3.6.1 PURPOSE AND SCOPE:

This chapter specifies the space planning criteria for outpatient Women's Health Services. These services include OB/GYN Clinic, Midwife Clinic, Family Planning and Women's Health Service, which may be provided in either this chapter and/or in other chapters of these criteria. Examples of such services include: oncology, surgical services, counseling and women's imaging services with such procedures as ultrasound, mammography and bone densitometer.

Note to the Programmer. Decisions on a "Clinic Concept of Operations" are especially important. There is a considerable range of services, which can be included under the title of "women's health." One option is to program a clinic, which provides obstetrics and gynecological services. This clinic could refer women elsewhere for such things as laboratory work, imaging, counseling and etc. Another option is to program a clinic, which provides a "one stop" location for all women's health services. Such an all-inclusive option would result in the programming of laboratory services, radiology/imaging services and counseling services in the women's health clinic. This option may also cross-traditional organizational lines, and personnel command chains of departments (OB/GYN, Surgery, Nursing, and Social Work Services). Care must be taken to avoid duplicate programming of equipment based on the same workload count - for example mammography units in both the Women's Health Clinic and the Radiology department. Special attention should also be given to assuring that the resources (to include staffing) necessary to provide all services programmed are available, and fully supported by the command.

3.6.2. DEFINITIONS:

<u>Administrative Personnel:</u> Administrative personnel are all personnel who do not counsel, diagnosis, examine or treat patients, but who do work that is essential for the accomplishment of the missions of a medical treatment facility. This does include military (assigned and borrowed), contract and civilian personnel. It does not include volunteers.

<u>**Clinic Visit:**</u> A visit is a contact between an eligible beneficiary and a medical care provider. A visit consists of an examination, diagnosis, treatment, evaluation, consultation, counseling, or medical advice in a clinic or treatment/observation in quarters. (Source: DoD 6015-M, Glossary of Healthcare Terminology, 1999).

Full-Time Equivalent (FTE): A work force equivalent to one individual working full time for a specific period, which may be made up of several part-time individuals or one full-time individual. This will include everyone working in the facility; military, civilian and contractor personnel.

<u>Office:</u> A private office is an enclosed room outfitted with either standard furniture (Room Code OFA01) or systems furniture (Room Code OFA02). An administrative cubicle is within an open room and is constructed out of system furniture (Room Code OFA03)

Preceptor/Consult Room: - A location is required for residents in training to be able to discuss cases in private with supervising faculty physicians (preceptors). These discussions occur during the course of a patient visit, requiring proximity to exam room areas. In clinic configurations with staff physician offices clustered near exam rooms, precepting may be feasible from the faculty physician's own office and not from a dedicated central preceptor room. Note that any space provided for precepting must afford privacy from eavesdropping patients and passers-by ... hence an open area accessible by non-staff is NOT acceptable.

Provider: A individual who examines, diagnoses, treats, prescribes medication and manages the care of patients within his or her scope of practice as established by the governing body of a healthcare organization. General providers are physicians, physician's assistants and clinical nurse practitioners. The term 'staff physician' in relation to a Residency Program, does not include physician assistants, nurse practitioners or residents.

3.6.2. DEFINITIONS: Continued

<u>Rotating Resident</u>: A rotating resident is one from any graduate medical education specialty program (internal medicine, pediatrics, surgery, family practice, etc.) who, in the course of his or her education, must spend time in the services of another specialty. For example, internal medicine residents are required to "do a rotation" in the OB/GYN service.

Women's Health Services: The concept of Women's Health Services includes two major elements. The first element provides for the outpatient services associated with preventive and curative medical care provided to women patients. This information is located in this chapter. The second element provides the inpatient services for women, to include the obstetric services and related birth services for newborns. This information is located in Chapter 4.2 and 4.3.

Women's Health Clinic: A clinic for women's health may include the following services: obstetrics, gynecology, breast examination/treatment, cervical cancer diagnosis/treatment and family planning. A clinic will normally include the following areas: waiting, reception, offices, and examination rooms, special purpose rooms, imaging rooms, utility rooms, treatment rooms, storage space, linen rooms, conference rooms, lounges, and toilets.

