

AUSHFG SPATIAL BENCHMARKS

PURPOSE OF THE SPATIAL BENCHMARKS

The purpose of the AusHFG Spatial Benchmarks, an Australasian Health Infrastructure Alliance (AHIA) initiative, is to support the development of high level area estimates for common hospital departments / services.

Spatial benchmarking data would typically be used during initial planning phases to inform early cost planning and indicative footprint requirements prior to the development of detailed schedules of accommodation. This is important information which can be used to advise early investment decisions, as well as site selection and staging strategies. The AusHFG spatial benchmarks will also provide a high-level reference for governing bodies to assess whether proposed area allocations for a project, throughout the phases of planning and design, are broadly in line with AusHFG recommended areas.

HOW WERE THE BENCHMARKS DEVELOPED?

The AusHFG spatial benchmarks are derived from schedules of accommodations (SOAs) within the AusHFG Health Planning Units (HPUs). The recommended AusHFG SOAs are developed through the following review process and provide a well developed starting point for planning and design:

- Review of Post Occupancy Evaluation (POE) outcomes where available
- Site visits to recently delivered facilities
- Benchmarking against recently delivered facilities
- Review of recommended SOAs with an expert reference group including clinical, operational and technical experts
- Establishment of SOA scenarios based on common unit capacities
- Review of recommended SOAs by other experts across all AHIA jurisdictions

In order to translate the recommended AusHFG SOAs into spatial benchmarks, the following assumptions were made:

- 'Optional' rooms within the AusHFG SOAs are assumed to be included in the benchmarking data
- Estimated staff office and workstation numbers, requiring direct collocation with the clinical and clinical support units, have been included based on reference to similar sized units that have been recently delivered
- The recommended spatial benchmark represents the average area per unit of measure across all SOA scenarios for that service area

APPLICATION OF THE BENCHMARKS TO PROJECTS

It is acknowledged that some service / facility requirements are frequently identified during project planning processes and the actual area required may be greater. This is demonstrated in the work undertaken by AHIA to compare AusHFG benchmarks with actual data from recently delivered facilities. On average, the actual facility areas were 5-10% greater than the recommended AusHFG areas. The AusHFG spatial benchmarks will provide a minimum estimated area requirement and, when combined with the SOA planning contingencies that are typically allocated during early planning phases, will support consideration of service / project specific requirements.

SCOPE OF THE SPATIAL BENCHMARKS

The spatial benchmarks include clinical, clinical support and non-clinical (back of house) services. Although benchmarks are provided for the majority of hospital services, it is important to acknowledge that they do not cover the full range of services. Additional services not covered in the AusHFG, for example education and training areas, central equipment stores, biomedical engineering, centralised staff areas etc, will need to be estimated separately.


Consideration of different facility types is provided for some support services, for example separate area benchmarks are included for small, medium and large / principal referral hospitals with delineation of hospital size by approximate bed numbers. This is included given consideration of requirements for facilities supporting a higher level / complexity of care and economies of scale that may be achieved within larger hospitals.

For Back of House services, a full area benchmark per hospital bed is provided for different sized facilities to cover kitchen, linen, cleaning, facility management, supply and loading dock, security services and portage. This is then broken down into recommended benchmarks for individual service areas.

Further refinement of the service categories and sub-categories for clinical and clinical support areas will be undertaken over time to provide a greater level of certainty around estimated area requirements. This will be further supported by identification of appropriate SOA scenarios during the HPU review periods.

Data is not yet available for a number of services (noted as N/A), however these will be developed through future AusHFG HPU reviews.

HOW TO USE THE BENCHMARKS

AusHFG Spatial Benchmarks							 AusHFG <small>Australian Health Facility Guidelines</small>
Service / Department / HPU	AusHFG Health Planning Unit (HPU) No.	Sub-Category	Unit of Measurement	Average Area per Unit (AusHFG SOAs)	% Single Bedrooms Assumed	Comments	
Emergency							
Emergency Department	300		Per Patient Bay	51		Based on three scenarios of 15,30 and 60 bays. Bay numbers include resus, acute, paediatric & fast track. EDSSU and imaging areas are excluded.	
Emergency Short Stay	300		Per Bed	24		Excludes staff support areas that are incorporated within the general ED.	
Psychiatric Emergency Care Centre	133		Per Bed	51	100%	Based on two scenarios of 4 and 6 beds.	

The AusHFG Spatial Benchmarks are delineated by **service / department** and relevant **sub-categories** (e.g. satellite versus in-centre renal dialysis units). The referenced AusHFG **Health Planning Unit (HPU)** is noted.

