

14.0 Day Surgery/ Procedure Unit

14.1 Introduction

14.1.1 Description

A Day Surgery/ Procedure Unit is where operative or endoscopic procedures are performed and admission, procedure and discharge occurs on the same date. It comprises one or more Operating Rooms, with provision to deliver anaesthesia and accommodation for the immediate post operative recovery of day patients.

The range of procedures that may be undertaken in a Day Surgery/Procedures Unit may include:

- Surgical procedures, particularly ENT, Dental, Plastic Surgery, Ophthalmology
- Endoscopy - gastrointestinal, respiratory, urology;
- Electroconvulsive Therapy (ECT) for psychiatric inpatients
- Day Medical Procedures including intravenous infusions and minor treatments

14.2 Planning

14.2.1 Operational Models

The range of options for a Day Surgery/ Procedure Unit may include:

- a stand alone centre, fully self contained
- a dedicated fully self-contained unit within a hospital
- a Unit collocated with a specialist clinical service such as Gastroenterology or Respiratory Medicine, within an acute hospital
- a Unit collocated with the Operating Unit with shared facilities.

If the facility is part of an Acute Care Hospital or other Medical Facility, services can be shared, as appropriate to minimise duplication.

14.2.2 Functional Areas

The Day Surgery/ Procedure Unit may consist of a number of Functional Zones:

- Entry/ Reception/ Administration and Waiting areas
- Perioperative Area (provides for admission on the day of surgery), including patient change areas, toilet and lockers
- Procedural Area
- Recovery Area (this may also include extended recovery areas where patients are discharged within 24 hours)
- Discharge Lounge
- Staff Amenities
- Day Medical Unit (if collocated).

ENTRY / RECEPTION/ WAITING AREAS

A covered entrance for picking up patients after surgery shall be provided. The Entry may be a shared Outpatient Facility and shall include:

- Reception and information counter or desk
- Waiting areas that allows for the separation of paediatric and adult patients, if organised Paediatric Services are provided
- convenient access to wheelchair storage
- convenient access to public toilet facilities
- convenient access to public telephones

ADMINISTRATIVE AREAS

General and individual offices shall be provided as required for business transactions, records



and administrative and professional staff. These shall be separate from public and patient areas with provision for confidentiality of records.

Enclosed office spaces shall be provided for:

- Administration and consultation
- Manager / Nurse Unit Manager as required

Offices are to comply with Standard Components.

CLINICAL RECORDS

A secure room shall be provided with provision for storage, recording and retrieval of clinical records. If geographically appropriate, and if the Day Procedures Unit is part of, or attached to, an acute hospital, the general clinical records facility might be used in lieu of a dedicated and separate room.

HOLDING AREA

A Holding Area may be provided where gowned patients enter after changing and wait for their procedure. Additional holding areas may be provided for seated patients before an operation or procedure. Such an area must have access to nurse call services.

The Pre-operative Holding area shall be provided with the following minimum requirements as appropriate to the proposed service:

- A patient trolley or patient seating
- Privacy screening
- Handbasins with liquid soap and paper towel fittings
- Patient nurse call/ emergency call buttons with pendant handsets and indicators
- Medical gases including oxygen and suction and power outlets to each bed

OPERATING/ PROCEDURES ROOMS

The design of the Operating / Procedure Rooms must allow for adequate space, ready access, free movement and demarcation of sterile and non sterile zones. Operating Rooms are to comply with Standard Components.

OPERATING ROOM/S FOR ENDOSCOPY

The number and operation of Operating Rooms for Endoscopy shall be as determined by the Service Plan.

Room size may vary, dependent upon:

- The use of video equipment
- Electrosurgical laser treatment
- Fluoroscopy
- Multiple endoscope activity
- Multiple observers
- The use of X-ray (image intensifying)

Where basic endoscopy is to be performed, the room size shall be no smaller than 36 m². Where video equipment is used the room size should be 42 m². Larger sizes, where possible, are recommended for flexibility and future developments. The ceiling height shall be 3000 mm.