3.6.3. POLICIES

<u>Administrative Offices:</u> The office space required to provide administrative support to operate the clinic services will be provided in accordance with criteria for Chapter 2.1 (General Administration).

<u>Offices, Private:</u> With the exception of the office provided for "Key Personnel," all other private offices will be 120 net square feet as stated in Chapter 2.1 (General Administration), paragraph 2.1.5. Private offices will be provided to following personnel:

a) Staff who must meet with patients/customers on a regular basis and hold private consultations/discussion.

b) The senior officer and enlisted member of a department.

c) Staff who supervise others and must hold frequent, private counseling sessions with their junior staff. This does not include staff who supervise a very small number of people, and who would only occasionally need private counseling space. These staff can use available conference rooms or other private areas for their infrequent counseling needs

d) Any personnel who interview or counsel patients with patient privacy concerns.

<u>Office, Non-Private or Shared Space:</u> Personnel, who require office space, but not a private office, will be provided space in a shared office. Non-private or shared office space will be programmed at 60 net square feet per occupant

Patient Education Classroom: The primary purpose of this room is for group education and/or group therapy classes. Some examples would include, initial OB education, diabetics group discussions, pediatric development classes, etc. This room needs to be located near the patient care areas for easy patient access.

Patient Education Cubicle: The cubicle will have a Computer, DVD player and video player and printer. This will allow patient to complete self-assessment health surveys, investigate material based on their diagnosis, print material, and watch videos specific to their treatment/procedure. This area needs to maintain patient privacy and be located near the Patient care areas.

Providers' Examination Rooms: Each provider will be provided with two examination rooms.

Provider: An individual, who examines, diagnoses, treats, prescribes medication and manages the care of patients within his or her scope of practice as established by the governing body of a healthcare organization. General providers are physicians, physician's assistants and clinical nurse practitioners. The term 'staff physician' in relation to a Residency Program, does not include physician assistants, nurse practitioners or residents.

3.6.3. POLICIES Continued

Providers' Offices: Generally, each provider (physician, physician's assistant, clinical nurse practitioner, and allied scientist) on the staff will be provided a private office (excluded offices are provided under other criteria, such as Radiologists, Pathologists, Anesthesiologists, Commanders, etc.). However, shared office space is encouraged and is an option if it is within the Clinic Concept of Operations.

<u>Public Toilets, Staff Lounges and Locker Areas:</u> The criteria for public toilets, staff lounges and locker rooms are provided in Chapter 6.1 (Common Areas).

<u>Residents'</u> Cubicle Space: Private office space will not be programmed for GME residents. GME residents will be provided with shared office space at 60 nsf per resident for Navy/Air Force and 40 nsf for Army. An office for a rotating resident may be programmed in the clinic for residents who see patients.

Resident's Office/Examination Rooms: Additional office and examination room space may be programmed into a clinic to provide space for "rotating residents" to see patients. A resident during his or her rotation in the clinic will use this space when seeing patients as walk-ins or by appointment. One office and two examination rooms may be programmed for each resident FTE projected to be in the clinic seeing patients. Note: These residents are not necessarily OB/GYN residents only; family practice, internal medicine and other residency programs may require a rotation in the women's health clinic.

