# Approval in Principle (AIP)

## Private Hospitals and Day Procedure Centres

# Guidelines for AIP application for alterations or extensions to a registered private hospital or day procedure centre

## When must an application for an AIP be made?

The proprietor of a registered private hospital or day procedure centre must apply for an AIP when they propose to undertake alterations or extensions to the registered premises.

It is an offence under section 115 of the *Health Services Act 1988* (the Act) for work to commence before an AIP has been granted and the Secretary to the Department of Health and Human Services (or Delegate) has issued a Certificate of AIP.

## What is assessed for an application for AIP?

The Department assesses an application for AIP using criteria detailed in the *Health Services Act 1988* (the Act). These criteria include:

- financial capacity of the proprietor;
- fitness and propriety of the proprietor;
- suitability of the design having regard to the type of facility;
- suitability of the location of the land or premises having regard to availability of other community services and the safety and amenity of the environment;
- security of tenure; and
- the applicant's involvement in other health services.

The symbol indicates that a document is required to be attached to the application.

## How to complete an AIP application

### 1. Schedule 2 form and prescribed fee



Applicants are required to complete Schedule 2 - Application for approval in principle of a private hospital or day procedure centre (available for download from <a href="https://www.health.vic.gov.au/privatehospitals">www.health.vic.gov.au/privatehospitals</a>) and include the information outlined below.

The application must include the prescribed fee as indicated on the Private Hospitals website - (<a href="www.health.vic.gov.au/privatehospitals">www.health.vic.gov.au/privatehospitals</a>). Cheques or money orders should be made payable to "Department of Health & Human Services". Payment by EFT is also available.



In order to consider an application for an AIP the following information is required.

### 2. Written description of the project



Applications must be accompanied by a clear written description of the existing and proposed alterations/extensions or refurbishment (dot point form is preferred) and details of the type, level and quality of services to be provided (where appropriate).

If the proposed works are to be staged, provide written details of the proposed staged works.

#### 3. Alteration to bed numbers or services



If the proposed works will result in a change in services, provide details of these changes and staffing model for each service type or procedure (i.e. who will attend the patients).

Please confirm the number of beds that will be added or removed as a result of the works.

## 4. Financial capacity

The Act requires the Secretary to ensure proprietors of private hospitals and day procedure centres have the financial capacity to undertake the proposed alterations or extensions and to continue to operate the facility.

Please arrange for an appropriately qualified independent certified practicing accountant (CPA) or associate chartered accountant (ACA) to review the proposed proprietor's financial situation and their capacity to undertake the proposed works and continue to operate the facility.



Complete the Statement by an Independent ACA or CPA. Any disclaimer, qualification or reservation to this statement should be attached.

#### 5. Time frame



Provide an estimated time frame for the completion of the proposed works.

### 6. Planning permit



The application must include a copy of the current planning permit if a planning permit is required by the local council.

#### 7. Schedule of accommodation



Please list all rooms as recommended for the type of facility being constructed. *Australasian Health Facility Guidelines* (AusHFG). Include the total floor area of each proposed room and the reason for any variation from the AusHFG'

### 8. Guidance Note compliance sheet



Provide details of adherence to the *Health Services (Private Hospitals and Day Procedure Centre) Regulations 2013* and relevant sections of the AusHFG.

### 9. Accuracy of information

It is an offence under section 151 of the Act to provide false or misleading information for the purposes of complying with the Act.



## What happens after an application is made?

### Maximum time frame for processing applications

The Secretary (or Delegate) has 60 days after receiving an application (comprising the scheduled form and prescribed fee) to inform the applicant of a decision. If the Secretary (or Delegate) requests the applicant to provide additional information, a decision must be made within 28 days of receipt of the information last requested or within the 60 day period, whichever is later. Proprietors should keep these timelines in mind when submitting an application for assessment.

NOTE: The Department will endeavour to make a decision on complete AIP applications within 30 days.

#### Certificate of AIP

After considering the application and the Department's assessment report, the Secretary may grant the application and issue a Certificate of AIP. The AIP may be granted with conditions. Generally, an AIP is issued for a period of 12 months, unless the Secretary considers it appropriate to issue an AIP for longer or shorter period. The works must be completed in accordance with the approved plans and any conditions imposed.

#### Site visit

The applicant should contact the Policy Instruments and Compliance Unit two to four weeks prior to the completion of construction to arrange a site visit. The Certificate of Occupancy **must be received** by the department prior to the site visit taking place. At this visit all relevant certification of compliance with all relevant statutory authority and standards requirements must be submitted.

**NOTE:** If the Certificate of Occupancy is not provided to the department the scheduled site visit will not take place and a new appointment will have to be made.

# Compliance Certificates which may be required to be submitted with the certificate of occupancy or certificate of final inspection

- Certificate of occupancy or certificate of final inspection
- General plumbing certification
- Mechanical plumbing certification
- Non prescribed electrical installation work certification
- Electrical Body protection and/or cardiac protection certification
- Medical gases certification
- Nurse call system certification
- Glazing certification
- Emergency and exit lighting certification
- Fire protection certification
  - Smoke detection system certification as required
  - Fire / smoke door certification as required
  - EWIS certification as required
- HEPA filtration installation certification
- Air flow balance certification for new operating theatres/CSSD
- Emergency power certification / statement (for new facilities)

## What if the plans change during construction?

Construction must be conducted in accordance with the Certificate of AIP. Should it become necessary to deviate from the original plans an application for variation of AIP must be submitted. Please refer to the Guidelines for applications for variation of AIP, available on our website.

## When can I use the premises?

If the alterations or extensions do not result in a change in the total number of registered beds and/or a change in the prescribed services provided at the private hospital or day procedure centre, a letter advising that the premises are "approved to occupy" will be provided to the applicant if the site visit confirms that the works have been completed in accordance with the AIP.

### Do I need a variation of registration?

If the alterations or extensions result in a change in the total number of registered beds and/or a change in the prescribed services provided at the private hospital or day procedure centre, the proprietor must apply to the Secretary to vary the registration of the private hospital or day procedure centre. Guidelines for variation of registration of private hospitals and day procedure centres are available on our website.

## Completed applications should be sent to:

The Manager
Private Hospitals
Department of Health and Human Services
GPO Box 4057
MELBOURNE VIC 3001

If you require further information please contact the Private Hospital Branch on (03) 9096 2164.

Please note incomplete applications will not be processed until all required information is provided.

To receive this publication in an accessible format phone 03 9096 2164, using the National Relay Service 13 36 77 if required, or email privatehospitals@dhhs.vic.gov.au

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Available at http://www.health.vic.gov.au/privatehospitals

# Approval in Principle (AIP)

## Private Hospitals and Day Procedure Centres

# Checklist for AIP for alterations or extensions to a registered private hospital or day procedure centre

Please complete the checklist and return it with your application to Private Hospitals, Department of Health and Human Services, GPO Box 4057, MELBOURNE VIC 3001.

Incomplete applications may be returned to applicant.

Fac	Facility/Applicant name:				
Fac	cility address:				
No.	Item		1	If not attached, please detail	

No.	Item	1	If not attached, please detail why (i.e. document not applicable)
1	Schedule 2 – Application for Approval in Principle		
	Payment of prescribed fee attached		
2	Description of the proposed project		
3	Description of alterations to services/bed numbers as a result of this project		
4	Statement by independent accountant		
5	Time frame statement		
6	Copy of current planning permit, if one is required by your local council		
7	Schedule of accommodation		
8	Guidance Note compliance sheet		

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# Health Services (Private Hospitals and Day Procedure Centres) Regulations 2013

Private Hospitals and Day Procedure Centres

# Application for approval in principle of a private hospital or day procedure centre – Schedule 2

SE	CT	OI	N	Α

1.	Full name of applicant/s (proprietor/s)
2.	Postal address of applicant:
	Postcode:
3.	The name, telephone number and email address of a contact person for the purposes of the application:
Conta	act name:
Position	on/title:
Conta	act telephone no: Contact Mobile no:
Email	:
4.	If the applicant is a body corporate, the name and address of any director or officer of the body corporate wh may exercise control over the private hospital or day procedure centre:
Conta	act name:
Position	on/title:
Conta	act address:
Conta	act telephone no: Contact Mobile no:
Email	: <u></u>
<u>SECT</u>	TION B
1.	The kind of health service establishment to which the application relates is:
	A private hospital OR a day procedure centre
2.	The name (or proposed) of the private hospital or day procedure centre, it's street address and the municipal district in which the facility is, or is to be, located:
Name	e (or proposed name) of facility:
Street	t address:
	Postcode:
Munic	cipal district:



3.	This ap	oplication is for an approval in principle for:
		the use of particular land or premises as a private hospital or a day procedure centre;
	П	premises proposed to be constructed for use as a private hospital or day procedure centre;
		alterations or extensions to premises used, or proposed to be used, as a private hospital or day procedure centre.
SECT	ON C	
		with section 70(3) of the <i>Health Services Act 1988</i> , I have given notice in writing of this application to on who has an interest in the land as owner or lessee.
Signat	ure of ap	pplicant/s:
Name	of each	signatory (in BLOCK LETTERS):
Date:_		
NOTE	S:	
(a)	) This ap	oplication should be posted to:
	The Ma	anager
	Private	Hospitals
	-	ment of Health & Human Services
		ox 4057
	MELBO	DURNE VIC 3001
(b)	The ap	plication must be accompanied by –
	(i)	the prescribed fee (refer to <a href="https://www.health.vic.gov.au/privatehospitals/fees">www.health.vic.gov.au/privatehospitals/fees</a> for the current prescribed fee).
	/ii\	the documents listed in the applicable guide. Guidelines for assisting with the completion of

the documents listed in the applicable guide. Guidelines for assisting with the completion of (II)applications are available either from the Private Hospitals Unit or can be downloaded from the Unit's

website www.health.vic.gov.au/privatehospitals/forms

Further information can be obtained from the Private Hospitals Unit on +61 (3) 9096 2164.

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# Approval in Principle (AIP)

## Private Hospitals and Day Procedure Centres

# Statement by accountant - AIP to alter or extend registered facility

**Section 71(2)(a)** of the *Health Services Act 1988* (the Act) requires the Secretary of the Department, in determining an application for Approval in Principle (AIP), to consider whether the proprietor, or person who is likely to be proprietor, of the health services establishment has and is likely to continue to have the financial capacity to carry on the establishment and undertake the proposed alterations or extensions to the registered establishment.

The following statement is to be completed by a Certified Practicing Accountant or Associate Chartered Accountant. This statement is provided for the sole purpose of assisting the Department to assess an application for AIP.

Proprietor's name:		
I,	ve considered all relevant documents, statements of changes in equitiver explanatory notes to and forming or's or proposed proprietor's [strike and auditing guidance statements in opinion that the applicant has, as [strikeout as applicable]. I have/ha	entation (including current cy, cash flow statements, a cy cash flow statements, a cy cash flow statements, a cy cash flow statements and is applicable] financial cy
CPA/ACA Signature Date	Proprietor Signature	Date
Name (BLOCK LETTERS) Address:	Name (BLOCK LETTERS) Address:	
P/code		P/code

NB. Any disclaimer, qualification or reservation applicable to this statement should be attached.



# Approval in Principal (AIP)

## Private Hospitals and Day Procedure Centres

# Schedule of accommodation

Project name:							
Health Facility Gui	delines (AusHFG). In	• • • • • • • • • • • • • • • • • • • •	ea of each proposed	ease refer to the Australasian room and the reason for any			
Health Planning Uni	t name (refer to Par	t B of the AusHFG):			•		
Schedule of Accom	modation <sup>i</sup> numbers/	's:					
Room/Space	AusHFG requirement	Design Proposal Qty x (m2)	Compliance with Guidelines	Reason for Variance/Comments			
	Qty x (m2)		Y or N				
					•		

Facility/Applicant name:



Any other comments						
Architect/Designer of	company name					
Signa	ture	1	Name	Date		

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<sup>&</sup>lt;sup>i</sup> As outlined in the *Australasian Health Facility Guidelines* 

# Approval In Principle (AIP) Guidance Note compliance Sheet

## Private Hospitals and Day Procedure Centres

### Please complete the form and return it with your application to:

The Manager
Private Hospitals
Department of Health & Human Services
GPO Box 4057
MELBOURNE VIC 3001

## Introduction

The AIP proposal must comply with the *Health Services* (*Private Hospitals and Day Procedure Centres*) Regulations 2013 and must be designed having regard to the *Australasian Health Facility Guidelines* (AusHFG).

Completing this sheet will provide assistance in identifying where the proposal complies or does not comply with these documents.

**NOTE**: non-compliance may affect the ability of the facility to attain registration at the completion of building works. Applicants can use the space below to explain why and what they will have in place to ensure their facility is adequate having regard to the activities to be carried out on the premises and that it is fit for purpose.

## How to use the Guidance Note compliance sheet

Using the information listed under 'mandatory requirements' and 'other considerations' for each general and specialist medical health area (listed below) please list under each of the Regulations where your proposed facility **does not** comply.

#### Medical or specialist health services General Health Services: (please select) Day Private OR Hospital procedure centre Specialist Services offered: (please select) Acute ☐ Acute Acute Acute services – Day procedure services services services oncology/chemothera centre - renal dialysis cardiac cath emergency dept intensive care ру lab Mental health ☐ Operating Suite Acute Rehabilitation services services Obstetrics



# Regulation 25 - Respect, Dignity and Privacy of patients Does the proposal comply with this regulation? Please select: YES NO If no, why not? If yes, go to the next question. 1. Regulation 28 - Needs of Patient are met Does the proposal comply with this regulation? Please select: YES NO If no, why not? If yes, go to the next question. 2. Regulation 39 - Identification of Rooms Does the proposal comply with this regulation? Please select: YES NO If no, why not? If yes, go to the next question. 3. Regulation 40 - Communication Does the proposal comply with this regulation? Please select:

YES

If no, why not? If yes, go to the next question.
4. Regulation 41 – Prevention of Scalding
Does the proposal comply with this regulation?
Please select:
YES NO
If no, why not? If yes, go to the next question.
5. Regulation 42 – Repair and Cleanliness of premises
Does the proposal comply with this regulation?
Please select:
YES NO
If no, why not? If yes, go to the next question.
6. Regulation 43 – Suitability and cleanliness of facilities, equipment etc.
Does the proposal comply with this regulation?
Please select:
YES NO

**NOTE:** it is an offence under section 151 of the *Health Services Act 1988* to provide false or misleading information for the purposes of complying with the Act.

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# Approval in Principle (AIP) Guidance Note No. 1

## Private Hospitals and Day Procedure Centres

# Private Hospitals and Day Procedure Centres – mandatory requirements and design considerations

## Introduction

The Department of Health and Human Services (the Department) is responsible for the regulation of private hospitals and day procedure centres under the *Health Services Act 1988* (the Act) and the *Health Services (Private Hospitals and Day Procedure Centres) Regulations 2013* (the Regulations).

This legislation mandates the minimum requirements for the safety and quality of care of patients receiving health services in private hospitals and day procedure centres.

Attaining an Approval in Principle (AIP) is the first stage in the process of registration of a private hospital or day procedure centre, with registration of the facility the second stage.

Applicants are required to submit plans or schematic drawings; however the unit does not approve plans submitted as part of an AIP application.

The Department recommends you make a time to discuss your proposal prior to submitting the AIP application.

Proprietors are responsible for ensuring their proposed facility is designed to comply with the Act and the Regulations and they give due regard to;

- The safety, privacy and dignity of patients, staff and visitors.
- The management of clinical risk for the type of services provided for example, mental health, rehabilitation or surgical services.
- Patient staff and visitor journey and access through the facility.

**NOTE:** All private hospitals and day procedure centres must be constructed to comply with the requirements of the Building Code of Australia (BCA) and any Australian Standards referenced by the BCA.

It is highly recommended to consult a Health Architect when designing the facility. The *Australasian Health Facility Guidelines* (AusHFG) provide guidance regarding appropriate design of private hospitals and day procedure centres.

Where facilities vary from the AusHFG or the Regulations, applicants will be required to explain why and what they will have in place to ensure their facility is adequate and fit for purpose having regard to the activities to be carried out on the premises.

The Department, when conducting its inspection prior to registration, will take these matters into consideration before registration is approved.

If the Department is not satisfied these matters have been addressed, a registration will not be issued for the premises until the matters are addressed to the Department's satisfaction.



## Mandatory requirements and other considerations

As the Department no longer approves plans and schematic drawings as part of the AIP process, the Unit has developed this document to inform proprietors of private hospitals and day procedure centres that there are mandatory requirements and common issues that must be considered when designing their facility to ensure it complies with the Regulations.

**NOTE:** The department will use the AusHFG to inform its judgement as to whether the proposed facility complies with the Regulations.

Depending on the type of health facility being developed, the mandatory requirements and other considerations have been categorised under each of the following general and other health services offered including;

#### General health service

- Private hospital
- Day procedure centre

### **Specialist Services offered**

- Operating suite
- Day procedure centre renal dialysis
- Acute services cardiac catheter laboratory
- Acute services intensive care
- Acute services emergency department
- Acute services obstetrics
- Acute services oncology/chemotherapy
- Rehabilitation services
- Mental health

## **Guidance Note compliance sheet**

As a companion to this document, the Guidance Note compliance sheet has been developed to use when submitting an application for AIP.

Applicants are to complete the Guidance note compliance sheet using the information listed for each general health service and services offered (listed above) as outlined in Guidance Note no 1.

Under each of the Regulations applicants are to indicate where the proposed facility does not comply

# Mandatory requirements and other considerations

## **Private Hospital**

Regulation	Mandatory Requirement	Other considerations
25 – Respect, dignity and privacy of patients  The proprietor must ensure that patients admitted to a private hospital are given privacy, are treated with dignity and respect giving consideration to their religious beliefs, ethnic and cultural practices; and are not subjected to unusual routines when it comes to the provision of meals and personal hygiene practices.	<ul> <li>Visitors cannot view directly into the facility or into recovery areas from waiting areas, garden areas or the entrance</li> <li>Patients have acoustic privacy.</li> <li>Patients are provided with change rooms to change in private and store their belongings if not admitted immediately to a room.</li> <li>Admission areas provided with privacy for patients.</li> <li>Inpatient units are not thoroughfares to other units.</li> </ul>	<ul> <li>Waiting areas for patients and for visitors to each unit.</li> <li>Acoustic treatment to walls, doors and ceilings.</li> </ul>
28 – Needs of the patient are met  The proprietor must ensure that the needs of the patient are met promptly and efficiently by nursing and other health professional staff.	<ul> <li>The location and access to an ambulance bay is adequate</li> <li>If the facility is located in a building with more than 1 floor, lifts are of a sufficient size that they can be accesses by an ambulance stretcher and/or a hospital bed with attachments.</li> <li>Trolley beds fit through the doorways and allow for trolley transport around the facility.</li> <li>Patient recovery and treatment bays provide enough space to allow access for resuscitation equipment.</li> </ul>	<ul> <li>The entry canopy is covered to provide adequate shelter.</li> <li>The entry canopy is large enough to allow vehicles such as taxis, buses, cars and emergency vehicles to manoeuvre.</li> <li>The entrance is accessible for all people including for example those with poor mobility and low sight.</li> </ul>
39 – Identification of rooms  The proprietor must ensure that each room in which beds or recovery chairs are provided for patients is clearly identified at the entrance to the room.	<ul> <li>All patient bedrooms, trolley bays and recovery chair bays are identified with a letter or number with appropriate signage.</li> <li>Room doors are clearly identified at their entrance by a letter or number.</li> </ul>	
40. Communication  The proprietor must ensure there is an effective electronic communication system provided and kept operational enabling patients and staff to summon assistance and to enable calls from each bed, each recovery chair, each toilet,	<ul> <li>Call bells are present in all patient areas.</li> <li>There is an emergency call system for code calls for nurses to initiate in an emergency.</li> </ul>	

Regulation	Mandatory Requirement	Other considerations
shower or bath (or other facility used for patient bathing) and any common room, recreational or rest area or other place where patient care is provided.		
41. Prevention of scalding  The proprietor must ensure that a system or mechanism is installed to control the outlet temperature of hot water to every bath, shower or hand basin used by patients to prevent scalding.	There is a system or mechanism installed to control the outlet temperature of hot water taps used by patients E.g. taps for patient use are fitted with Thermostatic Mixing Valves (TMV).  NOTE: OH&S legislation mandates a maximum water temperature permissible in patient areas.	
42. Repair and cleanliness of premises  The proprietor must ensure the premises are kept in a clean and hygienic condition. The facility is to be kept in a proper state of repair and free of hazards or the accumulation of materials which may become offensive, injurious to health or could facilitate the outbreak of fire.	<ul> <li>There are adequate facilities and equipment for cleaners.</li> <li>There is a service entry so that collection of waste material and deliveries do not enter through the main facility entry.</li> <li>There is adequate disposal space for sorting and storage of various waste streams.</li> <li>Provide appropriate dirty utility and soiled linen rooms.</li> </ul>	<ul> <li>Consider reinforcing wall surfaces with buffer rails or similar.</li> <li>Refer to Cleaning Standards for Victorian health facilities.</li> <li>Refer to Maintenance Standards in critical areas for Victorian health facilities.</li> </ul>
43. Suitability and cleanliness of facilities, equipment etc  The proprietor must ensure that facilities, equipment, furnishings and fittings are suitable for the kinds of health services being provided by the hospital and are kept in a clean and hygienic condition.	<ul> <li>There is a discrete room for clinical handover.</li> <li>Resuscitation trolley bays are provided on each floor.</li> <li>Mobile equipment bays are provided.</li> <li>There is an emergency power supply in case of disruption to electricity supply.</li> <li>There are adequate recovery bays for the number of theatres.</li> <li>All doors wide enough to allow access for beds/trolley transfer.</li> <li>Beverage bays / pantries are provided to patients.</li> <li>Linen bays are provided.</li> <li>Bathroom/ensuite doors are able to be unlocked from the outside and have a privacy latch inside.</li> </ul>	<ul> <li>Fixtures and fittings are appropriate to the type of facility.</li> <li>Lounge areas are provided for patients and visitors.</li> <li>Consider the increasing size of rooms for bariatric patients.</li> <li>Take into account support services e.g. allied health, patient records, Unit Managers Office.</li> </ul>
45. Infection Control  Proprietors must develop and implement an	<ul> <li>There is an airlock from external entry into the building.</li> <li>There is adequate storage for sterile equipment and consumables in all wards and procedural areas.</li> </ul>	<ul> <li>Consider the likelihood of an increase in procured consumables and the need for storage.</li> <li>Avoid ledges and dust collection points.</li> </ul>

Regulation	Mandatory Requirement	Other considerations
Infection Control Management Plan which provides for the surveillance, prevention and control of infections including identifying and	Bulkheads are installed on all joinery for example, above cupboards to prevent the accumulation of dust on horizontal surfaces.	
assessing all infection risks in the hospital or day procedure centre.	The doors to sterile stores are vented to prevent moisture build up.	
NOTE: Infection control requirements are critical	There is a hand wash basin in each patient bedroom which does not include the basin in the ensuite.	
in the planning of a hospital. The department recommends that all facilities be designed,	<b>NOTE</b> the various types of hand wash basins in different parts of the facility as specified in the Design Guidelines.	
constructed, furnished and equipped in keeping with the principles of infection control.	There are adequate clinical hand basins provided which are accessible and highly visible to staff.	
	<ul> <li>There is a clean utility room for storage and preparation of clean and sterile consumables (this room may include the storage of medications).</li> </ul>	
	There is a dirty utility room in all patient accommodation areas to dispose of clinical and general waste.	
	There are adequate bathroom and change facilities for staff, patients and visitors.	
	There is a negative pressure room with anteroom within the hospital if required.	

