## Part B - Health Facility Briefing and Planning

## **COMPLIANCE CHECKLIST**

Name of HPU:

(Print and complete one per HPU)

## Agreed Role Delineation Level: \_\_\_\_\_

No	Item	Yes	No
1.0	Planning:		
1.1	Have all Mandatory Functional Areas of the Unit been provided?		
1.2	Have Functional Relationships been considered?		
2.0	Design:		
2.1	Have the required Finishes been provided (if specified)?		
2.2	Have the required minimum Fixtures and Fittings been provided?		
2.3	Have Infection Control Issues been addressed?		
2.4	Have Access, Mobility & OH&S Issues been addressed?		
2.5	Space Standards and Components: Have Minimum Room Dimensions been provided ( if specified)? Have Minimum Room sizes been provided as specified? Have sufficient clearances been provided (if specified)?		
2.6	Have Safety and Security Issues addressed: Patient Area Staff Areas Drug Storage Areas		
2.7	Does the Design Brief comply with the nominated Standards and Codes?		
2.8	Has the Private Hospital or Day Procedure Centre provided a Schedule of Accommodation?		
3.0	Components of the Unit		
3.1	Have all mandatory Components been included?		

## Checked and certified by:

Name: Company: Position Signature:

The Department of Human Services, Victoria Design guidelines for hospitals and day procedure centres



Date:



