Part B – Health Facility Briefing & Design

155 Main Entrance Unit

iHFG

International Health Facility Guidelines

2026

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155 Main Entrance Unit

1 Executive Summary

This Functional Planning Unit (FPU) covers the requirements of the Main Entrance Unit. The primary function of this Unit is to provide a welcoming first point of contact for patients and visitors to the healthcare facility and assist in directing and processing the throughput of hospital visitors. Also integral to the function of this unit is the ensuring of a safe entry and exit point to the hospital.

Services provided to support staff, patients and visitors attending the facility include a drop-off and pick-up area, reception, concierge/ information, public amenities, waiting area, multi-faith space and an outdoor cultural space for larger groups to gather.

The Functional Relationship Diagram indicates the ideal relationships with other key departments such as the Admissions and Discharge lounge, Emergency Unit, Inpatient and Outpatient Units and Pharmacy. Internal relationships with key areas include retail spaces, reception and security.

Design considerations address a variety of essential factors including acoustics, natural light, interior décor and wayfinding. Wayfinding strategies and signage are critical components of the Main Entrance Unit as this provides patients and visitors guidance and direction through the facility.

The typical Schedule of Accommodation (SOA) is provided using Standard Components (typical room templates) and quantities for the areas. The SOA is presented for facilities of all RDLs from 2 to 6.

Refer to the further reading materials at the end of this FPU for supporting documentation.

2 Introduction

The Main Entrance Unit provides for the following functions:

- Entry to the hospital
- Drop off and collection area
- Patient reception
- Patient and visitor enquiries/ information/ concierge
- Wayfinding to hospital units
- Waiting areas and Multi-faith and cultural spaces

3 Functional and Planning Considerations

Operational Models

The Main Entrance Unit may incorporate a number of Retail Components for the convenience of Visitors and Outpatients. Such facilities may be either managed directly by the facility or be outsourced as rental space and operated by external providers subject to applicable local authority regulations and licensing requirements.

The Retail Components may include:

- Coffee Shop
- Coffee Kiosk
- Gift Shop
- Retail Shop
- Outpatient Pharmacy
- Minimart
- Optics Store
- Vending Machines

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 the arrival of admissions) to evening. After-hours, access may be arranged through the Emergency Unit accompanied by security according to the Operational Policies of the facility.

Planning Models

Location

The Main Entrance Unit is ideally located on the ground level, easily visible and accessible from the carpark 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 and 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 multi-faith spaces 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
  - Self Registration Booth
- Public Areas
  - Waiting Areas, which may be shared with Admissions and other adjacent hospital units
  - Play area for children
  - Access to Public Amenities including toilets, baby change, telephone, public transport, vending machines, cultural and multi-faith spaces
- 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 average amount of people arriving and exiting, and cater for people with disabilities.

Refer to Standard Component 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. Seating should be provided for the elderly and people with mobility and accessibility needs. Size will be dependent on the number of vehicles expected in the vicinity. There should be one way direction of traffic passing through the drop-off zone.

Entrance Lobby

The Entrance lobby serves as the primary arrival point for patients and visitors entering the facility. It connects them to internal services through the Reception area and provides essential functions such as waiting areas and public amenities.

The size and layout of the Lobby will be determined by its' functional requirements, expected volume of visitors to be accommodated, and its' overall impact on the facility's operations. It should provide direct access to main circulation corridors and lifts providing thoroughfare to hospital units and ideally be located near vehicle drop-off and pick-up areas.

Discreet security features provided in this area will be integrated to ensure safety without being intrusive. These may include closed circuit television (CCTV), a security room, and controlled access points.

Clear, highly visible signage and wayfinding systems, including electronic directories, are essential to assist navigation within the facility.

Reception Areas

Reception Desk

Reception may also be referred to as: Information, Concierge or Welcome Station.

The Reception Desk should have clearly visible signage as it is the primary enquiry point for visitors and patients. Its design may be open plan, partially enclosed or fully enclosed, depending on the Operational Facility Plan. Security features such as duress alarms should be included in the design.

