

Part B – Health Facility Briefing & Design

155 Main Entrance Unit



iHFG

International Health Facility Guidelines

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155 Main Entrance Unit

1 Introduction

Description

The Main Entrance Unit provides for the following functions:

- Entry to the hospital
- Drop off and collection area
- Patient reception
- Patient and visitor enquiries
- Way finding to hospital units
- Patient and visitor waiting.

2 Functional and Planning Considerations

Operational Models

Hours of Operation

The operating hours for the Main Entrance will be dependent on the role, size and Operational Policies of the facility. Generally, the Main Entrance will be open from early morning for arrival of admissions to evening, after closing of visiting hours, seven days per week. After-hours access may be arranged through Security or through the Emergency Unit, according to the Operational Policies of the facility.

Planning Models

Location

The Main Entrance Unit is generally located on ground level, in a location easily seen and accessible from car parking and public transport stations.

Configuration

The Reception desk may include an Admissions area or Cashier stations, depending on the Operational Policy of the facility.

A security station may be located in close proximity to the Main Entrance in addition to security stations in other areas such as Emergency Unit.

Retail areas may be included as determined by the size and the Service Plan of the facility.

The Main Entrance area will have access to lifts, connecting corridors and public amenities including Public and Accessible Toilets, Parenting/ Baby Change facilities and Prayer Rooms if provided in the facility.

Functional Areas

The Main Entrance will include the following functional areas:

- Entry Areas
 - External drop-off and collection point, preferably under cover
 - Airlock, recommended but optional
 - Entrance Lobby
 - Storage for wheelchairs
- Reception/ Enquiries Area
 - Reception desk, which may be shared with Admissions Unit
 - Office for administrative support functions, switchboard operators
- Public Areas
 - Waiting Areas, which may be shared with Admissions and other adjacent hospital units

- Internet Kiosk, an optional area for visitors to use computers, internet and recharge mobile phones while they wait
- Access to Public Amenities including toilets, baby change, telephone, public transport phones, vending machines, prayer rooms.
- Retail Areas are optional and commonly include:
 - Florist
 - Kiosk / Coffee Shop
 - Gift Shop / Newsagent
 - Retail Pharmacy
 - ATM / Banks or agencies
 - Optical Shop
 - Other retail areas considered viable.

Entry Areas

Airlock (Optional)

An Airlock connecting external areas with internal areas is recommended to:

- Maintain air-conditioning temperature and air pressurisation from internal to external areas
- Prevent outside air contaminants such as dust entering the building
- Provide a security barrier that can be locked in emergencies.

The Airlock should be sized to accommodate the amount of people arriving and exiting, and cater for people with mobility aids.

Refer to Standard Components Airlock-Entry for additional details.

External Drop-off and Collection Area

The external drop off and collection areas, including public transport stations should be covered with direct access to the Main Entry doors. Size will be dependent on number of vehicles expected in the vicinity.

Entrance Lobby

The Entrance lobby is the area through which patients and visitors arrive at the Main Entrance to the facility connecting the drop-off and collection areas with the Reception and circulation routes. The Lobby will direct visitors to the Reception area and provide waiting areas and public amenities. The size of the Lobby will be determined by the functions to be accommodated, the volume of persons through the area and the impact the arrival point has on the whole facility.

The Lobby will have direct access to circulation corridors and lifts providing the thoroughfare to hospital units and will preferably be in close proximity to the vehicle drop off/ collection areas.

Security features provided in this area may be discreet and not noticeable to the observer, including closed circuit television (CCTV), a security room, and controlled access points.

Signage and wayfinding in this area needs to be clear and highly visible. This may include electronic directories.

Reception Areas

Reception Desk

The Reception Desk should be highly visible from the entry with good signposting indicating the enquiry point for visitors and patients. The Reception Desk may be open plan, partially enclosed or fully enclosed, to be determined by a security risk assessment. Security features such as duress alarms should be included.

The Reception Desk will need to accommodate Reception staff and a range of other personnel that may include cashiers, security staff and volunteers to assist with patients and public enquiries and way finding.

Refer to Standard Components Reception/ Clerical for additional details.

Public Areas

Waiting Areas

Waiting areas will require seating for a range of occupants including children, elderly and disabled patients and visitors. Seating may be arranged to provide a degree of privacy to groups of seats and may include separate family waiting areas. Waiting areas will require close access to public amenities.

Refer to Standard Components Waiting provided in a range of sizes for additional information.

