CHAPTER 262: VETERANS HEALTH ADMINISTRATION - AMBULATORY CARE (HOSPITAL BASED)

1   PURPOSE AND SCOPE

A. This document outlines space planning criteria for VA Handbook 7610 Chapter 262: Ambulatory Care (Hospital Based). It applies to all medical facilities at the Department of Veterans Affairs (VA).

B. Outpatient psychiatric services are an integral part of ambulatory care. Refer to the following Space Planning Criteria Chapters for requirements:

   1. 260 – Mental Health Clinic
   2. 261 – Day Treatment Center
   3. 300 – Day Hospital

C. Refer to the following Space Planning Criteria Chapters to determine space requirements for the following scheduled clinics:

   1. 222 – Dental Service
   2. 233 – Eye Clinic
   3. 204 – Audiology and Speech Pathology

D. Refer to the following Space Criteria Chapters that also may require space in Ambulatory Care

   1. 212 – Pulmonary Medicine
   2. 218 – Veterans Assistance Unit
   3. 226 – Electroencephalography Laboratory
   4. 240 – Laboratory Service – Specimen collection area
   5. 268 – Pharmacy Service – outpatient pharmacy
   6. 270 – Rehabilitation Medicine Service
   7. 276 – Radiology Service
   8. 274 – Quarters, On-Call
   9. 279 – Police and Security Service
   10. 308 – Prosthetic and Sensory Aids Service
   11. 410 – Lockers, Lounges, Toilets and Showers (LLTS)

2   DEFINITIONS

A. <u>Ambulatory Care Activity Profile (ACAP)</u>: The ACAP more accurately differentiates varying ambulatory care space requirements among highly affiliated, tertiary care medical centers and less highly affiliated, secondary and primary care medical centers. ACAP Levels are based on the VA Medical Complexity Level as follows:

VAMC Complexity Level	ACAP Level
I	L
II	L
III	M
IV	S

The Ambulatory Psychiatric Division of two-division VA Medical Centers will be classified as ACAP Level S regardless of VAMC Complexity Level.

B. Ambulatory Care Clinic: A medical service that provides healthcare to scheduled and unscheduled outpatients in a hospital setting; emergency treatment walk-in evaluation; scheduled compensation and pension examinations; some specialty and sub-specialty services to hospitalized, nursing home and domiciliary patients; and, employee health services.

C. Ambulatory Care Clinic Module: A group of no less than 10 and no more than 20 Exam Rooms within the Ambulatory Care Clinic with associated support and staff spaces.

D. C&P: A type of clinic stop for the purpose of documenting Compensation and Pension Benefits.

E. Clinic Stop: A clinic stop is one encounter of a patient with a healthcare provider. Per these criteria, the clinic stop is the workload unit of measure for space planning. One individual patient can have multiple procedure / suite stops in a single visit or in one day.

F. Clinic Visit: Patient arrival (stop) at the main reception desk. Patients may have multiple Clinic Stops during one Clinic Visit.

G. Concept of Operations: A user-developed guide to the functional operation of the VA healthcare facility. It defines the function of the facility and the scope of medical services to be provided in the new or remodeled space.

H. Disposition Area: The disposition area accommodates those activities (travel pay, pharmacy etc.) scheduled and unscheduled outpatients usually visit last before leaving ambulatory care.

I. Emergency (Urgent) Care (ER): The urgent care area accommodates the examination and treatment of all outpatients determined to be in need of immediate medical care.

J. Employee Health: The employee health area accommodates any examination, testing or treatment required by the Department of Veterans Affairs (VA) (medical center, regional office etc.) employees.

K. Exam – Treatment Module: Grouping of clinical, support and office related spaces that form an outpatient treatment unit.

L. Functional Area: The grouping of rooms and spaces based on their function within a clinical service. Major Functional Areas include the following:

1. Reception Areas: Accommodates the initial processing (eligibility, admissions, etc.) of all unscheduled outpatients. It is composed of all activities necessary to accomplish the tasks associated with medical evaluation and treatment.
2. Emergency Care: Accommodates the examination and treatment of all outpatients determined to be in need of immediate medical care.
3. Patient Areas: Accommodates the examination and treatment of all non-emergency outpatients, scheduled and unscheduled, and inpatients in a variety of medical/surgical disciplines.

4. Employee Health: Accommodates any examination, testing and treatment of VA employees.
5. Disposition Area: Accommodates activities such as travel pay, pharmacy, etc. for scheduled and unscheduled outpatients. Patients typically visit this area last before leaving Ambulatory Care.
6. Support Areas: Accommodates diagnostic support functions such as satellite X-ray, blood specimen collection, etc.
7. Staff and Administrative Areas: Accommodates administrative staff and professional staff whose primary responsibilities lie in emergency care and examination/treatment.
8. Residency Program: Accommodates medical education functions in affiliated VA facilities.

M. Input Data Statements: A set of questions designed to elicit information about the healthcare project in order to create a Program for Design (PFD) based on the criteria parameters set forth in this document. Input Data Statements could be Mission related, based in the project's Concept of Operations; and Workload or Staffing related, based on projections and data provided by the VHA or the VISN about the estimated model of operation for the facility. This information is processed through mathematical and logical operations in VA-SEPS.

N. Full-Time Equivalent (FTE): A staffing parameter equal to the amount of time assigned to one full time employee. It may be composed of several part-time employees whose total time commitment equals that of a full-time employee. One FTE equals a 40 hours per week.

N.O. Medical Administration Services (MAS): For the purposes of these criteria, denotes spaces for integral administrative functions of Ambulatory Care, and may have different administrative designations throughout VA facilities. MAS includes the following integral administrative functions of Ambulatory Care:

1. Preparing, receiving and processing applications for medical, dental, nursing home and domiciliary care;
2. Reception, eligibility, scheduling, waiting lists, and administrative and clerical activities in scheduled clinics;
3. Processing admissions, releases, transfers, absences, Beneficiary travel management, and compensation and pension control;
4. Decedent affairs;
5. Prosthetics (when there is no Prosthetics and Sensory Aids service in the medical center);
6. Employee health;
7. Commitment controls and Patient funds and services.

O.P. Net-to-department gross factor (NTDG): A factor that when multiplied by the programmed Net Square Foot (NSF) area, determines the Departmental Gross Square Feet (DGSF). The **NTDG** factor adopted for **Ambulatory Care** is **1.65**.

P.Q. Primary / Ambulatory Care Provider: A medical professional, such as a physician, nurse practitioner, or physician assistant, who provides care in the Ambulatory Care Clinic.

Q.R. Program for Design (PFD): A space program based on criteria set forth in this document and specific information entered about Concept of Operations, Workload projections and Staffing levels authorized.

R.S. Room Efficiency Factor: A factor that provides flexibility in the utilization of a room to account for patient delays, scheduling conflicts, and equipment maintenance. Common factors are in the 80 to 85% range. A room with 80% room efficiency provides a buffer to assume that this room would be available 20% of the time beyond the planned operational practices of the room. This factor may be adjusted based on the actual and/or anticipated operations and processes of the room / department.

S.T. SEPS (VA-SEPS): Acronym for Space and Equipment Planning System, a digital tool developed by the Department of Defense (DoD) and the Department of Veterans Affairs to generate a Program for Design (PFD) and an Equipment List for a VA healthcare project based on specific information entered in response to Input Data Questions. VA-SEPS incorporates the propositions set forth in this chapter as well as all chapters in VA's Handbook 7610. VA-SEPS has been designed to aid healthcare planners in creating a space plan based on a standardized set of criteria parameters.

T.U. Workload: Workload is the anticipated number of procedures or suite stops that is processed through a department/service area. The total workload applied to departmental operational assumptions will determine overall room requirements by modality.

3 OPERATING RATIONALE AND BASIS OF CRITERIA

A. Workload projections or planned services / modalities for a specific VA medical center, hospital or satellite outpatient clinic project are provided by the VA Central Office (VACO) / VISN CARES Capacity Projection Model. Workload projections are generated by methodology based upon the expected veteran population in the respective market / service area. Health care planners working on new or renovation projects for VA medical centers, hospitals or satellite outpatient clinics, shall utilize workload and other criteria set forth herein to generate a space program for each project.

B. Space Planning Criteria have been developed on the basis of an understanding of the activities involved in the functional areas of Ambulatory Care (Hospital Based) and their relationship with other services of a medical facility.   These criteria are based on established and/or anticipated best practice standards as adapted to provide environments supporting the highest quality health care for Veterans.