The Reception Desk may also support a range of personnel, such as cashiers, security staff, and volunteers, to facilitate enquiries and assist with visitor needs. A Hearing augmentation system should be considered to enable patients and visitors with hearing impairments to communicate with staff.

Refer to Standard Components Reception/ Clerical for additional details.

Self-Registration Booth

A self-registration booth at the main entrance provides patients with a convenient, self-service point to check in and register for appointments or hospital services without requiring assistance from reception staff. Key functions include:

- Patient identification and verification
- Appointment check-in and confirmation
- Insurance or payment information capture, where applicable
- Updating existing patient information
- Issuing or printing queue numbers, directions, appointment details, or registration receipts
- Integration with the hospital information system and electronic medical record
- Providing multilingual and accessible interfaces for patients with different needs
- Reducing queues and administrative workload at the main reception

Public Areas

Waiting Areas

Waiting areas will require comfortable seating for a range of occupants including children, elderly and disabled patients and visitors. 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 retail outlets. The signage for public amenities should be highly visible, legible and easily understood by the general public, therefore, the use of pictograms is recommended. All public amenities must have accessible options for people with disabilities. When planning public amenities, the social, environmental and physical needs of all visitors to the facility should be considered.

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 are essential for 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. It will also be influenced by the location and proximity to other retail areas.

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

Pharmacy and Florist. If retail spaces are provided as tenancy spaces, then the operators may require a separate company registration and license to operate the facility.

Coffee Shop

A coffee shop can be provided as a fully self-contained component, operated directly by the facility or an external tenant. The Coffee Shop seating may be within the boundaries of the tenancy or merged with the waiting area of the Main Entrance Unit (or both). Coffee Shop may also spread into an adjacent courtyard with external seating.

The minimum components of the Coffee Shop are:

- Seating- This may be in a variety of types such as chairs, continuous padded seats, and stools.
- Display counter- This may include a display of cold or hot items and cashier.
- Preparation counter or room- For the preparation of orders such as warming, cutting, plating and adding various elements such as cutlery, napkins, drinks etc.
- Storage- This may include a separate storeroom or cupboard. Waste holding areas may be provided as a discrete space within a room or cupboard, separated by doors.
- Hand wash bay- with convenient access from the serving and preparation area.

The Coffee Shop must comply with all the requirements of Food premises governed by the responsible authorities.

Optionally, the Coffee Shop may be linked to the Catering function of the Healthcare facility in several possible ways:

- Receive partly or fully prepared food from the main Catering Unit of the facility
- Allow ordering by the patients based on their dietary permissions
- Provide a delivery service to Staff at their place of work
- Provide a delivery service to the Patients, with Nursing monitoring and consent

The Coffee Shop may be operated whenever the Main Entrance unit is open.

The Coffee Shop can also be provided as a Cold Shell, to be fitted out by the outsourced tenant with their own separate application and approval.

Coffee Kiosk

A Coffee Kiosk refers to a mobile cart incorporating display, bench and storage space for the purpose of preparing drinks, then offering it with a variety of cold items such as muffins, donuts, fruit and nuts. Unlike a Coffee Shop, a Coffee Kiosk does not have its own separate seating but relies on the seating provided within the Main Entrance Unit. It may also operate a take-away model.

All the elements of storage, preparation and disposal for drinks and cold food are contained within a custom-designed Coffee Kiosk. The Kiosk only requires connection to electricity.

Coffee Kiosk is typically parked on one edge of the Main Entrance Unit facing the open plan areas. The Coffee Kiosk requires a feature for locking the goods in lockable cabinets and displays for the period of time that is not operating.

Gift Shop

Gift Shop is a common type of retail shop that is sometimes provided within the Main Entrance unit. Visitors may purchase such gifts to present to the patients. This may include well-wishing cards, flowers, small items, children's toys, magazines, drinks, chocolate etc.

The typical area for such a gift shop is 12 m2 but there is no limit on the size of such a shop within these Guidelines.

The Gift Shop can also be provided as a Cold Shell, to be fitted out by the outsourced tenant with their own separate application and approval.

