

## **Plaster Room**

The Plaster room allows for the application of Plaster of Paris and other splints and for the closed reduction under sedative, or regional an aesthesia, of displaced fractures or dislocations.

It must be at least 20 m<sup>2</sup> in size, excluding crutch or splint storage areas. Provision for physiological monitoring during procedures will be necessary.

The following equipment and fitments are required:

- Service panel as above.
- Storage for plaster bandages
- X-Ray viewing panel (2 panels/bed) or digital imaging system.
- Monitoring equipment (NIBP, SpO<sub>2</sub>, ECG) including access to resuscitation equipment.
- Nitrous oxide delivery system or storage space for a portable nitrous oxide delivery system.
- Storage space of a pneumatic cuff and its gas supply.
- Plaster trolley.
- Sink and drain with a plaster trap.
- Work bench.
- A splint and crutch store should be accessible to the Plaster room.
- Pneumatic tourniquet.

### **4-10 Procedure Room(s):**

The Procedure room(s) may be required for the performance of procedures such as lumbar puncture, tube thoracostomy, thoracocentesis, abdominal paracentesis, bladder catheterization, suturing..... etc.

It requires noise insulation and must be at least 20 m<sup>2</sup> in size.

Minimal equipment and fittings include:

- Service panel as above

- Operating theatre light suspended from the ceiling with minimum 80,000 lux
- X-Ray viewing box/digital imaging system
- Monitoring equipment: NIBP, SpO2, and ECG with access to resuscitation equipment.



Procedure Room

### **Consultation Area**

Consultation areas are provided for the examination and treatment of ambulant patients who are not experiencing a major or serious illness requiring resuscitation or monitoring. The Consultation area may be configured as a Fast Track area for the treatment of patients who suffer from non-complex and single system conditions. The configuration of the consultation areas will be determined by case mix and local operational policies.

Each area should be of sufficient size to house:

- Service panel as above
- Examination couch/trolley
- Minimum 12 m<sup>2</sup> in area
- Desk and three chairs
- Computer outlet and terminal

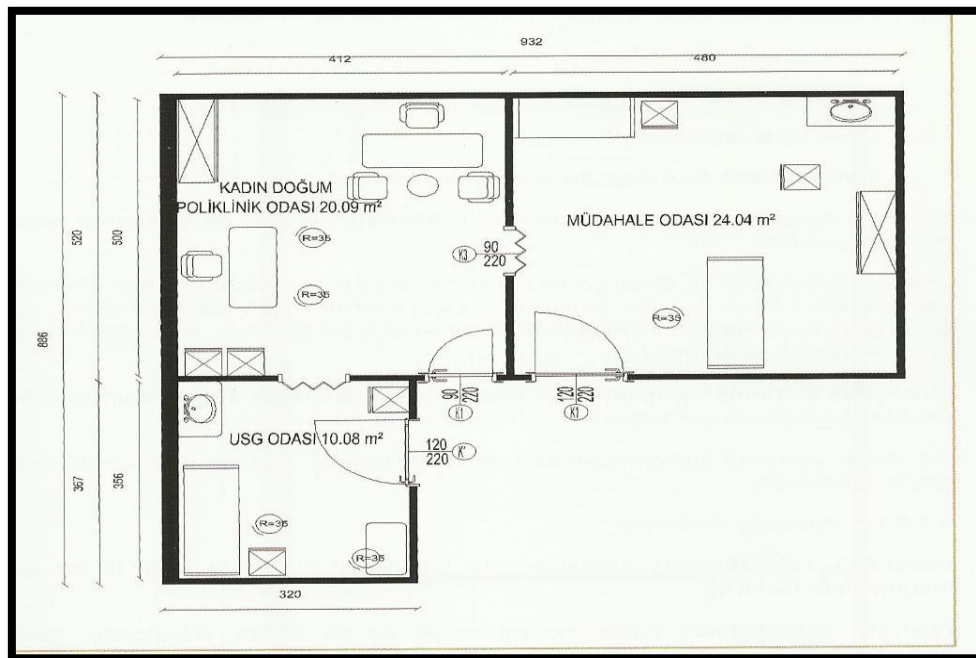
Consultation rooms may be adapted to serve specific functions:

ENT conditions:

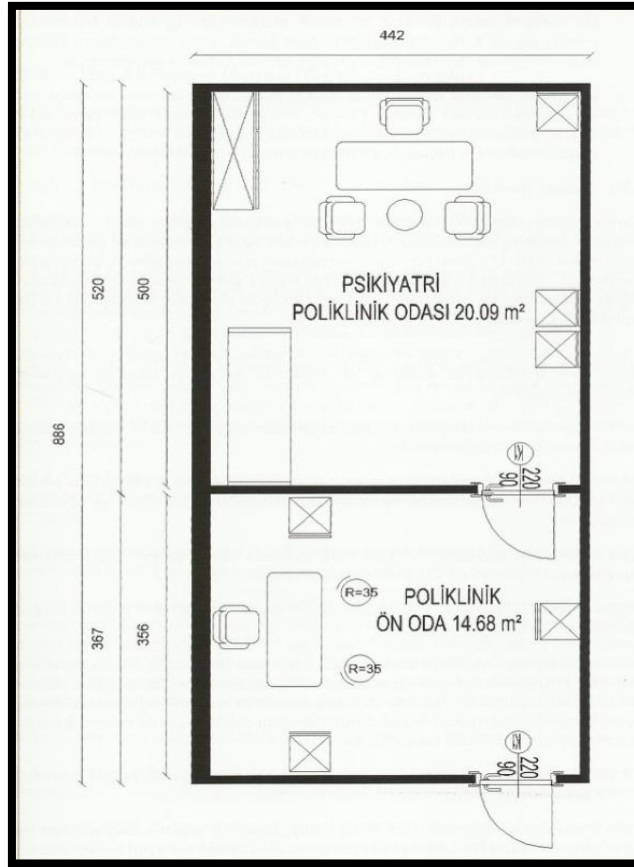
- Full ENT set, including suction
- ENT microscope
- Head light
- Tuning forks
- Head mirrors

Ophthalmology conditions:

- Motorized vision screen
- Slit lamp
- IV pole
- Room should have black out capability/preferably windowless
- Ophthalmology trolley.



Consultation Area Design



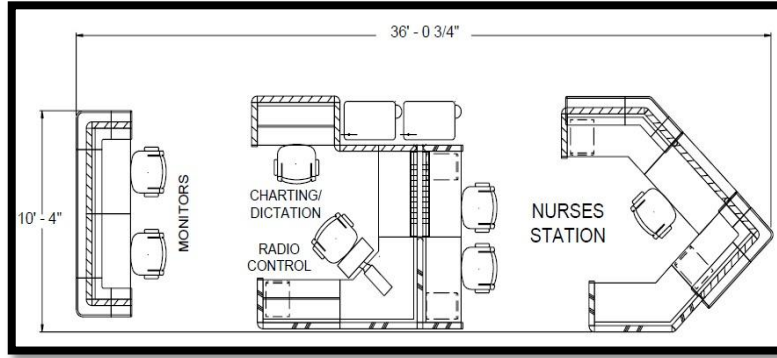
Consultation Area Design

### Staff Station

The Staff Station in the Acute Treatment area will be the major staff area within the department. The station should provide an uninterrupted view of patients and the floor may be raised to achieve this aim. It should be centrally located and constructed in such a fashion to ensure that confidential information can be conveyed without breach of privacy. An enclosed area is recommended for this reason and also to provide security of staff, information and privacy. The use of sliding windows and adjustable blinds can be used to modulate external stimuli and a separate write up area may be considered. The staff station(s) must be at least 10m<sup>2</sup> in size or 1m<sup>2</sup>/1000 yearly attendances, whichever is larger. Ergonomic design is essential.

The following equipment and fittings should be accessible:

- Telephones.
- Direct line for GP admitting calls only.
- Direct line telephone for incoming Ambulance/Police use only.
- Computer terminals.
- Printer.
- Facsimile machine.
- Photocopier.
- GPOs.
- X-Ray viewing boxes/digital imaging systems.
- Dangerous drugs/medication cupboards.
- Emergency and patient call display.
- Under-desk duress alarm.
- Valuables storage.
- SES emergency radio.
- Police blood alcohol sample safe (where required).
- Storage for stationery.
- Pneumatic tube access or similar for specimens to Pathology, the transfer of medical records and medical imaging requests.
- Writing and work benches.
- Part of the staff station should be acoustically isolated from the remainder of the department in order to allow privacy of confidential medical discussion.



