

9. Extended Treatment Psychogeriatric Inpatient Unit (24 Bed)

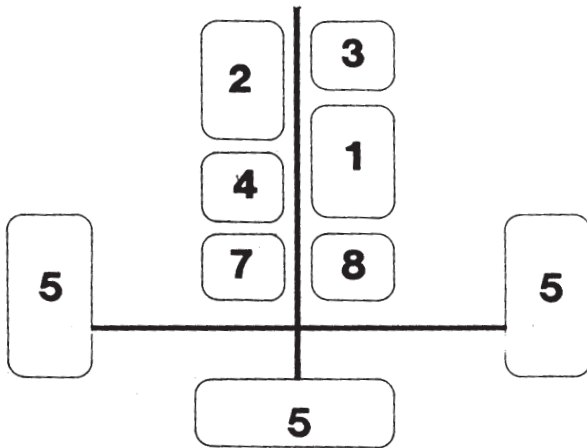
Functional Relationships

General issues

The functional diagrams shown below relate to the sub-units established in the Room Data Sheets. These generic conditions of relationship have been diagrammatically displayed for ease of communication. Specific interrelationships have not been shown.

Functional Diagram

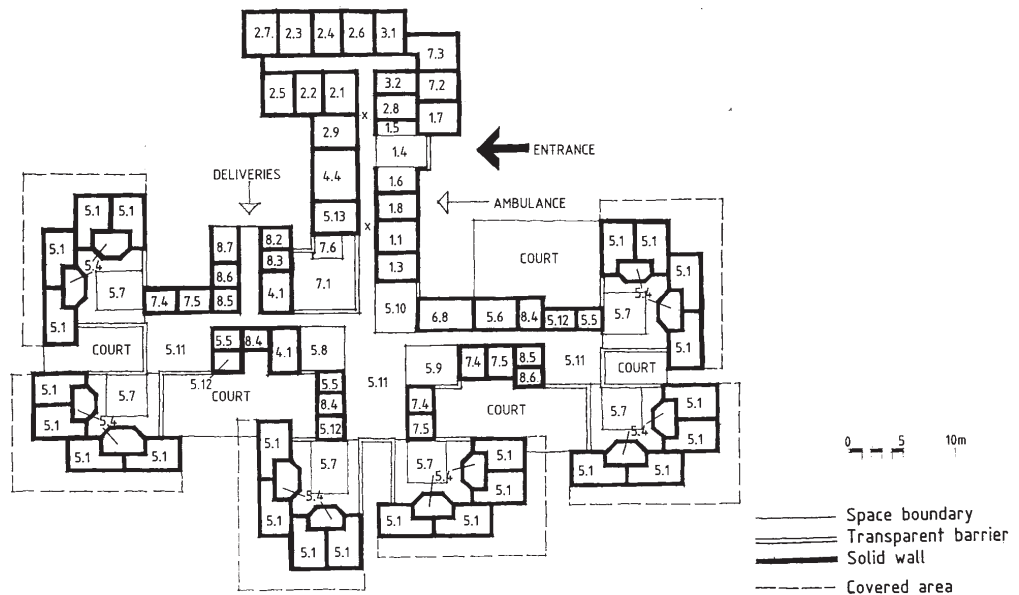
- 1 Admissions**
- 2 Consulting/Allied Health**
- 3 Nursing Staff**
- 4 Specialist Areas**
- 5 Consumer Areas**
- 6 Consumer Areas (High Dependency)**
- 7 Staff Facilities**
- 8 Hotel Services**



Room Legend

The following spaces and rooms are included in the generic design.

- | | |
|--|--|
| 1 Admissions Sub-unit | 5.7 Main Lounge |
| 1.1 Admissions Office | 5.8 Music Lounge/
Night Lounge |
| 1.3 Examination Room | 5.9 Quiet Lounge |
| 1.4 Entrance | 5.10 Activities Room |
| 1.5 Reception | 5.11 Dining Room |
| 1.6 Waiting | 5.12 Laundry |
| 1.7 Visitors Toilet | 5.13 Treatment Room |
| 1.8 Emergency Entrance | |
| 2 Consulting/Allied Health Sub-unit | 6 Consumer Areas (High Dependency) Sub-unit |
| 2.1 Director's Office | 6.8 Assisted Bathroom |
| 2.2 Consulting Psychiatrist | |
| 2.3 Registrar's Office | 7 Staff Facilities Sub-unit |
| 2.4 Undergraduate Office | 7.1 Nurses' Station |
| 2.5 Psychologist | 7.2 Staff Lunch Room/Lounge |
| 2.6 Occupational Therapist | 7.3 Staff Toilets/Change Room |
| 2.7 Social Worker | 7.4 Clean Utility Room |
| 2.8 Administrative Staff | 7.5 Dirty Utility Room |
| 2.9 Consumer/
NGO Meeting Room | 7.6 Medical Store |
| 3 Nursing Staff Sub-unit | 8 Hotel Services Sub-unit |
| 3.1 Nursing Manager | 8.2 Clean Linen Store |
| 3.2 Nurses' Office | 8.3 Soiled Linen Store |
| | 8.4 Store (Patients' Effects) |
| 4 Specialist Areas Sub-unit | 8.5 Store (General) |
| 4.1 Consulting Room | 8.6 Cleaner's Room |
| 4.4 Conference Room | 8.7 Loading Dock |
| 5 Consumer Areas Sub-unit | |
| 5.1 Single Bedroom | |
| 5.4 Bathroom | |
| 5.5 Kitchen | |
| 5.6 Visitors Room | |



Generic Layout Considerations

General issues

The diagrammatic plan shows the significant space relationships for this facility. These have been scaled for ease of reference. They do not represent a preferred layout but one possibility of several acceptable layouts.