Operating Rooms for Endoscopy shall be fitted out as for a Minor Operating Room, for example, it will be suitable for general anaesthetic with appropriate medical gases, power, lighting, air-conditioning and ventilation. Staff assistance call shall be provided. Consideration shall also be given to the special requirements of laser equipment

A clinical scrub up basin shall be provided outside the entrance to the Operating Room/s for Endoscopy.

Direct access to the Clean-up Room is recommended.



Impervious wall, floor and ceiling treatments are essential for ease of cleaning.

PATIENT CHANGE AREAS

Separate areas shall be provided where outpatients can change from street clothing into hospital gowns and be prepared for surgery, convenient to the Waiting Area. The patient change areas shall include Waiting Rooms and lockers. Design of Change Areas is to facilitate management of patient lockers, patient property and keys.

PERI-OPERATIVE UNIT

Where Day Procedures (day only surgical service) are provided within the same area as Inpatient Acute Surgery (shared facility), the design shall consider the need to separate the two distinct functions at the incoming side. The design shall also preclude unrelated traffic from the Day Procedures Unit and the Operating Unit.

PREPARATION ROOM

A Preparation Room may be required for patients undergoing certain procedures such as Endoscopy or Ophthalmology.

If included, the Preparation Room should include:

- Handbasin - Clinical
- Bench, and cupboards for setting up of procedures
- Adequate space for procedures equipment trolleys
- Examination couch
- Patient privacy screening

RECOVERY AREAS

In larger facilities it is often considered desirable to have a three stage recovery area. The first stage involves intensive supervision, the second stage has changing facilities in more casual surroundings and in the third stage, the patient is fully mobile and is awaiting discharge. Supervision of the patient is vital at each stage.

If Paediatric Surgery is part of the function, the Recovery Room shall provide for the needs of parents/attendants.

Recovery areas will require:

- Staff station with a centrally located resuscitation trolley
- Linen Bay
- Clean Utility
- Dirty Utility
- Store room

Stage 1 Recovery

The number of bed/trolley spaces in the Stage 1 Recovery Area will be dependent upon the nature of surgery or procedures performed as outlined in the Operational Policy and the proposed throughput. As a minimum, 1.5 bed/trolley spaces per Operating Room shall be provided.

Stage 2 Recovery

Stage 2 Recovery Room may be provided as required to accommodate:

- Patients who have regained consciousness after anaesthesia but require further observation
- Patients who have undergone procedures with local anaesthetic.



The patient is required to remain under observation until ready for discharge.

Stage 2 Recovery areas can be further described as follows:

- Stage 2A: Provision of patient trolley bays Patients in this area may recover in recliners/chairs. A ratio of two chairs (minimum) to each Operating/ Procedure room, in addition to the above bed requirement, is considered appropriate.
- Stage 2B: Provision of patient recliners. This area is also referred to as a Discharge Lounge or Stage 3 Recovery. Patients are ambulant, dressed and may await discharge in comfortable chairs. The lounge will require access to patient refreshment facilities and patient toilets.

External windows are to be provided in Stage 2 Recovery

Minimum space requirement is three bed/ trolley/ chair spaces per Room and some comfortable seating for ambulant patients.

14.2.3 *Functional Relationships*

EXTERNAL

The Day Surgery/ Procedure Unit will have functional relationships with the following units

- Operating Suite;
- Pre-Admission Clinic;
- Transit Lounge.

AMBULANCE ACCESS

A discreet pick-up point, preferably under cover, shall be provided for the transfer of patients to and from the Day Surgery/ Procedure Unit.

CAR PARKING

Adequate car parking facilities with convenient access needs to be provided.

