

1 Introduction

This document, consisting of several volumes and their respective appendices, represents the International Health Facility Guidelines minimum requirements for the Design and Construction of various types of Health Facilities and for the prequalification of Design Consultants.

Throughout this document, the requirements set out are referred to as the “Guidelines” or “these Guidelines”.

The Guidelines consist of several volumes, as outlined below:

- Part A - Administrative Provisions
- Part B - Health Facility Briefing and Planning
- Part C - Access, Mobility, OHS and Security
- Part D - Infection Prevention and Control
- Part E - Building Services and Environmental Design

Part A - Administrative Provisions

This section outlines the licensing process for Health Facilities and the prequalification process for Design Consultants. Part A basically sets out the different processes whereas Parts B to E provide the design tools to design fully compliant Health Facilities:

- Approval Process – The five step approval process is explained in detail, including the validity of the interim approvals and the deliverables for each submission.
- Standards and Guidelines – All Standards and Guidelines are listed for both the Health Planning and Engineering disciplines.
- Prequalification – Provides all requirements to become prequalified and explains the process in detail.

Part B - Health Facility Briefing and Planning

This chapter includes all Architectural and Health Facility Planning Guidelines including:

- Planning.
- Role Delineation Level Guide (RDL).
- Individual Functional Planning Units (FPU's).
- Required Rooms and Areas by RDL and FPU.
- Functional Relationships.
- Typical Room Layout Sheets (RLS) for Standard Components.
- Room Data Sheets (RDS) for Standard Components.

Part C - Access, Mobility, OHS and Security

Part C includes the over-riding requirements for Access, Mobility, OHS and Security which include such considerations as corridor widths, slip resistance of floors, need for natural light, ergonomic guides and other safety requirements. These are focused on health projects unlike other generalised standards and guidelines such as those used for disability access or fire evacuation. Where there is a conflict with other standards, the most onerous standard will need to be adhered to.

Part D - Infection Prevention and Control

This section incorporates the requirements for infection control. Having a separate section for these features prevents the need to re-state these requirements many times, in the context of each department.

Part E - Building Services and Environmental Design

Part E focuses on the engineering systems and environmental settings such as Temperature range, humidity control, air changes per hour, size and type of lifts, acceptable methods of hot water reticulation, ESD etc.

1 The Purpose of the Guidelines

These Guidelines do not represent the ideal or best standards; neither do they cover management practices beyond the influence of design. The main objective of these Guidelines is to:

- Establish the minimum acceptable standards for Health Facility Design and Construction;
- Maintain public confidence in the standard of Health Care Facilities;
- Determine the basis for the approval and licensing of hospitals;
- Provide general guidance to designers seeking information on the special needs of typical Health Facilities;
- Promote the design of Health Facilities with due regard for safety, privacy and dignity of patients, staff and visitors;
- Eliminate design features that result in unacceptable practices; and
- Eliminate duplication and confusion between various Standards and Guidelines.

In many instances it may be desirable to exceed minimum requirements to achieve optimum standards. Designers, operators and applicants for Health Facilities are encouraged to innovate and exceed these requirements wherever possible.

These Guidelines have been compiled for IHFG (International Health Facility Guidelines). Many existing International Guidelines have been referenced in these Guidelines, especially in Part E. However, the specific and unique requirements of the local Health Authority are clearly set out and these will over-ride any other Guidelines.

These Guidelines place emphasis on achieving Health Facilities that reflect current health care functions and procedures in a safe and appropriate environment at a reasonable facility cost.

2 Disclaimer

Although the quality of design and construction has a major impact on the quality of health care, it is not the only influence. Management practices, staff quality and regulatory framework potentially have a greater impact. Consequently, compliance with these Guidelines can influence but not guarantee good healthcare outcomes.

The local Health Authority will endeavour to identify for elimination any design and construction non-compliances through the review of design submissions and through pre-completion building inspections, however, the responsibility for compliance with the Guidelines remains solely with the applicant.

Any design and construction non-compliances identified during or after the approval process, may need to be rectified at the sole discretion of the local Health Authority at the expense of the applicant.

Therefore, the local Health Authority, its officers and the authors of these Guidelines accept no responsibility for adverse outcomes in Health Facilities even if they are designed or approved under these Guidelines.

Compliance with these Guidelines does not imply that the facility will automatically qualify for accreditation. Accreditation is primarily concerned with hospital management and patient care practices, although the design and construction standard of the facility is certainly a consideration.



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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- ✓ iHFG Room Data Sheets and Departments are instantly editable in the HFBS software available online.
- ✓ You can access hundreds of report templates to print your iHFG room data in HFBS.
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