Building Guidelines for
Queensland Mental Health Facilities

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Section 3 Design Guidelines

9. Extended Treatment Psychogeriatric Inpatient Unit (24 Bed)

Introduction

How to use this document

This guideline is intended to provide general information about this facility to potential designers, managers, service providers and others. This section should be read in conjunction with the General Principles (Section 2) and the Room Data Sheets (Section 4). The design information contained herein is generic and hypothetical. Readers should be aware of the implications of site requirements, budgets, management needs and the particular requirements of the service providers and consumers for a particular project.

The paragraphs included below contain information which is divergent from that contained in other parts of the general document. Where reference is made to individual space types or rooms, this information can be found in the Room Data Sheets. For more general objectives refer to the General Principles. Special and more specific information relating to this facility is listed below.

Facility type description

This facility provides accommodation for an Extended Treatment Psychogeriatric Inpatient Unit. The building is primarily a health treatment building but incorporates other ancillary uses. It includes areas for public use, admission and offices, care areas, consumers' residential areas, staff facilities, hotel services and utility spaces. Provision should be made for carparks, roadways, public and private courtyards and delivery areas.

Facility usage

This facility caters for the use by consumers of the service, the service providers, including nursing, medical and allied health professionals, non-government organisations, Queensland Health employees and other management service providers, hotel services, students, research visitors and the general public. Restrictions in access to the facility will apply to some of these users but the facility will be fully operational 24 hours a day all year round.

There will be generally three shifts per day for service providers and some support services. The general public, management, hotel and other ancillary services will most likely be restricted to day and evening use.

The administration of care involves procedures which have some similarities with aged care, but includes treatment and care of consumers with ongoing mental health problems, e.g. admission, examination, allocation of residential accommodation and the provision of services needed to maintain consumers' stay in the unit. In addition, there is a significant need for direct observation of consumer areas, especially in activity, living and dining areas and external spaces. Nurses' stations are the hub of most observation configurations, but there is a requirement that care is also available in all spaces used by consumers and that the designs do not encourage passive observation. Consumer spaces should reflect a variety of activities and offer numerous areas for individual respite. While still providing for care interaction, it is essential the ambience of this facility is residential, as many consumers will reside in the facility for many years.

Building design philosophy and general intent

This building should be designed to maximise the dignity of consumers while establishing appropriate levels of professional care and a therapeutic environment. The design should promote accessibility to all sections of society through the process of consultative design and by attention to environmental design processes, to produce equitable, comprehensible and sustainable buildings.

The facility will:

- Provide treatment over an extended period of time for older persons with mental illness and associated disabilities.
- Provide a safe and therapeutic environment for maintenance of health with the aim of moving to generic accommodation for older people.
- Provide spaces for the administration of medication approaches to managing symptoms and for the education of the consumer, family and carers about the illness.
- Allow implementation of management strategies appropriate to the level of behavioural disturbance.
- Provide counselling spaces for consumers, families and carers.
- Provide services appropriate to be individual's past and present life patterns involving consideration of social and cultural factors.
- Provide treatment in a clearly defined, identifiably domestic setting to minimise confusion.
- Provide containment in specially prepared rooms for people who are at risk of harming others.

- Provide for specific groups such as ATSI and non english speaking background.

Economic sustainability of capital works and recurrent funding for mental health facilities place the onus on designers to provide efficiency in circulation and economy of functional areas. A fine balance between efficient design, longevity and low maintenance buildings, optimum bed numbers, optimum clinical staffing of care providers and effective personal and support services management will provide a "best model" facility.

Staffing Profile

General issues

The administration of care in this type of facility requires a model that involves nursing professionals at the centre of continuous care, with ongoing consultant support from medical officers, visiting psychiatrists, geriatricians, psychologists, social workers and occupational therapists and with administrative support from clerical and management staff. Hotel services can be provided in the form of Queensland Health hotel services or as off-site contract provisions. Support from outside the service may be provided by non-government organisations or informal public or family support. A large proportion of those using the facility will be visiting for limited times, generally during day and evening periods.

Schedule of user types

The following table gives an example of a mix of staff typical for this facility and is provided to establish a notional maximum number expected to be in the facility on the busiest shift.

User group	Maximum FTE for any single shift
Nursing	7
Allied Health	3
Medical	1
Administration	1
Support	10
TOTAL	22

General Design Principles

The following are special requirements in addition to the General Principles (Section 2).