Public Amenities

The Main Entry will include access to public amenities including Toilets, Parenting Rooms and Prayer rooms. The sign posting to public amenities should be highly visible and easily understood; use of pictograms is recommended. All public amenities will require access for people with disabilities.

Refer to Part B - 260 - Public & Staff Amenities in these guidelines for further information.

Retail Areas

Retail areas may be included in the Main Entry area according to the Operational Policy of the facility providing services that will benefit patients, visitors and staff. The range of retail outlets available will be dependent on the business plan and commercial arrangements between the retail outlets and the facility and will be influenced by the location, the proximity to other retail areas.

The size and requirements of each shop will be dependent on the service provided. Local authority regulations may apply to provision of services such as food/ drinks outlets and Pharmacy.

Retail areas will require good public access, and ready access to public amenities.

Functional Relationships

External

The Main Entrance will have a strong functional relationship with:

- Vehicle set down and collection areas including public transport ranks
- Car parking areas

The optimum external functional relationships are demonstrated in the diagram below including the following:

- Access from drop off, pick-up and transport stations to the Main Entrance
- Airlock at the entrance between the Main Entrance and Lobby
- Controlled access at the Airlock entry.

Internal

Within the Main Entry, the following relationships are important:

- The Reception Desk should have a direct view of Main Entry / Waiting Areas for patient / visitor enquiries and security issues
- The Admissions Unit and Discharge Lounge areas may be located in adjacent areas for patient and visitor convenience
- Public Amenities may be located in the area or in close proximity
- Lifts and corridors should be visible, well signposted and easily accessible
- Retail areas and Discharge Lounges may be located in adjacent areas for patient and visitor convenience.

These internal relationships are outlined in the diagram below, notably:

- Access to all inpatient outpatient and day patient areas through public corridors
- Access to service and diagnostic areas through a public access corridor
- Access to Admissions, Discharge Lounge and Emergency Unit, ideally located in adjacent areas on the same level as the Main Entrance.

