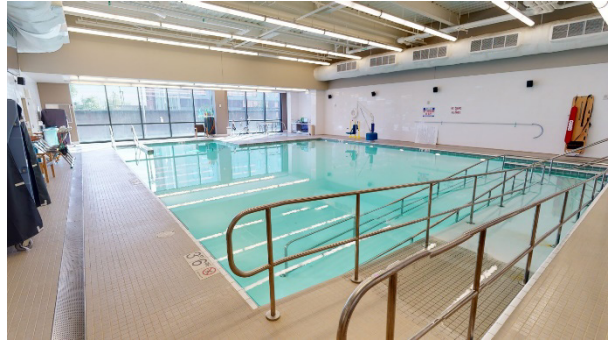


Physical Medicine & Rehabilitation Service Design Guide

Appendix A – Site Visit Reports

August 2022



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Site Visits

Site Visit 1

Orlando, FL – Orlando VAMC Site Visit Report

Date of Site Scan:

April 8, 2021

Date of Virtual Tour and Discussion:

April 27, 2021

Facility Toured:

Orlando VA Medical Center
13800 Veterans Way
Orlando, FL 32827

1.1 Facility Overview

New Build or Renovation:

New Build

Age of Facility:

Opening Date 2015

Inpatient or Outpatient:

Outpatient

Services:

Physical Therapy
Occupational Therapy
Physiatry
Vocational Rehabilitation



1.2 Summary

The virtual site visit occurred in April 2021. The building was scanned using a 3D digitizing technology and then attendees “toured” the facility by viewing the scanned images. The purpose of the tour was to collect data and learn from the experience of staff at the facility. The findings and “lessons learned” are used to determine standards and guidelines for planning future VA Physical Medicine & Rehabilitation Services (PMR Svc) facilities.

The Orlando VA Medical Center (VAMC) PMR Svc is located on the third floor, on the west wing of the Medical Center’s specialty clinics.

There are typically four or five providers or therapists working at any given time. The PMR Svc is actively growing its Whole Health footprint, and is in the process of expanding its offerings of chiropractors, acupuncturists, and recreational therapists.

The PMR Svc has its own Reception Area and General Waiting. Two scheduling clerks work at desks facing the entrance, and two more work towards the back of this work area, assisting Veterans as they arrive and leave. There is only one point of entry/departure for Veterans and visitors to check-in, check-out, and schedule follow-up appointments, which sometimes leads to congestion at peak hours with Veterans waiting in queues. The service is busiest between 9:00 am and 2:30 pm.

There is one Veteran Electronic Check-In station, located in a corridor off the Waiting area, towards the main Medical Center. It does not get highly used, both because it is not immediately visible from the entry and because its location is heavily trafficked by people going to the main hospital after checking in. Additional Veteran Electronic Check-In stations in prominent locations in the Reception Area could help reduce wait times and queuing for Veterans.

Other than the lack of a dedicated checkout area, and the tendency for Veterans to occasionally crowd at the entrance, the flow of Veterans works well at the facility. Veterans receiving physiatry care stay toward the front of the clinic. The space facilitates good inter-team collaboration – other teams (Prosthetics and Dental, in particular) are just around the corner. However, the Veteran population being served by PMR Svc is growing. Surgeries that require care (before and after) are expanding. The staff anticipates a need to be more creative about the layout of space as that growth occurs.



There are six Exam Rooms in the PMR Svc Common Patient Area. One Exam Room is behind the Reception Area and is used for intake of Veterans whose visit concerns pain management and psychiatry. Another Exam Room is adjacent to the intake Exam Room. Four more Exam Rooms are in a corridor farther back in the Patient Area. The Exam Rooms are shared between five physiatrists, a pain advanced registered nurse practitioner (ARNP), and a nurse. They share and rotate rooms, and coordinate their schedules so that providers and therapists can take advantage of days when others are off-site. However, an additional Exam Room would be preferred.

Some of the physicians at this clinic perform injections in the Exam Rooms. Anything more invasive than trigger point injections is performed in the main hospital.

Each Exam Room has a curtain track that runs across the room or around the door, allowing full coverage for privacy. The staff workstation faces away from the exam table, hindering face-to-face interaction with the Veteran. The exam tables are arranged differently in the two Exam Rooms that were toured – one is perpendicular to the back wall, while another is parallel to it. The exam tables are not on wheels, so repositioning them is difficult.

Medications are stored in a medicine cabinet that is in a general-purpose Storage Room. It would be more convenient for the providers and therapists if there were a dedicated Medication Room, with storage space for medical supplies, that had more convenient access from the Exam Rooms.

A Multipurpose Group Room at the facility serves multiple administrative and treatment functions. It is used for conferences, interdisciplinary team (IDT) wheel mobility meetings, transcutaneous electrical nerve stimulation (TENS) unit education, and back pain management education. Providers and therapists use the room when they need an enclosed or private space. This room is also used by the traumatic brain injury (TBI) social worker, who meets with Veterans to ensure their social needs are being met.

The Multipurpose Group Room contains a large table, chairs, and two desktop computers which are used for telehealth. There is no dedicated storage for this room, so all equipment is kept within it, and stacked in corners when not in use.

The floor of the Multipurpose Group Room is carpeted, and the room lacks a sink, which limit its flexibility and adaptability. The lights in this room include dimmers, which could expand the room's uses if the flooring were non-porous.



Durable medical equipment (DME) devices are “owned” by the facility’s Prosthetics Service, which is collocated with PMR Svc. The Prosthetics Service delivers DME devices to PMR Svc, where the devices can be given to Veterans when medical evaluations are not required, saving those Veterans the trip to Prosthetics. DME devices within PMR Svc are mostly stored in one Storage Room which is restocked every day. Veterans are given a tutorial on the device, which occurs in the Multipurpose Group Room if it is available; when the room is not available, the tutorial is provided in the hallway outside the Storage Room. Neither location is ideal for tutorials, because the carpeted floor of the Multipurpose Group Room makes rolling devices difficult to maneuver, while the tight space in the hallway restricts movement.

PT and OT share an Open Treatment Area (gym) at the facility. The staff using this room has grown since the facility opened. Seven physical therapists, six physical therapist assistants, and three or four occupational therapists currently share it. In peak hours, this room can get very crowded and difficult to navigate. Veterans are sometimes asked to wait in the hallway until there is enough space to accommodate their therapy sessions. The staff finds the OT Treatment Stations (footprints for equipment) to be too small – the clearance around the equipment too narrow (some equipment items have only 2 feet of space between them). The staff hopes that in the future, multi-use exercise equipment that allows for multiple exercises can be introduced, which could replace some single-use equipment and free up space in the Open Treatment Area.

The PT/OT Open Treatment Area includes several Treatment Cubicles which are divided by curtains. The beds in these cubicles face out towards the middle of the Open Treatment Area; Veterans would prefer to face the wall for privacy, especially during pelvic and groin therapy. The amount of space in these stations is adequate – the facility was even hoping to reduce the size to make room for additional bays, but the sprinkler system in the ceiling prevented smaller cubicles. The staff would also prefer cabinetry within the cubicles to store clean linen, rather than in a prep room by the Open Treatment Area, where linens are currently stored.