C. Room capacity calculation per year should be based on:

$$\frac{\text{Operating days per year x Hours of operation per day}}{\text{Minutes per clinic stop / 60 minutes}} = \text{Number of annual clinic stops}$$

1. The general planning model for VA facilities assumes 250 Operating Days per Year and 8 Hours of Operation per Day. Room capacity will fluctuate as hours of operation are modified, i.e., additional capacity may be generated by extending the daily hours of operation within the same physical setting.

2. Basic Room Efficiency Factor selected is 80%.

Example: Assume a clinic stop that averages 32 minutes per clinic stop

$$\frac{250 \text{ operating days per year x 8 hours of operation per day}}{32 \text{ minutes per clinic stop} / 60 \text{ minutes}} = 3{,}750 \text{ annual clinic stops}$$

A maximum capacity of 3,750 clinic stops per year, assuming 100% utilization. However, 100% utilization is not realistic. We will apply an 80% Efficiency Factor as a design standard for Ambulatory Care.

3,750 x 80% = 3,000 annual clinic stops.

TABLE 1: WORKLOAD PARAMETER CALCULATION

CLINIC STOP	AVERAGE LENGTH OF CLINIC STOP (minutes)	ANNUAL CLINIC STOPS PER ROOM (rounded)	MINIMUM WORKLOAD TO GENERATE ONE ROOM
Exam Room	32	3,000	900

The number of annual clinic visits per room will be used as a criteria parameter to calculate the number of exam rooms in the Space Criteria section of this document. The minimum workload to generate one room is 30% of the calculated annual clinic stops per room.

3. Medical Service Clinics include:
   AIDS, Allergy / Immunology, Cardiology, Clinical Pharmacology, Dermatology, Diabetic, Ear, Nose and Throat, Endocrinology, Environmental Health, Gastroenterology (GI), General Medicine, Geriatric, Gynecology, Hematology, Infectious Disease, Liver Disease, Neurology, Nutrition, Oncology / Tumor, Pain, Prevention, Proctology, Pulmonary-Chest (non-TB), Pulmonary-chest (TB), Rheumatology

4. Surgical Service Clinics include:
   Cardiac Surgery, General Surgery, Hand, Head and Neck, Neurosurgery, Orthopedic, (ENT) Plastic Surgery, Podiatry, Thoracic Surgery, Urology (GU), Vascular Surgery.

4   PROGRAM DATA REQUIRED (INPUT DATA QUESTIONS)

A. Mission Input Data Statements:

General / Administration

1. What is the Ambulatory Care Activity Profile (ACAP) Level authorized for this project? (S=1; M=2; L=3) (M)
2. Is a Grieving Room authorized? (M)
3. Is Hospital Based Home Care (HBHC) authorized? (M)
4. Is an ACOS for Ambulatory Care authorized? (M)
5. Is a Telemedicine Room authorized? (M)
6. Is an Office, Chief of Clinic Section authorized? (M)

7. Is an Office, Chief MAS for Ambulatory Care authorized? (M)
8. Is an Office, Head Nurse for Emergency Care authorized?
9. Is an Office, RN/LPN authorized?
10. Is an Office, MAS Reception Area Supervisor authorized?
11. Is a Office, MAS Supervisor, Scheduled Clinics for Examination – Treatment Module authorized? (M)
12. Is an Office, MAS Office Bed Control authorized? (M)
13. Is an Office, Secretary to the Chief of ER authorized? (M)
14. Is standard furniture authorized?(M)
15. Is systems furniture authorized?(M)

Emergency/Urgent Care

16. How many Security Exam Rooms for Emergency Care (ER) are authorized? (M)
17. Is an On-Call Room for Emergency Care (ER) authorized? (M)

Clinic/Module Core

18. Is a General Procedure Room-Two Position authorized? (M)
19. Is an Immunization Room authorized? (M)
20. Is an EKG Room authorized? (M)
21. Is a Single Occupancy Audio Booth authorized? (M)
22. Is an Audio Booth Suite authorized? (M)

Specialty Clinics

23. Is a Genito-Urinary (GU) or Urology Clinic authorized? (M)
24. Is a Gastroenterology Clinic authorized? (M)
25. Is a Dermatology Clinic authorized? (M)
26. Is a Moh's Chemosurgery Clinic authorized? (M)
27. Is an Orthopedic Clinic authorized? (M)
28. Is an Oncolgy Clinic authorized? (M)
29. Is an AIDS Clinic authorized? (M)
30. Is a Nutrition Clinic authorized? (M)
31. Do the Medical Center / Hospital have a Prosthetic and Sensory Aids Service? (M)

Residency Program (Education)

32. Is a Residency Program authorized? (M)
33. Is Resident Library authorized? (M)
34. Is Resident Conference Room authorized? (M)

B. Workload Input Data Statements:

General / Administration

1. How many annual Outpatient Visits (admit/screening clinic-stops) are projected? (W)
2. How many VA Employees will be served by this Ambulatory Care Clinic? (W)
3. How many hospital beds does/will the Medical Center/Hospital have (excluding SCI)? (W)

Emergency/Urgent Care

4. How many annual Emergency (Urgent) Care (ER) clinic stops are projected? (W)

Clinic/Module Core

5. How many annual Admit / Screen Clinic Stops are projected? (W)
6. How many annual Employee Health Clinic Stops are projected? (W)
7. How many annual General Medicine Clinic Stops are projected? (W)

Specialty Clinics

8. How many annual Oncology Clinic Stops are projected? (W)
9. How many annual screening Proctoscopic / Sigmoidoscopy Clinic Stops are projected? (W)
10. How many annual Gastric Mobility Clinic Stops are projected? (W)
11. How many annual Surgery Clinic Stops are projected? (W)
12. How many annual Urology Clinic Stops are projected? (W)
13. How many annual Orthopedic Clinic Stops are projected? (W)
14. How many annual C&P Clinic Stops are projected? (W)
15. How many annual Dermatology Clinic Stops are projected? (W)
16. How many annual Podiatry Clinic Stops are projected? (W)
17. How many annual Women's Health / GYN Clinic Stops are projected? (W)
18. How many annual Prosthetic New Appliances Furnished (number of disabilities served) are projected?
19. How many annual Prosthetic Repairs Furnished (number of disabilities served) are projected?

C. Staffing Input Data Statements:

General / Administration

1. How many Primary / Ambulatory Care Provider FTE positions are authorized? (S)
2. How many Triage Nurse FTE positions are authorized? (S)
3. How many Agent Orange / POW Clerk FTE positions are authorized? (S)
4. How many Health Benefits Advisor FTE positions are authorized? (S)
5. How many Scheduler FTE positions are authorized? (S)
6. How many Compensation and Pension Clerk FTE positions are authorized? (S)
7. How many Prosthetic Clerk FTE positions are authorized? (S)
8. How many Dietitian FTE positions are authorized? (S)
9. How many Employee Health Nurse FTE positions are authorized? (S)
10. How many Employee Health Clerk FTE positions are authorized? (S)
11. How many Disposition Supervisor FTE positions are authorized? (S)
12. How many Disposition Coding Clerk FTE positions are authorized? (S)
13. How many MAS Interview Booth Clerk FTE positions are authorized? (S)
14. How many MAS Office Health Benefits Advisor FTE positions are authorized? (S)
15. How many MAS Patient Funds Clerk FTE positions are authorized? (S)
16. How many MAS Clothing Room Clerk FTE positions are authorized? (S)
17. How many MAS Billing Clerk FTE positions are authorized? (S)
18. How many MAS Community Nursing Home FTE positions are authorized? (S)
19. How many MAS Details Clerk FTE positions are authorized? (S)
20. How many MAS Health Benefits Advisor FTE positions are authorized? (S)
21. How many MAS Travel Clerk FTE positions are authorized? (S)

22. How many MAS Agent Cashier FTE positions are authorized? (S)
23. How many Secretary / Clerical FTE positions are authorized? (S)
24. How many Administrative Assistant to ACOS FTE positions are authorized? (S)
25. How many Social Worker FTE positions are authorized? (S)
26. How many Mental Health Provider FTE positions are authorized? (S)
27. How many Dietician FTE positions are authorized? (S)
28. How many administrative staff positions will require a private office? (S)
29. How many FTE administrative staff positions will require a cubicle? (S)
30. How many FTE Advice Nurse positions are authorized? (S)
31. How many FTE clerk positions are authorized? (S)
32. How many FTE professional staff (dietician, pharmacist, Women's Health managers, etc) positions are authorized? (S)

Residency Program (Education)

33. How many resident (serving as provider at peak shift) FTE positions are authorized? (S)
34. How many student FTE positions are authorized? (S)

D. Miscellaneous Input Data Statements:

1. Will a VA's Security Police Station be located near the Ambulatory Care Clinic? (MISC)

5　SPACE CRITERIA

A. Reception Areas

1. **Waiting, General (WRC01).......................................100 NSF (9.3 NSM)**

    Minimum NSF. If ACAP Level S or M, multiply the projected number of annual outpatient visits times 0.004 to calculate the number of seats. If ACAP Level L, multiply the projected number of annual outpatient visits times 0.0026 to calculate the total number of seats. Provide 25 NSF for 20% of the calculated total number of seats for accessible seating, and 15 NSF for 80% of the calculated total number of seats for standard seating. Add calculated area from H. Disposition Area.

