Alexandra Wysocki, NCIDQ, LEED AP BD+C, WELL AP, Senior Associate, Healthcare Planner, FCA, Winter Park, FL

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New Codes and Standards 2023 39th FPC Annual Seminar + Expo October 1-3, 2023

Exploration of Where Behavioral Health Intersects with Code Requirements in Healthcare Design

Course Number: AHCA 2023.07

Credit Designation: 1 LU/HSW

AIA CES Provider Number: E240



The seminar has teamed with a registered provider of AIA - approved continuing education under Provider Number E240. All registered AIA CES Providers must comply with the AIA Standards for Continuing Education Programs.

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OBJECTIVE

Understand differences in 2018-2022 Guideline Code changes for behavioral health – real world application and comparison

OBJECTIVE

Discuss challenges with reconfiguring existing or older buildings to become code compliant with regards to security and access.

3

Explore guideline and code required spaces vs. user preferred requirements, looking at how they do and do not align.

OBJECTIVE

Look at ways to create interiors and therapeutic behavioral health environments with products and finishes that comply with codes.

Introductions



Alexandra Wysocki, NCIDQ, LEED AP BD+C, WELL AP, Sr. Associate, Healthcare Planner, FCA, Winter Park, FL



Paul Degillio, Associate, Healthcare Senior Project Manager, FCA, Winter Park, FL

What is Behavioral Health?

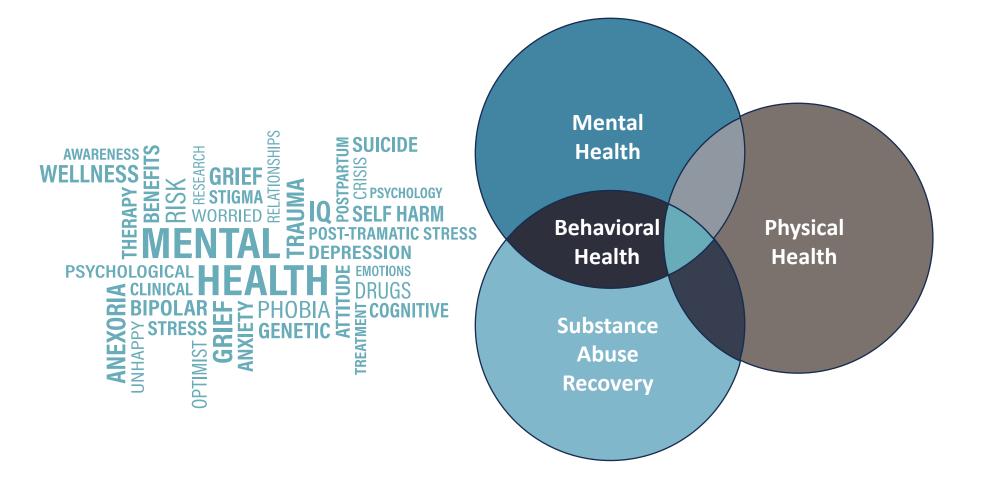
Behavioral health encompasses:

Mental Health

Depression
Bipolar Disorder
Phobias
Schizophrenia

Addiction

Substance Behavioral



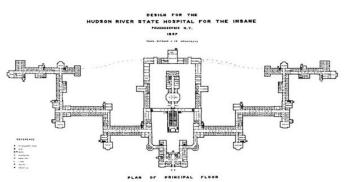
Behavioral Health – A Brief Timeline



1622U.S. PublicAlmshouses



1809 Dr Kirkbride



NJ Hor



New Jersey Home for Feeble Minded Women, Vineland, NJ, ca. 1905

1905 NJ Home for Feeble Minded Women

2000 Focus shifts to Aesthetics

1802 Dorothea Dix





1813 Friends Asylum



1960-70's Attitudes Change



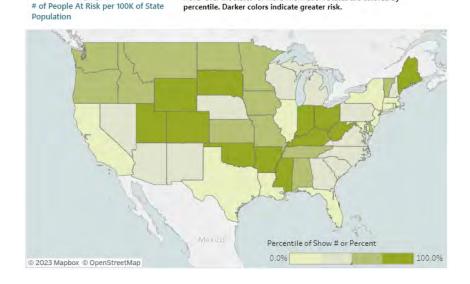


Behavioral Health Statistics

Fast Facts

- 1 in 5 U.S. adults experience mental illness each year
- 1 in 20 U.S. adults experience serious mental illness each year
- 1 in 6 U.S. youth aged 6-17 experience a mental health disorder each year
- 50% of all lifetime mental illness begins by age
 14, and 75% by age 24
- Suicide is the 2nd leading cause of death among people aged 10-14

Sources: "Mental Health by the Numbers." NAMI, www.nami.org/mhstats. Accessed 15 Sept. 2023.; "County and State Data Map: Defining Mental Health Across Communities." Mental Health America, mhanational.org/mhamapping/mha-state-county-data. Accessed 15 Sept. 2023.

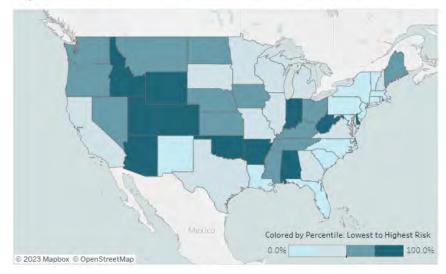




PTSD Map | State

Hover over the states for more information. **States are colored** by percentile. **Darker colors indicate greater risk.**

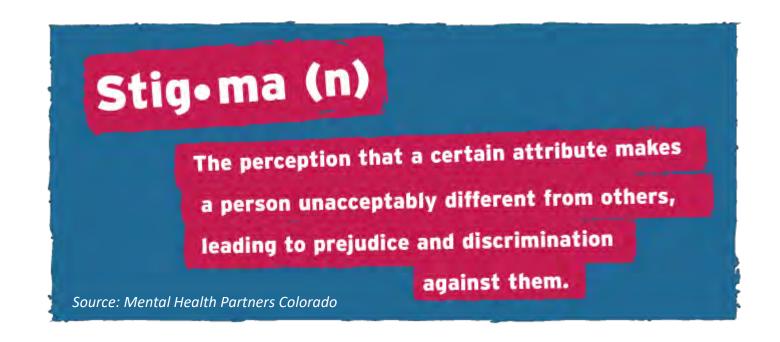
Hover over the states for more information. States are colored by





Approach

Acknowledge the Stigma Associated with Mental Health





Source: AADA.org



Approach

Focus is on patient experience and support of effective treatment management

Safety





Materials



Nora / Pie Contest

Access



Respite



Control



Connection





Type of Care

	13				
Inpatient	Outpatient	Other / Day Care			
M/S Care Unit	M/S Care Unit	Crisis Call Centers			
Behavioral & Mental Health Care Unit	Behavioral & Mental Health Care Unit	Mobile Crisis Intervention			
Emergency Department	Emergency Department	Trauma Informed Care			
Electric Conclusion Therapy (ECT)	Electric Conclusion Therapy (ECT)	Outpatient Drug & Alcohol			
Behavioral Health Crisis Unit	Behavioral Health Crisis Unit Crisis Response Center (CRC) Crisis Stabilization Unit (CSU)	Residential Treatment Facility (RTF)			
Transcranial Magnetic Stimulation (TMS)	Transcranial Magnetic Stimulation (TMS)	Forensic			
Geriatric Patient Care Unit	Geriatric Patient Care Unit	EmPATH Unit			
Intensive Outpatient (IOP) & Partial Hospitalization Program (PHP)	Intensive Outpatient (IOP) & Partial Hospitalization Program (PHP)				



2022 GUIDELINES FOR DESIGN & CONSTRUCTION OF HOSPITALS

SECTION

2.2-2.2.4.6- Medical Behavioral and Mental Health Room (Med/Surg)

2.2-2.13 Behavioral and Mental Health Patient Care Unit, 2.5-2.2.2 Patient Bedroom

2.2-2.13.4.1 (2.5-3.4.2) ECT

2.2-2.13.4.3 (2.1-2.4.3) Seclusion room

CHANGES

No Major Change

- ➤ Appendix changes for Space requirements. increase size as needed to accommodate larger beds.
- > Patient Toilet Room directly accessible to patient room
- ➤ Patient Toilet Room door shall not create a positive latching condition to create a ligature condition
- > SRA may replace toilet room door with other means of providing visual privacy
- > Shower in patient toilet room, to be free of shower curtains
- > Storage of personal effects provided in each patient bedroom > more general

No Major Change

Minor change in dimension from 11' to 12'





2022 GUIDELINES FOR DESIGN & CONSTRUCTION OF HOSPITALS

SECTION

2.2-3.1 Emergency Services 2.2-3.1.4.3 Rooms Serving behavioral and mental health patient

CHANGES

- ➤ Minor Secure Holding Room language changes 11′-12′ + view panel in wall adj to door or in door, glazing reqs
- Flexible Secure Treatment Room Added, meet secure holding room & single patient room reqs, handwash sinks, elec, med gases, and sim features permitted in the room where means of covering and securing them is provided, staff controlled., max wall length of 12'
- ➤ Behavioral and mental health treatment room, meet single-patient treatment room with reqs:
 - (a) All door hardware, sinks, finishes, light fixtures, sprinklers, and outlets shall be tamper- and ligature-resistant.
 - (b) Locks shall be provided on storage devices and cabinetry to prevent patient access.
 - (c) The room shall be provided with features to limit the patient's ability to convert architectural features or equipment into weapons, as follows:
- (i) Cabinetry, or other means, shall be provided in the room to enclose or store treatment equipment when this room is used for a behavioral and mental health patient.
- (ii) Rails, grab bars, closure devices, armatures, or similar devices shall be designed to prevent removal by providing tamper-resistant hardware and structural attachments to withstand forceable attempts at removal.
- > Seclusion Room added and must meet regs 2.1-2.4.3
- > Sexual Assault Forensic exam room added to section must meet req 2.1-3.2.4





2022 GUIDELINES FOR DESIGN & CONSTRUCTION OF HOSPITALS

SECTION

2.2-3.2 Behavioral Health Crisis Unit

CHANGES

- Readily accessible to ED, Reno permitted to be located elsewhere on hospital campus, separate building on campus it shall be permitted. Can have shared services if readily accessible to ED.
- Pare Care Stations: Exam/Treatment, Single Observation Room, Multiplepatient observation areas, quite room, secure holding room.
- Support Areas: Nurse Station, Meds Safety Zone, Outdoor area
- Other Support Aras: Intake Room or area, Consultation Room, Shower Room, Nourishment area, Clean Workroom or Clean Supply Room, Soiled Workroom or Holding, Equipment & Supply Storage, EVS, Staff Support Areas: staff toilet
- Support Areas for Families, Patients and/or visitors





2022 GUIDELINES FOR DESIGN & CONSTRUCTION OF HOSPITALS

SECTION

2.5-2.2-4.4 Quiet room

2.5-2.2.10.6 Outdoor Areas

2.5-2.5 Geriatric Patient Care Unit

2.5-3.4.1 Transcranial Magnetic Stimulation (TMS)

2.5-3.4.3 Intensive
Outpatient & Partial
Hospitalization Program
section

CHANGES

80 sf min. and appendix language modifications

Fences and Walls min ht and angle position, lighting Lumineers accessible to patients tamper resistant, security cameras views of entire area preclude view into indoor privacy-sensitive areas, duress system provided

Added section, patient toilet room considerations for assistance/mobility, bathing facility one bathtub minimum, doors openings, handrails, surfaces (flooring & base), wheelchair storage.

Added to guidelines

Added to guidelines.

IOP/PHP treatment Areas: Quiet Room, Group Therapy Room, Activity Room, Consultation Room, TMS Room

Support Areas (can Share): Nurse Station, Documentation Area, Meds Safety Zone, Nourishment area, Equipment & Supply Storage, EVS

Staff Support: Lounge, Toilet, Storage of belongings

Support Areas for Patients: Toilet Rooms & Storage for belongings





2022 GUIDELINES FOR DESIGN & CONSTRUCTION OF OUTPATIENT FACILITIES

SECTION

2.1-3.2.2.3 Sexual Assault Forensic Exam Room

2.8-3.5 Special Patient Care
Areas

CHANGES

Added to guidelines. Includes pelvic exam table/bed. Private toilet room with shower and storage space, lockable storage for forensic collection, a consult room readily accessible

- ➤ Secure Holding Room language changes 11′-12′, ceiling height language changes to recognize renovation, doors to swing out, view panel in wall adj to door or in door, glazing reqs, and ligature resistant patient toilet room immediately accessible
- Flexible Secure Treatment Room Added, meet secure holding room & single patient room reqs, handwash sinks could be located outside the room if adjacent. Handwash, elec, med gases, and sim features permitted in the room where means of covering and securing them is provided under staff control.









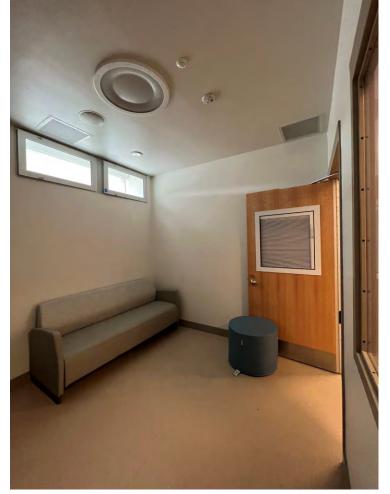
2022 GUIDELINES FOR DESIGN & CONSTRUCTION OF OUTPATIENT FACILITIES

SECTION

2.8-3.5.7 Behavioral Health Crisis Unit

CHANGES

- ➤ Readily accessible to FSED, Reno permitted to be located elsewhere on hospital campus, separate building on campus it shall be permitted. Can have shared services if readily accessible to FSED.
- ➤ Environment of Care: SRA, harm prevention considerations to architectural details and materials, hidden alcoves and blind corners avoided, visual observation electronic surveillance permitted.
- Security: perimeter security considerations, prevention of elopement, monitoring and controlling visitor access and egress, use of security cameras.
- ➤ Pare Care Areas: Exam/Treatment, Single Observation Room, Multiple-patient observation area, patient toilet room, shower room, quite room, secure holding room.
- > Support Areas: Nurse Station, Meds Safety Zone, Outdoor area
- Other Support Aras: Intake Room or area, Consultation Room, Nourishment area, Clean Workroom or Clean Supply Room, Soiled Workroom or Holding, Equipment & Supply Storage, EVS
- > Staff Support Areas: staff toilet
- Support Areas for Families, Patients and/or visitors: waiting and/or lounge





2022 GUIDELINES FOR DESIGN & CONSTRUCTION OF OUTPATIENT FACILITIES

SECTION

2.11-3.2.9.1 Transcranial magnetic stimulation room

2.11-3.2.9.2
Electroconvulsive therapy facilities

2.11-3.3 Intensive
Outpatient & Partial
Hospitalization Program
(IOP/PHP) Facilities

2.11-6.2.1 Entrances

2.11-6.2.1 Waiting Area

CHANGES

Added to guidelines. 80 sf min., documentation area, and handwashing station

Language edits and adds can be in a MOB or Outpatient surgery facility where procedure room & operating room requirements are met.

Added to guidelines.

- ➤ IOP/PHP treatment Areas: Quiet Room, Group Therapy Room, Activity Room, Counseling or Consultation Room, TMS room.
- Support Areas (can be share): Nurse Station, Documentation Area, Meds Safety Zone, Nourishment area, Equipment & Supply Storage, EVS
- > Staff Support (can be shared): Lounge, Toilet, Storage of belongings
- > Support Areas for Patients: Toilet Rooms & Storage for belongings
- > Secured entrances when stand-alone facility
- ➤ Reception/information counter, desk, or kiosk located to provide staff with visual observation of entrance and be immediately visible from entrance.
- > Direct visual control of reception.
- > Separate, access-controlled waiting area for pediatrics





Case Study Differences between 2018 and 2022







- 2018 Observation & ED references vs 2022 BH Crisis Unit
- Preliminary reviews with AHJ to discuss operational intent
- Submitted multiple waiver/ variance requests
- Renovation in a multi-tenant building