The PT/OT Open Treatment Area contains several computers. One is in each Treatment Cubicle, mounted to the walls on sway arms. There are also two desktop units in the Open Treatment Area, and two workstations on wheels (WOWs) on the Open Treatment Area floor. The WOWs need to be charged when not in use. An equipment alcove to store the WOWs would be welcome.

A ceiling-mounted solo step is above a blue, rubberized track along one wall of the PT/OT Open Treatment Area. There is also equipment along this wall. Sometimes staff need to move equipment out of the way before a Veteran can use the solo step.

The PT/OT Open Treatment Area often gets noisy during peak hours. Some exercises use bouncing balls and weights, which gets especially loud. TVs are mounted on the wall to play music to counteract the Open Treatment Area sounds.



A Therapist Workroom containing Staff Workstations overlooks the PT/OT Open Treatment Area and contains about eight workstations. The room is used for administrative, non-patient-facing work (such as reviewing consults) and making phone calls with patients (such as Veterans on home exercise programs). For other work, the therapists tend to stay at the computers in the Treatment Cubicles, where it is easier to complete their work and turn the space over quickly.

Two offices connect directly to the PT/OT Open Treatment Area. There are four additional offices in the area for use by PT/OT staff.

A Supply Storage Room off the PT/OT Open Treatment Area is used by the physiatry and PT teams. Some medical supplies are kept on trays, including Electromyography (EMG) supplies.

A Staff Breakroom off the PT/OT Open Treatment Area contains lockers, seating, and some kitchen appliances. The cabinets and lockers are underutilized – the staff keeps personal supplies in the Staff Locker Rooms, instead.

The PMR Svc at the facility includes a secondary PT Open Treatment Area used for amputee therapy. The staff finds benefit in having this therapy in a separate space from the main PT/OT Open Treatment Area, as amputees need a good amount of space to move, and enjoy the quiet environment of this smaller room which typically contains two therapists and two Veterans at a given time. There is a sit-to-stand lift in this room, and the facility is considering acquiring a solo step walking track or beam lift. Parallel bars are planned to be added to the room as well. Several tracks of curtains allow for visual separation within the room. A large mirror on a wall is used for gait therapy. The room was not originally planned for PT, and is carpeted, which is not ideal.

A room adjacent to the amputee PT Open Treatment Area is used for low-vision therapy. It is a small room, which allows darkness to be achieved more easily.

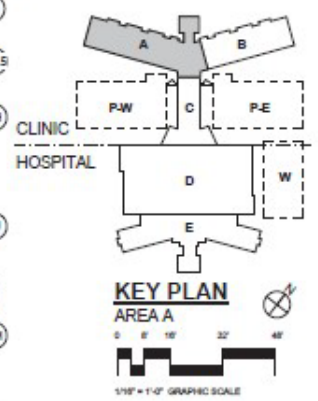
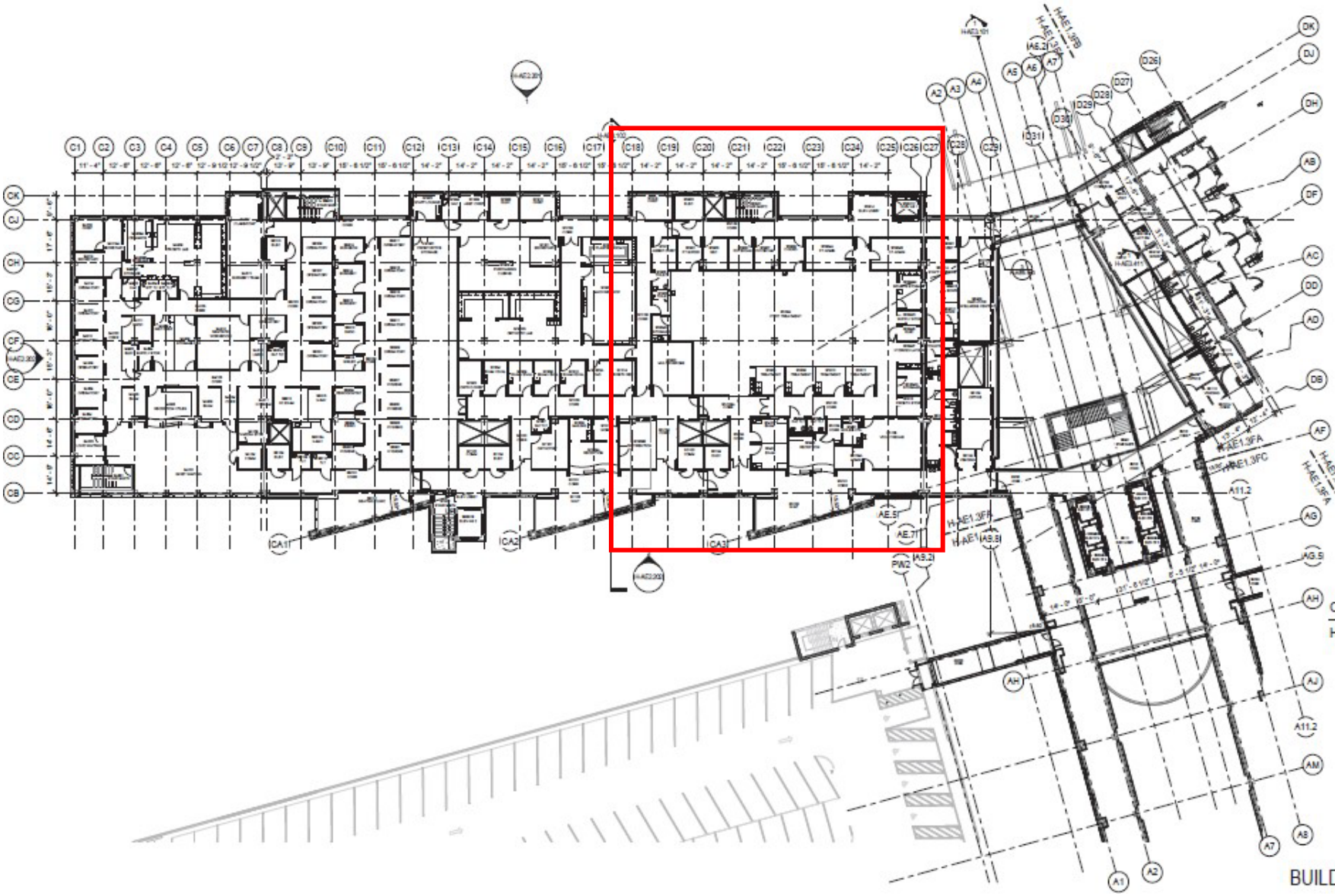
An off-stage, staff-only corridor contains the section Chief Offices. The corridor is also used for equipment deliveries and can get very noisy. A Patient Services Assistant (PSA) office is heavily used because, in addition to serving the PSAs, the room contains the service's only scanner, and is used for large print jobs by staff. A dedicated Copy/Supply Room, more conveniently located for the therapists, would be preferable to sharing this office between these different functions.



