

# Australasian Health Facility Guidelines

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## Part B - Health Facility Briefing and Planning 0120 - Administration Unit

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#### **Australasian Health Facility Guidelines**

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## 01 INTRODUCTION

### 01.01 Preamble

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This Hospital Planning Unit for Administration has been developed in part as a vehicle for the NSW Health Policy Directive PD2005\_576 Office Accommodation Policy - Public Health Organisations and Ambulance Service regarding sizes and allocation of offices, workstations and meeting rooms to ensure that the information is readily accessible.

This policy outlines the required spaces for office accommodation in all health care facilities and has been developed for architects, designers and health facility planners in the planning and design of those facilities.

The key objectives of this policy are to:

- maximise the utilisation of space;
- ensure that the functional and flexible office environment is delivered within the standards set by the Building Code of Australia;
- ensure that the work environment supports new approaches to service delivery including increased collaboration between health professionals and a focus on multidisciplinary team work;
- maximise flexibility and minimise cost for future changes to office accommodation;
- provide a consistent approach to the design and planning of office accommodation; and
- provide accommodation that reflects changing patterns of work including part-time, job share, conjoint and multi-site appointments.

### 01.02 Introduction

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The level and range of facilities provided for corporate, administrative and general office functions will vary greatly depending on the size of the proposed facility, the range of services required and the management structure that will apply. Project staff will need to ascertain the staffing mix and establishment early in the planning process.

### 01.03 Policy Framework

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PD 2005\_576 - Office Accommodation Policy - Public Health Organisations and Ambulance Service, April 2005. Compliance with this policy directive is mandatory.

Architects, designers and health facility planners should also comply with (the latest version) of current statutory obligations including:

Building Code of Australia

- NSW Anti Discrimination Act 1977;
- NSW Disability Services Act 1993;
- OH&S Act 2000 & OH&S Regulation 2001; and
- Commonwealth Disability Discrimination Act 1992.

## 01.04 Description

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### DEFINITION OF HOSPITAL PLANNING UNIT (HPU)

Regardless of size of unit, facilities will be required to accommodate the following administrative functions:

General and/or individual office accommodation for appropriate corporate, administrative and clerical personnel;

- storage of office equipment, stationery and files; and
- interviews, meetings and conferences as required.

Services to be provided and staff to be accommodated will/ may include:

- CEO/general manager and support staff;
- nursing executive and support staff;
- medical / clinical executive and support staff;
- finance;
- human resources and payroll;
- OH&S staff;
- learning and development staff; and
- facility management.

### SUPPORT AREAS

Support areas may include reception, waiting areas, meeting rooms, kitchens, staff amenities etc and wherever possible should be shared across a number of units. Public amenities must be available for visitors either within the unit itself or readily accessible.

### PRINCIPLES OF OFFICE ALLOCATION

The principles that underpin the provision of office accommodation in health care facilities include:

- office spaces should only be provided on a demonstrated needs basis ie: the type of office / workspace considered in the planning and design phase will depend on the employment hours of staff, work undertaken and work patterns of staff;
- shared offices or workspaces should be encouraged wherever possible, to promote cost effective office accommodation;
- single offices will only be provided where they can be justified by the nature of the work undertaken by the position. Considerations will include seniority, nature of supervisory role, productivity and time spent doing office-based duties; and
- staff with multiple roles within or across an Area should not be allocated more than one dedicated office or workspace.

## 02 PLANNING

### 02.01 Operational Models

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#### HOURS OF OPERATION

Generally the Unit will operate during business hours but many staff and visitors will require after-hours access either for work or for meetings, functions etc.

#### CONFIGURATION

In small facilities, a single unit may accommodate all functions; in large facilities, several discreet units may be required for specific staff and functions.

### 02.02 Operational Policies

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#### CATERING

If catering for functions / meetings will be required, project staff will need to determine to what degree if any, refreshments etc will be prepared within the unit or brought directly from the main Kitchen so that need for catering facilities within the unit/s may be assessed. Staff will need access to beverage bays for their personal use.

#### OFFICE EQUIPMENT

Consideration will need to be given to location of facsimile machines, photocopiers, printers and other items such as laminators etc and the extent to which they will be shared and, in the case of printers, networked.

#### PAPER RECYCLING AND SECURITY

Despite attempts at paperless offices, vast quantities of waste paper will be generated. Confidential reports should be placed in a locked recycle bin or shredding and an additional bin will be required for general paper recycle.

### 02.03 Planning Models

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Deep plan minimises the availability of daylight.