For the majority of clinical services, the area benchmark references an area ‘per bed’ as the **unit of measurement**. However, for some services the unit of measurement may be ‘per chair’, ‘per patient bay’, ‘per theatre’ etc.

The recommended area benchmark (‘**average area per unit**’) represents the **Gross Department Area (GDA)**. This comprises the net functional area of the unit / department plus the intra-departmental circulation. It does not include estimated travel and engineering (T&E) area requirements. For further information relating to the calculation of GDA, refer to the examples below and AusHFG Part C Section 2.5.2.

For inpatient units, the **percentage of single bedrooms** assumed is noted given this will impact the GDA.

Comments are included to guide the reader on relevant assumptions associated with the benchmark. For example, the types of Emergency (ED) bays that are included within the assumed total patient bay numbers and any areas that are excluded.

EXAMPLE CALCULATIONS

To estimate the GDA required for a specific department, the recommended 'average area per unit' will be multiplied by the total number of units to be included in the project scope.

Example 1: the proposed delivery of a 12 chair in-centre renal dialysis unit will require an estimated area of:


- 12 chairs x 46m² per chair = estimated GDA of 550m²

Example 2: the proposed delivery of 56 medical inpatient beds will require an estimated area of:


- 56 beds x 41m² per bed = estimated GDA of 2,300m².

Following calculation of the GDA for each service in scope, the Gross Building Area (GBA) is calculated by applying the additional T&E allowance as guided by AusHFG Part C Section 2.5.5. For example, a hospital that is proposed to be 3-4 storeys high would require an estimated additional T&E area allowance of 28% applied to the GDA.


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Emergency Department	300		Per Patient Bay	51		Based on three scenarios of 15,30 and 60 bays. Bay numbers include resus, acute, paediatric & fast track. EDSSU and imaging areas are excluded.	
Emergency Short Stay	300		Per Bed	24		Excludes staff support areas that are incorporated within the general ED.	
Psychiatric Emergency Care Centre	133		Per Bed	51	100%	Based on two scenarios of 4 and 6 beds.	
Acute Inpatient							
IPU Adult Acute Medical/Surgical	340		Per Bed	41	50%	Assumes inclusion of one negative pressure and one bariatric bed room. Includes all optional areas including multifunctional allied health area.	
IPU Paediatric	540		Per Bed	58	65-70%	Based on 24 bed scenario. Includes 1 negative pressure room. Includes play and recreation areas.	
IPU Maternity	510		Per Bed	45	93%	Based on one 28 bed unit scenario.	
Intensive Care Unit	360	1 Pod	Per Bed	88	100%	Includes Adult and Paediatric 14 bed ICU scenarios.	
		> 1 Pod	Per Bed	75		Includes one 56 bed scenario.	
Cardiac Care Unit (CCU)	260		Per Bed	63	100%	Based on one 12 bed unit scenario.	
Neonatal Care Unit	390	1 Pod	Per Cot	62	30-40%	Based on 12 and 16 cot scenarios. Includes neonatal intensive care, high dependency and low dependency care.	
		> 1 Pod	Per Cot	52		Based on on one 48 cot scenario. Includes neonatal intensive care, high dependency and low dependency care.	
Mental Health							
IPU Acute Mental Health	134		Per Bed	76	100%	Assumes 30% of beds are high dependency, requiring a separated HDU. Additional area required compared to Older People's Unit due to inclusion of seclusion and de-escalation areas, as well as secure entry zone.	
IPU Non Acute Mental Health	136		Per Bed	73	100%	Based on one 20 bed unit.	
IPU Older Peoples Mental Health	135		Per Bed	69	100%	Assumes 30% of beds are high dependency, requiring a separated HDU.	
IPU Child & Adolescent Mental Health	132		Per Bed	92	100%	Based on one 12 bed unit scenario.	
IPU Mental Health Intensive Care	137		Per Bed	97	100%	Based on one 12 bed unit scenario.	
Sub-Acute Inpatient							
IPU Rehab	610		Per Bed	N/A	N/A	Excluded given allied health / therapy / support areas not linked to bed capacity. Next HPU review to consider clinical scenarios to inform benchmarking.	
IPU Aged Care / GEM	N/A		Per Bed	N/A	N/A	New Sub-Acute Care HPU due to be developed in 2023.	
IPU Palliative care	N/A		Per Bed	N/A	N/A	New Sub-Acute Care HPU due to be developed in 2023.	
Day Only / Ambulatory Care							
Day Surgery	270		Per Stage 2/3 Recovery Bay (Day Surgery)	43		Excludes theatre / procedure areas and Stage 1 recovery. Includes Pre-Procedure Holding, Stage 2/3 recovery, Support & Staff Areas. This may be combined with OT allocation below for full perioperative unit.	
Ambulatory Care	155		Per Consult / Patient Care Room	N/A		AusHFG SOA combines outpatient and medical day stay services with associated support areas. Future HPU review to consider specific scenarios to inform benchmarking.	
Community Health	155		Per Patient Care Room	N/A		Specific scenarios not well defined in AusHFG SOA given scope of community health services provided varies significantly between projects.	