1.3 Floor Plans

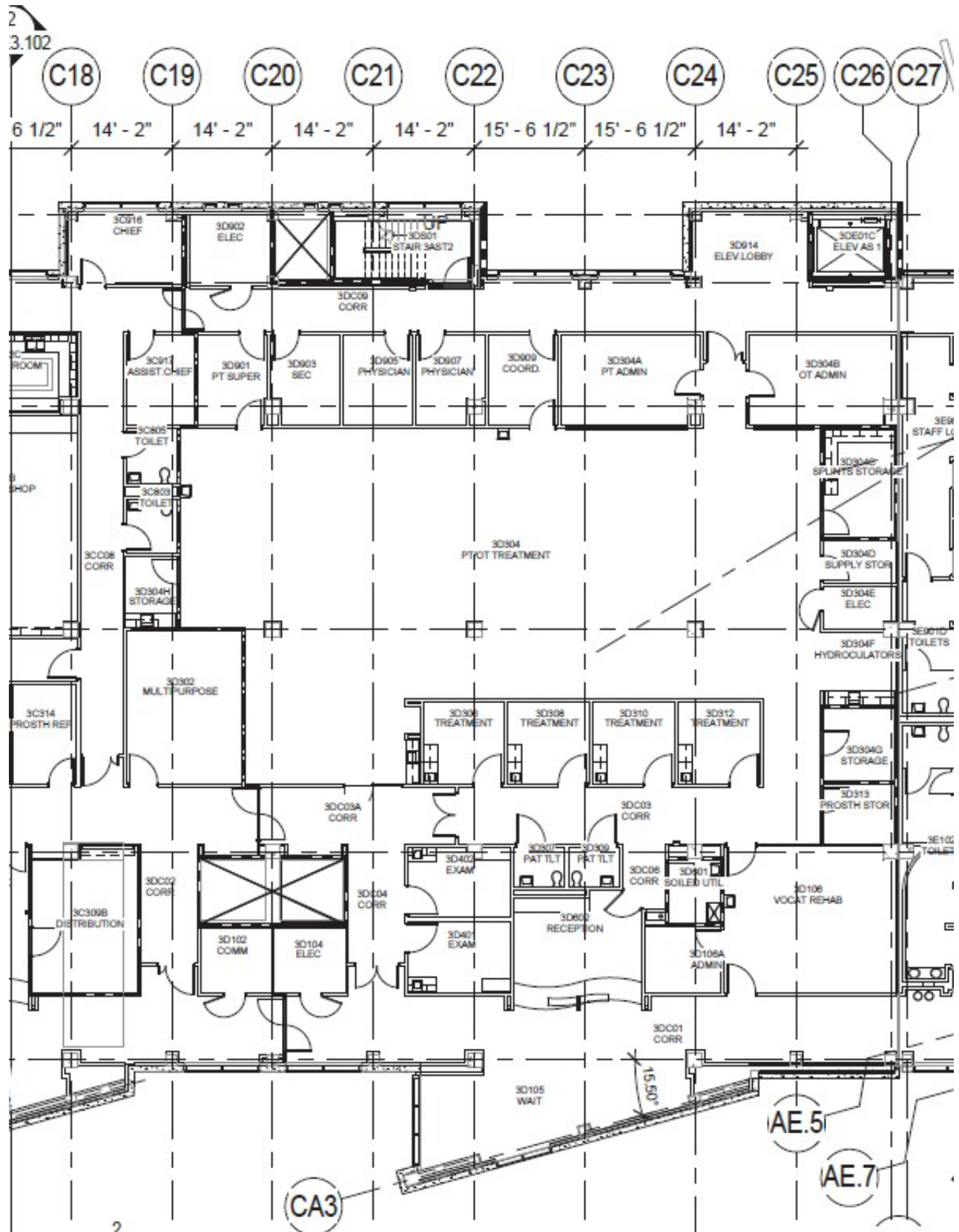
NOTES:

- SHEET NOTES:**
- A. SEE SHEET G-011 FOR GENERAL ABBREVIATIONS AND ARCHITECTURAL SYMBOLS.
 - B. DIMENSIONS ARE TO COLUMN GRID, FACE OF MASONRY OR CONCRETE, INSIDE FACE OF SHAFT WALL OR TO FACE OF METAL STUD.
 - C. FOR BID ALTERNATE INFORMATION IDENTIFIED BY AN OUTLINE, REFER TO 1/8" CONSTRUCTION PLANS DESIGNATED WITH AN "A" AT THE END OF THE SHEET NUMBER.
 - D. REFER TO SHEET HAE1.3FM FOR TYPICAL ROOF NOTES.



BUILDING IS FULLY SPRINKLERED





1.4 Photos



Figure 1.1 Veterans receiving care at the Orlando VAMC PMR Svc check in and out at the Reception Area at the front of the service.



Figure 1.2 This General Treatment Room at the Orlando VAMC PMR Svc is centrally located within the service and includes an adjustable mat table which is positioned so the head is next to the workstation.





Figure 1.3 The Multipurpose Group Room at the Orlando VAMC PMR Svc is used for staff conferencing as well as Veteran care such as education, training, and social work.



Figure 1.4 The Orlando VAMC PMR Svc includes an Open Treatment Area that is dedicated to amputee therapy.





Figure 1.5 The Open Treatment Area at the Orlando VAMC PMR Svc is separated into a PT side and an OT side.



Figure 1.6 The OT side of the PT/OT Open Treatment Area at the Orlando VAMC includes mat tables, desk stations, and cabinetry for therapy equipment and supplies.





Figure 1.7 The PT/OT Open Treatment Area at the Orlando VAMC includes Treatment Cubicles which offer visual privacy within the open space.



Figure 1.8 A Therapist Workroom at the Orlando VAMC overlooks the PT/OT Open Treatment Area.





Figure 1.9 Durable Medical Equipment (DME) is restocked for PMR Svc by the Prosthetics Service at the Orlando VAMC.



Site Visit 2

Richmond, VA – Richmond VAMC Site Visit Report

Date of Site Scan:

April 17, 2021

Date of Virtual Tour and Discussion:

May 5, 2021

Facility Toured:

Hunter Holmes McGuire VA Medical Center
1201 Broad Rock Boulevard
Richmond, VA 23249

2.1 Facility Overview

New Build or Renovation:

Renovation (Outpatient)
New Build (Inpatient)

Age of facility:

2013 (inpatient unit)
1980s (outpatient unit)

Inpatient or Outpatient:

Both

Services:

Physical Therapy
Occupational Therapy
Kinesiotherapy
Aquatic Therapy
Driver Training
Amputee Therapy



2.2 Summary

The virtual site visit occurred in May 2021. The building was scanned using a 3D digitizing technology and then attendees “toured” the facility by viewing the scanned images. The purpose of the tour was to collect data and learn from the experience of staff at the facility. The findings and “lessons learned” are used to determine standards and guidelines for planning future VA PMR Svc facilities.