Functional Relationship Diagram

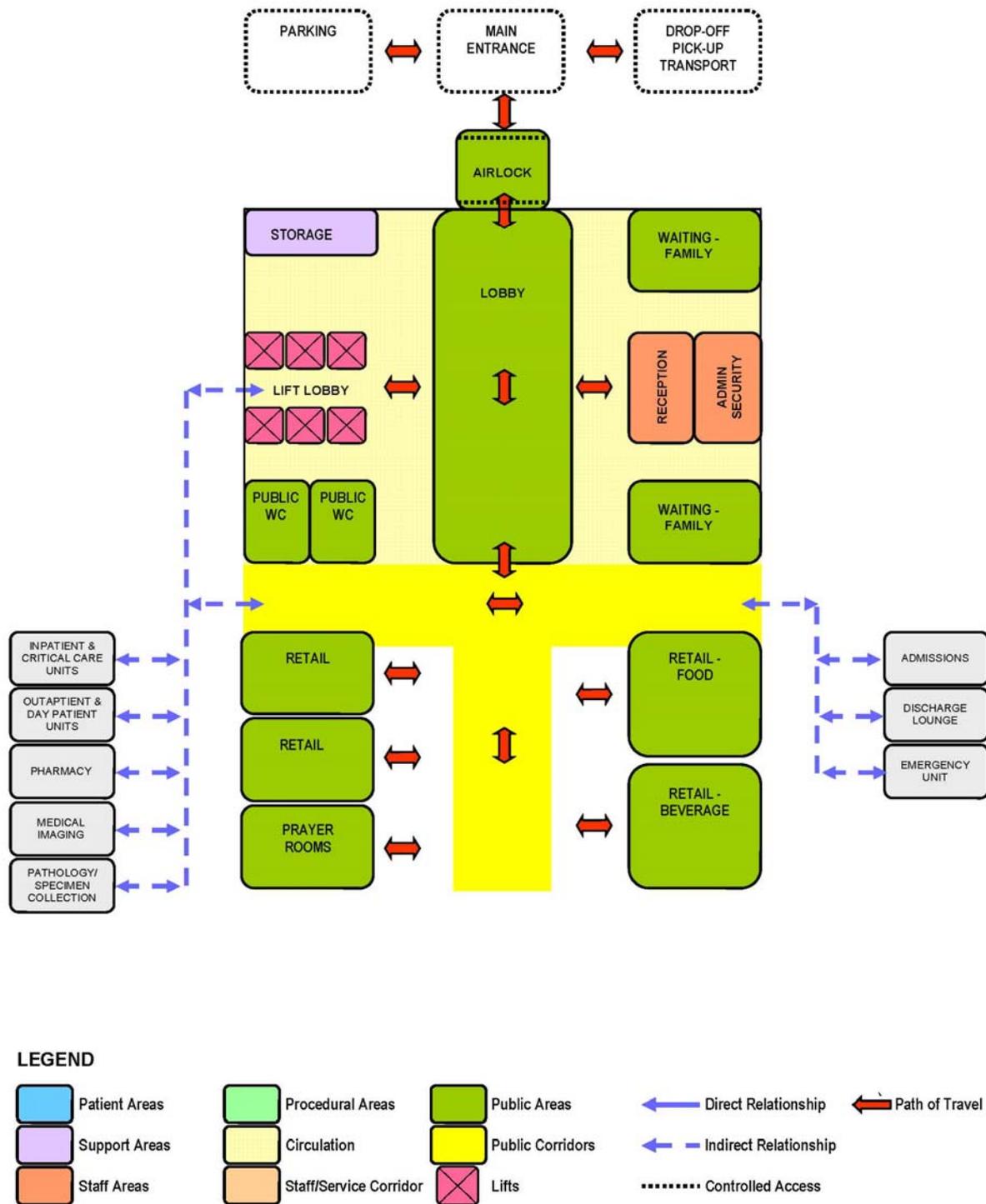


Figure 1 Functional Relationship Diagram:

3 Design

Entry Area

The Main Entrance shall be at grade level, sheltered from inclement weather, and accessible to the disabled.

Environmental Considerations

Acoustics

The Main Entrance may have a high level of ambient noise from visitors, waiting areas and ambulant traffic. Acoustic measures to reduce sound reverberation may include:

- Installation of sound absorbing surface materials to walls, floors and ceilings
- Provision of acoustic fabrics to waiting chairs
- Acoustic screen panels to waiting areas
- Sound absorbing fabric drapes to windows.

Provision of an augmented hearing loop service for patients and visitors with hearing impairment should be considered for enclosed Reception Desks.

Natural Light/ Lighting

Natural light is recommended to promote a pleasant environment for patients, visitors and staff entering the facility. Windows are highly desirable in waiting areas. Entry and waiting areas should be welcoming and well-illuminated with natural and artificial lighting.

General lighting at the Reception Desk and in staff work areas should be even, sufficient for illumination of the work area, avoid glare to computer screens and non-reflective.

Privacy

Acoustic privacy must be considered if confidential patient information is discussed at the Reception desk.

Interior Décor

Interior decor includes furnishings, style, colour, textures and ambience, influenced by perception and culture. The décor of the Main Entrance should be of a high standard, as it is an area of first impressions that will influence the expectations of people using the services.

Signposting

Signposting in the Main Entrance is an important consideration for ease of access through the area. Particular attention must be given to key areas including:

- External signs identifying the Main Entrance
- Internal signposting the Reception Desk and Enquiries area
- Signposting public amenities including Accessible Toilets; relevant guideline requirements for disability are to be applied
- Directional signs to major thoroughfare routes and lifts.

For additional information on signposting, refer to iHFG Part W - Wayfinding Guidelines.

Space Standards and Components

Accessibility

Design should provide ease of access for wheelchair bound patients and visitors at pathways and external ramps, Airlocks, Reception Desk and in Waiting areas.

Doors

Entry doors should be automatic where possible and be sized to provide access for wheelchairs and people with mobility aides entering and exiting concurrently.

Also refer to Part C – Access, Mobility, OH&S of these Guidelines.

Ergonomics/ OH&S

Design and dimensions of counters and workstations shall ensure privacy and security for patients, visitors and staff. Counter heights should enhance communication and minimise aggressive behaviour.

Refer to Part C – Access, Mobility, OH&S of these Guidelines for more information.

Size of the Unit

The size of the Main Entrance Unit is influenced by the size of the facility, the service complexity, the expected volume of patients and visitors through the area and the required ambience of the space.

Schedules of Accommodation have been provided in this guideline for a typical unit sized in a range of role delineation levels.

Safety & Security

A safety risk assessment should be undertaken in early planning. Security issues that may need to be addressed in the Main Entrance include:

- Unobstructed viewpoints for staff from counters to Waiting areas and the Main Entrance
- Duress alarms and emergency exit points to all counters
- Security to the Reception Desk to prevent unauthorised access behind counter areas
- Controlled after-hours access to prevent unauthorized entry and exit; external doors locked (preferably electronically) and monitored
- CCTV to Waiting areas and Cashier stations - if culturally acceptable
- Provision of emergency and safety lighting to drop-off and pick-up transport zones for after-hours use.