## **Day Procedure Centre**

Regulation	Mandatory Requirement	Other considerations
25 – Respect, dignity and privacy of patients  The proprietor must ensure that patients admitted to a day procedure centre are given privacy, are treated with dignity and respect giving consideration to their religious beliefs, ethnic and cultural practices; and are not subjected to unusual routines when it comes to the provision of meals and personal hygiene practices	<ul> <li>Patients and visitors cannot view directly into the facility or into patient recovery areas from waiting areas, garden areas or the entrance.</li> <li>Patient flow is continuous from admission to discharge without going back through areas where patients may be at different stages of recovery.</li> <li>Patients have acoustic privacy.</li> <li>Patients are provided with change rooms to change in private and securely store belongings.</li> <li>Separate holding bays are provided so visitors and discharging patients do not walk through recovery areas.</li> <li>There is a separate area for admitting patients.</li> <li>There is a separate area for medical practitioners to consult with patients.</li> </ul>	<ul> <li>Waiting areas are provided for patients and for visitors.</li> <li>Acoustic treatment to walls, doors and ceilings.</li> <li>Admission areas provided with privacy for patients.</li> </ul>
28 – Needs of the patient are met  The proprietor must ensure that the needs of the patient are met promptly and efficiently by nursing and other health professional staff.	<ul> <li>The location and access to an ambulance bay is adequate.</li> <li>If the facility has more than 1 floor or occupies a floor of a building above the ground floor, that lifts are of a sufficient size that they can be accessed by an ambulance stretcher and/or a hospital bed with attachments.</li> <li>Trolley beds fit through the doorways and allow for trolley transport around the facility.</li> <li>Beverage bays are provided to patients in recovery areas.</li> <li>Patient recovery bays provide enough space to allow access for resuscitation equipment.</li> <li>Staff must be able to monitor the condition and safety of patients at all times.</li> </ul>	<ul> <li>The entry canopy is covered to provide adequate shelter to the building.</li> <li>The entry canopy is large enough to allow vehicles such as taxis, buses, cars and emergency vehicles to manoeuvre.</li> <li>The entrance is accessible for all people including fo example those with poor mobility and low sight.</li> </ul>
39 – Identification of rooms  The proprietor must ensure that each room in which beds or recovery chairs are provided for patients is clearly identified at the entrance to the room.	<ul> <li>All trolley bays and recovery chair bays are identified with a letter or number with appropriate signage.</li> <li>Rooms are clearly identified.</li> </ul>	
<b>40. Communication</b> The proprietor must ensure there is an effective electronic communication	<ul> <li>Call bells are present in all patient areas.</li> <li>There is an emergency call system for code calls for nurses to initiate in an emergency.</li> </ul>	

Regulation	Mandatory Requirement	Other considerations
system provided and kept operational enabling patients and staff to summon assistance and to enable calls from each bed, each recovery chair, each toilet, shower or bath (or other facility used for patient bathing) and any common room, recreational or rest area or other place where patient care is provided.		
41. Prevention of scalding  The proprietor must ensure that a system or mechanism is installed to control the outlet temperature of hot water to every bath, shower or hand basin used by patients to prevent scalding.	There is a system or mechanism installed to control the outlet temperature of hot water taps used by patients/ E.G. taps for patient use are fitted with thermostatic mixing valves (TMV).  NOTE; OH&S legislation mandates a maximum water temperature permissible in patient areas.	
42. Repair and cleanliness of premises  The proprietor must ensure the premises are kept in a clean and hygienic condition. The facility is to be kept in a proper state of repair and free of hazards or the accumulation of materials which may become offensive, injurious to health or could facilitate the outbreak of fire.	<ul> <li>There are adequate facilities and equipment for cleaners.</li> <li>There is a service entry so that collection of waste material and deliveries do not enter through the main facility entry.</li> <li>There is adequate disposal space for sorting and storage of waste streams.</li> <li>Provide appropriate dirty utility and soiled linen rooms.</li> </ul>	Consider reinforcing wall surfaces with buffer rails or similar.
43. Suitability and cleanliness of facilities, equipment etc  The proprietor must ensure that facilities, equipment, furnishings and fittings are suitable for the kinds of health services being provided by the day procedure centre; and are kept in a clean and hygienic condition.	<ul> <li>Bathroom/ensuite doors are able to be unlocked from the outside and have a privacy latch inside.</li> <li>There are access zones within the facility e.g. unrestricted, semi-restricted, restricted and transitional zones in OR and CSSD.</li> <li>A separate decontamination area, separate fold and sterilisation area is provided.</li> <li>Procedure rooms are adequately sized for the kinds of health services provided.</li> <li>There is a resuscitation trolley bay located in the recovery area.</li> </ul>	<ul> <li>Fixtures and fittings are appropriate to the type of facility.</li> <li>Consider storage of patient records that provides ease of retrieval.</li> <li>Consider wheel in/wheel out linen trolleys.</li> </ul>

Regulation	Mandatory Requirement	Other considerations
	<ul> <li>Where appropriate, mobile equipment bays are provided.</li> <li>There is an emergency power supply in case of disruption to electricity supply.</li> <li>All doors are wide enough to allow access for trolley transfer.</li> <li>There are sufficient bays to accommodate trolleys whilst patient is in OR.</li> <li>There are adequate bathroom and change facilities for staff.</li> <li>A linen bay is provided.</li> <li>Piped medical gases and suction systems are in the operating theatres and recovery room bays.</li> </ul>	
Proprietors must develop and implement an Infection Control Management Plan which provides for the surveillance, prevention and control of infections including identifying and assessing all infection risks in the day procedure centre.  NOTE: Infection control requirements are critical in the planning of a day procedure centre. The department recommends that all facilities be designed, constructed, furnished and equipped in keeping with the principles of infection control.	<ul> <li>There is an airlock from external entry into the building.</li> <li>Sterile zones are not used as access points to other rooms in the facility.</li> <li>There are HEPA-filtration and air exchanges in the procedural areas, CSSD and sterile stock areas.</li> <li>There is adequate storage for both sterile and non-sterile equipment, gowns and gloves, linen, and general equipment in procedural areas.</li> <li>Bulkheads are installed on all joinery for example, above cupboards to prevent the accumulation of dust on horizontal surfaces.</li> <li>The doors to the sterile store are vented to prevent moisture build up.</li> <li>There are thermometers and humidity recorders in the sterile store room.</li> <li>There is adequate space for sterilisation processes having regard to the type of facility.</li> <li>There is a clean utility room for storage and preparation of clean and sterile consumables (this room may include the storage of medications).</li> <li>There is a dirty utility room to dispose of clinical and general waste.</li> <li>There are adequate clinical hand basins provided which are accessible and highly visible to staff.</li> <li>There is a scrub sink directly outside the procedure room.</li> <li>NOTE the various types of hand wash basins in different parts of the facility as specified in the Design Guidelines.</li> </ul>	