The Hunter Holmes McGuire VA Medical Center (Richmond VAMC) PMR Svc offers both inpatient and outpatient services. Much of the outpatient space is converted from administrative space.

The non-supervising outpatient psychiatrists work in the Psychiatrist Team Room, which is also used by residents and trainees when present. The physicians would prefer private or two-person offices, especially for telehealth calls, which can be disrupted by other activity in the room, and a Staff Conference Room for group meetings. Telehealth is rapidly growing, currently comprising about 25% of the appointments at this service and could use their own dedicated space. The therapists would prefer telehealth space to include enough room for them to stand up and demonstrate range of motion activities.

The outpatient Exam Rooms are about 120 sq ft. When procedural services are provided, the room proves to be too small. Every Exam Room also has a mobile ultrasound unit, further cramping the room. The staff predicts that ultrasound procedures will continue to grow, so planning for the equipment within the Exam Room is important. Only one outpatient Exam Room has dimmable lights, which helps with ultrasound procedures. Dimmable lights in every Exam Room would be preferable.

Sinks and curtains in every Exam Room would also be preferred (because the Exam Rooms were retrofitted, only some have sinks and curtain tracks).

Linens are stored above the workstations in the outpatient Exam Rooms. The staff would prefer to keep them in a dedicated Clean Linen Room but lack the space at the facility.

A door in the back of one Exam Room leads to a Medication Room. The location was necessary due to the space constraints of the facility but is not ideal. Staff would also prefer a weighted storage system that keeps track of supplies, rather than needing people to keep track.

The Aquatic Therapy Pool in the outpatient service area is more than 30 years old. Tiling in the room tends to attract mold. A new HVAC system was recently installed, but the humidity is difficult to control.



The Pool is kept at 92°F, and the floor of the Pool is on a continuous slant from 3 to 5 feet; both attributes hamper the potential for group recreational activities. Before the pandemic, four to six Veterans would typically be in the Pool with one clinician at a given time. The staff would prefer some flat surfaces in the Pool, which would expand its potential uses. A separate, smaller Treadmill Pool with zero entry would also be ideal.

The deck space around part of the Pool is only just wide enough for a regular-sized wheelchair. Some larger wheelchairs do not fit around the Pool.

Veterans enter the Pool via a ramp, using pool wheelchairs. The ramp is the only point of Veteran entry into the Pool; a ceiling lift was installed but had mechanical issues and so was removed. A chair-style lift would be a preferred additional entry method because it is a common feature in community pools and homes, so it could be used to train Veterans to use pools outside PMR Svc.

There are showers for rinsing in the Pool Deck, as well in the Locker Room. The Locker Room is rather small; it is difficult for bariatric Veterans and those with spinal cord injuries to navigate. The benches that were originally installed could not bear the weight of bariatric Veterans and had to be replaced.

The Driver Training Area is a single room with dividers that separate therapies (including a Driver Training Simulator Station), which often occur simultaneously. The staff would prefer individual rooms for the therapies and assessments to reduce distractions for Veterans. Rooms with Simulator Stations should have dimmable lighting. The Driver Training service also has use of five vehicles onsite for additional training – however, the facility lacks a covered zone to do this training in inclement weather.

Because Richmond’s outpatient PMR Svc space has been converted from other uses, the Open Treatment Area (gym) space is divided into rooms for specific disciplines. The outpatient PMR Svc portion of facility has a spinal cord injury/disorder (SCI/D) Open Treatment Area, KT Open Treatment Area, OT Open Treatment Area, and PT Open Treatment Area. Generally, the staff feels that a multi-disciplinary space, with adjacent General Treatment Rooms, would be preferable.

The SCI/D Open Treatment Area is primarily used for KT and PT with inpatient SCI/D Veterans (the facility’s SCI/D service also has its own open treatment area). The room includes a 1,000-pound capacity overhead lift track and wheelchair-height equipment. There is open space in the middle of the room, which is important to provide, as many Veterans are in powered chairs and/or have limited mobility.

Several workstations for SCI/D therapists are located in a Therapist Workroom adjacent to the SCI/D Open Treatment Area.



The KT Open Treatment Area is divided into two zones, with one side for outpatient and the other side for cardiopulmonary treatment. Three therapists work in an adjacent room with a window facing the Open Treatment Area. This room contains a GXT treadmill for cardiac stress testing, and is also used for functions with Veterans that require a separate room, such as telemetry, EKGs, and orientation. A separate space for these procedures would be preferable.

The KT Open Treatment Area contains both cardiovascular and resistance equipment. The resistance equipment includes a leg press, back machine, and multi-function machine. Veterans also work with Thera-bands which can be used at home, which help with adherence, making Veterans more likely to continue their exercise programs outside the facility. Veterans usually spend an hour in the room and usually do a circuit training program, using various equipment pieces with rest between sets. A wall-mounted TV displays an education channel, but the therapists stay with the Veteran and also provide education during the session.

The staff finds the KT Open Treatment Area to be too small. Wheelchairs cannot reach the treadmills, and it is difficult to reach them with walkers. Typically, walkers are left in the office, and the Veteran is assisted around the room by the therapist. The space behind the treadmill is also limited, so a fall would be very hard to handle. More space around the treadmills would be preferred.

The KT Open Treatment Area is carpeted, the original purpose of which was to reduce noise, but it is now worn and presents infection control issues.

The OT Open Treatment Area is used for Veterans in outpatient and SCI/D therapies. Because Veterans with SCI/D issues need a lot of space, this room can get crowded – (before the pandemic) up to nine Veterans use this room at once.

The OT Open Treatment Area includes eight walled cubicle workstations for therapists which take up about one fourth of the room. While the staff agrees that the space would be better dedicated to OT activities, they find the cubicles useful for telehealth, which the facility lacks space for.

A hand therapy table in the OT Open Treatment Area includes cabinets behind it for storing relevant materials. The area works well, except that (before the pandemic) treating multiple Veterans simultaneously required another table to be pulled up to this area.

In the back of the OT Open Treatment Area, two doors lead to a courtyard, which is very conducive to outdoor treatment therapy (although those doors are locked during pandemic restrictions). The windows also provide daylight into the room, which Veterans and staff enjoy.

Half of the OT Open Treatment Area lights are kept off during the day. A dimmer switch control for each of the different areas would be preferable.



The OT Open Treatment Area lacks General Treatment Rooms off the clinic, which is a challenge. Veterans sometimes need to remove their shirts for shoulder work, and they do not have the requisite privacy.

The OT Open Treatment Area includes an ADL Kitchen, but the setup is not designed to closely replicate a home kitchen. An ADL Bathroom is down the hall and the location is not ideal, as Veterans must travel from the Open Treatment Area for bathroom evaluations.

A dedicated OT Supply Storage Room contains DME devices, which are stocked by the Prosthetics service once a week. Keeping commonly ordered devices within PMR Svc helps to save Veterans a trip to the Prosthetics service to pick them up. The room also contains a band saw and sewing equipment for minor adjustments to devices.