Finishes

Finishes should be selected with consideration for aesthetic appearance, acoustic properties, fire safety, life span and ability to easily clean and maintain infection control standards. Finishes selected should be able to withstand heavy traffic and sustained usage.

Refer to Part C of these Guidelines and Standard Components for more information on wall protection, floor finishes and ceiling finishes.

Fixtures, Fittings & Equipment

All furniture, fittings and equipment selections for the Main Entrance areas should be made with consideration to Ergonomic and Occupational Health and Safety (OH&S) aspects.

Counters

If a Cashier is located at the Reception Desk, an appropriate barrier should be provided to the Cashier's counter.

Refer to OH&S guidelines for appropriate depth of workstation counters suitable for staff working with computers. The counter top height shall be suitable for standing interactions with patients and visitors. Counters should be provided with disabled access by patients and visitors compliant with relevant codes and guidelines.

Refer also to Part C – Access, Mobility, OH&S of these Guidelines.

Window Treatments

Window treatments should be durable and easy to clean. Consideration may be given to tinted glass, reflective glass, exterior overhangs or louvers to control the level of natural lighting.

Building Service Requirements

Communications

The following IT/ Communications systems may be provided within the Main Entrance:

- Voice and data points for telephones and computers/ internet
- Wireless network access, particularly for Waiting areas
- Data provision for patient management systems at the Reception Desk, for patient enquiries
- EFTPOS connections to payment areas
- CCTV for security monitoring systems at entries, exits and waiting areas.

Duress Alarms

A duress alarm system should be designed into the Reception Desk, Enquiries stations and Cashier positions.

Heating, Ventilation and Air conditioning

The Main Entrance should be provided with air-conditioning for temperature and humidity control, ensuring patient, visitor and staff comfort.

Infection Control

Infection Control measures applicable to the Main Entrance will involve prevention of cross infection between staff, patients and visitors. Hand hygiene is an essential element and provision of medicated hand gel dispensers or hand wipes at the Reception and in circulation corridors is recommended.

For further information refer to Part D – Infection Control in these Guidelines.

4 Components of the Unit

Standard Components

The Main Entrance Unit will contain Standard Components to comply with details in the Standard Components described in these Guidelines. Refer to Standard Components Room Data Sheets and Room Layout Sheets.

Non-Standard Components

Non Standard rooms are identified in the Schedules of Accommodation as NS and are described below.

Entrance Lobby

The Entrance Lobby adjoins the Entry Airlock, Main Reception and Waiting areas. Convenient access to public amenities is required.

Key consideration in the Entrance Lobby are:

- Selection of floor finish to reduce the risk of slips and falls to visitors, patients and staff
- Provision of handrails where appropriate
- Storage areas for wheelchairs close to the entry doors
- Provision of good internal lighting
- Sufficient signposting and directional signs to identify key areas within the zone including Reception, Enquiries, Public Amenities, Lifts and circulation routes.

Internet Kiosk

Internet Kiosks may be included to provide persons waiting with facilities to use laptops, recharge mobile phones and access the internet. If provided, the internet Kiosks should be located conveniently to Waiting areas.

Internet Kiosks will require:

- Bench with seating
- Power and USB connections to each seated station for charging mobile phones
- Internet connections or wireless internet to the entire zone

Retail Areas

Retail areas located within the Main Entrance may be provided as modular uniform areas or sized according to the retail outlet requirements and service provided. Retail areas should be located along circulation routes with good public access.

Considerations for Retail areas include:

- Security features such as lockable perimeter doors, CCTV surveillance
- Signage to shop fronts
- Provision for display of wares
- Mechanical, Electrical and Hydraulic services to be provided according to type of retail store and equipment located within the space.