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FCA

Building Considerations

Reconfiguring existing or older buildings for code compliance



Reuse Assessment



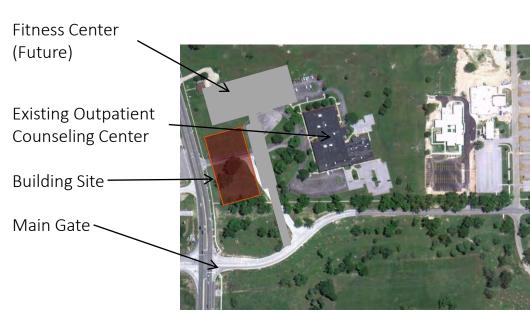
Dayroom



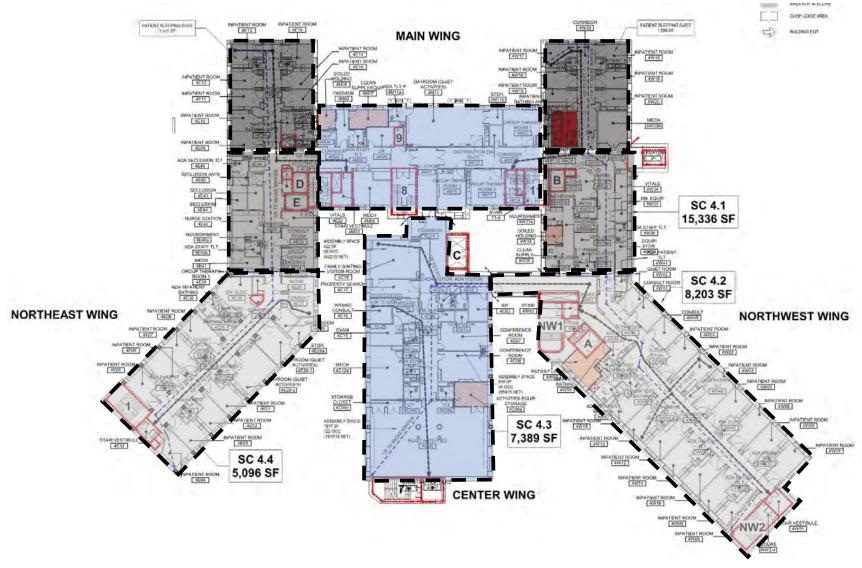
- Site or Building Location
- Identify the need

Waiting Room

- Location/building already defined and/or provided
- Early feasibility and test fits
- Building and MEP Assessment



Use & Classification



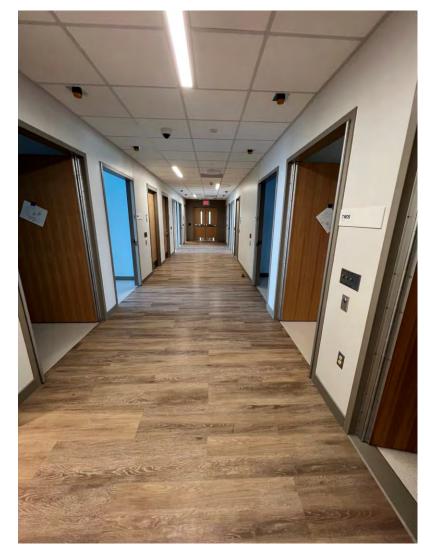
- Evaluate the building Use and Classification
- Understand building use or classification and required infrastructure upgrades
- Department or Unit zoning and separation
- Room Layout
- Modernization efforts

Safety Risk Assessment (SRA)





Life Safety



















- Corridors and Circulation
- Door Hardware
- Safety & Security
- Anti-ligature fixtures
- Tamperproof
- Shatterproof
- Water & Electrical Shutoffs
- Avoid sharp corners or elements, or could easily be removed

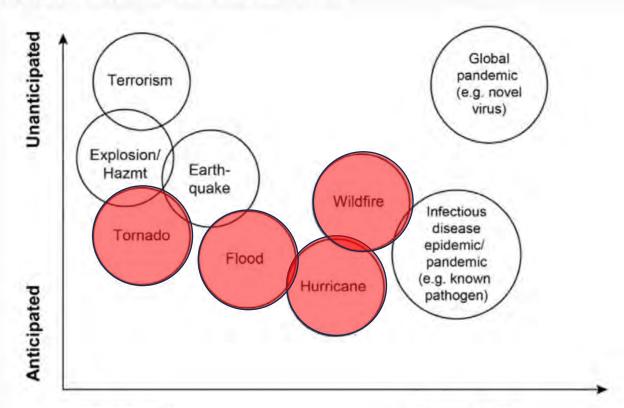






Resiliency

Figure 1-1: Examples of Hazard Anticipation and Effect



"Big Bang"

Develops quickly, with immediate effects, limiting time available to consider options. Specific regions may be more likely to anticipate a big bang event (e.g., tornado, earthquake).

"Rising Tide"

Emergency condition or incident that develops over a period of days, weeks, months. Impact may not be recognized early on.