The PMR Svc space lacks adequate storage for wheelchairs. The Prosthetics service orders wheelchairs as requested by PMR Svc, but there is often a lag between their arrival and pick-up by the Veteran. A Wheelchair Storage Room would be useful.

Generally, storage space is insufficient at this facility. Equipment and supplies tend to accumulate within the therapy spaces themselves.

The PT Open Treatment Area is used by 12 therapists, who see at least seven Veterans per day in this room. They perform traditional consulting care for orthopedics, neurological care such as stroke patients, and musculoskeletal care. This is the only space for outpatient physical therapy in the facility. The staff finds this Open Treatment Area to be too small.

There are three three-walled, one-curtain Treatment Cubicles, as well as a few General Treatment Rooms off the PT Open Treatment Area. The staff would prefer more General Treatment Rooms in place of Treatment Cubicles for privacy, especially with pelvic floor therapy. The Treatment Cubicles are used for in-person treatment as well as telehealth. The therapists do about 10% of their appointments virtually.

The PT Open Treatment Area includes a lift over a set of parallel bars. There can only be one Veteran attached to the lift at one time. The un-weighting function of the lift is not adjustable, and the lift does not go all the way to the floor. The staff would prefer a more functional type of lift such as a Vector lift. The bars are very close to the mirrored wall, so they cannot have a therapist on both sides, which is sometimes needed. An additional mirror in front of the bars would help Veterans see their gaits more clearly.

A room next to the PT Open Treatment Area, formerly used for hydrotherapy, was repurposed to extend the Open Treatment Area space. The scrub sinks in this room are sometimes used for plaster work when they remove rigid dressings. The sink should have a plaster trap but that installation has not yet been completed. The drain in this room is useful for removing water from the hydrocollators that are kept here.



The Therapist Workroom is adjacent to the PT Open Treatment Area, but the room lacks space to grow. Telehealth is difficult to perform in this room. A window in the room overlooks the PT Open Treatment Area, but only a few workstations have visibility from a seated position. There is an excess of storage in this area; the workstations are unassigned, so the therapists do not keep personal belongings in the overhead cabinets.

The inpatient service at Richmond includes an Open Treatment Area which is shared with PT and KT therapists, and which is newer than the outpatient spaces. The mixing of outpatient and inpatient treatment can be a challenge. Veterans with brain injuries must be closely accompanied while other traffic moves in and out.

A Vector overhead lift circles around the entire PT/KT Open Treatment Area and allows therapists to dial in the parameters of the patients' needs. The lift has several motors to accommodate multiple Veterans simultaneously. The staff would prefer a similar lift system in all the PT spaces.

Several General Treatment Rooms are directly connected to the PT/OT Open Treatment Area. These rooms contain ceiling lifts, though they are not connected to the main lift. The staff finds that these adjoining rooms lead to more efficient use of the Open Treatment Area space. In addition to the General Treatment Rooms, there are Treatment Cubicles with three walls and a curtain off the Open Treatment Area.

The staff finds that storage in the PT/OT Open Treatment Area is insufficient. Wheelchairs are stored in the hallway out of necessity.

The wall separating the PT/OT Open Treatment Area from the hallway is half open with glass panels, and does not help with the acoustics of the room. It can get very noisy.

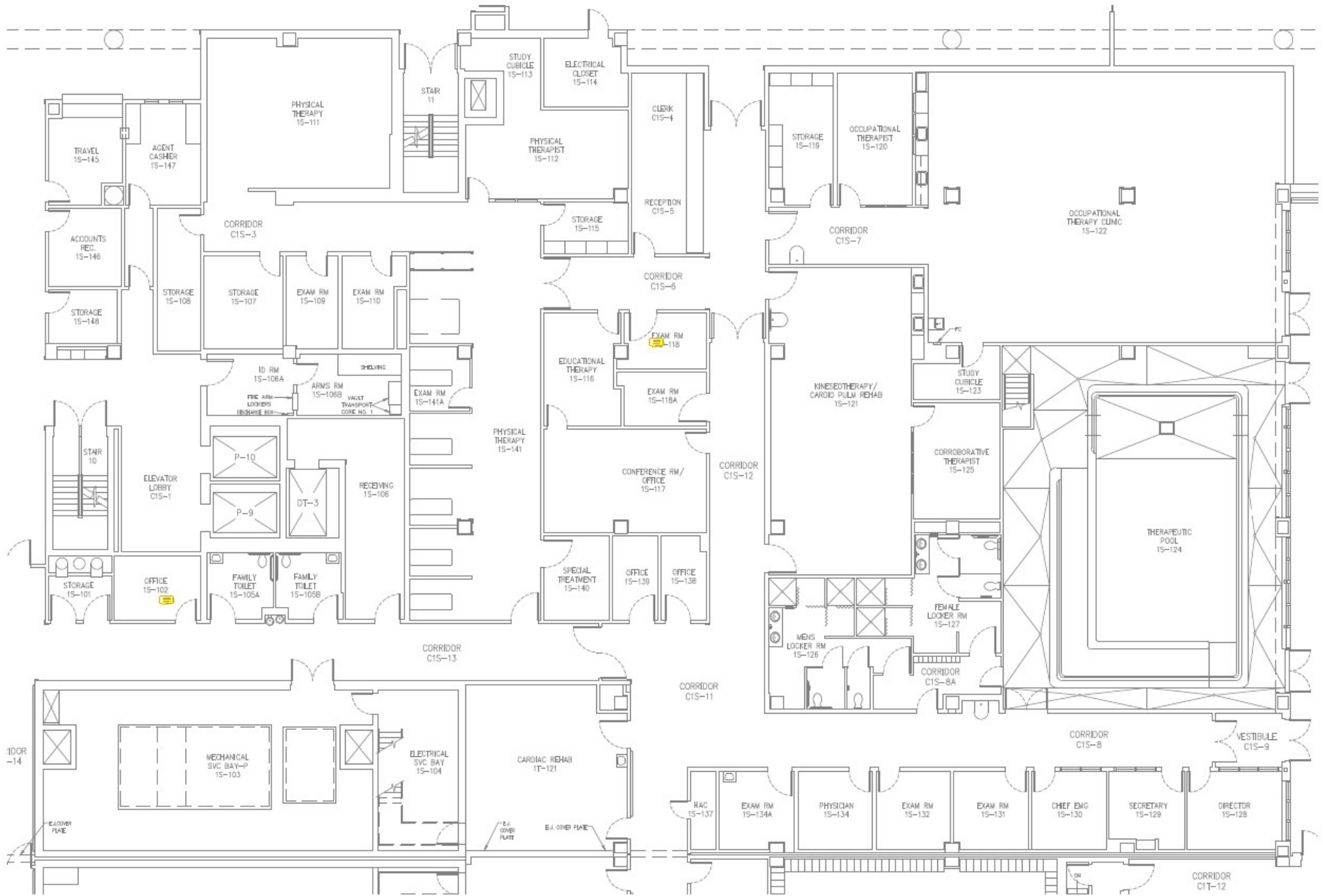
A Recreation Therapy Room in the inpatient portion of the facility is shared with OT therapists, who use a small room with three workstations and a treatment area.

