




## Ten Principles for Better Behavioral Health Outcomes

Behavioral health facilities have historically elevated the need for safety above the comfort of patients. Yet research shows that a calming, homelike setting with access to nature helps patients regulate emotions and, in some cases, take little or no medication. Here are ten design principles NBBJ used to balance patient and safety needs when creating more therapeutic environments.

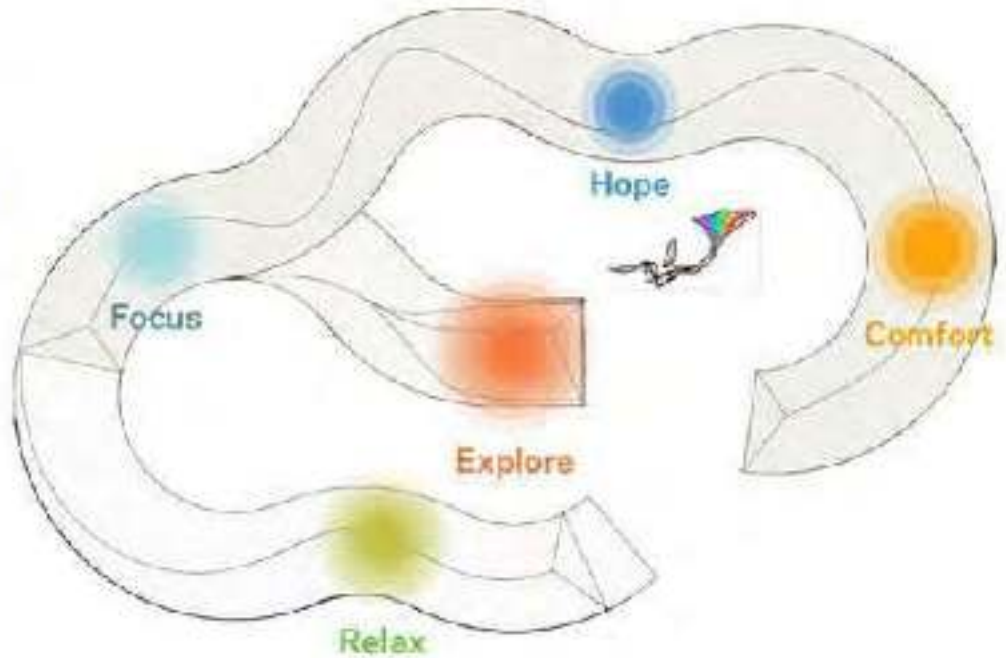
1. Design with nature.
2. Help patients feel at home.
3. Allow a sense of control.
4. Reduce stress with quiet.
5. Make care more accessible.
6. Ensure patient privacy.
7. Provide positive distractions.
8. Offer spaces for respite.
9. Prioritize safety ...
10. ... but soft doesn't have to mean institutional.



**NBBJ Fellowship Cognitive Neuroscience**  
Dr. John Medina

- Dr. John Medina is a developmental biologist at the University of Washington School of Medicine and a New York Times bestselling author.
- He studies human brain development and the genetics of psychiatric disorders.
- NBBJ + Dr. Medina have developed design concepts & tools backed by science to create built environments for healing & wellbeing.

# Emotional Embrace



# Innovation - New Paradigm of Care

**Outpatient Clinic**

Name Chad  
AGE 8



**ABOUT THE FAMILY:** Chad lives with Mom, Dad, 3 brothers, and 2 sisters. Dad is an 8th grade teacher and mom is a software engineer. Grandmother just moved into the home after Grandfather had a sudden stroke and died.

**CHAD'S STORY:** I am a shy, smart, thoughtful boy. I get nervous around new school usually.

**MY GOALS:** He is doing the program because his parents want him to. He wishes he didn't get so scared at school and get in trouble for walking his nervous out.