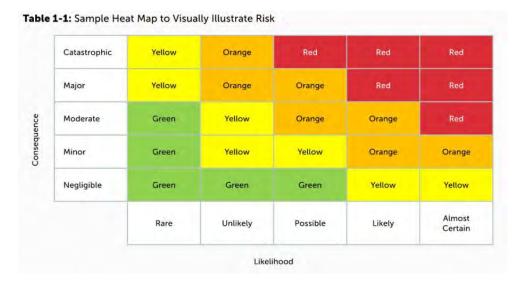


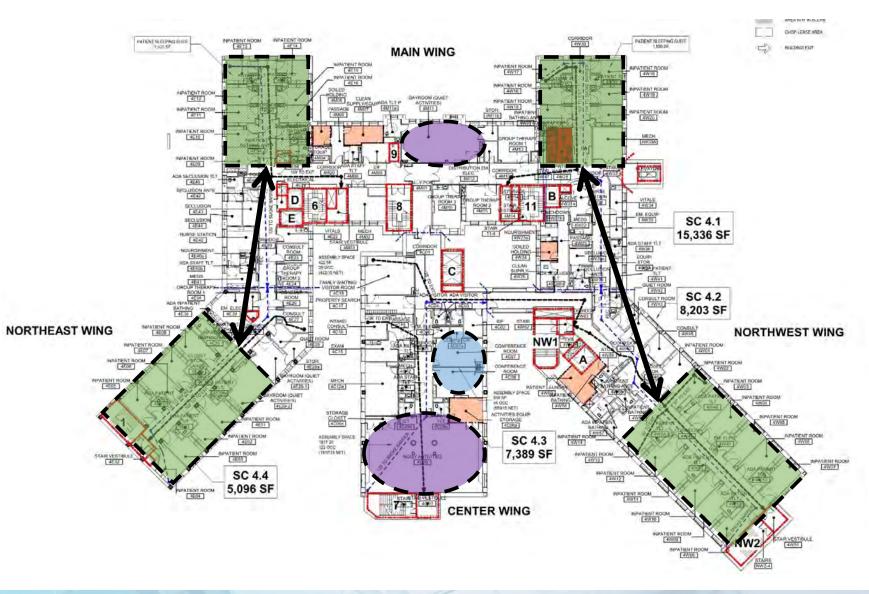
Figure 1-4: Sample HVA Tab that Calculates Risk Based on Probability, Severity, and Mitigation of Risks

nergency Management											
Hazards - Enter name of hospital Hazard Vulnerability Assessment Tool Emergent Occurring Events											
Event	PROBABILITY Likelihood this will occur			SEVERITY = (MAGNITUDE - MITGATION)							
				HUMAN PROPERTY IMPACT IMPACT Possibility of Physical dealth or losses and injury damages	BUSINESS	PREPARED- NESS	INTERNAL RESPONSE	EXTERNAL RESPONSE	RISK		
					losses and	Interuption of services	Preplanning	Time, effectiveness, resources	Community staff and supplies	*Relative threa	
SCORE	0 = N/A 1 = Low 2 = Moderate 3 = High	Number of Alerts	Number of Activations	0 = N/A 1 = Low 2 = Moderate 3 = High	0 = N/A 1 = Low 2 = Moderate 3 = High	0 = N/A 1 = Low 2 = Moderate 3 = High	0 = N/A 1 = High 2 = Moderate 3 = Low	0 = N/A 1 = High 2 = Moderate 3 = Low	0 = N/A 1 =High 2 = Moderate 3 = Low	0 - 100%	
Active Shooter	2	1	0	3	1	3	2	2	2	36%	
Acts of Intent	1	0	0	3	3	3	2	2	2	17%	
Bomb Threat	2	0	0	3	3	3	2	2	2	33%	
Building Move	2	0	0	1	2	1	2	2	2	22%	
Chemical Exposure, External	1	0	0	2	2	1	2	2	2	12%	
Civil Unrest	2	0	0	2	2	2	2	2	2	27%	
Communication / TelephonyFailure	3	0	0	1	1	2	2	2	2	33%	
Dam Failure	0	0	0	2	3	2	3	3	3	0%	
Drought	2	0	0	1	1	1	2	2	2	20%	
Earthquake	3	10	6	3	3	3	4	1	1	60%	
Epidemic	3	0	0	3	1	2	2	2	2	40%	
Evacuation	2	12	8 2	- 1	1	2	2	2	2	49%	
Explosion	2	2	2	2	3	2	2	2	2	48%	

FGI Guidance for Design Health & Residential Care Facilities that Respond & Adapt to Emergency Conditions



Resiliency



- DEVA & HVA
- Multiple Care Units
- Shifting Care Locations
- Smoke Compartments
- Large Open Spaces allow for temporary conversion & use
- Food & Water Storage
- Supply Storage
- Secure Outdoor space
- Building Construction

Evacuation Plan

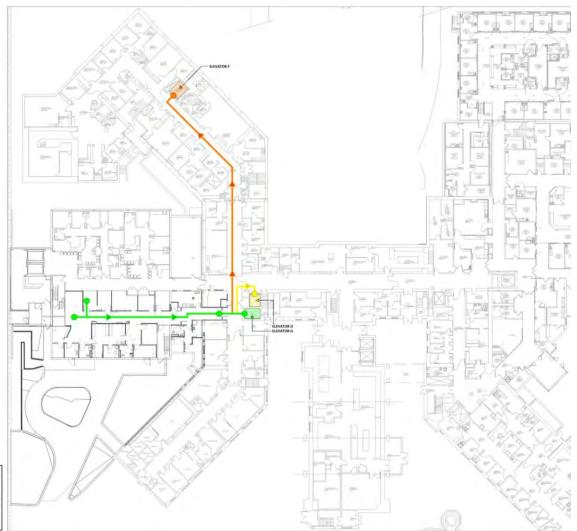
Local Of Fire Please Use Stairs.

Do Not Use Elevator!



