CHAPTER 406: VETERANS HEALTH ADMINISTRATION – ENVIRONMENTAL MANAGEMENT SERVICE (EMS) ADMINISTRATION

| 1 | Purpose and Scope | 406-2 |
|---|--|-------|
| 2 | Definitions | 406-2 |
| 3 | Operating Rationale and Basis of Criteria | 406-3 |
| 4 | Program Data Required (Input Data Questions) | 406-3 |
| 5 | Space Criteria | 406-4 |
| 6 | Planning and Design Considerations | 406-5 |
| 7 | Functional Relationships | 406-6 |
| 8 | Functional Diagram | 406-7 |

1 PURPOSE AND SCOPE

This document outlines space planning criteria for Chapter 406: Environmental Management Services Administration. It applies to all medical facilities at the Department of Veterans Affairs (VA).

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 EMS-Administration is 1.20.
- C. <u>Environmental Management Service Administration</u>: EMS Administration includes office space, storage and linen handling areas, housekeeping closets, and laundry.
- D. <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 40 hours per week.
- E. <u>Functional Area</u>: The grouping of rooms and spaces based on their function within a clinical or clinical support service. Typical Functional Areas are Reception Areas, Patient Areas, Support Areas, Staff and Administrative Areas, and Residency Program.
- F. Input Data Statement: 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.
- 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.

I. <u>Workload</u>: 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. The workload projections are generated by methodology based upon the expected veteran population in the respective market / service area. Healthcare planners working on VA medical center, hospital or satellite outpatient clinic projects will utilize and apply the workload based criteria set forth herein for identified services and modalities to determine room requirements for each facility.
- B. Space planning criteria have been developed on the basis of an understanding of the activities involved in the functional areas of Environmental Management Service Administration 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.
- C. 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 Environmental Management Service Administration equipment is determined by VACO and upon Veterans Health Administration (VHA) anticipated medical needs.
- D. These criteria are based on the net square footage in each facility requiring daily housekeeping.
- E. Space planning is based on the number of FTE's required to perform daily cleaning activities. Assume that an FTE can clean approximately 14,000 NSF per shift.
- F. Support space requirements are based on supplies and the number and types of equipment to be stored.

4 PROGRAM DATA REQUIRED (Input Data Questions)

- A. Mission Input Data Statements
 - 1. Is an EMS Assistant Chief FTE position authorized? (M)
- B. Workload Input Data Statements
 - 1. How many inpatient beds in total are projected for this facility? (W)
- C. <u>Staffing Input Data Statements</u>
 - 1. How many EMS Clerical FTE positions are authorized? (S)
 - 2. How many EMS Supervisor and Clerical / Technical Administrative FTE positions are authorized? (S)

D. <u>Miscellaneous Input Data Statements</u>

- 1. What is the estimated Project Level (1, 2, 3 or 4) for this facility? (Misc)
- 2. If Level 4, what is the estimated total NSF for this facility? (Misc)

5 SPACE CRITERIA

- A. Staff and Administrative Areas

B. Support Areas

1. Storage, Environmental Management Supplies and Large Equipment (SRSE1).....See Table 1

| PROJECT LEVEL ESTIMATED | NSF ALLOCATED | |
|----------------------------|---|--|
| 1 (15,000 to 49,999 NSF) | 200 NSF | |
| 2 (50,000 to 99,999 NSF) | 400 NSF | |
| 3 (100,000 to 249,999 NSF) | 800 NSF | |
| 4 (250,000 NSF or greater) | Provide an additional 100 NSF for every whole increment of 50,000 NSF | |

TABLE 1: CENTRAL STORAGE SPACE ALLOCATION

Equipment stored in the Environmental Management Supplies and Large Equipment space include Vacuum Cleaning Machines, Floor Buffing Machines, 55 Gallon Drums of Cleaning Chemicals, and various supplies and detergents. Charging of Battery-powered equipment is also accommodated in this space.

patient beds greater than two-hundred fifty.

- 5. **Storage, Patient Personnel Items (SRPB1)**.....**300 NSF (27.9 NSM)** *Minimum NSF; provide an additional 50 NSF for each increment of 100 patient beds projected greater than two-hundred.*

6 PLANNING AND DESIGN CONSIDERATIONS

- A. Departmental net-to-gross factor (DNTG) for Environmental Management Service Administration is 1.20. This number when multiplied by the programmed net square foot (NSF) area determines the departmental gross square feet.
- B. EMS should be located near the staff service entry and in close proximity to the loading dock.
- C. Consideration must be given to properly ventilating storage areas that are designed for equipment recharging.

7 FUNCTIONAL RELATIONSHIPS

Relationship of Environmental Management Service Administration to services listed below:

| SERVICE | RELATIONSHIP | REASONS |
|-----------------------------------|--------------|-----------|
| Central Lockers, Toilets, Showers | 1 | A,C,I |
| Linen Distribution | 2 | A,B,C,G,I |
| Loading Dock | 2 | A,C,G,I |
| AMM Service | 3 | A,B,I |
| Engineering Service | 3 | l |
| Human Resources Service | 3 | A,I |
| Administration Suite | 4 | |

TABLE 2: FUNCTIONAL RELATIONSHIP MATRIX

Legend

Relationship:

- 1. Adjacent
- 2. Close / Same Floor
- 3. Close / Different Floor Acceptable
- 4. Limited Traffic
- 5. 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 convenience
- I. Frequent contact
- J. Need for security
- K. Closeness inappropriate

8 FUNCTIONAL DIAGRAM