Minimart

This is a type of compact grocery store where a variety of common items can be purchased by the visitors, staff and outpatients. As an option the Minimart can also be merged with the Coffee Shop to form one tenancy component.
The items which may be offered by Minimart may include fruit and nut packs, bottled water and

drinks, hygiene products, pre-packaged food, candy, energy bars, cookies, fruit, milk products, cleaning products, phone credit, batteries and similar items.

Minimart may be designed as a separate room with access via a door. Alternatively, Minimart may be designed with an open front facing part of the Main Entrance Lobby and capable of being secured with a roller shutter, sliding or folding doors after hours.

The Minimart may incorporate a separate attached storeroom or rely solely on the displayed items and various lockable cabinets.

The Minimart can also be provided as a Cold Shell, to be fitted out by the outsourced tenant with their own separate application and approval.

Optics Store

In Hospitals and Outpatient Clinics which include Ophthalmology services it is common to include an Optics Store as a Retail Component off the Main Entrance Unit.

These Optics stores perform the same role as they do in shopping malls. They provide prescription glasses, sunglasses and a variety of related small items such as cases, cleaning equipment etc.

An Optics Store may be designed as a fully enclosed plan or a room with open front which can then be secured with a roller shutter, sliding or folding doors after hours.

The Optics Store may incorporate a secure storage room or rely only on lockable cabinets.

There is no minimum or maximum area for an Optics Store. The Optics Store can also be provided as a Cold Shell, to be fitted out by the outsourced tenant with their own separate application and approval.

Vending Machines

Vending Machines are a common feature of Lobbies in many building types including healthcare facilities. Vending machines may be owned and serviced by an outsourced contractor. They may be exclusively branded for a range of products such as Coffee or a range of products such as biscuit and chocolate packs from various vendors.

Vending machines are to be located within discrete recessed bays away from the direct traffic routes. Vending machines which incorporate chilled drinks may require additional free space so that air can be circulated around the unit. The typical minimum depth of a vending machine bay is 1 meter.

In healthcare facilities, ideally the vending machines should not dispense items which are regarded as un-healthy.

Vending machines should not be in enclosed rooms or in places which cannot be easily observed by passing people, in order to discourage vandalism.

The exact requirements of vending machines can be obtained from the machine vendors and contractors.

Functional Relationships

External

The Main Entrance will have a strong external functional relationship with:

- Vehicle set down and collection areas including public transport stops
- Car parking areas
- Airlock between the Main Entrance and Lobby
- An Outdoor Cultural Space for larger groups to gather

Internal

Within the Main Entry, the following internal relationships are important:

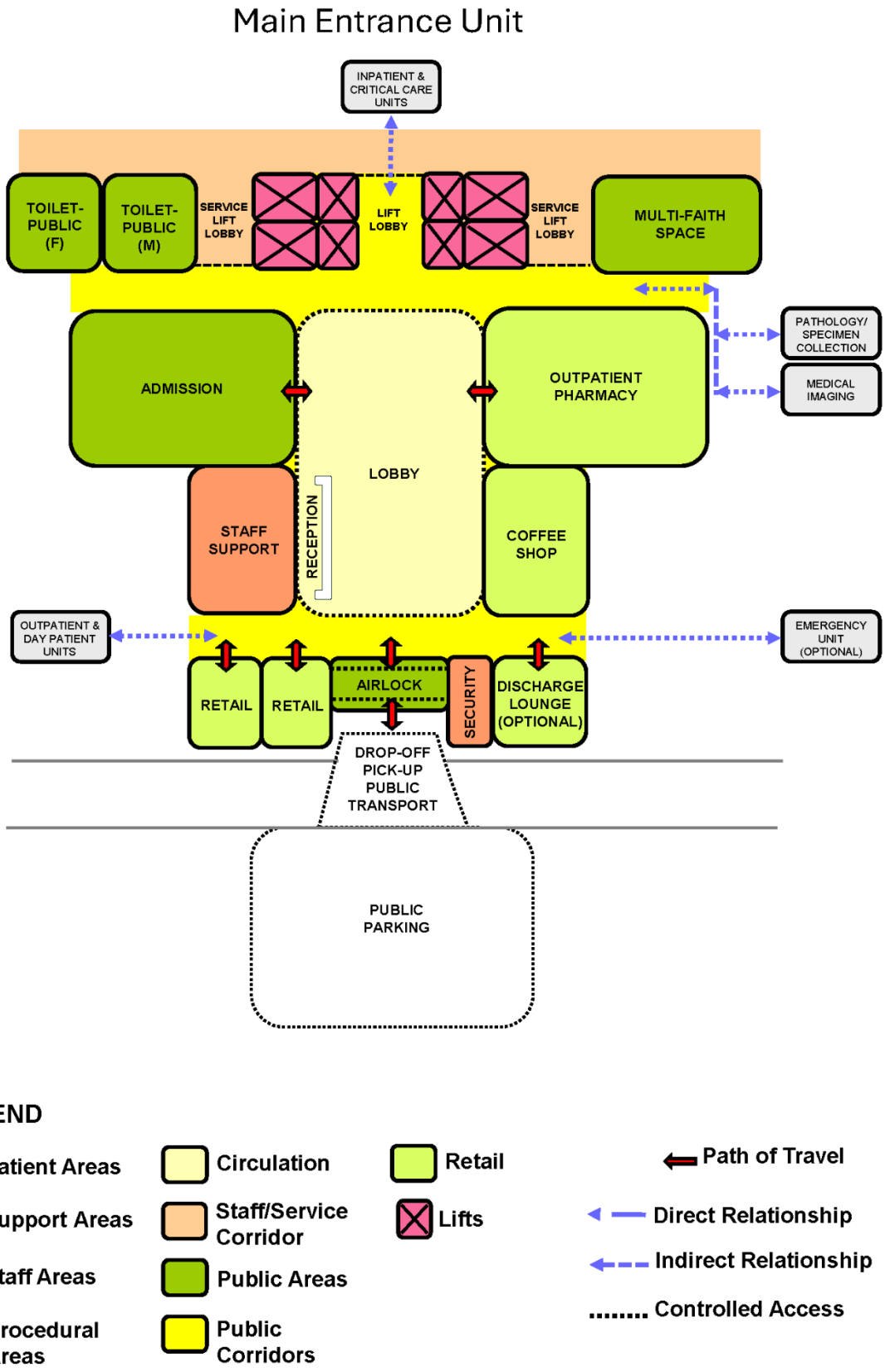
- The Reception Desk should have a direct view of Main Entry/ Waiting Areas for patient/ visitor enquiries and security issues
- The Admissions Unit and Discharge Lounge areas may be located in adjacent areas for patient and visitor convenience
- Public Amenities should be located in the area or in close proximity

- Lifts and corridors should be visible, with clear signage and be 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 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



4 Design Considerations

General

The Main Entrance should be at a Ground Level, sheltered from inclement weather and accessible to the patients or visitors with disabilities.

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 be applied in:

- All Imaging Rooms
- Interview and Meeting Rooms
- Offices and Reporting Areas
- Multi-faith space

Additional acoustic privacy considerations include:

- Waiting Areas should not be located close to Offices, Meeting and Interview Room/s
- Staff Room/s should not be located close to Public and Waiting Areas

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

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 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 and finishes which are to be designed to withstand high traffic and regular cleaning. The décor of the Main Entrance should be of a high quality and present a safe, welcoming and non-institutional environment as it provides a first impression and influences the experience of patients, visitors and staff.

Interior design and décor should integrate focal points and wayfinding strategies and incorporate culturally sensitive artwork encouraging inclusion and a connection to the community.

Wayfinding

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

- External signs identifying the Main Entrance
- Internal signage for the Reception Desk and Enquiries area
- Signage for public amenities including Accessible Toilets. Relevant guideline requirements for access and mobility are to be applied

- Directional signs to major thoroughfare routes and lifts.

Wayfinding may include digital directory boards and maps and/ or information kiosks to provide self-assisted directions for patients and visitors, reducing the requirements on staff to provide assistance.