Shared Use

- Consideration of Other Tenants
- Discretion
- Vertical Transportation
- Security
- Arrival & Egress
- Transport Services







CRC PATIENT TRANSPORT - TO IP
PSYCH/DETOX - 2SE

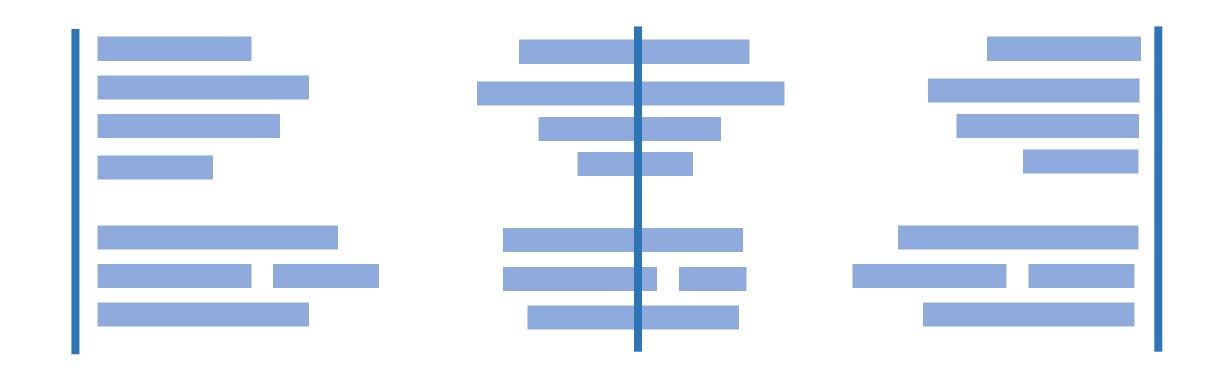
DIAN P. VELLOW

PLAN B - YELLOW



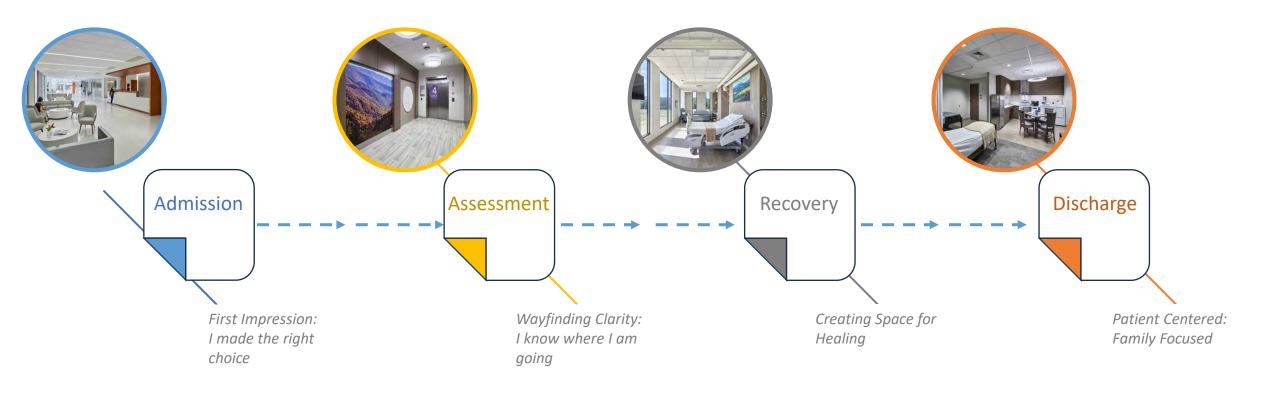
Code Required vs. User Preferred

Creating Alignment





Operational Models – Mapping Process





Operational Models - Mapping Process

Scenario Planning

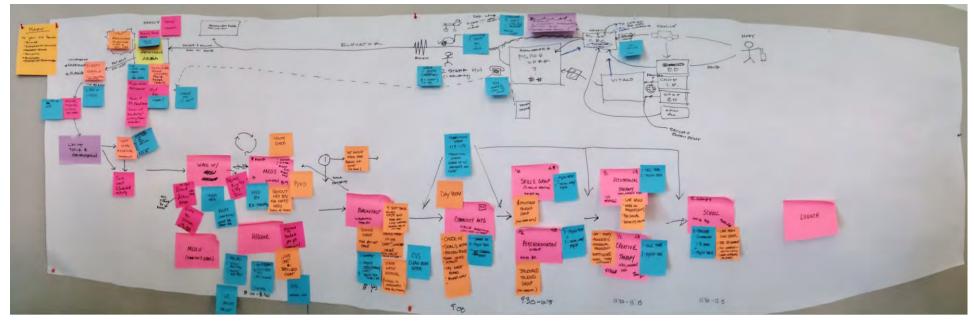
- Example Patient
- Rules
- Incidents
- Parking Lot
- Clarification List





