

COMPONENTS OF THE UNIT

Planning

90.1.00 This section describes a range of standard rooms that fulfil the same or similar purpose across many Health Planning Units. Key planning considerations only are addressed for each.

For more detail in regard to finishes, recommended dimensions, equipment and building service requirements including data, power and lighting refer to the Room Data Sheets (RDS), Room Layout Sheets (RLS) for each room, Part E of these Guidelines and to TS11 Engineering Services and Sustainable Development Guideline.

Floor areas given are recommended spatial allocations, and increases or decreases must be justified.

It is the responsibility of the designer to work with the recommended spatial allocations in planning the Facility.

Where recommended dimensions of rooms are considered essential, they have been included and shown on RLS.

Rooms List

90.2.00

| ROOM NAME | Area M2 | Room Data Sheet Code | Room Layout Sheet Dwg |
|---|---------|----------------------|-----------------------|
| 1 BED ROOM (INBOARD ENSUITE) | 15 | 1BR-ST | 1BR-ST-A |
| 1 BED ROOM (OUTBOARD ENSUITE) | 15 | 1BR-ST | 1BR-ST-B |
| 1 BED ROOM (SHARED ENSUITE) | 15 | 1BR-ST | 1BR-ST-A |
| 1 BED ROOM - ISOLATION (NEGATIVE) | 15 | 1BR-IS-N | 1BR-IS-N |
| 1 BED ROOM - ISOLATION (POSITIVE) | 15 | 1BR-IS-P | 1BR-IS-P |
| 1 BED ROOM - ISOLATION (STANDARD) | 15 | 1BRI-S | 1BRI-S |
| 1 BED ROOM - MENTAL HEALTH (INBOARD) | 15 | 1BR-MH | 1BR-MH-A |
| 1 BED ROOM - MENTAL HEALTH (SHARED) | 15 | 1BR-MH | 1BR-MH-B |
| 1 BED ROOM - MENTAL HEALTH (BACK TO) | 15 | 1BR-MH | 1BR-MH-C |
| 1 BED ROOM - SPECIAL | 18 | 1BR-SP-A | 1BR-SP-A |
| 2 BED ROOM (INBOARD ENSUITE) | 25 | 2BR-ST | 2BR-ST-A |
| 2 BED ROOM (OUTBOARD ENSUITE) | 25 | 2BR-ST | 2BR-ST-B |
| 2 BED ROOM (SHARED ENSUITE) | 25 | 2BR-ST | 2BR-ST-C |
| 2 BED ROOM - MENTAL HEALTH (INBOARD) | 28 | 2BR-MH | 2BR-MH-A |
| 2 BED ROOM - MENTAL HEALTH (SHARED) | 28 | 2BR-MH | 2BR-MH-B |
| 2 BED ROOM - MENTAL HEALTH (BACK TO) | 28 | 2BR-MH | 2BR-MH-D |
| 4 BED ROOM (INBOARD ENSUITE) | 42 | 4BR-ST | 4BR-ST-A |
| 4 BED ROOM (OUTBOARD ENSUITE) | 42 | 4BR-ST | 4BR-ST-B |
| ADL BATHROOM | 12 | ADLB | ADLB |

Part B - Health Facility Briefing and Planning

| | | | |
|--|--------|----------|----------|
| ADL BEDROOM | 15 | ADLBR | ADLBR |
| ADL DINING | 6 | ADLD | ADLD |
| ADL KITCHEN – OPEN BAY, | 12 | ADLK-OP | ADLK-OP |
| ADL KITCHEN – ROOM, 12M2 | 12 | ADLK-ENC | ADLK-ENC |
| ADL LAUNDRY | 8 | ADLL | ADLL |
| AFTER HOURS DRUG STORE | 4 | AHDR | AHDR |
| ANAESTHETIC INDUCTION ROOM | 15 | ANIN | ANIN |
| ANGIOGRAPHY CONTROL/REPORTING | 14 | ANCRT | ANCRT |
| ANGIOGRAPHY PROCEDURE ROOM | 42 | ANPR | ANPR |
| ANGIOGRAPHY STERILE STORE/SET-UP | 10 | ANSS | ANSS |
| ANTE - ROOM | 8 | ANRM | ANRM |
| ASSEMBLY/PREPARATION (PHARMACY), 20M2 | 20 | ASSP-20 | ASSP-20 |
| ASSEMBLY/PREPARATION (PHARMACY), 30M2 | 30 | ASSP-30 | ASSP-30 |
| AUDIOLOGY TESTING ROOM | 10 | AUDIO | AUDIO |
| BATHROOM | 10, 12 | BATH | BATH |
| BAY – BEVERAGE, ENCLOSED | 4 | BBEV-ENC | BBEV-ENC |
| BAY – BEVERAGE, OPEN | 4 | BBEV-OP | BBEV-OP |
| BAY – BLANKET/FLUID WARMER | 1 | BBW | BBW |
| BAY – FLOWERS, ENCLOSED | 5 | BFLW-ENC | BFLW-ENC |
| BAY - FLOWERS, OPEN | 2 | BFLW-OP | BFLW-OP |
| BAY – HANDWASHING, TYPE A | 1 | BHWS-A | BHWS-A |
| BAY – HANDWASHING, TYPE B | 1 | BHWS-B | BHWS-B |
| BAY – HANDWASHING, TYPE C | 1 | BHWS-C | BHWS-C |
| BAY - LINEN | 2 | BLIN | BLIN |
| BAY - MOBILE EQUIPMENT, 4M2 | 4 | BMEQ-4 | BMEQ-4 |
| BAY - MOBILE EQUIPMENT, 6M2 | 6 | BMEQ-6 | BMEQ-6 |
| BAY - PERSONAL PROTECTIVE EQUIPMENT | 2 | BPPE | BPPE |
| BAY - RESUSCITATION TROLLEY | 2 | BRES | BRES |
| BAY _ WHEELCHAIR PARK | 4 | BWC | BWC |
| BIRTHING ROOM – LDR, | 28 | BIRM | BIRM |
| CHANGE – STAFF (MALE/ FEMALE) | 10 | CHST-10 | CHST-10 |
| CHANGE – STAFF (MALE/FEMALE), 35M2 | 35 | CHST-35 | CHST-35 |
| CHANGE CUBICLE - PATIENT | 2 | CHPT | CHPT |
| CHANGE CUBICLE - DISABLED | 4 | CHPT-D | CHPT-D |
| CLEAN UTILITY, 12M2 | 12, 14 | CLUR-12 | CLUR-12 |
| CLEANER'S ROOM | 5 | CLRM | CLRM |
| CLEAN-UP ROOM – SHARED, 12M2 | 15 | CLUP-12 | CLUP-12 |

Part B - Health Facility Briefing and Planning

| | | | |
|---|----|-----------|-----------|
| CONSULT ROOM | 12 | CONS | CONS |
| CT SCANNER – CONTROL ROOM | 6 | CTCR | CTCR |
| CT SCANNER – PROCEDURE ROOM | 45 | CTPR | CTPR |
| DARK ROOM | 6 | DARK | DARK |
| DAYLIGHT PROCESSING | 16 | DPRO | DPRO |
| DIRTY UTILITY – 10M2 | 10 | DTUR-10 | DTUR-10 |
| DIRTY UTILITY – SUB | 8 | DTUR-S | DTUR-S |
| DIRTY UTILITY, 12M2 | 12 | DTUR-12 | DTUR-12 |
| DISPOSAL ROOM, 8M2 | 8 | DISP-8 | DISP-8 |
| ENSUITE (INBOARD) | 5 | ENS-ST | ENS-ST-A |
| ENSUITE (OUTBOARD) | 5 | ENS-ST | ENS-ST-B |
| ENSUITE (SHARED) | 6 | ENS-SH | ENS-SH |
| ENSUITE (SPECIAL) | 7 | ENS-SP | ENS-SP-A |
| ENSUITE – BIRTHING ROOM | 10 | ENS-BR-A | ENS-BR-A |
| ENSUITE – BIRTHING ROOM (ALTERNATIVE) | 5 | ENS-BR-B | ENS-BR-B |
| ENSUITE - MENTAL HEALTH (INBOARD) | 5 | ENS-MH | ENS-MH-A |
| ENSUITE - MENTAL HEALTH (INBOARD – FEEDING ROOM) | 5 | ENS-MH | ENS-MH-B |
| FEEDING ROOM | 7 | FEED | FEED |
| FORMULA ROOM | 7 | FORM | FORM |
| FILM PROCESSING, VIEWING & REPORTING | 16 | FPVR | FPVR |
| GENERAL X-RAY, | 30 | GENXR | GENXR |
| GOODS RECEIPT – PHARMACY | 5 | GRE | GRE |
| GYMNASIUM, 45M2 | 45 | GYAH-45 | GYAH-45 |
| INTERVIEW ROOM - FAMILY/ LARGE, 12M2 | 12 | INTF | INTF |
| LOUNGE – PATIENT, 15M2 | 15 | LNPT-15 | LNPT-15 |
| MAMMOGRAPHY | 16 | MAMMO | MAMMO |
| MEETING ROOM – SMALL, 9M2 | 9 | MEET-9 | MEET-9 |
| MEETING ROOM – SMALL, 12M2 | 12 | MEET-12 | MEET-12 |
| MEETING ROOM - MEDIUM/ LARGE, 15M2 | 15 | MEET-L-15 | MEET-L-15 |
| MEETING ROOM - MEDIUM/ LARGE, 20M2 | 20 | MEET-L-20 | MEET-L-20 |
| MEETING ROOM - MEDIUM/ LARGE, 30M2 | 30 | MEET-L-30 | MEET-L-30 |
| NEONATAL BAY – GENERAL CARE | 5 | NBGC | NBGC |
| NEONATAL BAY – INTENSIVE CARE | 12 | NBICU | NBICU |
| NEONATAL BAY – SPECIAL CARE | 10 | NBSC | NBSC |
| OFFICE - 2 PERSON SHARED | 12 | OFF-2P | OFF-2P |
| OFFICE - 3 PERSON SHARED | 16 | OFF-3P | OFF-3P |
| OFFICE - 4 PERSON SHARED | 20 | OFF-4P | OFF-4P |

Part B - Health Facility Briefing and Planning

| | | | |
|--|-----|----------|----------|
| OFFICE - CLINICAL/ HANDOVER | 12 | OFF-CLN | OFF-CLN |
| OFFICE - SINGLE PERSON 12 M2 | 12 | OFF-S12 | OFF-S12 |
| OFFICE - SINGLE PERSON 9 M2 | 9 | OFF-S9 | OFF-S9 |
| OFFICE – WORKSTATION, 5.5M2 | 5.5 | OFF-WS | OFF-WS |
| OFFICE - WRITE-UP BAY(SHARED) | 2 | OFF-WIS | OFF-WIS |
| OFFICE – WRITE-UP BAY, 3M2 | 3 | OFF-WI-3 | OFF-WI-3 |
| OPERATING ROOM - GENERAL | 42 | ORGN | ORGN |
| OPERATING ROOM - LARGE | 50 | ORLA | ORLA |
| OPERATING ROOM - MINOR | 36 | ORMS | ORMS |
| OVERNIGHT STAY – BEDROOM | 10 | OVBR | OVBR |
| OVERNIGHT STAY – ENSUITE | 4 | OVES | OVES |
| PANTRY | 8 | PTRY | PTRY |
| PARENTING ROOM | 6 | PAR | PAR |
| PATIENT BAY - ACUTE TREATMENT, 10M2 | 10 | PBTR-A10 | PBTR-A10 |
| PATIENT BAY - ACUTE TREATMENT, 12M2 | 12 | PBTR-A12 | PBTR-A12 |
| PATIENT BAY - HOLDING, 9M2 | 9 | PBTR-H-9 | PBTR-H-9 |
| PATIENT BAY - RESUSCITATION | 25 | PBTR-R | PBTR-R |
| PATIENT BAY - CRITICAL (ENCLOSED), 20M2 | 20 | PBCE-20 | PBCE-20 |
| PATIENT BAY - CRITICAL (ENCLOSED), 25M2 | 25 | PBCE-25 | PBCE-25 |
| PATIENT BAY -NON ACUTE TREATMENT, 10M2 | 10 | PBTR-NA | PBTR-NA |
| PATIENT BAY – RECOVERY, STAGE 1 | 9 | PBTR-RS1 | PBTR-RS1 |
| PHARMACY – COUNTER, 9M2 | 9 | PHA-CO | PHA-CO |
| PLASTER ROOM | 14 | PLST | PLST |
| PLAY AREA – PAEDIATRIC, 10M2 | 10 | PLAP-10 | PLAP-10 |
| PLAY AREA – PAEDIATRIC, 20M2 | 20 | PLAP-10 | PLAP-20 |
| PREPARATION ROOM – NON STERILE | 12 | PREP | PREP |
| PREPARATION/ SETUP ROOM (IMAGING) | 9 | PREP-S | PREP-S |
| PROCEDURE ROOM, 14M2 | 14 | PROC-14 | PROC-14 |
| PROCEDURE ROOM, 20M2 | 20 | PROC-20 | PROC-20 |
| PROPERTY BAY – STAFF, 2M2 | 2 | PROP-2 | PROP-2 |
| RECEPTION/ CLERICAL, 10M2 | 10 | RECL-10 | RECL-10 |
| SCREENING ROOM (FLUOROSCOPY) | 36 | SCRN | SCRN |
| SCRUB-UP/ GOWNING - SHARED | 6 | SCRBS | SCRBS |
| SCRUB-UP/ GOWNING, 8M2 | 8 | SCRB-8 | SCRB-8 |
| SECLUSION ROOM | 14 | SECL | SECL |
| SET-UP ROOM | 8 | SETUP-8 | SETUP-8 |
| SHOWER - PATIENT | 4 | SHPT | SHPT |