Space Standards and Components

Accessibility

Design should provide ease of access for wheelchair users at pathways and external ramps, Airlocks, Amenities, Reception Desk and Waiting areas. The main entry should be designed to direct visitors towards the reception and waiting areas, with a clear view of the concierge or information desk and digital directory if available.

Doors

Entry doors should be automatic where possible and be sized to provide access for wheelchair users and people with mobility aides who may be concurrently entering and exiting the facility. Doors should have a full breakout function in the event of a power failure or emergency.

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

Ergonomics/ OH&S

The design and dimensions of counters and workstations should ensure privacy and security for patients, visitors and staff. Counter heights and design should promote safe, effective and appropriate communication.

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, service complexity, 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

The Main Entrance Unit shall provide a safe and secure environment for patients, staff and visitors, while remaining a non-threatening and supportive atmosphere conducive to optimal healthcare outcomes.

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 unauthorised entry and exit; external doors locked (preferably electronically) and monitored
- CCTV to Waiting areas and Cashier stations
- Provision of emergency and safety lighting to drop-off and pick-up transport zones for after-hours use.

Finishes

Internal finishes including floor, walls, joinery and ceilings should be suitable for heavy traffic and sustained usage while promoting a pleasant environment for patient, visitors and staff.

The following factors should be considered:

- Aesthetic appearance
- Acoustic properties
- Durability and resilience
- Fire safety

- Occupational health and safety
- Ease of cleaning and compliant with infection control standards

Floor Finishes

Within the airlock, a fixed entry mat may be installed to prevent soil and contaminants from being brought into the hospital environment and to prevent risk of slips and falls. In other areas, slip resistant floor finishes are to be selected that are durable for heavy traffic areas and able to withstand regular cleaning without compromising the quality of the finish and slip rating.

Wall Finishes

Wall finishes should be durable, cleanable, safe and non-porous while providing a pleasant atmosphere. In addition to high performance paint finish, vinyl wall covering, resinate feature walls, fire-rated laminate panels and tiles are acceptable.

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) requirements.

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.

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 countertop height shall be suitable for standing interactions with patients and visitors. Counters should be provided with access for patients and visitors with disabilities and compliant with relevant codes and guidelines.

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

Building Service Requirements

Mechanical Services (HVAC)

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

Refer to Part E - Engineering Services in these guidelines and to the Standard Components, RDS and RLS for further information.

Electrical Services

It is essential that equipment required for everyday functions are connected to the back-up power supply including lighting, computers, duress alarms, telephones, information kiosks (if provided) and surveillance systems. Food outlets may also require additional electrical services to support specific equipment required for their services.

Information Technology (IT) and Communications

The Main Entrance Unit requires reliable and effective IT / Communications for the efficient operation of the service. The IT design should address:

- Booking, appointment and queuing systems
- Patient/ clinical information systems and electronic records
- DECT (Digital Enhanced Cordless Telecommunications)
- Wi-Fi access and mobile device charging stations
- Data connections for electronic payment systems
- CCTV for security monitoring systems at entries, exits and waiting areas
- Hearing augmentation systems

- Public announcement systems
- Digital signage

Duress Alarms

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

Infection Control

Infection Control measures applicable to the Main Entrance will involve prevention of cross infection between staff, patients and visitors. Personal Protective Equipment (PPE) availability may be required depending on the Operational Policy of the facility.

Antiseptic Hand Rubs

Antiseptic hand rub dispensers should be located so they are readily available for use at Reception, entry points, circulation corridors and in high traffic areas.

The placement of antiseptic hand rubs should be consistent and reliable throughout facilities. Antiseptic hand rubs are to comply with Part D - Infection Control, in these guidelines.

5 Components of the Unit

Standard Components

Standard Components are typical rooms within a health facility, each represented by a Room Data Sheet (RDS) and a Room Layout Sheet (RLS).