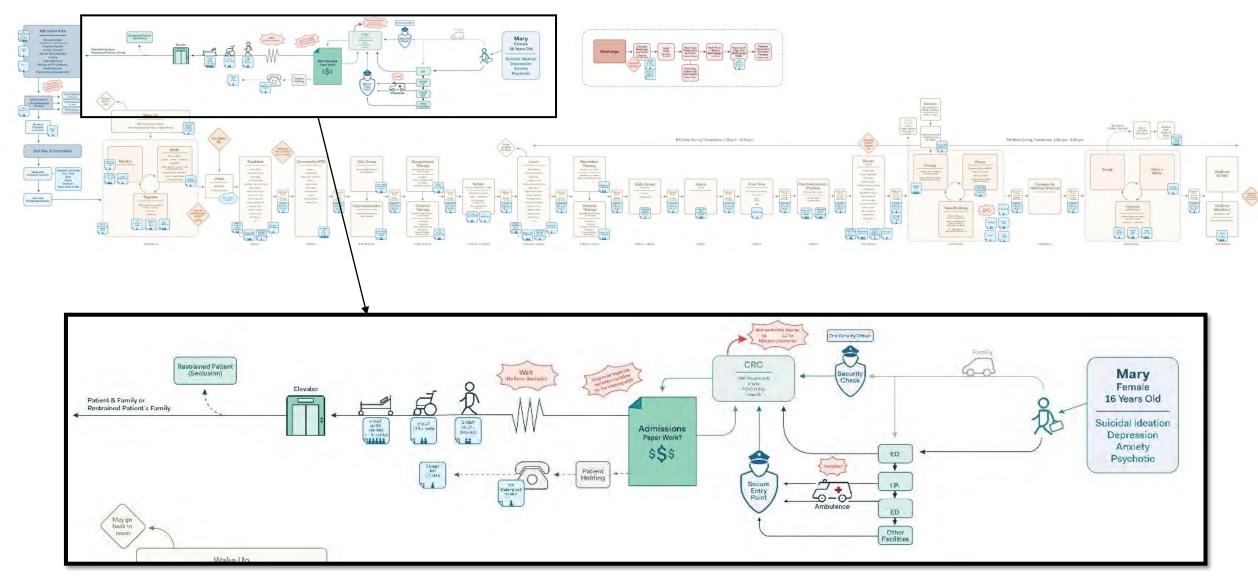
Mary

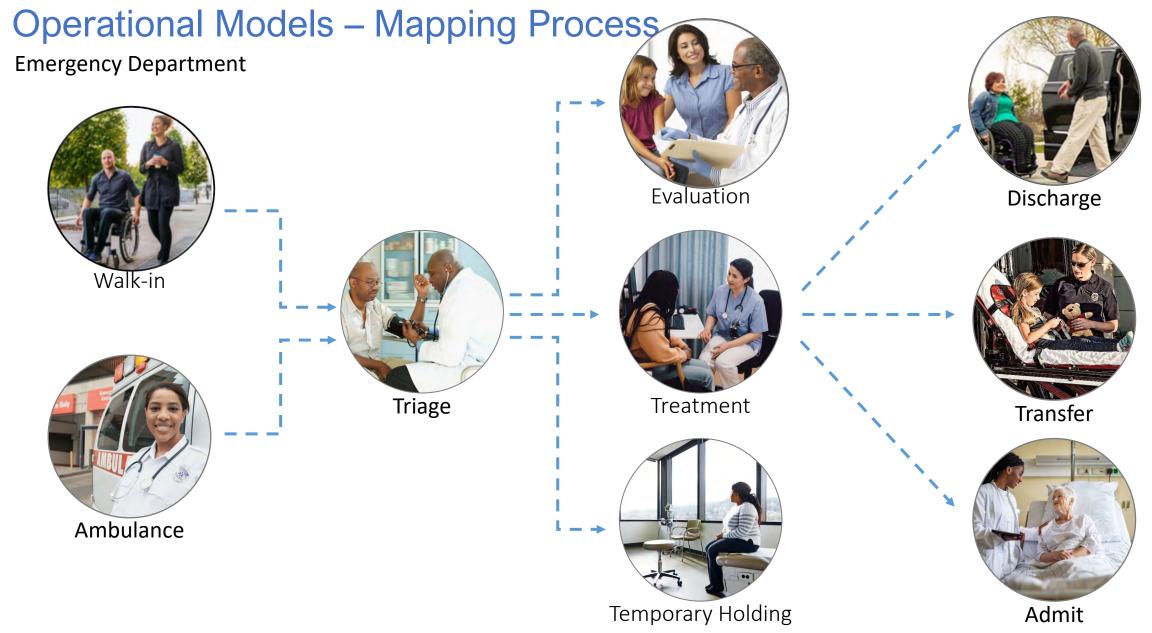
- 16-year-old female
- Suicide
- Depression/Anxiety
- Psychotic





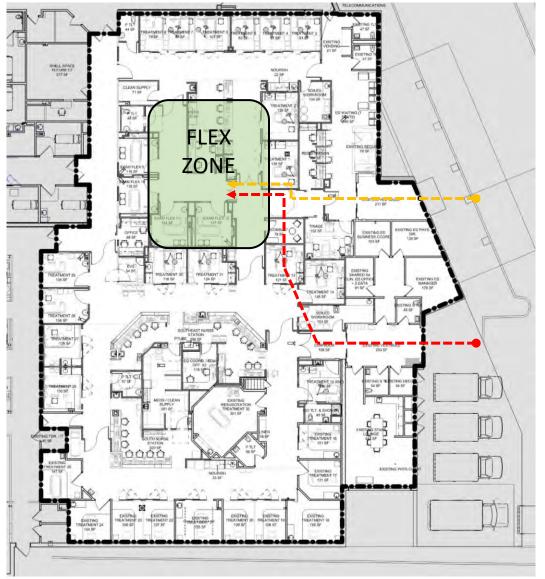
Operational Models – Mapping Process

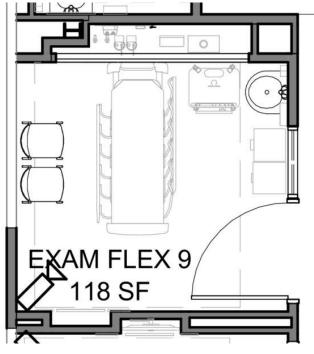






Operational Models – Emergency Department Case Study







Design Considerations

- 2018 FGI
- Acute Care, higher geriatric population
- Flex Secure Rooms
- ED zoning, separation/isolation of areas
- Pandemic Response



Licensing

- AHJ
- DOH
- Office of Mental Health Addiction Services
- AHCA
- JACO



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FCA

Creating Therapeutic Interiors

Principles of Design

Biophilia



Sense of Place



User Control



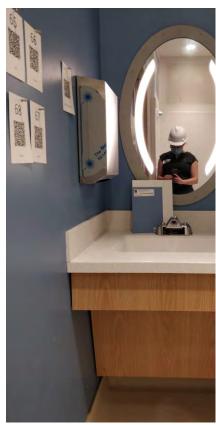
Product Guidelines



Materiality



Mockups







Nature of the Space (size constraints, heights, circulation)