# **Operating Suite**

Regulation	Mandatory Requirement	Other considerations
25 – Respect, dignity and privacy of patients  The proprietor must ensure that patients admitted to a private hospital are given privacy, are treated with dignity and respect giving consideration to their religious beliefs, ethnic and cultural practices; and are not subjected to unusual routines when it comes to the provision of meals and personal hygiene practices	<ul> <li>Patients and visitors cannot view directly into the operating room or into recovery areas from waiting areas, garden areas or the facility entrance.</li> <li>Where patients are admitted directly to the operating suite, they are provided with change rooms to change in private and there is secure storage for their belongings.</li> <li>There is a separate area for admitting patients if the operating suite contains a Day of Surgery Admission (DOSA) process.</li> <li>Holding bays are separated for pre and post-operative patients.</li> </ul>	Waiting areas for patients and for visitors where the operating suite includes a DOSA unit.
39 – Identification of rooms	Each patient bay in the operating suite is numbered.	
The proprietor must ensure that each room in which beds or recovery chairs are provided for patients is clearly identified at the entrance to the room.		
40. Communication  The proprietor must ensure there is an effective electronic communication system provided and kept operational enabling patients and staff to summon assistance and to enable calls from each bed, each recovery chair, each toilet, shower or bath (or other facility used for patient bathing) and any common room, recreational or rest area or other place where patient care is provided.	There is an emergency nurse initiated call bell system that can be heard in theatres.	
42. Repair and cleanliness of premises  The proprietor must ensure the premises are kept in a clean and hygienic condition. The facility is to be kept in a proper state of repair and free of hazards or the accumulation of materials which may become offensive, injurious to health or could facilitate the outbreak of fire.	There are adequate facilities and equipment for cleaners which are separate from the rest of the hospital.	

Regulation	Mandatory Requirement	Other considerations
43. Suitability and cleanliness of facilities, equipment etc  The proprietor must ensure that facilities, equipment, furnishings and fittings are suitable for the kinds of health services being provided by the hospital; and are kept in a clean and hygienic condition	<ul> <li>There are access zones e.g. unrestricted, semi-restricted, restricted and transitional zones in the operating suite and other procedural areas which are appropriately controlled.</li> <li>There is a separate Central Sterile Supplies Department (CSSD) which encompasses a separate decontamination area, separate fold and sterilisation area.</li> <li>There is adequate storage for both sterile and non-sterile equipment, linen, and general equipment.</li> <li>Procedure rooms are adequately sized for the kinds of health services provided.</li> <li>There is a resuscitation trolley bay located in recovery areas.</li> <li>Mobile equipment bays are provided.</li> <li>There are sufficient bays to accommodate trolleys/beds whilst patient is in operating theatre.</li> <li>Staff are provided with change rooms and lockers.</li> <li>Office and administration space is provided to clinical staff for write up etc.</li> <li>Linen bays are provided.</li> <li>There is appropriate access to drugs for staff in recovery areas and in operating rooms.</li> <li>There are thermometers and humidity recorders in the sterile store room.</li> <li>Piped medical gases and suction systems are in the operating theatres and recovery room bays.</li> </ul>	<ul> <li>Consider placing drug safes in each operating room.</li> <li>Ensure there are sufficient recovery bays for the operating suite.</li> <li>Consider wheel in/wheel out linen trolleys.</li> <li>Loan set – consider position, room size and access to CSSD.</li> </ul>
Proprietors must develop and implement an Infection Control Management Plan which provides for the surveillance, prevention and control of infections including identifying and assessing all infection risks in the hospital.  NOTE: Infection control requirements are critical in the planning of a hospital. The department recommends that all facilities be designed, constructed, furnished and equipped in keeping with the principles of infection control.	<ul> <li>Sterile zones are not used as access points to other rooms in the facility.</li> <li>There are HEPA-filtration and air exchanges in the procedural areas, CSSD and sterile stock areas.</li> <li>The floor and wall finishes throughout the operating suite allow for easy clean with welded sheet vinyl covering them.</li> <li>Bulkheads are installed on all joinery for example, above cupboards to prevent the accumulation of dust on horizontal surfaces.</li> <li>The doors to the sterile store are vented to prevent moisture build up.</li> <li>There are thermometers and humidity recorders in the sterile store room.</li> </ul>	<ul> <li>CSSD should be of a size which will house the special types of cleaning equipment dependent on the level of service provided e.g. ultrasonic, washers, dryers and sterilisers.</li> <li>Refer to Australian College of Operating Room Nurses Standards (ACORN) which may assist in planning and design n of the peri-operative environment.</li> </ul>

Regulation	Mandatory Requirement	Other considerations
	There is adequate space for sterilisation processes having regard to the type of facility.	
	<ul> <li>There is adequate separation of dirty handling and clean handling.</li> </ul>	
	There is a dirty utility room for use in the recovery areas.	
	<ul> <li>Use stainless steel on all benches in the operating room and CSSD.</li> </ul>	
	<ul> <li>Instrument flow does not cross-contaminate.</li> </ul>	
	<ul> <li>The windows in operating theatre and recovery rooms should not have mullions and transoms as they are dust collectors.</li> </ul>	

## **Day Procedure Centre – renal dialysis**

Regulation	Mandatory Requirement	Other considerations
25 – Respect, dignity and privacy of patients  The proprietor must ensure that patients admitted to a hospital or day procedure centre are given privacy, are treated with dignity and respect giving consideration to their religious beliefs, ethnic and cultural practices; and are not subjected to unusual routines when it comes to the provision of meals and personal hygiene practices	<ul> <li>Chairs / bays are able to be screened off.</li> <li>Bays are large enough to accommodate a carer with each patient</li> <li>There is a room for private conversation / consultation.</li> <li>Patients and visitors cannot view directly into the facility or into patient areas from waiting areas, garden areas or the entrance.</li> </ul>	<ul> <li>Acoustic treatment to walls, doors and ceilings.</li> <li>Admission areas provided with privacy for patients.</li> </ul>
28 – Needs of the patient are met  The proprietor must ensure that the needs of the patient are met promptly and efficiently by nursing and other health professional staff.	<ul> <li>The location and access to an ambulance bay is adequate.</li> <li>If the facility has more than 1 floor or occupies a floor of a building above the ground floor, that lifts are of a sufficient size that they can be accessed by an ambulance stretcher and/or a hospital bed with attachments.</li> <li>Trolley beds fit through the doorways and allow for trolley transport around the facility.</li> <li>Beverage bays are provided to patients / visitors.</li> <li>Patient chair bays provide enough space to allow access for resuscitation equipment.</li> </ul>	<ul> <li>Consider ensuring that all chairs have a view and that natural light is maximised throughout the unit.</li> <li>The entry canopy is covered to provide adequate shelter.</li> <li>The entry canopy is large enough to allow vehicles such as taxis, buses, cars and emergency vehicles to manoeuvre.</li> <li>The entrance is accessible for all people including for example those with poor mobility and low sight.</li> </ul>
39 – Identification of rooms  The proprietor must ensure that each room in which beds or recovery chairs are provided for patients is clearly identified at the entrance to the room.	<ul> <li>All chairs are identified with a letter or number with appropriate signage.</li> <li>All rooms are appropriately signed.</li> </ul>	
40. Communication  The proprietor must ensure there is an effective electronic communication system provided and kept operational enabling patients and staff to summon assistance and to enable calls from	<ul> <li>Call bells are present in all patient areas.</li> <li>There is an emergency call system for code calls for nurses to initiate in an emergency.</li> </ul>	