Staff Station Design



Nurse Station Area

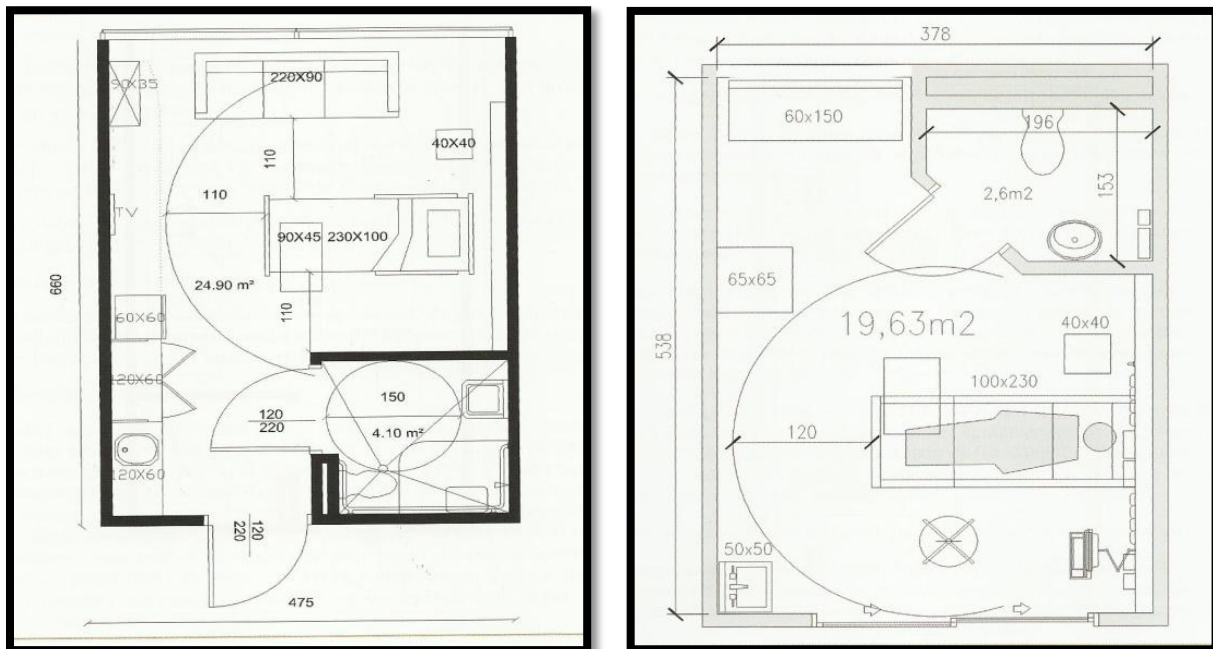


Nurse Station Area

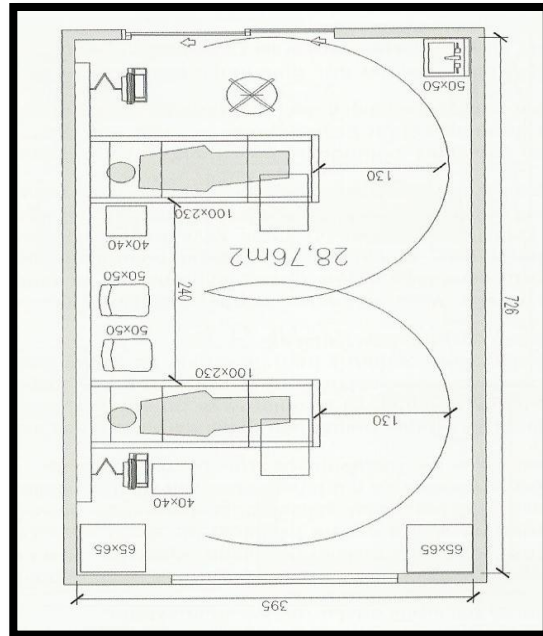
## Short Stay Units

A Short Stay Unit is used to describe a unit managed within and by the Emergency department whose prime orientation is to manage acute problems for patients with an expected length of stay of less than 24 hours. Where provided, a short stay unit should be facilitated similar to a hospital ward. 8 beds are considered to be the minimum functional size.