Refuge & Prospect Mystery & Discovery Risk & Excitement

Nature Analogues (imagery or symbols associated with nature)

Biomorphic Forms & Patterns Material Connection to Nature Complexity & Order

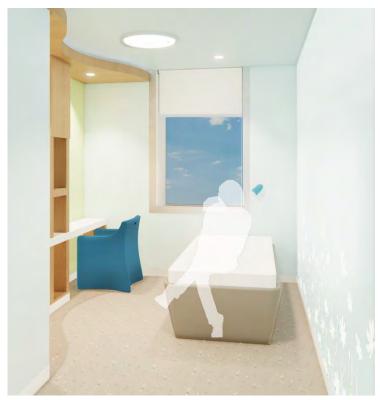
Nature in the Space (design that implies natural elements)

Visual & Non-Visual Connection Non-Rhythmic Sensory Stimuli Access to Thermal & Airflow Variability Prescence of water Dynamic & Diffused Light Connection with Natural Systems

Biophilia-Application Case Study







Patient Room View Upon Entry



New Age Oak Phenolic Panel



Morning Ice S.S.



Diamond Blue



Patient Room Millwork

Graphic Wall

Patient Room

Lettuce Alone



Pie Contest



Summer Camp



Ceiling Design

Sense of Place















Product Guidelines

April 2017

Edition 7.2



Design Guide for the Built Environment of Behavioral Health Facilities

James M. Hunt, AIA, NCARB
David M. Sine, DrBE, CSP, ARM, CPHRM

Includes a
Patient Safety Risk Assessment Tool

The Facility Guidelines Institute



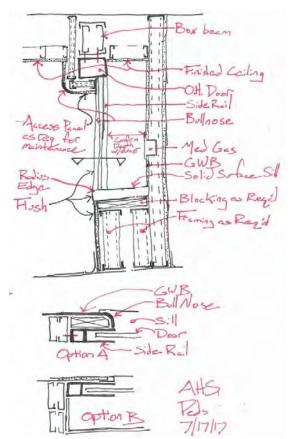














Materiality













Mockups









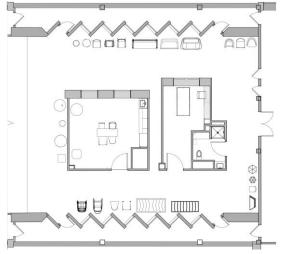


- Nurse Stations
- Patient Bathrooms
- Patient Rooms
- Patient Interaction Areas
- Product Testing
- Materials Testing
- Constructability & Details
- Perform Early in Design Process



Mockups

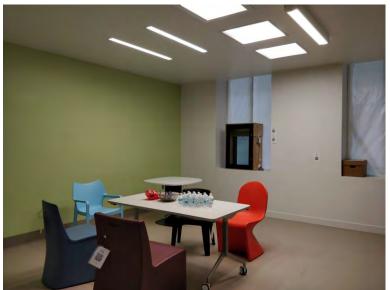


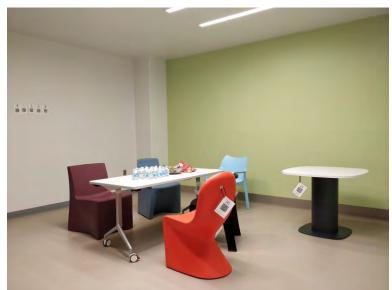




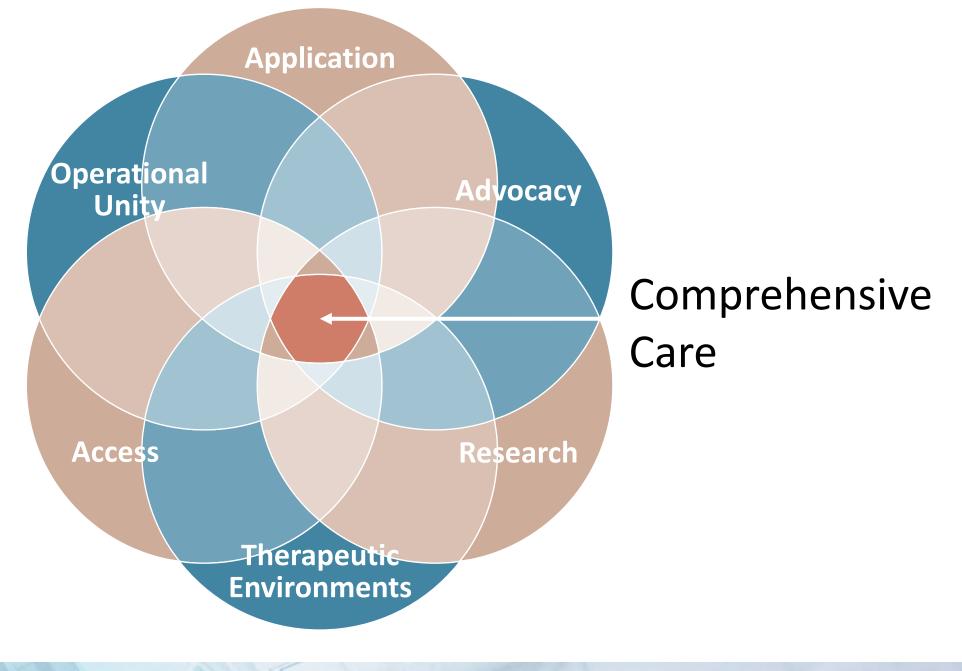












Final Q&A

Thank you for your attention!

