Future Plans

- Explore different personality types and communication styles within the team.
- Explore systems and working patterns that impact upon capacity.
- Develop a community map of the services that the team work with to show dependant relationships or those that need to develop or be influenced.

Conclusion The project has been well received by the team with members engaging and communicating more effectively with each other. It has highlighted the need to engage individuals and the whole team to enjoy a joint sense of purpose and pride in the service they collectively deliver.

P-272   **STAY LEAN GO GREEN**

Mark Palmer, Steve McClure. *Farleigh Hospice, Chelmsford, UK*

The Go Green working group, led by a 'LEAN' Adviser, was established to develop and deliver projects using 'LEAN' techniques to support environmentally friendly practices across the hospice. As part of the NHS Contract we are required to evidence environmentally friendly practices especially carbon reduction. Staff and volunteers from across the hospice who were interested to take these ideas forward formed the Go Green group.

The first work stream was to raise awareness around energy costs. Graphs showing gas and electricity costs were posted on notice boards quarterly and an article put in the Little Lantern, the hospice's staff and volunteer newsletter. This also included handy reminders on how to save money such as turning off lights, closing windows, shutting down computers.

The group then focused on waste management. Each year the hospice spends over £35,000 on refuse collection as a mixture of general and recycled waste. A recycle bin costs less than half to be emptied than a general waste bin. The aim was to not only save money but to reduce the environmental impact of the hospice by encouraging re-cycling and sending less waste to landfill.

The campaign started with the 'Big Clearout' day with staff being encouraged to clear out offices, cupboards and computers. Unwanted items were offered up for reuse, documents shredded, battery recycling introduced. Recycling points were set up to encourage segregation of waste, waste bins were removed from many areas. Clinical staff received special training in segregation of clinical waste. To date the hospice has made a saving of over £1,300 by recycling and reducing waste to landfill and plans to save even more in the coming year. The group meet regularly with information being fed back to Heads of Department meetings. They aim is to work toward BS8555 Environmental Management Systems accreditation.

P-273   **INTERIOR DESIGN CREATING AN INNOVATIVE, CARING AND WELCOMING APPROACH WHILST MEETING PATIENT NEEDS**

Paul Munyard, Nicci Williamson. *Douglas Macmillan Hospice, Stoke on Trent, UK*

Quite often buildings are designed by architects to meet the needs of the person paying their invoice and design something that will add to their professional portfolio but often don't speak to the end service users. This is no fault of the architect as they have the customer at mind i.e. Douglas Macmillan Hospice and the hospice have the patient at mind. To ensure the interior design was patient centred, we consulted with them through our patient's forum and asked them what they wanted. The response was "LOTS OF LIGHT".

The building design reflected this BUT what where we going to do internally? It was at this point we wanted patients and staff to be involved in doing something different to complement patient needs and to meet the staff needs. It also needed to meet dementia, equality and clinical standards as well as creating a warm and welcoming environment following the theme lots of light! With a variety of large and small spaces we looked at how we could use colours to do this. We looked at how the colours differ in daylight and artificial lighting atmospheres to create a warm glow. We avoided reds, yellows and oranges that represent blood or make a patient look more jaundiced. We decided on a common base colour for walls and flooring and then created a palette of colours to choose from to add individualistic flair. We chose a bold warm colour for woodwork to assist with distinguishing these from a disability point of view along with a non-clinical navigational Stripe to flooring. On the ground floor we decided to make a feature of the furniture in the same palate of colours chosen to provide a modern homely feel whilst ensuring the furniture didn't look clinical but provided hidden support where needed.

P-274   **DESIGNING WITH CARE: HOSPICE DESIGN SINCE 1980**

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We are a firm of architects with over 30 years of ongoing, developmental and iterative experience in the field of hospice design; throughout this time we have worked on over 40 hospice projects. Our work in this area began in 1980 when our founder won a competition to design a hospice in Newcastle-upon-Tyne, marking the start of an exciting architectural journey working with many hospices across the UK and Ireland that continues to this day.

Each of our hospice buildings provides a rich case study for post-occupancy evaluations, and to that end we are currently undertaking research aimed at tracking the development of hospice design since 1980 and obtaining guidance on how hospice requirements are likely to change over the coming years. To do this we are visiting twelve of our most significant hospice buildings and speaking to key stakeholders to gain a thorough understanding of:

- What worked and what didn't over this range of projects?
- What themes emerge as key factors in determining the success of a hospice building?
- How has the ethos of our practice influenced the outcomes of these projects?
- How could future hospice design respond to the changing political, demographic, social and regulatory context of healthcare design in the UK?