3.6.4. PROGRAM DATA REQUIRED:

How many FTE providers are projected?
How many nurse managers are projected?
How many FTE nursing staff is projected? Note: This information is used to calculate the size of the Nurse
Workroom. Do not include nurse managers or advice nurses.
How many NCOIC/LCPO/LPO are projected?
How many officers and officer equivalents are projected? Note: This information is used to calculate the size of the Conference Room. See Chapter 2.1 (General Administration), paragraph 2.1.2 for Personnel Equivalents Chart.
How many staff will require a private office? Note : Do not count providers, nurse managers, advice nurses, or NCOIC/LCPO/LPOs.
How many staff will require a dedicated cubicle? Note: Do not include providers or nursing staff.
How many staff will require a locker? Note: Do not include staff with offices or cubicles
How many FTEs on peak shift are projected? Note: This information is used to calculate the number of Staff Toilets and the size of the Staff Lounge.
Will patient records be stored in this clinic?
How many patient records will be stored in this clinic?
How many MEDICARE records will be stored in this clinic?
Will patient records use fixed shelving?
Will patient records use moveable shelving?
How many shelves high (5 or 6) will be used?
Will Patient Education Conference Room use tables or chairs?
Will Patient Education Conference Room use writing arm chairs?
Is an isolation room required?
Is a procedure room required?
Is a FTE laboratory technician projected?
Will bone densitometry be performed in the clinic?
Will infertility fluoroscopy be performed in the clinic?
Will colposcopy be performed in the clinic?
How many dedicated ultrasound units will be in the clinic?
How many mammography units will be in the clinic?
Will non-stress tests/fetal monitoring be performed in the clinic?

3.6.4. PROGRAM DATA REQUIRED: Continued

How many non-stress/fetal monitoring stations will be required?
Will there be vending machines in the staff lounge?
How many advice nurse FTEs are projected?
How many Social Workers are projected in this department?
How many Family Planning Counselors are projected?
Will there be a Residency Program?
Will there be a Residency Program Director?
Will there be a Residency Program Secretary?
How many Residents are projected?
How many Residency Staff require a private administrative office?
How many Residency Administrative Staff cubicles are required?
How many rotating residents will require a cubicle?
How many Staff Physicians are projected? This count does not include Residents.

3.6.5 SPACE CRITERIA:

NOTE: GP indicates that a guideplate exists for that particular Room Code.

FUNCTION	Room	Room AUTHORIZED Code m ² nsf		PLANNING RANGE/COMMENTS
FUNCTION	Code			

RECEPTION AREAS

	WRC01			Minimum. Provide four seats for each projected FTE provider. Provide 16 nsf for 95% of the seats and 25 nsf for 5% of the seats (handicapped waiting).
Clinic Waiting	WRC02	5.57	60	Isolation waiting: Provide 67% of space for a main waiting area and 33% of space for an isolation waiting area. Provide handicap seats in both areas. Of the total isolation waiting seats, provide a minimum of one handicap seat @ 25 nsf.
Reception (GP)	RECP1	13.01	140	Minimum. Provide 140 nsf for the first eight providers. Increase 60 nsf for each increment of four providers over the initial eight providers. Includes space for two technicians. When only one technician required, consolidate with adjacent department, where possible.
Patient Education Classroom (GP)	CLR01	23.23	250	Tables and chairs, One per clinic if eight providers or less. Provide two classrooms for nine or more providers.
	CLR02			Writing arm chairs - see above Planning Range/Comment.
Patient Education Cubicle	CLSC2	2.72	30	One per clinic. Includes a computer workstation for patient self-assessment, printing educational brochures, etc.
Public Toilets	NA	NA	NA	Space will be provided in Chapter 6.1 (Common Areas).