Regulation	Mandatory Requirement	Other considerations
each bed, each recovery chair, each toilet, shower or bath (or other facility used for patient bathing) and any common room, recreational or rest area or other place where patient care is provided.		
41. Prevention of scalding  The proprietor must ensure that a system or mechanism is installed to control the outlet temperature of hot water to every bath, shower or hand basin used by patients to prevent scalding.	There is a system or mechanism installed to control the outlet temperature of hot water taps used by patients/ E.G. taps for patient use are fitted with thermostatic mixing valves (TMV).  NOTE; OH&S legislation mandates a maximum water temperature permissible in patient areas.	
42. Repair and cleanliness of premises  The proprietor must ensure the premises are kept in a clean and hygienic condition. The facility is to be kept in a proper state of repair and free of hazards or the accumulation of materials which may become offensive, injurious to health or could facilitate the outbreak of fire.	<ul> <li>There are adequate facilities and equipment for cleaners.</li> <li>There is a service entry so that collection of waste material and deliveries do not enter through the main facility entry.</li> <li>Provide appropriate dirty utility and soiled linen rooms.</li> </ul>	Consider reinforcing all wall surfaces buffer rails or similar.
43. Suitability and cleanliness of facilities, equipment etc  The proprietor must ensure that facilities, equipment, furnishings and fittings are suitable for the kinds of health services being provided by the day procedure centre; and are kept in a clean and hygienic condition.	<ul> <li>Provide a water treatment and drainage system.</li> <li>Large storage areas for wet / dry store. Sterile stock to be stored separately from non sterile stock.</li> <li>There is a resuscitation trolley bay.</li> <li>There is an emergency power supply in case of disruption to electricity supply.</li> <li>There are adequate bathroom facilities for staff.</li> <li>A linen bay is provided.</li> <li>Piped medical gasses and suction is available for use.</li> </ul>	Fixtures and fittings are appropriate to the type of facility.
45. Infection Control	<ul> <li>There is an airlock from external entry into the building.</li> <li>Bulkheads are installed on all joinery for example, above cupboards to</li> </ul>	Consider including an isolation room to separate infected patients during treatment with own ensuite, and hand basin

Regulation	Mandatory Requirement	Other considerations
Proprietors must develop and implement an Infection Control Management Plan which provides for the surveillance, prevention and control of infections including identifying and assessing all infection risks in the hospital or day procedure centre.	<ul> <li>prevent the accumulation of dust on horizontal surfaces.</li> <li>The doors to the storage rooms are vented to prevent moisture build up</li> <li>Hand wash basins are available within each treatment area.</li> <li>There is a dirty utility room to dispose of clinical and general waste.</li> <li>There is a clean utility room for storage and preparation of clean and sterile consumables (this room may include the storage of medications.</li> <li>Equipment room for cleaning and decontaminating dialysis equipment.</li> </ul>	for staff.
NOTE: Infection control requirements are critical in the planning of a day procedure centre. The department recommends that all facilities be designed, constructed, furnished and equipped in keeping with the principles of infection control.		

## **Acute Services – Cardiac Catheter Laboratory**

Regulation	Mandatory Requirement	Other considerations
43. Suitability and cleanliness of facilities, equipment etc  The proprietor must ensure that facilities, equipment, furnishings and fittings are suitable for the kinds of health services being provided by the hospital or day procedure centre; and are kept in a clean and hygienic condition.	<ul> <li>There are access zones within the catheter laboratory (cath lab).</li> <li>There is adequate storage for non-sterile equipment, linen, and general equipment.</li> <li>The cath lab is adequately sized for the kinds of health services provided.</li> <li>There is a resuscitation trolley bay located in the recovery area.</li> <li>There is an emergency power supply in case of disruption to electricity supply.</li> <li>Staff are provided with change rooms and lockers to change into scrubs</li> <li>There is a scrub sink directly outside the cath lab.</li> <li>Piped medical gases and medical suction systems are installed in the cath lab and recovery areas.</li> </ul>	If a cath lab is planned refer to www.health.vic.gov.au/radiation for requirements.
Proprietors must develop and implement an Infection Control Management Plan which provides for the surveillance, prevention and control of infections including identifying and assessing all infection risks in the hospital or day procedure centre.  NOTE: Infection control requirements are critical in the planning of a hospital or day procedure centre. The department recommends that all facilities be designed, constructed, furnished and equipped in keeping with the principles of infection control.	<ul> <li>Sterile zones are not used as thoroughfares to other rooms in the facility.</li> <li>There are HEPA-filtration and air exchanges in the cath lab and sterile stock areas.</li> <li>There is adequate storage for sterile equipment, gowns and gloves and procured consumables.</li> <li>Bulkheads are installed on all joinery for example, above cupboards to prevent the accumulation of dust on horizontal surfaces.</li> <li>The doors to the sterile store are vented to prevent moisture build up.</li> <li>There are thermometers and humidity recorders in the sterile store room.</li> <li>There is adequate separation of dirty handling and clean handling.</li> </ul>	

## **Acute Services – Intensive Care**

Regulation	Mandatory Requirement	Other considerations
25 – Respect, dignity and privacy of patients	There is a room for distressed relatives.	Overnight accommodation for family members and visitors.
The proprietor must ensure that patients admitted to a private hospital or day procedure centre are given privacy, are treated with dignity and respect giving consideration to their religious beliefs, ethnic and cultural practices; and are not subjected to unusual routines when it comes to the provision of meals and personal hygiene practices		
28 - Needs of the patient are met	Each patient bed space contains the required individual medical services including monitoring, call systems and hand washing facilities.	Beverage bays provided to visitors within the Intensive Care Unit (ICU).
The proprietor must ensure that the needs of the patient are met promptly and efficiently by nursing and other health professional staff.	the Staff Station has direct visual contact with the patient care zone and if not, there is video monitoring of patients.	
43. Suitability and cleanliness of facilities, equipment etc	Monitoring equipment is well located for viewing.	Is there accommodation for medical staff.     Are there shower and change room facilities for medical staff/doctors.
The proprietor must ensure that facilities, equipment, furnishings and		Internal walls and doors glazed to maintain visual access from staff station.
fittings are suitable for the kinds of health services being provided by the hospital or day procedure centre; and are kept in a clean and hygienic condition.		Consider the use of design in reducing noise levels, such as using floor coverings that absorb sound, because of the number of alarms in the ICU environment.
45. Infection Control  Proprietors must develop and implement an Infection Control Management Plan which provides for the surveillance, prevention and control of infections including	<ul> <li>Type A hand basins are provided for use prior to procedures.</li> <li>There is extra storage for the added number of consumables in this area.</li> </ul>	Consider a Class N negative pressure room.

Regulation	Mandatory Requirement	Other considerations
identifying and assessing all infection risks in the hospital or day procedure centre.		
NOTE: Infection control requirements are critical in the planning of a hospital or day procedure centre. The department recommends that all facilities be designed, constructed, furnished and equipped in keeping with the principles of infection control.		

## **Acute Services – Emergency Department**

Regulation	Mandatory Requirement	Other considerations
25 – Respect, dignity and privacy of patients  The proprietor must ensure that patients admitted to a private hospital are given privacy, are treated with dignity and respect giving consideration to their religious beliefs, ethnic and cultural practises; and are not subjected to unusual routines when it comes to the provision of meals and personal hygiene practises	<ul> <li>There is a private / separate area for triaging patients.</li> <li>Transit routes to associated services for example; radiography and pathology do not cross clinical areas.</li> </ul>	
28 – Needs of the patient are met  The proprietor must ensure that the needs of the patient are met promptly and efficiently by nursing and other health professional staff	The resuscitation bay is located to allow ready access for emergency patients.	<ul> <li>The entry canopy is covered to provide adequate shelter.</li> <li>The entry canopy is large enough to allow vehicles such as taxis, buses, cars and emergency vehicles to manoeuvre.</li> <li>The entrance is accessible for all people including for example those with poor mobility and low sight.</li> </ul>
40. Communication  The proprietor must ensure there is an effective electronic communication system provided and kept operational enabling patients and staff to summon assistance and to enable calls from each bed, each recovery chair, each toilet, shower or bath (or other facility used for patient bathing) and any common room, recreational or rest area or other place where patient care is provided.		Consider duress alarm for reception area.
43. Suitability and cleanliness of facilities, equipment etc  The proprietor must ensure that facilities, equipment, furnishings and	<ul> <li>There are two separate entrances, one for ambulance and one for ambulant patients.</li> <li>The waiting room is sufficiently sized and fit for purpose.</li> <li>There is a resuscitation room which is sufficiently sized to allow 360 degree access to all parts of the patient for uninterrupted procedures,</li> </ul>	<ul> <li>Consider a Class N negative pressure room.</li> <li>Consider an isolation room with window for observation.</li> <li>Consider access to other areas such as pathology, radiography and pharmacy.</li> <li>Consider appropriate lighting in the ED department refer to</li> </ul>