**MY CONCERNS:** I am only concerned about his tummy and I'm sure this is going to help that.

**MY FUTURE GOALS:** His family wants him to live better. They also want him to have a family to get more sleep.

**MY FUTURE CONCERNS:** They are worried because Chad is out of the time and they are unsure how to help him.

**CURRENT & THE MEDICAL ISSUES:**

- 1. He has somatic complaints of abdominal pain
- 2. He stopped going to school 2 months ago and has been staying home with grandparents.
- 3. He had a medical work-up for the pain that was negative
- 4. He seems very shut down
- 5. His pediatrician referred him to clinic

## Chad's Outpatient Clinic Visit



- 1. Chad is at school in morning
- 2. Hospital visit
- 3. Home
- 4. Chad is at hospital in evening
- 5. Chad is at home in morning

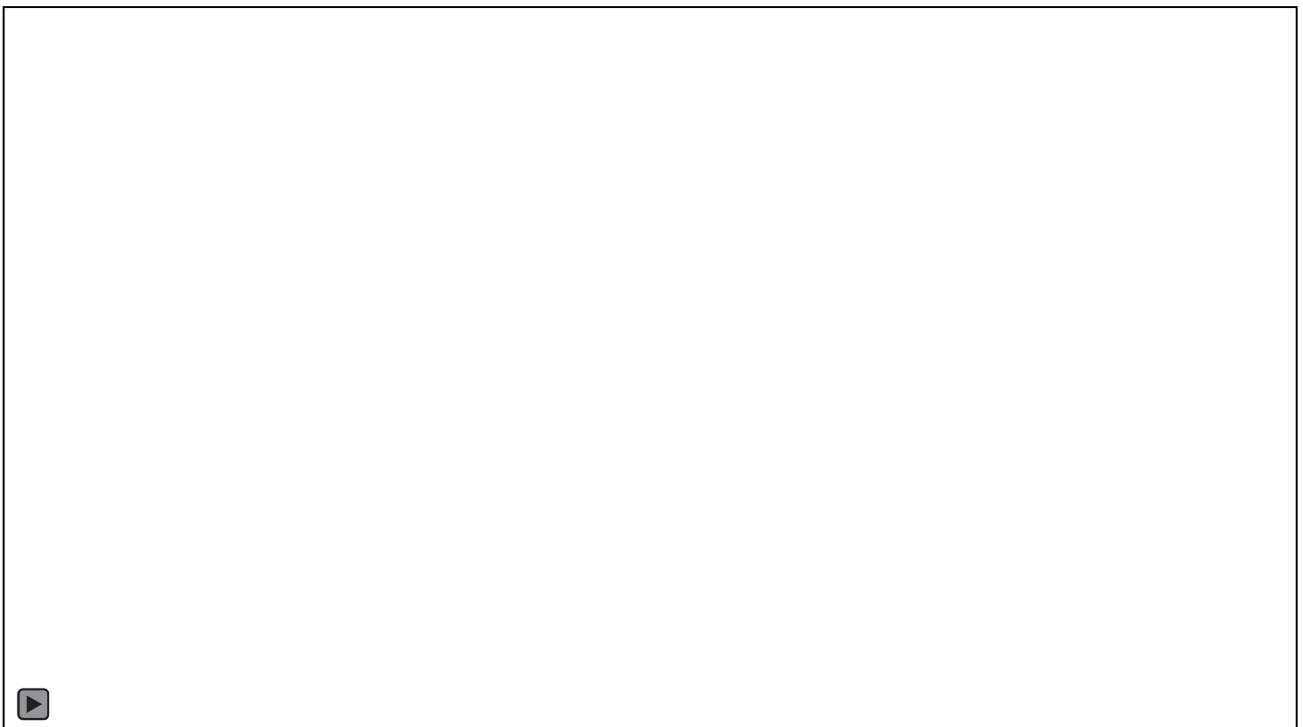








## Distraction!



# Mobility / Flexibility / Control



# Care for the Caregiver



## Arousal fatigue + Global Pandemic = Sympathetic Nerve Response Overload

Our minds need at least a 10-minute rest every 90 minutes from focused activities. After 10 minutes, we will see changes in the parasympathetic nerve response to calm the body, mind and heart. The cycle is called the Ultradian rhythm. After 90 minutes without a break, we move to the fight or flight physiological state. This is when staff are at most risk for errors and misjudgment in the delivery of care.