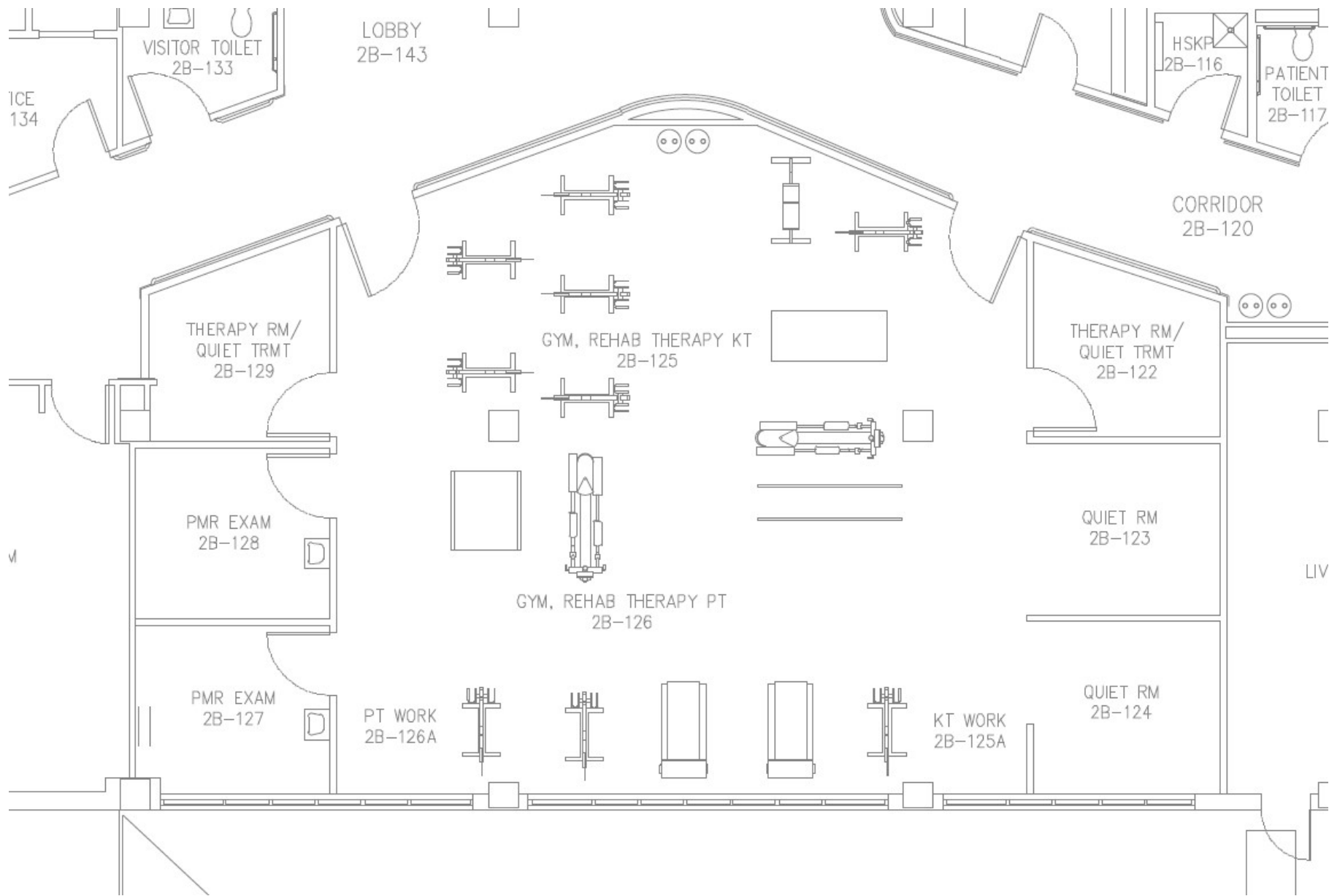
PMR Svc staff perform some outdoor therapy on a patio in the inpatient portion of the facility, as well as in the parking lot and adjacent sidewalks.

Generally, some staff feel that PT/OT space within the inpatient portion of the facility was not given primary consideration in the design/layout. Converging and sharing space is important, but so is dedicated space for quiet and confidential treatment.



2.3 Floor Plans





Inpatient PT Open Treatment Area



2.4 Photos



Figure 2.1 The physicians in non-supervisory roles at the outpatient PMR Svc at the Richmond VAMC share office space.



Figure 2.2 Exam Rooms at the Richmond VAMC Outpatient PMR Svc are often used for ultrasound procedures.





Figure 2.3 The Aquatic Therapy Pool at the Richmond VAMC includes a ramp which is used for Veteran entry as well as therapy activities.



Figure 2.4 The Driver Training program at the Richmond VAMC includes a Simulator Station.



Figure 2.5 The KT Open Treatment Area at the Richmond VAMC has dedicated space for cardiopulmonary rehabilitation in addition to kinesiotherapy.



Figure 2.6 A Therapist Workroom overlooking the KT Open Treatment Area at the Richmond VAMC is also used for functions with Veterans that require a separate room, such as telemetry, EKGs, and orientation.





Figure 2.7 The OT Open Treatment Area at the Richmond VAMC a table-based therapy zone and direct access to an exterior space for outdoor therapy.



Figure 2.8 The outpatient PT Open Treatment Area at the Richmond VAMC includes a lift over a set of parallel bars, which is next to a mirror so Veterans can observe their gait.





Figure 2.9 Treatment Cubicles in the outpatient PT Open Treatment Area at the Richmond VAMC have walls on three sides for added privacy.



Figure 2.10 The lift track in the inpatient PT Open Treatment Area at the Richmond VAMC circles around the middle of the room.



Site Visit 3

New Orleans, LA – New Orleans VAMC Site Visit Report

Date of Site Scan:

April 13-14, 2021

Date of Virtual Tour and Discussion:

May 6, 2021

Facility Toured:

New Orleans VA Medical Center
2400 Canal Street
New Orleans, LA 70119-6535

3.1 Facility Overview

New Build or Renovation:

New Build

Age of Facility:

2016

Inpatient or Outpatient:

Outpatient (though some therapists also work in the inpatient unit at the Medical Center)

Services:

Physical Therapy

Aquatic Therapy

Occupational Therapy

Activities of Daily Living Therapy (occupies two full-size houses)

Prosthetics (separate service, shared with PMR Svc)

Recreation Therapy (separate service, shared with PMR Svc)



3.2 Summary

The virtual site visit occurred in May 2021. The building was scanned using a 3D digitizing technology and then attendees “toured” the facility by viewing the scanned images. The purpose of the tour was to collect data and learn from the experience of staff at the facility. The findings and “lessons learned” are used to determine standards and guidelines for planning future VA PMR Svc facilities.