    Area includes circulation space among the seats and in front of the reception counter, and space for magazine racks, planters, etc. Sub-waiting for Women Veterans, if applicable, and H. Disposition Area are included in this area calculation.

2. **Toilet, Male (TLTM1) ....50 NSF (4.7 NSM)**

    Minimum NSF. Multiply the calculated NSF of General Waiting Area (including H. Disposition Area) times 0.044 to calculate the number of

men users. Provide 150 NSF if between 11 and 25; provide 205 NSF if between 26 and 50; provide 260 NSF if between 51 and 75; provide 310 NSF if between 76 and 100. Provide 80 NSF for each additional increment of 50 projected men users greater than 100.

3. **Toilet, Female (TLTF1)...50 NSF (4.7 NSM)**
   Minimum NSF. Multiply the calculated NSF of General Waiting Area (including H. <u>Disposition Area</u>) times 0.022 to calculate the number of women users. Provide 150 NSF if between 11 and 25; provide 205 NSF if between 26 and 50; provide 260 NSF if between 51 and 75; provide 310 NSF if between 76 and 100. Provide 80 NSF for each additional increment of 35 projected women users greater than 100.

4. **Patient Education Kiosk / Alcove (CLSC2) ....30 NSF (2.8 NSM)**
   Provide one per Ambulatory Care Clinic.

5. **Patient Education Conference Room (CTA01)...................250 NSF (23.3 NSM)**
   Provide one if Ambulatory Care Provider FTE Positions authorized is less than eight. Provide two if Ambulatory Care Provider FTE positions authorized is eight or greater.

6. **Escort / Messenger Service (RECP3) ....150 NSF (4.7 NSM)**
   Provide one per Ambulatory Care Clinic.

   This serves as the control point for those staff (volunteer or paid) that escort dependent patients and/or deliver information / specimens to and from various areas (X-Ray, laboratory, nursing units, etc.) in the Hospital.

B. Clinic (MAS) Reception – Central Control and Processing Unit

1. **Reception, (RECP1)...200 NSF (18.6 NSM)**
   Minimum NSF. Provide an additional 200 NSF if ACAP Level M. Provide an additional 400 NSF if ACAP Level L.

   Accommodates the following clerks: Reception Clerk, Information Clerk, Eligibility Clerk; and, Admitting (Interview) Clerk.

2. **Office, Clerical Workstation / Interview (OFA01) ....120 NSF (11.1 NSM)**
   Provide one per MAS Interview Booth Clerk FTE position authorized.

   These clerks interview outpatients in these booths to assist them in completing 10-10 forms to determine their eligibility for medical care, to conduct a means test to verify their financial status as it relates to their eligibility for medical care and to collect necessary information for their admission as inpatients.

3. **Office, Reception Area Supervisor (OFA01) ....100 NSF (9.3 NSM**
   Provide one if in Concept of Operations.

4. **Office, Bed Control (OFA01)** .... 120 NSF (11.2 NSM)
    *Minimum NSF. Provide an additional 85 NSF per MAS Office Bed Control FTE
    position authorized greater than one.*

5. **Office, Health Benefits Advisor (OFA01)** .... 120 NSF (11.2 NSM)
    *Minimum NSF. Provide an additional 85 NSF per MAS Office Health Benefits Advisor
    FTE position authorized greater than one.*

    Health Benefits Advisors provide "hands-on" assistance to individualize the
    experience of veterans coming to this medical facility for their health care needs.
    They screen, advice and assist veterans and beneficiaries to expedite their medical
    and non-musical benefits, resolve any problems that arise and suggest alternate
    resources for those ineligible for the Department of Veterans Affairs (VA) care.

6. **Storage, Wheelchair and Stretcher (SRLW1)** .... 100 NSF (9.3 NSM)
    *Minimum NSF. Provide an additional 50 NSF if ACAP Level M. Provide an additional
    100 NSF if ACAP Level L.*

7. **Vending Machine Area (BX001)** .... 360 NSF (33.5 NSM)
    Provide one if total annual projected outpatient visits is greater than 10,000.

C. Emergency (Urgent) Care (ER) Areas

    1. **ER Reception (RECP1)** .... 100 NSF (9.3 NSM)
        Minimum NSF. Provide one per ER.

    2. **Waiting, Emergency (WRC01)** .... 100 NSF (9.3 NSM)
        *Minimum NSF. Multiply the projected number of
        annual ER clinical stops times 0.004 to calculate
        the number of seats; allocate 25 NSF for 20% of
        the calculated total number of seats for
        wheelchair accessible waiting, and 15 NSF for
        the remaining 80%.*

    3. **Toilet, Male (TLTM1)** .... 50 NSF (4.7 NSM)
        *Minimum NSF. Multiply the calculated NSF of
        General Waiting Area times 0.044 to calculate
        the number of men users. Provide 75 NSF if
        between 11 and 25; provide 100 NSF if between
        26 and 50; provide 130 NSF if between 51 and
        75; provide 150 NSF if between 76 and 100.
        Provide 80 NSF for each additional increment of
        50 projected men users greater than 100.*

    4. **Toilet, Female (TLTF1)** .... 50 NSF (4.7 NSM)
        *Minimum NSF. Multiply the calculated NSF of
        General Waiting Area times 0.022 to calculate
        the number of women users. Provide 75 NSF if
        between 11 and 25; provide 100 NSF if between*

26 and 50; provide 130 NSF if between 51 and 75; provide 150 NSF if between 76 and 100. Provide 80 NSF for each additional increment of 35 projected women users greater than 100.

5. **Waiting, Isolation (WRC02)** .... 60 NSF (5.6 NSM)

Minimum NSF. Provides for one accessible, and two standard seats for 10 Multipurpose/Special Purpose Exam and General Procedure rooms. Provide an additional 55 NSF (one accessible, and two standard seats) for each additional whole increment of ten Multipurpose Exam, Special Purpose Exam, and General Procedure rooms.

Isolation waiting is provided for patients that require separation due to conditions such as TB and other infectious diseases.

6. **Toilet, Isolation (TLTU1)** .... 50 NSF (4.7 NSM)

Provide one for male and one for female.

7. **Vital Sign Station (EXRG4)** .... 100 NSF (9.3 NSM)

Minimum NSF. Provide an additional 60 NSF for each whole increment of 10,000 Emergency Care (ER) plus Admit / Screen projected annual clinic stops. Minimum of one station. Maximum of Four stations.

In this area the vital signs of all "walk-in outpatients" are taken to determine if emergency treatment is needed.

8. **Storage, Wheelchair and Stretcher (SLRW1)** .... 50 NSF (4.6 NSM)

Provide one per ER.

9. **Security Police Alcove (OFA03)** .... 80 NSF (7.5 NSM)

Provide one if VA's Security Police Station is not adjacent to Ambulatory Care Clinic.

10. **Nurse / Communication Station (NSTA1)** .... 100 NSF (9.3 NSM)

Minimum NSF. Provide an additional 100 NSF if ACAP Levels M or L.

The Communication Station serves as the working and control center for all ER staff. The space includes ADP capability.

11. **Medication Room (MEDP1)** .... 55 NSF (5.1 NSM)

Minimum NSF. Provide an additional 25 NSF if ACAP Level L.

