

Part B - Health Facility Briefing and Planning

110 ACUTE SPINAL UNIT

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INTRODUCTION

General

110 .2.00	The Acute Spinal Unit provides for the acute therapeutic needs of patients following trauma or other disabling events. It also provides for the ongoing case management of complex issues such as spasticity, chronic pain, bladder and bowel function and interpersonal relationships.
110 .3.00	The overall aim of the Acute Spinal Unit is for the patient to achieve maximum independence. To achieve this aim, it is vital to maintain a continuum of care involving close liaison between acute care, rehabilitation care and community services.

PLANNING

Functional Areas

110 .4.00	The Acute Spinal Unit will consist of the following Functional Areas: <ul style="list-style-type: none">- Patient Areas including Acute Bedrooms, Non-acute Bedrooms and Ensuites- Staff Areas including Staff Station, Offices, Meeting Rooms, Staff Change and Toilets- Support Areas including Utilities, Stores, Beverage Bay and Cleaner's Room; Support areas may also be shared between adjacent Units.
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Functional Relationships

110 .5.00	The acute spinal unit will ideally be located close to the following units or facilities: <ul style="list-style-type: none">- Intensive Care Unit- Operating Unit- Helipad for emergency transfers- Spinal Rehabilitation Inpatient Unit- Rehabilitation therapy areas.
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DESIGN

General

- 110 .6.00 The design of the Acute Spinal Unit should contribute to reducing noise and activity levels within the patient environment. The Acute Spinal Unit should not form a thoroughfare to any other unit or department.
- 110 .7.00 The design for an Acute Spinal Unit should take into account that the Unit will need to accommodate patients of a wide age range, from young adults to elderly. Visibility from the Staff Station to patient beds is to be maximised.

COMPONENTS OF THE UNIT

Introduction

- 110 .8.00 The Acute Spinal Unit may consist of a combination of Standard Components and Non-Standard Components.

Standard Components must comply with details in the Standard Components described in these Guidelines. Refer also to Standard Components Room Data Sheets and Room Layout Sheets.

Standard Components

- 110 .9.00 Provide the Standard Components as identified in the Generic Schedule of Accommodation.

Non-Standard Components

- 110 .10.00 There are no Non-Standard Components in the Acute Spinal Unit.

APPENDICES

Acute Spinal Generic Schedule of Accommodation

- 110 .11.00 Schedule of Accommodation for an Acute Spinal Unit of 10 beds:

PATIENT AREAS

ROOM / SPACE	Standard Component				Level 5 Qty x m2	Level 6 Qty x m2	Remarks
1 BED BAY - ACUTE	see remarks				5 x 20	5 x 20	Similar to Standard Component for 1 Bed Room-Critical Care
1 BED ROOM - SPECIAL	yes				4 x 18	4 x 18	For patients stabilised but not yet ready for Rehabilitation
1 BED ROOM - ACUTE	see remarks				1 x 22	1 x 22	Similar to Standard Component for 1 Bed Room-Critical Care
ENSUITE - STANDARD	yes				4 x 5	4 x 5	
ENSUITE - SPECIAL	yes				2 x 7	2 x 7	

110 .12.00 STAFF AREAS

ROOM / SPACE	Standard Component				Level 5 Qty x m2	Level 6 Qty x m2	Remarks
BAY - BEVERAGE	yes				1 x 3	1 x 3	

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BAY - HANDWASHING	yes				2 x 1	2 x 1	In addition to handbasins for each bed
BAY - LINEN	yes				1 x 2	1 x 2	
BAY - MOBILE EQUIPMENT	yes				1 x 4	1 x 4	
BAY - RESUS TROLLEY	yes				1 x 2	1 x 2	
CLEAN UTILITY	yes				1 x 12	1 x 12	
DIRTY UTILITY	yes				1 x 10	1 x 10	
OFFICE - SINGLE PERSON 9 M2	yes				1 x 9	1 x 9	Unit Manager
STAFF STATION	yes				1 x 14	1 x 14	
TOILET - STAFF	yes				1 x 2	1 x 2	
CIRCULATION %					40	40	

110.13.00 SHARED AREAS

ROOM / SPACE	Standard Component				Level 5 Qty x m2	Level 6 Qty x m2	Remarks
CLEANER'S ROOM	yes				1 x 4	1 x 4	
MEETING ROOM - SMALL	yes				1 x 9	1 x 9	For Distressed Relatives
MEETING ROOM - MEDIUM	yes				1 x 15	1 x 15	
OFFICE - CLINICAL/ HANDOVER	yes				1 x 12	1 x 12	
PROPERTY BAY - STAFF	yes				1 x 6	1 x 6	
STAFF ROOM	yes				1 x 15	1 x 15	
STORE - EQUIPMENT	yes				1 x 20	1 x 20	
STORE - GENERAL	yes				1 x 9	1 x 9	

References and Further Reading

- 110.14.00
- American Institute of Architects, Guidelines for Design & Construction of Hospital & Healthcare Facilities, 1997.
 - NSW Health, SESAHS Redevelopment Unit, Project Definition Plan: POW/PHH Spinal Medicine & Rehabilitation Unit, 2000.
 - NSW Health, DS-12 Health Building Guidelines, 20 Bed Assessment & Rehabilitation Inpatient Unit, 1992.

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FUNCTIONAL RELATIONSHIPS DIAGRAM - ACUTE SPINAL UNIT