INTERNAL

Within the Unit, key functional relationships will include:

- Unidirectional patient flow from arrival at Reception, through holding, Procedure Rooms, Recovery rooms, then to the Peri-operative Unit, Inpatient Unit, Lounge areas and discharge to home;
- Separation of clean and dirty traffic flows
- Staff visibility of patient areas for patient supervision and safety

14.3 Design

14.3.1 *General*

Pre-operative and post-operative patient facilities can be located together as required.

14.3.2 *Environmental Considerations*

ACOUSTICS

Design should consider reduction of the ambient noise level within the unit, particularly waiting areas.

Acoustic privacy treatment will be required to:

- Consulting / interview rooms
- Operating/ Procedure Rooms

Please refer to Part C, 9.2 “Acoustic Solutions for Healthcare Facilities”

NATURAL LIGHT

The design of the unit should incorporate external views and natural light as far as possible,



particularly to Waiting Areas, Pre-operative and Recovery areas.

It is recommended that external views and natural light are provided in staff areas such as Staff Rooms and Offices and areas where staff are confined to one location e.g. Reception, Clean-up Rooms.

When external views and natural light are provided in patient areas, care must be taken to minimise glare and ensure privacy is not compromised. Sun penetration should be controlled to exclude glare and heat gain or loss.

If Procedure Rooms include external windows, provision of controlled level of lighting during procedures may be required.

14.3.3 Safety and Security

Security measures will include the following:

- Controlled access to Procedural and staff areas
- Security and safe storage of drugs

14.3.4 Building Services Requirements

RADIATION SHIELDING

Radiation shielding to be recommended by AERB safety standards will be required in all procedure rooms where imaging will occur.

14.4 Components of the Unit

The Day Surgery/ Procedure Unit will contain a combination of Standard Components and Non-Standard Components. Provide Standard Components to comply with details in the Standard Components described in these Guidelines. Refer also to Standard Components Room Data Sheets and Room Layout Sheets.

14.4.1 Non Standard Components

ENDOSCOPE STORE

Description and Function

The Endoscope Store may be provided to store a variety of cleaned and decontaminated and sterile endoscopes, ready to use.

Location and Relationships

The endoscope store will be located immediately adjacent to the endoscope processing room.

Considerations

Endoscopes will be stored in appropriately ventilated cabinets. Air supply to this room should be HEPA filtered to prevent contamination of clean endoscopes.



14.5 Schedule of Accommodation

14.5.1 Day Surgery / Procedure Unit Generic Schedule of Accommodation

Schedule of Accommodation follows and assumes a 2 room and a 4 room suite that may incorporate day surgery. The schedule will need to be amended in accordance with the requirements of the Service Plan.

Provision of Offices, Workstations and support areas will be dependent on the Operational Policy and service demand and may vary from the Schedule of Accommodation.

DAY SURGERY / PROCEDURES UNIT - Entry / Waiting / Reception / Administration

ROOM / SPACE	Standard Component				2 rooms Qty x m2	4 rooms Qty x m2	Remarks
PATIENT WAITING	yes				1 x 20	1 x 30	
PATIENT WAITING - FAMILY	yes				1 x 25	1 x 50	
TOILET - PUBLIC	yes				2 x 3	2 x 3	
TOILET - ACCESSIBLE	yes				2 x 5	2 x 5	Add baby change table as necessary
RECEPTION	yes				1 x 10	1 x 10	
CLERICAL WORKROOM					1 x 9	1 x 12	1 – 2 staff
STORE - PHOTOCOPY / STATIONERY	yes				1 x 8	1 x 10	1 and 2 staff respectively
STORE - FILES	yes				1 x 4	1 x 6	Include stationery recycle bin
OFFICE – SINGLE PERSON	yes				1 x 9	1 x 9	Unit Manager
OFFICE - SINGLE PERSON	yes					1 x 9	Day Procedure Unit Clinical Nurse Specialist
OFFICE - SHARED (MEDICAL AND NURSING WRITE-UP ROOM)	yes				1 x 12	1 x 20	2 and 4 workstations for visiting staff attending unit for sessions
MEETING / EDUCATION / GROUP ROOM	yes				1 x 12	1 x 15	