This room is accessible only from within the nurse station to provide secured storage for medications.

12. **Clean Utility Room (UCCL1)** .... 100 NSF (9.3 NSM)

Minimum NSF. Provide an additional 30 NSF if ACAP Levels M or L.

13. **Medical Equipment Storage Room (SRSE1)** .... 100 NSF (9.3 NSM)
Minimum NSF. Provide an additional 50 NSF if ACAP Level M. Provide an additional 130 NSF if ACAP Level L.

This room accommodates crash carts, disaster equipment carts, portable defibrillators, spirometers, patient lifts, an external pacemaker cart, ENT cart and slit lamp for eye injuries.

14. **Soiled Utility Room (USCL1)** .... 80 NSF (7.5 NSM)
Provide one per Emergency Care (ER).

15. **Office, Head Nurse (OFA01)** .... 120 NSF (11.2 NSM)
Provide one if Head Nurse FTE position is authorized for Emergency Care (ER).

16. **Office, Chief of ER / Physician (OFD01)** .... 150 NSF (14.0 NSM)
Provide one per Emergency Care (ER).

Do not duplicate in Staff Office Area

17. **Office, Secretary to the Chief of ER (SEC01)** .... 120 NSF (11.2 NSM)
Provide one if in Concept of Operations.

18. **Life Support Unit (TRET3)** .... 300 NSF (27.9 NSM)
Provide one per Emergency Care (ER).

19. **Observation and Treatment Room (TRET4)** .... 130 NSF (12.1 NSM)
Minimum NSF. Provide an additional 100 NSF per each whole increment of 1,875 projected annual Emergency Care (ER) stops greater than 1,875 if ACAP Levels S or M. Provide an additional 100 NSF per each whole increment of 1,280 annual Emergency Care (ER) clinic stops greater than 1,280 if ACAP Level L. Maximum 830 NSF.

This room accommodates all non life-threatening ER visits

20. **Exam Room, Isolation/Multipurpose (EXER1)** .... 120 NSF (11.2 NSM)
Provide one room if ACAP Levels S or M. Provide two rooms if ACAP Level L.

Serves those patients who may require infectious isolation. The sink in one room will be provided with a plaster trap in the event the casts need to be applied. Room mechanical system should negative pressure capable.

21. **Toilet/Shower, Multipurpose Exam (TLTU1)** .... 75 NSF (7.0 NSM)
Provide one per Emergency Care (ER).

This Patient Toilet is used exclusively for cleaning and delousing patients. It should be accessible from the Multipurpose Examination Room.

22. **Exam Room, Security (OPMH4)** .... 120 NSF (11.2 NSM)
Provide one per Emergency Care (ER). Provide additional rooms per Concept of Operations.

This room is used for a patient whose mental state constitutes an immediate threat to him/herself or others. The room contains no equipment with which the patient could harm him/herself or others.

23. **Toilet, Security Exam (TLTP1) ....**50 NSF (4.7 NSM)
Provide one per Security Exam Room.

24. **On-Call Room (DUTY1)..**120 NSF (11.2 NSM)
Provide one if in Concept of Operations.

25. **Toilet w/Shower, Staff (TLTS1) ....**75 NSF (7.0 NSM)
Provide one per On-Call Room.

26. **Lockers / Lounge, Staff (SL001) ....**120 NSF (11.2 NSM)
Minimum NSF. Provide if ACAP Level S and M. Provide an additional 80 NSF if ACAP Level L.

27. **Toilet, Staff (TLTU1)...**50 NSF (4.7 NSM)
Provide one per Emergency Care (ER).

28. **Housekeeping Aids Closet-HAC (JANC1)...............................**40 NSF (3.8 NSF)
Provide one per Emergency Care (ER).

D. Patient Areas – Examination-Treatment Module Core Space

Examination - Treatment modules serve all unscheduled and scheduled outpatients, as well as some inpatients, who do not require emergency care. In addition to providing walk-in (health evaluation or primary care) clinics to accommodate unscheduled outpatient visits and exam rooms to accommodate C&P exams and employee health exams; the following list identifies the majority of scheduled clinics which will be accommodated in examination / treatment modules generated by this criteria chapter. Space program for a service with two or more modules will be based on shared space for those functions in adjacent modules. To determine the number of Examination – Treatment Modules, refer to Table 2.

TABLE 2: EXAMINATION / TREATMENT MODULE CALCULATION

CALCULATED NUMBER OF EXAM ROOMS	NUMBER OF EXAM / TREATMENT MODULES
19 or fewer	1
20 to 35	2
36 to 50	3
51 to 65	4
66 to 80	5
More than 80	Divide by 15

1. **MAS: Reception / Module Control Unit (RECP1) ....**150 NSF (13.9 NSM)

Minimum NSF. for 10 or less Multipurpose and Special Purpose Exam Rooms. ACAP Level S: for 11 - 20 Exam rooms, provide an additional 50 NSF. ACAP Level M or Level L: for 11- 14 Multipurpose and Special Purpose Exam Rooms, provide an additional 50 NSF; for 15-20 Exam Rooms provide an additional 100 NSF.

Accommodates clinic clerks who are responsible for clerical services of the module.

2. **Waiting (WRC01)..60 NSF (5.6 NSM)**

   Minimum NSF. For one exam room Provide an additional 55 NSF per each Multipurpose Exam and Special Purpose Exam Room (within the Examination / Treatment Module) greater than one. Allocates 25 NSF for one accessible seat and 30 NSF for two standard seats.

3. **Toilet, Public / Patient, Male (TLTM1) ....50 NSF (4.7 NSM)**
   Minimum NSF. Provide an additional 100 NSF if calculated number of Exam Rooms is between 11 and 14. Provide an additional 150 NSF if calculates number of Exam Rooms is between 15 and 20.

4. **Toilet, Public / Patient, Female (TLTF1)...................50 NSF (4.7 NSM)**
   Minimum NSF. Provide an additional 100 NSF if calculated number of Exam Rooms is between 15 and 20.

5. **Consultation Room (OFA01).................................100 NSF (9.3 NSM)**
   Provide one room per Examination Treatment Module.

6. **Blood Draw (LBVP1)..120 NSF (11.2 NSM)**
   Minimum NSF. Provide one per Ambulatory Care Clinic. Provide an additional 60 NSF per each whole increment of ten Multipurpose and Special Purpose Exam Rooms greater than twenty.

7. **Toilet, Specimen Patient (TLTU1) ....50 NSF (4.7 NSM)**
   Provide one per Blood Draw Area.

8. **Exam Room, Multipurpose (EXRG3) ....120 NSF (11.2 NSM)**
   Divide the annual projected workload by its corresponding exam room determination factor; provide one exam room for each whole increment (See Table 3)

TABLE 3: MULTIPURPOSE EXAM ROOM DETERMINATION FACTOR

SERVICE	ANNUAL CLINIC STOPS		
	LEVEL S	LEVEL M	LEVEL L
Admit / Screen, Employee Health	3200	2000	2000
Medicine, Oncology, Gastroenterology	2280	1730	1730

Surgery, Urology, Orthopedics	6400	6400	3000
C&P	1000	1000	1000

9. **Exam Room, Special Purpose (EXRG3) .... 120 NSF (11.2 NSM)**
   Divide the annual projected workload by its corresponding exam room determination factor; provide one exam room for each whole increment (See Table 4)

10. **Exam Room, Special Purpose-GYN (EXRG8) .... 130 NSF (12.1 NSM)**
    Divide the annual projected workload by its corresponding exam room determination factor; provide one exam room for each whole increment (See Table 4).

TABLE 4: SPECIAL PURPOSE EXAM ROOM DETERMINATION FACTOR

SERVICE	ANNUAL CLINIC STOPS / VISITS		
	LEVEL S	**LEVEL M**	**LEVEL L**
Dermatology	2280	1730	1730
Podiatry	6400	6400	3000
Women's Health / GYN	3000	3000	3000

11. **Toilet, Patient (TLTU1).. 50 NSF (4.7 NSM)**
    Provide one per Examination – Treatment Module.

12. **Exam Room, Isolation (EXRG6) .... 140 NSF (13.1 NSM)**
    Provide one per Examination – Treatment Module.

    Room should be under negative pressure.

13. **Toilet, Isolation Exam Room (TLTU1)..................................... 50 NSF (4.7 NSM)**
    Provide one per Isolation Exam Room

    Locate adjacent to isolation exam room. Room should be under negative pressure.