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Renal Dialysis	620	Satellite Unit	Per Chair	40		Based on two scenarios of 10 and 20 chairs.	
		In-Centre Unit	Per Chair	46		Based on two scenarios of 6 and 12 chairs.	
Day Medical / Chemotherapy	155		Per Chair	N/A		AusHFG SOA combines outpatient and medical day stay services with associated support areas. Future HPU review to consider specific scenarios to inform benchmarking.	
Radiation Oncology	600		Per Bunker	733		Includes 3-4 outpatient rooms per bunker, planning, treatment, holding areas, and medical physics/engineering. Excludes brachytherapy services. For brachytherapy invasive procedures refer to OT benchmark. For brachytherapy cavity insertions include an additional 70m2 per procedure room for treatment space and associated support areas.	
Oral Health	280	Small Unit (6 chairs or less chairs)	Per Chair	68		Includes minor dental laboratory and instrument reprocessing (on site and off-site models). Off-site model includes clean-up dirty collection and sterile store.	
		Large unit (> 6 chairs)	Per Chair	58		Includes minor dental laboratory and instrument reprocessing (on site and off-site models). Off-site model includes clean-up dirty collection and sterile store.	
Cardiac Investigations / Clinical Measurement Units	170		Per Consult / Diagnostic Room	58		Includes one scenario of 10 clinic rooms of varying function. Excludes cardiac catheter laboratories.	
Other Clinical							
Operating Theatres	520		Per Theatre	293		Excludes Day Surgery areas. Separate consideration of hybrid theatres and endoscopy units to be undertaken within future reviews.	
Interventional Imaging / Cardiac Cath Lab	170		Per Lab	N/A		SOAs included within HPU 440 Medical Imaging and HPU 170 Cardiac Investigations, however separated support areas are not included so this has been excluded from the database. Refer to Operating Theatres allocation given similar requirements including recovery areas.	
Birthing Unit	510		Per Birthing Room	143		Based on 10 birthing room unit. Excludes Antenatal assessment unit	
Clinical Support Services							
Medical Imaging	440	General X-Ray / Fluoro	Per GXR/Fluoro	89			
		OPG	Per OPG	20			
		Ultrasound / Mammo	Per Ultrasound / Mammo Room	35			
		CT	Per CT	148			
		MRI	Per MRI	160			
		Shared Support	Per Total Modalities	N/A		Includes entry, reception, waiting; patient holding / recovery and staff support areas. To be developed during the next HPU review based on a number of indicative scenarios.	
Nuclear Medicine & PET	500		Per Modality	335		Based on 2 scenarios. Includes SPECT/CT and PET/CT. Assumes Nuclear Medicine Service includes stress testing & bone densitometry (ie these are not included in the total modality count).	
Sterilising Services Unit	190	Small Unit (approx 2 ORs)	Per Theatre	129			
		Medium Unit (approx 10 ORs)	Per Theatre	64			
		Large Unit (approx 20 ORs)	Per Theatre	59			
Pharmacy	560	Small Hospital (approx 40 beds)	Per Hospital Bed	3.1		Excludes aseptic compounding suites and clinical trials	
		Medium hospital (approx 120 beds)	Per Hospital Bed	3.2		Excludes aseptic compounding suites and clinical trials	
		Large Hospital (approx 450 beds)	Per Hospital Bed	1.9		Assumes inclusion of an aseptic production suite and clinical trials area.	