The main entrance to the New Orleans VAMC PMR Svc is off a circular driveway with a covered entry. Outside the entrance is a courtyard, through which Veterans parking in a dedicated PMR Svc parking zone come into the clinic. Veterans appreciate the shortened distance from parking to the entrance. On an average day, about 60 Veterans pass through this area for Prosthetics, 100 for Physical Therapy, and 30 for other services. Veterans also come here from Primary Care Service to get assistive devices (they are given the devices the same day as they are prescribed them whenever possible). There are two Veteran Electronic Check-In stations in this area, which staff estimates reduces the check-in traffic by about 30%.

Veterans can also enter PMR Svc through a rear entrance, which is more convenient for Aquatic Therapy and includes a small Reception Area and Waiting.

The PMR Svc Common Clinical Staff Area consists of large rooms with Workstations, two offices, a Locker Room, a Breakroom, Reception Area, and Copy/Supply Rooms. PT and OT therapists typically meet in this area in the morning for huddles, leave for the day, then return to document. Inpatient therapists have to travel a long distance, as the inpatient hospital is at the other end of the 40-acre campus. The lack of private space can present challenges when virtual meetings are being conducted.

The rear entrance area has two Offices and a staff Lactation Room, which is highly used.

PMR Svc and the Prosthetics service share a large Staff Conference Room, which is used for staff meetings, medical clinics, education, and occasionally, one-on-one DME training. Due to its frequent use, the staff would prefer that PMR Svc and Prosthetics services each have dedicated Staff Conference Rooms. The floor of the room is carpeted, but it has not presented any challenges to the rooms’ uses.

Telehealth is on the rise in PMR Svc at New Orleans, especially since the pandemic compelled therapists to rely on it – now that they and Veterans are accustomed to using it, the benefits are more greatly appreciated. All the General Treatment Rooms in the PT/OT Open Treatment Area, many private offices, and all physician rooms in PMR Svc have cameras for telehealth. The cameras are mobile and can be moved between rooms as needed.



There are 12 PMR Svc Exam Rooms. They include ceiling lifts to assist Veterans onto the exam table, which is a standard table used by all the services' exam rooms. EMGs are performed in these rooms. Four Exam Rooms are fitted for SCI/D and amyotrophic lateral sclerosis Veterans who may be on stretchers – the hallway, door, and room dimensions are wider.

The Aquatic Therapy Pool has a flat floor at a depth of 3'6 feet, with a squared off, 6'6-foot portion in the back. The water is kept between 88°F and 92°F. There are three ways to enter the Pool: a ramp which can be used by wheelchairs, two sets of stairs, and a lift for SCI/D patients. Six to eight Veterans can use this Pool at once. Most of the therapy consists of walking exercises to strengthen Veterans for walking and exercising on land. The facility also has stainless steel bicycles for water spinning classes.

There are two TV screens in the Aquatic Therapy Area which are used for music and spinning classes.

A small Aquatic Therapy Exercise Equipment Storage Room contains weight belts, pulley systems, and other tools for pool therapy.

A Chemical / Pump Room Storage Room contains engineering equipment, including a control panel to track pool temperature, backwash, and chemical levels. Pool maintenance is performed at night by a private contracted company.

The Aquatic Therapy Area also includes a 10-foot x 10-foot Treadmill Pool. The treadmill surface sinks into the water for zero entry. A workstation next to the Treadmill Pool displays footage from cameras under the water. The Treadmill Pool has jets to provide resistance. It is heavily used and a valuable piece of equipment for low-impact cardio exercise. The water in this pool is kept at around 90°F. A hatch leads underneath the Treadmill Pool to a Control Room. The Treadmill Pool operates on a separate system from the Pool, so backwash, draining, etc. can be accomplished independently.

There are lights installed directly over the Pool, which the staff finds to be inconvenient. To service the lights, a ladder must go into the Pool. The lights reflect on the water and make it difficult to see under the surface from above. Also, if a bulb were to break, glass would fall into the Pool.

The Aquatic Therapy Area has dedicated Male and Female Patient Locker Rooms. The standard-height benches in front of the lockers are too low for Veterans to use them easily – a treatment table was added to this area for easier seating. The Locker Rooms include a suit dryer, which the Veterans enjoy.

The original flooring in the Aquatic Therapy Area, including the Locker Rooms, was unsealed tile, which was too slippery. They were later overlaid with a slip-resistant finish to provide more traction.



The PT/OT Open Treatment Area (gym) is grouped into PT space and OT / Cardiopulmonary Rehabilitation space, divided by six 10 x 14'6 foot General Treatment Rooms and a passageway containing a sink, hydrocollators, towels, and other supplies. PT and OT therapists share the space and often interact on both sides. Access to the Open Treatment Area is controlled with PIV cards. There is a small Waiting area outside the Open Treatment Area.

The PT/OT Open Treatment Area has rubber flooring, which is difficult to clean and gets indented by equipment, but works well to soften the impact of falls. TVs are mounted on walls throughout the Open Treatment Area.

The PT side of the Open Treatment Area has much of the equipment found in a regular gym (weights, cardio, exercise balls), plus specialized PT equipment such as electrode machines to stimulate muscles to drive movement. There are plinths along one wall. A long hallway with a railing extends the length of the Open Treatment Area and is used for gait training.

There are several rooms on the PT side of the Open Treatment Area with various uses. One contains a large screen for cognitive skills training, and another is used for cognitive balance training. Both are highly used. A Locker Room and changing room are underutilized – part of the changing room has been converted into treatment space.

There are eight WOWs in the PT/OT Open Treatment Area. They are highly used and the staff could do with more.

The General Treatment Rooms on the PT side of the Open Treatment Area are used for modalities that require privacy, such as ultrasound and ice/heat, as well as pelvic floor therapy. One has a traction table. The staff finds six rooms to be enough for Veterans needing privacy. There are also portable curtains for visual privacy within the Open Treatment Area.

The OT side of the PT/OT Open Treatment Area includes several treadmills for cardiopulmonary rehabilitation. Some have been moved into the Whole Health Multifunction Room to reduce traffic in this area.

Windows by the OT portion of the Open Treatment Area overlook an outdoor space where Veterans do sidewalk training.

A Vector system runs about 120 feet along the ceiling of the OT Open Treatment Area. It has two turns, and its path goes over a treadmill. It is used nearly every day, mostly for neuro-patients such as ALS and SCI/D Veterans. The facility had some initial issues with the Vector system, as it was ordered and installed after the Open Treatment Area was constructed. Lifts need a great deal of support, and there is about 10 additional feet of space between the dropped ceiling in the Open Treatment Area and the next floor. It was a challenge to install. More foresight in planning would have made it more manageable.



The private Treatment Rooms on the OT side of the PT/OT Open Treatment Area are mostly used for upper extremity training. The furniture is fairly lightweight and easy to move if needed, but most Veterans who use this room are ambulatory.

A Therapist Workroom adjacent to the Open Treatment Area has about 15 workstations where therapists document. Windows on two walls overlook both sides of the PT/OT Open Treatment Area. The staff working in this room feel they do not have enough privacy. The computer screens are visible from the Open Treatment Area, so they added shields to them, which cause issues with glare on the screens. Also, this room does not provide enough space to follow pandemic distancing protocols. Therapists often document in the General Treatment Rooms.