14. **Sub-Waiting, General Procedure (WRC01) .... 60 NSF (5.6 NSM)**
    Minimum NSF. Provide one per General Procedure Room.

    Recommended this space may be combined into one to accommodate two adjacent Modules.

15. **Procedure Room, General (TRGM1)................................... 175 NSF (16.3 NSM)**
    Provide one per Examination – Treatment Module.

    Provides 150 NSF for procedure, plus 25 NSF for sink/work area.

    Recommended this space may be shared by two adjacent Modules.

16. **Toilet, General Procedure (TLTU1)....................................... 50 NSF (4.7 NSM)**

Provide one per General Procedure Room.

Recommended this space may be shared by two adjacent Modules.

17. **Nurse Triage (EXRG4) ....120 NSF (11.2 NSM)**
Provide one per Triage Nurse FTE position authorized.

18. **Nurse Station: Communication Center (NSTA4) ....150 NSF (14.0 NSM)**
Provide one per Examination – Treatment Module. Provide an additional 50 NSF if serving two adjacent modules.

This space may be shared by two adjacent Modules. This area accommodates a crash cart, two computer workstations, one printer and counter space.

19. **Nurse Station: Medication Room (MEDP1) ....60 NSF (5.6 NSM)**
Provide one per Examination – Treatment Module. Provide an additional 20 NSF if serving two adjacent modules. Provide an additional 55 NSF if Employee Health Unit is provided.

20. **Toilet, Staff (TLTU1)...50 NSF (4.7 NSM)**
Provide one per Examination – Treatment Module.

21. **Nurse Station: Intake / Exit Interview Room (EXRG4).......120 NSF (11.1 NSM)**
Provide one per Examination – Treatment Module.

Accommodates vital signs / history before exam; and final instructions / information after exam.

22. **Clean Linen, Stretcher and Medical
Equipment Storage Room (SRE01) ....80 NSF (7.5 NSM)**
Provide one per Examination – Treatment Module. Provide an additional 90 NSF if serving two adjacent modules.

For storage of mobile carts, stretchers and special medical equipment.

23. **Clean Supply Room (SRSE1)...100 NSF (9.3 NSM)**
Provide one per Examination – Treatment Module.

24. **Soiled Utility Room (USCL1)..80 NSF (7.5 NSM)**
Provide one per Examination – Treatment Module.

25. **Waiting, Immunization
Observation Area (WRC01) ....120 NSF (11.1 NSM)**
Provide one if in Concept of Operations.

26. **Immunization Room (OPIR1)..160 NSF (14.9 NSM)**
Provide one if in Concept of Operations. Minimum NSF. Provide an additional 80 NSF per each Examination – Treatment Module greater than two.

Minimum area allocated provides space for two immunization stations.

27. **EKG Room (OPEC1) ....120 NSF (11.2 NSM)**

Provide one if in Concept of Operations.

Do not duplicate space if Cardiovascular Laboratory (Chapter 210) at VAMC.

28. **Audio Booth, Single Occupancy (PEHS1)..........................120 NSF (11.2 NSM)**
Provide one if in Concept of Operations.

Do not duplicate space if Audiology and Speech Pathology (Chapter 204) at VAMC.

29. **Audio Booth Suite (PEHS4) ....375 NSF (34.9 NSM)**
Provide one if in Concept of Operations.

Area allocated provides space for two booths plus work area.

Do not duplicate space if Audiology and Speech Pathology (Chapter 204) at VAMC.

30. **Staff / Patient Multipurpose Conference**
Classroom (CRA01) ....150 NSF (14.0 NSM)
Minimum NSF. Provide one. Provide an additional 50 NSF if ACAP Level L.

This room accommodates staff review of scheduled cases prior to/after a clinic visit; educational presentations / discussions; patient / family group training sessions, etc.

E. Patient Areas – Examination-Treatment Module Support Space

Depending on VAMC Concept of Operations / Staffing, space for the following functions may be required in one or more modules. Clerical Support spaces may be planned as private offices or integrated into the MAS Reception / Control Unit.

1. **Office, Agent Orange / POW Clerk (OFA01) ....120 NSF (11.2 NSM)**
Minimum NSF. Provide an additional 64 NSF per Agent Orange / POW Clerk FTE position authorized greater than two.

Responsible for controlling all Agent Orange activity at the VAMC, and reporting appropriate information to VACO.

2. **Office, MAS Supervisor, Scheduled Clinics (OFA01)..........100 NSF (9.3 NSM)**
Provide one if in Concept of Operations

3. **Office, Health Benefits Advisor (OFA01)............................120 NSF (11.2 NSM)**
Minimum NSF. Provide an additional 64 NSF per Health Benefit Advisor FTE position authorized greater than two.

4. **Office, Scheduler (OFA01) ....120 NSF (11.2 NSM)**
Minimum NSF. Provide an additional 64 NSF per Scheduler FTE position authorized greater than two.

5. **Cubicle/Office, Compensation and Pension Clerk (OFA01)..64 NSF (5.9 NSM)**

Provide one per FTE Compensation and Pension Clerk. Provide an additional 50 NSF per Compensation and Pension Clerk FTE position authorized greater than one.

6. **Prescription Receiving Station (OFA03) .... 40 NSF (3.8 NSM)**
If in Concept of Operations. Provide one per Examination – Treatment Module.

7. **Housekeeping Aids Closet-HAC (JANC1) .... 40 NSF (3.8 NSM)**
Provide one per Examination – Treatment Module.

F. Patient Areas – Examination-Treatment Module Specialty Clinic Space

1. Genito-Urinary (GU) or Urology Clinic:

   a. **Toilet, Patient (TLTU1) .... 50 NSF (4.7 NSM)**
   Provide if in Concept of Operations and if the projected number of annual Urology Clinic stops is 2,000 or greater. Provide one per GU or Urology Clinic.

   b. **Urine Testing Alcove (LBSP1) .... 50 NSF (4.7 NSM)**
   Provide if in Concept of Operations and projected number of annual Urology Clinic stops is 2,000 or greater. Provide one per GU or Urology Clinic.

2. Gastroenterology Clinic:

   a. **Screening Proctoscopic /**
   Sigmoidoscopy Room (TRPE1) .... 175 NSF (16.3 NSM)
   Provide if in Concept of Operations and if the projected number of annual Gastroenterology clinic stops is greater than 500.

   Room accommodates procedures involving proctoscope or sigmoidoscope.

   b. **Scope Wash Room (USCL2) .... 120 NSF (11.2 NSM)**
   Minimum NSF. Provide one per Screening Proctoscopic / Sigmoidoscopy Room.

   c. **Procedure Room, Gastric (Esophageal)**
   Mobility (TREE1) .... 175 NSF (16.3 NSM)
   Provide if in Concept of Operations. Provide one if projected annual Gastroenterology clinic stops is greater than 1,000.

   d. **Toilet, Patient, Gastroenterology (TLTU1) .... 50 NSF (4.7 NSM)**
   Provide one per Screening Proctoscopic / Sigmoidscopy Room and Gastric (Esophageal) Mobility Procedure Room.

   Recommend sharing of Patient Toilet between two Gastroenterology Screening/Procedure rooms.

3. Dermatology Clinic:

   a. **Procedure / Treatment Room (TRGS1) .... 175 NSF (16.3 NSM)**

Provide if in Concept of Operations. Provide none if number of projected annual Dermatology Clinic stops is less than 2,000. Provide one if number of projected annual Dermatology Clinic stops is between 2,000 and 6,000. Provide two if number of projected annual Dermatology Clinic stops is greater than 6,000.

Provides 150 NSF for procedure/treatment, plus 25 NSF for sink/work area.

b. **Laboratory, Dermatology (LBDE1)..................................100 NSF (9.3 NSM)**
Provide if in Concept of Operations. Provide none if number of projected annual Dermatology clinic stops is less than 2,000. Provide one if number of projected annual Dermatology Clinic stops is between 2,000 and 4,000. Provide an additional 50 NSF if number of projected annual Dermatology Clinic stops is greater than 4,000.

c. **Dermatology Medication Preparation
Storage Room (MEDP1)...90 NSF (8.4 NSM)**
Provide if in Concept of Operations. Provide one if number of projected annual Dermatology Clinic stops is greater than 2,000.

d. **Treatment Room, Phototherapy (PDU1).......................225 NSF (20.9 NSM)**
Provide if in Concept of Operations. Provide none if projected number of annual Dermatology clinic stops is less than 2,000. Provide an additional 100 NSF if projected number of annual Dermatology Clinic stops is greater than 4,000.