FUNCTION	Room AUTHORIZED		ORIZED	PLANNING RANGE/COMMENTS				
FUNCTION	Code	m ²	nsf	I LANNING KANGE/COMMENTS				
PATIENT AREAS								
Screening/Weights and Measures (GP)	EXRG4	7.43	80	Minimum up to four projected FTE providers. One additional room for increment of four providers.				
OB/GYN Exam Room (GP)	EXRG8	11.15	120	Two per projected FTE provider minus one isolation exam room. Do not count residents as providers. Resident's exam rooms are included in the Residency Functional Area.				
Isolation Exam Room (GP)	EXRG6	13.01	140	One per clinic.				
Isolation Exam Toilet	TLTU1	4.65	50	One per clinic				
Consult Room	OFDC2	11.15	120	One per clinic.				
Patient/Specimen Toilet (GP)	TLTU1	4.65	50	Minimum one. Provide two toilets if projected FTE providers is between nine and fifteen. Provide three toilets if projected FTE providers are sixteen or more with a maximum of three toilets.				
Specimen Lab/Holding	LBOB1	5.57	60	One per Women's Clinic when no FTE laboratory technician projected.				
Satellite Lab	LBSP1	11.15	120	One, if one or more FTE laboratory technician projected.				
Bone Densitometry Room	XDBD1	11.15	120	One, if in the Clinic Concept of Operations.				
Infertility Fluoroscopy Room (GP)	XDRF1	27.87	300	One, if in the Clinic Concept of Operations.				
Fluoroscopy Toilet (GP)	TLTF1	4.65	50	One per programmed Fluoroscopy Room.				
OB/GYN Treatment Room	TROB1	16.26	175	One per six providers.				
Colposcopy Room	TROB1	16.26	175	One if in the Clinic Concept of Operations.				
Ultrasound Room (GP)	XDUS1	15.33	165	One per dedicated ultrasound unit.				
Ultrasound Toilet (GP)	TLTF1	4.65	50	One per two ultrasound rooms.				
Non-Stress Test / Fetal Monitoring (GP)	OPST1	11.15	120	One if in Clinic Concept of Operations. Provides one station.				
Non-Stress Toilet (GP)	TLTF1	4.65	50	One per Non-Stress Test/Fetal Monitoring Room.				
Mammography (GP)	XDM01	11.15	120	One per dedicated mammography unit.				
Mammography Film Processing (GP)	XDMP1	10.22	110	One for every five mammography units programmed.				

FUNCTION	Room	AUTHORIZED		DI ANNING DANGE/COMMENTS
FUNCTION	Code	m^2	nsf	PLANNING RANGE/COMMENTS

STAFF AND ADMINISTRATIVE AREAS

	OFD01		120	Army - One per projected FTE provider. Do not include residents. Resident's cubicles are included in the Residency Functional Area.
Provider Office (GP)	OFD02	11.15		Navy – See above Planning Range/ Comments
	OFD03			Air Force – See above Planning Range/Comments
Nurse Manager Office	OFA01	11.15	120	Private Office, Standard Furniture. One per projected FTE Nurse Manager.
	OFA02			Private Office, Systems Furniture. One per projected FTE Nurse Manager.
Nurse Workroom	WRCH1	11.15	120	Army/Navy. Minimum. Add 40 nsf for each projected FTE nursing staff above four. Do not include nurse manager or advice nurse.
Nuise worktoom	OFA03	5.72	60	Air Force. Cubicle Systems Furniture. One per projected FTE nursing staff. Do not include nurse manager or advice nurse.
NCOIC/LCPO/LPO Office	OFA01 OFA02	11.15	120	One per clinic.
Advice Nurse Office	OFA01 OFA02	11.15	120	One per projected FTE advice nurse.
	OFA01	- 11.15	120	One per projected FTE requiring a private office. See Chapter 2.1 (General Administration), paragraph 2.1.3. Some examples are Group
Private Office	OFA02			Practice Manager, Nurse Educator, Health Care Integrator, any staff who interviews or counsels patients.
Administrative Cubicle	OFA03	5.57	60	Per projected FTE requiring a dedicated workspace but not a private office. See Chapter 2.1 (General Administration), paragraph 2.1.3.
Social Worker Office	OFDC1	13.01	140	One per projected FTE social worker.
Family Planning Counselor Office	OFA01	11.15	120	One per projected FTE family planning counselor.
	FILE1			If records are stored outside of the clinic.
Patient Records Area	MRS01	5.57	60	If records are stored in the clinic. Fixed shelving. See Chapter 2.5 (Medical Administration) for formula to increase sizing,
	MRS02			Movable shelving. See above Planning Range/Comment.
Copy Room	RPR01	9.29	100	For Copier/Fax/Mailbox distribution.
Forms/Literature Storage	SRS01	9.29	100	One per clinic.