### 02.04 Functional Areas

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#### FUNCTIONAL ZONES

Unless a single unit accommodating all functions, the following may be required:

- executive suite - in addition to offices, may include Boardroom, function kitchen, central registry and visitor waiting;
- clinical/medical services unit;
- nursing and patient services unit;
- finance unit;
- human resources and payroll unit (and may include OH&S staff);
- facilities management unit; and

- learning and development.

## 02.05 Functional Relationships

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### **EXTERNAL**

There are no critical functional relationships.

### **INTERNAL**

In large health care facilities with multiple units, it may be appropriate to collocate the executive units and finance.

## 03 DESIGN

### 03.01 Accessibility

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The executive unit should be readily accessible from the Main Entry but does not necessarily have to occupy a ground floor location.

Human resources and payroll must be easily accessible to staff.

### 03.02 Parking

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For staff parking, refer to Part C, Clause 790 of these Guidelines for further information.

### 03.03 Disaster Planning

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Refer to Part B Clause 80 and Part C of these Guidelines for further information.

### 03.04 Infection Control

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There are no specific infection control issues.

### 03.05 Environmental Considerations

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#### **ACOUSTICS**

AS/NZS 2107 - Acoustics-Recommended design sound levels and reverberation times for building interiors.

Recommends design sound levels and reverberation times for different areas of occupancy in various categories of buildings. Specifies methods of measuring the ambient sound level reverberation time. This Standard is intended for use in assessing the acoustic performance of buildings and building services. It does not apply to the evaluation of occupancy noise.

AS 2670 - Evaluation of human exposure to wholebody vibration Part 1 - General requirements

Defines methods for the measurement of periodic, random and transient whole-body vibration and indicates the principal factors that combine to determine the degree to which vibration exposure will be acceptable. Informative annexes provide guidance based on current opinion on the possible effects of vibration on health, comfort and perception and motion sickness.

#### **NATURAL LIGHT**

Highly desirable where achievable, particularly for staff who occupy their offices/workstations for the majority of the working day.

#### **PRIVACY**

Essential for confidential conversations and interviews.

#### **INTERIOR DESIGN**

Refer to Part C of these Guidelines.



### 03.06 Space Standards and Components

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#### **ERGONOMICS**

Refer Part C of these Guidelines for information.

#### **HUMAN ENGINEERING**

Refer Part C of these Guidelines for information.

#### **ACCESS AND MOBILITY**

Refer Part C of these Guidelines for information.

#### **DOORS, WINDOWS AND CORRIDORS**

Refer Part C of these Guidelines for information.

### 03.07 Safety and Security

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#### **SECURITY**

All office doors should be lockable.

Open-plan workstations.

Rooms on the perimeter of Units such as meeting rooms should also be kept locked when not in use particularly and especially if equipment is stored.

Files - particularly personnel files.

After-hours security for staff.

### 03.08 Finishes

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#### **WALL PROTECTION**

Refer to Part C of these Guidelines

#### **FLOOR FINISHES**

Refer to Part C of these Guidelines

#### **CEILING FINISHES**

Refer to Part C of these Guidelines

### 03.09 Fixtures, Fittings & Equipment

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Refer to Part C of these Guidelines and to the Room Data Sheets (RDS) and Room Layout Sheets (RLS) for further detailed information

### 03.10 Building Service Requirements

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#### **INFORMATION TECHNOLOGY / COMMUNICATIONS**

Voice, data, teleconferencing, videoconferencing.

**ENGINEERING SERVICES**

Refer to Part E of these Guidelines and TS11

## 04 COMPONENTS OF THE UNIT

### 04.01 Standard Components

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Rooms / spaces are defined as:

- *standard components* (SC) which refer to rooms / spaces for which room data sheets, room layout sheets (drawings) and textual description have been developed;
- *standard components – derived rooms* are rooms, based on a SC but they vary in size. In these instances, the standard component will form the broad room 'brief' and room size and contents will be scaled to meet the service requirement;
- *non-standard components* which are unique rooms that are usually service-specific and not common.

The standard component types are listed in the attached Schedule of Accommodation.

The current Standard Components can be found at: [www.healthfacilityguidelines.com.au/standard-components](http://www.healthfacilityguidelines.com.au/standard-components)

### 04.02 Non-Standard Components

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There are no non-standard components.

## AX APPENDICES

### AX.01 Schedule of Accommodation

The following schedule of accommodation complies in all respects with the Policy Directive.

The 'Room/ Space' column describes each room or space within the Unit. Some rooms are identified as 'Standard Components' (SC) or as having a corresponding room which can be derived from a SC. These rooms are described as 'Standard Components –Derived' (SC-D). The 'SD/SD-C' column identifies these rooms and relevant room codes and names are provided.