Part B - Health Facility Briefing and Planning

| | | | |
|----------------------------------|----|----------|----------|
| SHOWER - STAFF | 2 | SHST | SHST |
| STAFF ROOM, 15M2 | 15 | SRM | SRM |
| STAFF STATION, 5M2 | 5 | SSTN-5 | SSTN-5 |
| STAFF STATION, 10M2 | 10 | SSTN-10 | SSTN-10 |
| STAFF STATION, 14M2 | 14 | SSTN-14 | SSTN-14 |
| STORE – ACCOUNTABLE DRUGS | 5 | STAD | STAD |
| STORE – BULK | 40 | STBK | STBK |
| STORE - CLEANER'S | 12 | STCL | STCL |
| STORE- DRUGS, 5M2 | 5 | STDR-5 | STDR-5 |
| STORE- DRUGS, 10M2 | 10 | STDR-10 | STDR-10 |
| STORE – EQUIPMENT, 14M2 | 14 | STEQ-14 | STEQ-14 |
| STORE - EQUIPMENT, 20M2 | 20 | STEQ-20 | STEQ-20 |
| STORE – FILES, 10M2 | 10 | STFS-10 | STFS-10 |
| STORE – GENERAL , 9M2 | 9 | STGN-9 | STGN-9 |
| STORE – GENERAL,10M2 | 10 | STGN-10 | STGN-10 |
| STORE - PHOTOCOPY/ STATIONERY | 8 | STPS | STPS |
| STORE - STERILE STOCK, 12M2 | 12 | STSS-12 | STSS-12 |
| STORE - STERILE STOCK, 24M2 | 24 | STSS-24 | STSS-24 |
| TOILET - DISABLED | 5 | WCDS | WCDS |
| TOILET - PATIENT | 4 | WCPT | WCPT |
| TOILET – PUBLIC, 3M2 | 3 | WCPU-3 | WCPU-3 |
| TOILET - STAFF | 2 | WCST | WCST |
| TREATMENT ROOM | 14 | TRMT | TRMT |
| WAITING - SUB 5M2 | 5 | WAIT-SUB | WAIT-SUB |
| WAITING | 10 | WAIT-10 | WAIT-10 |
| WAITING - PATIENT, 20M2 | 20 | WAIT-20 | WAIT-20 |
| X-RAY VIEWING AND REPORTING | 12 | XRRR | XRRR |

1 Bed Room

90.3.00 DESCRIPTION AND FUNCTION

A 1 Bed Room will accommodate one patient for the delivery of nursing and medical care and treatment. The number of 1 Bed Rooms in the Unit shall be determined by service demand.

A 1 Bed Room shall be 15 m2. Where required for special care such as accommodation of bariatric patients, a 1 Bed Room shall be 18 m2. See 1 Bed Room - Special.

A 1 Bed Room can be used as a Standard Isolation Room (Class S) without positive or negative pressure airconditioning.

Patients to be accommodated will include:

- + Noisy or disturbed patients;

Part B - Health Facility Briefing and Planning

- + Palliative care and rooming in relative(s);
- + High dependency patients;
- + Patients requiring privacy;
- + Mother and babies rooming in;
- + Patients with a lowered resistance to disease.

LOCATION AND RELATIONSHIPS

Bedrooms should be located close to, and visible from a Staff Station and with natural light and outlook. Ensuites shall be dedicated to each room and directly accessible from the bedroom.

Three options are available for the relationship between Bed Room and Ensuite:

- A Inboard Ensuite;
- B Outboard Ensuite
- C Back-to-back Ensuite (as per DS26).

Note: 'Super size' ensuites may be provided to Standard 1 Bed Rooms, as determined by service planning requirements.

These variations are shown in the RLS for this room.

External windows should be provided in accordance with BCA requirements.

CONSIDERATIONS

A staff hand basin shall be provided in every 1 Bed Room.

For staff handwashing facilities and PPE Bays refer to Part D of these Guidelines.

For additional room considerations and details refer to Room Data Sheets.

1 Bed Room - Isolation

90.4.00 DESCRIPTION AND FUNCTION

Isolation Rooms are used to isolate patients with known infectious conditions, or to protect patients from infection. They may have positive or negative pressure airconditioning.

Class N or P Isolation Rooms will generally only be provided in special Units and according to service demand. It is noted that all standard 1 Bed Rooms may function as Class S Isolation Rooms.

These are described in detail in Part D of these Guidelines.

LOCATION AND RELATIONSHIPS

Each Isolation Room shall have a dedicated Ensuite.

CONSIDERATIONS

For Anterooms, staff handwashing facilities, PPE Bays and further information regarding Isolation Rooms refer to Part D of these Guidelines.

For additional room considerations refer to Room Data Sheets and Room Layout Sheets

1 Bed Room - Special

90.5.00 DESCRIPTION AND FUNCTION

A 1 Bed Room - Special will accommodate one patient for the delivery of nursing and medical care, and treatment. A 1 Bed Room -Special shall be 18 m².

Part B - Health Facility Briefing and Planning

It will be a larger bedroom to accommodate special needs patients such as bariatric and palliative care patients. The additional floor area allows for larger or additional furniture and equipment. It also permits overnight stay by carers.

A 1 Bed Room - Special may be used as a Class S Isolation Room without positive or negative air conditioning.

Doors from the Unit corridor to the room should allow for 1400 clear opening to allow passage of bariatric beds and other over-size equipment.

LOCATION AND RELATIONSHIPS

Each 1 Bed Room - Special shall have a 'Super' Ensuite, which will facilitate the assistance of the patient by 2 carers.

The recommended provision of 1 Bed Rooms - Special is as follows:

- + One per facility where that facility has fewer than 50 beds;
- + One per 60 beds or one per two Inpatient Units in larger facilities, whichever is the lesser.

The number of rooms shall be determined by considering factors such as type of services, proportion of dependent patients requiring rooming in, and proportion of bariatric patients.

CONSIDERATIONS

For staff handwashing facilities and PPE Bays refer to Part D of these Guidelines.

For additional room considerations refer to Room Data Sheets and Room Layout Sheets

2 Bed Room

90 .6.00 DESCRIPTION AND FUNCTION

A 2 Bed Room will accommodate two patients with similar nursing needs for the delivery of nursing and medical care and treatments.

2 Bed Rooms are not recommended for general medical/surgical Inpatient Units. They are most often used in Maternity and Rehabilitation Inpatient Units. They are commonly provided in Maternity Units in lieu of 4 Bed Rooms to reduce disturbance caused by the rooming-in of babies.

A 2 Bed Room shall be 25 m² (not including an Ensuite).

LOCATION AND RELATIONSHIPS

Bed Rooms should be located close to, and visible from, a Staff Station and with natural light and outlook. Ensuities shall be directly accessible from the Bed Room, or from directly adjacent to the entry door.

Three options are available for the relationship between Bed Room and Ensuite:

- A Inboard Ensuite
- B Outboard Ensuite
- C Back-to-back Ensuite (as per DS26)

These variations are shown in the RLS for this room.

External windows should be provided, in accordance with BCA requirements

CONSIDERATIONS

Careful consideration should be given to their use in other types of Inpatient Units.

Each 2 Bed Room shall include a clinical handwashing basin within the room.

For additional room considerations refer to Room Data Sheets and Room Layout Sheets

4 Bed Room

90 .7.00 DESCRIPTION AND FUNCTION

A 4 Bed Room will accommodate four patients with similar nursing needs for the delivery of nursing and medical care and treatment.

A 4 Bed Room shall be 42 m² (not including an ensuite). Provision of 42 m² allows for flexibility of use, as well as space for extra equipment and reduction of clutter.

LOCATION AND RELATIONSHIPS

Bedrooms should be located close to, and visible from, a Staff Station and with natural light and outlook.

Visual privacy from casual observation by other patients and visitors shall be provided for each patient. The design for privacy shall not restrict patient access to the room entrance, the patient toilet or shower. This includes access via mobility equipment such as wheelchair, shower chair or hoist, and for resuscitation trolley. The space within the privacy curtain should be sufficient to allow for use of equipment and to carry out medical procedures without entanglement in the curtain and encroachment on the space of other patients.

Ensuite shower and toilet shall be directly accessible from the bedroom or from adjacent to the entry door.

Two options are available for the relationship between Bed Room and Ensuite:

A Inboard Ensuite Shower and Ensuite Toilet

B Outboard Ensuite Shower and Ensuite Toilet.

These variations are shown in the RLS for this room.

External windows should be provided in accordance with BCA requirements.

CONSIDERATIONS

Each 4 Bed Room shall include a clinical handwashing basin within the room.

For additional room considerations refer to Room Data Sheets and Room Layout Sheets

ADL Bathroom

90 .7.05 DESCRIPTION AND FUNCTION

Domestic style Bathroom for patient Activities of Daily Living assessment and training to assist patients to return to normal living. It provides for training to use a domestic bath, showering, dressing/undressing, grooming and toileting.

Use of wheelchairs, lifting equipment and specially adapted equipment may be demonstrated in this space.

The ADL Bathroom shall be a minimum of 12 m².

LOCATION AND RELATIONSHIPS

The ADL Bathroom should be located with other ADL facilities with ready access to waiting and amenities.

CONSIDERATIONS

The shower shall not have a raised hob or steps.

Patient/nurse and emergency call points are required.

For additional room considerations and details refer to Room Data Sheets.

ADL - Bedroom

90 .7.06 DESCRIPTION AND FUNCTION

The ADL Bedroom is a domestic style bedroom for patient assessment and training purposes, to assist patients to return to normal living.

The ADL Bedroom may require use of wheelchairs and lifting equipment and specially adapted equipment may also be demonstrated in this space.

The ADL Bedroom shall be a minimum of 13 m2.

LOCATION AND RELATIONSHIPS

The ADL Bedroom may be located with other ADL facilities, in the Allied Health / rehabilitation patient treatment zone, with ready access to waiting and amenities areas.

CONSIDERATIONS

Furniture and fittings may include:

- Domestic bed
- Bedside table
- Bedside chair
- A patient/nurse call and access to an emergency call point is required
- GPOs are required for bedside use
- Fittings and finishes should be domestic in nature; the floor should be carpeted

ADL - Dining

90 .7.07 DESCRIPTION AND FUNCTION

Domestic style dining area within a Transitional Living Unit to allow patients and their visitors to eat their meals away from the bedroom.

LOCATION AND RELATIONSHIPS

Within the Transitional Living Unit adjacent to the Kitchen.

CONSIDERATIONS

Wheelchair access required to the dining table.

For additional room considerations and details refer to Room Data Sheets and Room Layout Sheets

ADL Kitchen

90 .7.10 DESCRIPTION AND FUNCTION

Domestic style Kitchen for patient Activities of Daily Living assessment and training to assist patients to return to normal living. It provides for training to use a range of kitchen appliances.

Specially adapted equipment may be demonstrated in this space.

The Kitchen may be an enclosed room or open bay; in the latter instance direct access to the Dining Area will facilitate group training sessions.

The ADL Kitchen – whether open or enclosed - shall be a minimum of 12 m2.

LOCATION AND RELATIONSHIPS

The ADL Kitchen should have ready access to patient dining / lounge areas with direct access to the Unit corridor.

CONSIDERATIONS

Benches should be a mix of heights to suit a range of ambulatory and wheelchair patients.

For additional room considerations and details refer to Room Data Sheets and Room Layout Sheets.

ADL Laundry

90 . 7.15 DESCRIPTION AND FUNCTION

Domestic style Laundry for patient Activities of Daily Living assessment and training to assist patients to return to normal living. It provides for training to use a range of laundry appliances.

The ADL Laundry shall be 8 m2.

LOCATION AND RELATIONSHIPS

The ADL Laundry should have direct access to the Unit corridor with ready access to patient therapy and dining/ lounge areas.

CONSIDERATIONS

Benches and appliances must suit a range of ambulatory and wheelchair patients.

For additional room considerations and details refer to Room Data Sheets and Room Layout Sheets

After Hours Drug Store

90 . 7.20 DESCRIPTION AND FUNCTION

Secure store for drugs required after hours when the Pharmacy is closed. Access is by authorised staff only.

Minimum area 4 m2

LOCATION AND RELATIONSHIPS

May be located at the perimeter of the Pharmacy with two-way access from Pharmacy and corridor. This arrangement facilitates checking and restocking by the Pharmacy staff.

If the location of the Pharmacy is remote, a secure location in a 24 hour zone should be selected – an inpatient unit or, frequently, the Emergency Unit.

CONSIDERATIONS

Bench, shelving, refrigerator, DD safe and possible computer for stock monitoring.

Temperature monitor and alarm to to refrigerator and DD safe.