DAY SURGERY / PROCEDURES UNIT - PATIENT EXAM / PREP / WAITING

ROOM / SPACE	Standard Component				2 rooms Qty x m2	4 rooms Qty x m2	Remarks
CONSULT / EXAM / INTERVIEW ROOM	yes				1 x 12	2 x 12	May also be used for medical student training
SUB – WAITING (ENDOSCOPY)	yes				1 x 2	1 x 4	For bowel preps
PREP ROOM (GASTRO)					2 x 9	2 x 9	Bowel preps
ENSUITE (TO PREP ROOM)	yes				2 x 5	2 x 5	
PATIENT CHANGE / LOCKERS - MALE / FEMALE	yes				2 x 10	2 x 15	
PATIENT TOILET	yes				2 x 4	2 x 4	
ACCESSIBLE TOILET / SHOWER / CHANGE	yes similar				2 x 7	2 x 7	Similar to Toilet - Accessible
BAY - LINEN TROLLEY	yes				1 x 2	1 x 2	Gowns etc.
"CHANGED" WAITING - CHAIRS	yes				1 x 12	1 x 20	refer to Waiting-Sub



ROOM / SPACE	Standard Component				2 rooms Qty x m2	4 rooms Qty x m2	Remarks
"CHANGED" WAITING - TROLLEY BAY	yes similar				2 x 10	2 x 10	Similar to Patient Bay - Holding;
STAFF STATION	yes				1 x 10	1 x 14	To oversight changed waiting;

DAY SURGERY / PROCEDURES UNIT – PROCEDURES AREA

ROOM / SPACE	Standard Component				2 rooms Qty x m2	4 rooms Qty x m2	Remarks
OPERATING ROOM - GENERAL	yes				2 x 42	4 x 42	Able to rotate bed through 360 degrees; provide Operating Room-Minor if Operating Room-General not required
OPERATING ROOM - MINOR	yes				2 x 36 optional	4 x 36 optional	Able to rotate bed through 360 degrees
CLEAN-UP ROOM - SHARED SCOPE REPROCESSING	yes				1 x 12	1 x 16	If possible, direct access from Endoscopy Rooms
ENDOSCOPE STORE					1 x 4	1 x 6	Special cupboards
SCRUB BAY	yes				1 x 6	2 x 6	Shared between rooms
CLEAN-UP ROOM	yes					1 x 7	for surgical instruments processing
BAY - MOBILE EQUIPMENT	yes				2 x 2	4 x 2	X-ray units etc
BAY - LINEN	yes				1 x 2	1 x 2	

DAY SURGERY / PROCEDURES UNIT – RECOVERY

ROOM / SPACE	Standard Component				10 bays Qty x m2	20 bays Qty x m2	
STAFF STATION	yes				1 x 10	1 x 14	
CLEAN UTILITY	yes				1 x 9	1 x 12	
DIRTY UTILITY / DISPOSAL ROOM	yes				1 x 12	1 x 14	
RESUSCITATION TROLLEY BAY	yes				1 x 2	1 x 2	
BAY - LINEN TROLLEY	yes				1 x 2	1 x 2	
PATIENT BAY - RECOVERY STAGE 1 ENCLOSED	yes similar				1 x 12	1 x 12	Children; Neg/neutral air-conditioning for patients post-bronchoscopy.
PATIENT BAY - RECOVERY STAGE 1	yes				7 x 12	14 x 12	
PATIENT BAY – RECOVERY STAGE 2	yes				6 x 10	12 x 10	
BEVERAGE BAY	yes				1 x 4	1 x 4	
DISCHARGE LOUNGE (3 RD STAGE RECOVERY)	yes similar				1 x 18	1 x 36	Patient Lounge; screened chairs; 3sqm per chair
INTERVIEW ROOM	yes				1 x 9	1 x 9	
STORE - EQUIPMENT	yes				1 x 15	1 x 20	With power points for recharging pumps etc
DISCOUNTED CIRCULATION					35%	35%	