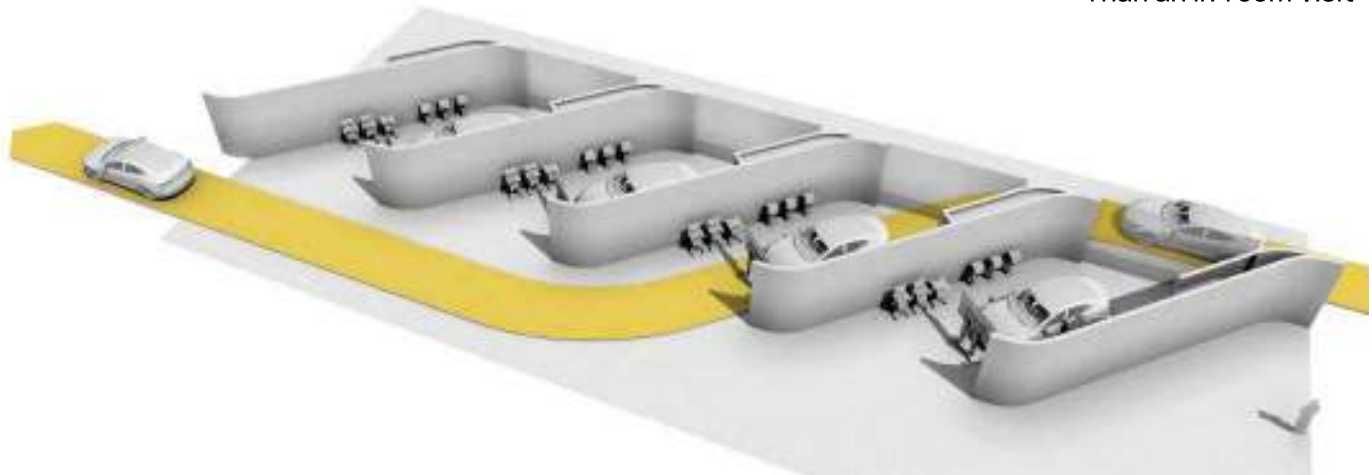
How can hospital staff make the most of their 10+ minutes of rest time to recharge?