For additional details refer to Room Data and Room Layout Sheets.

Angiography Control Room

90 . 7.35 DESCRIPTION AND FUNCTION

Part B - Health Facility Briefing and Planning

The room provides for remote operation of angiography equipment, review of procedure images and for reporting function.

If two angiography rooms are collocated, a single Control Room may service both rooms.

Single Room – minimum area 14 m². If shared between 2 rooms, minimum area 17m² depending on the configuration of the Procedure Rooms.

If the reporting function is not included, the single room may be reduced to 11m² and a shared room to 14m².

LOCATION AND RELATIONSHIPS

Immediately outside and with direct access into the Angiography Procedure Room.

CONSIDERATIONS

Lead glass observation window to permit full view of the patient .

Provision for general anaesthesia

For additional room considerations and details refer to Room Data Sheets and Room Layout Sheets

Anaesthetic Induction

90 . 8.00 DESCRIPTION AND FUNCTION

The Anaesthetic Induction Room is for holding patients on mobile beds or trolleys prior to operative procedures at times when the Operating Room is not available. Local, regional or general anaesthesia may be administered in this area.

The size of an Anaesthetic Induction room shall be 15 or 18m² as per Operating Unit Schedules of Accommodation.

The area must accommodate the patient on a mobile trolley/bed plus 3 staff and equipment.

LOCATION AND RELATIONSHIPS

The Anaesthetic Induction Room should be located near the entrance of the Operating Suite, the Holding Bay and the Operating Rooms.

It should be enroute from the entrance of the Unit to the Operating Room.

CONSIDERATIONS

For additional room considerations refer to Room Data Sheets and Room Layout Sheets

Anteroom

90 . 9.00 DESCRIPTION AND FUNCTION

Anterooms are required for staff and visitors to change and dispose of personal protective gear used on entering these rooms when caring for infectious patients.

Anterooms increase the effectiveness of the Isolation Room by minimising the potential escape of airborne nuclei into the corridor when the door is opened.

An Ante-Room shall be 6 m².

LOCATION AND RELATIONSHIPS

Staff must pass through the Anteroom to enter the Isolation Room.

Part B - Health Facility Briefing and Planning

The Anteroom should not be shared between rooms. The Anteroom will not need to function as an airlock for Class N rooms with the exception of ICU.

CONSIDERATIONS

For additional information refer to Part D - Infection Control.

For additional room considerations refer to Room Data Sheets and Room Layout Sheets

Angiography Procedure Room

90 . 9.05 DESCRIPTION AND FUNCTION

The Angiography Room provides an area and equipment for examination of the vascular system using contrast medium.

The Angiography Room should be a minimum of 42 m2.

LOCATION AND RELATIONSHIPS

Adjacent to the Control Room with ready access to Patient Holding/Recovery Areas and Staff Change Rooms.

May be one of a cluster of rooms forming an Interventional Imaging Suite.

Scrub facilities shall be located at the staff entry to room.

CONSIDERATIONS

Immediate access to a resuscitation trolley.

Radiation shielding as assessed by a certified Radiation Consultant.

For additional details, refer to Room Data and Room Layout Sheets.

Angiography Sterile Store/Setup

90 . 9.06 DESCRIPTION AND FUNCTION

A room for storage of sterile packs, consumables and drugs, preparation of radiological contrast media and parking and set-up of procedure trolleys.

Used and soiled items and clinical waste will not be returned to this room.

A clinical scrub sink will be required.

LOCATION AND RELATIONSHIPS

Ready access into the Angiography Procedure Room/s.

Direct access from corridor for delivery of supplies and removal of clean packaging waste.

CONSIDERATIONS

Space for assembling and setting up procedure trolleys.

Consider a mobile adjustable open shelving system, that has no rough or projecting edge that could damage sterile packaging.

For additional details, refer to Room Data and Room Layout Sheets.

Assembly /Preparation (Pharmacy)

Part B - Health Facility Briefing and Planning

90 .9.10 DESCRIPTION AND FUNCTION

The Assembly/Preparation Area is a work space within the Pharmacy containing work benches and drugs and containers storage from the pharmacists assemble and label drug orders for delivery to the appropriate patient care areas or to the outpatient dispensing area.

Functions and Activities include:

- counting tablets and capsules from bulk containers into dispensing containers
 - selecting the required quantity of prepacked medications and placing them in the appropriate container
 - labelling the containers with the name of the medication, the patient's name and directions for use
 - selecting the required amount of lotions, antiseptics and other liquids to fulfil the order
 - counting and packaging ampoules of drugs for administration by injection
 - QA activities including computer data entry of all materials supplied
 - meeting legislative requirements for the control of drugs of addiction
 - storing completed ward orders in boxes/tubs to await delivery
 - transferring outpatient orders into the Outpatient Pharmacy Counter for pick-up.
- LOCATION AND RELATIONSHIPS

The area should be adjacent to the Active Store and should have ready access to the Non-Sterile Preparation Area and to the hospital corridor system for ward deliveries.

CONSIDERATIONS

Task lighting will be required at each work station.

Internal temperatures should not rise above 25 degrees Celsius.

Refer to Part C of these Guidelines for further information on security.

For additional room considerations and details refer to Room Data Sheets and Room Layout Sheets.

Audiology Testing Room

90 .9.15 DESCRIPTION AND FUNCTION

The Audiology Room is an acoustically isolated room containing an audiology soundproof booth and workstation area to undertake audiology testing and assessment.

LOCATION AND RELATIONSHIPS

The Audiology Room should be located in a quiet zone within the Allied Health patient consult and treatment areas or near ENT Clinic. It should have ready access to waiting and amenities areas.

CONSIDERATIONS

The following fittings and equipment will be required:

- Soundproof booth
- Desk and chairs
- Microphone

Bathroom

90 .10.00 DESCRIPTION AND FUNCTION

The Bathroom is for patients to use for:

- + Washing, shaving, grooming, showering, toilet use either independently or with assistance;
- + Assisted bathing of disabled patients;

Part B - Health Facility Briefing and Planning

- + Bathing of patients for treatment purposes.

It should allow for independent disabled access as well as the manoeuvring of a patient on a lifting device, wheelchair or assisted sani-chair access.

Water conservation should be considered in the selection of fittings and fixtures.

Space may be required to enable transfer of a patient to a bath from both sides. The placement of the toilet should also allow assistance from both sides.

The bath provided may be either fixed, eg 'Arjo' type, or mobile (such as trolley bath). A disabled toilet should be provided and room for a shower trolley where required.

The size of the room will be determined by the space required for fixed and mobile fittings and equipment, plus the free floor areas required to ensure adequate circulation space for semi- and non-ambulant patients. A bathroom shall be 15 m2.

The layout of bathing facilities must not put adult carers at risk of injury from sustaining an awkward posture, extended reaching or manual handling.

The BCA requires a Bathroom to be provided in health facilities- minimum 1 per floor; although generally only specialist units such as Paediatrics would actually require provision of this facility.

LOCATION AND RELATIONSHIPS

The Bathroom should be central to all bedroom areas, to reduce travel and manual handling from pushing wheelchairs, shower chairs and hoists.

It should be placed in a low traffic area.

CONSIDERATIONS

Finishes: Floors are to be slip resistant and impervious to water; walls to wet areas are to have water resistant finish with no gaps and the ceiling is to be water resistant.

If a paediatric bathroom is provided, the height, scale and type of fittings and fixtures should be suitable for use by children.

For additional room considerations refer to Room Data Sheets and Room Layout Sheets

Bay - Flowers

90.11.00 DESCRIPTION AND FUNCTION

A bay for staff, relatives or visitors to fill or empty vases, and to arrange and dispose of flowers.

A Flower Bay shall be 2 m2. It should include a deep sink and storage for vases and a waste bin for disposal of spent flowers.

LOCATION AND RELATIONSHIPS

Central to Patient Areas.

CONSIDERATIONS

For additional room considerations and details refer to Room Data Sheets and Room Layout Sheets.

Bay - Handwashing

90.12.00 DESCRIPTION AND FUNCTION

Handwashing Bays are provided for staff to cleanse their hands before and after every patient contact.

Part B - Health Facility Briefing and Planning

Refer Part D for further information re provision.

LOCATION AND RELATIONSHIPS

Handwashing Bays should be highly visible and conveniently located to encourage use by clinical staff.

CONSIDERATIONS

All 1 Bed Rooms shall contain a clinical hand basin within the room. Provide additional handwashing bays throughout the Unit in accordance with the requirements of Part D. Generally staff should be no further than 10-12 metres from a handwashing basin at any time.

For additional room considerations and details refer to Room Data Sheets and Room Layout Sheets.

Bay - Linen

90.13.00 DESCRIPTION AND FUNCTION

An alcove or bay to accommodate a linen supply or exchange trolley.

This may be open or enclosed with double doors or a roller shutter. If enclosed the doors/frame must not impede trolley access.

Blankets and pillows may also be stored.

A Linen Bay shall be 2m².

LOCATION AND RELATIONSHIPS

Ready access to Patient Areas.

CONSIDERATIONS

For additional room considerations and details refer to Room Data Sheets and Room Layout Sheets.

Bay - Mobile Equipment

90.14.00 DESCRIPTION AND FUNCTION

The Mobile Equipment Bay is for the storage of wheelchairs, mobile scales, sani-chairs, patient lifting devices and other equipment.

Electrical Equipment that requires recharging may be stored in this space during the recharging period therefore provision of appropriately located power outlets will be required.

A Mobile Equipment Bay shall be 4 m².

If mobile x-ray equipment is stored, the bay area shall be 6 m². Floor area and depth of bay may vary to suit the types of equipment stored.

LOCATION AND RELATIONSHIPS

The Mobile Equipment Bay should be located in a low traffic area, close to Patient Areas.

CONSIDERATIONS

The bay should be deep enough to allow storage of equipment without projection into the corridor.

For additional room considerations and details refer to Room Data Sheets and Room Layout Sheets.

Part B - Health Facility Briefing and Planning

Bay - Personal Protective Equipment

90 .15.00 DESCRIPTION AND FUNCTION

A bay for the storage of personal protective equipment such as gloves, gowns, overshoes and masks for infection control purposes.

LOCATION AND RELATIONSHIPS

May be located with the Handwash Bay or immediately outside Isolation Rooms of all types (unless an Anteroom is provided) and outside all patient bed rooms. For 1 Bed Rooms, one PPE Bay may be shared by two rooms

Personal Protective Equipment (PPE) Bays may also be required in Operating Suites, Cardiac Catheter Labs, Endoscopy Units/Endoscope processing rooms and maintenance workshops for storage of protective equipment required by OHS legislative requirements.

CONSIDERATIONS

Refer Part D for further information.

For additional room considerations and details refer to Room Data Sheets and Room Layout Sheets.

Bay - Resuscitation Trolley

90 .16.00 DESCRIPTION AND FUNCTION

The Resuscitation Trolley Bay is for the supervised holding of the resuscitation trolley and equipment.

A Resuscitation Trolley Bay shall be 2 m2.

LOCATION AND RELATIONSHIPS

Rapid emergency access to the trolley and from this area to Patient Areas is essential. It must be adjacent to a Ward Staff Station and elsewhere as required.

CONSIDERATIONS

The Resuscitation Trolley Bay may be incorporated in the Clean Utility Room in an Inpatient Unit.

For additional room considerations and details refer to Room Data Sheets and Room Layout Sheets.

Bay/Room - Beverage

90 .17.00 DESCRIPTION AND FUNCTION

The Beverage Bay is for preparing and/or heating refreshments, snacks and some meals for patients, washing some utensils, storing food and drink and disposing of food waste. It may also provide space for a meal tray collection trolley. If an instantaneous boiling water unit is provided, it must be hardwired and access restricted as required.

The Beverage Bay shall be 4 m2. A Beverage Room may also function as a small kitchenette for preparation of meals and snacks for patients and may be larger in accordance with the project brief.

If an enclosed room is provided the floor area may be increased to 5 m2.

LOCATION AND RELATIONSHIPS

The Beverage Bay should be close to Patient Areas and may need to be observable from the Staff Station depending on the type of patients within the Unit.

CONSIDERATIONS

For additional room considerations and details refer to Room Data Sheets and Room Layout Sheets.

Bay-Blanket/Fluid Warmer

90 . 17.05 DESCRIPTION AND FUNCTION

A Bay to accommodate a blanket or combined blanket /fluid warmer.

LOCATION AND RELATIONSHIPS

Centrally within the Unit accessible from Patient Care Areas and Operating Rooms. This bay may be collocated with Linen Trolley Bay.

CONSIDERATIONS

Blanket/Fluid Warmer may be mobile or fixed.
For additional room considerations and details refer to Room Data Sheets and Room Layout Sheets.

Bay-Wheelchair Park

90 . 17.06 DESCRIPTION AND FUNCTION

An open storage bay for parking wheelchairs ready for use.

The bay should be deep enough to ensure that the wheelchairs do not intrude onto corridor and circulation space.

LOCATION AND RELATIONSHIPS

Locate near Waiting Areas and Unit entries.

CONSIDERATIONS

Wall protection.
Power points for recharge may need to be considered.