The Room Data Sheets are written descriptions representing the minimum briefing requirements of each room type, described under various categories:

- Room Primary Information; includes Briefed Area, Occupancy, Room Description and relationships, and special room requirements.
- Building Fabric and Finishes; identifies the fabric and finish required for the room ceiling, floor, walls, doors, and glazing.
- Furniture and Fittings; lists all the fittings and furniture typically located in the room; Furniture and Fittings are identified with a group number indicating who is responsible for providing the item according to a widely accepted description as follows:

Group	Description
1	Provided and installed by the Builder/ Contractor
2	Provided by the Client and installed by the Builder/Contractor
3	Provided and installed by the Client

- Fixtures and Equipment; includes all the serviced equipment typically located in the room along with the services required such as power, data and hydraulics; Fixtures and Equipment are also identified with a group number as above indicating who is responsible for provision of the items.
- Building Services; indicates the requirement for communications, power, Heating, Ventilation and Air conditioning (HVAC), medical gases, nurse/ emergency call and lighting along with quantities and types where appropriate. Provision of all services items listed is mandatory.

The Room Layout Sheets (RLS's) are indicative plan layouts and elevations illustrating an example of good design. The RLS indicated are designed to satisfy these Guidelines. Alternative layouts and innovative planning shall be deemed to comply with these Guidelines provided that the following criteria are met:

- Compliance with these Guidelines
- Minimum floor areas as shown in the schedule of accommodation
- Clearances and accessibility around various objects shown or implied
- Inclusion of all mandatory items identified in the RDS

The Main Entrance Unit contains 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 those which have not yet been standardised within these guidelines. As such there are very few Non-standard rooms. These are identified in the Schedules of Accommodation as NS and are separately covered below.

Entrance Lobby

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

Key considerations 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 sufficient internal lighting
- Effective wayfinding and directional signs to identify key areas within the zone including Reception, Enquiries, Public Amenities, Lifts and circulation routes
- Sufficient Power and USB connections in seated waiting areas for charging mobile phones
- Internet connections or wireless internet to the entire zone

Self-Registration Booth

The Self Registration Booth provides a self-service facility for patient identification, registration, appointment check-in, information updates, and wayfinding, integrated with the hospital information system to streamline patient access and reduce reception queues. Considerations include:

- Physical accessibility with appropriate reach height for wheelchair bound patients and tall patients, suitable clear floor space in front of the kiosk and unobstructed approach path
- Can be used by low vision users, with a multilingual interface and touch panels that can be used with gloves
- Integration with the health facility EMR/ HIS system with secure session handling. Screen positioning and privacy screens shall prevent personal data from being viewed by others in the queue
- Shall be located within staff view for user assistance when required, provide sufficient queuing space to prevent bottlenecks and not block patient or public sightlines
- Can be disinfected frequently

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.

6 Schedule of Accommodation

The Schedule of Accommodation (SOA) provided below represents generic requirements for this unit. It identifies the rooms required along with the room quantities and the recommended room areas. The simple sum of the room areas is shown as the Sub Total. The Total area is the Sub Total plus the circulation percentage. The circulation percentage represents the minimum recommended target area for internal corridors in an efficient and appropriate design.

Within the SOA, room sizes are indicated for typical units and are organised into the functional zones. Not all rooms identified are mandatory therefore, optional rooms are indicated in the Remarks. These guidelines do not dictate the size of the facilities, therefore, the SOA provided represents a limited sample based on assumed unit sizes. The actual size of the facilities is determined by Service Planning or Feasibility Studies. Quantities of rooms need to be proportionally adjusted to suit the desired unit size and service needs.

The table below shows alternative SOAs for Role delineations from RDL 2 to 6 of varying sizes.

Any proposed deviations from the mandatory requirements, justified by innovative and alternative operational models may be proposed within the departure forms included in Part A of these guidelines for consideration by the health authority for approval.