All other rooms are non-standard and will need to be briefed using relevant functional and operational information provided in this HPU.

In some cases, Room/ Spaces are described as 'Optional' or 'o'. Inclusion of this Room/ Space will be dependent on a range of factors such as operational policies or clinical services planning.

#### SUPPORT AREAS

AusHFG Room Code	Room / Space	SC / SC-D	Qty	m2	Remarks
BBEV-OP	Beverage Bay - Open Plan, 4m2	Yes	1	4	If no Staff Room provided
	Central Registry		1	10	Room size will depend on size of unit/s. (For storage of board minutes etc.)
STFS-10	File Store, 10m2	Yes	1	10	Personnel Files
PTRY	Pantry	Yes	1	8	Optional for functions
RECL-10	Reception / Clerical, 10m2	Yes	1	10	1 staff. May be replaced by a workstation.
SRM-15	Staff Room, 15m2	Yes	1	15	Optional; includes beverage bay
WCST	Staff Toilet, 3m2	Yes	1	3	
STPS-8	Store - Photocopy / Stationery, 8m2	Yes	1	8	
WCDS	Toilet - Accessible, 6m2	Yes	1	6	If not available nearby
WCPU-3	Toilet - Public, 3m2	Yes	1	3	If not available nearby
WAIT-10	Waiting, 10m2	Yes	1	10	1.2m2 per person and 1.5m2 for wheelchairs as required.
	Discounted Circulation %			25-30%	

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### OFFICES

AusHFG Room Code	Room / Space	SC / SC-D	Qty	m2	Remarks
OFF-2P	Office - 2 Person Shared, 12m2	Yes	1	12	Shared office area for 2 persons with two workstations to undertake administrative duties
OFF-3P	Office - 3 Person Shared, 15m2	Yes	1	15	Shared office space for 3 persons with three workstations to undertake administrative duties
OFF-4P	Office - 4 Person Shared, 20m2	Yes	1	20	Shared office space for 4 persons with four workstations to undertake administrative duties
OFF-S12	Office - Single Person, 12m2	Yes	1	12	Clinical Stream/Divisional Executives, Academics Professors (full), Area Managers, Clinical Directors of Departments/Units, Health Service Managers (Rural Health) with significant staff supervisory responsibilities and the position is 0.8 FTE or higher.
	Office - Single Person, 15m2		1	15	For Area Executive, General Managers etc. Includes meeting area. Staff may have multiple roles but only one dedicated office. Dedicated office space should be assigned within the campus/Area Health Service.
	Office - Single Person, 18m2		1	18	For Area CEO; includes meeting area. Executives may have multiple roles, but only one dedicated office. Space should be assigned within or across the Area Health Service.
OFF-S9	Office - Single Person, 9m2	Yes	1	9	Nurse Unit Managers, Staff Specialists, Business Managers, and Department Heads with significant staff supervisory responsibilities and where the position is 0.8FTE or higher.
	Discounted Circulation %			25-30%	

### WORKSTATIONS

AusHFG Room Code	Room / Space	SC / SC-D	Qty	m2	Remarks
OFF-SWS	Office - Workstation, 2.2m2	Yes	1	2.2	This work base is designed to accommodate staff who due to area-wide responsibilities travel between health care facilities and may require workspace to perform administrative functions.
	Office - Workstation, 4.4m2		1	4.4	For research assistants and staff who spend the majority of their time providing services in the community, such as Outreach, Community Health, Community Mental Health.
	Office - Workstation, 5.5m2		1	5.5	For Research Fellows, Data Managers, Clinical Nurse Consultants, administration staff or any staff who require a workstation.
	Discounted Circulation %			25-30%	

### MEETING ROOMS

AusHFG Room Code	Room / Space	SC / SC-D	Qty	m2	Remarks
MEET-55	Meeting Room, 55m2		1	55	The provision of nonfixed, stackable seating allows greater flexibility. Can be used as a large group room for Community Health, antenatal classes etc
MEET-12	Meeting Room, 12m2	Yes	1	12	For staff, patients and family members o conduct confidential discussions.
MEET-L-20	Meeting Room, 20m2	Yes	1	20	This room is a shared facility and is to be accessed through a booking system
MEET-L-30	Meeting Room, 30m2	Yes	1	30	To attend meetings or can be used as a smallgroup room for Community Health
MEET-9	Meeting Room, 9m2	Yes	1	9	For interview purposes for 2 - 3 people
	Discounted Circulation %			25-30%	