Birthing Room - LDR

90 . 17.10 DESCRIPTION AND FUNCTION

These rooms provide facilities for the entire birthing process including:

- patient assessment and preparation
- management of labour
- delivery
- infant clean-up/bathing - and resuscitation if necessary
- post-natal recovery and observation
- record keeping.

Each Birthing Room shall have a dedicated en suite shower / toilet with or without bath, a scrub basin and access to a discrete storage area for mobile equipment.

A Birthing Room (LDR) shall be a minimum of 28 m².

LOCATION AND RELATIONSHIPS

Birthing Rooms should be located with ready access from the Unit entry and Staff Station.

CONSIDERATIONS

The décor and finishes for a Birthing Room should be in a domestic style.

Clinical items such as medical gases and equipment should be concealed but within easy reach.

For additional room considerations and details refer to Room Data Sheets and Room Layout Sheets.

Change Cubicle - Patient

90 .18.00 DESCRIPTION AND FUNCTION

The Patient Change Cubicle is provided for an ambulant patient to undress from street clothes into a hospital gown, as appropriate prior to examination or treatment. Following the examination or treatment, the patient will re-dress in street clothes.

The Change Cubicle should provide hanging facilities for clothes, and a bench for the patient to sit on whilst dressing or undressing.

A Change Cubicle for general use shall be 2 m².

A Change Cubicle for disabled use shall be 4 m². This cubicle may also be used by bariatric patients, pregnant patients or accompanied patients.

Change cubicles for disabled use should be provided at the following minimum rate - one cubicle or 30% of all cubicles, whichever is the greater figure.

LOCATION AND RELATIONSHIPS

The Change Cubicle should be located near or directly adjacent to Treatment areas.

CONSIDERATIONS

Security of patient belongings should be ensured. Privacy and accessibility from waiting areas should be considered.

For additional room considerations and details refer to Room Data Sheets and Room Layout Sheets.

Change - Staff

90 .19.00 DESCRIPTION AND FUNCTION

Staff Change Areas are provided for staff to change into appropriate work clothing or gowns, to store their street clothes and to perform personal ablutions. Secure storage for personnel property will be required.

Provision should generally be made for two Staff Change Areas, one for male and one for female staff.

If staff numbers are small and predominantly of one sex, unisex facilities may be considered.

The total area for Staff Change will depend on the size of the Unit but should be divided into male and female areas on a proportional basis to meet the specific requirements of the project brief.

Showers, toilets and decontamination facilities will be included within or adjacent to Staff Change areas depending on the nature of the Unit.

LOCATION AND RELATIONSHIPS

In Operating Units, for security and control purposes it is desirable that the traffic patterns to and from the Staff Change can be overviewed from the Reception/Entry Area.

In other Units, the Change Areas should be located in a convenient position, generally near the entry point to the Unit, but separate from Patient Areas.

CONSIDERATIONS

Provision should generally be made for two Staff Change Areas, one for male and

Part B - Health Facility Briefing and Planning

one for female staff.

If staff numbers are small and predominantly of one sex, unisex facilities may be considered.

In units such as the Operating Suite where staff do full clothing change - full height lockers will be required.

For additional room considerations and details refer to Room Data Sheets and Room Layout Sheets.

Cleaner's Room

90 .20.00 DESCRIPTION AND FUNCTIONS

A secure room for the storage and decanting of cleaning materials and agents, storage of cleaning equipment and trolley, washing and storage of mops, buckets, brooms, etc and for waste disposal.

An externally accessed cupboard should be provided for dry goods such as toilet paper and paper hand towels.

The Cleaner's Room shall be 5 m² and lockable.

LOCATION AND RELATIONSHIPS

Anywhere convenient in the Unit, preferably in a low traffic area near the periphery of the Unit. It may be shared with other areas.

CONSIDERATIONS

For additional room considerations and details refer to Room Data Sheets.

Clean-Up Room

90 .21.00 DESCRIPTION AND FUNCTION

The Clean Up Room is a dispersal area where used trolleys and articles may be held temporarily. These items may be rinsed, sorted or disposed of in accordance with the Facility Operational Policies.

One Clean Up Room may be shared between two Operating Rooms.

A Clean Up area should be 10 m² where its use is shared by more than one Operating/Procedures Room.

A Clean-Up Room shall be 7 m², where used by one Operating/Procedure Room only.

LOCATION AND RELATIONSHIPS

The Clean Up Room should be located adjacent to its associated Operating or Procedure Room(s) and may be off the appropriate Exit Area(s).

CONSIDERATIONS

For additional room considerations and details refer to Room Data Sheets and Room Layout Sheets.

Clean-Up - Scopes

90 .22.00 DESCRIPTION AND FUNCTION

The Clean-Up - Scopes room is used for rinsing and cleaning of medical equipment, instruments or endoscopes used in procedures, prior to a sterilisation procedure.

LOCATION AND RELATIONSHIPS

Ready access to treatment or procedure room(s).

CONSIDERATIONS

For additional room considerations and details refer to Room Data Sheets and Room Layout Sheets.

Clean Utility

90.23.00 DESCRIPTION AND FUNCTION

The Clean Utility Room is for the storage and preparation of clean and sterile stock, patient care items, drugs and intravenous fluids.

The room will provide storage for dangerous drugs in accordance with NSW Health policy and relevant legislation.

CONSIDERATIONS

Doors to the Clean Utility should be Lockable.

For additional room considerations and details refer to Room Data Sheets and Room Layout Sheets.

Pharmacy policy at each facility will determine storage and handling requirements for general drugs and medications.

The Clean Utility Room shall be 12 m², unless accessed from both sides in which case it may be increased to 14 m².

It should be lockable.

LOCATION AND RELATIONSHIPS

The Clean Utility should be located adjacent to the Staff Station and be readily accessible from Inpatient Accommodation.

Depending on the configuration of the Unit, access may be from two sides.

Consult Room

90.24.00 DESCRIPTION AND FUNCTION

The Consult Room will provide for private consultation and examination of patients with or without support persons present. This room may also be used for the examination of patients who are behaviourally disturbed, in which case emergency egress should be provided.

Consult rooms may be provided for a variety of purposes including:

- + Assessing gynaecological/obstetrics patients and sexual assault victims;
- + ENT/Ophthalmology;
- + Dental;
- + Paediatric use;
- + General or multifunctional purposes.

Equipment for each of these functions may differ. For each function provide appropriate furniture and equipment, and toys for paediatric use.

Acoustic and visual privacy should be provided.

A Consult Room shall be 12 m².

LOCATION AND RELATIONSHIPS

Part B - Health Facility Briefing and Planning

To be grouped with other Consult Rooms, where possible, and easily accessible from Entry, Waiting and Staff Areas. Close to Clean and Dirty Utility Rooms.

Two doors and duress alarms may be required for security reasons - refer Part C of these Guidelines for further information.

CONSIDERATIONS

For additional room considerations and details refer to Room Data Sheets and Room Layout Sheets.

CT Scanner-Control Room

90 .24.10 DESCRIPTION AND FUNCTION

The room provides for remote operation of CT equipment, observation of the patient and review of images.

A viewing window shall be provided to permit full view of the patient and the angle of the CT Unit shall permit the control operator to see the patient's head.

LOCATION AND RELATIONSHIPS

The Control Room shall be located directly outside the CT Scanning Room and ready access to film processing areas (laser printer).

CONSIDERATIONS

For additional room details and requirements refer to Room Description and Room Layout Sheets.

CT Scanner-Procedure Room

90 .24.15 DESCRIPTION AND FUNCTION

The Computerised Tomography (CT) Room provides an area and equipment for CT examinations.

The rooms shall be sized to accommodate the equipment selected but the minimum area required will be 42 m2..

LOCATION AND RELATIONSHIPS

The CT Scanning Room should be located adjacent to the Control Room – and Equipment Room if separate.

A bed/trolley bay adjacent to each room in order for staff to observe patients whilst carrying out other duties and ready access to preparation area and patient toilet, change and recovery areas.

CONSIDERATIONS

Clinical scrub facilities immediately adjacent to the room

May need to be serviced for general anaesthesia.

For additional room considerations and details refer to Room Data Sheet and Room Layout Sheet.

Darkroom

90 .24.20 DESCRIPTION AND FUNCTION

A room for processing light-sensitive radiographic film under light-controlled conditions.

In Medical Imaging Units that have converted to a Computed Radiology (CR) or

Part B - Health Facility Briefing and Planning

Digital Radiology (DR) system, the Dark Room will/may only be required as a back-up in the event of those systems' failure.

The processor may be either floor or bench-mounted.

Functions and activities include:

- . Receipt of exposed film
- . Loading/unloading cassettes
- . Film identification
- . Feeding film into processor in darkened conditions
- . Film copying
- . Film examination
- . Maintenance and quality control activities e.g. cleaning of equipment and fittings, temperature control of solutions, appropriate change/replenishment of solutions, processing of film strips.

LOCATION AND RELATIONSHIPS

The Dark Room should be easily accessible from the General Imaging Room work areas.

CONSIDERATIONS

The following will be required:

- Safe light
- Light-proof door seals
- Exhaust system to deal with pungent chemical odours
- Warning light outside room indicating processing active.

Means of silver recovery and chemical disposal will need to be established.

For additional room considerations and details refer to Room Data Sheets and Room Layout Sheets

Dirty Utility

90 .25.00 DESCRIPTION AND FUNCTION

The Dirty Utility provides for the following functions;

- Disposal of clinical and other wastes and soiled linen
- Measuring, testing and disposing of patient specimens
- Decontamination and storage of patient utensils such as pans, urinals and
- bowls
- Holding of in-use linen skips
- Cleaning and holding of used equipment for collection and sterilisation elsewhere
- Handwashing.

The Dirty Utility shall be a minimum of 10 m², or 12 m² when access is required from two sides of the room.

In smaller Units, the Dirty Utility Room may be combined with a Disposal Room for space efficiency. The combined Dirty Utility/ Disposal shall be minimum of 14 m².

LOCATION AND RELATIONSHIPS

The Dirty Utility requires a central position with other unit utility rooms and direct access from the unit corridor to allow for ready access from the patient areas served.

CONSIDERATIONS

A handbasin is essential.

Door opening mechanisms from the corridor must be hands-free.

For additional room considerations and details refer to Room Data Sheets and Room Layout Sheets.

Dirty Utility - Sub

90 .25.10 DESCRIPTION AND FUNCTION

The Sub-Dirty Utility provides the same functions as the main Dirty Utility Room with the possible exception of equipment for decontaminating washbowls etc.

May act as a secondary support for the main Dirty Utility in large wards and departments or may all that is required in units such as Medical Imaging.

The Dirty Utility - Sub shall not be provided in Inpatient Units used for overnight accommodation; in these units a full sized Dirty Utility is required.

The Dirty Utility - Sub shall be a minimum of 8m2.

LOCATION AND RELATIONSHIPS

The Dirty Utility - Sub should have ready access to patient areas and Unit corridor.

CONSIDERATIONS

Door opening mechanism must be hands-free.

For additional room considerations and details refer to Room Data Sheets and Room Layouts.

Disposal Room

90 .26.00 DESCRIPTION AND FUNCTION

The Disposal Room provides holding space for waste and soiled linen awaiting transfer to the Waste Handling Unit or Linen Handling Unit.

Mobile containers of clinical and general waste and bagged soiled linen are to be accommodated.

Space is also required for separate containers for sharps, glass, paper and plastics (if recycling is practised).

The Disposal Room shall be 8 m2 and lockable.

LOCATION AND RELATIONSHIPS

The room will be usually shared by two or more Units, and should be centrally located near main transport routes for collection.

CONSIDERATIONS

In some Units, space will be required for cytotoxic waste bins.

Refer to Operational Policies for the Unit Waste Management Policies.

For additional room considerations and details refer to Room Data Sheets and Room Layout Sheets.

Ensuite

90 .27.00 DESCRIPTION AND FUNCTION

An Ensuite is for a patient to wash, shave, groom themselves, shower, use the toilet, either independently or with assistance.

The area and layout must accommodate an assisting nurse, patient lifter and wheelchair access.

Water conservation should be considered in the selection of fittings and fixtures.

There are three main configurations for Ensuite Bathrooms:

Part B - Health Facility Briefing and Planning

- A Inboard - placed on the corridor wall side of the room;
- B Outboard - placed on the external wall of the room;
- C Super - a larger ensuite to suit the needs of particular types of patients; see note below..

There are two standard sizes for Ensuities - Standard at 5m² and 'Super' at 6m².

A 5m² Standard Ensuite will allow one carer or nurse to assist the patient ie 'partial' assistance.

A 6m² Ensuite will allow two nurses to assist the patient, ie 'full' assistance.

LOCATION AND RELATIONSHIPS

Each 1 Bed Room will have a dedicated Ensuite. These will generally be Standard ie 5m². The 1 Bed Room - Special will have a 'Super' 6m² Ensuite.

The Ensuite must be adjacent to the entry door or directly accessible from each Bed Room.

Individual shower and toilet compartments may be used for patients in shared bedrooms. See Shower - Patient and Toilet - Patient.

Doors must open out and be fitted with emergency release function.

CONSIDERATIONS

Doors must open out and be fitted with emergency release function.

For additional room considerations and details refer to Room Data Sheets and Room Layout Sheets.