A Storage Room next to the PT/OT Open Treatment Area contains wheelchairs, walkers, crutches, canes, etc. as well as electric mobility devices. The electric mobility devices are for training purposes, used for education before devices are issued for Veterans. The remaining items can be issued instantly to Veterans who need them, with no waiting period.

A Whole Health Multifunction Room at the facility includes a half-size basketball court, plus room for various exercise equipment. It is valued asset by PMR Svc. In addition to ADL and cardiopulmonary rehabilitation, many sports, dance, and other recreation activities take place in the Open Treatment Area. One section contains weight and cardio machines. The cushioned floor makes adaptive sports programs more difficult; a traditional wood flooring would work better. Also, the staff would prefer more than one Toilet Room adjacent to the Open Treatment Area. Otherwise, the staff is very satisfied with this room.

There is a large amount of highly used outdoor space around the facility. Paved and grass-covered areas are used for rehabilitation activities such as wheelchair training and gait ambulation, as well as recreational sport activities. A sidewalk around the building is used for obstacle courses, wheelchair training, etc.

The facility has a very robust Prosthetics service. While Prosthetics is a separate service from PMR Svc, they are highly connected. Many Veterans in PMR Svc use assistive devices that are supplied by Prosthetics, and the two services often share resources. AT New Orleans, the Prosthetics Service is embedded within PMR Svc.

The Prosthetics Service at the New Orleans VAMC includes a 3D Printing Room which contains an HP 3D printer for high-detail prints, a PDI Squirt Shape 3D printer for limbs, and a smaller printer for various other jobs. Prosthetics and custom orthotics are printed here, as well as prototypes of adaptive equipment on occasion.

Prostheses are ground, cut, sand-blasted, etc. in the Grinding Room. The functions create a lot of dust, so the room is equipped with dust collectors. The room also includes a large carver for making molds for prosthetic limbs.



Fiberglass and lamination work is conducted in the Fume Room. A hood is built into the wall behind the work bench, with slots above the desk to pick up fumes. It works well to pick up the significant odor that this room emits, and keep them from reaching the hallway.

Plaster molds are poured in the Mold Room. The room gets very dirty and has epoxy flooring which is easier to clean. In the center of the floor is a metal grate which needs to be removed for cleaning; a drain under the grate would be preferable. A Casting Room is adjacent to the Mold Room, which helps keep the area clean, as castings can be brought directly into the Mold Room.

Prostheses and orthotics are assembled (glued, cut, sewn, etc.) in the Prosthetics Lab. It is divided into two sections for prosthetics and orthotics. Exhaust trunks hang over the desks to pick up glue fumes. The staff is very satisfied with this room.

Prosthetics Service requires a huge amount of storage space. Several rooms have been converted from their original purpose in order to provide more storage.

Two houses that were retained on the facility's site are used for ADL training. Both houses' exteriors have porch lifts that are the same as those that are installed in Veterans' houses. The area outside the houses is used for surface training on concrete, gravel, and steps.

One ADL house focuses on out-of-home activities and includes an ADL Bathroom, a restaurant booth, a set of airline seats, a store, a computer room, and an ADL Indoor Training Vehicle Station. The house is used by PT (mostly for transfer training) as well as OT.

The airline seats were donated by Delta. They are placed the same distance from one wall as the width of an aisle in a commercial airliner. Delta also provided a wheelchair that is used by the airline to transport customers in the aircraft. This aircraft replica has proven very useful for Veterans who are hesitant to fly, although the fabric seats are difficult to clean. The store has stocked shelves, refrigerators, and registers for training in grocery shopping in a realistic environment, and is highly valued by Veterans as well as dieticians, who use it area for budget and healthy food training. The staff is working to obtain an ATM machine to add to the store. The computer room is used to train Veterans on resumé building, internet research, etc. The staff is working to acquire a Driver Training Simulator Station to add to the Driver Training area, as well as a car port for training on getting in and out of vehicles.

The other ADL house focuses on in-home activities. There are three ADL Bedrooms and Bathrooms as well as a functional ADL Kitchen, dining room, living room, music room, stair lift, and ADL Laundry Room. Veterans stay in this house, often with their families, for four-hour increments, allowing them to practice with various equipment and work with the hospital to determine what equipment will work best in their homes.



One ADL Bedroom on the first floor is an environmental room for Veterans with multiple sclerosis (MS). The ADL Kitchen is used for cooking classes and OT. The other half of the Kitchen room contains a couch and chair, as well as some musical instruments for music therapy. The stair lift to the second floor is the same as what would be installed in a Veteran’s home. The ADL Bedrooms on the second floor include a children’s room, a master bedroom, and a nursery.

Between the two ADL houses, the staff finds the residential space to be the most critical for ADL therapy.



3.3 Floor Plans



3.4 Photos



Figure 3.1 The entrance to PMR Svc at the New Orleans VAMC includes two Veteran Electronic Check-In stations.



Figure 3.2 PMR Svc therapists at the New Orleans VAMC often meet in the Common Clinical Staff Area in the mornings for huddles, leave for the day, then return at the end of the day to document.





Figure 3.3 This Staff Conference Room at the New Orleans VAMC is shared by Prosthetics Service and PMR Svc, and is used for staff meetings, medical clinics, education, and one-on-one durable medical equipment (DME) training.



Figure 3.4 The PMR Svc Exam Room tables at the New Orleans VAMC are positioned to provide access on three sides.





Figure 3.5 The Aquatic Therapy Pool at the New Orleans VAMC has a flat floor and is 3 feet, 6 inches deep. A deeper portion in the back is 8 feet deep.



Figure 3.6 The Treadmill Pool at the New Orleans VAMC includes jets for resistance and cameras to observe underwater motion.





Figure 3.7 The PT side of the PT/OT Open Treatment Area at the New Orleans VAMC includes stairs, mats, exercise equipment, and a gait lane.



Figure 3.8 The OT side of the PT/OT Open Treatment Area at the New Orleans VAMC includes a lift track whose path has two turns and runs over a treadmill.





Figure 3.9 A Therapist Workroom at the New Orleans VAMC overlooks both PT and OT sections of the PT/OT Open Treatment Area.



Figure 3.10 At the New Orleans VAMC, two converted houses are used for OT ADL training including commercial activities such as grocery shopping.





Figure 3.11 The New Orleans VAMC OT ADL space includes airline seats to help Veterans prepare for commercial flights.



Figure 3.12 The New Orleans VAMC OT ADL space includes a bedroom for smart home technology training.





Figure 3.13 The New Orleans VAMC OT ADL space includes an ADL Kitchen which also holds music therapy equipment.



Figure 3.14 The Whole Health Multifunction Room at the New Orleans VAMC is utilized for a wide variety of PMR Svc activities. (The image shows COVID-19 vaccination stations.)





Figure 3.15 Prostheses and orthotics are assembled in the Prosthetics Lab at the Orlando VAMC.