Main Entrance Unit

Room/ Space	Standard Component Room Codes	RDL 2 Qty x m2			RDL 3 Qty x m2			RDL 4 Qty x m2			RDL 5/6 Qty x m2			Remarks
Entry Areas														
Airlock - Entry	airle-10-i similar	1	x	10	1	x	12	1	x	15	1	x	25	Size according to project requirements
Entrance Lobby	NS	1	x	20	1	x	30	1	x	50	1	x	150	Size according to project requirements
Self-Registration Booth	NS				4	x	2	4	x	2	4	x	2	Optional
Bay - Wheelchair Park	bwc-i bwc-8-i	1	x	4	1	x	4	1	x	4	1	x	8	
Security Station	NS				1	x	5	1	x	5	1	x	5	Recommended
Discharge Lounge	Inpt-15-i similar							1	x	15	1	x	20	Optional
Reception Area														
Reception/ Clerical	recl-10-i similar recl-15-i recl-20-i	1	x	10	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	12	1	x	16	1	x	20	Administrative support, switchboard
Public Areas														
Waiting	wait-10-i wait-20-i wait-25-i wait-50-i	2	x	10	2	x	20	2	x	25	2	x	50	Size of waiting areas can be modified to suit the demand of the facility
Toilet - Public	wcpu-3-i	2	x	3	4	x	3	6	x	3	8	x	3	No. of toilets as required by local building code requirements
Toilet - Accessible	wcac-i	1	x	6	1	x	6	1	x	6	1	x	6	Male/ Female separation where required. No. of toilets as required by local building code requirements
Multi-Faith Room	prear-20-i similar	1	x	15	1	x	25	1	x	35	1	x	45	Optional. Area and associated components shall be provided in accordance with the functional requirements of the facility
Retail Areas														**Optional**
Bay - ATM	batm-2-i batm-6-i	1	x	2	1	x	2	1	x	2	2	x	6	Optional
Bay - Vending	bvm-3-i bvm-5-i	1	x	3	1	x	3	1	x	3	1	x	5	Optional
Coffee Kiosk	NS	1	x	15	1	x	15	1	x	20	1	x	30	Optional
Retail Areas	NS				1	x	15	1	x	20	1	x	30	Optional. Quantity & area as per corporate plan
Outpatient Pharmacy	NS							1	x	20	1	x	30	Optional
Sub Total		**88**			**133**			**179**			**358**			
Circulation %		**10**			**10**			**10**			**10**			
Area Total		**97**			**147**			**197**			**394**			

Please note the following:

- Areas noted in Schedules of Accommodation take precedence over all other areas noted in the Standard Components
- Rooms indicated in the schedule reflect the typical arrangement according to the sample bed numbers
- All the areas shown in the SOA follow the '4 Floor Area Measurement Methodology, Definitions and Diagrams' as described in these Guidelines. Refer to Part B, Complete Part
- Exact requirements for room quantities and sizes will reflect Key Planning Units (KPU) identified in the Clinical 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

7 Future Trends

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

- Technological advances with signage, directory and wayfinding systems, these may also have an impact on staffing levels at enquiry stations
- The adoption of digital integration aligned with the smart hospital concept, such as the implementation of virtual check-in stations and self-service kiosks, which improves patient flow and reduces congestion at the main entrance.
- Expansion strategies for the facility; 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.
- Increase in front of house personnel and PPE to implement a stringent check-in process in the event of a pandemic

8 Further Reading

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

- International Health Facility Guideline (iHFG) www.healthdesign.com.au/ihfg
- The Facility Guidelines Institute (US), Guidelines for Design and Construction of Hospitals. Refer to website www.fgiguidelines.org
- The Facility Guidelines Institute (US), Guidelines for Design and Construction of Outpatient Facilities. Refer to website www.fgiguidelines.org
- ADA Standards for Accessible Design (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; refer to website https://www.healthfacilityguidelines.com.au/health-planning-units
- Health Building Note 00-04 Circulation and communication spaces, Department of Health (UK), refer to https://www.england.nhs.uk/publication/designing-stairways-lifts-and-corridors-in-healthcare-buildings-hbn-00-04/
- NHS (UK) Department of Health. Wayfinding. Refer to https://assets.publishing.service.gov.uk/media/5a75803740f0b6397f35eeb1/Wayfinding.pdf

9 Sample Plan

Please see overleaf.

ABBREVIATION LEGEND	
ACC	Accessible
ATM	Automated Teller Machine
F	Female
M	Male
MIN	Minimum
TOI	Toilet
WCH	Wheelchair

COLOR FILL LEGEND	
	Admin
	Pharmacy
	Public Circulation
	Retail
	Staff Circulation
	Support
	Vertical Circulation