Accommodates whole body, and hand and foot treatment boxes, a screened area for changing clothing, storage for medications/supplies, and work area.

e. **Shower Room, Phototherapy (SHWR1)............................50 NSF (4.7 NSM)**
Provide one if in Concept of Operations.

4. Moh's Chemosurgery Clinic:

Accommodates surgical removal of external tissues involving microscopic control of tissue removal layer by layer through the systematic use of frozen sections.

a. **Reception and Waiting (RECP1) ....150 NSF (14.0 NSM)**
Provide one if in Concept of Operations.

b. **Exam Room, Consultation (EXRG3) ....120 NSF (11.2 NSM)**
Provide one if in Concept of Operations.

c. **Procedure Room (TRGS1)...175 NSF (14.0 NSM)**
Provide one if in Concept of Operations.

Provides 150 NSF for procedure/treatment, plus 25 NSF for sink/work area.

d. **Laboratory (LBDE1)...150 NSF (14.0 NSM)**
Provide one if in Concept of Operations.

5. Orthopedic Clinic:

a. **Cast Room (OPCR1)** .... 225 NSF (20.9 NSM)
Min NSF. Provide if in Concept of Operations. Provide none if projected number of annual Orthopedic clinic stops is less than 1,000 .Provide one for 1,000 – 2,999 annual clinic stops. Provide an additional 125 NSF if projected number of annual Orthopedic clinic stops is between 3,000 and 6,000. Provide an additional 275 NSF if projected number of annual Orthopedic clinic stops is greater than 6,000.

6. Oncology Clinic:

a. **Treatment Room, Chemotherapy (OPCT1)**.................... 330 NSF (30.7 NSM)
Min NSF Provide if in Concept of Operations and if Secondary or Tertiary level Cancer Program. Provide none if projected number of annual Oncolgy clinic stops is less than 500. Provide an additional 100 NSF for each whole increment of 300 projected annual Oncolgy clinic stops greater than 900. Maximum 830 NSF.

The space provided includes storage space for supplies and an administrative work area (desk and files) for the staff member monitoring the treatments.

b. **Toilet, Chemotherapy Treatment (TLTU1)** .... 50 NSF (4.7 NSM)
Provide one if Chemotherapy Treatment Room is 330 NSF. Provide two if Chemotherapy Treatment Room is greater than 330 NSF.

c. **Agent Preparation Room, Chemotherapy (OPCT2)** ..... 120 NSF (11.2 NSM)
Provide if in Concept of Operations.

d. **Office, Data Coordinator Tumor Registry (OFA01)** .... 100 NSF (9.3 NSM)
Provide if in Concept of Operations. Provide one per FTE position authorized.

e. **Family Counseling Room (OFA01)** .... 120 NSF (11.2 NSM)
Provide if in Concept of Operations and if ACAP Level L Program.

7. AIDS Clinic:

a. **Procedure Room,
Aerosolized Pentamidine (OPRT1)** .... 120 NSF (11.2 NSM)
Provide if in Concept of Operations and if ACAP Level M. Provide two if ACAP Level L.

8. Prosthetics Clinic:

Provide Presthetics Clinic space only if VAMC does not have a Prosthetics and Sensory Aids Service (Chapter-308). Space below is for a basic service level Prosthetics Clinic

a. **Waiting (WRC01)** .... 60 NSF (5.6 NSM)
Minimum NSF. Provides space for 3 accessible seats. Provide one if Medical Center / Hospital does not have a Prosthetic and Sensory Aids Service. Add the

projected number of New Appliances Furnished (number of disabilities served) plus the projected number of Repairs Furnished (number of disabilities served), multiply by 0.0004 to calculate the number of seats required. Provide 25 NSF per the calculated number of seats over three.

b. **Storage, Appliance (SRCS1) ....150 NSF (14.0 NSM)**

Minimum NSF. Provide one if Medical Center / Hospital does not have a Prosthetic and Sensory Aids Service. Add the projected number of New Appliances Furnished (number of disabilities served) plus the projected number of Repairs Furnished (number of disabilities served), multiply by 0.06. If the product is less than 150, provide minimum area; if the product is greater than 150, provide calculated area.

c. **Mailing Area (OFA01)...80 NSF (7.5 NSM)**

Minimum NSF. Provide one if Medical Center / Hospital does not have a Prosthetic and Sensory Aids Service, and projected number of New Appliances Furnished (number of disabilities served) plus the projected number of Repairs Furnished (number of disabilities served) is greater than 3,000.

d. **MAS: Office, Prosthetic Clerk (OFA01).........................120 NSF (11.2 NSM)**
Provide one if Medical Center / Hospital does not have a Prosthetic and Sensory Aids Service. Provide an additional 80 NSF per Prosthetic Clerk FTE position authorized greater than one.

9. Nutrition Clinic:

a. **Office, Dietitian (OFA01)...120 NSF (11.2 NSM)**
Provide one per Dietitian FTE position authorized. Provide an additional 100 NSF for Classroom function and if ACAP Levels S or M.

b. **Classroom (CRA01) ....200 NSF (18.6 NSM)**

Provide one if ACAP Level L. Add an additional 50 NSF if the projected number of annual Outpatient visits is greater than 150,000.

G. Employee Health Unit.

In addition to the treatment of on-the-job illnesses and injuries, this unit accommodates pre-employment physicals, annual screening tests (TB, hepatitis, etc.) and storage / administration of employees' personal medications (allergy shots insulin injections, etc.) for all the Department of Veterans Affairs (VA) medical center employees or other Department of Veterans Affairs (VA) facilities (regional office, data processing center, etc.) that may be served by the medical center. Space for Employee Health is incorporated into a clinic exam module.

For Waiting Area and Exam / Treatment Room, utilize module spaces.

1. **Office, Employee Health Nurse (OFA01) .... 120 NSF (11.2 NSM)**
    Provide one per Employee Health Nurse FTE position authorized.

2. **Cubicle, Employee Health Clerk (OFA03) .... 64 NSF (5.9 NSM)**
    Minimum NSF. Provide one (cubicle) per FTE Health Clerk position authorized.

3. **Storage, Employee Health Records (FILE1) .... 30 NSF (2.8 NSM)**
    Minimum NSF. Provide an additional 30 NSF if total number of employees served is between 500 and 1,000. Provide an additional 60 NSF if total number of employees served is between 1,000 and 2,000. Provide an additional 150 NSF if total number of employees served is greater than 2,000 and if in Concept of Operations.

H. Disposition Area

This serves as the out-processing area for scheduled and unscheduled outpatient visits, last before leaving Ambulatory Care. Depending on Concept of Operations of the medical center, the Disposition Area may be combined with the Reception Area, creating one centralized reception disposition area servicing all unscheduled and scheduled outpatients. This centralized concept is most appropriate for a medical center with ACAP Level S ambulatory care program.

1. **Waiting (WRC01) .... 100 NSF (9.3 NSM)**
    Minimum NSF. If ACAP Level S, multiply the projected number of annual outpatient visits times 0.0004 to calculate the number of seats. . If ACAP Level M, multiply the projected number of annual outpatient visits times 0.0004 to calculate the total number of seats. If ACAP Level L, multiply the projected number of annual outpatient visits times 0.0002 to calculate the total number of seats. Provide 25 NSF for 20% of the calculated total number of seats for accessible seating, and 15 NSF for the remaining 80% for standard seating ; add calculated area to General Waiting.

Area required for Disposition Fundtions are added to 5.A. <u>Reception Areas</u>
Toilet area requirements are provided there, based on the sum of General Waiting area.

2. **MAS: Office, Disposition Supervisor (OFA01)....................120 NSF (11.2 NSM)**
Provide one per Disposition Supervisor FTE position authorized.

3. **MAS: Office, Coding Clerk (OFA01)....................................120 NSF (11.2 NSM)**
Minimum NSF. Provide an additional 50 NSF per Disposition Coding Clerk FTE position authorized greater than two.

   Coding Clerks are responsible for coding ambulatory surgery diagnoses.