Ensuite - Birthing Room

90 .27.05 DESCRIPTION AND FUNCTION

A room for the patient in the Birthing Room to use the toilet and to shower or bathe as required for hygiene and pain relief purposes, either independently or with assistance. Delivery may occur in this room.

There are two types and sizes of room:
En suite with shower and toilet only – 7m²
En suite with shower, toilet and peninsula bath – 10m²

The bath will include steps and a seating platform at the bath edge.

LOCATION AND RELATIONSHIPS

Direct access from the Birthing Room.

CONSIDERATIONS

Two showerheads in the shower located to allow the labouring woman, when seated, to direct water onto both her front and back for pain relief.

No hobs to the shower recess.

Refer to Room Data and Room Layout Sheets for further details.

Feeding Room

90 .27.15 DESCRIPTION AND FUNCTION

The Feeding Room provides an area for mothers to feed their babies and express milk in privacy with or without nursing assistance. The room may be used by the

Part B - Health Facility Briefing and Planning

lactation consultant for education purposes. A clinical handbasin should be provided and storage for breast pumps needs to be considered unless stored in the Formula Room.

LOCATION AND RELATIONSHIPS

Locate adjacent to the Nursery with ready access to the Formula Room. In small units, the Feeding and Formula Rooms may be combined.

CONSIDERATIONS

Ability to screen a small area for breast milk expression.

For additional details, refer to Room Data and Room Layout Sheets

Formula Room

90 .27.20 DESCRIPTION AND FUNCTION

Room for the preparation, storage and distribution of baby feeds. The room will accommodate the following functions:

- Preparation of formula
- Refrigerated storage of baby feeds including expressed breast milk
- Storage of dried goods
- Washing, sterilisation and storage of baby bottles, teats and equipment
- Demonstration to mothers on formula preparation.

The Formula Room shall be a minimum of 7m² with additional space for processing of bottles and teats.

LOCATION AND RELATIONSHIPS

The Formula Room should be located with direct access to a circulation corridor with ready access to Nursery areas. It may have direct access into the Feeding Room.

CONSIDERATIONS

A clinical handwashing basin shall be located within the room.

For additional room considerations and details refer to Room Data Sheets and Room Layout sheets.

Film Processing

90 .27.21 DESCRIPTION AND FUNCTION

A room located within the Medical Imaging Unit to house the equipment and facilities necessary for traditional processing (daylight), viewing and reporting.

In Units that utilise computed radiography (CR) and PACS, the equipment will be quite different, viewing will occur on PACS monitors and reporting stations will be in a separate area. Refer to the Medical Imaging Health Planning Unit for further information.

LOCATION AND RELATIONSHIPS

Direct access from the general imaging rooms.

CONSIDERATIONS

Refer to the Room Layout and Room Data Sheets for further details.

General X-Ray

90 .27.25 DESCRIPTION AND FUNCTION

A room for undertaking general radiographic procedures that include:

- . Skull x-rays
- . Erect and supine abdominal examinations

Part B - Health Facility Briefing and Planning

- . Chest x-rays
- . X-rays of the extremities and long bones e.g. hands, femur, etc.

Where volumes are low, OPG, Mammography and Tomography may be added to the general room equipment. This will necessitate a slightly larger room.

Where the room is intended for mixed general or tomographic examination, additional tomographic attachments will be required but no re-arrangement of the space will be necessary.

Two similar rooms are recommended for a Level-4 service facility, one of which may service trauma cases transferred from the Emergency Unit.

Functions and activities include:

- . Preparation of room and equipment for procedure
- . Transfer of patient between trolley/bed and table, where required
- . Preparation, instruction and positioning of the patient
- . X-ray procedures
- . Cassette insertion and removal
- . Post x-ray instruction/assistance for patient

The control unit zone must be effectively shielded by a lead-lined screen with lead-lined (continuous) vision panels for good patient observation.

Minimum area - 30m²
Add 5m² if Mammography included.

LOCATION AND RELATIONSHIPS

May be located in the Medical Imaging Department or within a satellite unit.

If no satellite room in the Emergency Unit, locate to facilitate frequent access from the Emergency Unit and from Outpatient Units as well as being readily accessible from Inpatient Units.

Locate to provide ready access from the ambulant waiting area.

Direct access into the Processing Area (Computed Radiology assumed).

Direct Access is required to Change cubicles if adjoining the room or ready access from a central waiting area.

CONSIDERATIONS

Bed/trolley access to room and manoeuvrability within the room is essential

Allow required space around equipment for movement and servicing according to manufacturer's recommendations. N.B. If equipment selection not finalised, take advice from Electro-medical Consultants based upon known information.

For additional details, refer to Room Data and Room Layout Sheets

Goods Receipt - Pharmacy

90 .27.30 DESCRIPTION AND FUNCTION

The Goods Receipt area provides an area for receiving deliveries of pharmaceuticals and other goods, unpacking and checking them for storage in the appropriate storage area.

Functions and Activities include:

- receiving deliveries
- unpacking items and checking them against the invoice
- preparing the received items for storage
- holding packing material and transport containers for disposal

Part B - Health Facility Briefing and Planning

- holding rejected deliveries for return
- holding order books, computer sheets, invoices, packing slips, etc.

LOCATION AND RELATIONSHIPS

This area should be located close to the delivery entrance into the Unit adjacent to the Active Store and/or to the Bulk Store.

CONSIDERATIONS

Intercom to alert staff of a delivery

Internal temperatures should not rise above 25 degrees Celsius.

Refer to Part C of these Guidelines for further information on security.

For additional room considerations and details refer to Room Data Sheets and Room Layout Sheets.

Gymnasium

90 .27.35 DESCRIPTION AND FUNCTION

A room for patient evaluation, rehabilitation exercise activities, ambulation training and group exercises and classes.

Size will depend on utilisation and occupancy.

LOCATION AND RELATIONSHIPS

The Gymnasium shall be located close to other patient therapy areas with ready access to a disabled access toilet, cold water dispenser, the circulation corridor, Unit entry and waiting areas.

CONSIDERATIONS

For additional considerations, refer to Rehabilitation Allied Health Health Planning Unit in these Guidelines and Room Data Sheets.

Lounge - Patient

90 .28.00 DESCRIPTION AND FUNCTION

This room provides a change of environment, away from Clinical Areas for patients and visitors. It is an area where family groups can visit and patients can socialise.

If the Inpatient Unit caters for paediatric patients, the Lounge - Patient may also be used as an activities space for children. Adolescent and paediatric inpatients have specific requirements for a lounge ie play and schooling areas.

If the Inpatient Unit caters for paediatric patients, the Lounge shall contain games and activities suitable for children. Storage space will be necessary for play equipment. In small hospitals, the Paediatric Lounge can be part of the Paediatric Patient Bedroom.

The nominal floor area shall be 20 m².

An alternative method of determining the size of the Lounge for adult patients is by multiplying the number of beds by 0.8 m². This takes into account that some adult patients:

- + Have shorter hospital stays;
- + Are non-ambulant;
- + Have a preference for privacy;
- + Have a preference for outdoor activities.

LOCATION AND RELATIONSHIPS

Part B - Health Facility Briefing and Planning

The Patient Lounge should be on an external wall to take advantage of natural light and outlook. Low sill heights promote access to a view from a seated position.

It should be away from the bed areas but staff should be able to observe and monitor its use by patients.

Direct access to an external space is also highly desirable. This ensures that patients' preferences for both indoor and outdoor activities are catered for. Where possible, direct access to a secure landscaped area offering partial cover against sun, wind and rain should be provided.

CONSIDERATIONS

For additional room considerations and details refer to Room Data Sheets and Room Layout Sheets.

Mammography

90 .28.20 DESCRIPTION AND FUNCTION

The Mammography Room provides specialised equipment for radiographic examinations of the breast – upright and prone, and for biopsies under ultrasound control. A change cubicle may be contained within the room.

A Mammography Room should be a minimum of 16m² (unless used exclusively for breast screening of ambulatory patients in which case 9m² will be sufficient).

LOCATION AND RELATIONSHIPS

The Mammography Room will be usually be located in the Medical Imaging Unit but may occasionally be located in a dedicated Breast Unit.

Ready access to change cubicles if not located within the Mammography Room and to a discreet waiting area.

CONSIDERATIONS

Visual and acoustic privacy is required.

For additional room considerations and details refer to Room Data Sheets and Room Layout Sheets.

Meeting Room - 9 m² or 12 m²

90 .29.00 DESCRIPTION AND FUNCTION

A multipurpose room for interviewing patients, consultation, grieving, small staff meetings and small scale teaching activities. It may provide accommodation for relatives or for viewing of deceased patients.

In the 12 m² version, space for a bed may be required and doors sized accordingly. Acoustic and visual privacy are required.

All rooms should be multi-functional, well-lit and appropriately furnished.

Where used for Telehealth, specific requirements for security, equipment storage and interior design should be incorporated and a minimum 12m² will be required

A Meeting Room shall be 9 m² or 12 m².

LOCATION AND RELATIONSHIPS

Near main Waiting Area with easy access to public amenities, Unit entry and away from Treatment Areas.

Where used for accommodation of distressed relatives, it should be located in a quiet low traffic area.

In Emergency, it should be located near the Resuscitation Area.

Where the room is used after hours, access to other parts of the facility should be restricted.

CONSIDERATIONS

For additional room considerations and details refer to Room Data Sheets and Room Layout Sheets.

Meeting Room - Medium/Large

90.30.00 DESCRIPTION AND FUNCTION

The Medium and Large Meeting Rooms will accommodate staff and other meetings such as those held with the visiting Magistrate in a Mental Health Unit. It may also be used for training or educational purposes.

All rooms should be multi functional, well lit and appropriately furnished.

A Meeting Room for Seminar/Training purposes is used for the tutoring and supervision of students, of varying categories away from the bedside. It will also be used for teaching sessions involving patients and staff or patients and their relatives, group discussions and lectures. It may also be use for patient conferences, reporting, and consultations. It will be generally shared with other Units.

A Seminar/Training room shall be 15 m². It will accommodate 5 - 10 people.

A Medium Meeting Room shall be 20 m² and accommodate 12 - 15 people.

A Large Meeting Room shall be 25 - 30 m² and accommodate 15 - 25 people.

LOCATION AND RELATIONSHIPS

A Seminar/Training Room may be located in a low traffic area on the periphery of Unit, or between a number of Inpatient Units.

A Meeting Room should be close to the entry point for a Unit to enable ready access for people from outside the Unit and also shared use by other Units.

Where meeting rooms are accessed after hours, access to other parts of the facility should be restricted.

In a Mental Health Unit, a Magistrate's Room should be accessible from the Entry/Reception Areas as well as from Inpatient Areas. Discreet access from the Secure Unit should be provided for patients to attend magisterial sessions.

CONSIDERATIONS

Where used as a Magistrate's Room, two points of exit should be provided. Duress alarms will be required and more than one telephone outlet provided. Video, Telepsychiatry/Telemedicine and teleconferencing facilities may be required. If so, sufficient space should be provided for storage and securing of equipment. For further information refer to 'Memorandum of Understanding for the Conduct of Review Hearings under the Mental Health Act by Magistrates of the NSW Local Court, December 1999', and to Part C of these Guidelines.

Where used for Telehealth, specific requirements for security, equipment storage and interior design should be incorporated.

For additional room considerations and details refer to Room Data Sheets.

Neonatal Bay - General Care

90.30.10 DESCRIPTION AND FUNCTION

Part B - Health Facility Briefing and Planning

A single Bay for the care of well babies away from their mother's bed area which may include treatments such as phototherapy or in order to give a sick mother a period of respite..

The Neonatal Bay shall be a minimum of 6 m², which includes a circulation area of one metre between bays.

LOCATION AND RELATIONSHIPS

The Neonatal Bay - General Care may be located either in the Neonatal Nursery or in the Postnatal Inpatient Unit observable for the Staff Station.

CONSIDERATIONS

A staff handwash basin (type A or B) should be provided for each four Neonatal Bays - General Care.

For additional room considerations and details refer to Room Data Sheets and Room Layout Sheets.

Neonatal Bay - Intensive Care

90 .30.25 DESCRIPTION AND FUNCTION

A single Bay or Room for Level 3 neonates requiring Intensive nursing and medical treatment.

The Bay (or room) will include provisions for charting, storage and a zone for parents.

The Neonatal Bay/ Room - ICU shall be a minimum of 12m² for low level 3 cots and high level 2 cots and 14m² for high level 3 cots.

In multi-bed rooms a minimum of 2.4 metres is required between infants' cots with an aisle of 1.2 metres between facing cots.

Provision of handbasins and additional storage is not included in the area for the cot.

LOCATION AND RELATIONSHIPS

The Neonatal Bay - ICU will be located within the Level 3 or high Level 2 zone of the Neonatal Unit with ready access from the Birthing Unit, Operating Suite and the Postnatal Maternity Inpatient Unit .

There will need to be a clear and rapid means of access from the Emergency Unit and Helipad for retrieved babies.

CONSIDERATIONS

A staff clinical handwash basin (Type A) is required in close proximity to each Neonatal Bay - ICU.

Each Bay shall be within six metres of a handwash basin. If a room is provided, the handbasin shall be located within the room.

For additional room considerations and details refer to Room Data Sheets and Room Layout Sheets.