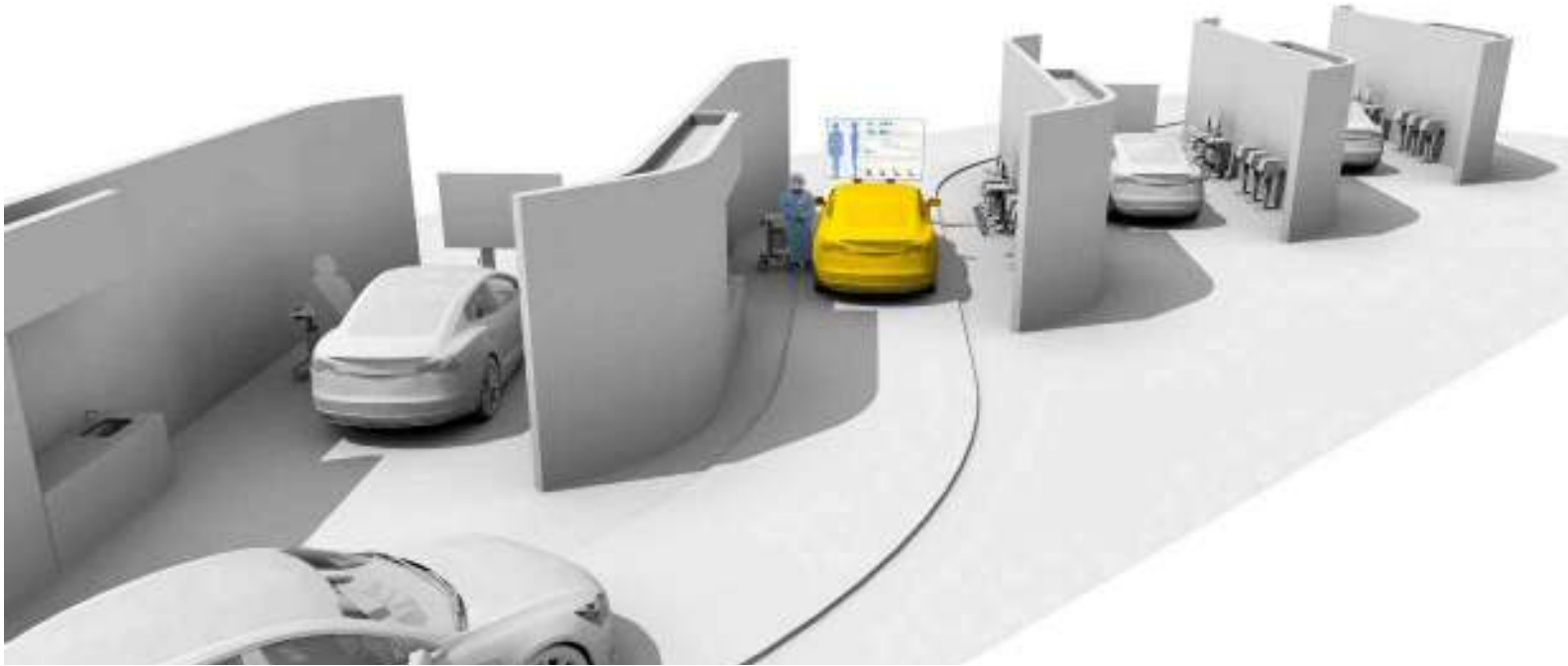
# A Proposal for In-Car Care



# A Proposal for In-Car Care



## A Proposal for In-Car Care



*In every setting,  
In every clinic,  
In every hospital,  
In every country.*

*Nurses Have Design Impact!*

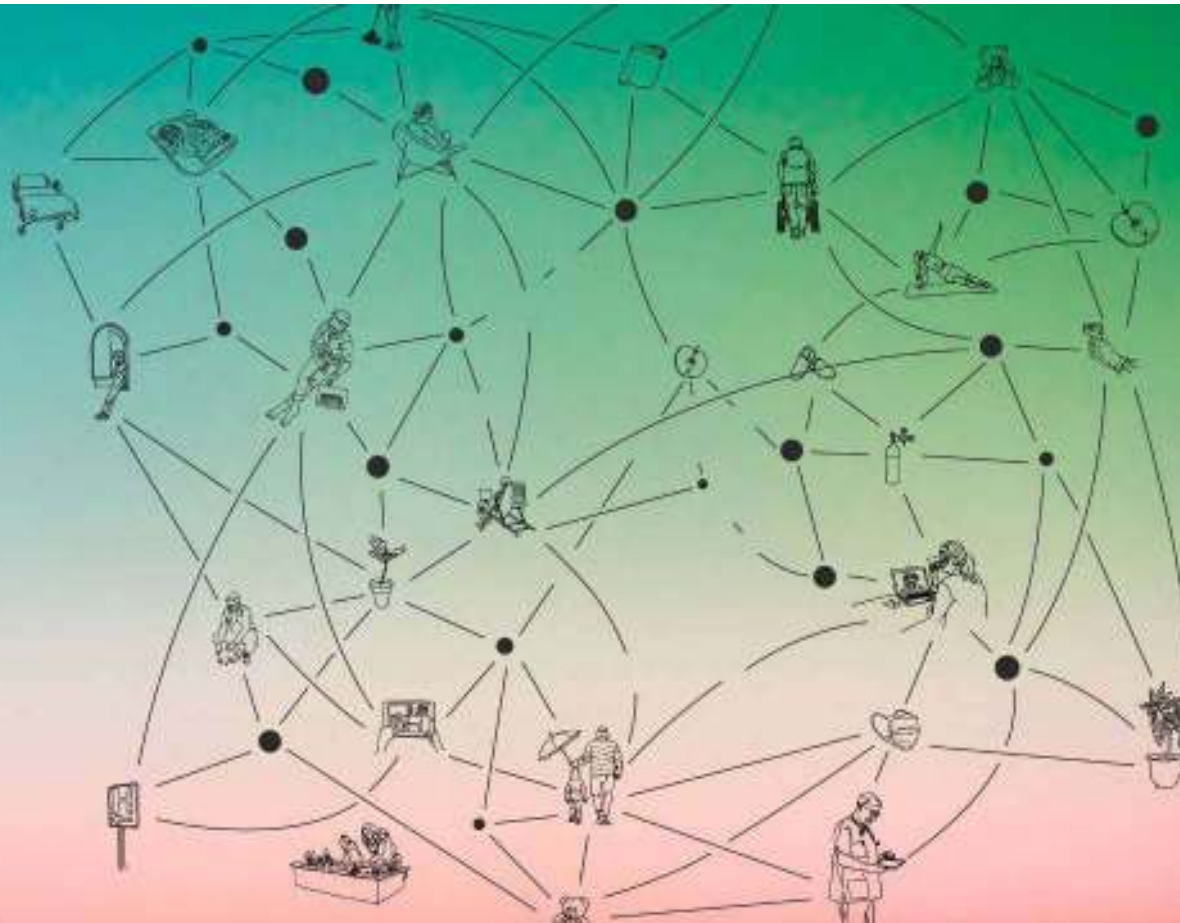


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# 05 Questions



Thank You



**nbbj**