DAY SURGERY / PROCEDURES UNIT - STAFF AMENITIES

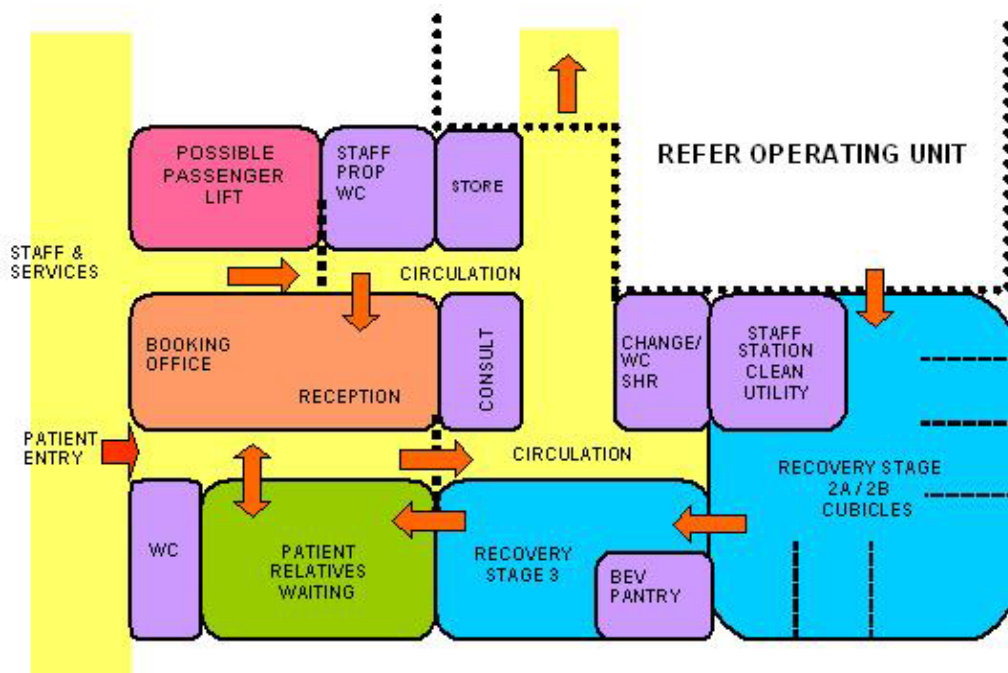
ROOM / SPACE	Standard Component				2 rooms Qty x m2	4 rooms Qty x m2	Remarks
STAFF LOUNGE / BEVERAGE	yes				1 x 24	1 x 30	
STAFF TOILET / LOCKERS - MALE	yes				1 x 10	1 x 14	Full lockers - adjust mix as required
STAFF TOILET / LOCKERS - FEMALE	yes				1 x 10	1 x 14	Full lockers - adjust mix as required

Please 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 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 staffing establishment.
- Staff and support rooms may be shared between Functional Planning Units dependant on location and accessibility to each unit and may provide scope to reduce duplication of facilities.

14.6 Functional Relationship Diagram

14.6.1 Day Surgery / Procedure Unit Functional Relationship Diagram



14.7 References and Further Reading

- Australasian Health Facility Guidelines. (AusHFG Version 3.0), 2009; refer to website www.healthfacilitydesign.com.au
- Guidelines for Design and Construction of Health Care Facilities; The Facility Guidelines Institute, 2010 Edition.
- Design Guidelines for Hospitals and Day Procedure Centres, Department of Human Services Victoria, 2005
- Health Department Western Australia, Private Hospital Guidelines, 1998.



The Indian 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 HFG India standard rooms, departments, and more than 40 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 HFG 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 HFG website, signup for HFBS using the link below.

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