Neonatal Bay - Special Care

90 .30.30 DESCRIPTION AND FUNCTION

A single Bay for neonates requiring Special Care nursing and medical treatment. The Bay will include provisions for charting and storage and facilities for parents.

The Neonatal Bay/ Room - ICU shall be a minimum of 10 m². In multi-bed Rooms, a minimum of 1.2 metres is required between infants' beds, with an aisle of 1.5 metres between facing cots.

Part B - Health Facility Briefing and Planning

LOCATION AND RELATIONSHIPS

The Neonatal Bay - Special Care will be located within the Intensive Care Unit - Neonatal/ Special Care, which will have ready access to the Maternity Inpatient Unit, Birthing Unit and Operating Unit.

CONSIDERATIONS

A staff clinical handwash basin (type A) is required in close proximity to each Neonatal Bay - Special Care.

For additional room considerations and details refer to Room Data Sheets and Room Layout Sheets.

Office - 2 Person Shared

90.31.00 DESCRIPTION AND FUNCTION

The Office is where two staff can carry out administrative functions in a degree of privacy. This includes preparing rosters, reports, counselling, interviewing staff and patients.

The Office shall be 12 m².

LOCATION AND RELATIONSHIPS

Away from clinical areas.

CONSIDERATIONS

The Office should be lockable.

For additional room considerations and details refer to Room Data Sheets and Room Layout Sheets.

Office - 3 Person Shared

90.32.00 DESCRIPTION AND FUNCTION

A 3 Person Shared Office is for three persons to carry out administrative functions in a degree of privacy. This includes preparing rosters, reports, counselling, interviewing staff and patients.

A 3 Person Shared Office shall be 15 m².

LOCATION AND RELATIONSHIPS

Away from Clinical Areas.

CONSIDERATIONS

The Office should be lockable.

For additional room considerations and details refer to Room Data Sheets and Room Layout Sheets.

CONSIDERATIONS

The Office should be lockable.

For additional room considerations and details refer to Room Data Sheets and Room Layout Sheets.

Office - 4 Person Shared

90.33.00 DESCRIPTION AND FUNCTION

Office space to be shared by four persons for carrying out administrative functions in

Part B - Health Facility Briefing and Planning

a degree of privacy. This includes preparing rosters, reports, counselling, interviewing staff and patients.

A 4 Person Shared Office shall be 20 m2.

LOCATION AND RELATIONSHIPS

Away from Clinical Areas.

CONSIDERATIONS

The Office should be lockable.

For additional room considerations and details refer to Room Data Sheets and Room Layout Sheets.

Office - Clinical/Handover

90.34.00 DESCRIPTION AND FUNCTION

An office for staff to write up notes, view digital imaging, hold confidential discussions and store records. It may also be used for handovers.

Floor area shall be 12 m2; although the actual size will be dictated by the number of staff using this space at any one time.

LOCATION AND FUNCTION

Adjacent to the Staff Station.

CONSIDERATIONS

For additional room considerations and details refer to Room Data Sheets and Room Layout Sheets.

Office - Single Person 9 m2

90.35.00 DESCRIPTION AND FUNCTION

A Single Person Office where Unit Managers can carry out administrative functions in a degree of privacy. This includes preparing rosters, reports, counselling, interviewing staff and patients.

A Single Person Office shall be 9 m2.

LOCATION AND RELATIONSHIPS

Close to the Staff Station in a quieter traffic area.

CONSIDERATIONS

The Office should be lockable.

For additional room considerations and details refer to Room Data Sheets and Room Layout Sheets.

Office - Single Person 12 m2

90.36.00 DESCRIPTION AND FUNCTION

A Single Person 12 m2 Office is where a Director or other senior manager can carry out administrative functions in a degree of privacy. This includes preparing reports, counselling, interviewing staff, patients and their families.

LOCATION AND RELATIONSHIPS

Away from Clinical Areas, preferably located with other Office Areas.

Part B - Health Facility Briefing and Planning

Office - Workstation

90.37.00 DESCRIPTION AND FUNCTION

An area within an open plan arrangement designed for staff to carry out administrative functions.

A Workstation shall be between 4.4 and 5.5 m² depending on occupant and function.

LOCATION AND RELATIONSHIPS

Within a shared open plan office area. Away from Clinical Areas.

Office - Write-up Bay

90.38.00 DESCRIPTION AND FUNCTION

This bay provides an area for use by members of the patient care team to review and write-up patient records, enter patient data on computer and make telephone calls.

The Write-up Bay shall be a minimum of 3 m².

LOCATION AND RELATIONSHIPS

The Write-up Bay should be located near patient care areas and.

CONSIDERATIONS

The Write-up Bay should be recessed sufficiently so that a seated staff member does not cause an obstacle to corridor traffic.

For additional room considerations and details refer to Room Data Sheets and Room Layout Sheets.

Operating Room - General

90.39.00 DESCRIPTION AND FUNCTION

The Operating Room provides an aseptic environment in which to carry out surgical procedures, under local, regional or general anaesthetic.

A General Operating room shall be 42 m².

This theatre can be used for:

- + ENT;
- + Urology;
- + Gynaecology;
- + Ophthalmology;
- + General;
- + Plastics;
- + Any other procedures which do not require specialised bulky equipment.

Hours of operation: to suit Operational Policies - some may be available 24 hours per day.

The use of manual handling equipment may be required to move patients from/to the operating table. Sufficient space should be provided for use and storage of the equipment within the theatre complex.

LOCATION AND RELATIONSHIPS

Part B - Health Facility Briefing and Planning

The Operating Room is the focal point of the Operating Suite. A direct relationship with the following support areas is required:

- + Holding/Anaesthetic Bay;
- + Scrub Up Room;
- + Exit Area;
- + Instrument Trolley/Cart Assembly/Holding Area;
- + Sterilising Bay;
- + Clean-Up Area.

Direct access is required to the:

- + Associated Scrub Up Room;
- + Exit Area;
- + Instrument Trolley/Cart Assembly/Holding Area.

Ready access is required to:

- + Sterilising Bay;
- + Holding Bay;
- + Anaesthetic Room.

CONSIDERATIONS

It is essential at least one wall not only be free from door openings, but also free from those services which require frequent attention. This provides an area for sterile equipment and scrubbed personnel, which is not compromised by traffic in and out of the Operating Room or to and from the serviced item. It is preferable for the adjacent wall to be free, or impinged upon only for exit from the Operating Room.

For additional room considerations and details refer to Room Data Sheets and Room Layout Sheets.

Operating Room - Large

90.40.00 DESCRIPTION AND FUNCTION

The Operating Room provides an aseptic environment in which to carry out surgical procedures, under local, regional or general anaesthetic.

A Large Operating room shall be 50 m².

This Operating Room can be used for:

- + Neurosurgery;
- + Orthopaedics;
- + Cardiac;
- + Any other procedures which require specialised bulky equipment.

Hours of operation: to suit Operational Policies - some may be available 24 hours per day.

LOCATION AND RELATIONSHIPS

The Operating Room is the focal point of the Operating Suite. A direct relationship with the following support areas is required:

Part B - Health Facility Briefing and Planning

- + Holding/Anaesthetic Bay;
- + Scrub Up Room;
- + Exit Area;
- + Instrument Trolley/Cart Assembly/Holding Area;
- + Sterilising Bay;
- + Clean-Up Area.

Direct access is required to the:

- + Associated Scrub Up Room;
- + Exit Area;
- + Instrument Trolley/Cart Assembly/Holding Area.

Ready access is required to:

- + Sterilising Bay;
- + Holding Bay;
- + Anaesthetic Room.

CONSIDERATIONS

It is essential at least one wall not only be free from door openings, but also free from those services which require frequent attention. This provides an area for sterile equipment and scrubbed personnel, which is not compromised by traffic in and out of the Operating Room or to and from the serviced item. It is preferable for the adjacent wall to be free, or impinged upon only for exit from the Operating Room.

For additional room considerations and details refer to Room Data Sheets and Room Layout Sheets.

Operating Room - Minor Scopes

90.41.00 DESCRIPTION AND FUNCTION

The Operating Room provides an aseptic environment in which to carry out surgical procedures, under local, regional or general anaesthetic.

A Minor/Scopes Room shall be between 30 and 36 m² depending on need.

This Operating Room can be used for:

- + Endoscopic procedures;
- + Reduction of fractures and application of plasters;
- + Bronchoscopy and sputum induction - in which case negative pressure HVAC will be required due to risk of TB infection.
- + Other minor procedures;
- + Any other procedures which do not require specialised bulky equipment.

Where endoscopic procedures are performed, space for cleaning of scopes is required within or adjacent to the Operating Room.

Hours of operation: to suit Operational Policies - some may be available 24 hours per day.

Part B - Health Facility Briefing and Planning

LOCATION AND RELATIONSHIPS

The Operating Room is the focal point of the Operating Suite. A direct relationship with the following support areas is required:

- + Holding/Anaesthetic Bay;
- + Scrub Up Room;
- + Exit Area;
- + Instrument Trolley/Cart Assembly/Holding Area;
- + Sterilising Bay;
- + Clean-Up/Clean-Up - Scopes Areas.

Direct access is required to the:

- + Associated Scrub Up Room;
- + Exit Area;
- + Instrument Trolley/Cart Assembly/Holding Area.

Ready access is required to:

- + Sterilising Bay;
- + Holding Bay;
- + Anaesthetic Room.

CONSIDERATIONS

It is essential at least one wall not only be free from door openings, but also free from those services which require frequent attention. This provides an area for sterile equipment and scrubbed personnel, which is not compromised by traffic in and out of the Operating Room or to and from the serviced item. It is preferable for the adjacent wall to be free, or impinged upon only for exit from the Operating Room.

For additional room considerations and details refer to Room Data Sheets and Room Layout Sheets.

Overnight Stay - Bedroom

90.41.05 DESCRIPTION AND FUNCTION

Domestic-style single bedroom for clinical staff or family needing to remain on close call overnight.

There may be an adjoining en suite or access to shared showers and toilets in close vicinity.

LOCATION AND RELATIONSHIPS

The Overnight Stay Bedroom shall be located in a discrete area with ready access to the critical care areas.

CONSIDERATIONS

The room should be lockable and requires acoustic privacy.

Staff or parents using the Overnight Stay facilities need to be contactable using a telephone or paging system.

For additional room considerations and details refer to Room Data Sheets and Room Layout Sheets.

Part B - Health Facility Briefing and Planning

Overnight Stay - Ensuite

90.41.10 DESCRIPTION AND FUNCTION

En suite or shower/toilet compartment for use by staff or families occupying Overnight Bedrooms.

LOCATION AND RELATIONSHIPS

If en suite, access will be from the Bedroom. If separate, access from a discrete corridor

CONSIDERATIONS

For additional room considerations and details refer to Room Data Sheets and Room Layout Sheets.

Parenting Room

90.42.00 DESCRIPTION AND FUNCTION

A Parenting Room is provided for parents to feed and change babies.

LOCATION AND RELATIONSHIPS

A Parenting Room must be located with other child related facilities and have direct ready access to a Toilet and a Waiting Area.

CONSIDERATIONS

For additional room considerations and details refer to Room Data Sheets and Room Layout Sheets

Patient Bay

90.43.00 DESCRIPTION AND FUNCTION

A Patient Bay may be used for the treatment or management of patients.

The various types of treatment or holding spaces will accommodate appropriately assessed patients.

Depending on the type of space, the patient will receive clinical intervention ranging from resuscitation through critical, acute and non acute treatment, to observation or holding.

The options for Patient Bays are:

- + Resuscitation;
- + Critical;
- + Acute Treatment;
- + Non Acute Treatment;
- + Holding;
- + Recovery, Stage 1.

The size of the bay will depend on its type or purpose. Each bay will have an adult and a paediatric version.

LOCATION AND RELATIONSHIPS

Generally with other Patient Treatment Areas and near the Staff Station.

Patient Bays may be enclosed or unenclosed. This will affect the floor space required.

CONSIDERATIONS

For additional room considerations and details refer to Room Data Sheets and Room Layout Sheets.

Pharmacy-Counter, 9m2

90 .43.05 DESCRIPTION AND FUNCTION

The Pharmacy Counter provides storage of prepared outpatient prescriptions awaiting collection and collection, receipt and secure storage of payments.

A hatch or hatches are required for across-counter delivery to patients that must be secured by a roller grille or shutter when not in use.

Patients requiring further instruction/counselling re use of medications will be directed to the adjoining Interview Room.

LOCATION AND RELATIONSHIPS

The area should be located at the front of the Unit and adjacent to the waiting area and the Patient Counselling area.

Direct access is required into the Interview Room and into the Assembly/Preparation Area. This latter must however be screened from public view.

CONSIDERATIONS

Security of staff and privacy, including acoustic privacy, for the patient is of paramount importance.

A duress alarm must be located in the area.

An attention-seeking call device may be required to summon the staff when the counter is unattended.

A public address/intercom may be installed to summon the patient by name.

Wall storage is required for drug administration pamphlets.

Refer to Part C of these Guidelines for further information on security.

For additional room considerations and details refer to Room Data Sheets and Room Layout Sheets.

