view)	Circle one option a b c d e	
10.2	How well does the built environment enable this to happen? (Ask the manager or their representative for their view) 1 = not at all well 5 = extremely well	Circle one option 1 2 3 4 5	
10.3	How well could the built environment enable this to happen? (Ask the manager or their representative for their view) 1 = not at all well 5 = extremely well	Circle one option 1 2 3 4 5	
			SCORE

EAT-ACUTE CARE – SUPPLEMENTARY QUESTIONS

Here are some additional questions you may wish to consider.

These are questions that did not meet measurement requirements for inclusion in the EAT-Acute Care, but may nonetheless be useful for consultation purposes.

2	PROVIDE A HUMAN SCALE				
	Scale of building	N/A	NO	YES	SCORE
2.a	Does the entry to the ward allow a person to feel comfortable (and not uneasy because the spaces are too big or too small)?		0	1	
2.b	Do places to sit allow a person to feel comfortable (and not uneasy because the spaces are too big or too small)? (Answer with reference to place to sit most used by patients. This does not include the patient's bedside.) (N/A = no place to sit)	0	0	1	

4	REDUCE UNHELPFUL STIMULATION				
		N/A	NO	YES	SCORE
4.a	Is the service entry (where food, linen etc is delivered) easily visible to patients? (N/A = no service entry)	1	1	0	
4.b	Is the wardrobe (or cupboard) that the patient uses full of a confusing number of clothes and/or irrelevant objects? (N/A = no wardrobe)	1	1	0	

7	CREATE A FAMILIAR PLACE					
		N/A	NONE	A FEW	MANY	SCORE
7.a	Are the colours or decorations in the patient's room warm and welcoming? (Answer with reference to a typical room)		0	1	2	
7.b	Do the colours or decorations in the most used place to sit provide a warm and welcoming space to sit? (N/A = no place to sit)	0	0	1	2	

9	LINK TO THE COMMUNITY	N/A	NO	YES	SCORE
9.a	Is there easy access to places which encourage interaction and engagement with the wider community (e.g. cafes, gardens)?		0	1	
9.b	Is there an easily accessible place where families and friends can feel comfortable while taking a break from visiting (eg when visiting a very sick person)?		0	1	
MAXIMUM SCORE					