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Pathology	550	Small Hospital (approx 40 beds)	Per Hospital Bed	3.1		Excludes outpatient specimen collection	
		Medium hospital (approx 120 beds)	Per Hospital Bed	3.8		Excludes outpatient specimen collection	
		Large Hospital (approx 450 beds)	Per Hospital Bed	2.7		Excludes outpatient specimen collection	
		Principal Referral Hospital	Per Hospital Bed	min 5000m2 GDA			
Allied Health	140		TBC	N/A		Next Allied Health HPU review to consider clinical scenarios to inform benchmarking.	
Mortuary / Autopsy Unit	490	Without Autopsy	Per Hospital Bed	0.6		Based on one scenario including 9 body hold cabinets to support a 250 bed hospital. HPU recommends requirement for 4 body hold spaces per 100 beds excluding isolation storage.	
		With Autopsy Suite	Per Autopsy Room	80		Includes change rooms, anteroom, observation room & storage.	
Non-Clinical (Back of House) Services							
Front of House (Total)	430			N/A		Next Front of House HPU review to consider scenarios to inform benchmarking.	
Back of House (Total)	700	< 50 beds	Per Hospital Bed	9		Includes kitchen, linen, cleaning, waste, facility management, supply and loading dock, security services and portorage. Bulk storage linen model and traditional supply services models are assumed.	
		150 beds	Per Hospital Bed	8		Includes kitchen, linen, cleaning, waste, facility management, supply and loading dock, security services and portorage. Bulk storage linen model and traditional supply services models are assumed.	
		300 beds	Per Hospital Bed	6		Includes kitchen, linen, cleaning, waste, facility management, supply and loading dock, security services and portorage. Bulk storage linen model and traditional supply services models are assumed.	
		600 beds	Per Hospital Bed	5		Includes kitchen, linen, cleaning, waste, facility management, supply and loading dock, security services and portorage. Bulk storage linen model and traditional supply services models are assumed.	
Food Services / Kitchen	700	< 50 beds	Per Hospital Bed	2.32		Assumes cook fresh model.	
		150 beds	Per Hospital Bed	2.94		Assumes cook fresh model.	
		300 beds	Per Hospital Bed	1.49		Assumes cook fresh model.	
		600 beds	Per Hospital Bed	1.16		Assumes cook fresh model.	
Linen Services - Roll On / Roll Off Model	700	< 50 beds	Per Hospital Bed	0.53			
		150 beds	Per Hospital Bed	0.48			
		300 beds	Per Hospital Bed	0.40			
		600 beds	Per Hospital Bed	0.34			
Linen Services - Bulk Storage Model	700	< 50 beds	Per Hospital Bed	0.58			
		150 beds	Per Hospital Bed	0.76			
		300 beds	Per Hospital Bed	0.60			
		600 beds	Per Hospital Bed	0.46			
Cleaning Services	700	< 50 beds	Per Hospital Bed	0.55			
		150 beds	Per Hospital Bed	0.40			
		300 beds	Per Hospital Bed	0.31			
		600 beds	Per Hospital Bed	0.21			

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Waste Management	700	< 50 beds	Per Hospital Bed	1.08		
		150 beds	Per Hospital Bed	0.84		
		300 beds	Per Hospital Bed	0.74		
		600 beds	Per Hospital Bed	0.58		
Facility Management	700	< 50 beds	Per Hospital Bed	1.73		
		150 beds	Per Hospital Bed	1.73		
		300 beds	Per Hospital Bed	1.39		
		600 beds	Per Hospital Bed	1.18		
Supply Services / Loading Dock - Traditional Supply Model	700	< 50 beds	Per Hospital Bed	1.52		
		150 beds	Per Hospital Bed	1.40		
		300 beds	Per Hospital Bed	1.25		
		600 beds	Per Hospital Bed	0.91		
Supply Services / Loading Dock - Direct to Imprest Supply Model	700	< 50 beds	Per Hospital Bed	1.06		
		150 beds	Per Hospital Bed	1.04		
		300 beds	Per Hospital Bed	0.90		
		600 beds	Per Hospital Bed	0.64		
Security Services	700	< 50 beds	Per Hospital Bed	0.72		
		150 beds	Per Hospital Bed	0.31		
		300 beds	Per Hospital Bed	0.24		
		600 beds	Per Hospital Bed	0.14		
Porterage / Orderly / Wardsperson	700	< 50 beds	Per Hospital Bed	0.04		
		150 beds	Per Hospital Bed	0.03		
		300 beds	Per Hospital Bed	0.09		
		600 beds	Per Hospital Bed	0.06		
Fleet Services	700	< 50 beds	Per Hospital Bed	0.00		
		150 beds	Per Hospital Bed	0.00		
		300 beds	Per Hospital Bed	0.05		
		600 beds	Per Hospital Bed	0.04		
Mail Services	700	< 50 beds	Per Hospital Bed	0.00		MPS and small hospitals will typically have facilities included in front of house reception.
		150 beds	Per Hospital Bed	0.00		MPS and small hospitals will typically have facilities included in front of house reception.
		300 beds	Per Hospital Bed	0.08		
		600 beds	Per Hospital Bed	0.06		