Regulation	Mandatory Requirement	Other considerations
fittings are suitable for the kinds of health services being provided by the hospital; and are kept in a clean and hygienic condition.	<ul> <li>and circulation space for staff and equipment.</li> <li>There is a plaster room.</li> <li>Staff are provided with change rooms and lockers.</li> <li>There is adequate storage for non-sterile equipment, consumables and other equipment such as crutches.</li> </ul>	Australasian College for Emergency Medicine (ACEM) – Guidelines on Emergency Department Design.
45. Infection Control  Proprietors must develop and implement an Infection Control Management Plan which provides for the surveillance, prevention and control of infections including identifying and assessing all infection risks in the hospital.	<ul> <li>There is an airlock from external entry into the building.</li> <li>There is adequate storage for both sterile and non-sterile equipment, gowns and gloves, linen, and general equipment.</li> <li>Bulkheads are installed on all joinery for example, above cupboards to prevent the accumulation of dust on horizontal surfaces.</li> <li>Type A hand wash basins are available within each treatment area with hands-free activation.</li> </ul>	
NOTE: Infection control requirements are critical in the planning of a hospital. The department recommends that all facilities be designed, constructed, furnished and equipped in keeping with the principles of infection control.		

## **Acute Services – Obstetrics**

Regulation	Mandatory Requirement	Other considerations
25 – Respect, dignity and privacy of patients  The proprietor must ensure that patients admitted to a private hospital are given privacy, are treated with dignity and respect giving consideration to their religious beliefs, ethnic and cultural practices; and are not subjected to unusual routines when it comes to the provision of meals and personal hygiene practices	<ul> <li>Birthing suites have restricted access.</li> <li>There is a private room for expressing of breast milk / breast feeding for visiting mothers.</li> </ul>	
28 – Needs of the patient are met  The proprietor must ensure that the needs of the patient are met promptly and efficiently by nursing and other health professional staff	<ul> <li>If a lift is required to access the operating suite, is it a lockable lift to prevent delay to the operating suite.</li> <li>The Special Care Nursery (SCN) is of an appropriate size and with sufficient equipment to provide the service level as required.</li> <li>There is a (Neonatal Emergency Transfer Service) NETS resuscitation area for stabilisation of the neonate.</li> <li>Air and medical gasses are piped through the SCN.</li> <li>The SCN has appropriate security to prevent unauthorised access to infants.</li> <li>The obstetric unit is in close proximity to the operating suite.</li> </ul>	Consider an education room for mothers.  Please refer to the 'Neonatal services guidelines; Defining levels of care in Victorian hospitals' for levels 1, 2 and 3 of care in Neonatal services.  This document is provided as a link in Other References.
39 – Identification of rooms  The proprietor must ensure that each room in which beds or recovery chairs are provided for patients is clearly identified at the entrance to the room.	All cot bays are identified with a letter or number with appropriate signage.	
43. Suitability and cleanliness of facilities, equipment etc  The proprietor must ensure that facilities, equipment, furnishings and fittings are suitable for the kinds of health services being provided by the	<ul> <li>There is a formula room for the preparation, distribution and storage of baby feeds.</li> <li>The lighting in the nursery is colour corrected to neutral.</li> <li>There is adequate storage space for the specialised equipment required by SCN's.</li> </ul>	

Regulation	Mandatory Requirement	Other considerations
hospital; and are kept in a clean and hygienic condition.		
45. Infection Control  Proprietors must develop and implement an Infection Control Management Plan which provides for the surveillance, prevention and control of infections including identifying and assessing all infection risks in the hospital.	There is adequate storage for both sterile and non-sterile equipment, gowns and gloves and linen in the birthing rooms.	
NOTE: Infection control requirements are critical in the planning of a hospital. The department recommends that all facilities be designed, constructed, furnished and equipped in keeping with the principles of infection control.		

## Acute Services – Oncology/Chemotherapy (for administration of cytotoxic drugs in the ambulatory setting)

Regulation	Mandatory Requirement	Other considerations
25 – Respect, dignity and privacy of patients  The proprietor must ensure that patients admitted to a private hospital or day procedure centre are given privacy, are treated with dignity and respect giving consideration to their religious beliefs, ethnic and cultural practices; and are not subjected to unusual routines when it comes to the provision of meals and personal hygiene practices	<ul> <li>Chairs / bays are able to be screened off.</li> <li>Bays are large enough to accommodate a carer with each patient.</li> <li>There is a room for privacy for the purposes of counselling, interview and consultation.</li> </ul>	
28 – Needs of the patient are met  The proprietor must ensure that the needs of the patient are met promptly and efficiently by nursing and other health professional staff.		Consider distance from car park to reception to the treating area.
43. Suitability and cleanliness of facilities, equipment etc  The proprietor must ensure that facilities, equipment, furnishings and fittings are suitable for the kinds of health services being provided by the hospital or day procedure centre; and are kept in a clean and hygienic condition.	<ul> <li>There is a clean utility for the preparation of equipment for the administration of cytotoxics.</li> <li>Showers are provided in case of cytotoxic spill.</li> <li>A bay or room is provided for a screened bed.</li> </ul>	Consider the pathway for the delivery of cytotoxics and the frequency of the delivery of cytotoxics when considering the layout and size of the utility area.

## **Rehabilitation Services**

Regulation	Mandatory Requirement	Other considerations
25 – Respect, dignity and privacy of patients		Consider access for day patients to allied health area.
The proprietor must ensure that patients admitted to a private hospital or day procedure centre are given privacy, are treated with dignity and respect giving consideration to their religious beliefs, ethnic and cultural practices; and are not subjected to unusual routines when it comes to the provision of meals and personal hygiene practices		
40. Communication  The proprietor must ensure there is an effective electronic communication system provided and kept operational enabling patients and staff to summon assistance and to enable calls from each bed, each recovery chair, each toilet, shower or bath (or other facility used for patient bathing) and any common room, recreational or rest area or other place where patient care is provided.	<ul> <li>Call bells are provided in all areas where patients receive care, including allied health areas such as the gym, Activities for Daily Living (ADL), work areas, recreation areas and the pool.</li> <li>There is an emergency call system for code calls for nurses to initiate in an emergency.</li> </ul>	
43. Suitability and cleanliness of facilities, equipment etc  The proprietor must ensure that facilities, equipment, furnishings and fittings are suitable for the kinds of health services being provided by the hospital or day procedure centre; and are kept in a clean and hygienic condition.	<ul> <li>There are meeting rooms of sufficient size to allow case conferencing and family meetings.</li> <li>There is sufficient storage to provide for a range of equipment.</li> <li>There is a gym which is adequately sized for the number of patients</li> <li>The gym includes screened bays.</li> <li>Comply with AS 3979 when installing a hydrotherapy pool.</li> </ul>	Consider services provided and the support structures required such as an ADL kitchen, an ADL bathroom or a hydrotherapy pool.