FUNCTION	Room	AUTHO	ORIZED	PLANNING RANGE/COMMENTS
FUNCTION	Code	m ²	nsf	FLAMMING RANGE/COMMENTS

STAFF AND ADMINISTRATIVE AREAS - Continued

Conference Room (GP)	CRA01	23.23	250	Minimum use CRA01. One per department with more than 8 and less than 12 officers or officer equivalents. See Chapter 2.1 (General Administration), paragraph 2.1.2 for Personnel Equivalent Chart.
	CRA02	27.87	300	One per Department with thirteen to sixteen officers or officer equivalents.
	CRA03	37.16	400	One per Department with greater than sixteen officers or officer equivalents.
Staff Lounge (GP)	SL001	13.01	140	Minimum 140 nsf for 10 FTEs on peak shift. Add 5 nsf for each peak shift FTE over 10. Maximum 300 nsf without vending machines; 320 nsf if vending machines are included.
Personal Property Lockers (GP)	LR001	2.32	25	Minimum for the first 10 FTEs on peak shift. Add 2.5 nsf for FTE over 10. For staff without a dedicated office/cubicle space. See Chapter 6.1 (Common Areas) for Locker Room, Changing criteria.
Staff Toilets (GP)	TLTU1	4.65	50	Minimum of one for the first 15 FTEs on peak shift. Add one TLTU1 for every additional 15 FTEs on peak shift. Can be combined into multi-stall toilets.

CLINIC SUPPORT AREAS

		11.15	120	For up to 6 projected FTE providers.
Clean Utility (GP)	UCCL1	13.94	150	For 7 - 12 projected FTE providers.
		16.72	180	For more than 12 projected FTE providers.
	USCL1	8.36	90	For up to 6 projected FTE providers.
Soiled Utility (GP)		11.15	120	For 7 - 12 projected FTE providers.
		13.94	150	For more than 12 projected FTE providers.
Litter/Wheelchair Storage	SRLW1	5.57	60	One per clinic.
Crash Cart Alcove	RCA01	1.86	20	One per clinic. Can be shared between several
	IXCA01	1.80	20	clinics if fully accessible to all.
Equipment Storage	SRE01	9.29	100	One per clinic.

FUNCTION	Room	AUTHORIZED		PLANNING RANGE/COMMENTS
	Code	m ²	nsf	FLANNING RANGE/COMMENTS

Functions which are required for Residency Education in OB/GYN

The following areas must be programmed if the MTF is the "Center" for an OB/GYN Residency Program.

RESIDENCY PROGRAM

		1		T
	OFD01			Army - One per director of Residency Program.
Residency Program Director (GP)	OFD02	11.15	120	Navy - One per director of Residency Program.
	OFD03			Air Force - One per director of Residency Program.
Secretary with Visitor Waiting.	SEC01	11.15	120	One per projected FTE secretary.
Private Office	OFA01 OFA02	11.15	120	One per projected FTE that requires a private office. Do not include Resident Providers.
Administrative Cubicle	OFA03	5.57	60	One per projected FTE Residency staff that requires a dedicated workspace but not a private office.
	0.54.02	5.57	60	One per projected Resident, Navy/Air Force.
Resident Cubicle	OFA03	3.72	40	One per projected Resident, Army.
Rotating Resident Cubicle	OFA03	5.57	60	One per projected Resident, Navy/Air Force.
Rotating Resident Cubicle	OFA05	3.72	40	One per projected Resident, Army.
Library	LIBB1	13.01	140	One per Residency Program.
Conference Room (GP)	CRA01	23.23	250	One per Residency Program.
	EXRG1			Army. One per projected Resident. Minus the two monitored exam rooms.
Resident Exam Room (GP)	EXRG2	11.15	120	Navy. See above Planning Range/Comments.
	EXRG3			Air Force. See above Planning Range/Comments.
	EXRG1			Army - Provide two EXRG1 per Residency Program, and one CMP02. These rooms use cameras and videotapes.
Monitored Exam Room - Subject	EXRG2	11.15	120	Navy. See above Planning Range/Comments.
& Observer Room (GP)	EXRG3			Air Force. See above Planning Range/Comments.
	CMP02	5.57	60	One room can support two – Monitored Exam Rooms. This room holds the video recorders.
Preceptor/Consult Room	OFDC1	11.15	120	One per ten staff physicians per concept of operations. Do not include Residents. May use OFD01/OFD02/OFD03 if within clinical area.