5 Schedule of Accommodation

Main Entrance Unit

ROOM/ SPACE	Standard Component Room Codes					RDL 3 Qty x m ²	RDL 4 Qty x m ²	RDL 5/6 Qty x m ²	Remarks
Entry Areas									
Airlock - Entry	airle-12-i similar					1 x 12	1 x 15	1 x 25	Size according to project requirements
Entrance Lobby	NS					1 x 30	1 x 50	1 x 150	Size according to project requirements
Bay - Wheelchair Park	bwc-i bwc-8-i					1 x 4	1 x 4	1 x 8	
Reception Area									
Reception/ Clerical	recl-12-i recl-15-i recl-20-i					1 x 12	1 x 15	1 x 20	
Office - Shared	off-2p-i off-3p-i off-4p-i					1 x 12	1 x 15	1 x 20	Administrative support, switchboard
Public Areas									
Waiting	wait-10-i wait-25-i wait-50-i					1 x 10	1 x 25	1 x 50	
Waiting - Family	wait-25-i wait-50-i					1 x 25	1 x 50	2 x 50	May have separate Family/ Female Waiting
Internet Kiosk	NS					1 x 2	1 x 5	2 x 5	Optional
Retail Areas									
Bay-ATM	batm-2-i batm-6-i					1 x 2	1 x 2	2 x 6	Optional
Coffee Kiosk	NS					1 x 15	1 x 20	1 x 30	
Florist	NS					1 x 15	1 x 20	1 x 30	
Gift Shop/ Newsagent	NS					1 x 15	1 x 20	1 x 30	
Optical Outlet	NS						1 x 20	1 x 30	
Retail Pharmacy	NS						1 x 20	1 x 30	
Sub Total						154.0	281.0	545.0	Sub Total includes Retail Areas
Circulation %						10	10	10	
Area Total						169.4	309.1	599.5	Total includes Retail Areas

Note the following:

- Areas noted in Schedules of Accommodation take precedence over all other areas noted in the FPU.
- Rooms indicated in the schedule reflect the typical arrangement according to the Role Delineation.
- Exact requirements for room quantities and sizes will reflect Key Planning Units identified in the Service Plan and the Operational Policies of the Unit.
- Room sizes indicated should be viewed as a minimum requirement; variations are acceptable to reflect the needs of individual Unit.
- Office areas are to be provided according to the Unit role delineation and number of endorsed full time positions in the unit.

6 Future Trends

The future design of Main Entrance areas will be influenced by:

- Technological advances with wayfinding systems and signposting with provision of electronic and interactive wayfinding systems; these may also have an impact on staffing levels at enquiry stations
- Expansion strategies for the facility; as facilities expand the number of entry areas to the building may increase; connection to key functional areas must be maintained
- Changes to security arrangements and enhancements to monitoring systems; an increasing demand for security may see the introduction of tighter controls at all entry and exit points.

7 Further Reading

In addition to iHFG Sections referenced in this FPU, i.e. Part C- Access, Mobility, OH&S, Part D - Infection Control and Part W - Wayfinding Guidelines, readers may find the following helpful:

- ADA Standards for Accessible Design 2010 (US), refer to website https://www.ada.gov/regs2010/2010ADASTandards/2010ADASTandards_prt.pdf
- Australasian Health Facility Guidelines, Part B Health Facility Briefing and Planning, 0430 - Front of House Unit, Rev 6, 2016; refer to website www.healthfacilitydesign.com.au
- Guidelines for Design and Construction of Hospitals and Outpatient Facilities; The Facility Guidelines Institute (US), 2014 Edition; refer to website www.fgiguideines.org
- Health Building Note 00-04 Circulation and communication spaces, Department of Health (UK), 2013 refer to https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/187026/Health_Building_Note_00-04_-_Circulation_and_communication_spaces_-_updated_April_2013.pdf
- Wales/NHS (UK), Health Building Note 51 Accommodation at the main entrance of a district general hospital, 1991; refer to website <http://www.wales.nhs.uk/sites3/Documents/254/HBN%2051.pdf>
- Wales/NHS (UK) HTM 63 Wayfinding, DH (UK), 2005, refer to <http://www.wales.nhs.uk/sites3/Documents/254/Wayfinding2nded2005.pdf>



The International Health Facility Guidelines recommends the use of HFBS “Health Facility Briefing System” to edit all room data sheet information for your project.

HFBS provides edit access to all iHFG standard rooms, and departments, and more than 100 custom report templates.

HFBS Health Facility Briefing System



Briefing Module

The Health Facility Briefing System (HFBS) has numerous modules available via annual subscription. It suits healthcare Architects, Medical Planners, Equipment Planners Project Managers and Health Authorities.

Use the HFBS Briefing Module to quickly drag in health facility departments or pre-configured room templates from the iHFG standard, edit the room features such as finishes, furniture, fittings, fixtures, medical equipment, engineering services. The system can print or download as PDF more than 100 custom reports including room data sheets, schedules, and more...

To learn more about the HFBS web-based Healthcare Briefing and Design Software and to obtain editable versions of the “Standard Components” including Room Data Sheets (RDS) and Room Layout Sheets (RLS) offered on the iHFG website, signup for HFBS using the link below.

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