Regulation	Mandatory Requirement	Other considerations
45. Infection Control  Proprietors must develop and implement an Infection Control Management Plan which provides for the surveillance, prevention and control of infections including identifying and assessing all infection risks in the hospital.	<ul> <li>There are sufficient hand wash basins close to treatment areas.</li> <li>Comply with AS 3979 when installing a hydrotherapy pool.</li> </ul>	
NOTE: Infection control requirements are critical in the planning of a hospital. The department recommends that all facilities be designed, constructed, furnished and equipped in keeping with the principles of infection control.		

## **Mental Health Facilities**

Regulation	Mandatory Requirement	Other considerations
25 – Respect, dignity and privacy of patients  The proprietor must ensure that patients admitted to a private hospital are given privacy, are treated with dignity and respect giving consideration to their religious beliefs, ethnic and cultural practises; and are not subjected to unusual routines when it comes to the provision of meals and personal hygiene practises	Acoustic treatment been applied to the following areas:     day areas such as patient, dining and activity areas     consulting rooms     admission areas	
28 – Needs of the patient are met  The proprietor must ensure that the needs of the patient are met promptly and efficiently by nursing and other health professional staff.	<ul> <li>The location and access to ambulance bays is adequate.</li> <li>If the facility has more than 1 floor or occupies a floor of a building above the ground floor, lifts are of a sufficient size that they can be accesses by an ambulance stretcher and/or a hospital bed with attachments.</li> <li>If ECT, patient recovery bays provide enough space to allow access for resuscitation equipment should an emergency occur.</li> </ul>	<ul> <li>Each accommodation zone requires its own recreation/activity area and outdoor area with weather protection.</li> <li>Unobtrusive security and access control that can accommodate patients of all levels of acuity.</li> </ul>
39 – Identification of rooms  The proprietor must ensure that each room in which beds or recovery chairs are provided for patients is clearly identified at the entrance to the room.	<ul> <li>All patient bedrooms, trolley bays and recovery chair bays are identified with a letter or number with appropriate signage.</li> <li>Room doors are clearly identified at their entrance by a letter or number.</li> </ul>	
40. Communication  The proprietor must ensure there is an effective electronic communication system provided and kept operational enabling patients and staff to summon assistance and to enable calls from each bed, each recovery chair, each toilet, shower or bath (or other facility used for patient bathing) and any common room, recreational or rest	<ul> <li>Call bells are present in all patient areas.</li> <li>There is an emergency call system for code calls for nurses to initiate in an emergency.</li> </ul>	

Regulation	Mandatory Requirement	Other considerations
area or other place where patient care is provided.		
41. Prevention of scalding  The proprietor must ensure that a system or mechanism is installed to control the outlet temperature of hot water to every bath, shower or hand basin used by patients which prevent scalding.	There is a system or mechanism installed to control the outlet temperature of hot water taps used by patients E.g. are taps for patient use fitted with thermostatic mixing valves (TMV).  NOTE: OH&S legislation mandates a maximum water temperature permissible in patient areas.	
42. Repair and cleanliness of premises  The proprietor must ensure the premises are kept in a clean and hygienic condition. The facility is to be kept in a proper state of repair and free of hazards or the accumulation of materials which may become offensive, injurious to health or could facilitate the outbreak of fire.	<ul> <li>There are adequate facilities and equipment for cleaners</li> <li>Linen bays are provided</li> <li>Bulkheads are installed on all joinery for example, above cupboards to prevent the accumulation of dust on horizontal surfaces.</li> </ul>	
43. Suitability and cleanliness of facilities, equipment etc  The proprietor must ensure that facilities, equipment, furnishings and fittings are suitable for the kinds of health services being provided by the hospital; and are kept in a clean and hygienic condition.	<ul> <li>The unit must not form a thoroughfare to any other unit of the facility.</li> <li>There is an assessment area close to the main entry or directly from the waiting area.</li> <li>Resuscitation trolley bays are provided on each floor.</li> <li>There are day rooms which provide for quiet activities separate from areas of noisy activities.</li> <li>There is an emergency power supply in case of disruption to electricity supply.</li> <li>All doors are wide enough to allow access for trolley transfer.</li> <li>The Drug Distribution Station (DDS) include extra provision for security against unauthorised access.</li> <li>The DDS is observable from the Nurses Station.</li> <li>The DDS has a viewing panel in the door.</li> <li>All Meeting, Counselling, Group Therapy and Family Therapy rooms have a duress alarm.</li> <li>Fixtures and fittings are suitable for a Mental Health Facility i.e. have a breaking strain of 15kg.</li> </ul>	<ul> <li>If providing the service of ECT - please contact the Chief Psychiatrist in the Department of Health.</li> <li>Do the bedroom doors allow for discrete observation of patients?</li> <li>The reception area should be safe for staff.</li> <li>Recreation rooms should be clearly observable by staff.</li> <li>All Meeting, Counselling, Group Therapy and Family Therapy rooms have two means of egress.</li> </ul>

Regulation	Mandatory Requirement	Other considerations
	<ul> <li>Tap ware manufactured as anti-ligature is installed in patient bathrooms.</li> <li>Bathroom/ensuite doors are able to be unlocked from the outside and have a privacy latch inside.</li> <li>All ensuite doors open outwards.</li> <li>Mirrors in ensuites should be made of 'safety glass' or polycarbonate.</li> <li>Fittings are to have a maximum breaking strain of 15kg.</li> <li>Light fittings, smoke detectors, thermal detectors and air-conditioning units must have a maximum breaking strain of 15kg.</li> <li>The ECT suite allows enough space for trolleys to be used to transport patients.</li> <li>The ECT suite treatment room has provision for a separate (lockable) area to store &amp; prepare medication and space for a resuscitation trolley.</li> <li>The ECT suite has piped oxygen and suction available in treatment and recovery rooms.</li> <li>Piped medical gases and suction systems are in the ECT suite and recovery room bays.</li> </ul>	
45. Infection Control  Proprietors must develop and implement an Infection Control Management Plan which provides for the surveillance, prevention and control of infections including identifying and assessing all infection risks in the hospital.  NOTE: Infection control requirements are critical in the planning of a hospital. The department recommends that all facilities be designed, constructed, furnished and equipped in keeping with the principles of infection control.	<ul> <li>There is adequate storage for sterile and non-sterile and therapeutic equipment.</li> <li>There is adequate space for sterilisation processes having regard to the type of facility.</li> <li>There is adequate separation of dirty handling and clean handling.</li> <li>There are adequate clinical hand basins provided for the facility.</li> </ul>	<ul> <li>There are adequate change, bathroom and safe storage facilities for staff.</li> <li>Consider how sterilised equipment will be managed.</li> </ul>

## Other references

- 1. Australian Standard Reprocessing of reusable medical devices in health service establishments AS/NZ 4187:2014 http://www.saiglobal.com
- 2. Australian College of Operating Room Nurses' (ACORN) Standards http://www.acorn.org.au
- 3. Maintenance Standards in critical areas for Victorian health facilities <a href="http://docs.health.vic.gov.au/docs/doc/Maintenance-standards-for-critical-areas-in-Victorian-health-facilities">http://docs.health.vic.gov.au/docs/doc/Maintenance-standards-for-critical-areas-in-Victorian-health-facilities</a>
- 4. Cleaning Standards for Victorian health facilities http://www.health.vic.gov.au/cleaningstandards
- 5. Australasian Health Facility Guidelines http://www.healthfacilityguidelines.com.au
- 6. Australasian College for Emergency Medicine (ACEM) Guidelines on Emergency Department Design http://www.acem.org.au
- 7. College of Intensive Care Medicine (CICM) http://www.cicm.org.au
- 8. Neonatal services guidelines; Defining levels of care in Victorian hospitals http://www.health.vic.gov.au/neonatal/servicesguidelines.htm
- 9. Infection Control in Endoscopy, 2nd Edition, Gastroenterological Society of Australia (GESA) http://www.gesa.org.au/professional.asp?cid=9&id=123

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