4. **MAS: Office, Patient Funds Clerk (OFA01) ....120 NSF (11.2 NSM)**
Minimum NSF. Provide an additional 50 NSF per Patient Funds Clerk FTE position authorized greater than two.

   This clerk keeps records on funds and transactions concerning patients' accounts, determines eligibility for indigent supplies and services, and keeps records of commitment, guardianship and competency of patients. It should be planned as a separate office similar in design (cashier window) to Agent Cashier Office.

5. **MAS: Office, Clothing Room Clerk (OFA01) ....80 NSF (7.5 NSM)**
Provide one if Clothing Room Clerk FTE position is authorized. Provide an additional 0.33 NSF per Hospital Bed excluding Long Term SCI.

   Do not duplicate this space in Environmental Management Chapters. The space provided accommodates a work station for the clerk, storage space for patients' clothing and small personal effects, and large pieces of luggage or other items.

6. **MAS: Office, Billing Clerk (OFA01)....................................120 NSF (11.2 NSM)**
Minimum NSF. Provide one if Billing Clerk FTE position is authorized. Provide an additional 50 NSF per Billing Clerk position authorized greater than two.

   This clerk is responsible for preparing bills for private insurance companies for medical care provided to non-service connected disabled veterans, as well as for billing non-service connected veterans who agree to a co-payment for medical care.

7. **MAS: Office, Community
Nursing Home Clerk (OFA01)..120 NSF (11.2 NSM)**
Minimum NSF. Provide one if Community Nursing Home Clerk FTE position is authorized. Provide an additional 50 NSF per Community Nursing Clerk FTE position authorized greater than two.

   This clerk is responsible for the administrative processing and budget control of patients referred to community nursing homes at the Department of Veterans Affairs (VA) expense.

8. **MAS: Office, Details Clerk (OFA01) ....120 NSF (11.2 NSM)**
Provide one if Details Clerk FTE position is authorized.

This clerk is primarily responsible for maintaining the seriously ill roster; assisting relatives and significant others in making funeral arrangements; completing the Department of Veterans Affairs (VA) and other legal documents such as death certificates; and records authorizations for surgical and autopsy consent.

9. **MAS: Grieving Room (OFA01) .... 120 NSF (11.2 NSM)**
Provide one if in Concept of Operations.

Locate adjacent to Details Clerk office. This area provides a suitable setting for meeting with grieving family members. Space accommodates 2-4 family members meeting with Clerk.

10. **Toilet, Grieving Room (TLTU1) .... 50 NSF (4.7 NSM)**
Provide one per MAS: Grieving Room.

11. **MAS: Office, Health Benefits Advisor
(Patient Services Assistant) (OFA01) .... 120 NSF (11.2 NSM)**
Minimum NSF. Provide an additional 50 NSF per Health Benefits Advisor FTE position authorized greater than two.

12. **MAS: Office, Travel Clerk (OFA01) .... 120 NSF (11.2 NSM)**
Minimum NSF. Provide an additional 80 NSF per Travel Clerk FTE position authorized greater than two.

13. **MAS: Office, Agent Cashier (CASH1) .... 150 NSF (14.0 NSM)**
Minimum NSF. Provide an additional 50 NSF per Agent Cashier FTE position authorized greater than one.

This office provides approved cash transactions. It should be adjacent to the MAS: Travel Clerk Office.

I.   Hospital Based Home Care (HBHC)

Provide program if in Concept of Operations as approved by VHA.

1. **Office, HBHC Coordinator (OFA01) .... 120 NSF (11.2 NSM)**
Provide one if in Concept of Operations.

2. **Office, Secretary and Records (OFA01) .... 100 NSF (9.3 NSM)**
Provide one if in Concept of Operations.

3. **Office, Private Interview Room (OFA01) .... 120 NSF (11.2 NSM)**
Provide one if in Concept of Operations.

4. **Office, Social Worker (OFA01) .... 120 NSF (11.2 NSM)**
Provide one if in Concept of Operations.

5. **Office, Public Health Nurse (OFA01) .... 120 NSF (11.2 NSM)**
Provide one if in Concept of Operations.

6. **HBHC Team Conference Room (CRA01)............................** 200 NSF (18.6 NSM)
Minimum NSF. Provide one if in Concept of Operations.

J. Support Areas

Ambulatory Care Support includes specific space found in other hospital services/Criteria chapters. Determination of need will be made on an individual project basis. Refer to the space planning criteria chapters listed below for space requirements:

Satellite Radiology Suite.. Chapter 276 – Radiology Service
Specimen Collection Area .... Chapter 240 – Laboratory Service
Ambulatory Surgery... Chapter 286 – Surgical Service
ECG Testing..Chapter 210 – Cardiovascular Labs
Ventilatory Testing...................................Chapter 212 – Pulmonary Medicine Service
Hearing/Audiometry Testing .... ……………Chapter 204 – Audiology and Speech
Pathology Service
EEG Testing.. Chapter 226 – EEG Lab
EMG Testing ....Chapter 270 - RMS
Staff Lockers, Lounges and Toilets... Chapter 410 – LLTS
Outpatient Pharmacy..Chapter 268 – Pharmacy Service

1. **Clean Supply Room (SRSE1)..** 100 NSF (9.3 NSM)
Minimum NSF. Provide one per each Exam – Treatment Module. Provide an additional 40 NSF for each whole increment of 5 Multipurpose and Special Purpose Exam Rooms (in the module) greater than ten.

2. **Soiled Utility Room (USCL1)...** 80 NSF (7.5 NSM)
Minimum NSF. Provide one per each Exam – Treatment Module. Provide an additional 30 NSF for each whole increment of 5 Multipurpose and Special Purpose Exam Rooms (in the module) greater than ten.

3. **Storage, Equipment (SRE01) ....** 100 NSF (9.3 NSM)
Provide one per Exam – Treatment Module.

4. **Crash Cart Alcove (RCA01)...** 20 NSF (1.9 NSM)
Provide one per Exam – Treatment Module.

5. **Stretcher / Wheelchair Alcove (SRLW1)................................** 60 NSF (5.6 NSM)
Provide one per Exam – Treatment Module.

6. **Housekeeping Aids Closet-HAC (JANC1).............................** 40 NSF (3.8 NSM)
Provide one per Exam – Treatment Module.

7. **Copy Room (RPR01)...** 100 NSF (9.3 NSM)
Provide one per Exam – Treatment Clinic.

8. **Storage, Forms / Literature (SRS01)....................................** 100 NSF (9.3 NSM)
Provide one per Exam – Treatment Clinic.

K. Staff and Administrative Areas

The following areas accommodate those staff responsible for overall administration of ambulatory care.

1. **Office, Ambulatory Care ACOS (OFA01)** .... 150 NSF (13.9 NSM)
   Provide one if in Concept of Operations

2. **Office, Secretary / Clerical (SEC01)** .... 120 NSF (11.2 NSM)
   Minimum NSF. Provide an additional 50 NSF per Clerical FTE position authorized greater than one.

3. **Office, Ambulatory Care**
   Administrative Assistant to ACOS (OFA01)(OFA02) .... 100 NSF (9.3 NSM)
   Minimum NSF. Provide an additional 50 NSF per Administrative Assistant FTE position authorized greater than one. (OFA01 for standard furniture. OFA02 for systems furniture)

4. **Office, Ambulatory Care Coordinator (OFA01)(OFA02)** .... 120 NSF (11.2 NSM)
   Provide one if ACAP Level S and ACOS for Ambulatory Care position is not authorized. (OFA01 for standard furniture. OFA02 for systems furniture)

5. **Office, Ambulatory Care**
   Nursing Supervisor (OFA01)(OFA02) .... 120 NSF (11.2 NSM)
   Provide one per Ambulatory Care Clinic. (OFA01 for standard furniture. OFA02 for systems furniture)

6. **Office, Chief MAS for Ambulatory Care (OFA01)(OFA02)** . 120 NSF (11.2 NSM)
   Provide one if Chief MAS for Ambulatory Care FTE position is authorized. (OFA01 for standard furniture. OFA02 for systems furniture)

7. **Office, Chief of Clinic Section (OFA01)(OFA02)** .... 150 NSF (13.9 NSM)
   Provide one if Chief of Clinic Section FTE position is authorized. (OFA01 for standard furniture. OFA02 for systems furniture)

8. **Office, Ambulatory Care Physician / Provider (OFD03)** .... 120 NSF (11.2 NSM)
   Provide one per every increment of 2.5 Multipurpose and Special Purpose Exam Rooms.