The configuration of the short stay unit should be a minimum of 1 bed per 4000 attendances per year. This figure will be influenced by the function and case mix of the unit. All beds should be capable of physiological monitoring at least similar to an acute cubicle. There should be a separate staff station of an appropriate size and an office for the nurse unit Manager/clinical nurse consultant. Hospital beds (not ED trolleys) must be provided.



Short Stay Units (Single Bed)



Short Stay Units (Double Bed)

## Waiting Rooms

The waiting area should provide sufficient space for waiting patients as well as relatives/escorts. The area should be open and easily observed from the Triage and reception areas. Seating should be comfortable and adequate space should be allowed for wheelchairs, prams, walking aids and patients being assisted. Zoning of the waiting room should be considered, with quiet areas, a television lounge, and family or small group areas.

- Natural lighting should be maximized.
- There should be an area where children may play with suitable furnishings. Infection control should be considered.
- Television should be available but should not dominate the waiting area or be unduly noisy.
- The ability to broadcast department status information or public health messages is desirable.



- The use of art, photographs and murals, particularly of nature scenes, should be considered.

There must be access to:

- Triage and Reception areas.
- Toilets.
- Baby change room.
- Light refreshment facilities which may include automatic beverage dispensing machines.
- Telephones, taxi phone and change machines.
- Health literature.

It is desirable to have a separate waiting area for children. This area should be suitably furnished, including a Video/TV, and provided with equipment for safe play activities. It is separated for sound from the general waiting room and must be visible to the triage nurse.

The waiting area must be of a total size of at least 5.0m<sup>2</sup> /1000 yearly attendances in area that includes seating, telephones, vending machines, and display for literature, public toilets and circulation space. The waiting room should include one seat per 1000 yearly attendances.

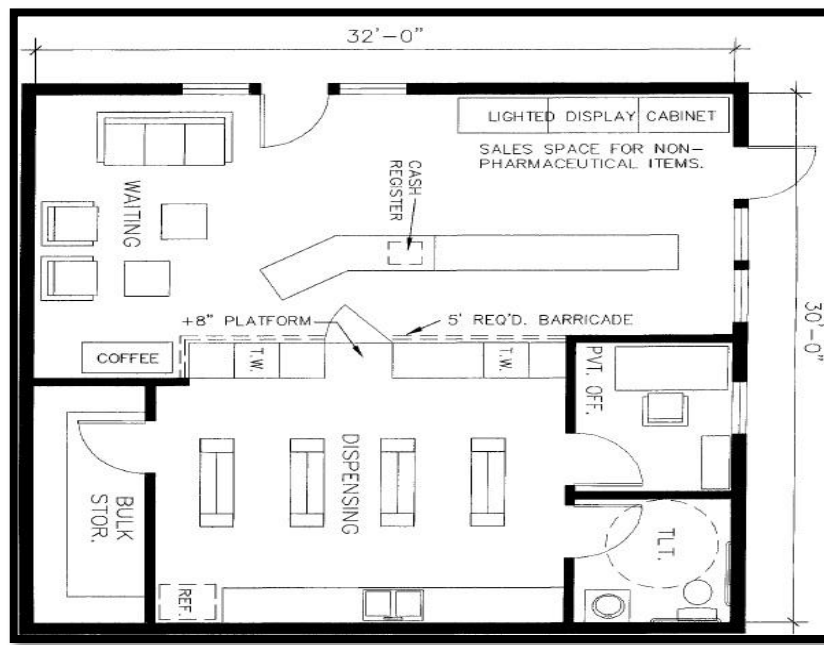
The area should be continuously monitored by electronic surveillance to safeguard security and patient well being.




Waiting Area

## Pharmacy/Medication Room

Used for the storage of medications used by the department. Entry should be secure with a self-closing door. The area should be accessible to all clinical areas and have sufficient space to accommodate a pharmacy preparation area, the pharmacy impress system, and a refrigerator suitable to ensure cold chain integrity. Consideration of the space requirements for automated dispensing machines may need to be considered.