Plaster Room

90 .44.00 DESCRIPTION AND FUNCTION

The Plaster Room allows for the application of Plaster of Paris and for the closed reduction under sedative or regional anaesthesia, of displaced fractures or dislocations. General anaesthesia will not be administered in this room.

Locate with ready access from both Waiting Area and Treatment Area.

A Plaster Room shall be 14 m2.

LOCATION AND RELATIONSHIPS

Locate with ready access from both Waiting Area and Treatment Area.

CONSIDERATIONS

A Splint and Crutch Store will be accessible to the Plaster Room.

Clear access to the plaster trap is required for maintenance purposes

Part B - Health Facility Briefing and Planning

For additional room considerations and details refer to Room Data Sheets and Room Layout Sheets.

Play Area

90 .45.00 DESCRIPTION AND FUNCTION

A Play Area is an area where children may play while parents wait or are attended to by community health staff.

Security of children is a primary consideration.

Unless otherwise specified in the Operational Policies, staff of the facility will not be responsible for supervision of the children.

The Play Area should be designed to:

- + Enable children to be actively distracted;
- + Keep children within the area;
- + Minimise noise transfer;
- + Be observable from the Waiting Area;
- + Ensure the area and equipment provided within is safe.

Natural lighting is desirable.

LOCATION AND RELATIONSHIPS

The Play Area should be located immediately adjacent to the Waiting Area. An external area may also be provided.

The Play Area should relate to sub-waiting areas for Early Childhood, Child and Family and other child-related areas if these services are provided.

Preparation Room - Non Sterile

90 .45.05 DESCRIPTION AND FUNCTION

The Non-sterile Preparation area is a space where extemporaneous medications can be compounded.

Functions and Activities include:

- formulating / compounding lotions, mixture, ointments, creams, powders, suppositories and non-sterile drops
- making up mixtures for oral administration
- diluting antiseptic fluids

LOCATION AND RELATIONSHIPS

Non Sterile Preparation Room should be located adjacent to the Assembly/Preparation area with ready access to the Active Store.

CONSIDERATIONS

This area is a wet area and attention should be paid to work benches and floor coverings to ensure safe and clean working conditions.

Task lighting will be required at each work station.

Internal temperatures should not rise above 25 degrees Celsius.

For additional room considerations and details refer to Room Data Sheets and Room Layout Sheets.

Preparation / Setup Room (Imaging)

Part B - Health Facility Briefing and Planning

90.45.10 DESCRIPTION AND FUNCTION

The Preparation/Set-Up Room of the Medical Imaging Unit is an area where radiological media, sterile supplies and consumables and some pharmaceuticals including dangerous drugs are stored and where procedure trays and trolleys are assembled and set-up. (Latter function may occur in the Procedure Rooms).

Staff scrub facilities will be required.

Size will be determined by the number of procedure rooms, the required stock levels of sterile supplies and consumables and more than one such room may be required in a large Medical Imaging Unit.

LOCATION AND RELATIONSHIPS

Locate adjacent to or between the related Procedure Rooms.

In an Interventional Suite, ready access from staff change areas.

Ready access to main corridor for delivery of supplies.

CONSIDERATIONS

No dirty articles should be returned to this room. No cleaning sink should be provided.

Controlled access for authorised staff only.

Consideration needs to be given to the shelving system – fixed, mobile or light-weight compactus. Whatever is selected it must have no projections or sharp edges that could damage goods.

For additional room considerations and details refer to Room Data Sheets and Room Layout Sheets.

Procedure Room

90.46.00 DESCRIPTION AND FUNCTION

The Procedure Room may be required for the performance of procedures that do not require the full facilities of the Operating Suite.

This may include suturing of wounds and dressings, administration of local anaesthetics and use of medical gases in connection with procedures being performed.

Other procedures that may be carried out in a larger Procedure Room in a unit such as the Emergency Dept may include lumbar puncture, tube thoracostomy, thoracocentesis, abdominal paracentesis, bladder catheterisation, suturing and other minor procedures.

General anaesthesia will not be administered in this room.

A Procedure Room shall be 14 m².

LOCATION AND RELATIONSHIPS

Adjacent to Resuscitation and Acute Treatment Bays.

CONSIDERATIONS

For additional room considerations and details refer to Room Data Sheets and Room Layout Sheets.

Property Bay - Staff

90.47.00 DESCRIPTION AND FUNCTION

The Staff Property Bay is for the secure storage of staff property including clothing,

Part B - Health Facility Briefing and Planning

handbags and personal effects.

Floor area shall be 2m², although final calculation of floor area will depend on the number of lockers required for staff numbers working in the Unit.

LOCATION AND RELATIONSHIPS

Staff Property Bays shall be located adjacent to Staff Stations or main Work Areas for security.

CONSIDERATIONS

For additional room considerations and details refer to Room Data Sheets and Room Layout Sheets.

Pantry

90.47.05 DESCRIPTION AND FUNCTION

The Pantry is for preparing and/or heating refreshments, snacks and some meals for patients, washing some utensils, storing food and drink and disposing of food waste. It may also provide space for a meal tray collection trolley.

The Pantry shall be a minimum of 8 m². If food rethermalisation trolleys are to be located in the room during meal times, up to an additional 4 m² should be added to the total area.

LOCATION AND RELATIONSHIPS

The Pantry should have ready access to patient areas and the Unit corridor.

CONSIDERATIONS

For additional room considerations and details refer to Room Data Sheets.

Reception

90.48.00 DESCRIPTION AND FUNCTION

An area where visitors to the Unit or Facility can be received and either immediately directed to their destination or to a Waiting Area. May also act as the access control to the unit.

Depending on the Unit, initial contact may be made here with clients/patients/carers for enquiries, appointments and intake, both personally and by telephone.

A Reception Area shall be 10 m², although this will vary according to Unit and number of staff.

The reception counter should be welcoming and non threatening, but provide separation between patients/clients/visitors and staff and be capable of being secured after hours. The need for security barriers should be carefully considered in relation to the risk, the type of services to be provided from the unit/facility and the local community environment.

Where moveable barriers are used to secure the space after hours, safe manual handling practices should be ensured.

In some Units, this area may be combined with an Administration Office to create one larger space. Switchboard operation, computer operation, filing and other clerical duties may also be undertaken in this area.

LOCATION AND RELATIONSHIPS

The Reception should be near the entry point of the Unit or Facility and adjacent to the Waiting Area, with direct visual surveillance available of both these areas.

Clients and visitors should not be able to gain access to Treatment Areas or Staff

Part B - Health Facility Briefing and Planning

Areas without presenting to Reception.

CONSIDERATIONS

Refer to Part C for information regarding counter heights, including access requirements.

For additional room considerations and details refer to Room Data Sheets and Room Layout Sheets.

Scrub-Up

90.49.00 DESCRIPTION AND FUNCTION

Scrub Up provides an enclosed area for pre-operative scrubbing, gowning and gloving.

LOCATION AND RELATIONSHIPS

The Scrub Up area should be directly accessible from the Operating Suite corridor and from the associated Operating or Procedure rooms.

Access should be also be available from the Staff Change and Staff Lounge.

A floor area of 8 m² should be allowed per Operating Room, or 10 m² where one Scrub-Up Bay is shared between two Operating Rooms.

CONSIDERATIONS

The activities of scrubbing and gowning/gloving should be separated within the space.

For additional room considerations and details refer to Room Data Sheets and Room Layout Sheets.

Screening Room (Fluoroscopy)

90.49.10 DESCRIPTION AND FUNCTION

The functions and activities of the Screening (Fluoroscopy) Room involve the administration to the patient of a contrast media which will suitably outline an organ or system, and subsequent radiological examination utilising fluoroscopic equipment.

With the general decline in use of barium contrast studies and advances in equipment technology, general screening and angiography may sometimes be appropriately combined in one room.

General procedures commonly involve the administration of:

- Barium sulphate, in the form of a barium enema, barium meal or swallow for gastrointestinal studies and/or
- Organic iodine compounds, e.g. T-tube cholangiography, cholecystogram, endoscopic retrograde cholangio-pancreatography (ERCP), percutaneous insertions, percutaneous double J stent insertions

Specialised procedures, e.g. angiography. The examination will additionally involve:

- Aseptic procedural precautions
- Availability of in-room resuscitation equipment
- Complex and dedicated angiography equipment and power sources.

It is important that the intended scope of the Screening room be clarified early in the planning process.

There are alternative means of providing angiography. Recent developments in digital acquisition screening equipment have resulted in dedicated subtraction equipment only being justifiable when high numbers of angiograms are required.

Digital screening rooms, if correctly optioned at time of installation, are capable of performing a full range of peripheral angiograms and also the more general selective

Part B - Health Facility Briefing and Planning

angiograms.

LOCATION AND RELATIONSHIPS

The space should be conveniently located with respect to the Emergency Unit.

Area: 36m² standard room

Area: 42m² minimum if digital angiography plus equipment/computer room and enlarged control room. Subject to user justification and manufacturer's requirements

Located adjacent to patient change cubicle/WC that should be accessible from within the room and the Unit corridor.

Ready access to Patient Holding/Recovery Area, Processing areas, Reporting Room and Waiting.

CONSIDERATIONS

Floor and ceiling structural capacity must be determined in line with equipment load. Refer to manufacturer's data.

Ceiling height minimum 2700mm, 3000mm preferable. Refer to trade data for equipment selected.

Bed/trolley access and manoeuvrability is essential.

Where procedural work is to be carried out, a patient monitoring system should be considered with functional location appropriate to the trolley/table position.

Serviced for general anaesthesia.

Set-Up

90 .49.20 DESCRIPTION AND FUNCTION

More correctly, an "Assembly" Room – an area where trolleys for each case are assembled – i.e. loaded with sterile packs and required consumables, and held prior to delivery into the operating room where "set-up" will occur i.e. opening and laying out of the contents of packs.

LOCATION AND RELATIONSHIPS

Set-Up Room may be located in an area central to all operating rooms, or may be a number of smaller rooms either dedicated to a single operating room or shared between a pair of operating rooms. The decision will affect the size of the space.

If smaller, dispersed rooms, will require ready access from the Operating Unit's main Sterile Stock Store.

CONSIDERATIONS

May additionally provide the location for a fluid warming cabinet.

Handbasin required but not scrub facilities.

Seclusion Room

90 .50.00 DESCRIPTION AND FUNCTION

The usage of this space will vary from Unit to Unit. However, it will generally be used to accommodate and to manage the behaviour of disturbed, aggressive or violent patients.

It will provide a safe and secure environment for a patient, and meet OHS Guidelines for staff safety.

It will be occupied for short periods of time, either on an involuntary or voluntary basis.

Part B - Health Facility Briefing and Planning

A patients should be able to be observed continually while in the Seclusion Room.

A Seclusion Room shall be 14 m2.

LOCATION AND RELATIONSHIPS

The Seclusion Room should be easily observable from the Staff Station and have no 'blind spots'.

Two doors should be provided into the room for safe exit. Both doors should be able to be locked or unlocked from outside the room.

Acoustic treatment of the room is required to provide noise isolation.

CONSIDERATIONS

The Seclusion Room will require a door with an external swing and a viewing panel and be secure in construction with specific locks. The door shall be wide enough for three staff abreast and can be lockable inside and outside with a key.

The door to the seclusion room and walls must be capable of withstanding extreme force from inside the room in the event that the patient tries to force their way out.

Finishes, furniture fittings and fixtures must be robust and not provide an opportunity for shelf harm. The room must meet OH&S Guidelines for staff safety.

For additional room considerations and details refer to the Room Data Sheets.

Service Areas

90.51.00 SERVICE ENTRY / LOADING BAY

DESCRIPTION AND FUNCTION

A separate Service Entry should be provided in larger health facilities to allow deliveries and for the collection of waste, linen, etc without having to pass through the main entrance of the building.

Design considerations include:

- + Adequate vehicle manoeuvring space;
- + Shelter from inclement weather;
- + Space for temporary storage of items such as trolleys, furniture and equipment.

LOCATION AND RELATIONSHIPS

Provide direct access to the Waste Holding Area and ready access to stores for therapy equipment and mobility aids if provided.

CONSIDERATIONS

For additional room considerations and details refer to Room Data Sheets and Room Layout Sheets.

Shower - Patient

90.52.00 DESCRIPTION AND FUNCTION

The Patient Shower is a room for patients to shower or wash either independently or with nurse assistance. Shower chair access is required.

A Patient Shower shall be 4 m2.

LOCATION AND RELATIONSHIPS

Part B - Health Facility Briefing and Planning

Immediately adjacent to or directly accessible from Bed Rooms, or to Unit corridor.

CONSIDERATIONS

The door must be fitted with escape hardware to allow staff access in an emergency.

For additional room considerations and details refer to Room Data Sheets and Room Layout Sheets.

Shower - Staff

90 .53.00 DESCRIPTION AND FUNCTION

The Staff Shower will be used for staff to shower, wash, shave, dry hair, etc.

The floor area shall be 2 m2.

LOCATION AND RELATIONSHIPS

The Staff Shower shall be near the Staff Toilet, Staff Change, and Staff Lounge Areas.

CONSIDERATIONS

A privacy latch is required.

For additional room considerations and details refer to Room Data Sheets and Room Layout Sheets.