9. **Office, Advice Nurse (OFA01)(OF02)** .... 120 NSF (11.2 NSM)
   Provide one per Advice Nurse FTE position authorized and if in Concept of Operations. (OFA01 for standard furniture. OFA02 for systems furniture)

10. **Office, Social Worker (OFA01)(OFA02)** .... 120 NSF (11.2 NSM)
    Provide one per Social Worker FTE position authorized and if in Concept of Operations. (OFA01 for standard furniture. OFA02 for systems furniture)

11. **Office, Mental Health Provider (OFDC1)** .... 120 NSF (11.2 NSM)
    Provide one per Mental Health Provider FTE position authorized and if in Concept of Operations.

12. **Office, Professional (OFA01)(OFA02)** .... 120 NSF (11.2 NSM)

Provide one per Professional FTE position (Physician Extender, Dietician, Pharmacist, Women's Health Manager, etc.) authorized and if in Concept of Operations. (OFA01 for standard furniture. OFA02 for systems furniture)

13. **Office, Administration (OFA01)(OFA02)**............................**120 NSF (11.2 NSM)**
Provide one per Administrative Staff FTE position authorized requiring a private office and if in Concept of Operations. (OFA01 for standard furniture. OFA02 for systems furniture)

Any staff who interviews or counsels patients; i.e., Group Practice Manager, Nurse Educator, Health Care Integrator, etc.

14. **Office, Head Nurse (OFA01)(OFA02)** ....**120 NSF (11.2 NSM)**
Provide one per Ambulatory Care Clinic and if in Concept of Operations. (OFA01 for standard furniture. OFA02 for systems furniture)

15. **Cubicle, Administrative (OFA03)** ....**64 NSF (5.9 NSM)**
Provide one per Administrative Clerk FTE position authorized requiring a dedicated workspace but not a private office.

16. **Cubicle, Clerk (OFA03)**..**64 NSF (5.9 NSM)**
Provide one per FTE Clerk position authorized.

17. **Telemedicine Room (XVC01)** ....**120 NSF (11.2 NSM)**
Provide one if in Concept of Operations.

18. **Conference Room (CRA01)**..**300 NSF (27.9 NSM)**
Provide one if total Ambulatory Care Provider FTE positions is greater than eight.

The following provides programming of Lounge, Lockers, and Toilets at department/service/chapter level. Otherwise, sum all departments/services/chapters data for Lockers, Lounges and Toilets, and program space in Chapter 410-EMS Lockers, Lounges, Toilets and Showers. Either/or – do not duplicate space.

19. **Lounge, Staff (SL001)**..**160 NSF (14.9 NSM)**
Provide a minimum of 160 NSF; or 15 NSF for each FTE position authorized, whichever is greater.

20. **Locker Room, Staff (LR001)**..**80 NSF (7.5 NSM)**
Min NSF. Provides or FTE non-office space position up to 13. Provide an additional 6 NSF per FTE position authorized for whom office space is not provided greater than thirteen.

21. **Toilet, Staff (TLTU1)**..**50 NSF (4.7 NSM)**
Divide the total number of FTE positions authorized by 15. Provide one toilet for each whole increment. Minimum of 5 authorized FTE positions to provide a toilet.

L. Residency Program

The following provides space programming at department/service/chapter level. Otherwise, sum all departments/services/chapters data for Residency Program, and program space in Chapter 402 – Educational Facilities. Either/or – do not duplicate space.

1. **Preceptor / Consult Room (OFDC1) ....120 NSF (11.2 NSM)**
   Provide one per eight resident positions authorized (serving as Ambulatory Care Providers at peak shift) and if in Concept of operations

2. **Cubicle, Resident (OFA03)..64 NSF (5.9 NSM)**
   Provide one per resident position authorized (serving as Ambulatory Care Providers at peak shift) and if in Concept of Operations.

3. **Cubicle, Student Study (OFA03) .... 30 NSF (2.8 NSM)**
   Provide one per Student position authorized and if in Concept of Operations.

4. **Resident Library (LIBB1)..140 NSF (13.1 NSM)**
   Provide one if in Concept of Operations.

5. **Conference Room (CRA01)..250 NSF (23.3 NSM)**
   Provide one if in Concept of Operations.

6   PLANNING AND DESIGN CONSIDERATIONS

A. Net-to-department gross factor **(NTDG)** for **Ambulatory Care – Hospital Based** is **1.65**. This number, when multiplied by the programmed net square foot (NSF) area, determines the departmental gross square feet (DGSF).

B. Provide 2.5 examination rooms per each Ambulatory Care Provider. Examination rooms are calculated based on workload, and divided by 2.5 rounding down to calculate required number of providers. Refer to Tables 1 – 4 in Section 3: Operating Rationale And Basis Of Criteria, and Section 5: Space Criteria for calculations for number of exam rooms and clinic modules. Refer to VHA Directive 2004-031.

C. Locate Ambulatory Care near the building main entrance to minimize length of travel for patients and visitors.

D. Patient check-in should be located adjacent to the waiting area while maintaining patient confidentiality. The waiting area should be sub-divided into smaller areas; either by the use of partitions or by the placement of furniture.

E. Locate the Patient Education Kiosk / Alcove adjacent to Waiting. This area will be provided with a computer, DVD player, VCR, and printer. Patients will complete self-assessments and health surveys, access health-related information, and view media specifically directed to their specific health concerns and treatments. Patient confidentiality should be maintained.

F.   Per HIPPA, patient confidentiality should be maintained when providing personal information to interview clerks and/or other staff.

G.   A minimum clear dimension of 10'-0" should be provided in each examination room. Provide a minimum of six feet (6'-0") in corridors to accommodate the passage of two wheelchairs.

H.   Groups of exam rooms and provider offices should be located to encourage use by other service teams as clinic demand fluctuates. Care should be given to maintain separation between patient and staff circulation.

I.   Office space for residents should be grouped in one area close to staff physicians. The Conference Room (when provided) should be near the administrative offices. Space should be allocated for the maximum number of residents, students/trainees typically on duty at one time.

J.   Refer to Department of Veterans Affairs (VA) Office of Facilities Management Handbooks, Standards, Standard Details, and Design Guides for technical criteria.

7. FUNCTIONAL RELATIONSHIPS MATRIX

TABLE 5: FUNCTIONAL RELATIONSHIP MATRIX

| SERVICES	RELATIONSHIP	REASON
Eye Clinic	1	A,B,G,H,I
Pharmacy – Outpatient Satellite	1	C,G,I,K
Radiology – Outpatient Satellite	1	G,H,I
Audiology and Speech Pathology	2	G,H
Dental Service	2	G,H
Radiology – Main Suite	2	G,H,I
Veterans Assistance Unit	2	H,I
Canteen	3	H
Cardiovascular Laboratories	3	G,H
Clinical Services Administration	3	G
Drug Dependence Treatment Clinic	3	G,H
Laboratory Service	3	G,H,I
Nuclear Medicine Service	3	G,H
Nursing Service Administration	3	G
Prosthetics and Sensory Aids Service	3	G,H

Legend:

1. Especially Important - Essential for services to be adjacent.
2. Important - Services to be in proximity, on the same floor.
3. Limited Importance – Services within the same building but different floors acceptable.
X. Undesirable – Separation desirable.

Reasons: (Use as many as appropriate)

A. Common use of resources
B. Accessibility of supplies
C. Urgency of contact
D. Noise or vibration
E. Presence of odors or fumes
F. Contamination hazard
G. Sequence of work
H. Patient's convenience
I. Frequent contact
J. Need for security
K. Others (specify)
L. Closeness inappropriate

8. **FUNCTIONAL DIAGRAM 1:** AMBULATORY CARE SINGLE MODULE RELATIONSHIP
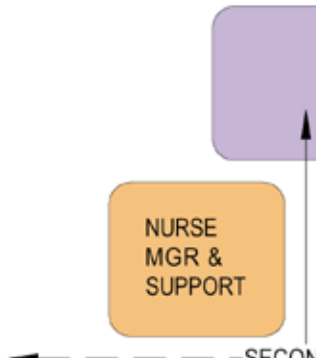
9   FUNCTIONAL DIAGRAM 2: AMBULATORY CARE MULTIPLE MODULE RELATIONSHIP