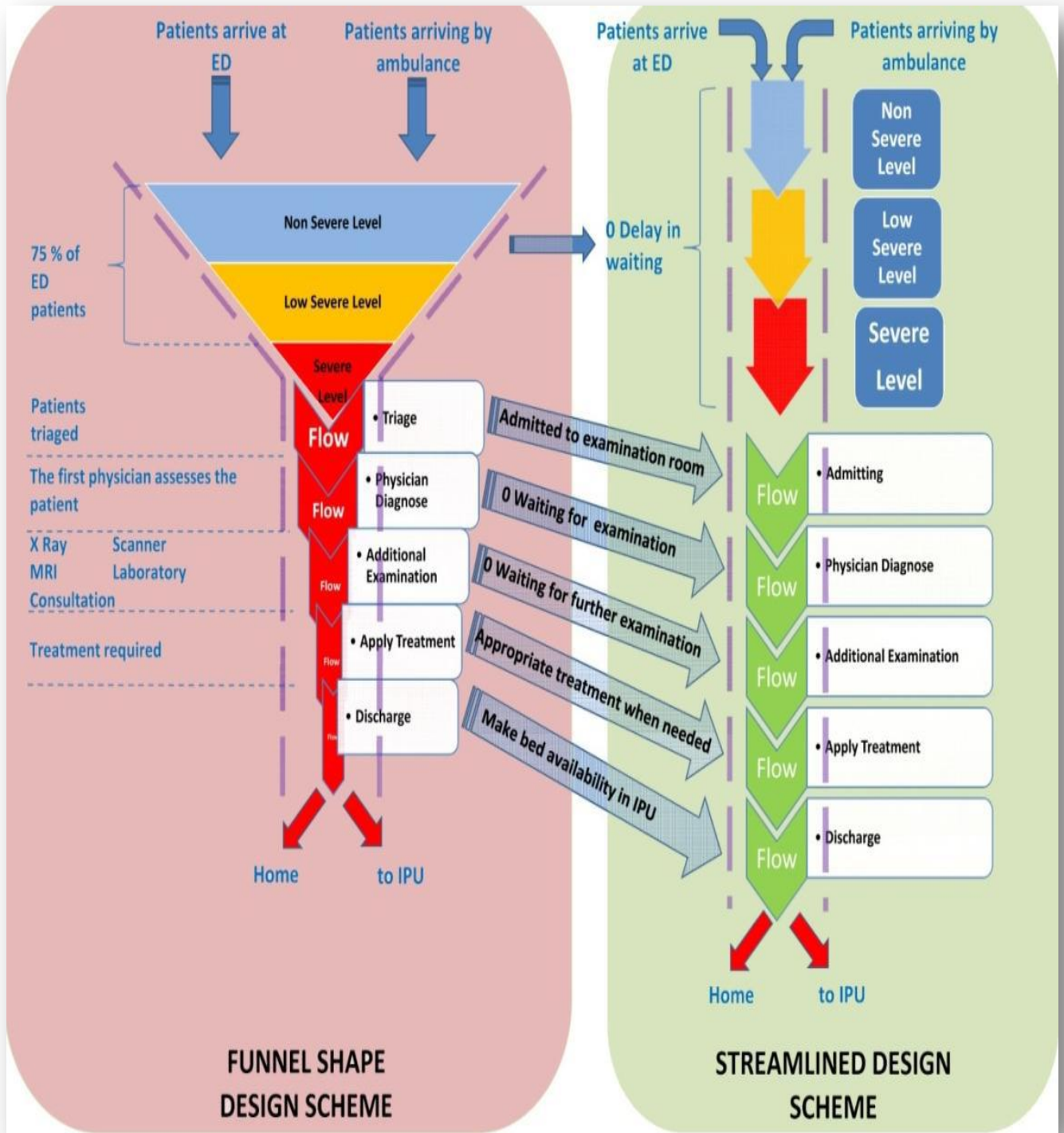


Pharmacy



	Design Concept	Lean Healthcare	Post Lean Simulation Methods
Identification of Current Practice Process	Spatial requirements	- VSM current state - VSM simulation of two extreme limits	DES of current state
Identification of Current Practice Standards	Exploration of waiting rooms requirements	Calculations of process requirements	State of the art of existing simulation tools
Identification of Skills and Resources	Impact of change on space requirements	Hospital departments impact on ED process	Process space requirements and resources
Assess Value Proposition of Process Change	Propose new space requirements	- VSM future state - VSM simulation	DES Future state post lean simulation
Proposed New Design Process and Standards	Propose new space requirements	New process characteristics	Graphs and statistics of utilizations

ED Process Design



ED Process Design Improvement