Siting and site selection

- Preferably sited as a stand-alone, single-storey building as part of an aged care residential facility.
- Sited adjacent to a lightly trafficked road or street and to landscaped parkland or other outlook.
- Sited in very close proximity to public transport to allow for visits by older people in the community.

Site layout

Preferably located on a single level on ground, with access to courtyard areas and garden for the mobility impaired. If necessary, publicly accessible offices and allied health/consulting areas could be located in storeys above.

Interior design

Older people with failing eyesight require higher lightings levels and increased light and colour contrast between adjoining surfaces for ease of perception. Those with impaired sight may benefit from variations in tactile surfaces for interior way-finding.

Interior fixtures and fittings

- Use of water-resistant covers on soft furnishings and washable fabrics in areas available to all consumers is essential. As older people are more susceptible to bruising and injury, rounded edges on protrusions are essential.
- Use of easy to clean, non-slip floor coverings is essential.

Signage and art

Signs may require enlarged lettering for older people to enable ease of reading.

Schedule of Functional Areas

No.	Function Name	Req	m2 (min.)	Total	Remarks
1.0	Admissions			84	Sub-unit
1.1	Admissions Office	1	12	12	
1.3	Examination Room	1	10	10	For 2 FTE+2m ² /FTE > 2
1.4	Entrance	1	15	15	+5m ² outside area
1.5	Reception	1	8	8	Includes desk+2m ² /FTE
1.6	Waiting	1	15	15	For 8 users+2m ² /user >8
1.7	Visitors Toilets	2	8	16	For 1 sex and disabled
1.8	Ambulance Entrance	1	8	8	
2.0	Consulting/Allied Health			102	Sub-unit
2.1	Director's Office	1	12	12	
2.2	Consulting Psychiatrist	1	10	10	
2.3	Registrar's Office	1	12	12	
2.4	Undergraduate Office	1	10	10	For 1 user+2m ² /user > 1
2.5	Psychologist	1	12	12	
2.6	Occupational Therapist	1	12	12	
2.7	Social Worker	1	12	12	
2.8	Administrative Staff	1	10	10	For 1 FTE+5m ² /FTE > 1
2.9	Consumer/ NGO Meeting Room	1	12	12	
3.0	Nursing Staff			20	Sub-unit
3.1	Nursing Manager	1	10	10	For 2 FTE+5m ² /FTE > 2
3.2	Nurses' Office	1	10	10	For 2 FTE+5m ² /FTE > 2
4.0	Specialist Area			40	Sub-unit
4.1	Consulting Room	2	10	20	For 2 users
4.4	Conference Room	1	15+5	20	For 10 users : 1.5m ² /user
5.0	Consumer Areas			662	Sub-unit
5.1	Single Bedroom	24	12	288	
5.4	Bathroom	24	5.5	132	1 to 2 users each
5.5	Kitchen	3	10	30	Accessible to consumers
5.6	Visitors Room	1	10	10	
5.7	Main Lounge	6	15	90	+1m ² /bed
5.8	Music Lounge/ Night Lounge	1	10	10	+1m ² /bed
5.9	Quiet Lounge	1	15	15	
5.10	Activities Room	1	15	15	+1m ² /bed
5.11	Dining Room	3	15	45	+1m ² /bed (20 consumers max.)
5.12	Laundry	3	5	15	+0.2m ² /bed
5.13	Treatment Room	1	12	12	

No.	Function Name	Req	m2 (min.)	Total	Remarks
6.0	Consumer Areas (High Dependency)			15	Sub-unit
6.8	Assisted Bath room	1	15	15	
7.0	Staff Facilities/Areas			126	Sub-unit
7.1	Nurses' Station	1	15+15	30	For 2 FTE+2.5m ² /FTE >2
7.2	Staff Lunch Room/ Lounge	1	15	15	12 users
7.3	Staff Toilets/ Change Room	1	15	15	Male and female
7.4	Clean Utility Room	3	8+2	30	+0.25m ² /bed > 10
7.5	Dirty Utility Room	3	8+2	30	+0.25m ² /bed > 10
7.6	Medical Store	1	6	6	
8.0	Hotel Services			73	Sub-unit
8.2	Clean Linen Store	1	4+7	11	+0.2m ² /bed
8.3	Soiled Linen Store	1	4+7	11	+0.2m ² /bed
8.4	Store (Patients' Effects)	3	2+5	21	+0.2m ² /bed
8.5	Store (General)	2	4+2	12	+0.2m ² /bed
8.6	Cleaners' Room	2	4	8	
8.7	Loading Dock	1	10	10	Covered outdoor
	Sub-total			1122	
	Circulation, Storage and Misc. @25%			281	
	Carparking for 16 Cars (1 disabled)				+0.5/bed; 0.1/disabled; 0.1/visitors
	TOTAL			1403	

Particular Space Considerations

General issues

This facility will most likely be built as an autonomous unit on a community-based site or as part of a mental health hospital campus or aged care facility. The nature of the facility care and proximity may allow the common use of support services and other facilities.

Specific space management requirements

Possibility exists for shared use of support services, hotel services etc.

Please attach your list of specific requirements behind this document.