# CHAPTER 279: VETERANS HEALTH ADMINISTRATION: POLICE SERVICE

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#### 1 PURPOSE AND SCOPE

This document outlines Space Planning Criteria for Chapter 279: Police Service. It applies to all medical facilities at the Department of Veterans Affairs (VA).

These criteria support the functions of the service including implementation of policies and law enforcement operations for the protection of patients, visitors, and employees, and the protection of property and the maintenance of law and order on property under the charge and control of the Veterans Health Administration.

### 2 **DEFINITIONS**

- A. <u>Concept of Operations</u>: 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 or optometric services to be provided in the new or remodeled space.
- B. <u>Departmental Net to Gross (DNTG) Conversion Factor</u>: A parameter, determined by the VA for each space planning criteria chapter, used to convert the programmed Net Square Foot (NSF) area to the Department Gross Square Foot (DGSF) area. The **DNTG** Departmental Conversion Factor for **Police Service** is **1.30**
- C. <u>Full-Time Equivalent (FTE)</u>: 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.
- D. <u>Functional Area</u>: The grouping of rooms and spaces based on their function within a specific service. Typical Functional Areas for Police and Security Service include Duty Areas and Staff and Administrative Areas.
- E. <u>Input Data Statement</u>: 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. This information is processed through mathematical and logical operations in SEPS.
- F. <u>Police Service</u>: Formerly Police and Security Service, implements policies and procedures related to facility security and law enforcement operations. Functions of the service include the protection of patients, visitors, and employees. It also includes the protection of property and the maintenance of law and order on property under the charge and control of the Veterans Health Administration.
- G. <u>Program for Design (PFD)</u>: A space program based on criteria set forth in this document and specific information about Concept of Operations, workload projections and staffing levels authorized.

H. <u>SEPS (VA-SEPS)</u>: 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 all VA space planning criteria chapters. VA-SEPS has been designed to aid healthcare planners in creating a space plan based on a standardized set of criteria parameters.

#### 3 OPERATING RATIONALE AND BASIS OF CRITERIA

- A. Space planning criteria have been developed on the basis of an understanding of the activities involved in the functional areas of the Police Service and its relationship with other services of a medical facility. These criteria are predicated on established and/or anticipated best practice standards, as adapted to provide environments supporting the highest quality heath care for Veterans.
- B. These criteria are subject to modification relative to development in the equipment, medical practice, vendor requirements, and subsequent planning and design. The selection of the size and type of Police Service equipment is determined by VACO and upon Veterans Health Administration (VHA) anticipated medical needs.

## 4 PROGRAM DATA REQUIRED (Input Data Questions)

- A. Mission Input Data Statements
  - 1. Is a Holding Room authorized? (M)
- B. Workload Input Data Statements
  - 1. How many daily ID Card / Registration visits are projected? (W)
- C. Staffing Input Data Statements
  - 1. How many Assistant Chief FTE positions are authorized? (S)
  - 2. How many Detective FTE positions are authorized? (S)
  - 3. How many Clerical FTE positions are authorized? (S)
  - 4. How many Male Police Office FTE positions are projected? (S)
  - 5. How many Female Police Officer FTE positions are projected? (S)
- D. Miscellaneous Input Data Statements
  - 1. How many Security Consoles are projected? (Misc)

### **5 SPACE CRITERIA**

- A. Duty Areas:

The Operations Room should be provided with a walk-up window.

The Holding Room is for short-term detention of offenders waiting for transportation to other facilities, and for assaultive patients waiting for transfer to patient units. A shatterproof window should be provided and the door to the room should open outward.

- 4. Storage, Armory and Weapons (SRS01)......60 NSF (5.6 NSM) Provide one per Police Service.

This space should be contiguous to the Staff Locker Rooms. A work surface for weapon cleaning and maintenance should be provided.

- 6. Conference / Training (CRA01)......300 NSF (27.9 NSM) Provide one per Police Service.

This room provides space for training for physical restraint tactics, baton, and classroom training.

### B. Staff and Administrative Areas:

### D. Staff Lounge, Lockers and Toilets

Police Officer FTE positions is greater than thirteen.

A separate male locker room is required as Police Officers change into their uniforms on-site. Police offices should not share locker room space with other employees. Locker rooms should be located adjacent to the Armory / Weapons storage space.

A separate male locker room is required as Police Officers change into their uniforms on-site. Police offices should not share locker room space with other employees. Locker rooms should be located adjacent to the Armory / Weapons storage space.

### 6 PLANNING AND DESIGN CONSIDERATIONS

- A. Net-to-department gross factor **(NTDG)** for **Police Service** is **1.30**. This number when multiplied by the programmed Net Square Foot (NSF) area determines the Departmental Gross Square Feet (DGSF).
- B. Police Service should be located on the ground level of the main hospital building in proximity to the main lobby, admissions area, and emergency treatment area.
- C. The Police Service functional areas should be contiguous.
- D. The Operations Room is provided for many functions. These include: providing space for radio equipment, the monitoring of security surveillance television monitors and security alarms, patient and staff interaction including providing information, receiving complaints, issuing equipment, issuing keys, issuing passes to authorized individuals, checking identifications, screening visitors, preparing journals and reports, and filing violation reports and tickets.

### 7 FUNCTIONAL RELATIONSHIPS

Relationship of Police and Security Service to services listed below:

TABLE 1: FUNCTIONAL RELATIONSHIP MATRIX

SERVICES	RELATIONSHIP	REASON
Lobby	1	K (visibility)
Ambulatory Care	2	J
Canteen Service	2	J
Credit Union	2	J
Fiscal Service	2	J
Hospital Director's Suite	2	J
Medical Administration Service	2	J
Pharmacy Service	2	J
Environmental Management Service	3	G
Day Hospital	3	G
Dietetic Service	3	G
Engineering Service	3	G
Nursing Service Administration	3	G
Outpatient Psychiatric Service	3	G
Psychology Service	3	G
AMM Service- Administration	3	G
AMM Service-SPD	3	G
AMM Service-Warehouse	3	G
Domiciliary	X	L
Substance Abuse	X	L
Veterans Assistance Unit	X	L

### Legend:

# Relationship

- 1. Adjacent
- 2. Close / Same Floor
- 3. Close / Different Floor Acceptable
- 4. Limited Traffic
- X. Separation Desirable

### Reasons:

- 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

# **FUNCTIONAL DIAGRAM**