Staff Room

90 .54.00 DESCRIPTION AND FUNCTION

The Staff Room is for staff to use for respite, rest and relaxation during tea or meal breaks, especially where it is difficult for staff to use centrally located facilities including at night. It may also be used for small meetings or tutorials and for the storage of staff resources or library materials.

The size of the staff room will depend on the level of service and number of staff who will use the room. Floor area shall be 18sqm in a general Inpatient Unit, assuming it is shared between 2 units.

LOCATION AND RELATIONSHIPS

The Staff Room should be located away from the Patient Bed Rooms and main Treatment Areas. Where possible, the Staff Room should be shared between two Inpatient Units, or one per floor provided in a larger Facility.

It should be placed anywhere convenient in a quiet area, away from Patient and Visitor Areas.

CONSIDERATIONS

Facilities for food and beverage preparation and storage should be provided.

For additional room considerations and details refer to Room Data Sheets and Room Layout Sheets.

Staff Station

90 .55.00 DESCRIPTION AND FUNCTION

The Staff Station is the administrative base for the Unit.

This area is for observation plus the writing up of clinical notes, entering data into computers, making and receiving telephone calls.

Floor area varies according to the Planning Unit and depends on its activity level, the number of full and part-time staff, the operational model and building layout.

Part B - Health Facility Briefing and Planning

For planning purposes, the floor area for a Staff Station in a 30 Bed IPU shall be 14 m².

Also refer to the Room Data and Room Layout Sheets for 5 and 10 m² Staff Stations.

LOCATION AND RELATIONSHIPS

At least one Staff Station shall be provided within an Inpatient Unit, central to Bed Rooms to allow observation.

CONSIDERATIONS

The model of care adopted will determine the need for additional stations and their placement within the Unit.

For additional room considerations and details refer to Room Data Sheets and Room Layout Sheets.

Store - Accountable Drug

90.55.05 DESCRIPTION AND FUNCTION

The Accountable Drugs Store is a strongroom in the Pharmacy in which accountable drugs are stored, e.g. narcotics, which are required by law to be securely stored and a register kept of their use.

The store may be a safe or a walk-in room depending on the quantity of drugs to be stored.

Refrigerated storage may also be required.

Facilities must comply with NSW Health Pharmaceuticals Branch Policy.

LOCATION AND RELATIONSHIPS

The Accountable Drugs Store should be located in a discrete area of the Unit, overseen by the Office of the Chief Pharmacist and accessible from the Assembly/Preparation area. It should not be located on an outside wall or stairwell.

CONSIDERATIONS

The door to the room should be electronically monitored.

The temperature of the store should not exceed 25o C.

Refer to Part C of these Guidelines for further information on security.

For specific details regarding construction and security, refer to the Room Data and Room Layout Sheets.

Store - Bulk (Pharmacy)

90.55.10 DESCRIPTION AND FUNCTION

The Bulk Store is a secure space (if separate from the Pharmacy proper) or part of the open plan space in the Unit for storage of bulk items that are either for use in the Pharmacy or that are dispensed by the Pharmacy. Includes such items as Intravenous and dialysis fluids.

If the Bulk Store is remote, it must not be used for storing pharmaceuticals that must be transferred to the Pharmacy immediately on receipt.

Functions and Activities include:

- sorting and binning bulk items
- selecting and unpacking items to replenish the Active Store
- selecting items not normally stored in the Active Store
- checking and maintaining stock levels

Part B - Health Facility Briefing and Planning

- inspecting stock for end of shelf life
- preparing replenishment orders
- storage of cardboard waste for disposal.

LOCATION AND RELATIONSHIPS

The Bulk Store should be located on the periphery of the Unit adjacent to the Goods Receipt Area and contiguous with the Active Store.

CONSIDERATIONS

The temperature of the store should not exceed 25o C.

Refer to Part C of these Guidelines for further information on security.

For additional room considerations and details refer to Room Data Sheets and Room Layout Sheets.

Store - Cleaner's

90 .56.00 DESCRIPTION AND FUNCTION

The Cleaner's Store is a bulk store provided for the central storage of large items of cleaning equipment, bulk containers of cleaning chemicals and a cleaner's trolley.

The Cleaner's Store shall be 12 m2.

LOCATION AND RELATIONSHIPS

The Cleaner's Store should be located with other storage areas, or in a central location where cleaning staff can easily access it in the course of their duties.

CONSIDERATIONS

Clean paper goods such as toilet paper and paper hand towels should be stored in an adjacent dry store or cupboard. The room must be lockable and comply with OHS and Infection Control Guidelines.

For additional room considerations and details refer to Room Data Sheets and Room Layout Sheets.

Store - Drugs

90 .56.10 DESCRIPTION AND FUNCTION

A room for secure storage of medications in wards and departments. A drug refrigerator, dangerous drug safe, small sink and space for a computer will be required.

Depending on the operational policy, the facilities contained within the room may be incorporated into the Clean Utility Room.

Size will be determined by the size of the Unit in which the room is housed.

Consideration may need to be given to the possible future installation of automated dispensing systems and their spatial and data needs.

LOCATION AND RELATIONSHIPS

In a secure area of the Unit away from public view.

Direct access from a public corridor should be avoided.

CONSIDERATIONS

Alarms to door and refrigerator

Refer to the Section C of these guidelines for further security details and to Room Data and Room Layout Sheets.

Store - Equipment

90 .57.00 DESCRIPTION AND FUNCTION

The Equipment Store is used for the storage of medical equipment when not in use and recharging of electrical items. Space is required for parking of mobile equipment including IV poles, wheelchairs, lifting equipment, trolleys, cradles and commode chairs for the Unit.

Size will vary depending on the Unit size and service profile and the use/provision of bays for mobile equipment.

LOCATION AND RELATIONSHIPS

Centrally located in a low traffic area, with access to all patient areas.

CONSIDERATIONS

The Equipment Store should be lockable

Doors and entries should be sized and located to facilitate handling.

For additional room considerations and details refer to Room Data Sheets and Room Layout Sheets.

Store - File

90 .58.00 DESCRIPTION AND FUNCTION

A secure room for the storage of confidential information.

Floor area shall be 10 m2.

LOCATION AND RELATIONSHIPS

Adjacent to Office Areas served. A number of stores are required for the various administrative functions accommodated.

CONSIDERATIONS

The File Store should be lockable

For additional room considerations and details refer to Room Data Sheets and Room Layout Sheets.

Store - General

90 .59.00 DESCRIPTION AND FUNCTION

This is a secure room for the storage of general supplies used within the department. Equipment may also be re-charged in this room.

Floor area shall be 9 or 10m2.

LOCATION AND RELATIONSHIPS

Centrally located within an HPU or group of departments when shared. Locate in a low traffic area with access to all patient areas.

CONSIDERATIONS

The General Store should be lockable

For additional room considerations and details refer to Room Data Sheets and Room Layout Sheets.

Part B - Health Facility Briefing and Planning

Store - Medical Gases

90 .60.00 DESCRIPTION AND FUNCTION

A Medical Gas Store is required to provide a safe and secure environment for the storage of various gas cylinders, if used at a facility. Storage enclosures must be adequately ventilated.

LOCATION AND RELATIONSHIPS

Locate with loading and service areas.

Store - Photocopy/Stationery

90 .61.00 DESCRIPTION AND FUNCTION

A secure room for the storage of office stationery and for use of a photocopier.

Floor area shall be 8 m2.

LOCATION AND RELATIONSHIPS

Adjacent to Office Areas served.

CONSIDERATIONS

Exhaust from photocopier to be provided to meet OHS requirements.

For additional room considerations and details refer to Room Data Sheets and Room Layout Sheets.

Store - Sterile Stock

90 .62.00 DESCRIPTION AND FUNCTION

The Sterile Stock Store stores sterile stock for use in the Operating Suite or other Treatment Areas.

Floor area shall be 12 m2 per operating room.

LOCATION AND RELATIONSHIPS

The Sterile Stock Store for an Operating Suite (not CSSU) should be located near the Operating Rooms or other Treatment Areas.

CONSIDERATIONS

For additional room considerations and details refer to Room Data Sheets and Room Layout Sheets.

Toilet - Disabled

90 .63.00 DESCRIPTION AND FUNCTION

A toilet and hand basin for use by disabled persons with or without assistance. The room shall comply with AS1428-1/2.

The Disabled Toilet shall be 5 m2.

LOCATION AND RELATIONSHIPS

Disabled toilets for public use should be readily accessible from Public Areas.

Doors should open outwards and be fitted with emergency release function.

CONSIDERATIONS

The Disabled Toilet may also include facilities for baby change.

For additional room considerations and details refer to Room Data Sheets and Room Layout Sheets.

Toilet - Patient

90 .64.00 DESCRIPTION AND FUNCTION

A toilet and hand basin for patient use without assistance, or with the assistance of one or two nurse/carers - 'fully assisted'.

A Patient Toilet shall be 4 m2.

LOCATION AND RELATIONSHIPS

Immediately adjacent to, or directly accessible from Patient Bed Rooms, Unit corridor or Patient Areas served.

CONSIDERATIONS

Doors should open outwards and be fitted with emergency release function

For additional room considerations and details refer to Room Data Sheets and Room Layout Sheets.

Toilet - Public

90 .65.00 DESCRIPTION AND FUNCTION

A toilet and hand basin for public or visitor use.

The Public Toilet may also include facilities for baby change.

A Public Toilet shall be 3 m2. If baby change facilities are included, the size may be increased to 4 m2.

LOCATION AND RELATIONSHIPS

Toilets for public use should be readily accessible from Public Areas.

CONSIDERATIONS

For additional room considerations and details refer to Room Data Sheets and Room Layout Sheets

Toilet - Staff

90 .66.00 DESCRIPTION AND FUNCTION

A toilet and hand basin for staff use.

A Staff Toilet shall be 3 m2.

LOCATION AND RELATIONSHIPS

Toilets for staff use should be readily accessible from staff Work Areas.

They should be located central to a Unit or in a location suitable for use by staff from adjoining Units.

CONSIDERATIONS

For additional room considerations and details refer to Room Data Sheets and Room Layout Sheets

Part B - Health Facility Briefing and Planning

Treatment Room

90 .67.00 DESCRIPTION AND FUNCTION

The Treatment Room provides a controlled environment, privacy and facilities for carrying out consultations, examinations and treatments. Wound dressings and minor treatments will also be carried out.

Operational policy for the Unit will determine the need for a Treatment Room. If patients are treated at the bedside, the Treatment Room may not be required.

Floor area shall be 14 m².

LOCATION AND RELATIONSHIPS

The Treatment Room should be located with other Patient Care Areas, near the Clean Utility Room.

Centrally located Treatment Rooms may serve more than one unit on the same floor/level of a facility.

CONSIDERATIONS

The door should be lockable.

For additional room considerations and details refer to Room Data Sheets and Room Layout Sheets

Waiting

90 .68.00 DESCRIPTION AND FUNCTION

A Waiting Area may be for the use of the public, patients, families and other visitors to a Facility or Unit. Adequate space should be provided for patients as well as relatives/escorts.

A range of occupants will require waiting space and these will include adults and children, both able-bodied and disabled. The needs of different groups of patients including those who may be behaviourally disturbed, mothers with babies and older people should be considered. Circulation requirements must cater for this.

The size of a Waiting Area will depend on the number of people to be accommodated but will generally require 1.2 m² per able-bodied person or 1.5m² per wheelchair occupant or other disabled person. Space for baby prams, wheelchairs, walking frames, sticks, etc, should be provided.

If provided, the area of a separate Paediatric Waiting Area will be additional to this area requirement.

Consultation with service providers may be required as to whether separate area(s) may be required for certain groups of patients, or for mothers with babies and young children.

Information displays may be located in the Waiting Area.

Refer Part C for further information.

LOCATION AND RELATIONSHIPS

Near the entry to the Facility or Unit and observable from the Reception Area.

Where a child play area is provided this should be adjacent to, and observable from the waiting area.

Where possible, consider locating the Waiting Area near a courtyard to meet the cultural needs of some community groups.

Access to disabled accessible public toilets, baby change facilities eg parenting room, outdoor areas, food and beverage facilities and a public telephone should be

Part B - Health Facility Briefing and Planning

available.

CONSIDERATIONS

For additional room considerations and details refer to Room Data Sheets and Room Layout Sheets

Refer to Room Layout and Room Data Sheets for various size options.

Waste Holding

90 .69.00 DESCRIPTION AND FUNCTION

A Waste Holding Area is required for storing waste materials awaiting removal from the site, including general waste, clinical waste, recyclable waste and linen.

LOCATION AND RELATIONSHIPS

Locate with loading and service facilities.

Waste holding area may be internal and/or external to the building. Access routes to the holding area should be considered.

CONSIDERATIONS

For additional room considerations and details refer to Room Data Sheets and Room Layout Sheets

X-Ray Viewing and Reporting

90 .70.00 DESCRIPTION AND FUNCTION

This area is for clinical staff to review x-ray films and to write reports.

X-ray viewing boxes are required and suitable workbenches for clerical work.

Floor area shall be 12 m2.

LOCATION AND RELATIONSHIPS

Accessible from main Unit corridor; near other staff Work Areas.

CONSIDERATIONS

For additional room considerations and details refer to Room Data Sheets and Room Layout Sheets